

## *It's time for a change:*

Building strong, transparent and empowering public health leadership  
in the WHO European Region



Campaign platform: **Agis D. Tsouros**, MD, PhD, FFPH  
for WHO Regional Director for Europe

*Your Excellencies and dear colleagues,*

*It gives me great pleasure to share with you my campaign platform for the post of WHO Regional Director for Europe. I have decided to run for this post, deeply convinced that some fundamental changes are needed in the WHO Regional Office for Europe in order to allow it to effectively address the needs of this diverse Region in these critical times. I see this campaign as an opportunity to stimulate a much needed discussion and debate on how the Regional Office can best support its Member States in addressing today's and tomorrow's public health challenges and opportunities. In outlining a strategic action plan for the Regional Office I have tried to focus, in particular, on issues where I believe a strengthening of, or a change from, current approaches will lead to improved health for all of our citizens. I expect – and indeed will actively seek – input from across the whole Region that will undoubtedly further reshape and refine this platform. Accordingly, I invite you to let me know what you think of these proposals. Do they speak to your priority issues, interests and needs? How can they be strengthened? I look forward to receiving your comments.*

*Let the dialogue begin!*

I want to hear from you! Please send your thoughts and comments to:  
e-mail: [agis@tsourositstimeforachange.org](mailto:agis@tsourositstimeforachange.org) or to our web site at  
[www.tsourositstimeforachange.org](http://www.tsourositstimeforachange.org)



Agis D. Tsouros

## INTRODUCTION

All through my professional life, as a medical doctor and public health practitioner, I have been inspired and guided by the values, principles and actions of the World Health Organization. I fully embrace WHO's constitutional definition of health as "a state of complete physical, mental and social well-being" and its identification of the Organization's goal as "the attainment by all peoples of the highest possible level" of this state. It was with great pride that I joined the WHO Regional Office for Europe in 1989 and took my oath to serve international health with loyalty and discretion. Health issues know no borders, and protecting health "there" is protecting health "here". A chain is no stronger than its weakest link, and health for all and of all requires global standards, vigilance and response capacities. Ensuring and coordinating this reality is WHO's core mission as the world's health authority. Strengthening the leadership capacity of our Regional Office to facilitate policy development and action which creates equitable conditions for health for all is the central tenet of this election platform.

### Changing context, challenges and opportunities

Challenges to health and health security have never been in sharper focus than at this time. The global financial crisis, the threat of pandemics, the food crisis, climate change, population and age-related demographic changes, urbanization, continuing and growing inequities in health outcomes, ever-expanding glamorization and marketing of high-risk behaviours and products (such as alcohol), growing antimicrobial resistance, global imbalances in human resources for health, the growing predominance of socially determined diseases and injuries (including chronic diseases, obesity and mental illnesses) and emerging and re-emerging infectious diseases are but some of the major health challenges threatening our individual and collective capacities to protect our citizens' health. These are indeed significant challenges. Importantly, however, they also set a context that opens doors

hitherto closed to the influence of public health values and approaches.

The global financial crisis is a case in point. Here we have seen how greedy bankers and so-called financial advisers have brought the world to the brink of economic and social chaos. The costs of putting profit ahead of health have never been clearer.

Now is the time for public health values and approaches to resound in the boardrooms of finance, development and state. This is an opportunity to draw attention to the importance of health as a prerequisite for all aspects of development. Public health must emerge from the global financial crisis stronger than before. This is the time to demonstrate public health leadership which can help guide our people to a healthier, safer and more resilient future.

### My candidature

My candidature for the post of WHO Regional Director for Europe is defined by my deep commitment to and interest in working with a broadly defined public health community, including ministries of health, advocates in different sectors, local authorities, NGOs, academia, health professional associations and media, in ensuring that we take full advantage of every available opportunity. I see this campaign as creating a platform for dialogue and debate but most importantly as a springboard to actions that will strengthen the voice of public health in the arenas of power and ensure that public health values and health impact are primary considerations in all policies.

## Moving beyond “business as usual”

*Leading EURO to meet today’s public health challenges and take full advantage of new opportunities will require us to move beyond “business as usual”. EURO’s new Regional Director will need a depth of technical knowledge, experience and understanding. He or she will need drive and energy and the ability to take strategic action, engage and communicate with a wide variety of stakeholders. He or she will need a clear vision of the future and have a solid, ethically informed road map for getting there. Above all, he or she will need to be able to inspire and catalyse action by the many people and agencies that shape public health in this vast Region of ours.*

*My public health work over the last 30 years has uniquely prepared me to take on these challenges. I am ready for this job and eager to lead a process of change that will reposition EURO once again as a strong, transparent and empowering force in Europe and the rest of the world.*

This campaign platform document outlines my priority areas for action. It focuses on ways of strengthening current approaches in order to better align public health capacities with both current and future needs. To me, public health leadership means knowing your assets and challenges and working to stay one step ahead of health threats. In order to achieve this:

***This campaign views the core mission of the Regional Office as one that facilitates an open and transparent two-way communication between the Organization and the 53 countries in the European Region, represents and champions the needs and aspirations of all countries in relation to health development, and supports Member States in their efforts to promote, protect and enhance the health of all their citizens.***

To effectively address this mission, I believe that the Regional Office must ensure that:

- There is an ***adequate picture of public health in the Region***, on which to base assessment of needs, challenges, opportunities and threats;
- There is ***adequate knowledge of assets and know-how in the Region***, available to tackle the challenges in the Region and to contribute to global health goals;
- ***Effective channels of communication*** are in place that allow the Regional Office to learn more about the needs and expectations of Member States, how they themselves consider that such needs could best be met, and how they would be willing to contribute to tackling them;
- The services and products of the Regional Office ***meet the needs of Member States and advance the cause of public health in the Region***;
- It has the ***capacity and will to create strong partnerships*** for health at the international, national and local levels.

Within this framework for action, this campaign identifies eight priority areas to strengthen the leadership capacities of the European Office.



## PRIORITY 1

### Rekindle and boldly promote EURO's Health for All value base, equity in health, social justice and Health in All Policies

#### Main positions

- ✓ *The values and principles on which WHO's work is based must be made explicit and their implications for public health development understood.*
- ✓ *WHO must remain firm in upholding these non-negotiable values, even in difficult times.*

As evidenced by its Constitution, WHO was founded to ensure that all people should have a fair chance to reach their highest health potential. Particularly in the face of the present economic crisis, it is essential that WHO reiterate and uphold its values, acting as a public health watchdog for the vulnerable.

Since the 1980s, the Health for All policy has provided the public health community with a value-based action framework. As new knowledge and challenges emerge, the importance of and need for such a policy framework are greater than ever. Only with such a policy framework can EURO help to marshal Europe's vast health-generating resources to effectively deal with the social determinants of health and address health inequities.

Making the case for social justice will require evidence, skills, transdisciplinary competencies and courage.

I wholeheartedly welcomed the report of the Commission on Social Determinants of Health ([http://www.who.int/social\\_determinants/thecommission/finalreport/en/index.html](http://www.who.int/social_determinants/thecommission/finalreport/en/index.html)) and see it as providing a strong platform for reinvigorating commitment to Health for All and its values of equity, solidarity, participation and social justice. Some have criticized the Commission's recommendations as being too lofty and ambitious. I disagree. Current challenges demand that we address the underlying structural issues that too often

predetermine the health of our citizens in unfair and unjust ways. Not to do so is to resign ourselves to ongoing "patching-up" and actions which merely deal with the "symptoms". Having said this, I should add that "addressing the issues" has to go beyond rhetorical analysis. It requires country-specific, targeted and measured action.

I believe that the Regional Office needs to be at the forefront of this effort, supporting health ministries and the wider public health community, academics, activists and other partners in helping to translate the Commission's findings into country-specific policies and targeted actions.

Taking such action will require skills, competencies and courage to go beyond our customary domain, such as advocating for health and health equity to be considered in all policies. We will need to engage credibly and proactively in a range of debates about the direction of national, regional and global economic and political decision-making. Furthermore, WHO, as the international (regional) health authority, can help to monitor progress, evaluate outcomes and facilitate the sharing of learning among our Member States.

Some may ask, "Are Health for All goals realistic or realizable?". Let me be clear: I see Health for All goals as aspirational and inspirational. Indeed, no nation has fully achieved Health for All. The importance of these goals lies more with the fact that they provide the public health community with a much-needed common moral compass. Without this, we can too easily lose direction. I believe that in these challenging times, it is essential to renew our commitment to targeted Health for All values and approaches and champion them loudly.



## PRIORITY 2

### Enhance the depth and quality of work with Member States

#### Main positions

- ✓ *EURO must be relevant to all its Member States.*
- ✓ *Advocating for Health in All Policies, addressing the social determinants of health and inequities and revitalizing primary health care are common concerns in all Member States.*
- ✓ *Intercountry networks and forums can be used more effectively for learning and sharing experiences.*
- ✓ *Strengthening cooperative work with other United Nations agencies and donors could greatly enhance the effectiveness of country work.*

The cornerstone of EURO's potential to carry out its various roles lies in the depth and quality of its relationships with all its Member States.

To realize this potential, as Regional Director I would prioritize dialogue and action in four areas:

- Ensuring greater relevance to all Member States;
- Enhancing support for policy development and implementation;
- Better coordination of links with a broader range of stakeholders in countries; and
- Health diplomacy and the dynamics of intersectoral health.

#### Ensuring greater relevance to all Member States

The Regional Office must remain relevant to all parts of the Region. Current Region-wide interest in addressing social determinants and health inequalities provides an important opportunity for strengthening action agendas and cooperation with and between all Member States. Advocating for Health in All Policies and revitalizing primary health care, particularly in

the context of the financial crisis, are other areas of common regional concern.

The global nature of emerging public health threats and challenges, such as the A(H1N1) influenza pandemic, provides further entry points for enhancing EURO's relevance to all Member States and for facilitating the reinvigoration of interregional links.

#### Enhancing support for policy development and implementation

EURO needs to strengthen policy dialogue with and between Member States, and to provide Region-specific knowledge from evidence-based experience. The power of new ideas and strategic advice must always be matched with context-specific concrete advice to countries. When needed, EURO should coordinate Region-wide awareness-raising campaigns: for example, to promote accountability for health impacts in all sectors. EURO technical staff must be able to advise on capacity-building and support the ongoing management of change and reform. In providing these services, EURO must clearly define its role in relation to other actors. This will entail building on its comparative advantage as a source of technical advice, guidelines, norms and standards as well as a respected broker and catalyst of action. EURO should not dilute such efforts by under-resourced attempts at assuming an implementation agency role.

#### Better coordination of links with a broader range of stakeholders in countries

EURO's privileged relationship with ministries of health is and will remain fundamental to its governance and operations. EURO also engages with its Member States through formal links to other sectors, collaborating centres, technical and settings-based networks, professional associations and NGOs, as well as informal links through modern communication technologies with individuals in all walks of life.

These links provide EURO with a unique intelligence base for analysing health needs, understanding country expectations and influencing practice. EURO must strengthen its capacity to facilitate dialogue, interactivity, mutual understanding and a common sense of purpose between these stakeholder groups, in order to support national decision-makers.

Help with such coordination is especially important in dealing with cross-cutting public health challenges like the financial crisis, inequities, pandemic influenza, climate change, human resource needs and the revitalization of primary health care.

To this end, Regional Office staff, including WHO country offices and country strategic desks in the Regional Office, could usefully strengthen their contacts with a broader range of stakeholders across sectors as well as other United Nations agencies and donors. This would enable more systematic tracking of health-related developments in all Member States.

EURO must invest more effort in promoting the strengthening of public health services in countries and in giving public health practice the status it deserves.

Bilateral collaborative agreements (BCAs) are important but need to be more flexible so as to be able to respond to emerging priorities or opportunities for high-impact action. A focus on fewer and more integrated products would enhance such efforts.

Innovative approaches to promote and protect the health of European citizens are being developed at the national, regional and local levels. Existing networks and new forums for “sharing and learning” can be strengthened and developed as efficient and effective means for capacity-building, mutual learning and support. Face-to-face discussions will always be important, but facilitating the use of state-of-the-art information and communication technology will ensure greater access to information for a broader range of stakeholders.

Furthermore, the European Region is fortunate in having within its boundaries some of the best academic and research institutions in the world, highly trained experts and experienced policy-makers. These are the assets upon which I would like to build.

### Health diplomacy and the dynamics of intersectoral health

Health is increasingly recognized as a core value for social and economic development and as a critical issue in foreign policy and international agreements. Trade, security and development agendas are intrinsically linked with health. Effectively addressing most of the major determinants and threats to public health requires action outside the traditional boundaries of the health sector and its actors. Taking action at the international level with a wider range of players will require new diplomacy skills which reflect a deeper political astuteness and greatly strengthened public health advocacy capacity. This would require a closer and expanded level of engagement with Member States and governing bodies at the political level.

We have talked for years about intersectoral work for health and well-being, but little has been done to evaluate what processes and structures really work. If Health in All Policies is to become more than an attractive slogan, we must know more about making effective intersectoral partnerships.

We can build on experience in the field of environmental health. The Healthy Cities project, for example, has accumulated considerable experience over two decades addressing intersectoral action at the local level. Newer movements, such as those for socially responsible enterprises and those calling for renewed attention to health in the workplace, also offer a window of opportunity.

## PRIORITY 3

**Address regional inequalities between and within countries and be a strong advocate for action on the social determinants of health with a broader range of stakeholders**

### Main positions

- ✓ *Inequalities in health, both between and within countries, are unacceptable.*
- ✓ *We can and we must prioritize support to Member States in their efforts to level up to the best European health outcome standards.*
- ✓ *The excellent work of the WHO Commission on Social Determinants of Health offers sound evidence for the way forward.*

Equity was identified as the number one target of the European strategy for Health For All when it was launched in the early 1980s. Today, however, there continue to be unacceptably wide (and increasing) health inequalities – particularly between the eastern and western parts of the Region, but also within countries.

I believe that a fundamental objective of the Regional Office and its Director is to support and empower Member States in their efforts to level up to the best European health outcome standards.

Despite serious attempts in some countries to tackle inequalities in health, equity targets have been difficult to reach. There have, however, been many innovative attempts at national and at local levels, including through the WHO Healthy Cities networks, to take practical action to close the gaps. EURO can and must facilitate the sharing, discussing, evaluating and learning from these experiences.

The report of the global Commission on Social Determinants of Health provides an evidence-based framework for action. EURO must adapt its recommendations to the needs of the European Region and translate them into practical guidance

for countries to use and implement. The importance of WHO stewarding actions across all sectors and levels of government for health cannot be overemphasized. The momentum created by the work of the Commission must not be lost.

EURO must also actively champion the case for social justice in the health field and underline the fact that health should be a core value in all social and economic development. This can be powerfully linked to policies and strategies to reduce poverty and social exclusion.

EURO needs to provide better evidence of the most effective processes and mechanisms to achieve Health in All Policies and identify the best ways that policies and actions across key government departments can contribute to health and health equity.

Applying a social determinants approach to policy and practice requires in some countries improved indicators, such as measuring the potential years of life lost due to preventable causes, and in all countries enhancing understanding of the data and evidence among policy-makers and practitioners. EURO can contribute to developing the skills and mechanisms for a whole-of-government approach to population health and health equity.

Comparative data help to identify opportunities for strengthened action between countries and within countries.

Importantly, most increasing threats (like climate change and new emerging diseases, obesity and hazardous use of alcohol) are controllable through application of well-known and well-tested public health and health service interventions, such as public education, surveillance of diseases, disaster preparedness, food hygiene and inspection, pricing policies and control, nutritional supplementation, population-based prevention programmes, vaccines, primary health care (including mental health), health promotion in settings of everyday life, and training.



A key role for the Regional Office and its Director is to ensure that adequate resources are made available to support the strengthening of public health systems in areas of need. EURO can help by providing direct technical assistance, brokering assistance from others and supporting bilateral assistance agreements between Member States.



## PRIORITY 4

### Modernize EURO's ways of working and align technical capacities with needs

#### Main positions

- ✓ *EURO must be adaptable as it strives for excellence.*
- ✓ *EURO's working environment must become more empowering, supportive, open and transparent.*
- ✓ *Networking needs to be strengthened.*
- ✓ *EURO needs to invest more in information and communication technologies.*
- ✓ *EURO needs to simplify its bureaucracy.*

EURO must be technically strong and versatile. Sustainable organizations demonstrate an ability to continuously adapt to a rapidly changing environment. The real challenge for the Organization is to ensure that its technical capacities are both excellent and relevant. This requires leadership that can fine-tune its functions and operations for maximum impact.

#### Issues that matter

EURO must urgently fill staffing gaps and secure high-calibre staff, including in the fields of noncommunicable diseases, lifestyles and health systems. It is also important to ensure a balanced representation of expertise from across the Region.

There are many highly competent technical and administrative staff members in EURO with unique, in-depth knowledge and understanding of this vast and diverse Region. More emphasis must be placed on strategic thinking and on improving the capacity of the Organization to analyse and understand the specific contexts and expectations of Member States. There is substantial room to improve the content and quality of technical output and services to countries, which must be tailored to local circumstances.

EURO must make better use of the abundance of scientific expertise, country experience and best practice available in

the Region. Emphasis must be put on intelligence, integrated products and services, and solutions and arguments to support change and reform. Evidence for the economic arguments of disease prevention and health promotion should be strengthened. WHO collaborating centres should become a more integral part of EURO's implementation capacity. Networking is an efficient and powerful tool for capacity-building, promoting innovation and legitimacy of change. Evaluation should not be just an administrative exercise but an opportunity for learning from successes and failures. Effective mechanisms must be introduced to support cooperation and synergies between technical programmes and divisions as well as the development of integrated products and services.

### Good work alone is not enough

EURO must invest in and make better use of the potential of modern information and communication technologies, both to disseminate evidence-based information to identified target audiences and to help public health messages stand out in "crowded" information marketplaces.

### EURO working environment

I feel strongly that a more empowering, motivating and supportive working environment would greatly strengthen the overall performance of the Organization. Staff must feel secure, respected and cared for. Stress levels in the Organization must be addressed. Openness to new ideas and constructive criticism, as well as transparency in decision-making and staff empowerment, are essential attributes of a healthy organization. The Organization must inspire passion and professionalism. Structures have to be light to be able to adapt swiftly to external demands. Management must not outweigh the technical capacity of the Organization. Reorganization efforts and reforms must be well thought out and followed through with due regard to staff concerns and minimal disruption.

## PRIORITY 5

### Strengthen and broaden EURO's partnerships

#### Main positions

- ✓ *WHO's ability to effectively and efficiently deliver on its health responsibilities and opportunities in the European Region can only be realized through strong and dynamic partnerships for health development.*
- ✓ *Strengthen cooperation and integration with major European institutions such as the European Union, the Council of Europe, the European Bank for Reconstruction and Development and European donor agencies and countries.*
- ✓ *Establish a framework for strengthening partnerships with NGOs.*

WHO can only be effective and efficient through strong and dynamic strategic partnerships with key government, intergovernmental and nongovernmental entities, which are also concerned with health and well-being.

I believe that forging and sustaining such partnerships is critical in our collective struggle to promote and protect health in Europe and beyond. These partnerships need to be based on mutual understanding, trust, planning and support. Turf battles are not only a waste of time and resources but are too often an obstacle to creating health.

The need to enhance activities in this area is based on two key trends: firstly, our aim to increase recognition of the importance of Health in All Policies and, secondly, external threats, which demand concerted and speedy action by different agencies. Public health is served best when agencies are empowered and supported to do what they do best. EURO must provide leadership in creating strong sustainable platforms for public health.

The relationship between the Regional Office and the EU is of particular importance since more than half the Region's

Member States are members of the EU and the EU provides important leadership and investments in health. These interests spread across the mandates of several directorates-general of the European Commission, including Agriculture and Rural Development, Development, Employment, Social Affairs and Equal Opportunities, Energy and Transport, Environment, EuropeAid, Humanitarian Aid, Research and Trade. It also extends to the EU's specialized agencies, including the ECDC, EEA, ECHA, EFSA and EMCDDA. All these agencies provide considerable scope for increasing cooperation and exploring further collaborative opportunities as well as clarifying roles and responsibilities in areas of potential overlap or confusion at the country level. EURO must be more proactive and more strategic in its efforts to influence EU policies. Current funding arrangements of WHO projects from the EU need to be reviewed. EURO's relationships with the Council of Europe and OECD are also very important and could usefully be more dynamic.

In addition, there are many active partnerships operating in the field of public health in our Region (such as the Northern Dimension Partnership in Public Health and Social Well-being), which are well positioned to influence the implementation of policies and practices. We must reach out to these partnerships and work with them to bring WHO messages to our Member States.

It is also critical for the Regional Office to formalize a policy for working with NGOs and foundations in a more strategic and systematic way. I believe, for example, that the model of cooperation with NGOs that has been developed in relation to the European Environment and Health Committee is one worth building upon.

## PRIORITY 6

### Champion public health issues and opportunities; address threats and challenges

#### Main positions

- ✓ *The Regional Office and its Director must proactively champion public health in Europe.*
- ✓ *When health is threatened, especially in emergency situations like the A(H1N1) influenza pandemic, earthquakes, floods or heat-waves, the Regional Office and its Director and relevant staff need to "be there" if requested by Member States.*
- ✓ *EURO must match its rhetoric with concrete guidance and action.*

#### Health champion

WHO has both international and intergovernmental roles. Guided by the World Health Assembly and Regional Committee resolutions and concerns, the Regional Office and its Director must be the voice and champion of key public health issues confronting Member States.

The Director must be able to make the case for public health action and investment by all relevant players and sectors. This requires good intelligence sources and communication capacities.

Coordinated regional public health awareness campaigns related to lifestyle and behavioural issues, and socially determined diseases and injuries (including noncommunicable diseases, alcohol-induced morbidity and mortality, obesity, etc.), need to be championed and promoted by the Regional Office and its Director. Such campaigns could have a positive impact on the health status of people in Europe and help address the current inequalities in health.

#### Offering concrete guidance and support

EURO must match its rhetoric with concrete and systematic guidance. Actions must be taken in support of intercountry and

country operations aimed at tackling the noncommunicable diseases epidemic; continued action against smoking and strengthened action against hazardous and harmful alcohol use; promoting healthy ageing; climate change and fighting new emerging pandemics; as well as the reorientation and strengthening of health care and public health services towards disease prevention and primary health care, health security, health technology assessment, merging social and health care services at the local level and improved health systems performance (including vigorous enhancement of patient safety).

## Emergencies

When health is threatened, especially in emergency situations like pandemic influenza, earthquakes, floods or heat-waves, the Regional Office and its director and relevant staff need to be ready to assist Member States and “be there” if requested.

## Communications

In today's world, communication is an increasingly important determinant of health. People's behaviours, perceptions and choices are shaped by the information marketplaces in which they live, work and play.

These information marketplaces are increasingly dominated by globally generated, cross-border messages, many of which have major impacts on health (such as by glamorizing risky behaviours and products). Satellite transmissions allow many of these messages to bypass national control mechanisms while public health messages are too frequently marginalized. There are more than 10 000 health-related web sites. Although some efforts have been made to provide quality control, great variations still exist in the reliability and accuracy of health information provided. I see an urgent need for the Regional Office to work with all Member States on strengthening relationships with communicators and the media and enhancing regional capacity to deliver evidence-based health information.

## PRIORITY 7

### Anticipate the future and promote innovation

#### Main positions

- ✓ *EURO's capacity to anticipate the future is essential for maintaining its relevance and authority.*
- ✓ *Public health research, planning, policy development and implementation as well as health services must proactively engage, reflect and address the needs and demands of citizens and patients.*
- ✓ *WHO must help Member States be prepared for major developments in the fields of genetics, biomedical and information technology and their implications for health and ethics.*

A key aspect of WHO's public health leadership role is its capacity to support Member States to anticipate and understand changes and developments with a potential impact on health. It must use this intelligence to help identify ways to address new challenges and opportunities. Such anticipatory intelligence must include social, cultural, ethical, economic, epidemiological, demographic and geopolitical as well as scientific and technological drivers of change. EURO's capacity to deliver on this anticipatory agenda, to be “one step ahead”, underpins our relevance and authority.

#### Issues on our doorstep

Some of these “future challenges” are already on our doorstep, such as the need to address the health and quality of life expectations of a rapidly ageing population and the need to find new solutions and adjust health systems to deal with increasing levels of chronic disease. New developments in the fields of genetics, medical and information technology can and will revolutionize the provision of public health and health care services. Our attempts to improve the governance and performance of health systems with emphasis on fairness, transparency, affordability and health outcomes must also anticipate the changing needs of the health workforce and

address the expectations and special needs of patients and citizens.

### Citizens' voices

The voices of citizens and patients must be a key driver in the future shaping of our health systems and actions to address health improvements and quality of life. Stronger democratic governance of our institutions, the empowering drive of the knowledge society and modern communication and information technologies have given community participation new meaning.

EURO is well placed to further develop, promote and support "bidirectional", citizen-centred health information systems. Such systems must provide for the continuous input of citizen perceptions, needs and demands into the research, policy

formulation and implementation processes. They must also provide powerful literacy tools that can facilitate informed choices and engage people and communities in decisions that relate to their own future health.

### Supporting learning and innovation

WHO must closely follow developments in all health-related domains and continuously promote learning and innovation by its staff and "extended family" of networks, collaborating centres and offices. Evidence-based public health gain and cost-effective interventions to prevent disease and promote health must be kept high on our agenda.

WHO, in a fresh and open manner, should encourage and facilitate creative thinking and processes and work on cutting-edge public health ideas through intelligent use of knowledge, effective use of networks, focused leadership on solutions, transferability of know-how and focus on "good outcome" practices.



*Milan Bandic, Mayor of Zagreb, together with Agis D. Tsouros and European mayors and politicians during the signing ceremony of the Zagreb Declaration for Healthy Cities: health and health equity in all local policies, 18 October 2008*



## PRIORITY 8

### Lead by example: a greener, fitter, smarter and healthier EURO

#### Main positions

- ✓ *Staff members are EURO's greatest asset.*
- ✓ *The Organization and its staff must lead by example.*

"Do what I say, not what I do" never works, at least not with my daughter! We undermine our credibility when we do not practice what we preach. For this reason, I would work for a greener, fitter, smarter and healthier Regional Office.

#### Carbon footprint

The Regional Office and its staff can set an example, as an Organization and as individuals, in taking action to reduce our carbon footprints.

To this end, we need to look at our use of resources, especially transport, energy, heating, waste disposal and travel. The Regional Office needs to make the green choice the easier choice. It needs to strengthen its capacities for videoconferencing and use of Skype and other telecommunication systems, which can both help link the Office to Member States and reduce the carbon footprint of staff and the Office. Money saved from such greener choices can be used to enhance country-based work.

#### Healthier staff

Over the years, staff members have shown amazing resilience in their ability to reconfigure themselves to respond flexibly to the external challenges and needs of a rapidly changing, complex world and the internal challenges of organizational restructuring and changing leadership and management styles. Staff members are EURO's greatest asset and need support.

More attention needs to be paid to staff health and fitness. Work in EURO is demanding. Staff members are called upon to

meet these demands, in some cases to the detriment of their own health.

It is vital, therefore, that the Regional Office be managed with sufficient flexibility and understanding to support its staff members in meeting these demands and in protecting and promoting their health. There must be time and space for health and fitness as well as learning, development and work.

I have a vision of a flexible Regional Office which supports its staff, shows concerns about stress and insecurity and provides space and time for learning, development, innovation and open debate of strategic, technical and personal issues. I also see the need for building incentives for reducing health and carbon footprint into contracts.

#### Final call to action

Finally, I would like to return to the public health leadership role of EURO. For EURO to command technical and moral authority, it must, as outlined above, be able to anticipate changes, support innovation and engage with public health practitioners at all levels as an effective advocate, communicator and catalyst of change.

I have a vision of a European Regional Office that will be buzzing with ideas and filled with motivated and fearless staff and a drive for excellence and impact. EURO can and must once again become the leading public health agency in the European Region and a centre for innovation and inspiration. EURO must strengthen its capacity to be an empowering force for its Member States and partners as we work together for the health of all our citizens in solidarity across all countries in our great Region. This indeed can be a golden age for public health leadership and authority. People from the 53 countries of the WHO European Region, who have placed their faith in us as an organization, deserve the best – they are our shareholders. We have no time to waste. There is a lot of work to do!



## Dr Agis D. Tsouros Candidate for WHO Regional Director for Europe

Greek citizen – 55 years old  
Degree in Medicine (1976), Medical School, University of Athens, Greece  
Master's Certificate (1979) in Community Medicine, Medical School, University of Nottingham, UK  
PhD (Doctor of Philosophy) (1984) in Public Health, Medical School, University of Nottingham, UK  
Diploma of Specialization in Public Health Medicine and Accreditation Certificate and Membership of the Faculty of Public Health Medicine (1988), Royal College of Physicians, UK



Dr Agis D. Tsouros is a medical doctor and an expert with extensive training and practical experience in public health at the local, national and international levels. He has proven leadership and managerial skills in running complex programmes and an insider's knowledge of the vast potential of the United Nations System and the WHO Regional Office for Europe.

Since 1989 he has worked in the WHO Regional Office for Europe, where he has had leadership responsibility for important areas, including health policies; coordination and reform of the country health department; urban health and healthy cities; health promotion, healthy ageing and public health functions and infrastructures. Since 2007, he has been responsible for the unit in the Regional Office which covers the broad area of noncommunicable diseases, lifestyles and the environment. During the period 2004 to 2006, Dr Tsouros was seconded to the Ministry of Health and Social Solidarity in Greece, and he then assumed the position of Chairman of the National Board of Public Health and President of the Greek Centre for Disease Control.

Dr Tsouros is well known and respected internationally for his innovative work, public health leadership, diplomatic and communication skills. He has the ability to convert complex conceptual issues into practical work. He is the author of many influential publications, some of which have become WHO best-sellers and have been translated into many languages worldwide. He is Honorary Professor in the Department of Epidemiology and Public Health at University College London.

Dr Tsouros has collaborated with all 53 countries of the European Region and worked in close cooperation with several directorates-general of the European Commission, the Council of Europe, OECD, ICLEI and CEMR. He speaks English, French, Italian and Greek fluently. He cycles to work and enjoys rowing, walking, swimming and painting. Dr Tsouros is married and has one child.

### Dr Agis D. Tsouros – values, vision, innovative work and action

- *As a public health officer in London in the 1980s, Dr Tsouros was one of the first in Europe to turn the WHO Health for All strategy and its principles and values (partnership, empowerment, equity and intersectoral action) into local municipal health action.*
- *In Greece, he played a key and central role in coordinating and leading public health preparedness and services for the Athens 2004 Olympic Games.*
- *At the WHO Regional Office for Europe, he has led the WHO European Healthy Cities Network, involving hundreds of local governments from across the Region in long-term, cutting-edge public health work.*
- *He has anticipated the importance of critical issues for public health action and introduced several successful initiatives, such as the best-selling publication Social determinants of health: the solid facts ([http://www.euro.who.int/InformationSources/Publications/Catalogue/20020808\\_2](http://www.euro.who.int/InformationSources/Publications/Catalogue/20020808_2)) and the European social determinants of health campaign, which paved the way for the global Commission on Social Determinants of Health.*

## Strengthening EURO's public health leadership role: technical excellence – effective public health advocacy – being there for Member States

### Eight strategic priority action areas

- Priority 1 Rekindle and boldly promote EURO's Health for All value base, equity in health, social justice and Health in All Policies – ***It's time for a change***
- Priority 2 Enhance the depth and quality of work with Member States. The Regional Office and its Director need to actively champion support to Member States in their efforts to level up to the best European health outcome standards – ***It's time for a change***
- Priority 3 Address regional inequalities between and within countries and be a strong advocate for action on the social determinants of health with a broader range of stakeholders – ***It's time for a change***
- Priority 4 Modernize EURO's ways of working and align technical capacities with needs. EURO's working environment must become more empowering, supportive, transparent and open to dialogue and new ideas – ***It's time for a change***
- Priority 5 Strengthen and broaden EURO's partnerships. NGO partnerships are particularly important in developing the broad alliances and platforms needed for health advocacy, community participation and consensus building – ***It's time for a change***
- Priority 6 Champion public health issues and opportunities; address threats and challenges. EURO must match its rhetoric and generic advice with concrete guidance and action to address the epidemic of noncommunicable diseases; smoking; the negative health and social consequences of the harmful use of alcohol and other lifestyle issues; climate change; pandemic influenza; and primary health care and health systems performance – ***It's time for a change***
- Priority 7 Anticipate the future and promote innovation. EURO must be one step ahead, understanding emerging public health issues and scientific developments as well as paying more attention to the voices and needs of citizens and patients – ***It's time for a change***
- Priority 8 Lead by example: a greener, fitter, smarter and healthier EURO – ***It's time for a change***