

THE ECONOMY OF WELL-BEING AS A TOOL TO INNOVATE THE HEALTH POLICY-MAKING

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Why do we need an "Economy of Well-Being"?

Mutually reinforcing Wellbeing and Growth



- A focus on **people** rather than the economic system or GDP
- Measures outcomes rather than inputs and outputs
- Examines both averages and inequalities
- Considers both objective and subjective aspects
- Concerned with well-being both today and tomorrow



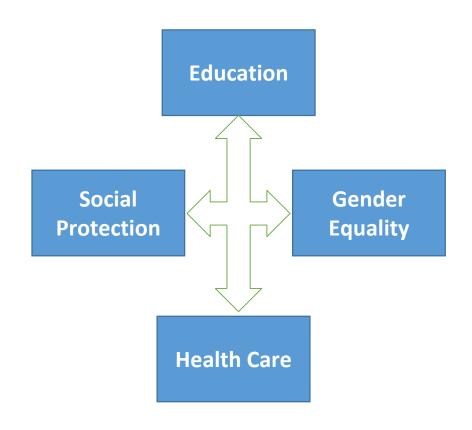
What do we mean by an "Economy of Well-Being"?

Defining the Economy of Well-Being

An economy that:

- **Expands** opportunities available to people for upward social mobility and improving their lives in the dimensions that matter most to them
- ➤ Ensures opportunities translate into well-being outcomes for all segments of the population, including those at the bottom of the distribution
- Reduces inequalities
- Ensures environmental and social sustainability

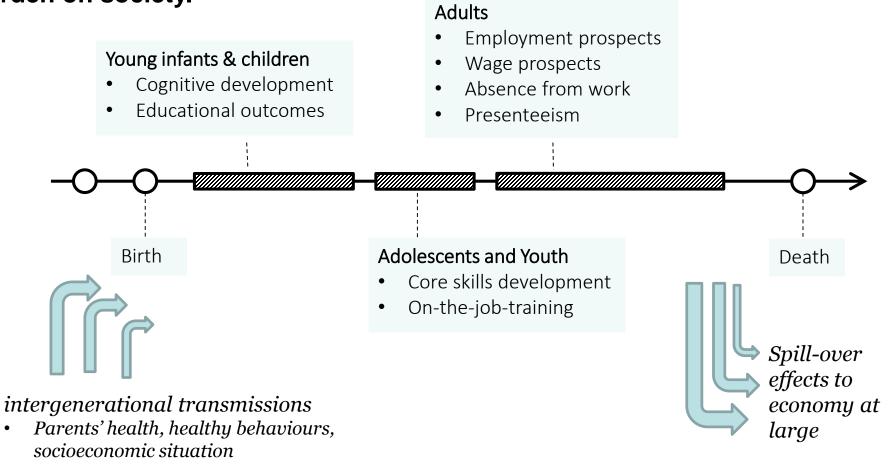
Key channels for activating the virtuous circle





How to create an "economy of well-being"? Investing in health care

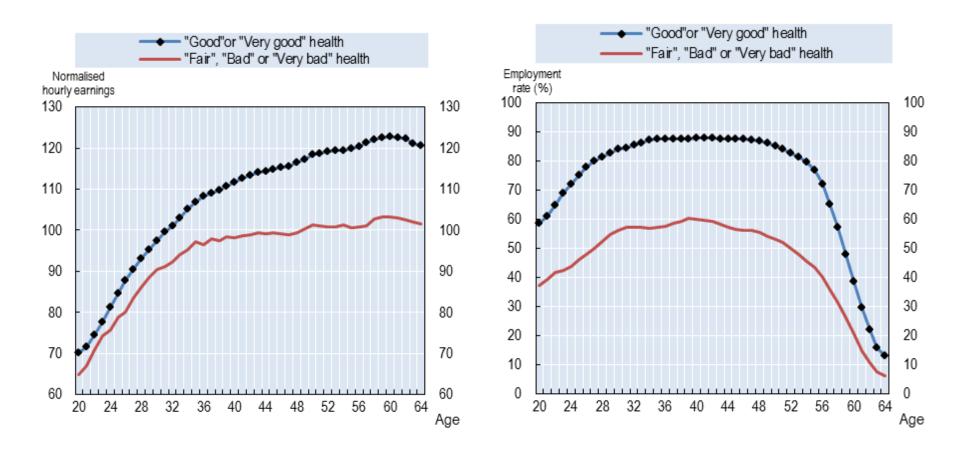
Good health fuels economic growth, productivity and individual earnings. It also has positive
effects on many other dimensions of well-being. Poor health imposes a significant economic and
human burden on society.





Ill-health lowers wages, with disadvantage compounding over life course

Wages and Employment, by age & health status (OECD average, males)



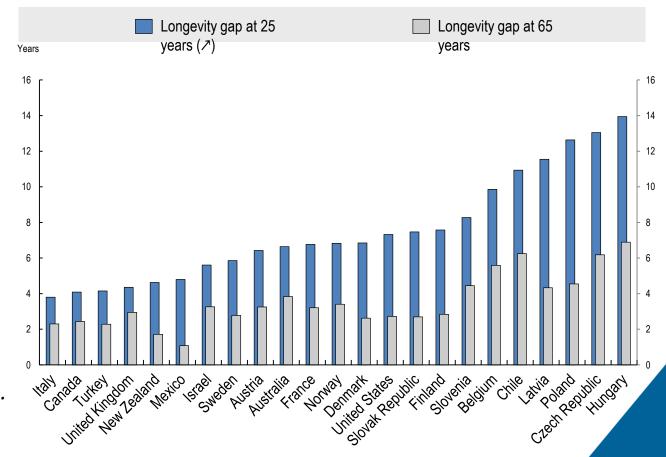
Source: OECD Ageing Unequally project (EU-SILC 2005-13 data)



Ensuring access to high quality health care for all can improve well-being and increase economic performance

Do health systems currently contribute to counterbalancing observed inequalities in outcomes?

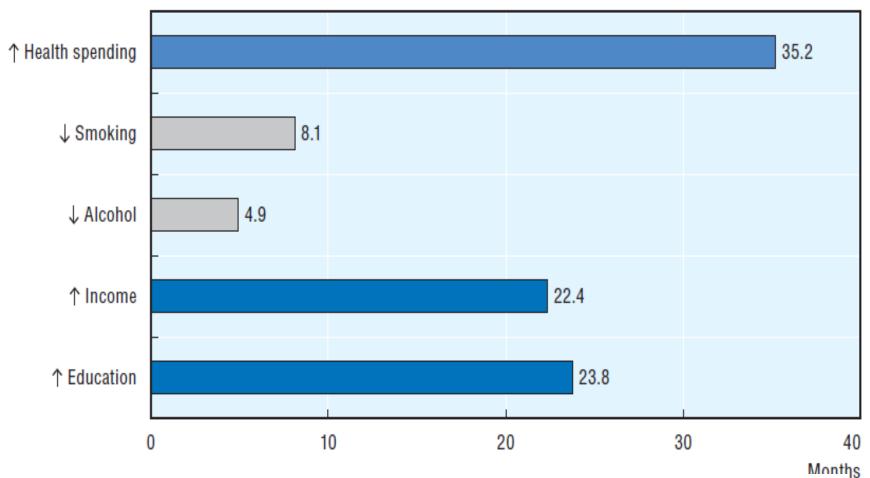
- Poor health behaviours and poor health outcomes are more prevalent among the disadvantaged (e.g. risk of smoking, being overweight).
- Access to services, including prevention, is better in the top income quintile.
- More unmet need for care for the poor, in particular due to costs, and more waiting times.





Life expectancy gains – contributions from factors within and beyond the health system

Analysis based on 35 OECD countries for the time period 1995-2015



Note: Figures represent the gains in life expectancy that could be expected with doubling health spending, doubling income, reaching 100% of tertiary education, and halving smoking and alcohol use.

Source: OECD Health at a Glance 2017



Policy avenues to promote health systems more people-centred

- Preventive measures and high levels of health protection to better address risk factors
- ➤ Increased patient-centred primary care delivery
- ➤ Improved health literacy
- > Reduce inequalities of access
- Interventions beyond health are critical and partnerships are needed



Four key mechanisms used in several OECD countries to improve wellbeing

- Budgeting
- Performance frameworks
- Creation of new institutional structures
- Building capacity in the civil service



http://www.oecd.org/statistics/putting-well-being-metrics-into-policy-action.htm







What are the implications of creating an "economy of well-being" for economic policies

- Social investments geared towards creating an "economy of well-being" hold the promise of *delivering high economic and social returns*.
- Well-designed programmes in education, heath care, social protection and gender equality will increase tax revenue and lower cost of remedial action.
- When returns to the government from these social investments exceed the costs of public borrowing, *government new worth will rise*.
- Even when the government does fully appropriate their returns, these social investments will *improve the balance sheet for the country as a whole.*

Changes in the EU framework for macroeconomic and fiscal policies should take these effects into account.