

Achieving well-being

A global framework, implementation and monitoring plan for integrating well-being into public health using the health promotion approach

“The world is facing a confluence of crises that threaten the very survival of humanity. All of these crises – and ways to prevent and navigate them – are addressed holistically in the SDGs. We ignore them at our own peril”

(UNSG, the Sustainable Development Goals Report, UN, 2022)

Consultation form

Please provide your feedback/input in the yellow boxes found throughout this document. Thank you.

Name of Member State or Observer

[enter text here please]

Email address for focal point to enable WHO to follow up regarding feedback, if necessary

Any feedback for the secretariat on the consultation process itself?

Any general feedback on the need for a *Framework on well-being*?

Any other broad feedback or suggestions regarding this Framework or guidance for the secretariat?

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Any feedback on the approach and the format of this *Framework on well-being*? For example, do you notice any important omissions and/or would you recommend any changes in the emphasis/space dedicated to each section?

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I. Introduction: Societal well-being and vulnerability

The world is confronting complex uncertainties, shocks and a series of simultaneous, interrelated crises: From climate change, prolonged instability and conflicts to economic jolts and disease outbreaks, society is learning the hard way that periods of concurrent crises erode social and individual well-being, and ultimately undermine people's health and well-being.

Countries have distinctive vulnerabilities to crises and their compound effects, leaving individual nations and communities impacted – and inspired to take action – in very different ways. For example, the COVID-19 pandemic exposed some of the common fractures and inequities in society, and highlighted the significance of the social, economic and environmental determinants of health. Despite the tragic loss of life, it also clearly demonstrated the extraordinary outcomes that genuine 'whole-of-government', multilateral and multisectoral collaboration can generate when focused on health.

Well-being is captured within the original World Health Organization (WHO) expression of health as an aspirational, positive state experienced by individuals: "health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity" (WHO, 1948). Sustaining and protecting health against overlapping crises requires integrated thinking and actions in relation to societal, community and individual well-being, as well as changes in attitudes and investments in key social structures – particularly those that enable people to take more control of their own lives and health.

Where such shocks are prolonged, their overlap with natural disasters, extreme climate events, periods of food insecurity and disease outbreaks becomes more likely, amplifying the effects of the original crisis. With traditional lines between crisis management and recovery, emergency humanitarian responses, and national development approaches fading, adaptation requires a fundamental redirection of societal values and actions to sustain and protect health and well-being – largely through a re-emphasis and accelerated action on the 2030 Agenda for Sustainable Development.

First and foremost, it is imperative to view health and well-being as intrinsic societal assets that must be safeguarded against erosion. The confluence of crises is causing the most severe impacts in many of the very same priority areas highlighted by the Sustainable Development Goals (SDGs) for action: food and energy security, access to education; poverty alleviation and decent work; economic and political stability; human rights; safe movement of people; and environmental protection. Beyond well-being, such deep impacts bring about declines in social cohesion and trust, and ultimately jeopardize the survival of people and the planet. However, just as various global crises cannot be addressed in isolation, specific dimensions of societal and individual well-being also cannot be selectively safeguarded.

1) Promoting health and well-being societies

Health and well-being are rooted in the recognition that both are influenced by biological, social and environmental determinants. The *Alma-Ata Declaration* of 1978ⁱ identified primary health care as critical to attain the goal of 'Health for All'. The concepts of health and well-being were further expanded within the *Ottawa Charter for Health Promotion*, which situates them as a state experienced by an individual as well as a resource for everyday life (WHO, 1986).ⁱⁱ

The *Rio Political Declaration on the Social Determinants of Health* (2011), inspired by the work of the Commission on Social Determinants of Health identified key actions for countries and global health partners to achieve greater equity in health that promote equitable access to goods and services essential to health and well-being.ⁱⁱⁱ

The 2016 *Shanghai Declaration on promoting health in the 2030 Agenda for Sustainable Development* urges leaders from all sectors and from different levels of governance to promote health and well-being in all the SDGs. The *Geneva Charter for Well-being* adopted at the 10th Global Conference on Health Promotion in 2021 – underlines the urgency of creating sustainable well-being societies and achieving equitable health without breaching ecological limits.

2) Underlying causes and societal impacts

The universality and interconnectedness of the SDGs and related targets is a core feature of the 2030 Agenda for Sustainable Development. They involve the entire world and are integrated and indivisible, balancing economic, social and environmental dimensions. Health and well-being are similarly determined by factors lying outside what is traditionally seen as the health sector.

The main sustainable development challenges, including those related to health and well-being, share common contemporary underlying causes linked to:

- **Economic development models** based on massive and intensive production and consumption of goods and contributing to the rise of NCDs, pandemic and degradation of natural ecosystem and prioritizing profits for the few, over the impacts on people and the planet
- **Inequitable distribution of resources** reflecting political legacies and colonialism, affecting social, economic and environmental determinants of health of people and planet
- **Fragile health and social protection systems and weakened public services** based on increasing privatization of public assets and bureaucracies, contracting out models without requisite public stewardship to ensure service standards or equality of access and care, maintenance and investment,

- and weakened public accountability of government and public administrations and their directors, increasing the health and social inequity gap
- **Digital transformation** creating an equity gap in access to health care, economic empowerment, misinformation and affecting social cohesion and trust

3) Health promotion: a critical pathway to well-being

Health promotion is the process of enabling people to **increase control over, and improve, their health**. As a core function of public health, health promotion supports governments, communities and individuals to cope with and address health and well-being challenges in order to advance healthier populations and environments through actions on a wide range of economic, social and environmental interventions, as well as individual behaviour change.

Advocate: Health promotion seeks to influence policies and programmes comprehensively by looking at health and well-being as essential assets for societal and personal development. The well-being perspective supports the capabilities to cope with external pressures and challenges, through enabling environments that facilitate healthy choices.

Mediate: Health promotion is relevant across sectors and disciplines and becomes effective when it combines and builds on mutual understandings of each stakeholder's realm of expertise through a multisectoral approach. It is important to recognize – and value – that health promotion is often implemented by professionals who are not trained as health professionals, such as teachers, sports trainers, community workers and so on. Their capacity and impact are important assets for the promotion of healthier populations and well-being societies.

Empower: Health promotion is a lever for strengthening empowerment at individual and community levels beyond consultation, participation or other forms of engagement. It implies adequate health literacy, community ownership and action that explicitly aims at social and political change. Member States and key stakeholders can use health promotion to advance health and well-being through empowerment by stimulating personal action; development of interest groups; community organizations and partnerships; and social and political action.

As with other public health functions, the ultimate goal of health promotion is to improve health outcomes and well-being for populations and communities, including improvements across quality of life, function, independence, equity, mortality and morbidity. Health outcomes are also influenced by a wide range of social, economic and environmental determinants of health; factors that can enhance as well as impede health and well-being. Modification of underlying determinants requires generational changes and

considerable lags, making attribution visible health and well-being outcomes to health promotion programmes difficult.

4) Well-being societies

'Well-being societies' provide the foundations for all members of current and future generations to thrive on a healthy planet, despite crises and no matter where they live (Geneva Charter for well-being, 2021). Such societies apply bold policies and transformative approaches that are underpinned by:

- A positive vision of health that integrates physical, mental, spiritual and social well-being.
- The principles of human rights, social and environmental justice, solidarity, gender and inter-generational equity, and peace.
- A commitment to sustainable low-carbon development grounded in reciprocity and respect among humans and making peace with Nature.
- New indicators of success, beyond gross domestic product, that take account of human and planetary well-being and lead to new priorities for public spending.
- The focus of health promotion on empowerment, inclusivity, equity, and meaningful participation.

The growing momentum towards well-being calls for a new social contract that balances social, economic and environmental considerations at the centre of political and societal decision-making. Such policies and actions are based on whole-of-government and -society approaches that aim to achieve more coordinated and coherent responses.

Feasibility of well-being approaches requires government and key stakeholders to align around a shared set of guiding principles and frame of reference, with clearly defined actions and accountability mechanisms. New indicators of success need to be defined, beyond gross domestic product, that take account of human and planetary well-being and lead to new priorities for public attention and investment.

5) About this Framework

The WHO *Framework on well-being* provides key strategic directions for attaining well-being societies, building on the 2030 Agenda for Sustainable Development, its 17 SDGs and related targets through a health promotion lens. It is structured into two sections. The first section brings together the most effective actions from the global health community and serves as an umbrella guide to Member States and partners in their efforts to foster the development of well-being societies for all. The second section includes an implementation and monitoring plan that incorporates health promotion tools and approaches. These are demonstrated actions from the existing health promotion evidence base, translating that knowledge into shared practice across the varied sectors involved.

Given the frequent delivery of actions outside of the health system, it provides a common language and purpose for each sector and partner to engage in aligned ways.

The Framework relies on effective partnerships and collective and coordinated actions by government, nonstate actors from public and private entities within and outside the health eco-system to facilitate the whole-of-government and whole of society approach to the benefits of population and the planet.

Do you have feedback on the introduction section outlining the linkages between well-being, determinants of health, health promotion and the Sustainable Development Goals?

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II. WHO focus on well-being

The attainment of highest possible levels of individual and societal well-being is the core WHO objective. As this objective is obviously influenced by many policy decisions outside of the health care sector, the WHO constitution outlined the functions entrusted to the Organization to fulfil its mandate. They include, inter alia, to promote:

- in co-operation with other specialized agencies where necessary, the improvement of nutrition, housing, sanitation, recreation, economic or working conditions and other aspects of environmental hygiene; and
- promote co-operation among scientific and professional groups which contribute to the advancement of health.

This framework is strictly confined to the mandate and functions of WHO.

When the world adopted new, ambitious development goals in 2015, WHO stepped up to that level of ambition, championing health in the SDGs and working to ensure healthy lives and promote well-being for all at all ages, leaving no-one behind. The WHO role is indispensable in taking the 2030 Agenda for Sustainable Development forward in relation to health and well-being [\[ref GPW13\]](#).

The WHO 13th General Programme of Work (GPW13)^{iv} sets interconnected strategic priorities (the ‘3 billion targets’) to ensure healthy lives and promote well-being for all at all ages (SDG 3) and also operationalizes the tasks. It aims to extend universal health coverage (UHC) to one billion, prepare one billion people to better handle health emergencies, and improve health and well-being for one billion people by 2023. The WHO *Promoting healthier populations framework* focuses on the third goal of improving health and well-being, and provides guidance for diverse social, economic and environmental political and programmatic initiatives.

In 2022, WHO was mandated by the World Health Assembly [\[ref resolution WHA75.19\]](#) to develop “a framework on achieving well-being, building on the 2030 Agenda for Sustainable Development”.

Well-being is framed within the WHO constitution as an aspirational positive state: “health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity” (WHO, 1948). The Alma-Ata Declaration of 1978 not only identified primary health care as the key to the attainment of the goal of Health for All but also placed the concept of health in a broader context. Health and well-being were further expanded within the Ottawa Charter for Health Promotion to situate them as a resource for everyday life. In overcoming an individualistic understanding of lifestyles and in highlighting social environments and policy, the orientation shifted from focusing on the modification of individual risk factors or risk behaviours to addressing the “context and meaning” of actions and the determinants that impact people (WHO, 1986). The landmark Report of the Commission on Social Determinants of Health

set up a pathway model to explain factors affecting the inequitable distribution of health and well-being. “Structural determinants” including all social and political mechanisms (e.g. governance, macroeconomic policy, social policy, public policy as well as social and cultural values) that generate, configure and maintain socioeconomic positions in a society. The 62nd World Health Assembly in 2009 endorsed the report and called on Member States to make political commitments to address social determinants of health that lead to inequitable health outcomes through social protection policies.

Definitions of key concepts/terms

Well-being	The framework suggests using two working definitions to build a common understanding and advance an agenda for well-being of societies.
Individual well-being	Individual or subjective well-being refers to an individual perception of their own well-being which may include overlapping concepts of happiness, positive emotion/affect, engagement, meaning and purpose, life satisfaction and social support.
mental health	“A state of mental well-being that enables people to cope with the stresses of life, to realize their abilities, to learn well and work well, and to contribute to their communities. Mental health is an integral component of health and well-being and is more than the absence of well-being” see World Mental Health Report 2022 page 8
Societal well-being	Societal well-being is measured at the population level and includes standard of living, quality of life. Societal well-being is not the mere sum of individual well-being but is rather a collective endeavour that requires navigating competing interests, institutions and ideas.
Health promotion	The process of enabling people to increase control over, and to improve, their health.
Health literacy	Health literacy represents the personal knowledge and competencies that accumulate through daily activities, social interactions and across generations. Personal knowledge and competencies are mediated by the organizational structures and availability of resources that enable people to access, understand, appraise and use information and services in ways that promote and maintain good health and well-being for themselves and those around them

Empowerment	In health promotion, empowerment is a process through which people gain greater control over decisions and actions affecting their health
Enabling	Enabling means taking action in partnership with individuals or communities to facilitate greater empowerment – through the mobilization of community and material resources – to promote and protect health

Any feedback on the focus of the framework? Are we missing important issues?

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III. Global framework on well-being

Shaping an agenda on well-being requires first establishing a framework to build a common understanding and a consensus around key policy orientations. The framework encompasses the central ideas and function of health promotion, and builds on the principle of universality with the greatest efforts directed towards the populations that need the most. It emphasizes the need to enhance joint accountability—of governments, and partners—to people and planet - for maximizing sustainable investments and delivering value for money and fit-for-purpose societal results.

The framework is comprised of key vision, an overarching goal, key objectives, guiding principles and an implementation and monitoring plan.

Efforts to achieve well-being go beyond the scope of any single sector and requires collective and coordinated responses. Implementation demands effective partnership as it is only by working together that the vision of societal well-being for all will be achieved. The framework provides an overall summary of joint work – for people and the planet – between various actors including within government ministries and partners from the public and private sectors, as well as civil society.

The main target audience includes key stakeholders from communities and governments, local and national, working within and beyond the health sector

1) Vision

Societal well-being that enables people to achieve their full health potential throughout their lives and across generations, within planetary boundaries.

2) Goal

To promote, strengthen, and support Member States in their efforts to create sustainable “well-being societies”, committed to achieving equitable health now and for future generations without breaching ecological limits.

3) Key objectives

Achieving this ambitious goal requires setting more specific objectives that include:

- a. Engaging high level decision makers, key constituents, and the public across multiple sectors to take action and design policies and programmes that improve the health and well-being for all.
- b. Promoting transformative change through coordinated inter-sectoral action and contributing to building resilient societies based on equity, solidarity and sustainable development.

- c. Accelerating progress towards existing sustainable development and health goals, strategies, frameworks and action plans with the support of health promotion.
- d. Creating social, physical, and economic environments that empower people to take control over their own lives, health and well-being.
- e. Achieving health equity and advance health literacy to improve the health and well-being for all.
- f. Enhancing health promotion capacity and practice to manage current and emerging public health challenges.

4) Foundations of well-being

- Well-being societies provide the foundations for all members of current and future generations to thrive on a healthy planet, no matter where they live. Such societies apply bold policies and transformative approaches that are underpinned by: A positive vision of health that integrates physical, mental, spiritual and social well-being.
- The principles of human rights, social and environmental justice, solidarity, gender and inter-generational equity, and peace.
- A commitment to sustainable low-carbon development grounded in reciprocity and respect among humans and making peace with Nature.
- New indicators of success, beyond gross domestic product, that take account of human and planetary well-being and lead to new priorities for public spending.
- The focus of health promotion on empowerment, inclusivity, equity, and meaningful participation.

Any feedback on this more detailed outline and description of the Framework?

Key strategic directions

This Framework on well-being suggests strategic directions to adopt a well-being approach through a health promotion lens, as well as tools to mitigate current and future public health challenges and create the conditions for government and people to promote health and well-being in a globalized world.

Guided by recommendations of the Geneva Charter for well-being, these proposed strategic directions are structured around addressing **five imperatives of ecology, economy, social, health and digital affecting health and well-being of populations**. This global Framework is also expected to accelerate

actions outlined by existing WHO global action plans –that assist countries to meet agreed targets for overcoming the burden of disease and promote healthier populations, including: Global strategy and framework on ageing and health; Global framework on antimicrobial resistance; Global framework to promote physical activity and the Global framework for the Prevention and Control of NCDs which identifies a suite of policy options to assist countries to meet agreed targets to overcome the burden of disease and promote healthier populations.

As a motor of public health, health promotion contributes to the fulfilment of these goals. Under each strategic direction, a set of suggested policy orientations are provided to trigger action. While the strategic directions should be considered as comprising one comprehensive approach involving key national and local stakeholders, the policy orientations should be selected based on the national context, the country resources and in line with the global commitments under agenda 2030.

Strategic direction 1: Nurture planet earth and its ecosystems

A healthy planet is essential for the health and well-being of current and future generations and for enabling all to flourish. Well-being societies prioritize a rapid and just transition to a low-carbon economy that keeps temperature rises below 1.5°C this century. They provide access to clean energy for all, enhance biodiversity, reduce resource depletion and pollution, support harmonious relations between humans and nature and assign indigenous knowledge and leadership a central importance. They promote water and food systems that reduce harm and promote healthy nutrition (including breastfeeding).

Policy orientations

- Promote governance systems that include One Health approaches.
- Develop multisectoral frameworks/plans at national levels with key actions to achieve environmental, including climate change targets....
- Enhance health literacy of the general population to ensure support and ownership of measure to protect the environment and make eco-friendly choices easy.

Any feedback on Strategic Direction 1?

Strategic direction 2: Design and support implementation for an equitable economy that serves human development within planetary and local ecological boundaries

Health is created in everyday life and therefore determinants of health and well-being are affected by combined living circumstances and environments. These are commonly referred to as the “social determinants of health and health equity”. Associated drivers include securing decent work, fair trade, universal social protection systems, production and consumption systems based on the principles of a circular economy, addressing structural discrimination, sustainable transitions and the preservation of natural eco-systems and planetary health. Social determinants of health have considerable impacts on health and well-being.

Traditional measures of progress and success – particularly a focus on life expectancy and GDP growth – are inadequate in terms of capturing what matters most to us and the places where we live. There is increasing momentum to draw on a range of measures to better capture how nations are doing. International well-being frameworks include:

- The Sustainable Development Goals endorsed by 193 countries.
- The OECD Better Life Index to score and compare the issues that matter to people, from housing to the quality of jobs.

In addition, several governments and regional bodies have already taken steps and have included in their goals to target and value key aspects of well-being (e.g. countries from the European Union and New Zealand)

Policy orientations

- Support circular models of production and consumption.
- Serve as a driver, ally and co-creator of redesigned economies that optimize societal well-being, implement measures across a wide range of economic determinants including taxes (e.g. taxes on unhealthy products), initiate labour market programmes, health and safety regulations, and protect the environment.
- Eradicate/shift investments from economic activities that create harm to people and the planet towards those that benefits the population and One Health, including eradication of agriculture of tobacco products, palm oil exploitation, etc and the incorporation of health in environment and social governance programmes and risk-based investment frameworks.

- Apply a budget system based on well-being, ensuring investment is oriented to producing well-being and protecting the planet.
- Support the private sector to shift towards health promotion through their core business models and business practices.
- Leverage the role of central and investment banks as part of investing in well-being economies.
- Address health issues across economic sectors including housing, energy, transport and other sectors to ensure the basic needs of all people are met.
- Ongoing appraisal of health impacts of innovative policies such as debt cancellations, land reform, energy price caps, rent caps, attaching conditions to public bailouts, and affordable public transport policies to ensure that they are health- and equity- proofed
- Preserve natural ecosystems and support sustainable transitions across urban and rural areas
- Reorient investments and dis-incentivise from production and consumption of health-harming products and services, towards health promoting alternatives.
- Subsidise or incentivise investment in, production and/or consumption of commodities that are conducive to human and planetary health.
- Create fiscal space for public investment in well-being including through the consideration of co-benefits and co-costs of investments across sectors
- Reduce harm through enforcing accountability and regulation of digital and the arms industries.
- Adopt a system of governance for health and well-being so that people and communities drive policy rather than commercial interests.
- Promote solidarity and effective cooperation between countries.
- Invest in health, well-being and social protection; develop institutional, legal and fiscal strategies to ensure a healthier, sustainable economy.
- Build partnership between public and private sectors to leverage economic potential that benefits all and does not harm the planet.
- Promote partnerships between communities, civil society organizations, governments at all levels to achieve health for all.
- Strengthen countries' capacity to utilize analytics, strategic implementation, and accountability mechanisms to drive impact on health and well-being, including progress towards the Healthier Population Billion

- Strengthen country data and health systems and capacity to monitor progress towards the Healthier Population Billion, and health determinants in general
- Address public health data gaps, especially around violence against children and against women, children developmentally on track, mental health and water & sanitation
- Promote transversal collaboration, data and knowledge sharing across stakeholders and institutions involved in health promotion
- Develop consensus on comprehensive well-being-based indicator frameworks as the main measure of social and economic progress

Any feedback on Strategic Direction 2?

Strategic direction 3: Design social protection and welfare systems based on equity, inclusion and solidarity

Access to social protection systems that are underpinned by the principles of justice and fairness lies at the heart of societal well-being. Social protection policy plays an important role in securing population health and health equity. Overall, social protection enhances income security, enabling people to invest in and accumulate assets (e.g. human, productive and financial), diversify their livelihood sources, move between occupations – which is essential for vibrant economies – with a range of positive economic, social, and health multipliers. These systems and principles need to be integrated into government decision making and public policy agendas and need to at least cover the scope of the Universal Protection Floor. The UN advocates extending the coverage of national social protection floors that guarantee at least four social security guarantees: essential healthcare; basic income security for children; basic income security for persons of active age who are unable to earn sufficient income (in particular in cases of sickness, unemployment, maternity and disability); and basic income security for older persons.³ Multiple benefits for health and health equity flow from these social protection guarantees⁴:

- Alleviation of acute and chronic stress, hunger, nutrition and other adverse material exposures.
- Facilitation of access to health care treatment, adherence/improved health behaviours.

- Improvement of interpersonal relations and reduction of interpersonal violence.
- Reduction of intergenerational transmission of disadvantages exacerbated by ill-health.
- Improvement in gender equality and reduction in stigma and discrimination.
- Improvement in social cohesion, as well as human and social capital.

Social protection systems need to be perceived as a societal investment, that contributes to economic, social and environmental development and protects future generations from living in entrenched poverty. Inequality negatively affects societies, creating divides between people and communities and may lead to political disruptions. Joint effort by private and public sectors; and civil society actors can strengthen the investment in social protection and welfare schemes.

The sustainability of social protection and welfare schemes rely on communities and governments that are committed to the principles of solidarity and social capital. Governments need to show leadership in setting norms regarding social protection and in creating equitable and fair systems.

Policy orientations

- Create and expand social, welfare and ensure adequate and sustainable financing, public transparency and accountability for their governance and financing.
- Build strong policy and legal frameworks through national and social dialogue, robust administrative systems and sustainable adequate financing.
- Support the transition from the informal to the formal economy and covering the “missing middle” with particular emphasis on workers in the informal economy.
- Strengthen social protection delivery including respect of the environment in these systems.
- Harness the fullest potential of social welfare systems to deliver adaptive/shock-responsive social protection, contributing to sustainable development and resilience during pandemics and other crises.
- Ensure stronger integration of universal social protection policies.
- Promote social welfare systems that foster social innovation, productivity, skills development and collaboration while preserving and promoting the traditions and cultures of Indigenous people.
- Collaborate with social partners to promote universal, and sustainable social protection systems and safe and healthy working environments free of violence and harassment as fundamental human right

Any feedback on Strategic Direction 3?

Strategic direction 4: Promote equitable universal health coverage through primary health care, health promotion and preventive services.

In a well-being society, universal health coverage (UHC) is central to promoting and protecting health of the population and delivering health service to all and ensure social stability. Enhancing investment in UHC strengthens primary care, health promotion and preventive services and systems.

Pursuing UHC:

- ensures equitable distribution of resources across the life-course and continuum of care – from health promotion, disease prevention, care and rehabilitation to palliation;
- promotes mental well-being in re-orienting health services;
- nurtures and protects healthcare workers;
- understands health as an investment for well-being and societal resilience, rather than as a cost.

Governance for health and well-being builds on co-design by stakeholders, makes full potential use of the digital transformation to achieve equitable benefits across populations. Ensuring access and meaningful participation avoids digital exclusion and prevents potential negative impacts on health by empowering people through digital health literacy at all ages.

The growing burden of non-communicable diseases (NCDs) represents one of major global public health challenges and threaten progress towards the 2030. The uncontrolled rise in NCDs is predicted to impede poverty reduction initiatives in low-income countries, particularly by increasing household costs associated with health care. Vulnerable and socially disadvantaged people get sicker and die prematurely because they are at greater risk of being exposed to harmful products, such as tobacco, or unhealthy dietary practices, and have limited access to health, social and other supporting services.

An important way to control NCDs is to focus on reducing the exposure to the risk factors associated with these diseases to tackle the root causes of ill/health. Leading noncommunicable diseases (cardiovascular disease, cancer, diabetes, chronic respiratory diseases, and mental ill-health) share

common risk factors (tobacco use, unhealthy diets, physical inactivity, harmful use of alcohol, and air pollution)). WHO suggest a set of cost-effective interventions to reduce the impact of NCDs on individuals and society known as the best buys. The multifaceted of the interventions packages requires the implementation of well-coordinated, integrated, intersectoral strategies supported with accountability mechanisms for health impact across all sectors and levels of governments (health, finance, transport, education, agriculture, planning and others).

Policy orientations:

- Ensure equitable distribution of resources across the life-course and continuum of care – from health promotion, disease prevention, care and rehabilitation to palliation.
- Promote mental well-being in re-oriented health services.
- Nurture and protects healthcare workers.
- Understand health as an investment for well-being and societal resilience, rather than as a cost.
- Consider the harms from privatizing health services, including on equity.
- Fight against the global tobacco epidemic through MPOWER Strategy
<https://www.who.int/initiatives/mpower>
- Promote physical activity through the adoption of the GLOBAL ACTION PLAN ON PHYSICAL ACTIVITY 2018-2030
<https://apps.who.int/iris/bitstream/handle/10665/272722/9789241514187-eng.pdf>
- Implement the Global alcohol action plan 2022-2030 to strengthen implementation of the Global Strategy to Reduce the Harmful Use of Alcohol https://cdn.who.int/media/docs/default-source/alcohol/alcohol-action-plan/first-draft/global_alcohol_acion_plan_first-draft_july_2021.pdf?sfvrsn=fcdab456_3&download=true
- Reduce air-pollution by implementing the New WHO Global Air Quality Guidelines <https://www.who.int/news/item/22-09-2021-new-who-global-air-quality-guidelines-aim-to-save-millions-of-lives-from-air-pollution>
- Promote Sustainable and green transportation for better quality of life
https://sdgs.un.org/sites/default/files/2021-10/Transportation%20Report%202021_FullReport_Digital.pdf
- Promote mental health by accelerating action to adopt and apply the recommendations of the Comprehensive Mental Health Action Plan 2013-2030
<https://www.who.int/publications/i/item/9789240031029>
- Promote adequate health insurance coverage inclusive of universal access to essential NCD interventions, including mental health care, also through primary care, e.g. see <https://www.who.int/publications/i/item/9789241549790>

- Promote Universal health coverage so all individuals and communities receive full spectrum of essential, quality health services, from health promotion to prevention, treatment, rehabilitation, and palliative care across the life course.
- Declaration of Astana https://cdn.who.int/media/docs/default-source/primaryhealth/declaration/gcphc-declaration.pdf?sfvrsn=380474fa_22
- Strengthen the equity and efficiency of primary health care in low-resource settings for the integrated management of NCDs by adopting the WHO Package of essential noncommunicable (PEN) disease interventions for primary health care in low-resource settings <https://www.who.int/activities/integrated-management-of-ncds>
- Integrate assessment of risk factors, early detection of disease and high-risk individuals in health check-ups provided in non-health settings
- Enforce health impact assessment of goods using Health Impact Assessment (HIA), a practical approach used to judge the potential health effects of a policy, programme or project on a population, particularly on vulnerable or disadvantaged groups. [https://www.who.int/tools/health-impact-assessments#:~:text=Health%20Impact%20Assessment%20\(HIA\)%20is,on%20vulnerable%20or%20disadvantaged%20groups](https://www.who.int/tools/health-impact-assessments#:~:text=Health%20Impact%20Assessment%20(HIA)%20is,on%20vulnerable%20or%20disadvantaged%20groups).
- Enforce of the recommendations on the marketing of foods and non-alcoholic beverages to children <https://www.who.int/publications/i/item/9789241500210>

Any feedback on Strategic Direction 4?

Strategic direction 5: Promote equitable digital systems that serve as public utilities, contribute to social cohesion and are free of commercial interest

Digital and technological transformation can create new opportunities for social interactions, health literacy and knowledge-sharing and more effective, efficient service provision. Some features of digital systems and digital exclusion can, however, create isolation and exacerbate inequity. Health and well-being of the people may be jeopardized by increased time spent on digital activities and in virtual settings, from information overload, hate and bullying, the propagation of misinformation to marketing of unhealthy products and behaviour. A well-being society assesses and counteracts harm and disempowerment,

ensures equitable access and harnesses the potential of technology for human beings and the planet to flourish.

Policy orientations

- Apply regulation to control disinformation/misinformation and social disruptions
- Develop interventions to enhance and measure levels of population health literacy
- Increase investment in digital literacy
- Promote media literacy
- Enhance legislations on digital communication and information that protect personal data and reduces vulnerability

Any feedback on Strategic Direction 5?

IV. Implementation and monitoring

The following implementation plan introduces five key actions for Member States to shape and sustain health promotion for healthier populations.

Action 1: Adopting a health promotion system approach for health and well-being

It is important to adopt a health promotion system approach to drive development of the institutional and systemic capacity that are needed to implement and adopt health promotion policies, and also to stimulate innovation and knowledge to nurture related learning and resilience in health systems and societies. Addressing health challenges from a systems perspective requires involvement of researchers, decision-makers, communities and practitioners at all levels to build essential partnerships across disciplines and sectors. Implementing this action plan must, therefore, involve partners from beyond the health sector and reach out to heads of government, parliamentarians, mayors, business leaders as well as citizens.

All policy fields, not only health, are reforming ways of working and are experimenting with new approaches at the global, regional, national and local levels. This ongoing and broad-based shift in policymaking must be acknowledged if whole-of-government and whole-of-society approaches for health are to be put in place. Health promotion provides mechanisms to ensure that different sectors are better aligned and coordinated as part of these forms of smart governance. For example, applying health impact assessments as part of health promotion helps countries to judge whether innovations are conducive to support people's coping and thriving, and also guides tailored solutions that match identified needs.

Member States can adopt a health promotion system approach for health and well-being by:

- implementing policy frameworks for health promotion;
- institutionalizing health promotion as part of public health systems and beyond;
- adopting the well-being agenda to meet the needs of all, within the means of the planet;
- developing good governance mechanisms for health and well-being;
- implementing health promotion through co-creation, multisectoral and multi-layered approaches that are applied within the boundaries of the planet.

Action 2: Develop investments and policy to create conducive environments for health including making healthy choices easier choices and reducing risk exposure

When seen alongside the macro-level trends of ageing societies, rapid urbanization and changes in the way people live, learn and work, health promotion provides a catalyst for the creation of environments that are conducive to people's well-being. The WHO settings approach addresses the rapidly changing living, working and learning conditions people experience, and their ability to balance different roles and responsibilities. Based on ecological and whole-systems thinking, the settings approach stipulates important health promotion principles and values of integration, participation, empowerment, context and

knowledge-based development. Importantly, healthy settings encourage people to voice their ideas, and provide mechanisms to understand and mediate the varying interests of all those having a stake in their shared everyday realities. Active partnership can support improved infrastructure that facilitates healthier choices. For example, collaboration across the sports and transport sectors can help to develop exercise facilities, bike lanes, parks, etc. in support of active commuting and leisure time.

Market forces alone are not able to reduce the burden of diseases and inequities in health. In many countries, and between countries, the opportunities for making healthy decisions are limited and unequal, and it is vital to ensure that people are empowered and assisted to make healthier choices. Partnerships between the public and private sector, that build on health promotion principles, are essential to facilitate healthier environments and products, and to reduce the impact of harmful ones. Examples include raising taxes on alcohol and/or unhealthy food and beverages, reducing the amount of smuggled and counterfeit tobacco products, and restricting the marketing of unhealthy foods to children.

Member States can invest in healthy settings and conducive environments by:

- making healthier choices easier, based on health promotion principles;
- encouraging healthier investments in the public and private sectors;
- implementing fiscal policies as a health promotion strategy to reduce the use of unhealthy products;
- developing safe and enabling digital environments;
- reducing the impact of mis- and disinformation on health and well-being.

Action 3: Increase health literacy and foster health citizenship

Health literacy represents the personal competencies and organizational structures, resources and commitment that enable people to access, understand, appraise and use information and services to promote and maintain good health. Health literacy is critical for informed decision-making and self-empowerment of people and communities. It is founded on inclusive and equitable access to quality education and life-long learning and is an observable outcome of health education. To promote health literacy all information providers, including government, civil society and health services, should support access for all people to trustworthy information in forms that are understandable and actionable.

Health is a key component of modern citizenship and impacts all people. The attitudes and behaviour that are pursued by citizens are deeply intertwined and health is directly tied to the society created by citizens themselves through governance and daily living. The devastating impacts of global health crises and deep health inequalities have shown that the choices people and decision-makers make can have profound effects on populations' health and well-being, both locally and globally. Health promotion underpins a new social contract that supports people' rights to health and equips them with health literacy and sense of community to understand their role in society for the healthy living of people and planet.

Citizenship and health are closely related. Good health is associated to active citizenship, a home, a job or opportunity to make a sustainable living. In turn, an active citizen promotes the quality of life in a community by developing a combination of knowledge, skills, values and motivation to work to make a difference in the society for the public good. Essentially, active citizenry are members of society who can take charge of their future and are the agents of what they want to happen, to continue and to change in their communities. However, many are not aware of this potential, which is why health citizenship needs further development through health promotion.

Member States can increase health literacy and foster health citizenship by:

- increasing health literacy capacity at systemic, organizational and population levels in partnership with relevant stakeholders;
- increasing health literacy and other forms of literacy (e.g. digital literacy, media literacy, financial literacy, food literacy, physical literacy, etc.) so citizens are enabled to live healthier and more sustainable lives;
- investing in health promotion to improve life skills and civic literacy of populations.

Action 4: Enhance community engagement, inclusion and social capital

Although a lack of connection and inclusion may have inevitable consequences for many population groups, the health promotion approach can nevertheless be used to build resilience, enhance community engagement and strengthen social capital.

Social capital refers to established networks of relationships and reciprocity norms, values and understandings within a community that facilitate cooperation within or among groups. It includes social ties to, for instance, networks of family, friends and neighbours, as well as the shared values such as respect for people's safety and security. The combined impacts of such networks and understandings engender trust that, in turn, enables people to work together and cooperate towards shared goals. In this light, social capital also reflects the degree to which people are actively engaged with local organizations, community projects, political activity, as well as philanthropic actions. New evidence connects social capital to higher levels of happiness at both the individual and community levels.

Inclusion is demonstrated in cultures that connect each individual to a community, organization, or society at large; it encourages collaboration, flexibility and fairness; and leverages diversity to enable all individuals to participate and contribute to their full potential. Around the world, people are mobilized to join digital protests, demonstrations and other forms of direct action to fight for social inclusion. The social contract between communities and governments is under pressure and governments are increasingly being held accountable for their actions and treatments against given population groups.

Health promotion strengthens community participation in a constructive manner. Community engagement comprises the processes of working collaboratively with and through groups of people affiliated by geographic proximity, special interest, or related situations to address issues affecting the well-being of those people. It is a powerful vehicle for bringing about environmental and behavioural change aimed at improving the health of the community and its members. It often involves partnerships and coalitions formed to help leverage resources and influence systems, change relationships among partners, and serve as catalysts for changing policies, programmes and practices.

Member States can increase community engagement, inclusion and social capital by:

- using health promotion as a lever to build human, social and environmental capital to advance health and resilience in populations;
- applying health promotion strategies to strengthen social inclusion for people to take part in society, in particular those who are disadvantaged;
- strengthening community participation and development to improve health and well-being.

Action 5: Developing health promotion institutional capacity and discipline

Over the past few decades health promotion has become an acknowledged multi-disciplinary field of expertise that is grounded in sociology, psychology, education and epidemiology, and to a lesser degree in social policy, communications, marketing, politics, ethics and genetics. It is referred to as the “critical conscience of public health” due to its strong emphasis on autonomy, participation and empowerment among both individuals and their communities.

Including health promotion as part of public health capacity building allows a shift of focus from directly influencing the health of a population towards enabling systems and networks that promote health in self-determined and sustainable ways. This can help to enhance, prolong and multiply the health effects of resulting actions. Strengthening health promotion capacity requires a systemic focus on resources, organizational structures, workforce, partnerships, leadership and governance, knowledge development, technology and innovation, people-centeredness and the relevant country-specific and/or local context.

Successful implementation of effective health promotion requires investment in recruiting and/or strengthening a diverse, skilled and knowledgeable health promotion workforce, training and workforce development, including for specialists, generalists, and managers. Efforts are needed to recruit professionals who identify with underrepresented communities and contexts. Health promotion capacity development also includes strengthening academic and institutional work on health promotion as part of public health systems.

Member States can develop the health promotion institutional capacity and discipline by:

- reskilling and upskilling health promotion capacity as an integral part of public health systems;
- integrating the theory and practice of health promotion into school curricula, training of teachers and health personnel;
- promoting leadership training.

While an implementation and monitoring plan is currently developed, it will depend on the refinement of the strategic directions of the Framework. Do you have any feedback on the implementation and monitoring plan for the Framework?

V. Way forward

The way forward is to transition to more sustainable, equitable societies and to learn from countries, regions, cities, communities and cultures – especially indigenous cultures – how to create more sustainable, equitable societies. WHO will support this transition by bringing all actors together to realize the vision of well-being societies, collect evidence and technically support its Member States and partners in the implementation of this Framework. Health and well-being depend on the actions of everyone in

society. This Framework calls upon nongovernmental and civic organizations, academia, business, governments, international organizations and all concerned to engage in partnerships for decisive implementation of strategies for health and well-being. Together this will drive the transformation towards well-being societies in all countries, leaving no one behind.

While this proposed Framework on well-being is global in scope the call is to translate and transform the aspirations into national and local actions within relevant social, economic and political contexts. Importantly, the relevant policy and programmatic responses addressing the actions in this Global Framework on Well-being should be selected according to country context and tailored to meet the needs of different subnational jurisdictions and subpopulations. Each country is recommended to assess its own needs to identify gaps and opportunities to mainstream well-being into the current governance systems and strengthen its capacity to apply health promotion.

Any feedback on the Way forward section, or on future directions in general?

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VI. Useful References

(To be completed)

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- ⁱ WHO. Declaration of Alma-Ata. 1978. Available from:
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