Health is Global:

An outcomes framework for global health 2011-2015

HM Government

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Summary

1. This Government believes our international engagement must be focused and strategic. We need to assure the UK's security and prosperity at home, and UK citizens' interests overseas. In doing so, we cannot pretend to work in isolation: we depend on the economic development, stability and security of the rest of the world, and on key relationships with countries and organisations. This is particularly the case for our relationships with the emerging powers.

2. If the UK is to protect the health of the population, harness the benefits of globalisation and make the most of its contribution to health and development across the world, we need a cross-Government strategic approach to global health.

3. Starting with the previous Government's publication "Health is Global – a UK Government Strategy 2008-2013"[1] and the recommendations from the first independent review[2], we have developed an outcomes framework to support the next phase of the strategy. It reaffirms a set of guiding principles, focuses our efforts towards achieving a set of twelve high-level global health outcomes by 2015 and will be underpinned across Government by departments' own delivery plans.

1 United Kingdom (2008). Health is global: UK Government Strategy 2008-13. London, Department of Health

2 Mott MacDonald (2010). Annual independent review of the UK Government's Global Health Strategy. Working with Brazil, Russia, India, China & South Africa

Context

4. Global health refers to the range of health issues influenced by factors that extend beyond state borders. This includes preparedness for pandemic influenza and emerging infections, climate change, international development and a worldwide healthcare industry that is worth more than US$3 trillion a year.[1]

5. Global health interacts with all the core functions of foreign policy: achieving national and global security, creating economic wealth, supporting development in low-income countries and promoting human dignity through the protection of human rights and the delivery of humanitarian assistance.[3]

6. The UK was the first nation to publish, in September 2008, a cross-Government strategy for global health, "Health is Global - a UK Government strategy 2008-2013". It aimed to set out how Government departments should work together coherently to improve health in the UK and overseas. Internationally, the strategy is regarded as an example of good practice by several countries and institutions, many of whom have used it to help drive their own strategies.[4]

7. Much has changed since the 2008 publication. In particular, the global economic crisis has gone deeper, and reached further, than many people had anticipated. Power and opportunity is shifting to the countries of the East and South, increasing the importance of the emerging powers of Brazil, India, China and other parts of Asia and to increasingly significant economies such as Turkey and Indonesia. Closer to home, this Government has signalled the need for a radical reprioritisation and refocusing of all government activities.

8. In terms of our activities in global health, the recent annual review of "Health is Global" provides a helpful guide[2]. In addition to findings specific to our work with emerging economies, which was the chosen theme of the review, it made substantial recommendations about the implementation of the strategy. These included setting clearer priorities for action, better communication across Government of key messages and ensuring real accountability through effective senior leadership and a clear governance structure.

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[3] United Nations General Assembly (2009). Global health and foreign policy: strategic opportunities and challenges. Note by the Secretary-General. New York, United Nations (document A/64/365, www.who.int/entity/trade/foreignpolicy/FPGH.pdf).

[4] For example, the European Commission used the strategy as a blueprint for developing its Communication on Global Health, which was endorsed by Member States in Council conclusions adopted in May 2010. http://ec.europa.eu/development/icenter/repository/COMM_PDF_COM_2010_0128_EN.PDF

9. Responding to these recommendations, we have developed an outcomes framework that reaffirms a set of guiding principles and focuses our efforts on three areas for action:

    - Global health security
    - International development
    - Trade for better health

10. The outcomes framework looks to support this Government's priorities on foreign policy[5], international aid commitments[6] and improving the UK's population health outcomes to be amongst the best in the world.[7] The process leading to the development of the outcomes framework is summarised in Annex A.

[5] UK Foreign and Commonwealth Office (2010). Business Plan for 2011- 2015.
[6] UK Department for International Development (2010). Business Plan 2011-2015.
[7] UK Department of Health (2010). Business Plan 2011-2015.

Health is Global – an outcomes framework

Guiding Principles

11. The refreshed strategy is underpinned by ten guiding principles, altered only slightly since the original strategy, which we will seek to embed in all of our international work and relationships in health.

The ten guiding principles are that we will:

1. Promote health equity within and between countries through our foreign and domestic policies, particularly through action on the social determinants of health.

2. Promote outcomes on global health that support the achievement of the Millennium Development Goals (MDGs) and the MDGs Call for Action.

3. Protect the health of the UK proactively, by tackling health challenges that begin outside our borders.

4. Learn from other countries' policies and experience in order to improve the health and well-being of the UK population and the way we deliver healthcare.

5. Base our global health policies and practice on sound evidence, especially public health evidence, and work with others to develop evidence where it does not exist.

6. Set out to do no harm and, as far as feasible, evaluate the impact of our domestic and foreign policies on global health to ensure that our intention is fulfilled.

7. Work for strong and effective leadership on global health through strengthened and reformed international institutions such as the World Health Organisation (WHO).

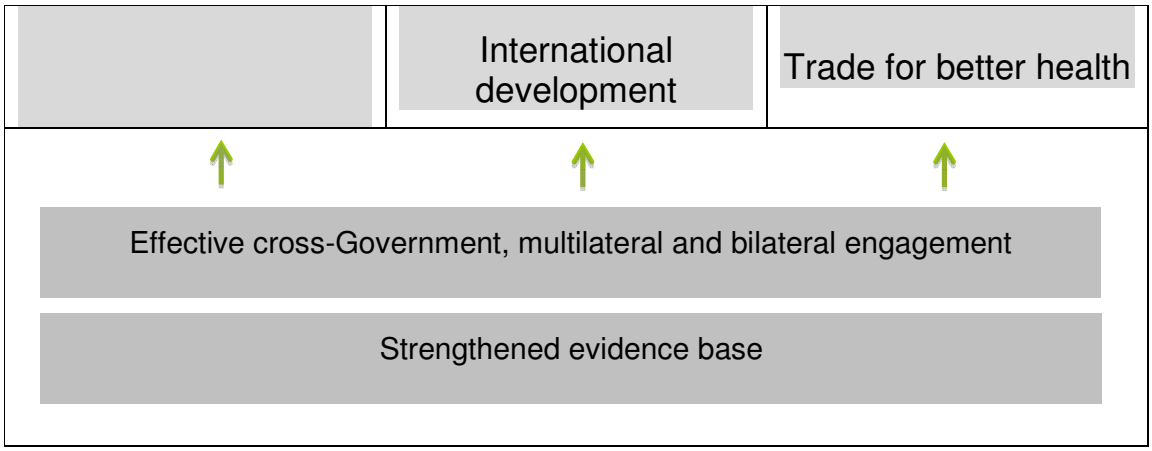
8. Work in partnership with other governments, multilateral agencies, civil society and business in pursuit of our objectives.

9. Ensure that the effects of foreign and domestic policies on global health are much more explicit and that we are transparent about where the objectives of different policies may conflict.

10. Use health as an agent for good in foreign policy, recognising that improving the health of the world's population can make a strong contribution towards promoting a low-carbon, high-growth global economy.

Areas for Action

12. The five areas of work set out in the original strategy were useful as broad groupings for the very broad range of commitments made. However, if we are to embed an approach that is focused on achieving outcomes and not on process, we have to prioritise what we see as the three main areas for action.



13. Across all three areas for action, we have identified twelve high-level outcomes that we want to achieve by 2015, set out in the sections that follow.

14. To better reflect the fact that the use of evidence is one of the guiding principles, we are integrating research efforts across all three areas for action. We will continually strive to enhance the extent to which we base policy on evidence. We also believe this is the right approach to maintain and develop the UK's role as a global leader in research and innovation for health, well being and development.

15. In each of the three areas, we will ensure that our engagement in global health also contributes to safeguarding the UK's security and prosperity and supporting the NHS to deliver world-class outcomes.[8]

[8] For example, international comparisons work has been used in the development of the NHS Outcomes Framework 2011/12. http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/@ps/documents/digitalasset/dh_123138.pdf

Our Vision for Global Health - Outcomes for 2015

16. The twelve outcomes under the three areas for action are set out here. Focusing on these outcomes, rather than specific process-driven "we wills" will allow us to look to lead Departments' own annual planning processes to define measurable milestones each year. We will use these to monitor progress towards achieving the outcomes. The responsibilities for leading on and supporting the achievement of each of the outcomes are set out in Annex B.

Area for Action 1: Global health security

17. A wide range of health security threats transcend international boundaries. Examples include emerging epidemic and pandemic infections, and the health consequences of poverty, wars and conflicts, climate change, natural catastrophes and man-made disasters. The UK and the rest of the world must be prepared to better predict, avoid and respond to these global health threats.

Outcomes we want to achieve by 2015	
1	MDGs - Food and water security • A greater proportion of the world's people will enjoy improved food and water security. Co-ordinated international efforts to increase agricultural productivity in developing countries, in an environmentally sustainable way, will have raised food security and improved nutrition for the most vulnerable.
2	Climate change • Low and middle-income countries will be supported to assess and address their health vulnerability in relation to climate change.
3	Health and conflict • Reduced humanitarian and health impact of conflict.
4	Emergency preparedness • The UK and the rest of the world will be better able to predict, avoid and respond to emerging global health threats, including epidemic and pandemic infections, natural disasters and bioterrorism.
5	Research • There will be a deeper scientific understanding of the effects on health of changes in climate and water and food resources, and we will use this to inform options for action.

Area for Action 2: International development

18. This Government is determined to help reduce the inequalities of opportunity we see around the world today. We will continue to honour the UK's international commitments, in ways that allow us to maximise the impact of our aid budget. Our primary focus must remain on working towards the MDGs and achieving the targets set for 2015. Looking ahead, one of the greatest challenges will be how we maintain this focus whilst recognising the increasing global burden of non-communicable diseases.

Outcomes we want to achieve by 2015	
6	MDGs - Health systems and delivery • To combat HIV/AIDS, tuberculosis (TB), malaria and improve reproductive, maternal, newborn and child health, resources will be used to support health systems strengthening to ensure greater coverage and access to quality essential health services that are safe, effective and efficient. • In moving to reduce the global gap in healthcare workers, the balance of healthcare workers in individual countries (losses and gains) should have a net positive effect on developing countries and economies in transition.
7	Non-communicable diseases • Stronger integrated strategies and actions, and effective support from international agencies, for tackling and preventing some non-communicable diseases (such as heart disease, cancer and mental health) and their drivers (obesity and diet, substance abuse, alcohol and smoking, pollution etc) as well as violence and injury (including self-inflicted injury, gender based violence, and road traffic accidents) in low and middle-income countries.
8	Learning from other countries • Improving the UK's population health outcomes to be amongst the best in the world through learning from international experience.
9	Research • Better coordination of UK and European Union (EU) global health research. • Enhanced, low-cost access to research knowledge for researchers and policy makers in developing countries, making use of the emerging knowledge on strengthening evidence-policy linkages in developing countries. Appropriate research products will be more available to end users, for example, through electronic media.

Area for Action 3: Trade for better health

19. Trade, health and development are closely interlinked, whether we look at, for example, the impact of global trade[9] or the factors governing access to essential medicines.

20. We want to enhance the UK as a market leader in well being, health services and medical products. Building on our role as a leader in the life sciences and a centre for innovation and competitiveness, we want to promote the best in British healthcare. Both private and NHS domestic organisations are in demand for their services and expertise across the world. These activities not only bring significant benefits to the UK economy, but also make an effective contribution to health systems in other countries and improve multilateral capacity for health security.

Outcomes we want to achieve by 2015

10 MDGs - Access to medicines

- Increased access to safe, high-quality and affordable treatments and medicines, including for HIV/AIDS, malaria and TB particularly for the world's poorest through strengthening access to markets and safeguarding transparent provision.

11 Trade and investment

- UK life sciences and healthcare sectors make the most of global trade opportunities, particularly in key emerging markets (BRIC[10], CIVETS[11] and the Middle East); and support the growth of foreign direct investment in the life sciences and healthcare sectors in the UK.

12 Research

- Investment and operational partnerships to address critical challenges in scaling up innovation and evidence-based interventions to achieve universal coverage, especially for the poor and in hard to reach areas.

[9] The recent Department for Business, Innovation and Skills (BIS) White Paper, Trade and Investment for Growth, explores some of these issues in more detail (http://www.bis.gov.uk/assets/biscore/international-trade-investment-and-development/docs/t/11-717-trade-investment-for-growth.pdf)
[10] BRIC – Brazil, Russia, India, China
[11] CIVETS- Columbia, Indonesia, Vietnam, Egypt, Turkey, South Africa

Health is Global – Implementation

Working in partnership

21. To achieve our goals requires us to work:
    - with partners across Government, with non-governmental organisations and industry
    - bilaterally with key countries
    - multilaterally with a range of organisations from United Nations (UN) institutions, the EU and the OECD[12], to the G8 and G20.

Governmental and non-governmental partners

22. The breadth of global health issues, many of which lie outside the traditional health sector, continue to highlight the need for a coherent and consistent cross-Government approach. To maintain effective cross-Government working, especially in times of scarce resources, we need to identify when and where departments can add value to one another's efforts. In addition, we will ensure key messages from the strategy are communicated effectively across Government and to our partners.

23. We aim, even given pressures on government spending in this period, to honour the commitment made at the launch of the original strategy, to hold an annual partners' forum to review progress, set out new challenges and identify opportunities for collaboration. The support and expertise provided in the development of the original strategy and the success of the first partners' forum reinforce the value of this collaborative approach with academic institutions, non-governmental organisations, global health partnerships and industry.

Bilateral relationships

24. We have set out elsewhere our intention to be an active member of the global community, promoting our national interests while championing the values of freedom, fairness and responsibility.[13] The real opportunity for action is through engagement with emerging powers of the world. Building stronger bilateral relationships and working together as networks of nations will support stability, security and prosperity in our own economies and in the wider world.[14] As the annual review noted, we could do much

[12] OECD – Organisation for Economic Co-operation and Development
[13] United Kingdom. (2010) The Foreign Secretary, William Hague, series of four speeches articulating the Government's approach to foreign policy. http://www.fco.gov.uk/en/news/speeches-and-transcripts/speeches/

[14] United Kingdom. HM Government (2010) The Coalition: our programme for government www.cabinetoffice.gov.uk/media/409088/pfg_coalition.pdf

more. Huge leaps are being made all the time through the actions of key countries regionally and at a global level. We therefore believe it to be entirely appropriate to use this strategy to inform those relationships and to use those relationships as a lens through which to monitor the progress being made in global health.

Multilateral relationships

25. Multilateral institutions such as the UN and the EU remain crucial in improving global health so we need to remain committed to making sure they are fit to meet the health challenges of the 21st century. For example, through the WHO UK institutional strategy[15], the UK has increased the coherence and effectiveness of its cross-Government engagement with WHO. We need to continue this partnership to support WHO to be even more effective and efficient and fulfil its role as a global leader in improving public health.

26. We recognise the importance of developing a coherent plan of work to enable the EU and its Member States to work together to contribute effectively to improving global health. We will therefore continue to play a leading role in developing the EU work on global health.

Governance and accountability

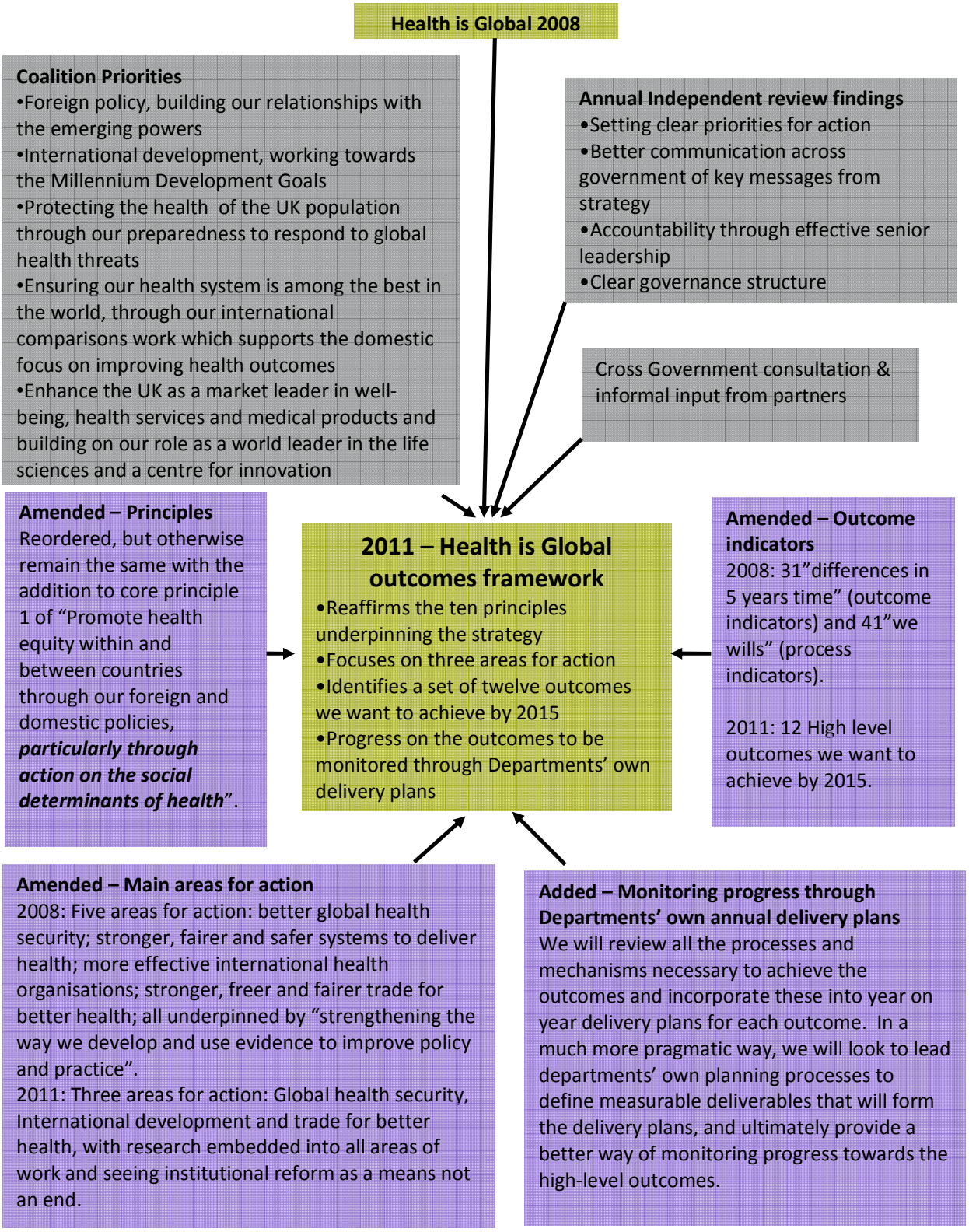
27. The annual review emphasised the importance of effective senior leadership and a strong governance structure to successfully implement the next phase of the strategy. In response to this, a strengthened cross-Government officials steering group will provide leadership, support coherence and consistency across departments, and track the progress towards the high-level outcomes, through departments' own deliverables.

[15] United Kingdom (2009). Department of Health. World Health Organisation, UK Institutional Strategy 2008–13

Conclusion

28. We have set out above our key principles and priorities for action in global health. This should allow us to work more effectively across Government to ensure we can fulfil our international obligations, reconcile potentially conflicting interests, and ensure the UK benefits from our engagement overseas. This outcomes framework is only part of the story. As work continues, therefore, we actively encourage input and debate from all our partners and look forward to an even stronger role for the UK in global health.

Annex A: Development of the framework



Annex B: Responsibilities for delivering Health is Global

Outcomes	Lead Department	Supporting Departments
Global health security		
1. MDGs - Food and water security A greater proportion of the world's people will enjoy improved food and water security. Co-ordinated international efforts to increase agricultural productivity in developing countries, in an environmentally sustainable way, will have raised food security and improved nutrition for the most vulnerable.	Department for International Development (DfID)	Department for Environment, Food and Rural Affairs (Defra), Department of Health (DH), Foreign and Commonwealth Office (FCO)
2. Climate Change Low and middle-income countries will be supported to assess and address their health vulnerability in relation to climate change	Department of Energy and Climate Change (DECC), DfID	DH, Defra
3. Health and Conflict Reduced humanitarian and health impact of conflict.	Ministry of Defence, DfID	DH, FCO
4. Emergency preparedness The UK and the rest of the world will be better able to predict, avoid and respond to emerging global health threats, including epidemic and pandemic infections, natural disasters and bioterrorism.	Cabinet Office	DECC, DfID, DH, FCO, Defra
5. Research There will be a deeper scientific understanding of the effects on health of changes in climate and water and food resources, and we will use this to inform options for action.	DfID, DECC, DH, Defra	

International Development		
6. MDGs - Health Systems and delivery To combat HIV/AIDS, Tuberculosis (TB), malaria and improve reproductive, maternal, newborn and child health, resources will be used to support health systems strengthening to ensure greater coverage and access to quality essential health services that are safe, effective and efficient. In moving to reduce the global gap in healthcare workers, the balance of healthcare workers in individual countries (losses and gains) should have a net positive effect on developing countries and economies in transition.	DfID, DH	Home Office
7. Non-communicable diseases Stronger integrated strategies and actions, and effective support from international agencies, for tackling and preventing some non-communicable diseases (such as heart disease, cancer and mental health) and their drivers (obesity and diet, substance abuse, alcohol and smoking, pollution etc) as well as violence and injury (including self-inflicted injury, gender based violence, and road traffic accidents) in low and middle-income countries.	DH	DfID, DECC, Defra, Department for Transport
8. Learning from other countries Improving the UK's population health outcomes to be amongst the best in the world through learning from international experience.	DH	
9. Research Better coordination of UK and EU global health research. Enhanced, low-cost access to research knowledge for researchers and policy makers in developing countries making use of the emerging knowledge on strengthening evidence-policy linkages in developing countries. Appropriate research products will be more available to end users, for example, through electronic media.	DfID	DH

Trade for better health		
10. MDGs - Access to medicines Increased access to safe, high-quality and affordable treatments and medicines, including for HIV/AIDS, malaria and TB, particularly for the world's poorest, through strengthening access to markets and safeguarding transparent provision.	DfID	Intellectual Property Office (IPO), DH, FCO
11. Trade and Investment UK life sciences and healthcare sectors make the most of global trade opportunities, particularly in key emerging markets (BRIC, CIVETS and the Middle East); and support the growth of foreign direct investment in the life sciences and healthcare sectors in the UK.	UKTI	DH, FCO
12. Research Investment and operational partnerships to address critical challenges in scaling up innovation and evidence-based interventions to achieve universal coverage, especially for the poor and in hard to reach areas.	DfID	IPO

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