Social Determinants of Health

1. Background

Despite major improvements in life expectancy and health outcomes globally, health inequities remain a significant – and in many cases growing – challenge. While individuals naturally differ in their health profiles, health inequity refers to *avoidable, unfair* systematic differences in the health of *populations*. Health inequities – whether in relation to non-communicable diseases or resulting from climate change – are rooted in the social determinants of health. The social determinants of health (SDH) are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies and political systems.

Health equity and social determinants are acknowledged as a critical component of the Post-2015 and sustainable development global agendas and of the push towards progressive achievement of universal health coverage (UHC). If health inequities are to be reduced both SDH and UHC need to be addressed in an integrated and systematic manner.

The WHO Social Determinants of Health (SDH) Unit, in the Department of Public Health, Environmental and Social Determinants of Health (PHE) is responsible for coordinating WHO support to countries to take action on social determinants of health to address health inequities. The SDH Unit works to support, guide and strengthen the capacities of countries to develop, implement, monitor and evaluate initiatives to promote health equity through addressing the SDH.

The mandate for this work is tied to the implementation of the *Rio Political Declaration on the SDH* (resolution WHA65.8). The 12th General Programme of Work (GPW) is WHO’s strategic vision document for 2014-2019. The SDH Unit leads the integration of the *social* component of the 12th GPW’s Leadership Priority on “addressing the social, economic, and environmental determinants of health as a means to promote health and reduce health inequities within and between countries” into WHO programmes and initiatives.

The WHO SDH Unit currently focuses on three key areas:

1. Improved country and regional policies and capacities for intersectoral actions (including through a Health in All Policies approach) and health programme reorientation to address the SDH and reduce health inequities through training and technical support;

2. Technical guidance on important policy linkages between social and environmental health determinants, and between social and health policies;

3. Monitoring trends and progress on action on the SDH and health equity, including within the universal health coverage framework, the sustainable development goals and the post-2015 development agenda.
2. Key Messages

2.1 Working across sectors: Implementing Health in All Policies for improving health equity

While many public policies contribute to health and health equity, improving population health it is not the sole purpose of societies and their governments. Thus policy incoherence may arise: A lack of policy coherence across government can result in one part of government supporting the implementation of national strategies (e.g. on malnutrition, or noncommunicable diseases) or international treaties (e.g. the WHO Framework Convention on Tobacco Control), while other parts of the government promote trade, industrial development and initiatives that are harmful to health and well-being. One reason that these inconsistencies arise is because of a lack of understanding across sectors of the linkages between health and quality of life, on the one hand, and the broader health determinants, including economic growth, on the other. Another reason they arise is because seemingly unrelated policies may have unintended impacts that go unmeasured and unaddressed.

To contribute to policy coherence across government, the health sector needs to understand the imperatives of other sectors and form common understandings of health, its determinants and broader societal well-being or quality of life. This requires innovative solutions, and structures that build channels for dialogue and decision-making that work across traditional government policy siloes.

In practice this means engaging in several different actions, including:

- supporting workshops of government policy-makers, programme leaders and health provider groups to improve coherence in policies, services and programmes responding to disadvantaged groups’ needs;
- implementing workshops at different administrative levels and with government and private providers.

2.2 Mainstreaming equity, social determinants of health, gender and human rights into public health programmes for reducing health inequities

To be effective, health services need to be tailored to the needs of specific population groups. Different social groups in the population differ in their empowerment to take up health interventions, due to the accumulation of disadvantage across many areas and the life course. Many public health programmes don't have or are not reaching their health equity goals. This is the result not only of lack of health care specific interventions but also of failing to reach marginalized populations and to address key social determinants relevant to the public health issue.

With that in mind WHO is providing country support to promote the integration of equity, social determinants, gender and human rights in national health programmes. This work, in collaboration
with national authorities and other partners, aims at closing coverage gaps, tackling health inequities and determinants, and applying a human-rights-based-approach through a “step-wise methodology for reviewing how national health programmes can better account for equity, social determinants, gender and human rights”.

This methodology engages a multi-disciplinary review team from national and subnational health authorities, research institutes and academia, civil society and the multilateral system. Drawing from quantitative and qualitative data, it analyses:

- who is not accessing/benefitting from the programme;
- the barriers that different subpopulations face;
- the causes of those barriers (intermediate and structural determinants);
- the role of intersectoral action and social participation in overcoming access barriers;
- the potential ways a programme can be redesigned to better address access barriers; and
- ways to adjust the routine planning, review and M&E cycles of the programme to address inequities on an ongoing basis.

2.3 Enhancing pro equity linkages between social and environmental determinants of health

There are significant socio-demographic inequalities in both exposure to and negative health outcomes arising from adverse environmental conditions. WHO has been making strong efforts to strategically align its work on social and environmental determinants of health. Currently, new concrete approaches and projects are being developed to streamline social and environmental determinants in the technical work of the Organization.

As a first step towards stronger integration of social determinants of health within environmental health work, the following approaches are being followed:

- Identification of priority areas based on evidence, available tools and global commitments: Housing and health, water and sanitation, air pollution;
- Stronger integration of social determinants in existing activities and tools, beginning with the WHO Housing and health guidelines (under development); GLAAS report on water and sanitation; Health protection in nuclear emergencies and the Environmental Burden of Disease;
- Development of concrete project proposals focussing on social determinants of environmental health risks, including:
  - “Guidance document identifying best strategies for, and health co-benefits of, housing interventions relevant to slums and other informal settlements”
  - “Collection of case studies on healthy housing interventions, model housing legislations and regulations with a high-equity co-benefit”
  - “Developing a framework for monitoring environmental health inequalities in countries” in the context of the “Equity-oriented analysis of linkages between health sector and other sectors” and the post 2015 sustainable goals discussion
2.4 Monitoring and measuring health determinants/barriers to improve health and access to health services for disadvantaged groups

In order to close health gaps, it is particularly important to consider monitor how changes in policies in other sectors are impacting health and health inequalities. Equally important, is to monitor the quality of health services experienced by disadvantaged populations. Health determinants change the environment and thereby structure individuals’ health behaviours, their participation in health programmes as well as their incentives to safeguard health. Measuring these impacts are an important part of knowing which social determinants of health to address. Therefore, data on health inequalities and the influence of social determinants on health inequalities is critical to inform evidence-based programming and policies.

In practice this means engaging in several different actions to identify the broader social drivers of health gaps (linked to 2.1 and 2.2). Among these, one relevant action countries can take is to improve monitoring health determinants/barriers by:

- developing indicators to monitor programme effectiveness and quality for disadvantaged populations relative to average effectiveness and quality;

- assessing trends in health determinants for strategic prioritization of health interventions and intersectoral actions tailored to address the social gradient in health.

3. Resources

These and other relevant resources can be found at: www.who.int/social_determinants/en.

Resources related to Working across sectors

- Health in All Policies Training Manual (WHO 2015) describes how to run short courses to improve intersectoral public health skills. Short courses can be used as workshops that promote intersectoral dialogue between health and other policy areas. The manual can be found at: http://www.who.int/social_determinants/publications/health-policies-manual/en/

- The Social Determinants of Health Sectoral Briefing Series (2011-2014) summarizes global evidence on the linkages between environmental and social factors influencing health outcomes by government policy sector. Thematic briefs can be found at the following links:
  - Housing - http://apps.who.int/iris/handle/10665/44705,
  - Social Protection - http://www.who.int/iris/handle/10665/44876,
  - Energy - http://www.who.int/iris/handle/10665/91591,
  - Education - http://www.who.int/iris/handle/10665/44737 and

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- *The Economics of Social Determinants of Health and Health Inequalities: a resource book* (WHO 2013) describes how to develop economic arguments and evaluations to motivate for interventions addressing health determinants. It also summarizes evidence on the intersectoral benefits of interventions addressing education, social protection, and urban infrastructure. The resource book can be found at: http://apps.who.int/iris/bitstream/10665/84213/1/9789241548625_eng.pdf?ua=1

- *Health in All Policies with an equity lens*: WHO completed a Rockefeller-supported project supporting country discussions of health in all policies, and analysis of case studies, in lead-up to the 8th Global Conference on Health Promotion and the Resolution WHA67.12 *(Contributing to social and economic development: sustainable action across sectors to improve health and health equity)*. Several reports documenting these discussions and associated research are provided under "Supporting regional positions on Health in all Policies" under the Publications section of the social determinants web site. Three synthesis papers analysed the equity lens of intersectoral actions and Health in All Policies and provide useful policy perspectives on addressing the social determinants of health inequities:

  1. *Practising a health in all policies approach: lessons for universal health coverage and health equity: a policy briefing for ministries of health based on experiences from Africa, South-East Asia and the Western Pacific*

      http://apps.who.int/iris/bitstream/10665/105529/1/9789241506632_eng.pdf?ua=1

  2. *Demonstrating a health in all policies analytic framework for learning from experiences: based on literature reviews from Africa, South-East Asia and the Western Pacific*

      http://apps.who.int/iris/bitstream/10665/104083/1/9789241506274_eng.pdf?ua=1

  3. *Moving towards health in all policies: a compilation of experience from Africa, South-East Asia and the Western Pacific*

      http://apps.who.int/iris/bitstream/10665/105528/1/9789241506595_eng.pdf?ua=1

Resources related to Mainstreaming equity, social determinants of health, gender and human rights into public health programmes

- WHO (forthcoming). *5-step review of national health programmes: To strengthen the focus on equity, social determinants of health, gender and human rights. Training manual.* [Contact below focal points for further information.]


      http://apps.who.int/iris/bitstream/10665/85689/1/9789241505567_eng.pdf
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Resources related to Enhancing pro-equity linkages between social and environmental determinants of health

- Housing and health guidelines: [http://www.who.int/hia/housing/en/](http://www.who.int/hia/housing/en/)
- The Social Determinants of Health Sectoral Briefing Series (2011-2014)
  - Housing: [http://apps.who.int/iris/handle/10665/44705](http://apps.who.int/iris/handle/10665/44705)

Resources related to Monitoring and measuring health determinants/barriers

- Monitoring Health Determinants for Equity (WHO forthcoming) identifies indicator areas for monitoring societal factors influencing health service access and utilization, incentives for health behaviours and areas for health promotion interventions

4. Contacts

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