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NEW HORIZONS IN HEALTH

The Regional Director first presented *New horizons in health* to the forty-fifth session of the Regional Committee, outlining a strategy for collaborative work in health and human development throughout the Region. The Regional Committee endorsed the document and, in resolution WPR/RC45.R1, requested the Regional Director to work closely with Member States to develop the strategies and budgets for implementation of the approaches outlined in the document. The Regional Committee also requested the Regional Director to report on progress of implementation of the resolution to the forty-sixth session.

Considerable work has been done, at both the Regional Office and country level, to explore more exactly how the approaches in the document can be implemented in countries. As part of this process, the document *New horizons in health* itself was revised, reflecting an emphasis on the importance of country level action, and proposing a combination of traditional and non-traditional indicators. Proposals which illustrate implementation of the three theme groups have been formulated, for discussion with governments. Given the interest of the Committee at its forty-fifth session in the careful alignment of the indicators used in these new approaches, with the already existing indicators used in the health-for-all strategies, the Committee's attention is drawn to the compatibility of the *New horizons in health* approach with the new direction of the revised health-for-all policy.

The report on progress and the revised document are presented for the Committee's information and discussion.

1. INTRODUCTION

At the forty-fifth session of the Regional Committee, the Regional Director introduced *New horizons in health* as part of the overall reform in WHO in the context of global change. The document was endorsed by the Regional Committee (WPR/RC45.R1), and subsequently presented to the Executive Board as part of the Regional Office's contribution to the Development Team on WHO policy and mission. It was also described by the Regional Director in his oral presentation on *The Work of WHO in the Western Pacific Region*.

The Regional Committee additionally requested the Regional Director:

1. to work closely with Member States to develop the strategies and budgets for implementation of the approaches outlined in the document; and
2. to report to the forty-sixth session of the Regional Committee on the progress of implementation of this resolution.

This report is presented in several parts, covering the revision of the document, coordination with governments on possible areas of activity at country level, modification and development of indicators, and budgetary implications. There is also a section which summarizes how the *New horizons in health* approaches can be instrumental in the development of the revised health-for-all strategies at regional and national levels.

2. REVISION OF THE DOCUMENT *NEW HORIZONS IN HEALTH*

The original document has been revised in line with the comments made at the forty-fifth session of the Regional Committee, and reviews made by the three "theme groups". The revised version of *New horizons in health* - printed in June 1995 - is presented to the Regional Committee as an annex.

The major changes are:

1. The original Regional Office perspective has been broadened to include countrywide and regionwide applications for the new approaches to health and human development, the role of the individual and the community, together with that of sound public policy.
2. The three themes, Preparation for life, Protection of life, and Quality of life in later years, have been updated as work has proceeded with countries on developing these themes further.
3. The section on indicators, and the list of indicators included in the theme group sections have been modified somewhat as work continues on developing more appropriate quality of life indicators.

The revised version is presented to the Regional Committee in English and French, and has also been translated into Chinese.

3. COORDINATION WITH COUNTRIES FOR DEVELOPMENT OF ACTIVITIES

Since the endorsement of the document by the Regional Committee, the three theme groups in the Regional Office, and the WHO Representatives and Country Liaison Officers, have worked with national governments to develop activities based on the approaches in *New horizons in health*. The responsibility of the individual for his or her own health, and the importance of health promotion and health protection in improving the quality of life, have been the bases of these discussions in order to formulate new activities and reformulate existing plans to focus on quality of life as a product or outcome.

Policy development

Several countries have already taken up the concepts included in *New horizons in health*, and included them in their overall health policies and planning process. Other countries have developed specific activities based on *New horizons in health*. In Malaysia, the Government is fully committed to the approaches outlined in *New horizons in health* and will include several activities, such as healthy cities, healthy schools and healthy places of work in the Seventh Malaysia Plan, which will take effect on 1 January 1996. The Government of New Zealand has also welcomed the approaches

in the document, which are closely linked with those in the public policy document *A strategic direction to improve and protect the public health*. The countries of the Pacific have taken firm steps to realize concepts in the document with the Yanuca Island Declaration and endorsement of the Healthy Island approach, as it applies to their particular situations.

A detailed presentation on these and other initiatives will be made at the session of the Regional Committee, which will illustrate the extent to which the Region is progressing with shared objectives.

Specific proposals

As an integral part of the development and further understanding of the approaches proposed in *New horizons in health*, the three theme groups within the Regional Office have prepared project proposals. These proposals are illustrative of the way in which the objectives of the theme groups could be met in a country. They are not in any way intended to be prescriptive; they are an exploratory mechanism to allow for discussion at country level of realistic and appropriate activities to address priority problems. The proposals have been discussed with several countries, which have indicated particular interest in the activities outlined.

4. MODIFICATION AND DEVELOPMENT OF INDICATORS

A task group on indicators composed of members from each of the theme groups has been organized in the Regional Office. Initially, the group has classified the listed indicators into six categories, namely health status indicators, health service indicators, environmental health indicators, population and socioeconomic indicators, psychosocial indicators, and lifestyle indicators. In preparation for consultation with countries to ensure the relevance of these indicators to individual national needs and situations, teams of experts are reviewing current and potential new indicators for each of the categories. Emphasis is given to identifying indicators for which data are readily available or accessible. It is thereby hoped to avoid burdening health services with additional data collection.

The process adopted is based on two major considerations. The first is that the development of indicators is evolutionary and requires continuous review and adjustment. The second is that the

indicators must reflect the heterogeneity of countries in the Region. The revised document includes samples of the types of indicators which might be used in countries after further development by specialists.

5. BUDGETARY IMPLICATIONS FOR WHO

The original version of the document presented to the Regional Committee at its forty-fifth session, outlined the budgetary process that would support the *New horizons in health* approach. During the year since the endorsement of the document, certain 1994-1995 regular-budget-funded activities have been refocused to the new approach. A series of country-level discussions is planned for the remainder of 1995 which will focus closely on the optimum use of budgets in priority areas, both in the remainder of the 1994-1995 biennium, and in 1996-1997. The Regional Information System has been modified to allow for multiprogramme coordination in projects and activities. These will be reported upon in future budget implementation reports.

Development of the 1996-1997 budget

In the process of developing the detailed budget, or plans of action, at intercountry level for 1996-1997, the Regional Office is focusing on the sort of activities that can develop specific products in line with *New horizons in health*. One example is the supply of adequate hepatitis B vaccine to support the programme of immunizing all newborn infants in Pacific island countries. Another is a review of activities to develop medical school curricula in the fields of health promotion and health protection. These are aimed at revising the appropriate infrastructure, on which can be based country programmes that encourage individuals to take advantage of the health services and to take responsibility for their health. WHO will work with countries during the latter half of 1995 to develop or reformulate plans of action in this context for 1996-1997.

6. DEVELOPING THE REVISED HEALTH-FOR-ALL STRATEGY

Under agenda item 12.3 (WHO Response to Global Change: Report of the Sub-Committee, Part II) of this session of the Regional Committee, the issue of renewing the health-for-all strategy will be discussed. This will be an ideal opportunity for those countries and areas that see the approaches outlined in *New horizons in health* as the direction, or one of the directions, to be taken in the future, to formalize the procedure as part of national health policy planning.

The document presented by the Director-General to the ninety-fifth session of the Executive Board in January 1995 (EB95/15) and subsequent "guidelines" document (WHO/PAC/95.1) contains a framework for a policy based on equity, solidarity and health. The framework is based on the need to improve quality of life and the changing circumstances of the economic, social and health situations in most countries. The move towards greater health consciousness among populations and the subsequent increase in individual and community responsibility for health are consistent themes throughout the framework. These are also the central tenets of *New horizons in health*. The process proposed for the development of the new policies or strategies is one of consultation of all partners in health. Partners from many sectors will collaborate and develop a common policy for a common aim, the improvement of health and quality of life for all peoples. This is again one of the main concerns of *New horizons in health* - that all partners work collaboratively in order to strengthen and improve health programmes, and the level of health of all the people. The indicators and targets for the *New horizons in health* approach to health are envisaged to be integral components of every country's health-for-all efforts. They will be the basic guides for the attainment of increasingly higher health status by each country beyond the year 2000. Thus, when fully developed, the indicators used in *New horizons in health* initiatives should be true measures of positive health in the 21st century.

The revision of the health-for-all strategies was discussed by the Sub-Committee of the Regional Committee on Programmes and Technical Cooperation, and its recommendations are covered in its report to the Regional Committee (document WPR/RC46/11). The proposed timetable (EB95/15) for formulating the new global health policy includes an optional review of the draft regional policy by the Regional Committee in September 1996.