THE ROLE OF DIFFERENT KEY ACTORS IN APPLYING HiAP APPROACH FOR HEALTH AND DEVELOPMENT

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DEFINITION OF HIAP AND WHEN TO USE A HIAP APPROACH

Health in All Policies is an approach to public policies across sectors that systematically takes into account

- ❖ the health implications of decisions,

- ❖ seeks synergies and

- ❖ avoids harmful health impacts in order to improve population health and health equity.

- ❖ It improves accountability of policy-makers for health impacts at all levels of policy-making.

- ❖ It includes an emphasis on the consequences of public policies on health systems, determinants of health and well-being.1

HISTORICAL DEVELOPMENT LEADING TO HIAP APPROACH

- It originates from the ideas, actions and evidence that have emerged since the Alma-Ata Declaration on Primary Health Care (1978) and the Ottawa Charter for Health Promotion (1986).

- Reinforced in the more recent 2011 Rio Political Declaration on Social Determinants of Health and the UN General Assembly Resolution on the Prevention and Control of Non-Communicable Diseases.

WHY HIAP MATTERS?

- **Health and health equity are values in their own right, and are also important prerequisites for achieving many other societal goals.**

- **Many of the determinants of health and health inequities in populations have social, environmental and economic origins that extend beyond the direct influence of the health sector and health policies.**

- **Public policies and decisions made in all sectors and at different levels of governance can have a significant impact on population health and health equity.**

WHY HIAP MATTERS?- CONT.

- **The HiAP approach is necessary to protect and promote health and health equity, particularly where there are competing interests. It ensures that health and health equity considerations become part of decision-making.**

- **HiAP recognizes that governments are faced with a range of priorities and that health and equity may not automatically gain precedence over other policy objectives.**

- **Nonetheless, health considerations do need to be taken into account in policy-making. Efforts must be made to capitalize on opportunities for co-benefits across sectors and for society at large.**

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THERE ARE THREE GENERAL POLICY SITUATIONS THAT FAVOUR A HIAP APPROACH

1. Complex health challenges

- Challenges that require inter-sectoral policy solutions
- Examples include
  - responding to NCDs,
  - antimicrobial resistance or
  - health risks associated with climate change

2. External policies with high impact on health

- concerns policy proposals originating from non-health sectors that could have a significant impact on health or health equity
- This policy situation can equally apply to international declarations or agreements such as free trade agreements and environmental protection laws.

3. Government priority affecting many sectors

- This policy situation can arise when the government has a high priority goal that both requires inter-sectoral collaboration and affects the health sector.

- Health sector has a valuable opportunity to promote and facilitate inter-sectoral action to achieve an important government objective at the same time as advancing health's own agenda

- Examples of this third scenario might include:
  - improving early childhood development or
  - responding to food insecurity.

IDENTIFICATION OF THE UNDERLYING ISSUES OF HEALTH AND ITS STAKEHOLDERS

- **From the case study and your knowledge of the HIAP approach, identify the underlying issues and the different stakeholders that have an impact on policy making, affecting the population health.**

SHARING PERSONAL EXPERIENCES

❖ **The peasants who don't respect themselves don't respect them!!!**

❖ **The Nasserist compromise**

❖ **The Hagana experience (youth – major health problem is drug addiction!! Why: because of unemployment**

❖ **The Women back ach**

❖ **People living under high voltage in squatter areas**

❖ **Privatization and deregulation from the mid seventies (and inequities to availability and accessibility to quality health services)**

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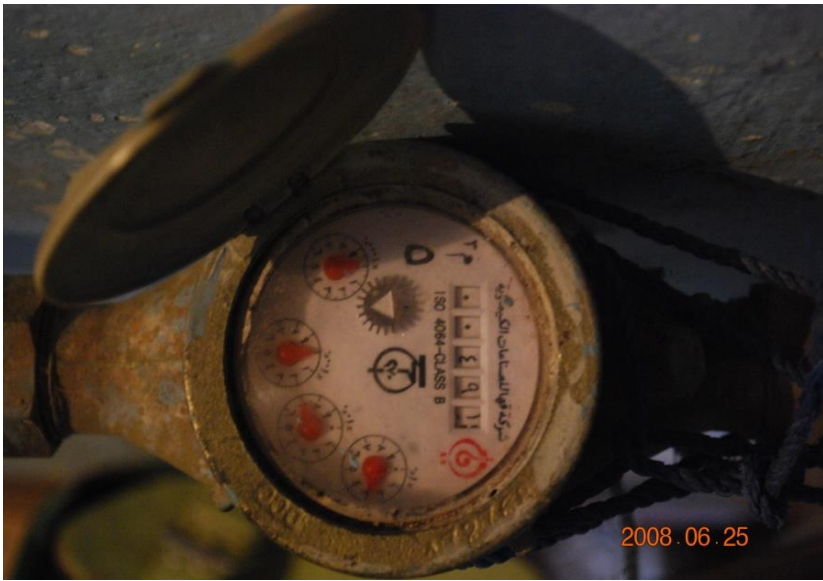# Ezbet ElHagana   عزبة الهجانة الكيلو 4.5
Kilo 4.5

Fringes of Hujana, showing high rise apt

Houses within Hujana, third area Shukrallah 08

SOME MAJOR DETERMINANTS IDENTIFIED BY THE FGDS IN HAGANA

- **Scarcity and poor conditions of essential services such as clean water, sewage, high voltage , non-availability and access to quality health services, garbage and its burning (the problem is not garbage)**

- **We are living in a cabage**

- **Bad housing conditions**

- **Unemployment as a major cause for depression and violence**

- **Poor education**

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تابع المحددات الاجتماعية الهامة التي تم تحديدها:

- **Mixed feeling towards the role of security**

- **The problem of High voltage**

- **Social exclusion, racism against Sudanese population**

PRIORITY HEALTH PROBLEM ACCORDING TO FGDS IN HAGANA

- **Egyptian youth (males), focused on accidents and injuries due to fires and violence, drug addiction, psychological problems, particularly depression and loin pains.**

- **Egyptian youth (females) focused on back pains due to water carrying and headaches (many complained from domestic violence but refused that they would be quote saying it)**

- **Sudanese refugees (adult males), focused on depression due to their desperate conditions, accidents and violence. Particular concern was to their inability to afford or access health services upon need.**

- **Sudanese refugees (females) focused on: pediatrics diseases (diarrhea, worm infestations), gynecological problems (bleeding), and respiratory problems.**

RELATIONSHIP OF USERS TO HEALTH SERVICES PROVIDERS

Once, an accident took place in front of the electricity hospital nearby, people were bleeding, and security wouldn't let them in unless somebody pays a big deposit, a woman came and paid. If she didn't, they would have died from bleeding.
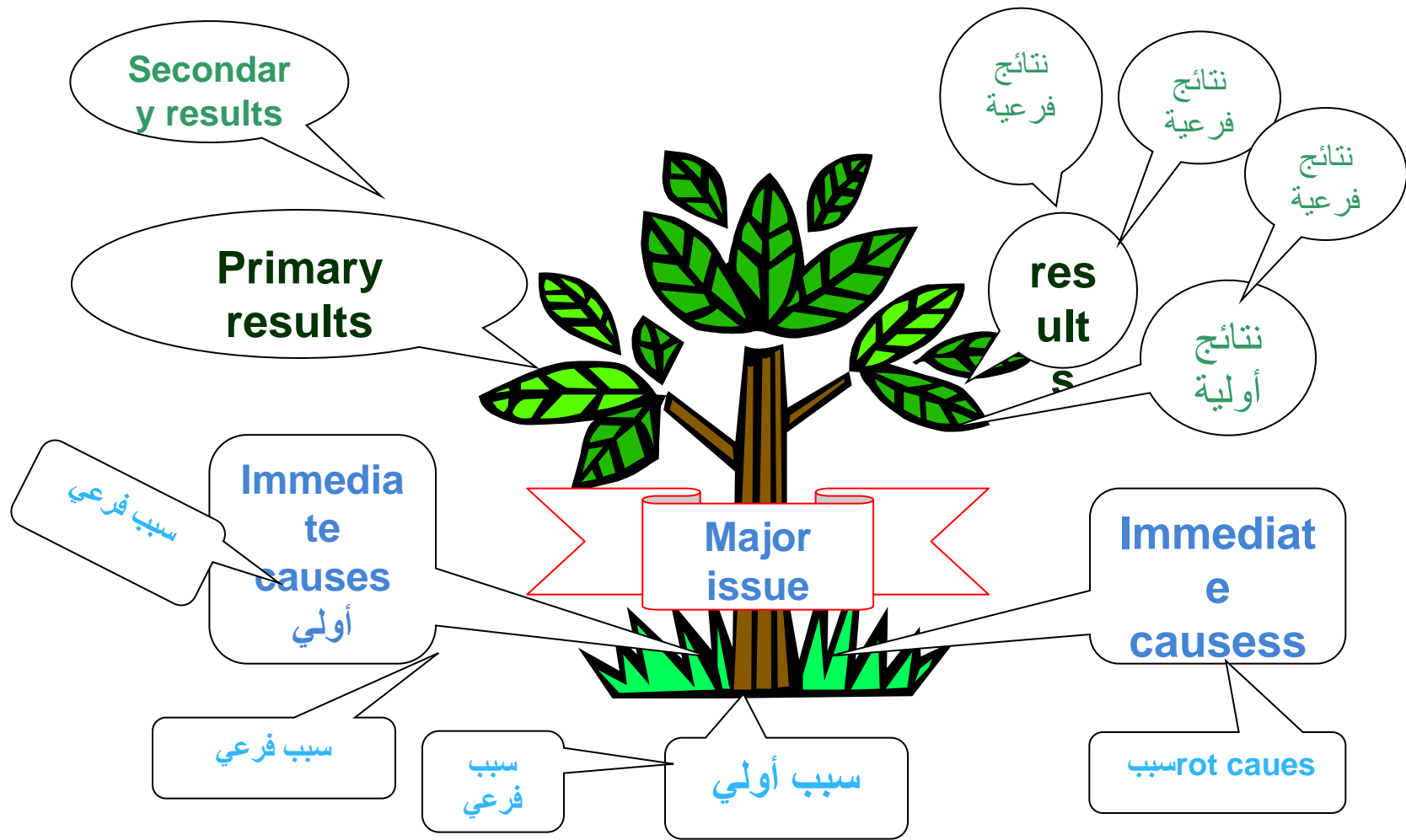
A Young woman from FGD, Nov, 08

وحاجات كتير بتموت في ليل الشتاه لكن حاجات
اكتر بترفض تموت... عجبي!!!!
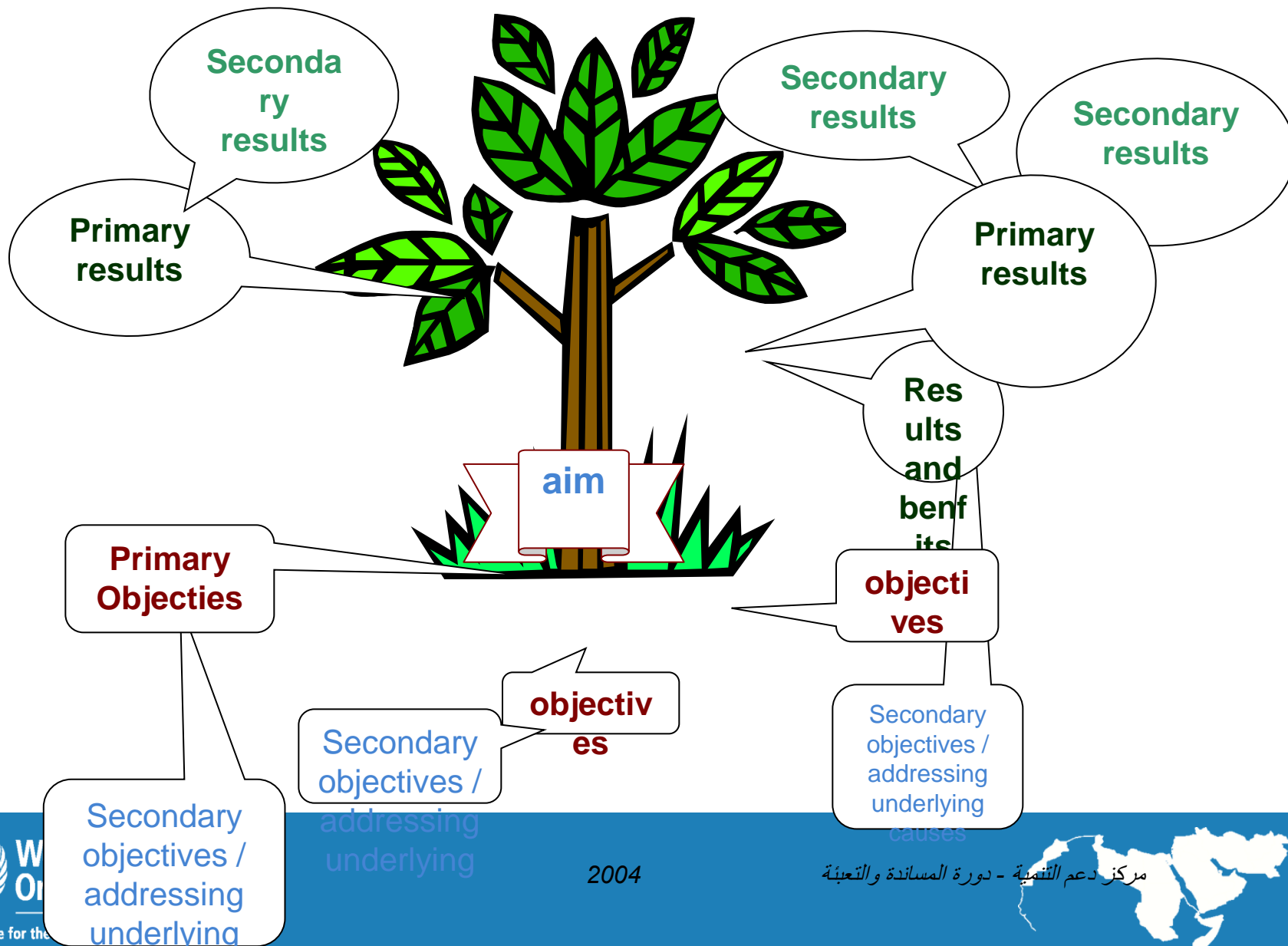**Many things die in the winter evening, but many other refuse to die..**

ISSUES ANALYSIS-PROBLEM TREE

IDETIFYING OBJECTIVES TREE

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STAKE HOLDERS

- **Whole of Government**

- **Whole of society**

- **Ministry of health**

THE ROLE OF GOVERNMENT IN HiAP/ WHOLE-OF-GOVERNMENT APPROACHES

Learning objectives

- role of government in the HiAP approach
- range of terms that refer to inter-sectoral action
- barriers to closer inter-sectoral collaboration
- conditions conducive to the HiAP approach
- List and appraise different structures and mechanisms for inter-sectoral action
- Discuss examples of HiAP in practice

PRINCIPLES BEHIND THE ROLE OF GOVERNMENT IN HIAP

- Health is a state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity;

- Health is an individual right and a social justice issue;

- Health is a public good; and

- Governments have a responsibility for the health of their peoples.

SOME IMPORTANT ROLES OF WHOLE GOVERNMENT IN HIAP

● **Governments are responsible for the health of their peoples /a critical leadership and stewardship role in the organized effort by society to promote health and well-being**

- Commissioning research;
- Engaging stakeholders within and beyond government;
- Formulating and implementing intersectoral policies; and
- Evaluating their impact.

INTER-SECTORAL ACTION (ENGAGING DIFFERENT STAKEHOLDERS WITHIN GOVERNMENT

- **refers to the coordinated efforts of two or more sectors within government to improve health outcomes**

- **The term inter-government is sometimes used to refer to these horizontal and vertical linkages between levels of government within a country**

- **Whole-of-government, joined-up government, and healthy public policies are similar terms used in the HiAP literature.**

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A WHOLE-OF-SOCIETY APPROACH

- In contrast, refers to coordinated efforts to improve health by multiple stakeholders within and outside government

QUESTIONS

- **What in your opinion are the conditions that hinder or favor inter-sectoral collaboration?**

- **What are the common structure for governmental interpectoral collaboration?**

BARRIERS TO SUCCESSFUL INTER-SECTORAL COLLABORATION WITHIN GOVERNMENT

- **Distracted or unstable leadership;**

- **Fragmented government functions;**

- **Sub-national geographical and government jurisdiction divisions;**

- **Limited or misused resources (staff, funding, etc.); and**

- **Restricted policy space.**

THE CONDITIONS THAT MOST FAVOR EFFECTIVE INTER--SECTORAL COLLABORATION INCLUDE (1)

- **Government supports** inter-sectoral action;

- Sectors have **shared interests** or both benefit from cooperation;

- Issue has high **political importance**

- Proposed policy has **public support**;

- Strong, effective leaders in the bureaucracy (**policy champions/entrepreneurs**);

CONDITIONS THAT MOST FAVOUR (2)

- Inter-sectoral action is **well-planned with clear objectives, roles and responsibilities;**

- **Laws exists** or are planned to support the proposed policy;

- **Sufficient resources** are available; and

- There are **plans to monitor and sustain outcomes.**

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SOME OF THE MOST COMMON STRUCTURES AND MECHANISMS FOR INTER-SECTORAL ACTION INCLUDE

- › **Cabinet committees** and secretariats;

- › **Parliamentary** committees;

- › **Interdepartmental committees** and units;

- › **Mega-ministries and merges**;

- › **Joint budgeting**; and

- › Inter-sectoral **policy-making procedures**.

CONDITIONS THAT PROMOTE OR HINDER INTERSECTORAL COLLABORATION

- **What in your opinion are examples of conditions that promote or hinder inter-sectoral collaboration within governmental bodies? (Give examples)**

DIFFERENT TRENDS AFFECTING THE ROLE OF GOVT

- **Trends with negative impact on health of the population and health equity**

Since the 1970s, a shift in the discourse of public policy and governance, minimizing the responsibility of government for the health of its people

- ideological shift, towards neoliberalism, greater deregulation and privatization in the health sector
- limiting interventions of government in the economy and spending on social welfare permitted inequalities to increase

INCREASING ROLE OF SOCIAL MOVEMENTS

- At the same time, social movements in many countries have called for **greater participation, transparency and accountability** in policy decision-making and

- the number of health actors has increased, especially at the international level.

- As a consequence, health is an increasingly contested and congested policy space.

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WHOLE SOCIETY APPROACH - ROLE OF "EXTERNAL" STAKEHOLDERS (NON-GOVERNMENTAL BODIES)

- **Learning objectives**
  - Define a stakeholder and provide examples
  - Explain the benefits and challenges of non-government stakeholder engagement
  - List principles for effective and accountable stakeholder consultation
  - Identify formal and informal mechanisms for non-government stakeholder involvement in HiAP
  - Recognize strategies used by actors to counteract efforts to improve health and inequity
  - Prepare a stakeholder analysis

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WHAT IS A STAKE HOLDER?

- A stakeholder is a person, or group of persons, who have an interest or concern in a particular process or issue due to direct or indirect involvement.

- Examples include government ministries, politicians, media, non-government organizations, religious organizations, research institutes, labor unions, professional associations and businesses.

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BENEFITS AND COSTS OF WIDELY CONSULTING STAKEHOLDERS

- **Some of the benefits of stakeholder engagement include:**
  - Assessing support and opposition to a policy;
  - Giving government activities visibility and legitimacy;
  - Empowering the marginalized;
  - Increasing collaboration and more efficient use of resources; and
  - Ensuring the sustainability of interventions

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SOME OF THE CHALLENGES OR RISKS OF WIDE STAKEHOLDER CONSULTATION INCLUDE:

- **Prolonging policy-making;**

- **Increasing costs of intervention;**

- **Polarizing interest groups; and**

- **Creating unmanageable expectations**

- **It can be just token engagement**

SOME PRINCIPLES FOR EFFECTIVE STAKEHOLDER ENGAGEMENT INCLUDE

- Empowerment;

- Accountability;

- Transparency;

- Cost-effectiveness; and

- Resources

- Better understanding of the real underlying issues and priorities of different groups in the community

A STAKEHOLDER ANALYSIS

- **A process of systematically gathering and assessing qualitative information about stakeholders to**

  - ❖ categorize their relative importance as actors and

  - ❖ develop strategies on how to involve them in the development and/or implementation of a HiAP policy or programme

  - ❖ Understand their underlying priority issues for ill – health in their communities

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THE WHO BANGKOK CHARTER FOR HEALTH PROMOTION IN A GLOBALIZED WORLD STATES

"An integrated policy approach within **government** and **international organizations**, as well as a commitment to working **with civil society and the private secto**r and across settings, are essential if progress is to be made in addressing the determinants of health."1

SOME QUESTIONS RELATED TO CIVIL SOCIETY

- **What is civil society? And what are some examples of those related or can impact directly or indirectly population health and health equity?**

- **What are some examples of civil society actors that can affect health impact?**

- **What is the importance of collaboration between governmental sectors and civil society actors?**

CIVIL SOCIETY (NON GOVT STAKEHOLDERS)

- **civil society is a broad term that can encompass many actors including**
  - non-government organizations, (could be national or community based)
  - faith-based groups
  - philanthropic foundations
  - labour unions, professional associations, cooperatives and research institutes

- **The single characteristic that these actors share is that they are not-for-profit.**

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PRIVATE SECTOR

- **Unlike civil society, the characteristic that the private sector ultimately shares is the pursuit of profit.**

- **Creates a complicated, often conflictual relationship with the public health sector given the principles of health as a matter of social justice and a public good**

SOME CONSIDERATIONS OF PRIVATE SECTOR

- **While on the one hand, the private sector might have considerable resources, expertise and technology to potentially direct towards public health, there are numerous issues that should suggest skepticism and caution such as:**
  - ❖ neglected diseases and
  - ❖ the commercial determinants of health

WHO ARE THE STAKE HOLDERS OF ANY ISSUE

- **Persons who are affected by the issue**

- **Persons /organizations/ who have power that can affect the issue**

- **This includes policy makers as well as the links that can reach policy makers and influence them**

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WHY ARE THEY IMPORTANT

- **Some are potential allies**

- **Some are potential opponents**

- **Some have not made up their minds**

- **All should be considered in the space of influence**

IMPORTANCE OF ANALYSIS OF POSITIONS OF STAKEHOLDERS

- **Identify allies and opponents**

- **Identify priority stake-holders who can affect the issue more**

- **Identify best strategy to affect priority stakeholders**

- **Better use of resources**

STAGES OF STAKE-HOLDER ANALYSIS

Stage 1.

- **Conduct a brain storming session to identify all possible stakeholders**

- **Group the ones which have the same position towards the issue**

Stage 2.

- **Identify the position from the issue**

- **Importance of the issue according to them**

- **Their degree of influence and impact on the issue**

STAKE HOLDER ANLYSIS DIAGRAM (1)

The stake holders	position	importance	impact
	- Strongly supportive - middle stand ones -not committed - opponents - strong opponents	-High -medium -low	-High -medium -low

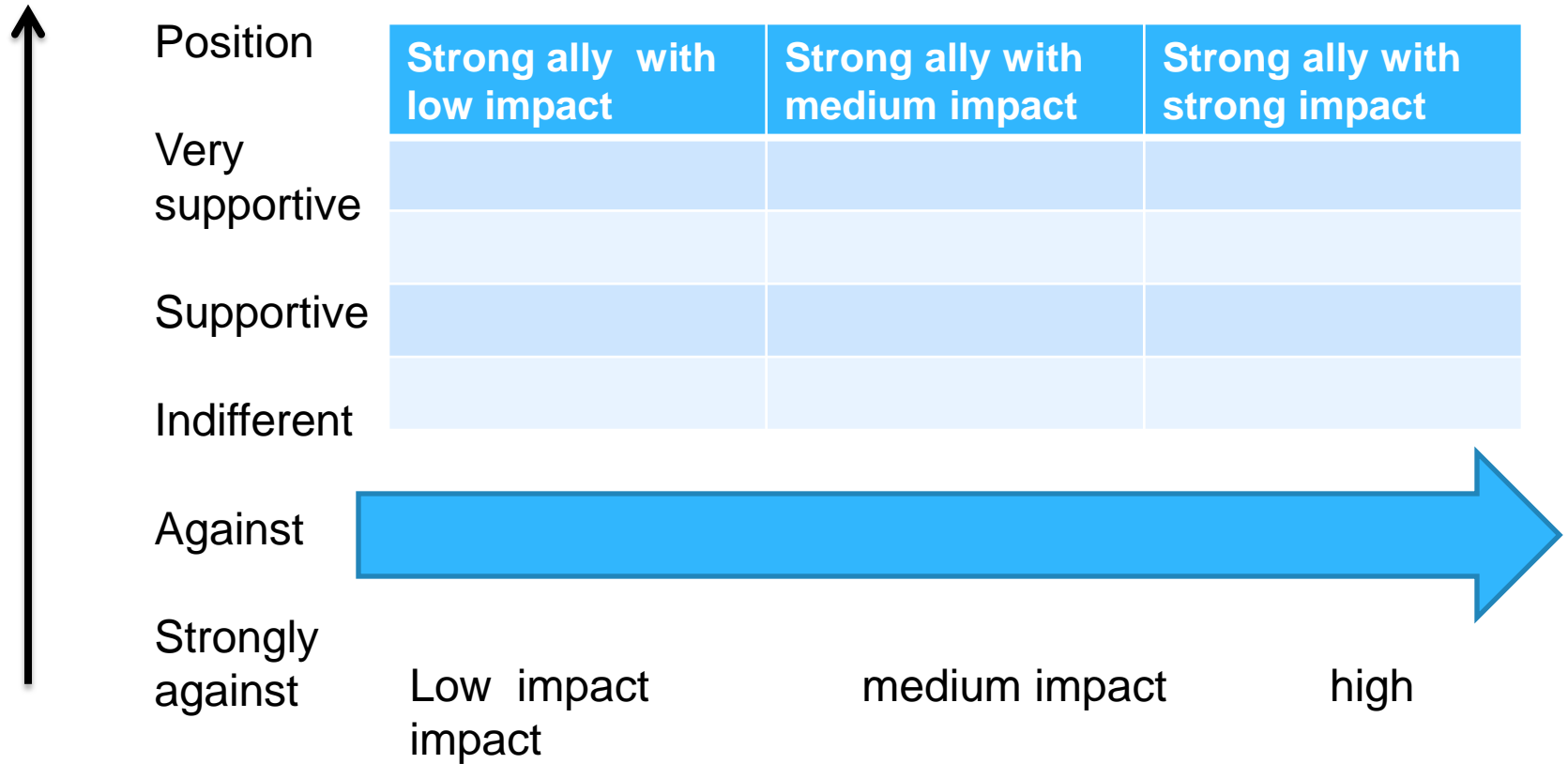# PLACE STAKE HOLDERS ACCORDING TO THE FOLLOWING DIAGRAM

Degree of support:

- Very supportive
- neutrals
- Opposed
- Strongly opposed

Impact on the issue:

- Low
- Middle
- Strong

Primary ally but weak influence	Primary ally with medium influence	Important ally with strong influence

STAKE HOLDER ANALYSIS (POSITION VS IMPACT) (2)

Position

	Strong ally with low impact	Strong ally with medium impact	Strong ally with strong impact
Very supportive			
Supportive			
Indifferent			
Against			
Strongly against	Low impact impact	medium impact	high

STAGE OF ANALYSIS OF RESULTS

- **Identify results and decide on strategy**

1. **Who are the primary stake holders (Primary actors)?**

2. **Who are the allies, neutrals, opponents?**

3. **What are the strategies to strengthen impact on the issue?**

SOME CHOICES/STRATEGIES TO IMPACT

- **Built alliance with allies who have strong impact**

- **Win support of neutrals and those with mild opposition**

- **Empower allies with low support**

- **Lower impact of strong opponents**

STRENGTHEN YOUR UNDERSTANDING OF THE NEEDS OF THE DIFFERENT STAKE HOLDERS

- What do they know about the issue?

- What are their positions? and why?

- What are the other issues of importance to them?

- What is the map of the stakeholders?

    From such an analysis I can build the strategy of impact

INSTITUTIONAL MAP OF DECISION MAKING

- **Differentiate between decision makers and decision endorsers.**

MAP OF DECISION MAKING PROCESS

Endorsers

Decision makers

Decision advisors

Groups of stake holders according to their

- **Which according to your analysis the different groups that Influence decision making and strategies to reach them according to priorities?**

QUESTIONS RELATED TO STAKEHOLDERS ANALYSIS AND STRATEGIES

- **Example. Identify stakeholders who are likely to be interested or affected by the health ministry moving to address NCDs through a whole-of-society HiAP approach.**
  - Who are the stake holders?
  - What is their level of interest in the subject?
  - What is their position?
  - What is their influence? and why?

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THE LEADERSHIP ROLE OF THE HEALTH SECTOR IN HiAP (Chapter 11)

- **Learning objectives**
  - Explain the leadership role of health sector in HiAP
  - List challenges that the health sector faces in promoting HiAP
  - Describe the role of the WHO in relation to HiAP
  - Apply knowledge of HiAP by outlining a model contemporary health ministry

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KEY MESSAGES

- **Although governments as a whole bear the ultimate responsibility for the health of their citizens, health authorities at all levels (national, regional and local) are key actors in promoting HiAP.**

THE ROLE OF THE HEALTH MINISTRY, OR SIMILAR BODY AT THE NATIONAL LEVEL, USUALLY INCLUDES:

- Supporting the growth of scientific knowledge;

- Identifying and prioritizing health issues;

- Monitoring the activities of other sectors that impact on health;

- Creating structures and mechanisms for dialogue across government and with whole of society;

- Facilitating negotiations between sectors and non-government stakeholders; and

- Overseeing the implementation, monitoring and evaluation of policy.

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SOME OF THE MAJOR CHALLENGES THAT HEALTH MINISTRIES FACE IN EFFECTIVELY PROMOTING AND IMPLEMENTING A HIAP APPROACH INCLUDE

- **Limited political influence;**

- **Constrained resources and staff turnover;**

- **Working in vertical, fragmented units;**

- **Difficulty gathering and disseminating evidence;**

- **Politicization of the bureaucracy, corruption and regulatory capture; and**

- **Political commitment and discontinuity.**

FOR THE HEALTH MINISTRY TO PLAY A LEADING ROLE IN HIAP, IT IS CRUCIAL TO

- **Promote closer collaboration within the ministry;**

- **Strengthen capacity to generate and use evidence on health impacts;**

- **Look outward and work in partnership with other sectors and stakeholders;**

- **Increase discussion of the social determinants of health and health inequity;**

- **Manage and negotiate competing interests; and**

- **Enforce the implementation of policies and monitor their results.**

ROLE OF WHO IN HIAP

- Bringing health considerations into global and regional policy-making;

- Supporting policies for global health protection and health promotion;

- Compiling experiences of best practice as well as challenges to HiAP;

- Providing technical assistance to countries in their efforts to apply HiAP; and

- Training health professionals and civil servants in HiAP.

WHY A NEW APPROACH IS REQUIRED

- **The global burden of disease is changing.**

- **The determinants of health and health inequalities increasingly lay beyond the direct influence of the health sector and health policies.**

- **Countries are also increasingly connected and interdependent.**

- **Issues such as globalization, socioeconomic inequality, environmental degradation, food insecurity, migration and urbanization directly impact a growing portion of the world's population.**

- **Social movements and new technologies are also spreading rapidly.**