SUMMARY REPORT

All for Equity

World Conference on Social Determinants of Health

RIO DE JANEIRO | BRAZIL | 19–21 OCTOBER 2011
FOREWORD

Globalization was purported to be the rising tide that would lift all boats. However, the reality has been that it lifted the big boats but tended to sink or swamp many smaller ones. Globalization and the international systems that govern the way our highly interdependent and interconnected world works have no rules that ensure the fair distribution of growth and benefits. Consequently, the differences, within and between countries, in income levels, in opportunities, in health status and in access to care, are greater today than at any time in recent history.

A world that is greatly out of balance in matters of health is neither stable nor secure. The Constitution of the World Health Organization states that “Governments have a responsibility for the health of their peoples which can be fulfilled only by the provision of adequate health and social measures.” However, far too many governments are challenged in fulfilling this basic duty. The credibility of governments in the eyes of their citizens is at stake.

In 2008, the Commission on Social Determinants of Health released its final report. At the 2009 World Health Assembly, Member States adopted resolution WHA62.14 “Reducing health inequities through action on the social determinants of health”. Since then many countries have been increasing efforts to implement action on social determinants to address inequity. Nevertheless, there is an urgent need to build upon and accelerate these efforts.

The World Conference on Social Determinants of Health, convened by WHO, was a landmark event held in accordance with resolution WHA62.14. The World Conference aimed to share experiences on how to address the challenges posed by health inequities and to mobilize commitment to the urgent implementation of feasible actions on social determinants in all countries, with the goals of improving health, reducing health inequities and promoting development.

The extent and level of support that the World Conference received demonstrated the increasing understanding among governments, international organizations, civil society and other sectors of the importance and urgency in taking forward this agenda. More than 1000 participants attended the World Conference, including delegates from 125 Member States, representatives from other organizations in the United Nations system and civil society, and technical experts. In addition, the event was followed through webcast by more than 19 000 people.

On 21 October 2011, Member States adopted the Rio Political Declaration on Social Determinants of Health at the World Conference, pledging to work towards reducing health inequities and promoting development by taking action across the five priority areas discussed at the conference.

I would like to extend my deepest thanks to the Government of Brazil for hosting and funding the World Conference, in particular the Brazilian Ministry of Health, the Brazilian Ministry of Foreign Affairs and the Oswaldo Cruz Foundation (Fiocruz). I would like to sincerely thank the Advisory Group, who provided technical and strategic support on various aspects of the conference. I would also like to thank the World Conference organizing committee for their commitment and hard work in making the World Conference a success. Finally, I would like to thank all our Member States, many of them represented by ministers, the numerous civil society organizations, academia and everyone who attended the World Conference and contributed their ideas, energy and passion.

This meeting report summarizes and synthesizes the proceedings and outcomes of the World Conference on Social Determinants of Health and has been prepared in consultation with key partners and stakeholders. I sincerely hope that it will support and foster the continuing discussions and activity following on from the World Conference.

We know that, in all countries and in all contexts, it is possible to take action on social determinants of health to improve health, reduce health inequities and promote development. We now have the political commitment to do so in the Rio Political Declaration on Social Determinants of Health. We know what we need to do and how to go about it: now is the time for increased action.

Margaret Chan
Director General
INTRODUCTION AND BACKGROUND

Introduction

The World Conference on Social Determinants of Health was convened by the World Health Organization (WHO) and hosted by the Government of Brazil during 19–21 October 2011, in Rio de Janeiro, Brazil. The conference focused the attention of government ministers, policy-makers and health leaders on the importance and urgency of taking action on social determinants of health to reduce health inequities between and within countries, including to:

- identify the basic principles, methods and strategies for developing national action plans to address social determinants of health and reduce health inequities;
- strengthen political commitment by Member States to develop and implement action plans;
- share experiences, challenges and technical knowledge on social determinants of health and construct national plans to reduce health inequities, considering the need to strengthen governance arrangements.

The conference brought together over 1000 participants from 125 Member States, United Nations agencies, civil society organizations, academia and research groups, and featured over fifty senior government and technical expert speakers. More than 19 000 people followed the event through webcast, while 19 stakeholder-led events were held prior to and after the conference.

Member States adopted the Rio Political Declaration on Social Determinants of Health during the conference. They recognized that health was a human right and societal goal (and contributor to other societal goals), and progress must be accelerated in addressing the unequal distribution of resources, and the conditions damaging to health. Through the declaration, heads of government, ministers and government representatives expressed their political will to make health equity a national, regional and global goal through resolute action on social determinants of health across all sectors and at all levels.

The declaration endorsed five priority areas based upon themes outlined in the WHO Conference discussion paper entitled Closing the gap: policy into practice on social determinants of health, which called for governments to develop and support policies, strategies, programmes and action plans that addressed the social determinants of health. The five priority areas were as follows:

- Governance to tackle the root causes of health inequities: implementing action on social determinants of health. Adopting better governance for health and development aims to tackle the root causes of and reduce health inequities, recognizing that health is a defining factor of good governance. Governance to address the social determinants of health requires transparent and inclusive decision-making processes that give voice to all groups and sectors involved, and the development of effective policies with clear and measurable outcomes that build accountability and are fair in processes and results.
• Promoting participation: community leadership for action on social determinants. Promoting participation in policy-making and implementation for action on the social determinants of health requires engagement of actors and influential stakeholders outside government, including civil society. Participatory processes in policy-making and implementation are necessary for effective governance to act on the social determinants of health.

• The role of the health sector, including public health programmes, in reducing health inequities. It is important to further reorient the health sector towards reducing health inequities, including moving towards universal health care coverage that is accessible, affordable and of good quality for all. Such services are essential to the enjoyment of the highest attainable standard of health, a fundamental right of every human being.

• Global action on social determinants: aligning priorities and stakeholders. It is crucial to strengthen global governance and collaboration, with coordinated global action on social determinants of health, aligned with national government policies and global priorities. International cooperation and solidarity for the equitable benefit of all people are essential. Multilateral organizations have a major role to play in articulating norms and guidelines, supporting actions on social determinants of health, facilitating access to resources and technical cooperation, and modifying policies and practices that have a negative impact on people's health and well-being.

• Monitoring progress: measurement and analysis to inform policies and build accountability on social determinants. Monitoring progress and increasing accountability help to inform policies on social determinants of health. Monitoring of trends in health inequities and of impacts of actions to tackle them is critical for achieving progress. Information systems must facilitate the establishment of relationships between health outcomes and social stratification variables. Accountability mechanisms to guide policy-making in all sectors are vital, taking into account different national contexts.

Governments pledged to implement concrete measures in all five areas to reduce unfair and avoidable health inequities, recognizing that global action on social determinants of health was essential to create inclusive, equitable, economically productive and healthy societies. Doing so was not only a moral and human rights imperative, but also essential in promoting well-being, prosperity and sustainable development.

**Background to the World Conference**

There has been increasing recognition over the last 30 years that the global burden of disease, and the health inequities that are found in all countries, arise in large part from the conditions in which people are born, grow, live, work, and age. These conditions are referred to as the “social determinants of health”, a term encompassing the social, economic, political, cultural and environmental determinants of health. The World Conference on Social Determinants of Health was a landmark event building on the principles of the Alma-Ata Declaration on Primary Health Care adopted in 1978 by the International Conference on Primary Health Care,1 and the 1986 Ottawa Charter for Health Promotion.2

In 2008, the WHO Commission on Social Determinants of Health issued its final report, *Closing the gap in a generation: health equity through action on the social determinants of health*,3 following three years of work coordinating a global network of policy-makers, researchers and civil society organizations, brought together by WHO to collect and review evidence on how to reduce health inequities within and between countries. The report made recommendations on required action on the social determinants of health across all sectors of society, structured under three critical areas:

- improving daily living conditions
- tackling the inequitable distribution of power, money and resources
- measuring and understanding the problem, and assessing the impact of action.

After considering the report and its recommendations, Member States adopted, at the World Health Assembly in May 2009, resolution WHA62.14 on “Reducing health inequities through action on the social determinants of health”. The resolution called on Member States, the WHO Secretariat and the international community to implement the recommendations of the Commission, highlighting areas such as measurement of health inequities, implementing a social determinants of health approach in public health programmes, adopting a Health in All Policies approach to government, and aligning work on the social determinants of health with the renewal of primary health care. The resolution included a request to the Director-General of WHO to convene a global event to discuss plans for addressing health inequities through a social determinants of health approach.

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Preparations for the World Conference

At the Executive Board meeting in January 2010, the Government of Brazil announced its offer to host the event. Preparations for the conference began in 2010, coordinated by WHO in collaboration with the Ministries of Health and Foreign Affairs of Brazil and Brazil’s leading health institute, the Oswaldo Cruz Foundation (Fiocruz). An Advisory Group, with representatives from Member States and experts, supported WHO in planning the conference. This included extensive consultation with Member States, United Nations agencies, civil society and academia. The process was initiated at country level with the collection of over 100 case studies (of which 28 were further disseminated), which were subsequently analyzed and discussed in regional consultations. This process was crucial in providing scientific and technical evidence as well as political engagement and support for the conference.

The conference discussion paper, the key technical document, was written and developed by WHO following consultations among Member States, the Advisory Group, United Nations agencies, civil society, academia and the World Conference Secretariat (a further 185 submissions were received through a public web consultation, held during May–June 2011). The discussion paper focused on how countries could implement action on social determinants of health and was structured around the five conference themes. The declaration was developed through Member State consultations held at WHO headquarters in Geneva and chaired by the Government of Brazil during 2011. The text was circulated to Geneva-based Permanent Missions of Member States and finalized during the World Conference in Rio.

Organization

Plenary and parallel sessions discussed how the Commission’s recommendations could be translated into concrete policy action. The plenary sessions included round tables focusing on the intersection of the social determinants of health approach with other key global priorities and agendas, such as development and the life course approach. The parallel sessions were structured around the five conference themes, allowing for the exchange and analysis of experiences. A Ministerial Track on Day Two enabled delegations from Member States to make statements on social determinants of health, while final negotiations between Member States on the Rio Political Declaration also took place on Day Two.

The following sections describe and synthesize the proceedings and outcomes of the conference.
SESSIONS

DAY ONE – WEDNESDAY, 19 OCTOBER 2011

Opening speeches

Mr Eduardo Paes, Mayor of the city of Rio de Janeiro, highlighted the health challenges facing the city and the achievements made in primary health care and poverty reduction.

Dr Alexandre Padilha, Minister of Health, Brazil, described why health was a right of all citizens and a State duty, and achieving health and tackling inequities was central to the economic and social development of a country, contributing to peace and global security. Acting on social determinants of health was to instil in all government policies a concern for promoting the welfare of the entire population. He emphasized the need for intersectoral action (including at the global level), and the importance of protecting people’s welfare and promoting universal access to health.

Dr Margaret Chan, Director-General of WHO, drew attention to the responsibility of governments for the health of their people through the provision of adequate health and social measures. Dr Chan emphasized the need to move beyond measuring societal progress only by economic growth, which had resulted in increasing inequity within and between countries. Greater social equality, she said, must be the new political and economic imperative for a safer and more secure world. Dr Chan spoke of the critical importance — and challenges — of establishing and enforcing health-promoting policies in all sectors of government and in international systems.

Dr Sérgio Cabral, Governor of the state of Rio de Janeiro, expressed the commitment of Brazil to addressing the social determinants of health and equity in order to improve the quality of life of its citizens, in accordance with the legacy of former President Lula, whose policies and commitment had resulted in over 40 million Brazilians being raised out of poverty through effective income distribution.

Mr Michel Temer, Acting President of the Federative Republic of Brazil, highlighted Brazil’s success in improving health and reducing poverty, achieved through a combination of health and social factors in pursuit of equity. Brazil’s constitutional system ensured individual and public freedoms and rights, including the right to health, with a social system of service provisions.
High-level roundtable on social determinants of health and development

Objective: Identify what actions countries should take to address social determinants of health.

Moderator: Ms Zeinab Badawi, BBC World.

Panellists: Dr Margaret Chan, Director-General, WHO; Ms Tereza Campello, Minister of Social Development, Brazil; Ms Rebeca Grynspan, Associate Administrator, UNDP; Mr Andreas Loverdos, Minister of Health and Social Solidarity, Greece; Ms Kathleen Sebelius, Secretary of Health and Human Services, United States of America; and Dr Michel Sidibé, Executive Director, UNAIDS.

Key themes:

- Health is central to achieving inclusive and sustainable development and can only be achieved by addressing social determinants of health.

- Addressing social determinants of health is not solely the responsibility of the health sector: health and development needs an integrated, multisectoral approach (with a key role for WHO). Enhanced partnership is essential (including in the culture of United Nations organizations).

- Action on social determinants of health is urgent to address policy failures that have stalled progress on health.

Key recommendations:

- Actively engage poor populations – rather than the poor needing to chase the State for required services – reaching the least privileged members of society.

- Work across different sectors and levels of government to ensure coherent, integrated, intersectoral interventions and develop national strategies to address health and equity issues; and work on multiple fronts, including involving the private sector.

- Foster governance and public accountability to ensure that people, particularly vulnerable and marginalized groups, participate in policy- and decision-making processes.

- Strengthen international cooperation in promoting health equity at the centre of the agenda for inclusive and sustainable development.

- Governance is critical: civil society must hold governments and international organizations to account.
Parallel session for theme 1: Governance to tackle the root causes of health inequities: implementing action on social determinants of health

Morning session: Making policy coherent at the national level

Objective: Identify key concepts, strategies and challenges for achieving good governance at the national level.

Chair: Dr Jorge Enrique Venegas, Minister of Public Health, Uruguay.

Introductory note: Professor Don Matheson, Massey University, New Zealand.

Panellists: Dr Dorijan Marušič, Minister of Health, Slovenia; Mr Fidelis George Dakpallah, Director of Policy Planning, Monitoring and Evaluation, Ministry of Health, Ghana; Ms Anne-Grete Strøm-Erichsen, Minister of Health and Care Services, Norway; and Dr Alberto Tejada Noriega, Minister of Health, Peru.

Rapporteur: Dr Xenia Scheil-Adlung, Health Policy Coordinator, ILO.

Key themes:

• The concept of governance incorporates the relevance of addressing social determinants of health in order to promote development and economic growth, as well as health and well-being.

• Principles of good governance relate to legitimacy, vision and strategic direction, performance, accountability, and fairness (and should not be undermined by competing and vested interests).

• Barriers to addressing inequities in health at the national level include the impacts of the economic crisis, funding gaps, unemployment, poverty and corruption.

• The structural prerequisites to address social determinants of health and inequity include a broad social protection floor, providing basic access to water and sanitation, health, education, and income and employment security.

Key recommendations:

• Support comprehensive research to enhance evidence, and inform policy and action on social determinants of health and inequity.

• Develop effective partnerships to engage other sectors, and create genuine opportunities for participation by all stakeholders in continuous dialogue and policy- and decision-making processes.

• Engage and foster collaboration with the private sector to safeguard against conflict of interests, ensure healthy working conditions, and contribute to health through policies and actions on social determinants of health.

• Institutionalize intersectoral action and coordinate with a systematic approach, including with instruments such as constitutional and legal frameworks.

• Integrate all levels of governance in promoting awareness and accountability of policy-makers for impacts of policies on health.

Afternoon session: Making policy coherent at the subnational and local levels

Objective: Identify key concepts, strategies and challenges for achieving good governance at subnational and local levels.

Chair: Dr David Butler-Jones, Chief Public Health Officer, Public Health Agency of Canada.

Panellists: Dr Kevin Buckett, Director of Public Health, South Australian Department of Health; Ms Monica Fein, Mayor-Elect of Rosario, Argentina; Dr Mohammad Hady Ayazi, Deputy Mayor of Tehran for Social Affairs, Iran; Ms Hyun Kyung Park, President of the Seoul Foundation of Women and Family, South Korea; and Dr Tiaõ Viana, Governor of Acre, Brazil.

Rapporteur: Dr Orielle Solar, Greds-Emconet, Chile.

Key themes:

• Structural prerequisites to tackle health inequities include participation mechanisms to allow citizens to have links and interaction with subnational and national governments, and decentralized planning.

• Key strategies to implement and institutionalize intersectoral action include the right to participate of all concerned groups in policy-making; and interconnection between national and subnational policies.

• Local government is vital in creating good governance and policy coherence for action on health equity.
Key recommendations:

- Foster political will to act at the subnational and local levels, with cooperation at national level and the inclusion of civil society.
- Pay particular attention to gender-related aspects as a key element in public policies to reduce health inequities, and in social and health services.
- Establish clear indicators for monitoring and evaluating processes, and ensure this information is made more accessible to communities in order to strengthen ownership, transparency and accountability.
- Provide training, support and education, especially for vulnerable groups, to create informed communities that are able to genuinely participate.

Parallel session for theme 2: Promoting participation: community leadership for action on social determinants of health

Morning session: Institutionalizing participation in policy-making

Objective: Identify key concepts, requirements, strategies and challenges for institutionalizing participation in policy-making, as a fundamental element in addressing social determinants of health to reduce health inequities.

Chair: Dr Thelma Narayan, Centre for Public Health and Equity, India.

Introductory note: Dr Bernardo Kliksberg, Honorary Professor, University of Buenos Aires, Argentina.

Panellists: Dr Luiz Odorico Monteiro de Andrade, National Secretary for Strategic Planning and Participation, Ministry of Health, Brazil; Ms Nonkosi Khumalo, Chairperson, Treatment Action Campaign, South Africa; and Dr Asa Cristina Laurell, Universidad Autónoma Metropolitana, Mexico.

Rapporteur: Dr Barbara O de Zalduondo, Office of the Deputy Director, UNAIDS.

Key themes:

- Social determinants of health are highly complex, thus participation in the context of social determinants of health encompasses a range of issues.
- Institutionalized mechanisms within government structures are an important measure to facilitate social participation.

- Participation is strategic: it is one of the few tools that marginalized people have to improve their situation; and because governments need social support to implement and maintain structural changes, it can help counteract resistance by vested interests.

Key recommendations:

- Promote understanding of participation as an issue of social power and social justice that acknowledges the need to address the underlying economic values and structural systems of society.
- Establish inclusive and transparent governance approaches and mechanisms within government structures at all levels, enabling engagement of affected sectors and support for social participation.
- Civil society must be pro-active in demanding and creating space for their participation, apart from Government’s initiatives to institutionalise space for them.
- Foster spaces and capacity for social participation, and consider the contributions of civil society, particularly of marginalized groups, to take action in advocacy, social mobilization and implementation on social determinants of health.

Afternoon session: Integrating new approaches to participatory action

Objective: Identify ways to integrate new approaches to participatory action considering the changing roles of different actors, such as civil society and the private sector.

Chair: Dr Luiz Loures, Director of UNAIDS Executive Office.

Panellists: Dr Nila Heredia, Minister of Health, the Plurinational State of Bolivia, and President, ALAMES; Dr Roberto Morales Ojeda, Minister of Health, Cuba; Ms Bridget Lloyd, Global Coordinator, People’s Health Movement; and Dr Rene Loewenson, Coordinator, Regional Network on Equity in Health in Southern Africa.

Rapporteur: Dr Amit Sengupta, Associate Coordinator, People’s Health Movement.

Key themes:

- Action to foster social participation encompasses addressing structural issues, in particular the control of power, resources, economic justice and decision-making authority.
- Civil society and governments must hold the private sector accountable for their decisions and activities, particularly with regard to damaging impacts on health and health equity, and other societal goals.
Genuine and ongoing participation is only possible when its role is valued and it is given comparable weight to other influencing factors (and provided with financial and educational resources, including for capacity development).

Key recommendations:

- Prioritize and actively foster participation for marginalized groups, in particular indigenous people, and promote collaboration with them in the development and delivery of specific policy-making processes and programmes.

- Empower the role of communities and strengthen civil society contribution to policy-making and implementation by adopting measures (including financial and educational resources) to enable their effective participation in decision-making (in particular targeted towards vulnerable groups).

- Promote and enhance inclusive and transparent decision-making, implementation and accountability for health and health governance at all levels — including at district and municipal levels — through access to information, access to justice and public participation.

Parallel session for theme 3: The role of the health sector, including public health programmes, in reducing health inequities

**Morning session: Ensuring equitable universal coverage**

**Objective:** Identify key prerequisites, strategies, obstacles and facilitators for promoting equitable universal coverage, and the required support for countries from global actors, including WHO, to implement equitable universal coverage.

**Chair:** Dr Jeanette Vega, Director, Centre for Public Health Policy, Universidad del Desarrollo, Chile.

**Introductory note:** Professor Ilona Kickbusch, Director of the Global Health Programme, Graduate Institute of International and Development Studies, Geneva.

**Panellists:** Mr Simon Burns, Minister of State for Health, United Kingdom of Great Britain and Northern Ireland; Dr Alexandre Padilha, Minister of Health, Brazil; and Dr Sania Nishtar, President, Heartfile, Pakistan.

**Rapporteur:** Professor Cláudia Travassos, Fiocruz, Brazil.
Key themes:

- Public policy is a determinant of health: the way in which health policies and programmes are conceived and implemented are political in nature, and are related to the distribution of money, power and resources.

- Many of the social determinants of health are outside and beyond the reach of the health sector and its policies.

- Quality universal coverage is an ethical requirement, necessary for sustainability of equitable health policies. Universal coverage can be met through equitable financing strategies to address inequities.

- The values of equity, fairness, social justice and social participation are part of an efficient, effective health system. Social protection plays an important role in addressing issues of inequities and health and can act as an entry point for intersectoral collaboration.

Key recommendations:

- Develop and maintain public health policies and actions that address the social, economic, environmental and behavioural determinants of health; in particular, the principle of quality universal coverage must not be sacrificed as a result of the economic crisis.

- Work across all levels of government, creating synergies and cooperation, supported by structures and mechanisms that enable dialogue, collaboration and alignment, in developing policies, legislation and programmes with an equity focus.

Afternoon session: Changing the role of public health

Objective: Discuss the rationale for reorienting public health systems and programmes and reflect on current experiences to identify key strategies, barriers and facilitators.

Chair: Dr César Victora, President, International Epidemiological Association.

Panellists: Dr Pakishe Aaron Motsoaledi, Minister of Health, South Africa; Dr Beth Mugo, Minister of Public Health and Sanitation, Kenya; Mr James Chauvin, President-Elect, World Federation of Public Health Associations; and Professor José Gomes do Amaral, President-Elect, World Medical Association.

Rapporteur: Dr Jane Billings, Senior Assistant Deputy Minister, Public Health Agency of Canada.
SUMMARY REPORT

Key themes:

- Reorienting health care services and public health programmes to address social determinants of health is essential to improve equity in health and health care access, and to achieve global and national prevention, treatment and care goals set by public health programmes and strategies.

- The role of public health is changing and concerted efforts can help to monitor inequities and the impact of policies on social determinants of health. Bring other sectors together and advocate a social determinants of health approach; and develop capacities for addressing social determinants of health and working to achieve equitable universal coverage.

- The Ottawa Charter for Health Promotion envisaged intersectoral work to improve health outcomes. This is still required, together with the involvement of civil society and affected communities.

Key recommendations:

- Integrate equity as a priority within health systems, and in the design and delivery of public health programmes (with an approach that systematically considers who benefits from the current structure and delivery of health services, and which population groups are not reached).

- Develop, strengthen and maintain public health capacity, including for intersectoral action on social determinants of health.

- Promote changes within the health sector to develop capacities and tools to reduce health inequities; health care service providers in all sectors must contribute to reducing inequities by collaborating with other sectors.

- Health sector should strive to identify policy and priority alignment with other sectors and help them to achieve their goals, in ways that address social determinants of health and health equity.

Parallel session for theme 4: Global action on social determinants of health: aligning priorities and stakeholders

Morning session: Negotiating for health at the international level

Objective: Identify key strategies and challenges for global action on social determinants of health, in relation to priorities at the international level.

Chair: Dr Kumanan Rasanathan, Department of Ethics, Equity, Trade and Human Rights, WHO.

Introductory note: Professor Ronald Labonté, University of Ottawa.

Panellists: Dr Pakishe Aaron Motsoaledi, Minister of Health, South Africa; Ms Sissel Hodne Steen, Minister Counsellor, Deputy Head of Mission, Embassy of Norway, Brazil; Ambassador Maria Nazareth Farani Azevêdo, Permanent Representative of Brazil to the United Nations in Geneva; Ambassador Jacques Pellet, Permanent Representative of France to the United Nations in Geneva; Ambassador Síhasak Phuangketkeow, Permanent Representative of Thailand to the United Nations in Geneva; Ambassador Dian Triansyah Djani, Permanent Secretary of Indonesia to the United Nations in Geneva; and Dr Haik Nikogosian, Head of Convention Secretariat, WHO Framework Convention on Tobacco Control.

Rapporteur: Associate Professor Ted Schrecker, University of Ottawa.

Key themes:

- Health is affected by the global financial crisis, the environmental crisis of scarce natural resources and climate change, and the rise in wealth inequalities around the world.

- Policy coherence is both possible and necessary. A number of policy instruments in place have positive benefits, such as the Doha Declaration and the Oslo Declaration.

- Frameworks such as the WHO Framework Convention on Tobacco Control provide examples of new ways of working in global health.

- There is currently an emphasis on fulfilling the priorities of the economic sector rather than the health sector: thus inaction on social determinants of health is more a political choice than a result of lack of knowledge or technical capacity.

- The issue of equity is not about the divide between developed and developing countries, but one in which all countries can cooperate.

Key recommendations:

- Support the leading role of WHO in global health governance and promote alignment of its policies and plans on social determinants of health with other United Nations agencies and international organizations, including in facilitating access to financial and technical assistance.

- Foster and strengthen the capacity of civil society to engage in policy-making on health.
Accelerate the implementation by State Parties of the WHO Framework Convention on Tobacco Control, including measures to reduce consumption and availability, as a major contribution to addressing social determinants of health, and encourage countries not yet having done so to accede to the Framework Convention on Tobacco Control.

Facilitate access to resources and expertise when addressing social determinants of health and equity in order to develop the capacity of national governments through the support of United Nations agencies, in particular WHO.

**Afternoon session: Aligning priorities and stakeholders: acting on social determinants of health for global development**

**Objective:** Explore how priorities and stakeholders can be aligned to act on social determinants of health for global development.

**Chair:** Professor Pekka Puska, Director-General, National Institute for Health and Welfare, Finland.

**Panellists:** Dr Paison Dakulala, Deputy Secretary, National Department of Health, Papua New Guinea; Ms Sofiya Malyavina, Assistant Minister of Health and Social Development, Russian Federation; Dr José Gomes Temporão, Director, South American Institute of Health Governance; and Dr Rebeca Grynspan, Associate Administrator, UNDP.

**Rapporteur:** Mr Jeffrey O’Malley, Director, HIV/AIDS Group, UNDP.

**Key themes:**

- Action on social determinants of health to address health inequities is based on understanding local and global factors and context.
- Action on social determinants of health and equity must be collaborative undertaking with multiple stakeholders, including civil society.
- Parallel action on health and development is mutually beneficial; the strongest gains can be made by bringing health and development actors together for joint analysis, planning and action.
- Strengthening democracy and participation is crucial in relation to addressing social determinants of health and equity.

**Key recommendations:**

- Align the agenda of the United Nations Conference on Sustainable Development (Rio+20) with the Rio Declaration.
- Adopt new and innovative policy approaches that are based upon the right of citizens to enjoy the highest attainable level of health, taking into account the right to development, and focusing on social determinants of health towards achieving the Millennium Development Goals (MDGs).

- Support national governments, international organizations and nongovernmental organizations (NGOs) to address social determinants of health and enhance health outcomes at the global, regional and national levels, while advancing international development goals.

- Involve civil society at all stages of developing, implementing and evaluating programmes, including in defining the agenda.

**Parallel session for theme 5: Monitoring progress: measurement and analysis to inform policies and build accountability on social determinants of health**

**Morning session: Measuring, monitoring and integrating data into policy**

**Objective:** Identify concepts, strategies and challenges for measuring, monitoring and integrating data into policy.

**Chair:** Sir Michael Marmot, Professor, University College London.

**Introductory note:** Professor Hoda Rashad, American University in Cairo.

**Panellists:** Ms Taru Koivisto, Director for Promotion of Welfare and Health, Ministry of Social Affairs and Health, Finland; Dr Carmen Amela Heras, Director-General of Public Health, Ministry of Health, Social Policy and Equality, Spain; Mr Rahhal El Makkaoui, Secretary-General, Ministry of Health, Morocco; and Associate Professor Papaarangi Reid, University of Auckland, New Zealand.

**Rapporteur:** Professor Mauricio Barreto, Universidade Federal da Bahia.

**Key themes:**

- Civil society organizations have a major role to play in keeping governments accountable.
- Data and information can be used to design appropriate objectives and policies. Indicators can be further developed to provide data on risk factors, social determinants of health and health outcomes, and can influence public policies.
- Data demonstrate and bring attention to social injustice and inequity, and give voice to marginalized groups.
• Setting targets to reduce inequities in health and mobilizing society for this agenda is essential. Decision-making is more sensitive when good measures are also socially and politically useful indicators.

Key recommendations:
• Promote appropriate monitoring systems that take into consideration the role of civil society, NGOs and the private sector, guard against conflict of interests, and hold governments and stakeholders accountable for their decisions and actions and the impact of these on health and equity.
• Develop evidence-based and reliable measures of well-being, building on existing indicators and standards. Such indicators should run across the social gradient and extend beyond economic growth to the evaluation of the impact of social policies.
• Improve universal access to and use of information and communication technologies in social determinants of health, and strengthen information systems to make better use of data and monitor trends.
• Improve access to data, the results of research and monitoring, and evidence and trends for all sectors of society, and take these into consideration in policy-making.
• Use mechanisms such as a Health in All Policies approach to establish partnerships with other sectors for addressing inequities and social determinants of health and ensure accountability.

Afternoon session: Raising accountability for equity impacts of policy

Objective: Identify key concepts, strategies and challenges for raising accountability for equity impacts of policy.

Chair: Dr Ala Alwan, Assistant Director-General, Noncommunicable Diseases and Mental Health, WHO.

Panellists: Dr Abdul Bari Abdulla, State Minister of Health and Family, Ministry of Health, Maldives; Dr Henry Madzorera, Minister of Health and Child Welfare, Zimbabwe; Dr Jaime Breilh, Director of the Health Area, Universidad Andina Simon Bolivar, Ecuador, and founding Director of the Health Research and Advisory Centre (CEAS); Dr Myrna Cunningham, President, United Nations Permanent Forum on Indigenous Issues; Ms Nancy Krieger, Professor of Society, Human Development and Health, and Co-Director of the Interdisciplinary Concentration on Women, Gender and Health, Harvard School of Public Health, United States of America; and Dr Abhay Shukla, Coordinator, Support for Advocacy and Training to Health Initiatives (SATHI), India.

Rapporteur: Dr Sharon Friel, Australian National University and HealthGAEN.

Key themes:
• The role of community (and monitoring) is essential in increasing accountability of governments.
• Disaggregation of data can reveal multiple aspects of social inequalities in health, such as in relation to socioeconomic position, gender, race and ethnicity, and indigenous status.
• Civil society has a key role as an important source of information and pressure for accountability.
• Binding international agreements such as the Framework Convention on Tobacco Control are powerful and important in that they bring the perspective of accountability to federal and international levels.

Key recommendations:
• Develop and strengthen monitoring systems that provide disaggregated data to assess inequities in health outcomes and in allocation and use of resources.
• Promote research to investigate the causes of health inequalities, the relationships between social determinants of health and health equity outcomes, and the effectiveness of interventions.
• Develop monitoring indicators in a participatory manner, involving civil society.
• Support the leading role of WHO in its collaboration with other United Nations agencies and international organizations in strengthening the monitoring of progress on social determinants of health.

Ministerial Track

Statements by heads of delegation of Member States

Day Two included a “Ministerial Track” session for government delegations, giving them the opportunity to officially address the World Conference and present on behalf of Member States their positions on social determinants of health. The session consisted of a morning and an afternoon meeting and was chaired by the former Minister of Health of Hungary, Dr Mihaly Kökény, supported by the WHO Secretariat. Overall, 50 official delegations enrolled for the session, of which 46 delegations made statements. Fifteen of the speakers that took the floor on behalf of their delegations were ministers of health.
Participating delegations covered a diverse range of social determinants of health topics that were related to their national contexts. Key messages repeatedly raised by speakers included (a) the need for intersectoral action to address the social determinants, particularly because most of those determinants were located outside the health sector; (b) the relevance of primary health care approaches to expand health systems and address common social determinants through action in the health sector; and (c) the need to promote and encourage social participation and empowerment. Other key topics addressed were the need to promote universal social policies — such as in education, employment and social protection — and the need to enhance international collaboration to promote work on social determinants.

Countries also acknowledged the critical challenges facing work to address social determinants, including the increasing burden of noncommunicable diseases, the increased impacts on health and equity resulting from environmental degradation, and the impact of the global financial crisis in significantly undermining national economies and governments' capacity for social expenditure.

The following Member States (listed in alphabetical order) took the floor in the Ministerial Track to make statements: Algeria, Angola, Argentina, Australia, Bangladesh, Plurinational State of Bolivia, Burkina Faso, Canada, Cape Verde, Chile, Comoros, Cuba, Ecuador, Ethiopia, Finland, France, Germany, Guinea Bissau, India, Indonesia, Iraq, Islamic Republic of Iran, Israel, Kenya, Mauritius, Mozambique, Nigeria, Norway, Peru, Philippines, Poland, Portugal, Russian Federation, Senegal, Sierra Leone, Slovenia, Sri Lanka, Sudan, Suriname, Swaziland, Sweden, Switzerland, Tunisia, Uganda, Zambia, and Zimbabwe.

**Reflections on social determinants of health**

**Objective:** Discuss the historical development of the social determinants of health agenda and the strategic way forward from the conference.

**Chair:** Dr Mihaly Kökény, Former Minister for Health of Hungary and former Chair of WHO Executive Board.

**Panellists:** Sir Michael Marmot, Professor, University College London; Professor Paulo Buss, Oswaldo Cruz Foundation (Fiocruz), Brazil; and Professor Ilona Kickbusch, Director of the Global Health Programme, Graduate Institute of International and Development Studies, Geneva.

**Key themes:**

- The World Conference builds upon the legacy of the Alma-Ata Declaration, the Ottawa Charter, and the work of the Commission on Social Determinants of Health, and is a further stepping stone in the movement towards recognition of the need to address social determinants of health to reduce health inequities.
- The social determinants of health and equity agenda are linked with other key agendas and high-level debates in the coming years, including those relating to the environment, sustainable development, and the economy and finance.
- The key roles for national ministers of health include ensuring equitable access to health care, with greater focus on prevention and health promotion; advocacy and partnership, particularly across government; and contributing to improved knowledge, measurement and understanding of social determinants of health.
- Issues of health, health care and social security are inextricably linked to democratic processes; good social and health policies can only come about when governments involve people.

**Key recommendations:**

- Advocate and foster support for a United Nations General Assembly session on social determinants of health and equity.
- Advocate and foster support for the inclusion of social determinants of health in the agenda of the United Nations Conference on Sustainable Development in 2012.
- Support the United Nations – WHO in particular – in taking leadership in addressing social determinants of health and equity issues at the global governance level.
- Strengthen networks for information exchange and provide mutual support for United Nations agencies, countries, academics and civil society working on social determinants of health.
High-level round table on social determinants of health and the life course

Objective: Discuss the relationship between the social determinants of health and the life course.

Moderator: Mr Riz Khan, Al Jazeera English.

Panellists: Dr Marie-Paule Kieny, Assistant Director-General, Innovation, Information, Evidence and Research, WHO; Ms Maria Guzenina-Richardson, Minister of Health and Social Services, Finland; Mr William Lacy Swing, Director-General, IOM; Dr Purnima Mane, Deputy Executive Director, Assistant Secretary-General, UNFPA; Dr Geeta Rao Gupta, Deputy Executive Director, Assistant Secretary-General, UNICEF; and Dr David Sanders, Emeritus Professor, University of the Western Cape.

Key themes:

- Addressing social determinants of health around early child development and ageing populations is crucial: it can help to ensure that inequities in child health and development outcomes do not worsen, and that older people continue to be included in and contribute to society, and not be subject to poverty, disability or isolation.

- United Nations agencies must work in a collaborative and coordinated manner to address social determinants of health and equity issues.

- Economic and trade policies are an important underlying source of issues of social determinants of health and health inequities.

- Civil society performs an important role in holding governments accountable.

Key recommendations:

- Consolidate, maintain and strengthen the momentum and commitment from the World Conference for further action on social determinants of health to address health inequity.

- Ensure United Nations agencies work in a collaborative and coordinated manner to address social determinants of health and equity issues.

- Advocate and foster support for governments, United Nations agencies and civil society to collectively work to ensure that economic and trade policies and commercial vested interests do not take precedence over or impact negatively on health and social equity.

- Undertake action on social determinants of health to improve health equity with a life course perspective, with a particular focus on early child development and ageing populations.

- Undertake decisive action to implement the Rio Declaration, providing a way forward and a stepping stone for further action.
Closing speeches

Dr Alexandre Padilha, Minister of Health, Brazil, stated that the Rio Political Declaration reaffirmed the role of the State, not only in providing health but in developing a set of economic and social policies that tackled inequity. The declaration also recognized that the global economic crisis should not be viewed as an obstacle to the achievement of the universal right to health, but as an opportunity for further expansion of that right to health and social policies, through investing in social policies rather than cutting social expenditure.

Dr Rüdiger Krech, Director, Department of Ethics, Equity, Trade and Human Rights, WHO, formally announced the Rio Political Declaration, stating that it was a galvanizing point for the many stakeholders, contexts and agendas that needed to be considered during negotiation of the text. He congratulated Member States on their dedication and commitment to reaching consensus, and urged the global health community to use the declaration in taking forward the social determinants of health and equity agenda.

Dr Marie-Paule Kieny, Assistant Director-General, Innovation, Information, Evidence and Research, WHO, described the history of the understanding that public health required working across sectors and paying attention to equity, from the WHO founding Constitution, through the Alma-Ata Declaration, the Ottawa Charter, the Commission on Social Determinants of Health and its associated 2009 World Health Assembly resolution, to the World Conference. Dr Kieny highlighted the challenges in implementing actions on social determinants of health to address health inequities and expanding efforts in difficult global times, and expressed WHO’s continuing commitment to convening and assisting the global movement and assisting Member States to make progress on health inequities.

Ms Maria Guzenina-Richardson, Minister of Health and Social Services, Finland, emphasized that the conference was a landmark in the pursuit of better health and equity for people in the world. It had highlighted the growing awareness that health must be a cross-cutting aim in national policy-making and the importance of developing the concept of Health in All Policies. Future efforts should build and elaborate on the work at the World Conference (which also provided a solid basis for the eighth Global Conference on Health Promotion in Helsinki, Finland, in 2013).

Mr Antonio Patriota, Minister of Foreign Relations, Brazil, heralded the conference as a chapter written in the history of public health and the reduction of social injustice, stating that the Rio Declaration acknowledged that equity in health was a common responsibility and that fair and inclusive societies had human well-being as their centre point. Mr Patriota expressed his confidence that the declaration would be a successful tool in ensuring the central position of health in all public policies and called on Member States to ensure that it was endorsed at the World Health Assembly in 2012. He underlined the crucial links between social determinants and sustainable development, with the World Conference acting as a step towards the United Nations Conference on Sustainable Development in Brazil in 2012.

Next steps

In January 2012, the WHO Executive Board reviewed the outcome of the World Conference on Social Determinants of Health, including progress on the implementation of resolution WHA62.14. The Board recommended that a resolution be adopted at the sixty-fifth World Health Assembly (to be held in Geneva, 21–26 May 2012) endorsing the Rio Political Declaration.