

Health in All Policies in Finland: Sharing Expertise and Experience

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NATIONAL INSTITUTE FOR HEALTH AND WELFARE, FINLAND



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Legislation supports HWiAP in Finland

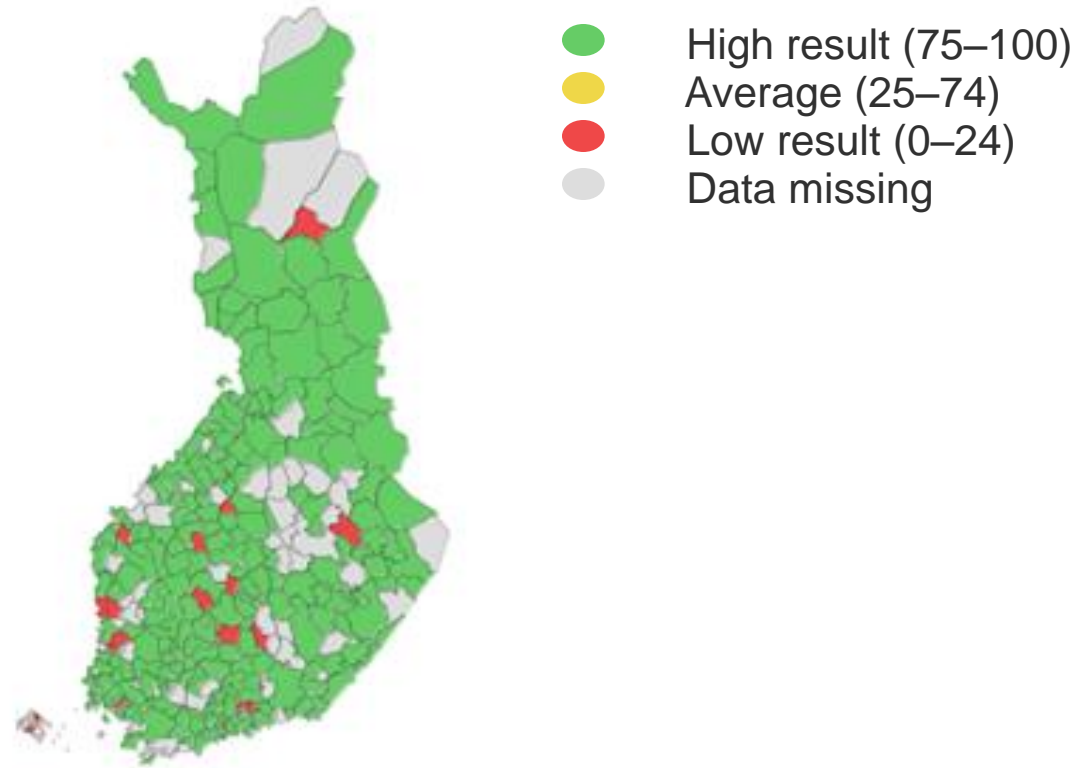
- Constitution 19 §(1999)
 - The public authorities shall guarantee for everyone, as provided in more detail by an Act, adequate social, health and medical services and promote the health of the population.”
- Local government Act 1 § (1995)
 - “Municipalities shall strive to promote wellbeing of their residents and promote sustainable development in their areas.”
- Public Health Act (1972, 2006)
 - Public health work, environments
- Health Care Act (2010) defines the HWiAP elements on local level

Health Care Act (2010) local level requirements

- **Objectives** for the promotion of health and wellbeing of the inhabitants need to be **set in municipal strategies** and measures need to be identified
- **Co-operation** between administrative sectors, with other local actors, private enterprise and NGO's
- **Responsibilities** defined in 90 % of the municipalities
- Assessment of the impacts of decisions on the health and wellbeing of the inhabitants; c. 35 % of the municipalities apply human **impact assessment**
- **Follow-up** of health and wellbeing of the inhabitants and their determinants according to population groups, and measures implemented
 - **A health and welfare report** annually to the municipal council
 - 80 % of the municipalities completed the yearly report in 2015
 - a more extensive report once during each council's term of office (every 4 years)

Cross-administrative working group for health promotion in municipalities

2015 (TEAvisari)



Tackling health inequalities in municipalities: lessons learnt

- There is no uniform way to operate in **different** cities, municipalities and regions
- Information about health inequalities in the “**own**” **population** (not only national) is needed to awaken decision-makers
- Arguments which start from **decision-makers’ point of view** (e.g. economic effects, sufficiency of labour force) are needed for motivation
- The aim has to be incorporated into **local and regional strategies** in order to legitimate and lead to actions
- Effective **intersectoral** work is needed, health sector has an important role as an advocate

Databases for municipalities - Health, welfare and health promotion

- **Welfare and health**
 - [SOTKAnet Statistics and Indicator Bank](#)
Comprehensive population welfare and health data on all Finnish municipalities.
 - [Terveystemme](#) (Available only in Finnish)
Statistics on population health by region and population group (by education).
- **Health promotion**
 - [TEAviisari](#)
A service describing municipalities' activity to promote residents' health
- **Indicators**
 - [Welfare Compass](#)
Includes about a hundred of the most relevant indicators on health, wellbeing and social and healthcare services.

(<https://www.thl.fi/en/web/thlfi-en/statistics/statistical-databases>)

Seinäjoki example

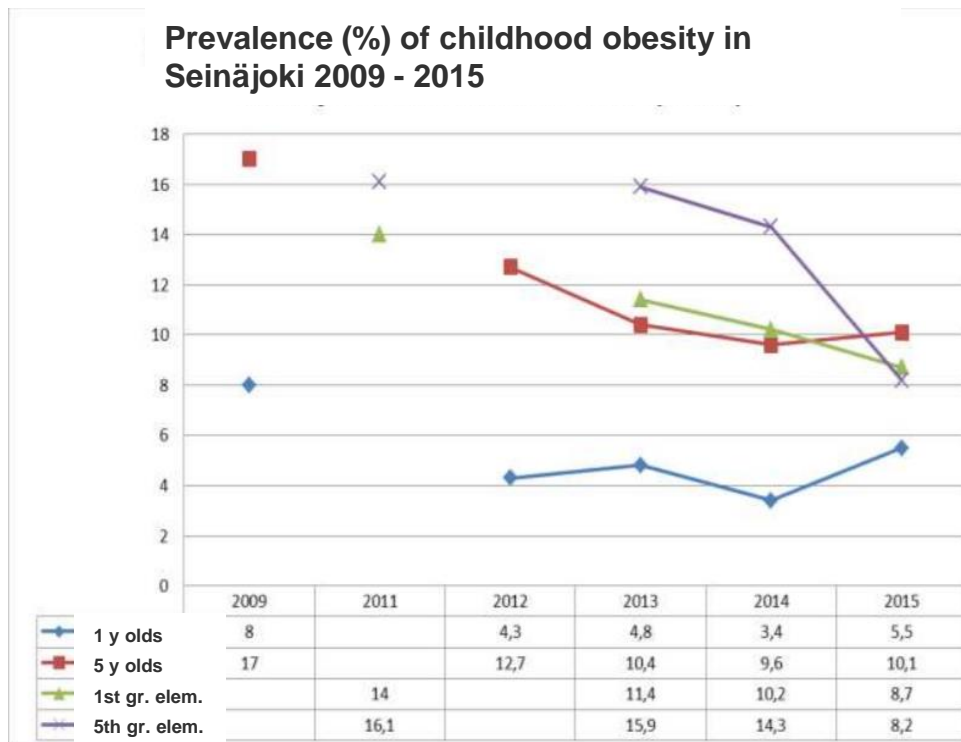
- Finnish city of Seinäjoki curbs **childhood obesity** by integrating HIAP
- The objective for reducing childhood obesity is set in municipal strategy (Seinäjoki health and welfare report 2013-2016 → 2017-2020).
- “It took time for all the different departments to understand how each influences health and the role each must play to promote it.”
- The **urban planning** department improved school playgrounds. **Recreation** implemented more physical activity in schools. **Nutrition** worked with day care centres to eliminate sugary snacks and with schools to serve healthier lunches. And the **health department** instituted comprehensive yearly health examinations in schools, which included **parent education** on healthy eating.



Land use planning is corresponding the needs of the residents, creating the environment that promotes physical activity. In the evening the school yards are also available to residents (old, young people, disabled).

Seinäjäki example

As a result, the proportion of five-year-olds who are overweight or obese has been halved within the period of 2009 - 2015.



Reform of social and health services

- Health, social services and regional government reform is one of the biggest ever administrative and operational overhauls in Finland.
 - Municipalities will no longer be responsible for providing social and health services → Counties (2019)
 - But municipalities will continue to be responsible for the promotion of health and wellbeing of their inhabitants
 - New structures for cross-sectoral co-operation between municipalities and counties and expert support to municipalities

Website: Health promotion and HIAP


<https://www.thl.fi/en/web/health-promotion/health-in-all-policies>

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We support the management of health and welfare promotion in Finnish municipalities and regions.

WHAT'S NEW

THL's Director of Health Security Mika Salminen on the final round for the new Director of ECDC
10 Mar 2017

A new study confirms: pregnant women should avoid liquorice
3 Feb 2017

Regional morbidity differences must be considered in organising services
18 Nov 2016

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Structures to support HWiAP on national level

- Advisory Board on public health led by MSAH and its sub-committees (most of the ministries, NGOs, trade unions)
 - Challenge: The latest term ended in April 2015.
- Horizontal committees, e.g.
 - National Nutrition Council run by the ministry of agriculture and forestry linking different ministries, governmental agencies, NGOs, experts, and industry
 - National Committee on Health- and Wellbeing-Enhancing Physical Activity run by the ministry of education and culture
- EU co-ordination (cross-ministerial working groups) and formal communication between sectors (e.g. meetings of the Permanent Secretaries)
- Ministerial working group on wellbeing and health

(Health/human) impact assessment in Finland

National

- Impact assessment (IA) of the law proposal by the government to the Parliament
 - Common guidelines (procedures and the impacts to be assessed) for all ministries
 - Impact on health, wellbeing and equality should be assessed as part of the social impacts (HuIA assessed only in 5 %, 2013)

Local

- Obligation based on the law to consider the impacts of decisions on the health and wellbeing of the inhabitants (Health Care Act 2010)
 - C. 35 % of the municipalities applying HWIA in their work

Additionally, as part of the compulsory impact assessments

- 1994 part of EIA-law
- 2000 The Land Use and Building Act



Recent policies and programmes to support HWiAP

- Government resol. on Health 2015 Public Health Programme (2001)
- Governmental Policy Programme for Health Promotion 2008-2011
- National Action Plan to Reduce Health Inequalities 2008-2011
- Government programmes
 - e.g. the current Finnish Government states ten year objectives, including:
”Health promotion and early support have strengthened in decision making across sectors, services, and working life due to better legislation and better implementation. Inequity in health and wellbeing has narrowed.”

Recent processes to support HWiAP

- Focal points for the promotion of wellbeing and health and reduction of inequalities at every ministry in 2013–2015
- A series of cross-governmental working seminars
 - 11/2013, 3/2014, 10/2014
 - A joint-writing process between a number of ministries and production of four background papers to support the preparation of the forthcoming government programme (elections 4/2015)
 - 2/2015 a seminar at the parliament to inform MPs of the background papers
- Tools for human impact assessment updated in 2015
 - The work was overseen and supported by a cross-sectoral steering group



Government Key project: Promotion of health and wellbeing and reduction of inequalities

1. Modelling how different sectors of government can take into account the impact of their decisions and actions on wellbeing, health and inequality
 - A pilot with seven government key projects lead by other ministries
2. Mapping how decisions and actions of the Ministry of Social Affairs and Health can be prepared together with other sectors of government
 - **A new model for cross-sectorial work and recommendations for action**
3. Implementation of the updated (2015) tools for human impact assessment in legislation

Government Key Project; pilots

- Seven government key projects lead by other ministries volunteer as pilots
- A concrete actions of high priority of other ministries as starting point for the work.
- Themes of this collaboration are e.g. digitalization of public services, energy and climate strategy, reform of vocational upper secondary education, so called “youth guarantee“ to tackle unemployment of young people and national food production.
- Building partnerships, maintaining collaborations and creating trust between partners is time consuming and continuous task.
- This project is a new form of offering support and expert assistance to different ministries. Ideally, the new model would be a good addition to the established HiAP structures.

Experiences from ministries in reducing health inequalities

- The used **terminology** is important (shared understanding)
- Making health inequalities **visible** in priorities of each ministry
- The aim has to be incorporated into **strategies and programmes of each ministry** (not only in national plans) in order to legitimate and lead to actions
- Vertical and horizontal **collaboration** is needed, health sector has an important role as an advocate
- Understanding and focusing in **causes and ways to reduce health inequalities**



Conclusions

- Long term commitment and public health capacity and expertise for advocacy
- Intersectorial structures, processes and mechanisms, except national Advisory Board on public health not nominated
- Legislative backing
- Data on wellbeing, health, health determinants and inequalities exist
- Need for focusing in causes and ways to reduce health inequalities and evaluation of implementation to inform policy-making in all sectors, and building accountability

Be prepared to defend any gain that has been achieved!



Thank you for listening!

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Health inequalities result from social inequalities. Therefore action across all the social determinants of health is required.

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18 Nov 2016

Comment now: Tampere declaration expresses global commitment for injury prevention and safety promotion
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