

Playing by the Rules: Legislating Health in All Policies

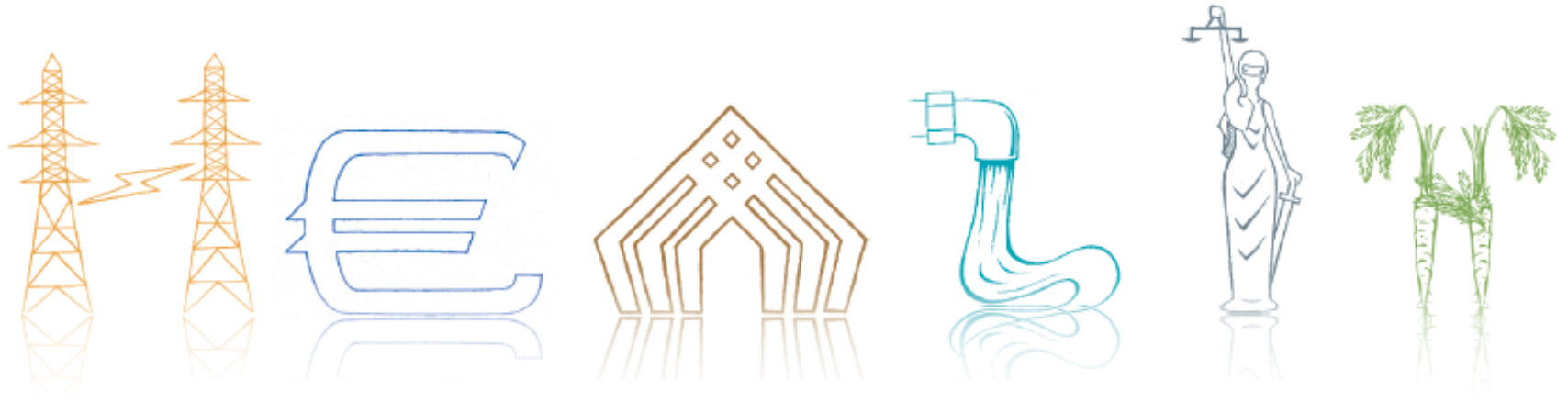
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Health in All Policies

(adapted from World Health Organization, 2013)





Health in All Policies

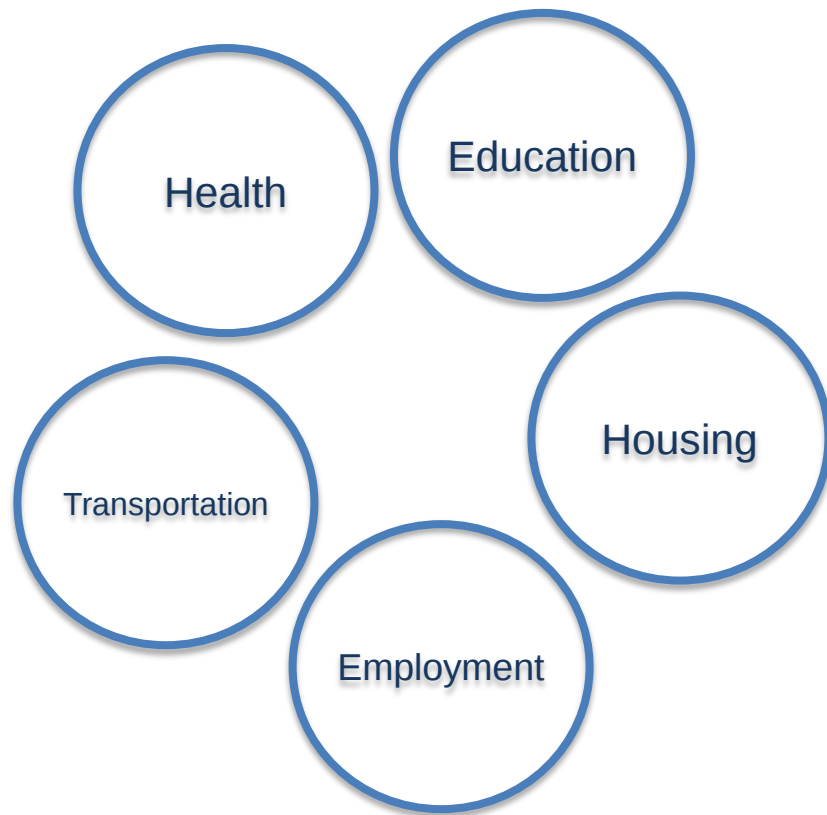
1. “Intersectoral action” for health and equity that is durable and maybe even systematic
2. Policy coordination across government levels
3. Focus beyond the health *care* sector
4. Evidence-informed policy-making



HiAP as **joined-up governance**

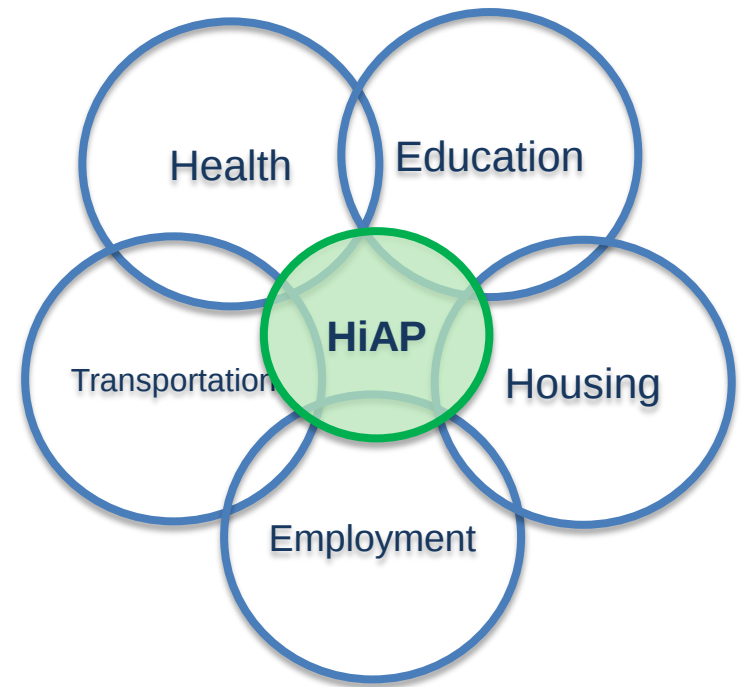
Policy “silos”

- Unique budgets
- Unique mandates



Joined-up governance

- Shared budgets
- Overlapping mandates



Engaging Sectors in HiAP

HiAP relies on the participation of health and non-health sectors.

Has legislating HiAP facilitated sectoral participation?

How has the design of HiAP influenced its implementation?



Multiple Case Study

1. Conceptual Framework
2. Two phases: 2012 (3 cases) and 2015 (6 cases)
 - ❖ Revised conceptual framework
3. Collect data for each case
 - ❖ Key informant interviews & literature
4. Analyze and synthesize data
 - ❖ Evaluate *how* and *why* sectors participate in HiAP
 - ❖ Context-mechanism-outcome configurations



	Case	HiAP Mandate (Period of Analysis)	# of Informants	Literature Reviewed
Phase 1	Quebec*	<i>Public Health Act, Section 54 (2002-2012)</i>	14	30
	South Australia**	<i>Health in All Policies (2007-2012)</i>	14	65
	Sweden*	<i>Public Health Objective Bill (2003-2012)</i>	14	24
Phase 2	California [†]	<i>HiAP Task Force (2010-2015)</i>	9	25
	Ecuador	<i>Buen Vivir (2009-2015)</i>	17	25
	Finland	<i>Health 2015 (2001-2015)</i>	10	23
	Norway**	<i>National Strategy to Reduce Social Inequalities in Health (2007-2015)</i>	13	28
	Scotland	<i>Equally Well (2008-2015)</i>	15	52
	Thailand*	<i>National Health Act (2007-2015)</i>	13	45

*Legislation mandating HiAP

**Recent legislation mandating HiAP

[†]Executive Order



Findings: Legislation's Impact

- Legislation occasionally facilitated buy-in from sectors (Quebec, Thailand)
- Legislation did not strongly influence implementation (Sweden)
- Demonstrated HiAP was a priority
- Other ways to facilitate implementation...



Findings: Policy Design

- Centralized coordination
 - ❖ Avoiding “health imperialism” (Ecuador, Quebec)
- Clarity of objectives, goals, responsibilities
 - ❖ Sweden, Ecuador
- Clarity of tools (particularly HIA)



Findings: Policy Design (cont'd)

- Creation/use of monitoring bodies
- Financing – often limited or ad hoc



Factors Outside of Policy Design

- Context matters
- Sectoral experience with intersectoral work
- Political and sectoral culture
- Power struggles over jurisdiction (between sectors and levels of government)
- Leadership



Sparking Solutions

- Legislating HiAP is not necessary, but...
 - Clear mandate describing goals and sectoral responsibilities
 - Sustainable committee
 - Monitoring body (arms-length)



HARMONICS

The logo for HARMONICS features the word in large, orange, sans-serif capital letters. The letter 'O' is replaced by a black magnifying glass icon. Inside the lens of the magnifying glass is a small bar chart with three bars of increasing height, colored blue, light blue, and teal.

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Thank you!

<http://www.crich.ca/hiap>

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