

Draft strategy on the economics of health for all (2026–2030)¹

Introduction

1. Despite improvements in universal health coverage under Sustainable Development Goal 3 (Ensure healthy lives and well-being for all at all ages), more than half the global population still lacks access to essential health services, and one in four people experiences financial hardship due to out-of-pocket health costs.² Global poverty reduction and related indicators have stalled and one fifth of the world's population live in countries with high inequality.³
2. These challenges are unfolding in a world undergoing fundamental social, economic and environmental transformation. Rapid technological change, debt and fiscal constraints, altering demographics, increasing inequities, urbanization, the changing nature of work, and the climate crisis have profound implications for human health and well-being in every setting, and particularly for the poorest and most vulnerable.⁴ Economic systems can both hinder and help ensure the conditions necessary to achieve and sustain healthy, fairer and prosperous societies. Economic policies that support inclusive long-term growth and competitiveness are central to poverty reduction and sustainable financing of health systems.
3. Health, a state of complete physical, mental and social well-being, is one of the fundamental rights of every human being and a foundation for individual and collective flourishing. It enables people and societies to pursue the goals they value, while its realization depends, in part, on the conditions and resources shaped by economic systems. Shaping economies to achieve health for all is a foundation for sustainable and equitable development.

¹ An earlier version of this draft strategy was considered by the Executive Board at its 158th session in document EB158/31, Annex.

² WHO, International Bank for Reconstruction and Development and World Bank. [Tracking universal health coverage: 2023 Global monitoring report](#). Geneva: World Health Organization; 2023.

³ [Poverty, prosperity, and planet report 2024 – Pathways out of the polycrisis](#). Washington D.C.: World Bank; 2024 (accessed 27 October 2025).

⁴ [A global health strategy for 2025–2028: advancing equity and resilience in a turbulent world. Fourteenth General Programme of Work](#). Geneva: World Health Organization; 2025 (accessed 27 October 2025).

4. A transformative approach to building an economy that delivers health and well-being for all is needed.⁵ An economics of health for all approach views health and inclusive, sustainable economic development as interdependent and inseparable dimensions of societal progress. Such an approach is aligned with the “well-being economies” approach,⁶ which through cross-sectoral collaboration places health and well-being for all at the centre of development policy and finance, grounding economic policy and action in the values of communities and the principles of equity and sustainability. While an economics of health for all approach may involve long-term adjustments to economic policy, immediate actions are needed to drive meaningful progress, now and for generations to come.

Vision and goal

5. The vision of this draft strategy is a world in which the economy both serves and benefits from health for all.

6. This vision sees the economy as a people-centred system, designed to advance and benefit from the health of all, across generations. It recognizes that health and health systems are not merely costs to be contained but also essential investments for inclusive and resilient economies. It calls for aligning health and economic policies with the values of the populations they serve, and for mobilizing public and private investment towards building a sustainable, equitable and healthy society for both current and future generations.

7. The specific goal of this draft strategy is to support a transformative cross-sectoral policy agenda for the improvement of interconnected health and economic outcomes and enhance the overall well-being of populations.

8. Achievement of this goal requires orientating economic policy, institutions and investment towards maximizing the joint benefits to health (and health equity) and prosperity across generations, enabled by global, regional and domestic health and economic actors working together to achieve health and well-being for all.

9. Actions outlined in this strategy are intended as a menu of indicative options for Member States to consider, consistent with international rules, in accordance with their respective needs and in line with their national health priorities, capacities, resource availability and contexts.

Guiding principles and foundations

10. To achieve this vision and goal, the draft strategy was developed in accordance with the following principles, which may also guide the implementation of actions by Member States, partners and stakeholders, and the Secretariat.

- **People centred.** Economic policies and actions are designed with and for people, recognizing their diverse needs and lived experiences, and acknowledging the ability of individuals to have agency over their own care, treatment and welfare as a central aspect of health and well-being.

⁵ [Health for all: transforming economies to deliver what matters: final report of the WHO Council on the Economics of Health for All](#). Geneva: World Health Organization; 2023.

⁶ [Shifting together to well-being economies: investing in healthy, fairer, prosperous societies today](#). Copenhagen: WHO Regional Office for Europe; 2023 (accessed 27 October 2025).

- **Whole of government.** Reshaping economies to achieve health for all requires a whole-of-government response, both to engage finance ministries and support health ministries in ensuring that health for all becomes a common mission across government policy, as well as ensuring the coordination of intersectoral action to improve health.
- **Social participation.** People have opportunities to actively participate in policy and investment decisions that affect their lives. Inclusive, transparent and meaningful social participation across all layers of collective action builds trust and ensures that policies and services reflect the needs and aspirations of all communities, especially those most excluded.
- **Equity.** Health for all must be pursued through inclusive and equitable approaches, aligned with justice for all, and by recognizing factors that affect persons in vulnerable or marginalized situations, as well as socioeconomic health inequity.
- **Gender equality.** Economic systems and policies should actively promote equal rights, opportunities and outcomes for people regardless of gender, by addressing structural inequalities and enabling full and equitable participation in all spheres of life and across the life course.
- **Country led.** Sustainable development and progress towards health for all must be driven by country leadership with national and subnational governments and institutions at the centre of planning, decision-making and accountability using a whole-of-government approach. External support, both global and regional, should align with national health priorities, strengthen local capacity, and respect country contexts to ensure ownership, effectiveness and long-term impact.
- **Evidence informed.** Policy and actions should be grounded in the best available evidence and metrics on the relationship between health for all and financial, social, economic and environmental determinants by combining data, research and local knowledge to inform decisions responsive to policy needs and action. An evidence-informed approach values continuous learning, rigorous analysis, multidisciplinary collaboration, adaptability in the face of complex challenges, and commitment to impact.
- **Environmental sustainability.** Decisions and actions by governments and stakeholders must protect and sustain the natural environment for current and future generations.

11. Implementing an economics of health for all approach will require a governance framework that promotes coherence across economic and health policy, and alignment with diverse actors, including government, the private sector, academia and civil society, working together towards health for all goals. Such governance can help ensure that health impact is integrated into decision-making in all policy areas, recognizing that actions outside the health sector have a profound impact on health equity and outcomes.

12. Complex societal challenges, such as health for all goals, require bold, inspirational and measurable time-bound goals. Having a clear mission to achieve health for all can set a direction for solutions without prescribing a single pathway to success, thereby encouraging innovation and cross-sectoral collaboration. Missions must be co-created and delivered through broad-based collaboration, involving the public, private, academic and civil society sectors.^{7,8}

Strategic directions and framework for action

13. Building on these principles and foundations, the draft strategy proposes five strategic directions to achieve its goal: **Economic policy** for health for all; **Valuing and investing** in health for all; **Financing** health for all; **Capacity** for implementing an economics of health for all approach; and **Evidence** informing the implementation of an economics of health for all approach.

14. The following paragraphs describe the rationale for each strategic direction, together with actions for Member States, partners and stakeholders, and the Secretariat.

Strategic direction 1: Economic policy for health for all

15. Achieving health for all requires sustainable economic policies that promote and protect population health, reduce disparities and support long-term growth and competitiveness in economies. Economic policies such as tax, trade, industry, labour and social protection are among the most powerful and interconnected levers available to governments to influence economic systems, with consequences for health.

Actions for Member States

- Review and assess the impact of tax policy on health for all. Understanding the impact of tax systems on health and its distribution, and on revenue for health services, can inform the design of tax policies that both strengthen domestic revenue mobilization, protect health and promote social justice. In addition, when well-designed and implemented with consideration for both their potential benefits and unintended impacts on affected populations, excise taxes may help shift consumption patterns and generate both equitable health and fiscal gains.
- Integrate health for all considerations into trade policy. Governments can create enabling conditions to ensure health impact is considered and incorporated in trade policies. Various approaches may influence trade policy-making, including health impact assessments, and forming multicountry and civil society coalitions to protect and enhance access to essential health goods.⁹

⁷ Mazzucato M and Ryan-Collins J. [Putting value creation back into “public value”: from market-fixing to market-shaping](#). Journal of Economic Policy Reform, 25(4), 345–360 (accessed 27 October 2025).

⁸ Mazzucato M, Doyle S and Kuehn von Burgsdorff L. [Mission-oriented industrial strategy: global insights](#). UCL Institute for Innovation and Public Purpose, IIPP Policy Report No. 2024/09 (accessed 27 October 2025).

⁹ Townsend B, Tenni BF, Goldman S, Gleeson D. [Public health advocacy strategies to influence policy agendas: lessons from a narrative review of success in trade policy](#). Globalization and Health. 2023; 19:60 (accessed 27 October 2025).

- Design and implement industrial policy for health for all. Consideration may be given to influencing consumption patterns where industrial practices may be harmful. Health for all goals can catalyse cross-sectoral innovation and economic spillovers if governments orient industrial strategy around them.¹⁰ Through a mission-oriented framework, governments can support the health innovation ecosystem, consistent with international rules, and direct innovation towards public health priorities while working in partnership with private actors.¹¹ When health innovation is backed by significant public investment, as is often the case, governments may be able to use existing policy instruments to ensure public value.¹²
- Reform labour policy as it relates to the health labour force, and protect workers' health.^{13,14} Labour policies can promote decent work conditions, which are fundamental to well-being, productivity and the overall quality of services and outcomes, including in the health sector. Within the health and care sectors, reforms may also address workforce shortages and skills mismatches through reviews of the interaction between health, labour, education and trade policies, and impact assessments of public service wage bill constraints on health.¹⁵ The contribution of non-health workers in health facilities and informal or unpaid family care workers, predominantly women, in advancing health for all should be acknowledged. Employment and work practices should be assessed for their impact on health, particularly mental health, recognized as professional hazards and addressed to ensure that all workers, including those with mental health conditions, can participate and thrive in safe and healthy environments.
- Ensure social protection policies benefit individuals based on risks across the life course and people experiencing poverty and social exclusion. Universal social protection is key to achieving social justice and promoting inclusive growth, including protecting people during ill-health. It remains essential to ensure robust financial protection to prevent individuals and families from falling into poverty due to health-related costs.

Action for partners and stakeholders

- Support the development of economics of health for all policy frameworks and the application of health impact assessments to economic policies.

¹⁰ [Health for all: transforming economies to deliver what matters. Final report of the WHO Council on the Economics of Health for All](#). Geneva: World Health Organization; 2023.

¹¹ Mazzucato M and Kattel R. [Mission-oriented industrial strategy](#). Policy Brief Series: Insights on Industrial Development. Issue No.2 – March 2023. Geneva: UNIDO; 2023 (accessed 27 October 2025).

¹² [Governing health innovation for the common good – The WHO Council on the Economics of Health for All – Council Brief No. 1](#). Geneva: World Health Organization; 2021 (accessed 27 October 2025).

¹³ [The future of the care economy](#). White paper. Centre for the New Economy and Society – World Economic Forum. 2024 (accessed 27 October 2025).

¹⁴ [Fair share for health and care: gender and the undervaluation of health and care work](#). Geneva: World Health Organization; 2024 (accessed 27 October 2025).

¹⁵ [Working for health and growth: investing in the health workforce](#). Report of the High-Level Commission on Health Employment and Economic Growth. 2016.

Actions for the Secretariat

- Develop guidelines to address the impact of harmful commercial practices on health and health equity, including conflicts of interest.
- Provide technical support to Member States in designing and piloting policies that address the determinants of inequities in health and well-being among people and populations experiencing poverty and social exclusion.

Strategic direction 2: Value and invest in health for all

16. This strategic direction aims to direct public and private investment across health and other economic sectors towards the goal of maximizing well-being. The value of health for all is not captured simply through measuring aggregate health gain, but also requires measuring its distribution to ensure that spending, investment and innovation are geared towards improvements that most benefit wider societal well-being.

Actions for Member States

- Include health in dashboards used to monitor progress against societal objectives. Populations place substantial value on good health as one of multiple dimensions of societal progress. Societal progress and the relative importance of its dimensions can differ across populations according to demographic, economic, social and cultural characteristics and contexts. Governments may develop dashboards of multidimensional indicators, referring to well-being frameworks to not only track progress but also guide investment in health for all.^{16,17,18,19}
- Position health for all as a cornerstone of strategic planning and medium-term expenditure frameworks. Coordinate action across all levels of government through health in all policies and whole-of-government approaches, supplemented by active engagement with the private sector to ensure that health is fully integrated in development planning.²⁰
- Adapt investment frameworks to capture the value of health for all and mainstream health impact assessment across sectors. Comprehensive evaluation frameworks can assess the impact of investment on healthy lives. Participatory health impact assessments that include equity considerations can be integrated into economic and sectoral policy-

¹⁶ [Operational framework for monitoring social determinants of health equity](#). Geneva: World Health Organization; 2024 (accessed 27 October 2025).

¹⁷ [Valuing Health for All: Rethinking and building a whole-of-society approach – The WHO Council on the Economics of Health for all – Council Brief No. 3](#). Geneva: World Health Organization; 2022 (accessed 27 October 2025).

¹⁸ Jansen A, Wang R, Behrens P, Hoekstra R. [Beyond GDP: a review and conceptual framework for measuring sustainable and inclusive wellbeing](#). The Lancet Planetary Health. 2024; Volume 8, Issue 9 (accessed 27 October 2025).

¹⁹ [Creating an impactful and sustainable Wellbeing Economy for better public health](#). EuroHealthNet and Institute of Public Health; 2024. doi:10.14655/11971-1084919 (accessed 27 October 2025).

²⁰ Aftab W, Siddiqui FJ, Tasic H, Perveen S, Siddiqui S, Bhutta ZA. [Implementation of health and health-related sustainable development goals: progress, challenges and opportunities – a systematic literature review](#). BMJ Glob Health. 2020; Volume 5, Issue 8 (accessed 27 October 2025).

making alongside economic or environmental assessments to ensure health and health equity outcomes are systematically considered.

- Guide private investment in the health sector using clear societal impact taxonomies. Emerging trends of financialization of healthcare delivery²¹ warrant careful assessment of their effects on equity and progress towards health for all. A range of policy instruments can incentivize private sector investment in services that deliver societal value.
- Develop data and digital infrastructure for economics of health for all investment metrics and analytics. Strengthening digital national and local systems can enhance the availability, integration and use of data to inform evidence-based policies and investment decisions. Publicly available dashboards, underpinned by secure, ethical and inclusive digital architectures, can further promote accountability and facilitate community and societal engagement.

Action for partners and stakeholders

- Support Member States in building collaboration across investments and in the development and implementation of investment taxonomies for the economics of health for all.

Actions for the Secretariat

- Develop guidance for Member States to make the case for investment in health for all, including on informing taxonomies for classifying and guiding private investment.
- Provide support to Member States to identify, refine and adapt well-being metrics for use in measuring societal progress, including through the development of routine systems for indicator dashboard implementation and dissemination of country experiences.
- Support Member States in including health and health equity in economic decision-making, including through the development of technical tools for assessing the health and health equity impact of economic actions.
- Contribute to the work of the United Nations Expert Group on Well-Being Measurement, including the development of a framework for inclusive and sustainable well-being that integrates health considerations.

Strategic direction 3: Financing for health for all

17. This strategic direction proposes actions to strengthen both domestic and international financing for health for all, aimed at both increasing the quantity and improving the equity of such financing, in accordance, as appropriate, with the political declaration of the High-Level Meeting on universal health coverage (2023).

²¹ Hunter BM, McCoy D, Cordilha AC, Marriott A, Roy V, Stein F et al. [Private financial actors and financialisation in global health](#). United Nations University – International Institute for Global Health. 2025 (accessed 27 October 2025).

Actions for Member States

- Mobilize domestic resources for health for all. In many countries, domestic health resources remain insufficient to realize health for all goals. Developing a domestic health financing policy that supports the progressive realization of universal health coverage and health security is critical. Resource mobilization initiatives, such as earmarked taxes and national health insurance, must be assessed for fairness in terms of contribution, financial access and protection against financial hardship.
- Improve allocation of public financial resources through public financial management, including budgeting strategies that focus on priority indicators and outcomes, which can incorporate health improvement generated by all sectors. Health expenditure tracking systems can support public accountability and inform health policies.
- Improving the coordination and alignment of external funding with domestic funding can enhance the effectiveness and efficiency of external funding, and limit impact on the future debt service burden. The Lusaka Agenda is an example of a non-binding agreement supporting unified planning, budgeting and monitoring. Targeting external funding to achieve health equity, and on global public goods, can protect the health for all agenda temporarily, however countries should strive for fair and inclusive coalitions to generate long-term finance options.
- Improve the financing of health sciences and industrial innovation for social impact. Governments are active investors and shapers of science, technology and innovation for health; and some have built strong ecosystems for health sciences and industry. Through the sharing of experiences, joint financing and research initiatives and policy tools (such as tax credits, price caps, intellectual property sharing, consistent with international rules), governments can build capacities and create successful enterprise environments for fostering investment in the health sciences for social impact.

Action for partners and stakeholders

- Promote and support health financing policies that advance health for all.

Actions for the Secretariat

- Develop guidance to support Member States in mobilizing investment, including public, private, philanthropic and blended finance, and a diverse range of financial instruments, towards achieving health and well-being for all.
- Provide technical assistance to Member States in mobilizing more and better finance for health for all.
- Provide technical assistance to Member States in designing policies that promote additional investment in health sciences.

Strategic direction 4: Capacity for implementing an economics of health for all approach

18. The economics of health for all approach can benefit from a coalition of actors with new capacities. Health ministries and other health actors need to develop capacity in economics and health economics to effectively engage with economic actors. Critically, capacity needs to be strengthened to enable meaningful engagement across ministries, agencies and sectors.

Actions for Member States

- Assess existing capacities and develop a plan to strengthen the relevant technical capacities across the civil service. A thorough mapping and assessment of current capacities is essential to identify gaps and strengths, given the nature of the skills required, such as health economics, systems thinking and cross-sectoral collaboration.
- Integrate economics of health for all competencies into medical, public health and interdisciplinary education to prepare a new generation of skilled professionals at the intersection of health and economic policy.
- Connect expertise across sectors and governance levels by establishing observatories bringing together public institutions, academia, trade unions and civil society, and by integrating training on structural inequalities, health equity determinants and economic policy into civil service programmes.
- Develop dynamic institutional capabilities to strengthen governance in the economics of health for all.²² Implementing such an approach depends on public institutions capable of adapting, learning, coordinating and responding rapidly to evolving conditions.

Action for partners and stakeholders

- Support Member States to develop and enhance their capacities in economics of health for all.

Actions for the Secretariat

- In partnership with other actors, initiate the development of a framework to assess country capacities in the economics of health for all.
- Organize capacity-building and awareness raising initiatives on the risks of commercial practices for health for all to help authorities, communities and individuals to support actions on the determinants of health.
- Engage with private sector and health-aligned commercial actors to foster action on harmful commercial practices and health equity.

²² Mazzucato M and Kattel R. [Mission-oriented industrial strategy](#). Policy Brief Series: Insights on Industrial Development. Issue No. 2 – March 2023. Geneva: UNIDO; 2023 (accessed 27 October 2025).

Strategic direction 5: Evidence informing the implementation of an economics of health for all approach

19. The economics of health for all approach will require the generation of new evidence to understand the interaction between health and the economy.

Actions for Member States

- Engage stakeholders to define and implement a long-term research agenda, positioning an economics of health for all approach as a priority and mobilizing funding to fill critical knowledge gaps.
- Use datasets to generate evidence to inform the implementation of an economics of health for all approach. Exploring the relationships between health for all and economic systems requires stronger linkages between research capacity and datasets. Priority should be given to enabling cross-sectoral linkage of anonymized individual level databases, such as income tax, employment, social health insurance, and invalidity records, with contextual data sources, including geolocation, in order to better assess how economic activities, practices and policies affect health and its distribution. Special attention should be given to groups at higher risk or facing structural disadvantage, with equity an explicit dimension of analysis.
- Protect science and evidence informed policy-making relevant to the economics of health for all. Governments are invited to strengthen transparency, support independent research, invest in public research institutions and prevent conflicts of interest. Clear communication guidelines, media monitoring and support for evidence-based messaging are essential to counter disinformation. Engaging civil society and independent experts further ensures accountability and public trust in science informed policies.

Actions for partners and stakeholders

- Strengthen learning networks and research programmes for the economics of health for all approach.
- Conduct research to generate evidence on the impact of economic policies on health for all.

Actions for the Secretariat

- Further synthesize global evidence on the relationship between health, health systems and the economy.
- Participate in the development of a research agenda on the financialization of the healthcare sector to inform future global research and guidance.
- Facilitate information sharing on country experiences to strengthen learning networks for the economics of health for all approach.
- Provide support to Member States in generating evidence on health equity to inform the design and development of labour markets and social protection policies.

- Support Member States through sharing evidence and piloting the practical implementation of well-being budgeting approaches.
- Bring together stakeholders from multiple Member States across the health, finance and central bank sectors, to develop a long-term research and implementation agenda on modelling and the use of metrics that generate evidence for the health and economic benefits of policies and interventions.

Implementation, including monitoring and reporting

20. The guiding principles of the draft strategy also guide its implementation. To help achieve the objectives, it will be necessary to regularly monitor and report on the implementation of the draft strategy. A review of the progress made by Member States and other actors, for reporting in 2028, can help to identify whether there is a need to modify the draft strategy to better fit countries' needs.

21. The main purpose of monitoring and reporting is to ensure adequate implementation and to adapt the draft strategy, if needed. The role of the Secretariat in this regard is:

- to support Member States in the implementation and adaption of the draft strategy at the country level, including, subject to the availability of resources, the development of action plans for implementing an economics of health for all approach considering the menu of proposed actions.
- to organize meetings in Member States across the regions to identify and share experiences and lessons learned during implementation.
- to report to the Health Assembly in 2028 and 2030 on the implementation of the draft strategy for follow-up actions and decisions.
