MULTISECTORAL PARTNERSHIPS TO PROMOTE HEALTHY LIVING AND PREVENT NON-COMMUNICABLE DISEASE

Making a Case for Investment

WHO Global Dialogue Meeting
THE ROLE OF MULTISECTORAL PARTNERSHIPS

Investments in health promotion (matched)

Better quality evaluations that make a case for investment

Social finance to transfer risk

Better results for Canadians

Interventions informed by the latest behavioural science
We tend to ‘undersell’ the true value of non-communicable disease prevention by ignoring the value of better health and wellbeing that accrues to citizens.
VALUING IMPROVED HEALTH AND WELLBEING
WELL-BEING VALUATION

• The science of “subjective well-being” has evolved over the last ~30 years.

• Takes “well-being” as the ultimate, intrinsically good outcome of social policy interventions.

• Operationalizes “well-being” as a concept through a measure of subjective well-being (usually overall life satisfaction).

• Using regression analysis, determines the increments of income and an outcome of interest (e.g., physical activity) that yield identical changes in subjective well-being.

How “much” well-being do we “gain” from a social good?

How much extra income would give us the same “gain” in well-being as that social good?
RESULTS TO DATE

- Wellbeing analysis gives us **equivalent monetary values** for many intangibles which we can use to generate social returns on investment.

- These figures represent the value of health promoting behaviours as experienced by people, via a measure of subjective wellbeing, and expressed in monetary terms.

<table>
<thead>
<tr>
<th>Protective Factor</th>
<th>Estimated Equivalent Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Activity</td>
<td></td>
</tr>
<tr>
<td>Inactive-to-Active</td>
<td>$352/week</td>
</tr>
<tr>
<td>Inactive-to-Moderately Active</td>
<td>$244/week</td>
</tr>
<tr>
<td>Fruit and Vegetable Consumption</td>
<td></td>
</tr>
<tr>
<td>Increase regular weekly consumption by one unit</td>
<td>$63/week</td>
</tr>
<tr>
<td>Smoking Cessation</td>
<td></td>
</tr>
<tr>
<td>Daily smoker to non-smoker</td>
<td>$256/week</td>
</tr>
<tr>
<td>Occasional smoker to non-smoker</td>
<td>$63/week</td>
</tr>
</tbody>
</table>
In public health at the federal level in Canada, we have few levers to create an impact. We rely on our ability to persuade others to form partnerships with us to achieve results for Canadians.

- Being persuasive about the potential for impact in this area is critical to our strategy at the Centre for Chronic Disease Prevention.

Well-being valuation is well-suited to make tangible (and visible) impacts that are typically hard to observe otherwise.

- This can help to mitigate perceived risks in the context of partnerships.

Helped to change the discourse on NCD’s in Canada, garnering renewed support for NCD prevention domestically.
QUESTIONS & DISCUSSION

Craig M. Joyce
Centre for Chronic Disease Prevention
Public Health Agency of Canada
craig.joyce@phac-aspc.gc.ca