

From KPIs to policy

– What can we learn from implementing the Public Health Law?





Norwegian Public Health Law 2012

The municipalities shall promote the population's health and well-being and contribute to reducing social inequalities - within the duties and means that are assigned to the municipality, including local development and planning, administration and the provision of services.





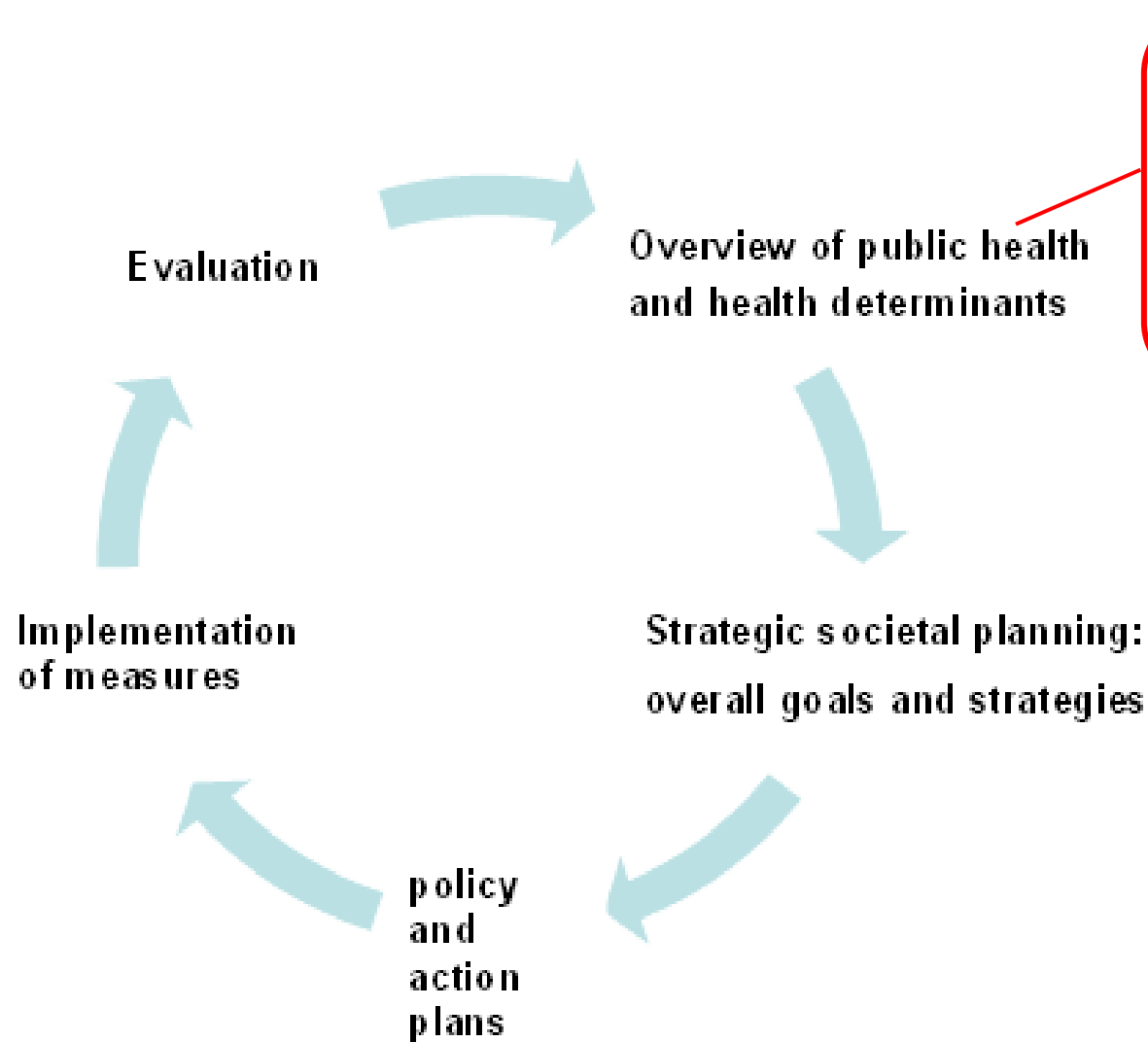
Norwegian Public Health Law 2012

- The Public Health Law showed how the Norwegian municipalities was supposed to facilitate a knowledge-based, cross-sectorial, systematic and long-termed public health work
- The recipe seemed quite simple and logic:
 - Make an overview of public health determinants
 - Identify the most important public health challenges
 - Implement goals and strategies to meet the challenges in municipal plans
 - Monitor relevant indicators
 - Evaluate measures and development trends





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- Increasing social inequality
- Demographic trends
- Increasing mental health problems
- Drop out





The PHL required rational municipalities


Reality: interest conflicts, power struggles, sector budget competition, sector defenders with their own “sectorial language”, fear of change, lack of understanding, lack of common goals, etc...





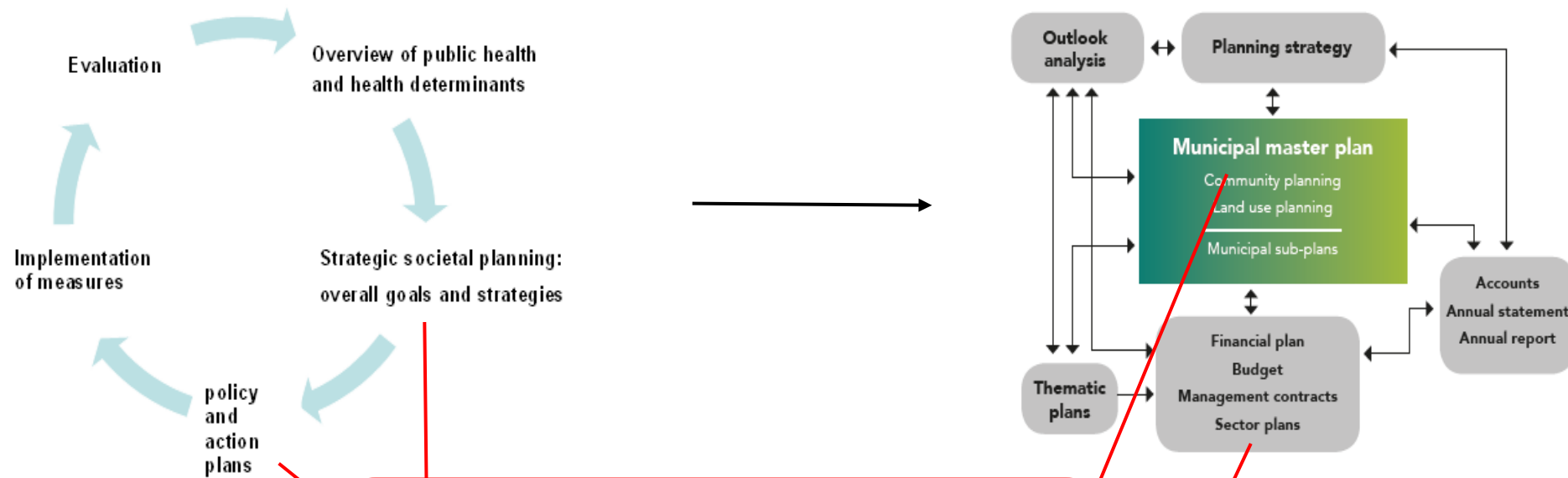
The PHL required proper planning systems

Reality: fragmented planning system, lack of planning understanding, too many plans, overall plans were not systematically followed up in the financial plan or sector plans, plans with too much text, plans without clear priorities, etc....





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From knowledge to policy

- Health-promoting municipal services
- Reduction of social inequality
- Focus on early intervention
- Good integration and increased participation
- Attractive cultural programs and meeting places for all

From KPIs to policy?

4. City Performance Benchmark

