As we approach the 2030 target to achieve the Sustainable Development Goals, a new WHO framework lays the basis for governments to integrate human and planetary well-being into public health policies. As a more holistic well-being perspective gains momentum globally, the publication calls for “a new social contract that balances social, economic and environmental considerations at the centre of political and societal decision-making.”

The publication, Achieving well-being: A global framework for integrating well-being into public health utilizing a health promotion approach[1], outlines specific policies and actions for governments to maximise investments for health in a way that contributes to overall societal well-being and sustainable development. The all-of-society and all-of-government approach aims to address the social and commercial determinants of health, protecting societies against health-harming industries and requiring action that extends well beyond the health sector alone.
More sustainable, equitable and resilient societies

The framework urges a managed transition to more sustainable, equitable and resilient societies, bringing in knowledge from cultures around the world - especially Indigenous cultures. WHO has committed to support this transition by convening diverse actors, collecting evidence, and technically supporting Member States and partners in the implementation of the framework.

The framework describes six strategic directions that national governments can take to implement a well-being approach, inspired by the action areas identified by the Geneva Charter for Well-being [2] in 2021. These are accompanied by policy orientations and illustrated with national examples. The strategic directions are:

1. Nurture planet Earth and its ecosystems;
2. Design social protection and welfare systems based on equity, inclusion and solidarity;
3. Design and support implementation for equitable economies that serve human development;
4. Promote equitable Universal Health Coverage (UHC) through primary health care, health promotion and preventive services;
5. Promote equitable digital systems that serve as public utilities, contribute to social cohesion and are free of commercial interest;

Examples of policy orientations provided include the promotion of UHC by shifting towards a primary health care (PHC)-oriented model of care and integrating NCD services. The framework recognises NCDs alongside mental health as driving forces affecting the health of people and their well-being, and highlights that PHC should ensure that
NCDs, including mental health, be incorporated into all countries’ UHC benefit packages with adequate sustainable financing. In addition to improving health, this will prevent catastrophic health expenditures and avoid exacerbating health-related inequities.

Echoes of NCDA advocacy priorities

Strategic direction 4 spotlights examples of national-level interventions, which echo NCDA advocacy priorities [3] for the upcoming second High-Level Meeting on UHC this September. These include public and private health insurance schemes to introduce/improve pre-payment mechanisms (e.g. UHC) to reduce out-of-pocket payments and catastrophic health expenditures; as well as existing evidence and country experience being used to 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.

The World Health Assembly (WHA) adopted the well-being framework in May 2023 while noting the WHO operational framework for measuring, assessing, and addressing the social determinants of health and health inequities [4]. Social determinants of health are the conditions in the places where people are born, live, learn, work, play, worship, and age. They affect a wide range of health, functioning, and quality-of-life outcomes and risks.

Countries to assess own needs

The operational framework highlights key indicators and data sets to monitor social determinants, key challenges with monitoring such data and using them for action, and ways to overcome these challenges. The well-being framework recommends that each country assess its own needs, identify gaps and develop opportunities to mainstream well-
being into the current governance systems and strengthen its capacity to apply health promotion.

The well-being framework recognises that addressing the main NCD risk factors (including tobacco, alcohol, unhealthy diets, physical inactivity and air pollution), and their root causes, is key to well-being, and that health promotion is an essential public health function and element of UHC.

The [NCD Alliance has pointed out](https://ncdalliance.org) [5] that the framework, in an effort to increase social participation in health promotion efforts, should also recognise the importance of involving people living with NCDs in the planning and development of well-being policies. This is in line with the [Global Charter on Meaningful Involvement of People Living with NCDs](https://ncdalliance.org) [6]. Health promotion remains relevant for all, even after a diagnosis, as it is a key function across the continuum of care.

The framework describes a well-being economy as one “where the economic value of planetary health, equity and human well-being is recognized and which disincentivizes the production and consumption of harmful products”. It highlights the role that good governance, social protection and pro-health fiscal policies have in fostering health promotion. Yet, as noted by NCDA, the framework’s language on engaging the private sector needs to include mention of mechanisms to safeguard well-being and health policies and programmes from conflicts of interest.