Overview

In October 2011, the World Health Organization convened the World Conference on Social Determinants of Health. The aim was to focus the attention of health leaders and policy-makers on how health inequities between and within countries could be reduced, and to forge a global vision for a coordinated international response.

The conference was held in accordance with the World Health Assembly resolution WHA62.14 on 'Reducing health inequities through action on the social determinants of health' (2009) and followed the publication of the final report of the Commission on Social Determinants of Health (2008). The event was supported and hosted by the Government of Brazil and organized jointly by WHO, the Ministry of Health of Brazil and Brazil’s leading health institute, FIOCRUZ.

Health leaders and decision-makers from over one hundred Member States travelled to Rio de Janeiro to meet a diverse group of stakeholders, including UN agencies, civil society organizations, academic institutions and research groups. The conference had over a thousand participants while more than 19,000 people followed the event through webcast. As many as nineteen stakeholder-led events were held prior to and after the conference.

During the three days of plenary sessions, parallel sessions and a dedicated ministerial track, participants shared experiences on policies and strategies that could help to reduce the dramatic 36-year gap in life expectancy around the world. They also discussed how the Commission’s recommendations and the suggestions outlined in the WHO Conference Discussion Paper, could be translated into concrete policy action.

High-level speakers

Over fifty high-level speakers addressed the event, including Michel Temer, Vice President of Brazil; Dr Alexandre Padilha, Minister of Health of Brazil; Antonio Patriota, Minister of Foreign Relations of Brazil; Dr Margaret Chan, WHO Director-General; Dr Kathleen Sebelius, Secretary of Health and Human Services of the USA; Michel Sidibé, Executive Director of UNAIDS, William Lacy Swing, IOM Director-General; Geeta Rao Gupta, Deputy Executive Director of UNICEF; and Purnima Mane, Deputy Executive Director of UNFPA and Assistant Secretary-General.

“Lives hang in the balance, many millions of them. These are lives cut short, much too early, because the right policies were not in place. That basic human desire for a better life is at stake, as are prospects for lifting more than a billion people out of an eternal poverty trap. Social cohesion, stability, and security are at stake, in individual nations and internationally. The credibility of governments in the eyes of their citizens is at stake.”

Dr Margaret Chan, WHO Director-General
WHO Discussion Paper

The WHO Discussion Paper was developed in consultation with an Advisory Group of prominent experts, and was finalized after an extensive web-based, public consultation. The paper laid out the key components that all countries would need to integrate while implementing a ‘social determinants of health approach’.

In particular, it outlined five key policy areas where action was necessary. These areas also provided the themes of the parallel sessions, held on Day Two of the conference.

The five themes were:
- governance to tackle the root causes of health inequities: implementing action on social determinants of health;
- promoting participation: community leadership for action on social determinants;
- the role of the health sector, including public health programmes, in reducing health inequities;
- global action on social determinants: aligning priorities and stakeholders;
- monitoring progress: measurement and analysis to inform policies to build accountability on social determinants.

WHO also developed five sector-specific policy briefs and WHO Regional Offices coordinated the production of 28 case studies, covering a range of issues, including conditional cash transfers, gender-based violence, tuberculosis programmes and maternal and child health.

To read the Discussion Paper, go to:
www.who.int/sdhconference/discussion_paper

QUICK FACTS

Today, a child born in Malawi can expect to live for only 47 years, while a child born in Japan could live for as long as 83 years. In low-income countries, the average life expectancy is 57, while in high-income countries, it is 80.

Women in Afghanistan have a lifetime risk of maternal death of 1 in 11, while a woman in Ireland has a risk of 1 in 17,800. In Chad and Mali, every fifth child dies before their fifth birthday, while in Finland and Japan the under-5 mortality rate is 3 out of 1000.

Health inequities within countries are also increasingly evident as detailed data becomes available. The gaps show a consistent pattern in all countries, often by socioeconomic status or geographical location. The lower an individual’s socio-economic position, the higher their risk of poor health.
Rio Political Declaration on Social Determinants of Health

On 21 October 2011, Member States adopted a political declaration, pledging to work towards reducing health inequities by taking action across the five priority areas discussed at the conference.

The declaration expresses global political commitment for the implementation of a 'social determinants of health approach', and it is expected to help build momentum within countries for the development of dedicated national action plans and strategies.

Member States also agreed that action should be adapted to the national and sub-national contexts of individual countries and regions to take into account different social, cultural and economic systems. Member States called upon WHO, United Nations agencies and other international organizations to coordinate and collaborate with them in the implementation of these actions.

The declaration was developed through a series of Member State consultations held at WHO headquarters in Geneva and chaired by the Government of Brazil. The text of the declaration was finalized during the conference in Rio de Janeiro.

To download the declaration, go to: www.who.int/sdhconference/declaration/en

Action: SDH

On Day Two of the conference, WHO launched an innovative web-based platform to facilitate discussion on how health equity could be improved through action on social determinants of health. In so doing, WHO will now join forces with a range of other organizations and networks around the world that are also committed to this agenda.

The platform enables its members to share experiences on the opportunities and challenges in this complex area, and provides a repository for innovative practices, examples and tools. In the Members Forum, members can initiate and respond to discussion topics. These discussions will be summarized periodically to draw out lessons on key barriers and facilitators to action. The platform also has Closed-door Forums, which can be used to hold restricted discussions and debates.

To access the platform, go to: www.actionsdh.org

Advisory Group

In May 2011, an Advisory Group was appointed to support WHO with advice on the organization and technical content of the conference. The group’s members acted in their personal capacity.

Dr Carmen Amelia Heras, Ministry of Health and Social Policy (Spain); Ms Jane Billings, Public Health Agency of Canada (Canada); Dr Nils Daulaire, US Department of Health and Human Services (United States of America); Dr Ilona Kickbusch, Graduate Institute of International and Development Studies (Switzerland); Dr Bernardo Kliksberg, UNDP Bureau of Development Policies (Argentina); Ms Taru Koivisto, Ministry of Social Affairs and Health (Finland); Dr Malebona Precious Matsoso, Department of Health (South Africa); Professor Sir Michael Marmot, University College London (United Kingdom); Dr Rómulo Paes de Sousa, Ministry of Social Development and Fight against Hunger (Brazil); Ms Tone P. Torgersen, Norwegian Directorate of Health (Norway)

WHO is grateful for the support and advice received from these experts.
WHO’s policy recommendations

In the Discussion Paper for the conference, WHO developed a five-point, global call to action to address social determinants of health. The organization’s key messages can be summarized as follows:

1. Reform of health governance is essential. To achieve sustainable results in the reduction of health inequities, ministries of health need to engage systematically with other sectors to address the health and well-being dimensions of their activities. This should be based on action plans that set out values, strategies and targets on health inequity reduction, as well as established frameworks for collaborative action between sectors (“intersectoral action”).

2. Need for a new culture of participation. There is a need for a new culture of participation in health - one that closely engages actors and influencers outside of the realm of government. In particular, governments should facilitate the key role of civil society organizations by formalizing their involvement in policy-making, enabling them to act as guarantors of governmental accountability and transparency, and recognizing their potential to gather health-related data and analysis to inform policy-making.

3. The health sector should take up a new role. Strong health systems, based on primary health care, are the cornerstone of a healthy society. The health sector should move towards universal health care coverage that is accessible, affordable and of good quality for all, funded through taxation, social insurance or other pre-payment pooling mechanisms. In addition, the health sector should be pro-active in reaching out to other sectors and steward the establishment of a whole-of-society approach to health.

4. Coordinated, global action is needed. National action on social determinants is not sufficient. International organizations, bilateral cooperation partners, and civil society organizations need to align their efforts on social determinants with national governments. There is also a need for the alignment of global priorities - such as the efforts to reach the MDGs, building social protection, addressing climate change and tackling the NCD epidemic. The UN system should lead by example and harmonize its work on social determinants of health.

5. Health data should be broken down. Governments need to break down the data to reveal the social gradient in health, which is apparent in all countries. They should establish a framework for the monitoring of inequities in health outcomes, social determinants and the impact of policies outside of health. Health and equity assessments should be done during the development of all new government policies. Integrated monitoring systems are needed both on the national and global levels, along with universally endorsed targets.

Dr Kathleen Sebelius, US Secretary for Health and Human Services, was one of the over fifty high-level speakers at the conference. She participated in the High Level Roundtable on Social Determinants of Health and Development on Day One, and answered questions from moderator Zeinab Badawi (BBC World) in a one-on-one discussion in the plenary hall on Day Two. Photo credit: Paulo Cartolano
Next steps

In January 2012, the WHO Executive Board will review the outcome of the World Conference on Social Determinants of Health, including progress on the implementation of resolution WHA 62.14 titled ‘Reducing health inequities through action on the social determinants of health’.

Dr Rüdiger Krech, Director of the Department of Ethics, Equity, Trade and Human Rights, explains what the next steps will be for the social determinants agenda within WHO.

“Following the discussion during the Executive Board meeting, there is a possibility that Member States will take the declaration to the Sixty-fifth World Health Assembly in May 2012. The discussions that will take place during these meetings of Governing Bodies will further contribute to the priority-setting at the national and global levels for future work on the social determinants of health. These deliberations will also provide guidance on how the pledges contained in the Rio Political Declaration on Social Determinants of Health should be taken forward. In addition, we would like to ensure that a solid linkage is established with the Rio+20 conference in Brazil and the 2013 health promotion conference in Finland.

Another key goal is to systematize our knowledge after the conference. We would like to join forces with civil society organizations and academia, whose initiatives will be instrumental in translating the conference's outcomes into action. The knowledge networks of the Commission on Social Determinants of Health have been instrumental in generating evidence on health inequities, and we are now working on building up the necessary infrastructure to connect all key stakeholders and facilitate knowledge-sharing. The health sector operates within a rather vertical structure and we need to assist stakeholders to break out of this and push for a degree of horizontal expansion and policy coherence for health.”
Useful links

www.who.int/sdhconference
www.who.int/social_determinants
www.actionsdh.org