Prioritization in health – how can we lift prevention

Sweden
Anders Tegnell
The context

Government of Sweden

Ministry of Justice
- The Swedish Civil Contingencies Agency

Ministry of Health and Social Welfare
- The National Board of Health and Social Welfare
- The Public Health Agency of Sweden
- 21 County Medical Officers

https://www.government.se/
Levels of responsibilities

Municipal authorities
- The municipalities runs social services and care of the elderly
- Responsible for environmental investigations

Regional level
- The regions runs independent health care systems
- County Medical Offices: Responsible for contact tracing and outbreak investigations

National authorities
- The Public Health Agency: National coordination of communicable disease control
- Epidemiological and molecular surveillance
- International focal point
- Statistic Sweden etc
Swedish Administration - high level of autonomy and responsibility for public health at sub-national level

- County Medical Officers
  - 21 regions
- Municipalities
  - 290 municipalities
  - Run schools and long term care facilities
Public Health Agency Sweden – mission and tasks in brief

- National expert agency under the Ministry of Health and Social Affairs
- Broad responsibility for surveillance, disease prevention and health promotion i.e.
  - Mental health
  - NCDs
  - ANDT<sup>1</sup>
  - SRHR<sup>2</sup>

<sup>1</sup>Alcohol, drugs, doping, tobacco, gambling
<sup>2</sup>Sexual and reproductive health and rights
Priorities

• Taken att all three levels
  – National
    • A structure to support the public health work including follow-up
    • Specific missions
      – Mental health among many others
  – Regional
    • Council for knowledge based steering
      – Preventive work should be emphasised
Preliminary model for identification and prioritization of needs within public health

**Identification**
- Politically identified needs
- Systematically identified needs
- Ad-hoc needs
- External monitoring

**Prioritization**
- Categories
  - Public health policy
  - Public health ethics
  - Public health epidemiology
  - Health promotion
  - Laws
  - Effect
  - Evidence quality
  - Feasibility
  - Subject specific

**PHAS’s actions/measures**
- **High priority, missing knowledge:**
  - Action: Knowledge gathering/development
- **High priority, known effective/relevant initiatives:**
  - Action: Knowledge dissemination, use regulation, general advice, supervision, etc.
- **Low priority:**
  - No action
Conclusions

• Complicated with many actors

• Comparison curative and preventive measures often difficult