

## The Ljubljana statement calling for political engagement to reduce inequalities in health

The European Public Health Association, the Slovenian National Institute of Public Health and the undersigned, meeting at the European Public Health Conference, in Ljubljana in November 2018, reiterate their commitment to the principles of the Alma Ata Declaration<sup>1</sup>, adopted in 1978; the Ottawa Charter<sup>2</sup>, adopted in 1986; the Tallinn Charter<sup>3</sup>, adopted in 2008; and the Vienna Declaration<sup>4</sup>, adopted in 2016. Taking into account the recently published supplement to the European Journal of Public Health, 'Political landscapes and policies for public health'<sup>5</sup>, we call for political engagement to reduce inequalities in health.

The Ljubljana Statement on public health's engagement to reduce inequalities in health highlights the need for all actors engaged in public health policy in Europe and beyond, to commit to:

- **Leaving no one behind:** by decreasing health inequalities in and between countries, ensuring universal access to health care and by strengthening health systems;
- **Building capacity:** by investing to remove health literacy barriers and by promoting and facilitating health literacy of each and every individual;
- **Voicing knowledge:** by ensuring that health data is both scientifically sound and widely available;
- **Translating evidence to politics:** by taking into account the political dimension of the work of the public health community; and
- **Including Health in all policies:** by strengthening intersectoral collaboration.

### Leaving no one behind

Goal 3 of the *Sustainable Development Goals*<sup>6</sup> seeks to ensure health and wellbeing for all, at every stage of life. This is only possible if health care is accessible for all and health systems are strong and resilient. The *Alma Ata Declaration*, adopted in 1978, points out how important it is to establish good access to primary health care. The *Tallinn Charter*, adopted at the WHO European Ministerial Conference on Health Systems in 2008, commits member states in the WHO Europe region to strengthen their health systems in order to improve health of the citizens. Both highlight the importance of acknowledging social, cultural and economic diversity across the regions and in the countries itself.

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<sup>1</sup> <https://unstats.un.org/sdgs/>, last accessed 16 July 2018

<sup>2</sup> <http://www.who.int/healthpromotion/conferences/previous/ottawa/en/> last accessed 16 July 2018

<sup>3</sup> <http://www.euro.who.int/en/media-centre/events/events/2008/06/who-european-ministerial-conference-on-health-systems/documentation/conference-documents/the-tallinn-charter-health-systems-for-health-and-wealth>, last accessed 16 July 2018

<sup>4</sup> [https://ephconference.eu/repository/publications/Vienna\\_Declaration\\_final\\_version.pdf](https://ephconference.eu/repository/publications/Vienna_Declaration_final_version.pdf) last accessed 16 July 2018

<sup>5</sup> Political landscapes and policies for public health, European Journal of Public Health, Volume xx, Issue suppl\_2, November 2018, <https://doi.org/...>

<sup>6</sup> <https://unstats.un.org/sdgs/> last accessed 16 July 2018

Reducing health inequalities is of the utmost importance for a better health status of the population as a whole, which will result in a positive development of the society. It is well documented how health care contributes to alleviating or aggravating health inequalities. This is true for rich and for poor countries. Elimination of health inequalities can only be expected if health care systems are well organised, and universal access to health services is established. This is especially important in countries with weak economies, and for population groups that have difficulties in achieving better health.

It is one of the major responsibilities of the public health community to voice health inequalities and propose constructive solutions to politicians and decision makers. For this, public health professionals need to understand the political dimension of their work in order to be successful in engaging all stakeholders in order to diminish health inequalities in the future.

### **Voicing knowledge**

Public health professionals have the knowledge and the capacity to provide the evidence base for all policy decisions with an impact on public health. But in this modern society, driven by liberal concepts advocated by multinational capital, the voicing of this knowledge is fast and unpredictable. It is essential that the public health community uses the modern communication technology to its advantage. Modern communication technology offers great potential for public health to renew and improve its approach to the public and to individual population groups – not at least those who were somehow left behind and excluded from existing preventive and health promotion programmes.

### **Translating evidence to politics**

It is widely accepted that evidence alone will not bring about behaviour change. What is needed is a political commitment to bring about change. For this, all determinants influencing health, including the social, political and commercial determinants, need to be taken into account. It is only with this wider picture that public health will be able to change policy and influence politicians. This means that public health professionals need to expand their focus and understand the political system. This interdisciplinarity needs to be reflected in all training of public health professionals (schools of public health, but also life-long learning initiatives). Without these new skills and new mind-set, there will be no winds of change.

### **Building capacity**

The public health community should be willing and ready to bring about this change. It is determined to take on an active role by introducing modern communication tools in public health and by including all determinants touching upon public health. The public health professional for the 21<sup>st</sup> century needs to be: well trained, well informed, well-spoken and well connected in- and outside the field of public health.

### **Including health in all policies**

Although we have been facing substantial societal, economic and technological changes and developments during the past four decades, the overall picture did not change much. With new skills, particularly including skills to persuade policymakers and politicians, this can change. We need to work with all sectors involved in health or touching upon health to move forward, we need to include all levels of decision-making: from civilian to local authority to national and international authorities. Only if we have the political and communication skills, can the public health community work with



other sectors, including agriculture, education, housing, industry and all others that can contribute to better living conditions. This will enable good cooperation between them and therefore also development and implementation of effective measures for better, safer and healthier life of all.

### **Commitment to public health**

The public health community reiterated the principles set out in the Alma Ata Declaration, Ottawa Charter, Tallin Charter and Vienna Declaration, and remains determined to accelerate activities in society, and in this way influence the health of the present and future generations of Europeans more effectively.

The public health community is aware of its responsibility for supporting politicians and decision makers, to empower them so that they will act in accordance with the needs of public and possibilities of the society. Without efficient action, the burden of disease will outstrip the ability of society to provide to the individuals an appropriate treatment, which will lead to even greater, insurmountable inequalities in health.



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