

## The Social Determinants of Health and Health Equity in the EMR/MENA Region

This workshop was jointly sponsored by the Social Research Center (SRC), American University in Cairo and the Eastern Mediterranean Regional Office of the WHO (EMRO). It was held on 5-7 June 2006 at the Social Research Center.

The main objective of the workshop was to provide a forum for the development of a regional perspective on Social Determinants of Health and health equity issues, and their policy implications. The workshop also aimed to discuss future endeavors for improving knowledge base on health and health inequities in the EMR.

The meeting opened with a welcome by Dr Hoda Rashad, Director of SRC and a global Commissioner for SDH, and Dr Sameen Siddiqi, Region Adviser, Health Policy and Planning and regional focal person for SDH in EMRO. Dr Belgacem Sabri, Director, Health Systems and Service Development at EMRO, the Division in which SDH activities are centered, attended on the second day. He spoke about the role of WHO in encouraging country level SDH activities by generating evidence to help advocacy and the disseminating information, and helping countries to develop equity in financing.

The first presentations comprised six country papers on SDH, of the seven commissioned by EMRO: Egypt, Iran, Jordan, Morocco, Oman, and Palestine. The Pakistan presenter was unable to attend. A brief presentation followed on Regional themes on SDH by Dr. Susan Watts, and EMRO strategies for implementing SDH (Box 1). Papers were then presented on civil society, on Iran as a “partner country”, and on the Community Based Initiative at EMRO.

### **Regional SDH Themes**

- Women’s empowerment/enablement
- Gender dynamics
- Child labor and street children
- Lifestyle and behavioral issues
- Migrant workers
- Inequitable health systems
- Conflicts and emergencies

### **Regional Strategies to address SDH**

- Develop a solid evidence base
- Advocate inclusion of SDH in national policies and programs
- Develop partnerships with CSOs, academia and other stakeholders
- Revisit intersectoral collaboration among public sector organizations
- Capacity development of health professionals in social science disciplines
- Initiate and scale up Community-based Initiatives schemes

One the final day, the authors of each country paper presented their ideas for improving the paper. SRC faculty then presented information on training, internships, and research opportunities offered by SRC. Allan Hill, Harvard School of Public Health, with input from Hoda Rashad and Zeinab Khadr of SRC, then discussed ways to assess and analyze the health divide, reflecting on possible categories, questions and framework for analysis. Dr Sameen Siddiqi (EMRO) rounded off the workshop by identifying possible short and long term collaborative efforts between SRC and EMRO.

An important feature of the workshop was the range of stakeholders present, including people from WHO/EMRO, academia (SRC, Harvard University, American University in Beirut and academics presenting EMRO country papers), from civil society, and from Iran, a “partner country”. Delegates came from eight countries, including Egypt: from Iran, Jordan, Morocco, Oman, Palestine, Syria, Sudan, and Yemen. This contributed to a lively debate. For example, civil society representatives expressed concern about the apparent neglect of the distal causes of ill-health in the CSDH, and of the need for better evaluation and more powerful advocacy. In discussions of CBI, interest focused on the institutionalization of programs at governmental level, and the role of CSOs in achieving local sustainability.

Dr Hoda Rashad stressed the need to move forward in collecting and presenting evidence that would embarrass health and other sectors to move forward on health equity. The presence of representatives from Iran, a “partner country”, and Mr. Saif Al Nabhani, Director General of Health Planning, Ministry of Health, Oman, focused interest on helping ministries of health, and other line ministries to “mainstream” SDH and health equity. It was recognized that while many governments and ministries of health may acknowledge the value of health equity and SD, they either lacked commitment to them, or an understanding about how to move forward on action.

To move forward on evidence and action, Allan Hill spoke of new measures of health outcomes, and the difficulty of measuring morbidity, compared to the more common measures of mortality. He then challenged participants to think further about an analytical framework for 1) establishing values (nothing is value free and values are embedded in politics) 2) assessing and analyzing the

health divide 3) tackling root causes “the causes of the causes” and 4) building efficient and equitable health and social welfare systems. Dr Siddiqi commented that, for a policy adviser the challenge of CSDH was like “building a boat and sailing it at the same time”. Regardless of their background as academics, policy advisers, and civil society representatives, workshop participants agreed to continue collaboration; to refine the terms of debate, to learn more from each other, and to contribute to an ongoing dialogue based on their specific areas of knowledge and concern.