

Regional Strategy for Health Promotion

Regional Consultation, SEAR

**Implementation of the Bangkok Charter for Health Promotion in a
Globalized World: experience & challenges**

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The BCHP

The added values:

- Reaffirm the urgent need to reduce health inequities through addressing the determinants of health in a globalized world
- Identify four commitments as key result areas
- Expand the 5 Ottawa Action Areas
- Call for conscientious effort to report progress



Four commitments

To make the promotion of health

- central to the development agenda
- a core responsibility for all of government
- a key focus of communities and civil society
- a requirement for good corporate practice



Strategies for strengthening health promotion in a globalized world

In addition to the 5 Ottawa Action Areas

- Advocate for health based on human rights and solidarity
- Invest in sustainable HP
- Build institutional capacity to promote health
- Regulate and legislate for health
- Partner and build alliances with all sectors



Key components of the implementation framework

- Provide a set of priorities for action
- Recommend a set of models and methods for practice
- Identify a set of benchmarks for reporting progress

Pre-requisite: based on country experience



Key issues in the fulfilment of the four commitments

- What development issues should HP engage in and how?
- How to use a whole of government approach to promote health?
- Whether or not mechanisms and processes need to be put in place for NGOs to build institutional capacity to promote health and respond to global issues that affect health and if so, how?
- How best can the corporate sector be engaged to reduce the harmful effects of trade, products services and marketing?
- What are the benchmarks for reporting progress?



Models and methods for strengthening health promotion

Examples

- Investment in health promotion
- Capacity building to promote health



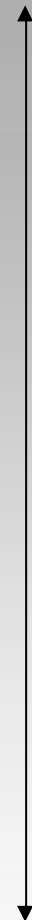
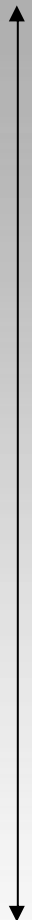
Financial investment in HP

- Special levy on products
- Mandatory funding from general revenue
- Payments from health insurance funds
- Payments from social insurance schemes
- A set percentage from national health budget



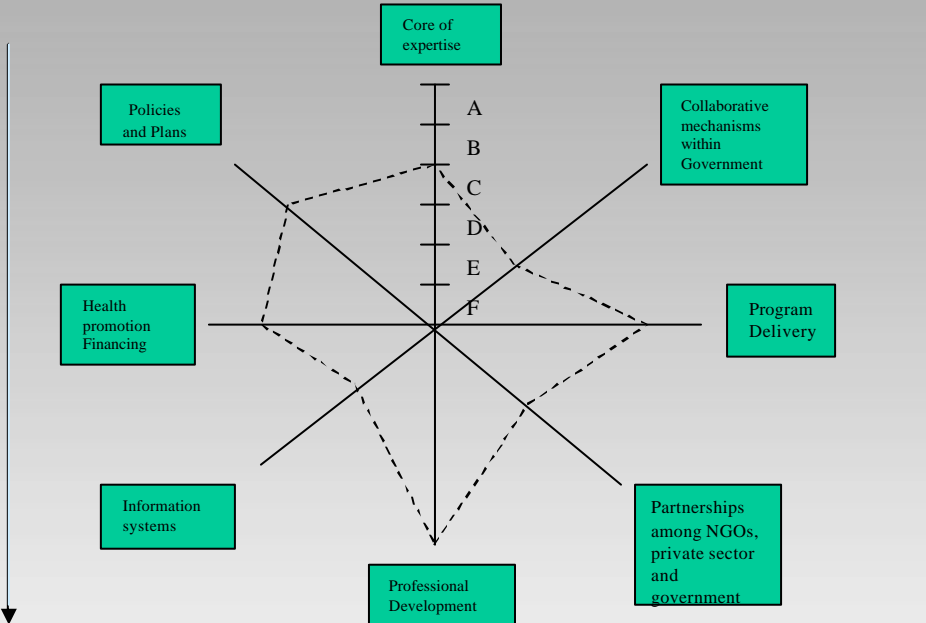
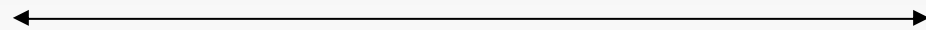
Policy focus
Within government

Partnership focus
Within government



Policy focus
Outside government

Partnership focus
Outside government



Challenges

- Need for evidence based interventions
e.g. in reducing achievement and health gaps between the "rich" and "poor"; youth unemployment and social exclusion among migrants and minority groups
- A new focus for institutional capacity
e.g. in workforce development - shift to targeting underlying determinants, organizational behaviour and social and political sciences



What's next

- Look at the experience and challenges of the Charter implementation in low and middle income countries
- Invite 10-12 countries of different levels of development from all 6 WHO regions to develop their implementation framework
- Invite these countries to take part in a technical meeting to share experience and examine the extent to which their experience can be used for the development of the global framework



**Thank you and
Open discussion**

