Achieving well-being

A global framework for integrating well-being into public health utilizing a health promotion approach

"The world is facing a confluence of crises that threaten the very survival of humanity. All of these crises – and ways to prevent and navigate them – are addressed holistically in the SDGs. We ignore them at our own peril"

(UNSG, the Sustainable Development Goals Report, UN, 2022)

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I. About this Framework

In 2022, the Seventy-fifth World Health Assembly requested the World Health Organization (WHO) Director-General to develop – within the mandate of WHO – a framework on achieving well-being, building on the 2030 Agenda for Sustainable Development with its 17 Sustainable Development Goals (SDGs), and identifying the role that health promotion plays within this, in consultation with Member States.

Achieving well-being: A global framework for integrating well-being into public health utilizing a health promotion approach provides key strategic directions for attaining well-being societies. It brings together the most effective strategic directions and policy orientations from the global health community and serves as an umbrella guide to Member States and partners in their efforts to foster the development of well-being societies for all.

Given the requirement for frequent delivery of actions outside of the health system, the Framework also provides a common language and purpose for each sector and partner to engage in aligned ways.

The Framework relies on the strengthening of effective partnerships and collective and coordinated actions by government, non-state actors from public and private entities – both within and outside the health eco-system – to facilitate the whole-of-government and whole-of- society approaches to generate health benefits for the population and the planet.

II. Introduction: Well-being societies

The 'well-being societies' perspective – which stems partly from awareness and appreciation of Indigenous knowledge systems – provides the foundations for all members of current and future generations to thrive on a healthy planet, despite crises, and no matter where they live. This approach emphasizes that all individual and collective dimensions of life are important throughout the life course. Well-being societies apply bold policies and transformative approaches that are underpinned by, among others:

- A positive vision of health that integrates physical, mental, psychological, emotional, spiritual and social well-being.
- The principles of human rights, social and environmental justice, solidarity, gender and inter-generational equity, and peace.
- New indicators of success, beyond gross domestic product, that take account of individual and societal well-being and lead to new priorities for public spending on health.
- The focus of health promotion on empowerment, inclusivity, equity and meaningful participation.

The growing momentum towards the well-being perspective calls for a new social contract that balances social, economic and environmental considerations at the centre of political and societal decision-making. Such policies and actions are based on whole-of-government and -society approaches that aim to achieve more coordinated and coherent responses.

Feasibility of well-being approaches requires government and key stakeholders to align around a shared set of guiding principles and frame of reference, with clearly defined actions and accountability mechanisms. Health ministries, agencies, and organizations play a crucial role in promoting the idea that investing in health leads to overall societal well-being. To do this effectively, these organizations must transform and strengthen their institutional capacities to integrate health considerations into other sectors, policies, and programmes.

a. Promoting health and well-being societies

Momentum towards the greater emphasis on well-being has steadily built over several decades, as echoed by successive global health declarations and charters, which root health and well-being in the recognition that both are influenced by social, economic, political, environmental and commercial determinants.

The *Alma-Ata Declaration* of 1978 identified primary health care as critical to attain the goal of 'Health for All'. The concepts of health and well-being were further expanded within the *Ottawa Charter for Health Promotion*, which situates them as a state experienced by an individual as well as a resource for everyday life (1986). In overcoming an individualistic understanding of lifestyles and highlighting social environments and policy, orientation steadily shifted from a focus on individual risk factors or risk behaviours to addressing the context and implications of actions and the determinants that impact people.

The landmark report of the Commission on Social Determinants of Health, entitled *Closing the gap in a generation*, set up a pathway model to explain factors affecting the inequitable distribution of health and well-being. These "structural determinants" included all social and political mechanisms – including governance, macroeconomic policy, social policy, public policy as well as social and cultural values – that generate, modify and maintain socioeconomic positions in a society. In 2009, the World Health Assembly considered the report and called on Member States to make political commitments to address social determinants of health that lead to inequitable health outcomes through social protection policies.

The *Rio Political Declaration on the Social Determinants of Health* (2011), inspired by the work of the Commission on Social Determinants of Health, identifies key actions for countries and global health partners to achieve greater equity in health and promote equitable access to goods and services essential to health and well-being. This declaration was acknowledged by Member States in 2012.

The 2016 *Shanghai Declaration on Promoting Health in the 2030 Agenda for Sustainable Development* urges leaders from all sectors and from different levels of governance to promote health and well-being in all the SDGs. The *Geneva Charter for Well-being* – adopted at the 10th Global Conference on Health Promotion in 2021 – underlines the urgency of creating sustainable well-being societies and achieving equitable health without harming the health of our planet.

b. Underlying causes of well-being erosion and societal impacts

The universality and interconnectedness of the SDGs is a core feature of the 2030 Agenda for Sustainable Development. It was designed in response to growing appreciation that simultaneous and complex adaptive factors affect development across sectors and established silos, and traverse different segments of society. The SDGs involve the entire world and are integrated and indivisible, balancing economic, social and environmental dimensions. Health and well-being are similarly determined by factors lying outside what is traditionally seen as the health sector: namely through the overlapping and intersectional social, structural, economic, political, environmental and commercial determinants of health.

The main sustainable development challenges, including those impacting health and well-being, share common contemporary underlying causes linked to:

- **Economic development models** based on massive and intensive production and consumption of goods and contributing to the rise of noncommunicable diseases (NCDs), degradation of the natural ecosystem and prioritizing profits for the few, over the impacts on people and the planet.
- **Inequitable distribution of resources** reflecting political legacies and colonialism, affecting social, structural, economic, political, environmental and commercial determinants of health of people and planet.
- **Fragile health and social protection systems and weakened public services** based on increasing privatization of public assets and bureaucracies, contracting-out models without requisite public stewardship to ensure service standards or equality of access and care,

maintenance and investment, and weakened public accountability of government and public administrations and their directors, increasing the health and social inequity gap.

- **Digital transformation** creating both opportunities for digital health solutions and potentially generating an equity gap in access to health care, economic empowerment, misinformation and far-reaching impacts on social cohesion and trust.
- **Rapid urbanization, modernization and population growth** in complex socioeconomic, political and environmental contexts resulting in increased threats to individual and societal well-being.

c. Societal well-being and vulnerability

The world is confronting complex uncertainties, shocks and a series of simultaneous, interrelated crises: From climate change and environmental degradation, to prolonged instability, conflicts and economic jolts, society is learning the hard way that current approaches to health, the environment and economy are not resilient to periods of concurrent crises, which erode people's health and ultimately undermine individual and societal well-being.

Countries have distinct vulnerabilities to crises and their compound effects, leaving nations and communities impacted – and inspired to take action – in very different ways. For example, the COVID-19 pandemic exposed some of the common fractures and inequities in society, and highlighted the significance of many social, economic, political, environmental and commercial determinants of health. Despite the tragic loss of life, it also clearly demonstrated the extraordinary outcomes that genuine whole-of-government, multilateral and multisectoral collaboration can generate when focused on health. Additionally, it highlighted the fundamental importance of empowering and strengthening resilient communities, while addressing the needs of people encountering vulnerable situations.

Well-being is captured within the original WHO expression of health as an aspirational and experiential reality of life endured by all individuals: "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity". Sustaining and protecting health during crises requires integrated thinking and actions in relation to societal, community and individual well-being, as well as changes in attitudes and investments in key social structures – particularly those that enable people to take more control of their own lives and health.

Where such crises are prolonged, their overlap with natural disasters, extreme climate events, periods of food insecurity, economic impacts such as inflation affecting food prices, shortages of clean water and weak health systems, disease outbreaks becomes more likely, amplifying the effects of the original crisis. With traditional lines fading between crisis management and recovery, emergency humanitarian responses, and national development approaches, adaptation requires a fundamental redirection of societal values and actions to sustain and protect health and well-being at all levels.

First and foremost, health and well-being should be viewed as intrinsic societal assets that must be safeguarded against erosion. The confluence of crises is causing the most severe impacts in many of the same priority areas highlighted for action by the 2030 Agenda for Sustainable Development and its 17 SDGs: food and energy security; access to clean water and sanitation; access to education; poverty

alleviation and decent work; economic and political stability; human rights; safe movement of people; and environmental protection.

The medical health paradigm focuses mainly on individuals, is disease-oriented and underpins calls for equitable access to treatment and care for all. Preventive approaches are risk-oriented and based on prevention for populations and communities. Health promotion includes a focus on society and the determinants of health, as well as empowerment of people and communities. Over-arching all of these, well-being can be understood as a relational state of holistic, material and spiritual well-being, within individual human beings and between human beings in society. Finally, 'One Health' approaches integrate western and Indigenous knowledge, seeing the planet as a living being and its relationship with humans as one of balanced and symbiotic reciprocity.

Just as various global crises cannot be addressed in isolation, the health paradigm of the future will have to include elements from the medical, preventive and health promotion paradigms.

d. Health promotion: a critical pathway to well-being

Health promotion is the process of enabling people to **increase control over, and improve, their health**. As a core function of public health, health promotion supports governments, communities and individuals to cope with and address health and well-being challenges in order to advance healthier populations and environments through health determinants-focused and 'health-in-all-policies' approaches, as well as individual behaviour change. It achieves this through advocacy, mediation and empowerment.

Advocacy: Health promotion seeks to influence policies and programmes comprehensively by looking at health and well-being as essential assets for societal and personal development. The well-being perspective supports capabilities for coping with external pressures and challenges, through enabling environments that facilitate healthy choices.

Mediation: Health promotion is relevant across sectors and disciplines and becomes effective when it combines and builds on mutual understandings of each stakeholder's realms of expertise through a multisectoral approach. It is important to recognize – and value – that promotion of health and well-being is often achieved by professionals who are not trained as health professionals. For example, teachers, sports coaches, community workers, and many others, have vital roles in contributing to health-conducive environments and helping address determinants of poor health. Health promotion requires mediation between different interests. As health outcomes are influenced by policies and actions outside of the health sector, it is vital to understand and appreciate the objectives and goals of stakeholders from these other sectors and to identify opportunities that will foster health gains. Some of the most challenging and complex issues of our time, however, are 'wicked', in that they are difficult to solve. Many of these complex problems threaten human health. Climate change, biodiversity loss, pollution, persistent poverty, the advancing obesity epidemic, and food insecurity are all examples of such wicked problems. However, there is a strong body of evidence describing the solutions for addressing many of these problems.

Empowerment: Health promotion is a lever for strengthening empowerment at individual and community levels beyond consultation, participation or other forms of engagement. It implies adequate health

literacy, community ownership and action that explicitly aims at social and political change. Member States and key stakeholders can use health promotion to advance health and well-being through empowerment by: stimulating personal action; development of interest groups; community organizations and partnerships; and social and political action.

As with other public health functions, the ultimate goal of health promotion is to improve health outcomes and support the achievement of physical, mental, social and economic well-being for populations and communities, including improvements across quality of life, function, independence, equity, mortality and morbidity. The work on determinants of health often considers the negative impacts on health, such as inequities, social gradients, exclusion etc. However, the conditions in which people are born, grow, learn, work and age can also be influenced through health promotion so that they have positive impact on health, such as the support for healthy products, services and commodities, public policies that shape inclusive societies and governance mechanisms that empower people and communities.

III. WHO focus on well-being

The attainment of highest possible levels of individual and societal well-being is the core WHO objective. As this objective is obviously influenced by many policy decisions outside of the health sector, the WHO constitution outlined the functions entrusted to the Organization to fulfil its mandate. They include, inter alia, to promote:

- in co-operation with other specialized agencies where necessary, the improvement of nutrition, housing, sanitation, recreation, economic or working conditions and other aspects of environmental hygiene; and
- co-operation among scientific and professional groups which contribute to the advancement of health.

This Framework is strictly confined to the mandate and functions of WHO.

When the world adopted a new and ambitious development agenda and SDGs in 2015 – building upon the preceding eight Millennium Development Goals that focused poverty reduction efforts in low- and middle-income countries – WHO stepped up to that same level of ambition, championing health in the SDGs and working to ensure healthy lives and promote well-being for all, at all ages, while leaving no-one behind. The WHO role is indispensable in taking the 2030 Agenda for Sustainable Development forward in relation to health and well-being.

The *WHO 13th General Programme of Work* (GPW13) sets interconnected strategic priorities (the '3 billion targets') aimed at achieving these goals and also operationalizes related tasks. It aims to extend universal health coverage (UHC) to one billion people, prepare one billion people to better handle health emergencies, and improve health and well-being for one billion people by 2025. The WHO *Promoting healthier populations framework* focuses on the third goal of improving health and well-being, and provides guidance for diverse social, economic and environmental political and programmatic initiatives.

In 2022, the Seventy-fifth World Health Assembly requested the WHO Director-General to develop, within the mandate of WHO, a framework on achieving well-being, building on the 2030 Agenda for Sustainable Development with its 17 SDGs and identifying the role that health promotion plays within this, in consultation with Member States.

IV. Global framework on well-being

Shaping an agenda on well-being requires first establishing a framework to build a common understanding and a consensus around key policy orientations. The Framework encompasses the central ideas and functions of health promotion and builds on the principle of universality with the greatest efforts directed towards the populations that need the most. It emphasizes the need to enhance joint accountability – of governments, and partners to people and planet – for maximizing sustainable investments and delivering value for money and fit-for-purpose societal results.

The Framework is comprised of a key vision, an overarching goal, key objectives, guiding principles and an initial implementation and monitoring plan.

Efforts to achieve well-being go beyond the scope of any single sector and require multilateral, collective and coordinated responses. Implementation demands effective partnership as it is only by working together that the vision of societal well-being for all will be achieved. Acknowledging that national contexts and priorities vary considerably, the Framework provides an overall summary of joint work – for people and the planet – between various actors including within government ministries and partners from the public and private sectors, as well as civil society.

The main target audience includes key stakeholders from communities and governments, local and national, working within and beyond the health sector

a. Vision

Societal well-being that enables all people to flourish and achieve their full physical and mental health potential throughout their lives and across generations.

b. Goal

To promote, strengthen and support Member States in their efforts to create sustainable well-being societies through transformative change, committed to achieving equitable health now and for future generations.

c. Key objectives

Achieving this ambitious goal requires setting more specific objectives that include:

a. Engaging high-level decision-makers, key constituents and the public across multiple sectors to take action and design policies and programmes that improve the health and well-being for all.
b. Promoting transformative change through coordinated intersectoral action and contributing to building resilient societies based on equity, inclusion, solidarity and sustainable development.

c. Accelerating progress towards existing sustainable development, universal health coverage and other health-related goals, strategies, frameworks and action plans with the support of health promotion.

d. Conducting research to understand best practices for health promotion and their impacts, and influence on uptake and behaviours within the population.

e. Creating social, physical, and economic environments that empower people to take control over their own lives, health and well-being.

f. Advancing and strengthening health literacy to improve health and well-being for all.

g. Enhancing health promotion capacity and practice to manage current and emerging public health challenges, including a focus on digital transformation.

h. Promoting collaboration with international financial institutions and relevant stakeholders, to promote sustainable finance for policies aimed at improving the well-being and health of the populations of all countries.

i. Strengthening the international and national governance of well-being, and assisting Member States in their efforts to achieve the objectives of the Framework.

d. Foundations of well-being

- Societies with positive well-being provide the foundations for all members of current and future generations to thrive on a healthy planet, no matter where they live. Such societies apply bold policies and transformative approaches that are underpinned by a positive vision of health that integrates physical, mental, spiritual and social well-being.

- Universal access to efficacious, safe, affordable and quality health systems, which maintain financial protection of vulnerable populations.

- The guiding principles of human rights, social and environmental justice, sustainable development, solidarity, equity, bioethics, gender and inter-generational parity, interculturality and peace.

- Societies with a strong focus on addressing the main risk factors of noncommunicable diseases such as cancers, cardiovascular diseases, diabetes, respiratory diseases or obesity. Well-being societies are those that create conducive environments for people to be more physically active, give sustained support to food security programmes, empower people to consume healthy food and less alcohol, and societies that are free from tobacco.

- A commitment to clean the air we breathe, the water we drink and sustainable low-carbon development grounded in reciprocity and respect among humans and making peace with nature.

- Societies that identify main risks to mental health and commit to create conducive environments for mental health promotion.

- New indicators of success, beyond gross domestic product, that take account of well-being of people and the planet, and lead to new priorities for public spending.

- Societal well-being is essential to enable the conditions for individual well-being, in which societal structures and systems promote population-level equity as it relates to the determinants of health. As a result, individuals face fewer barriers to accessing health-promoting resources and engaging in healthy behaviours.

- The fundamental focus of health promotion on health=in-all-policies, healthy settings, empowerment, inclusivity, equity and meaningful participation.

e. Strategic directions and actionable policy orientations

This Framework suggests strategic directions for adopting a well-being approach through a health promotion lens, related policy orientations as well as examples of national implementation approaches to mitigate current and future public health challenges, and create the conditions for government and people to promote health and well-being in a globalized world.

Strategic direction → **Policy orientations** → **Implementation examples**

The Framework is also expected to accelerate actions outlined by existing WHO global action plans that assist countries to meet agreed targets for overcoming the burden of disease and promote healthier populations, including: the *Global Action Plan for Healthy Lives and Well-being for All* (SDG3 GAP), the related commitments to strengthen collaboration across the agencies to take joint action and provide more coordinated and aligned support to country owned and led national plans and strategies; Primary health care measurement framework and indicators for monitoring health systems through a primary health care lens and advancing gender and equity and human rights into public health policies and programmes; *Global Monitoring Framework on Maternal, Infant and Young Child Nutrition*; *Global Strategy on Diet, Physical Activity and Health*; WHO healthy workplace framework; *Global Standards for Health Promoting Schools*; *Environmental Health Indicators*; *Global Strategy and Framework on Ageing and Health*; *Global Framework on Antimicrobial Resistance*; *Global Framework to Promote Physical Activity*; *Global Framework for the Prevention and Control of NCDs* and *Implementation Roadmap 2023–2030*; *WHO Framework Convention on Tobacco Control* (WHO FCTC) and its guidelines that provide the foundation for countries to implement and manage tobacco control together with the WHO-MPOWER measures; *Global Nutrition Targets 2025*; *Global Strategy on Health, Environment and Climate Change* and its supporting *Compendium of WHO and other UN guidance on health and environment* (2022); the *Global Alcohol Action Plan*; and the global Decade of Action for Road Safety 2021–2030.

As a driver of public health, health promotion contributes to the fulfilment of these goals. Under each strategic direction, examples of policy orientations are provided. While the strategic directions should be considered as comprising one comprehensive approach involving key national and local stakeholders, appropriate policy orientations should be determined according to the national context, the country resources and in line with the global commitments under Agenda 2030.

Strategic direction 1: Nurture planet Earth and its ecosystems

As fully encompassed by Indigenous knowledge and expertise, human and environmental health are inextricably linked and access to a safe, clean healthy and sustainable environment is a human right. Reducing the negative impacts of environmental and ecological determinants of health is essential for promoting the health and well-being of current and future generations, and for enabling all to flourish. Well-being societies prioritize a rapid and just transition to a low-carbon economy that keeps temperature rises within agreed limits this century, as set out in the *Paris Agreement*. They provide access to clean energy for all, enhance biodiversity, reduce resource depletion and pollution, support harmonious relations between humans and nature and assign Indigenous knowledge and leadership a central importance. They promote water and food systems that reduce harm and promote healthy nutrition (including breastfeeding).

Policy orientations

- Promote environmental governance systems that include health-in-all-policies and One Health approaches and emphasize whole system management.
- Protect those in vulnerable situations due to exposure to natural risks, extremes or disasters or due to living and working conditions (e.g. air, water and/or indoor pollution).
- Develop multisectoral frameworks/plans at national levels with key actions to achieve environmental goals, including improvements in air quality, provision of safe drinking water, mitigating loss of and enhancement of biodiversity, enhanced chemicals management, and attaining climate change mitigation and adaptation targets.
- Develop policies to reduce extraction of oil and gas and reliance on fossil fuels, develop renewable alternatives and reduce energy consumption.
- Enhance health literacy of the general population and tackle widespread misinformation to ensure support and ownership of measures to protect the environment.
- Adopt economic and commodity pricing models that make eco-friendly choices more accessible.
- Develop sustainable food systems, as well as agricultural, land and water use policies informed by One Health and health-promoting approaches, and that regulate of use of agrochemicals, pesticides and transgenic seeds.

> **Examples of interventions at national level**
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> - Establish governance systems based on the One Health approach.
> - Invest in economies/industries that preserve natural ecosystems and support sustainable transitions across urban and rural areas.
> - Re-orient agriculture of tobacco products, palm oil exploitation to alternatives that do no harm to people and/or the planet, and integrate social protection programmes based on risk-based investment frameworks.
> - Promote partnerships between public, communities, civil society organizations and private sectors at all levels to leverage economic potential that benefits all and does not harm the planet.

Strategic direction 2: Design and support implementation for equitable economies that serve human development

There is a need for governments and other institutions globally to engage in widespread innovation within the governance and related systems to make real progress toward healthier populations and sustainable development. Established economic models have proven to cause both human and environmental damage. Countries are increasingly considering new models for economies and long-term fiscal planning that are more equitable and place people and the planet at the centre. A 'well-being economy' can be defined as creating virtuous circles in which citizens' well-being, economic prosperity, stability and resilience are complementary and mutually supportive, and in which "…positive macroeconomic outcomes allow [countries] to sustain well-being investments over time" (OECD). The WHO Council on the Economics of Health for All[i] has proposed three key objectives that revalue health and well-being as a central measure of success in society and economy:

- valuing the health of the planet, including essential common goods such as clean water, clean air and a stable climate;
- valuing the diverse social foundations and activities that promote equity, including social cohesion, supporting people in need and enabling communities to thrive, and;

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[i] The final report of the WHO Council on the Economics of Health for All will be published in 2023 and its conclusions shall be integrated into subsequent drafts of this Framework, as appropriate.

- valuing human health and well-being, with every person able to prosper physically, mentally and emotionally, and endowed with the capabilities and freedom needed to lead lives of dignity, opportunity and community.

In this way, well-being economies intentionally divert from more traditional models that assign primacy to economic growth, towards a model that prioritizes equity and sustainability. Well-being economies support governance structures that: meet basic human needs; provide people with equal opportunities for advancement; generate a sense of social inclusion and stability; secure decent work and fair trade; offer universal social protection systems; and sustain production and consumption systems. In doing so, such systems address structural discrimination, sustain transitions and help preserve natural eco-systems.

Inevitably, indicators of progress for well-being economies do not exclusively focus on growth but also consider various aspects of social and environmental needs. There is currently a growing momentum to draw on a range of measures to better capture how nations and their peoples are doing. Comprehensive international well-being frameworks, such as the SDGs, the OECD Better Life Index and the 'doughnut' model of economics highlighted by the WHO Council on the Economics of Health for All, monitor and compare a broad range of parameters that matter to people's lives, from the health of the planet to housing and the quality of jobs.

Such a shift in governance and monitoring of progress can only be effective if it is supported by corresponding budget and financial mechanisms that ensure investment is directed to health-producing activities. Several governments have established well-being focused budget models with set goals and targets (e.g. countries from the European Union, Canada, Iceland, the United Arab Emirates and New Zealand).

Policy orientations

- Re-orient investments and dis-incentivize production and consumption of health-harming products and services, towards health-promoting alternatives.
- Shift to economic models that first prioritize health and well-being of people and the planet.
- Support programmes and initiatives that promote the health and well-being of workers and ensure healthy work environments, especially for low-income jobs.
- Create fiscal space for public investment in well-being, including through the consideration of co-benefits and co-costs of investments across sectors.
- Apply health-in-all-policies principles across economic sectors, including housing, food, energy, transport, education and others, to ensure the basic needs of all people are met.
- Shift towards economic measures of development beyond gross domestic product (GDP).
- Leverage the role of central and investment banks as part of investing in well-being economies.

Strategic direction 3: Design social protection and welfare systems based on equity, inclusion and solidarity

Access to social protection systems that are underpinned by the principles of justice and fairness lies at the heart of societal well-being. Social protection policy plays an important role in securing population health and health equity. Overall, social protection enhances income security, enabling people to invest in and accumulate assets (e.g. human, productive and financial), diversify their livelihood sources, move between occupations – which is essential for vibrant economies – with a range of positive economic, social and health multipliers. These systems and principles need to be integrated into government decision-making and public policy agendas. The UN advocates extending the coverage of national social protection 'floors' that guarantee at least four social security guarantees: essential health care; basic income security for children; basic income security for persons of active age who are unable to earn sufficient income (in particular in cases of sickness, unemployment, childbirth and disability); and basic income security for older persons.[3] Multiple benefits for health and health equity flow from these social protection guarantees, which include:[4]

- Alleviation of acute and chronic stress, hunger, nutrition and other adverse material exposures.

- Facilitation of access to health care treatment, adherence/improved health behaviours.
- Elimination of social barriers to well-being such as stigma associated with different social and health conditions, and enhancing positive parenting for well-being of children to enhance early child development.
- Improvement of interpersonal relations and reduction of interpersonal violence.
- Reduction of intergenerational transmission of disadvantages exacerbated by ill-health.
- Improvement in gender equality and reduction in stigma and discrimination.
- Improvement in social cohesion, as well as human and social capital.

Social protection systems need to be perceived as a societal investment, that contributes to economic, social and environmental development and protects future generations from living in entrenched poverty. Extremes of inequality negatively affect societies, creating divides between people and communities and potentially leading to political disruptions. Joint efforts by the private and public sectors, as well as civil society actors, can strengthen the investment in social protection and welfare schemes.

The sustainability of social protection and welfare schemes relies on communities and governments that are committed to the principles of solidarity and social capital. Governments need to show leadership in setting norms regarding social protection and in creating equitable and fair systems.

Policy orientations

- Create and expand social welfare systems and ensure adequate and sustainable financing, public transparency and accountability for their governance and financing.
- Build strong policy and legal frameworks through national and social dialogue, robust administrative systems and sustainable adequate financing.
- Support the transition from the informal to the formal economy and covering the 'missing middle' with particular emphasis on workers in the informal economy.
- Strengthen social protection delivery including respect of the environment in these systems.
- Harness the fullest potential of social welfare systems to deliver adaptive/shock-responsive social protection, contributing to sustainable development and resilience during pandemics and other health, environmental and economic crises.
- Ensure stronger integration of universal social protection policies.
- Promote social welfare systems that foster social innovation, productivity, skills development and collaboration while preserving and promoting the traditions and cultures of 370–500 million Indigenous people living in over 90 countries.
- Collaborate with social partners to promote universal, and sustainable social protection systems and safe and healthy working environments free of violence and harassment as fundamental human right.

Examples of interventions at national level

- Implement measures across a wide range of economic determinants. including taxes (e.g. taxes on unhealthy products), initiating labour market programmes, health and safety regulations, and protecting the environment.
- Co-develop social, environmental and economic protection schemes that support workers/populations through economic transitions and do not exacerbate inequities.
- Explore requirements for and suitability of universal wage models.
- Promote and support social dialogue mechanisms at national and local levels.
- Assess inequities as inputs to inform health-related policy and programme development.
- Enhance social and welfare architecture to ensure nobody is left behind.
- Strengthen programmes to include gender-based and domestic violence prevention.
- Introduce/strengthen child protection schemes.
- Ensure financial or in-kind support to unpaid carers.

Strategic direction 4: Promote equitable universal health coverage through primary health care, health promotion and preventive services

All countries, regardless of economic or political status, face challenges in providing their populations with universal health coverage (UHC) and access to high-quality health services. In line with the Declaration of Alma-Ata and the Declaration of Astana (2018), pursuing UHC ensures: equitable distribution of resources across the life-course and continuum of care – from health promotion, disease prevention, care and rehabilitation to palliation; promotion of mental well-being in re-orienting health services; nurturing and protection of health care workers.

Achieving UHC as part of societal well-being requires strengthening health systems so that people can access services for their health and well-being based on their context, needs and choices in a timely manner. Promoting equitable UHC through primary health care, health promotion and preventive services requires that countries ensure: comprehensive integrated health services, that embrace primary care as well as public health goods and functions as central pieces; multisectoral policies and actions address the upstream and wider determinants of health; and individuals, families and communities are engaged and empowered for increased social participation and enhanced self-care. Applying a life-course approach optimizes people's health and well-being and enhances opportunities across all phases of life to seek or maintain good health.

The noncommunicable diseases (NCDs), alongside mental health, are driving forces affecting the health of people and well-being. Therefore, PHC should ensure that NCDs, including mental health, are incorporated into the process of health benefit package design with adequate sustainable financing. This

will help to prevent and treat NCDs, prevent catastrophic health expenditures and avoid exacerbating the inequities in health outcomes and burdens on families.

A valued health system is part of a local ecosystem and entrenched in the communities they serve. Beyond the basic health care services that can be provided to prevent and treat disease and illness, PHC contributes to improving well-being and quality of life of individuals and their communities by not only accessing knowledge and skills for people to take control over their health and the health of their families, but also through social participation and engagement. This inclusive approach, based on people-centred primary health care, is expected to contribute to achieving equitable UHC coverage and build societal resilience and well-being.

Policy orientations

- Promote universal health coverage (UHC) by shifting towards a primary health care (PHC)-oriented model of care.
- Reinforce and nurture PHC workforce and provide adequate financing mechanisms.
- Integrate health promotion processes and services in re-oriented health services.
- Establish PHC in low-resource settings for the integrated management of NCDs through:
  - WHO Package of essential noncommunicable (PEN) disease interventions for primary health care in low-resource and fragile settings.
  - Tobacco control initiatives and policies, including the *WHO Framework Convention on Tobacco Control* and its associated instruments.
  - Promoting physical activity and active living throughout the life course.
  - Using established legal and fiscal measures to reduce the extent and health impacts attributable to the harmful use of alcohol.
  - Implementation of the measures outlined in the WHO *Compendium of WHO and other UN Guidance on health and environment* to address the health-related impacts of air pollution, and other environmental risk factors for health.
  - Promoting mental health and well-being and the conditions that create positive mental health, including awareness and support.
  - Addressing childhood obesity and supporting implementation of legal and fiscal measures to regulate the marketing of foods and sugar-sweetened beverages to children.
- Build national coordination structures and programmes to enhance the health literacy of the general population and specific vulnerable groups.
- Establish social infrastructure to engage and empower people and communities.
- Promote transdisciplinary PHC-oriented research to inform policy development.
- Conduct health impact assessments of goods among populations, particularly vulnerable or disadvantaged groups.

- Introduce/improve pre-payment mechanisms (e.g. universal health insurance) to reduce out-of-pocket payments and catastrophic health expenditures.
- Shift towards health systems that include sustainable and solidarity-based health financing.
- Employ health impact assessments to assess the potential health effects of given policies, programmes and/or specific projects on populations, particularly vulnerable or disadvantaged groups.
- Structure governance systems for health based on equitable distribution of resources across the life-course and continuum of care – from health promotion, disease prevention, care and rehabilitation to palliation coverage – so all individuals and communities receive the full spectrum of essential, quality health services across the life course.
- Strengthen support and coordination structures to deliver health promotion in settings such as workplaces, schools and communities.
- Implement the recommendations of the *Comprehensive Mental Health Action Plan* 2013–*2030* (https://www.who.int/publications/i/item/9789240031029).
- Institute and promote healthy nutrition and breastfeeding strategies.
- Introduce periodic health examination in non-health settings (e.g. workplaces, schools etc.) for screening of risk factors and early detection of diseases and high-risk individuals.
- Promote physical activity through the adoption of the *Global Action Plan on Physical Activity 2018–2030* (https://apps.who.int/iris/bitstream/handle/10665/272722/9789241514187-eng.pdf).
- Promote environmental health and sustainability and provide environmental health services in support of UHC through the adoption of the *Global Strategy on Health, Environment and Climate Change 2018–2030* (https://www.who.int/publications/i/item/9789240000377).

Strategic direction 5: Promote equitable digital systems that serve as public utilities, contribute to social cohesion and are free of commercial interest

Digital and technological transformation can create new opportunities for social interactions, health literacy and knowledge-sharing and more effective, efficient service provision. Some features of digital systems and digital exclusion can, however, create isolation and exacerbate inequity. Health and well-

being may be jeopardized by increased time spent on digital activities and in virtual settings, from information overload, hate speech and bullying, the propagation of misinformation as marketing for unhealthy products and/or behaviours. There are potential barriers for some groups, such as rural populations and older adults, related to inequitable access to technology and internet services, as well as lack of digital literacy. A well-being society assesses and counteracts harm and disempowerment, ensures equitable access and harnesses the potential of technology for human beings and the planet to flourish.

Policy orientations

- Explore human-centred, transformational digital technologies and services to achieve an equitable digital society.
- Control health-related misinformation/disinformation, including through context-appropriate regulation.
- Implement programmes aimed at enhancing and promoting digital and media literacy and increase access to digital technologies, particularly in vulnerable communities and groups and across ages.
- Enhance legislation on digital communication and information that protects against personal data exploitation and reduces related vulnerabilities.
- Develop interventions to monitor and enhance levels of population health literacy.

Examples of interventions at national level

- Regulate and enforce controls within the digital ecosystem, in line with evolution in use-cases and technological innovation.
- Increase investment in schemes to increase digital literacy, particularly among vulnerable communities.
- Develop and promote digital health services based on principles of universal design, accessibility, inclusion and age-appropriateness.
- Design and conduct assessments of digital impacts on everyday life and prevailing digital divides across different populations, communities and ages.

Strategic direction 6: Measuring and monitoring well-being

Measuring well-being and sustainable development requires a holistic approach that balances material and non-material values for people and the planet. Traditional measures of progress, such as life expectancy and GDP growth, are inadequate for capturing what is most important to people and their

communities. To achieve well-being and measure progress that prioritizes people and the planet, national governance systems must have clear roles and responsibilities for different sectors, along with corresponding accountability mechanisms. These mechanisms should be informed by an understanding of the social, political and governance context in which related plans are implemented.

The United Nations Working Group on the Measurement of Well-being and Sustainability has identified several areas where progress can be made, such as unpaid household work, the distribution of household income, consumption, saving, and wealth, environmental-economic accounting, education and human capital, and health and social conditions. Other proposals for measuring well-being include material living standards, health, education, personal activities, including work, political voice and governance, social connections and relationships, the environment, both present and future, and economic and physical insecurity. The Commission on the Measurement of Economic Performance and Social Progress has suggested decoupling GDP from well-being and instead focusing on households and the distribution of income, consumption, and wealth.

This area of focus is under active development and alternative sets of measures have been proposed, such as the measure of economic welfare, the Index of Social Health, the Human Development Index, and the Genuine Progress Index. The OECD Better Life Index and the European Commission roadmap GDP and Beyond: Measuring progress in a changing world address similar issues. The United Nations Chief Executives Board for Coordination has also proposed criteria for moving beyond GDP in a draft report entitled "Valuing What Counts - United Nations System-wide Contribution on Progress Beyond Gross Domestic Product (GDP)",[ii] in preparation for the 2024 "Summit of the Future".

Policy orientations

- Strengthen countries' capacity to collect disaggregated data, and to utilize analytics, strategic implementation and accountability mechanisms to drive impact on health and well-being, including progress towards the 'healthier population' billion.
- Strengthen country data, health privacy laws, health systems and capacity to monitor progress towards the healthier population billion, and health determinants in general.
- Address public health data gaps, especially around violence against children and against women, children developmentally on track, mental health climate-sensitive health risks, and water and sanitation.
- Promote transversal collaboration, data and knowledge sharing across stakeholders and institutions involved in health promotion.

[ii] The United Nations Chief Executives Board for Coordination are developing a set of core 'Beyond GDP' metrics, building on existing indicators, particularly SDG indicators, and current statistical frameworks. These shall be incorporated into future drafts of this Framework, as appropriate.

- Develop consensus on comprehensive well-being-based indicator frameworks as the main measure of social, ecological and economic progress.

Examples of interventions at national level

- National reports on disparities and inequities in health, access to basic commodities, social protection and exposure to environmental risks (e.g. those related to agricultural practices).
- A set of well-being-based indicators to measure of social, ecological and economic progress.
- Public health data that include issues of violence against children and women, children developmentally on track, positive mental health, climate-sensitive health risks, and water and sanitation.
- Generate data to quantify health and well-being co-benefits and a multisectoral knowledge base and to transfer current data to members of politics and parliament.
- Country data systems and capacity to monitor progress towards the healthier population billion.

V. Way forward

The way forward is to transition to more sustainable, equitable societies and to learn from countries, regions, cities, communities and cultures – especially Indigenous cultures – how to create more sustainable, equitable societies. WHO will support this transition by bringing all actors together to realize the vision of well-being societies, collect evidence and technically support its Member States and partners in the implementation of this Framework. Health and well-being depend on the actions of everyone in society. This Framework calls upon nongovernmental and civic organizations, academia, business, governments, international organizations and all concerned to engage in partnerships for decisive implementation of strategies for health and well-being. Together this will drive the transformation towards well-being societies in all countries, leaving no one behind.

While this Framework on well-being is global in scope, the call is to translate and transform the aspirations into national and local actions within relevant social, economic and political contexts. Importantly, the relevant policy and programmatic responses addressing the actions in this Framework should be selected according to country context and tailored to meet the needs of different sub-national jurisdictions and sub-populations. Each country is recommended to assess its own needs to identify gaps and opportunities to mainstream well-being into the current governance systems and strengthen its capacity to apply health promotion.

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