

Taking Forward Action on the Social Determinants of Health: WHO Commission on Social Determinants of Health

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UCL

Chair of WHO Commission on Social
Determinants of Health 2005 - 2008

Madrid
28th May 2009

- Social justice
- Empowerment – material, psychosocial, political
- Creating the conditions for people to take control of their lives

Closing the gap in a generation

Health equity through action on the social determinants of health



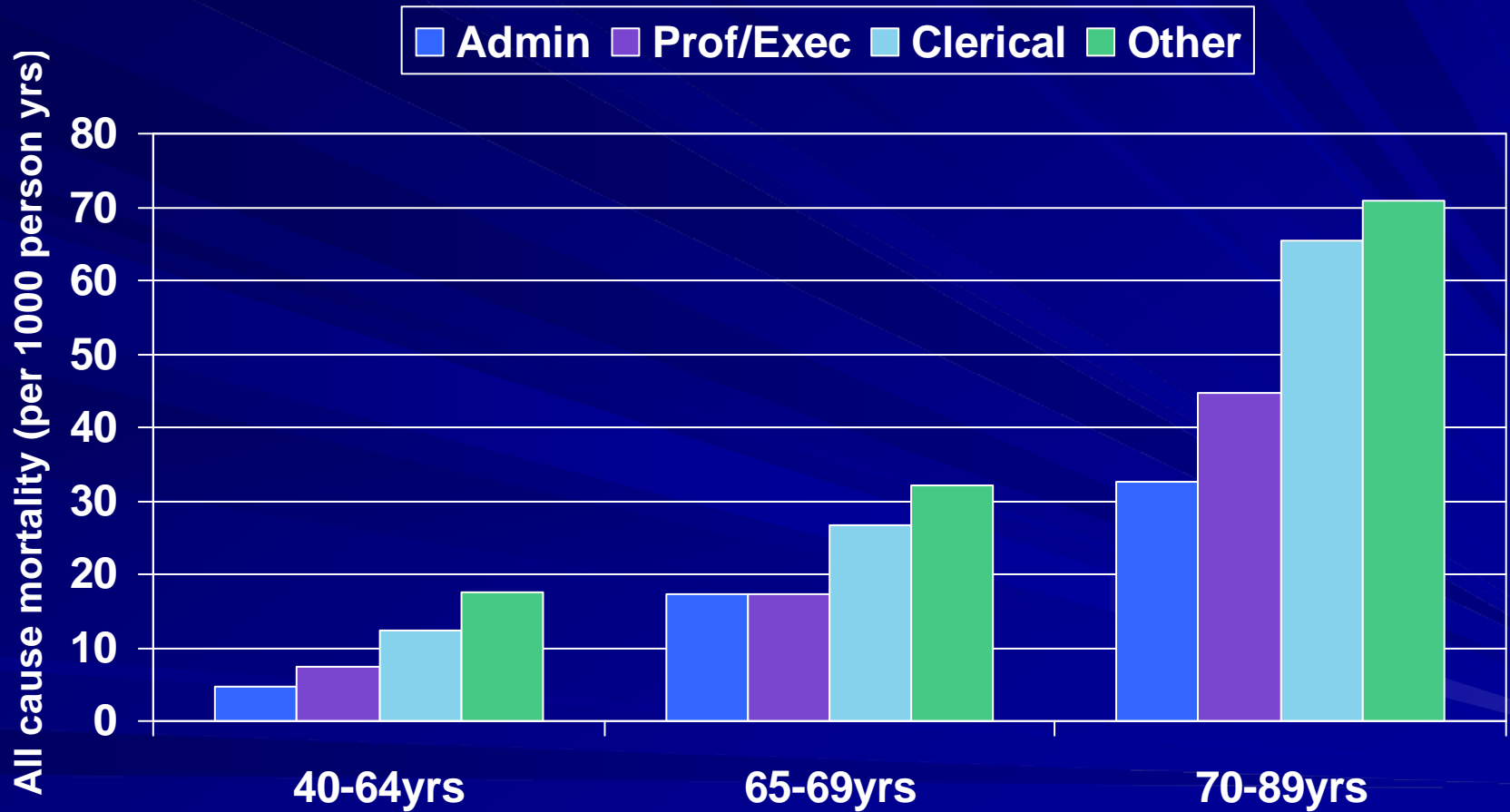
Outline

- Health inequities within and between countries
 - The social gradient in health
 - Social determinants of health and health inequity
- Action on SDH – societal well being
- Principles of action on the SDH
- Action on SDH – everyone's business
- Action on SDH – areas for action

Life expectancy at birth (men)

UK, Glasgow (Calton)	54
India	62
US, Washington D.C. (black)	63
Philippines	64
Lithuania	65
Poland	71
Mexico	72
Cuba	75
US	75
UK	77
Japan	79
US, Montgomery County (white)	80
UK, Glasgow (Lenzie N.)	82

Mortality over 25 years according to level in the occupational hierarchy: Whitehall

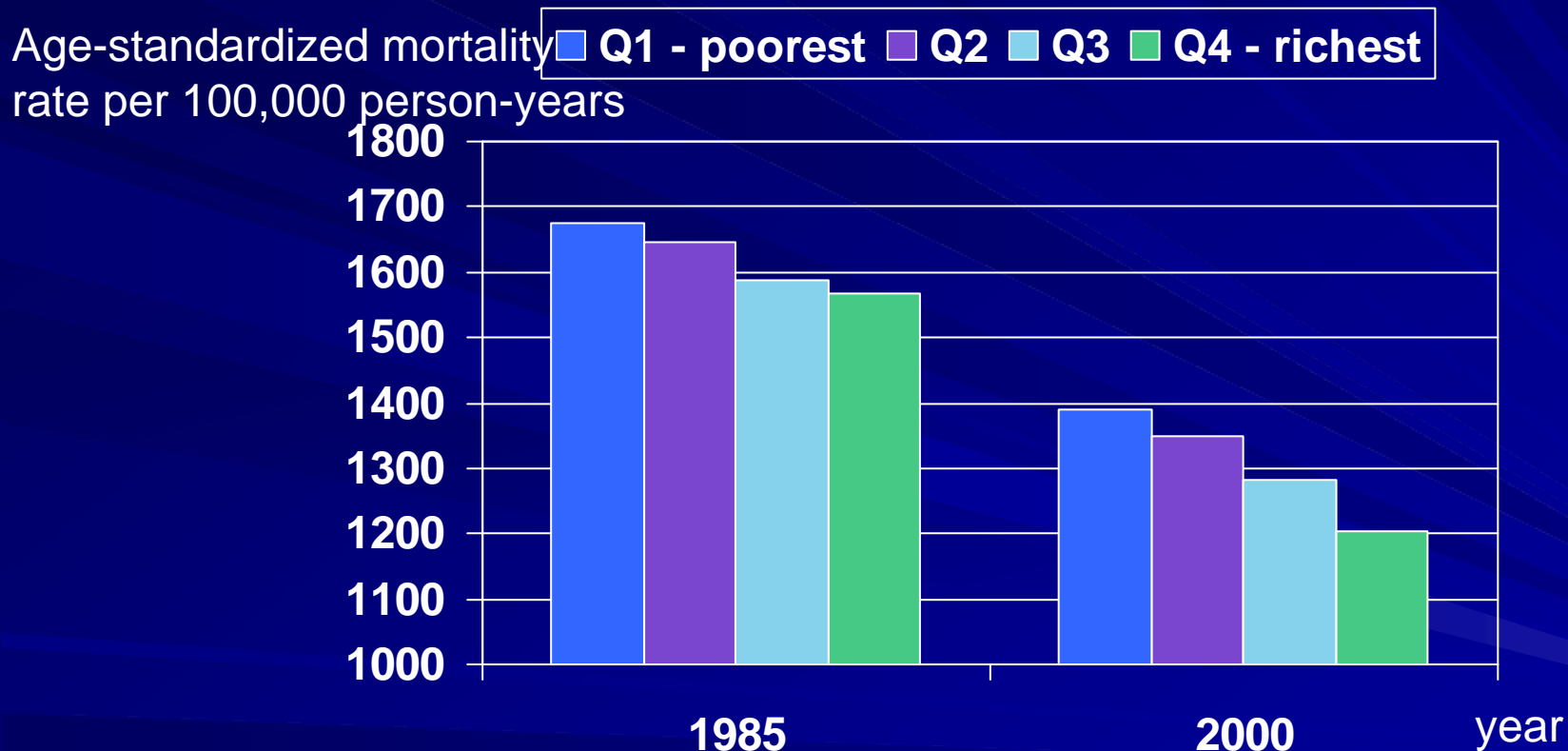


(Marmot & Shipley, BMJ, 1996)

Poverty and the social gradient

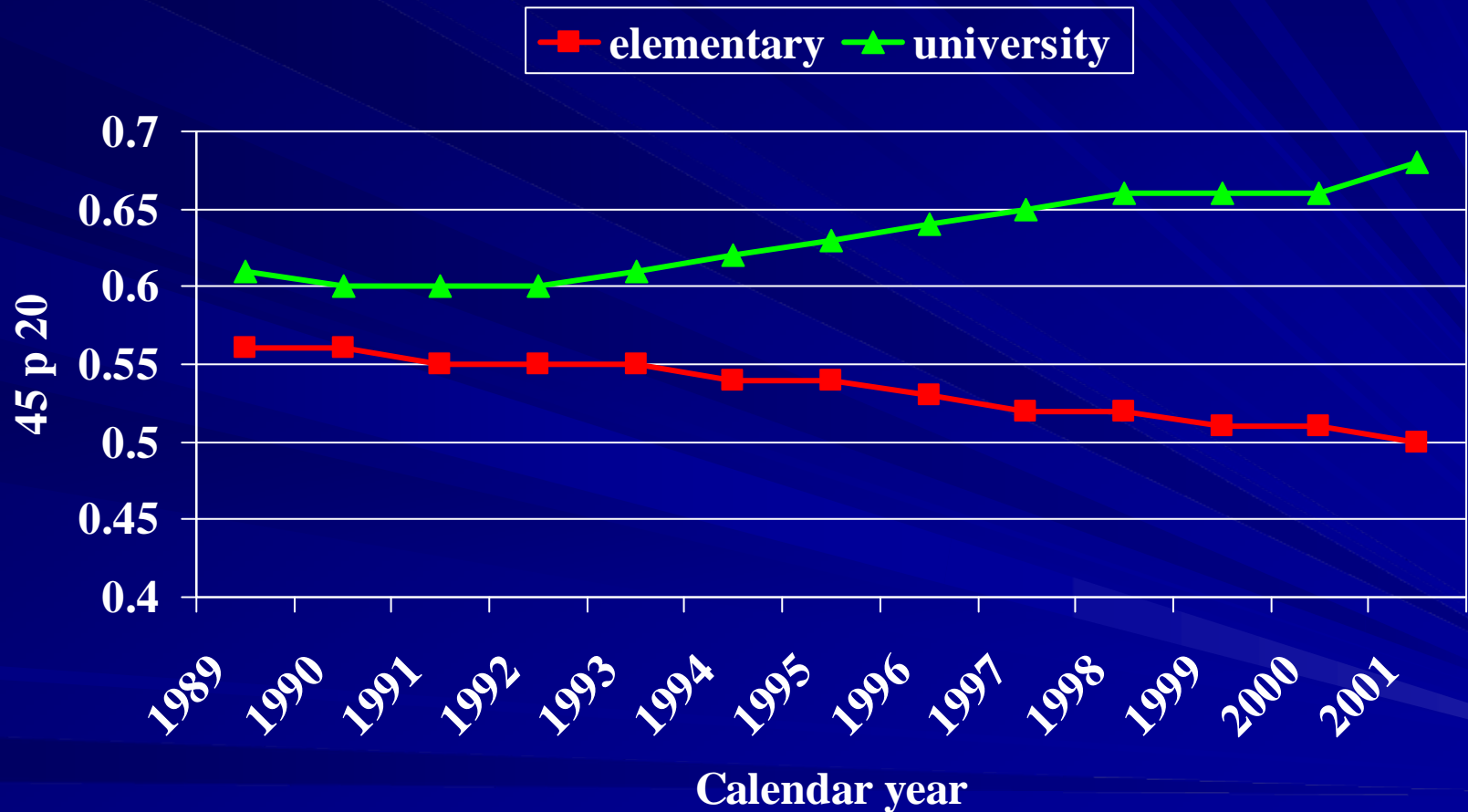
- If we only target the poorest 10% we miss most of the health problem

Mortality in men aged 45 -74 by provincial income quartiles: Spain



Improvements in mortality in all provinces BUT increase in relative and absolute inequalities between poorest and richest provinces

The widening trend in mortality by education in Russia, 1989-2001



45 p20 = probability of living to 65 yrs when aged 20 yrs

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Economic costs of health inequalities: Europe

- As 'capital good' (leading to less labour productivity) - about 1.4% of GDP or €141 billion per annum.
- As 'consumption good' - about €1,000 billion, or 9.5% of GDP per annum.

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CSDH – three principles of action

**Structural drivers of those conditions
at global, national and local level**

**Conditions in which people are
born, grow, live, work and age**

Monitoring, Training, Research

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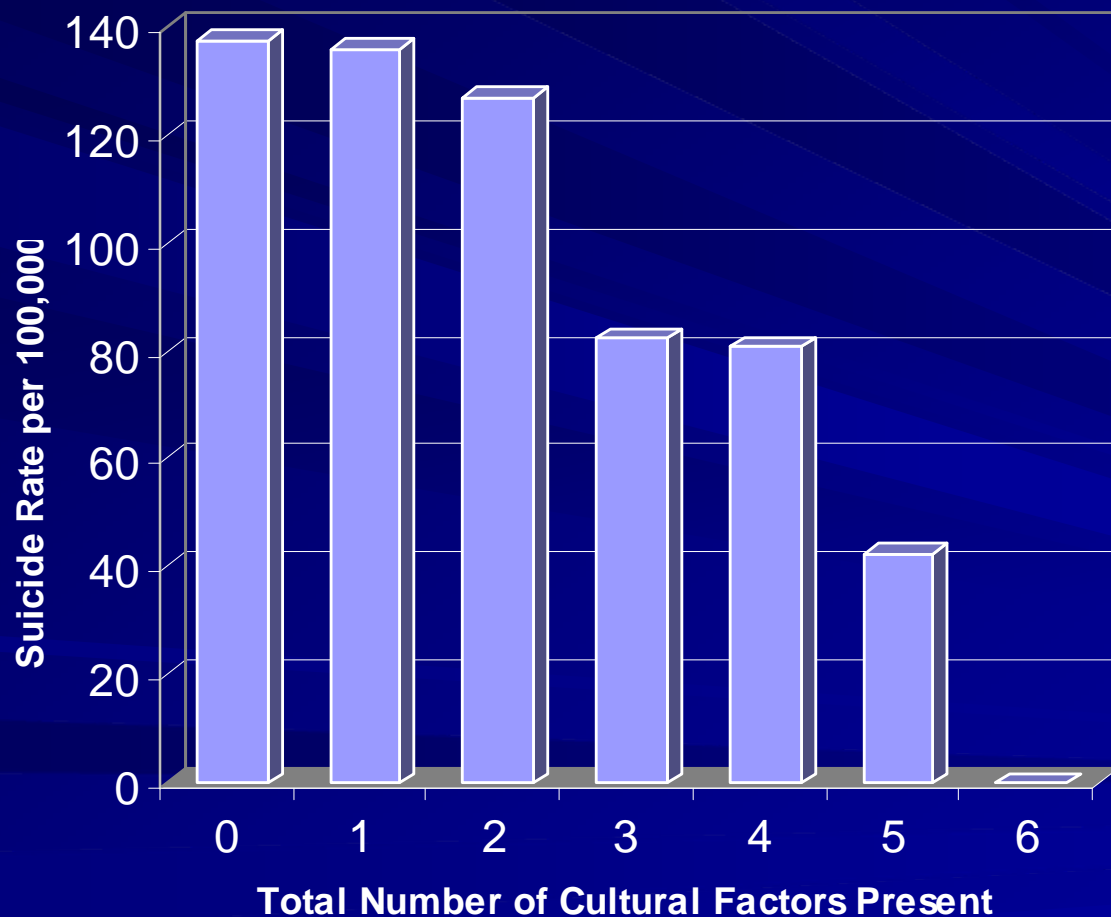
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- Every sector is a health sector
 - Health and well being as outcomes
- Empowerment

Aboriginal Youth Suicide by Factors Present



Cultural Factors:

- Self-government
- Land claim participation

Community Control:

- Health services
- Education
- Cultural facilities
- Police/fire services

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CSDH – three Linked Areas for Action

**Structural drivers of those conditions
at global, national and local level**

**Early child development and
education**

**Healthy Places people are
born, grow, live, work and age**

**Fair Employment and
Social Protection**

Universal Health Care

Monitoring, Training, Research

CSDH – Areas for Action

Health Equity in all Policies

Fair Financing

**Good Global
Governance**

**Early child development and
education**

Healthy Places

Fair Employment

Social Protection

Universal Health Care

**Market
Responsibility**

Gender Equity

**Political empowerment
– inclusion and voice**

CSDH – Areas for Action

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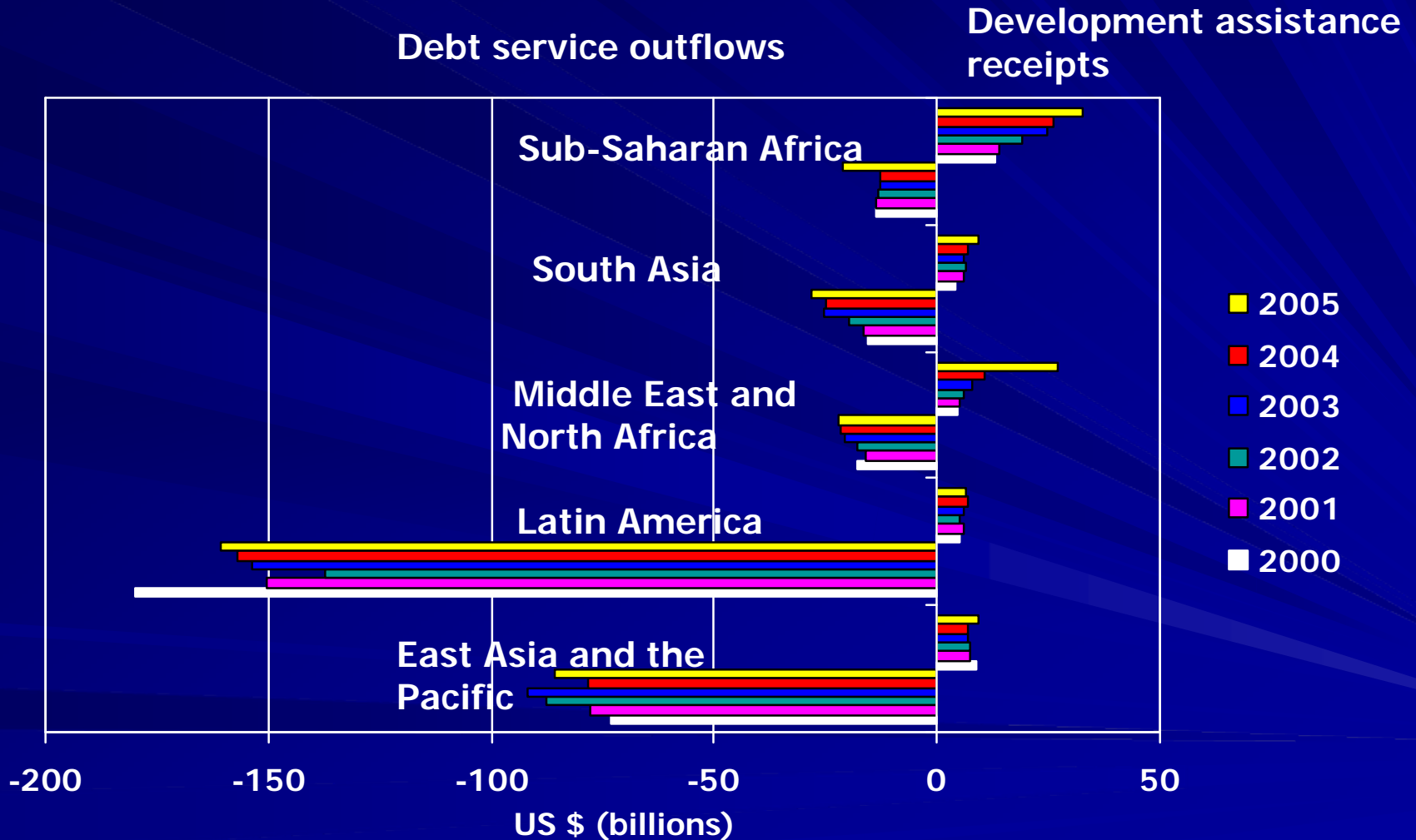
Universal Health Care

**Market
Responsibility**

Gender Equity

**Political empowerment
– inclusion and voice**

Debt service and development assistance, by region, 2000 - 2005



Source: World Bank, World Development Indicators (accessed March, 2008)

Education

- Kenya abolition of school fees for primary education 2003;
- Needs -
 - School infrastructure, teachers;
 - Capacity building;
 - Budget allocation



Kenya's last two budgets allocated US\$ 350 million more to debt relief than education

- Translating the CSDH recommendations into different country/regional contexts

“I am pleased to announce that Sir Michael Marmot has agreed to undertake a new review of health inequalities in England...”



“...And we will learn from other countries along the way...”

Gordon Brown, Prime Minister, UK
at Closing the Gap Conference, 6th Nov 2008

The causes and the causes of the
causes

Social inequalities and health
inequalities

Strategic Review of Health Inequalities in England – ‘Marmot Review’

- Evidence relevant to future policy and actions
- Objectives and measures
- Showing how evidence can be turned into practice
- Final Report - contribute to the development of a post-2010 health inequalities strategy

Strategic Review of Health Inequalities in England – Marmot Review

- Task groups:
 - early child development and education,
 - employment arrangements and work conditions,
 - social protection,
 - built environment,
 - sustainable development,
 - social exclusion and social mobility,
 - priority public health conditions,
 - economic analysis,
 - delivery systems

CSDH – Areas for Action

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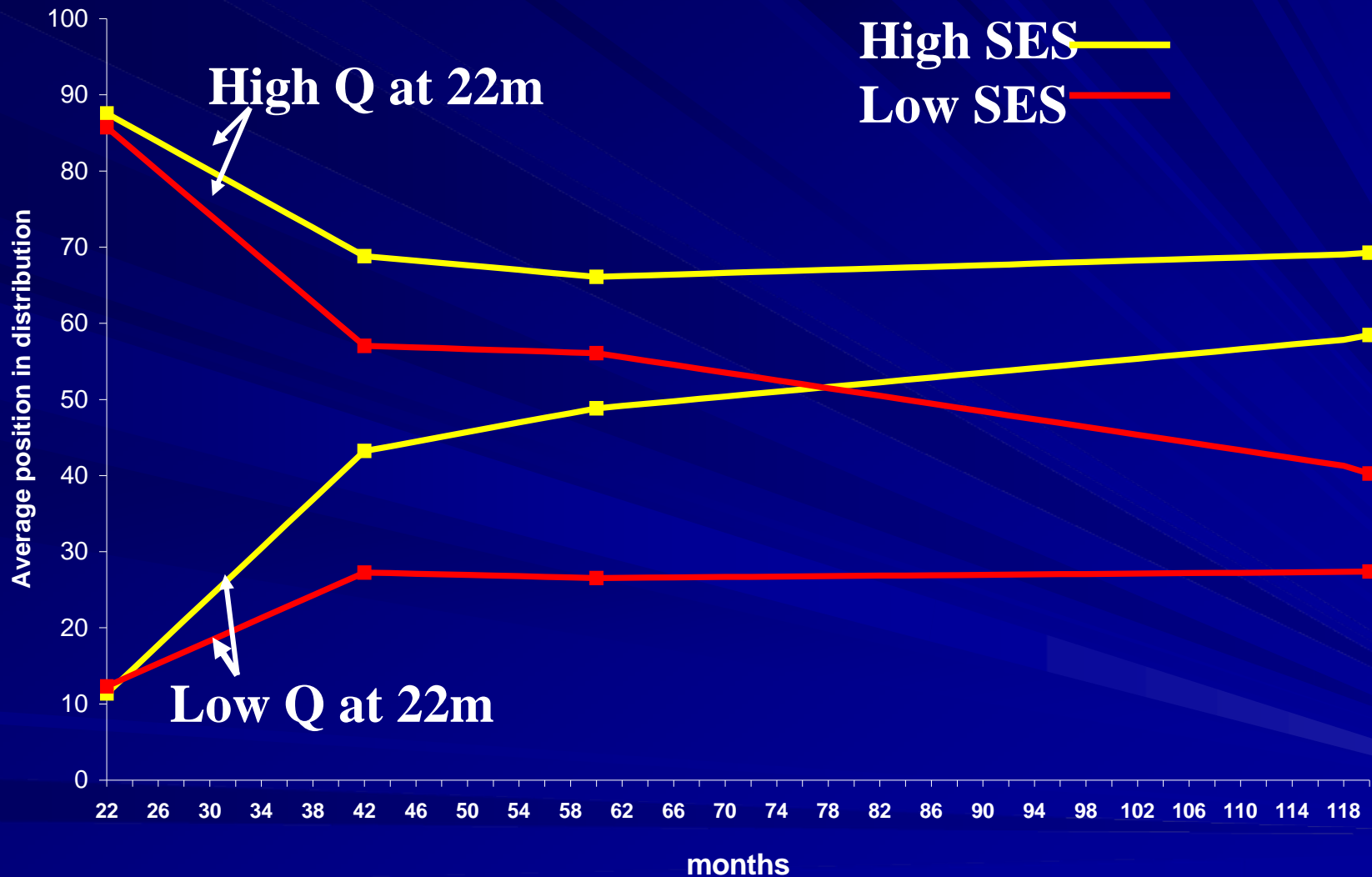
Gender Equity

**Political empowerment
– inclusion and voice**

Early child development and education

- Early life – survival and development
- Physical, language/cognitive and social/emotional development

Inequality in Early Cognitive Development of British Children in the 1970 Cohort, 22 months to 10 years



CSDH – Areas for Action



Healthy Places

- Sustainable development and built environment
- Energy efficiency
- Empowering communities

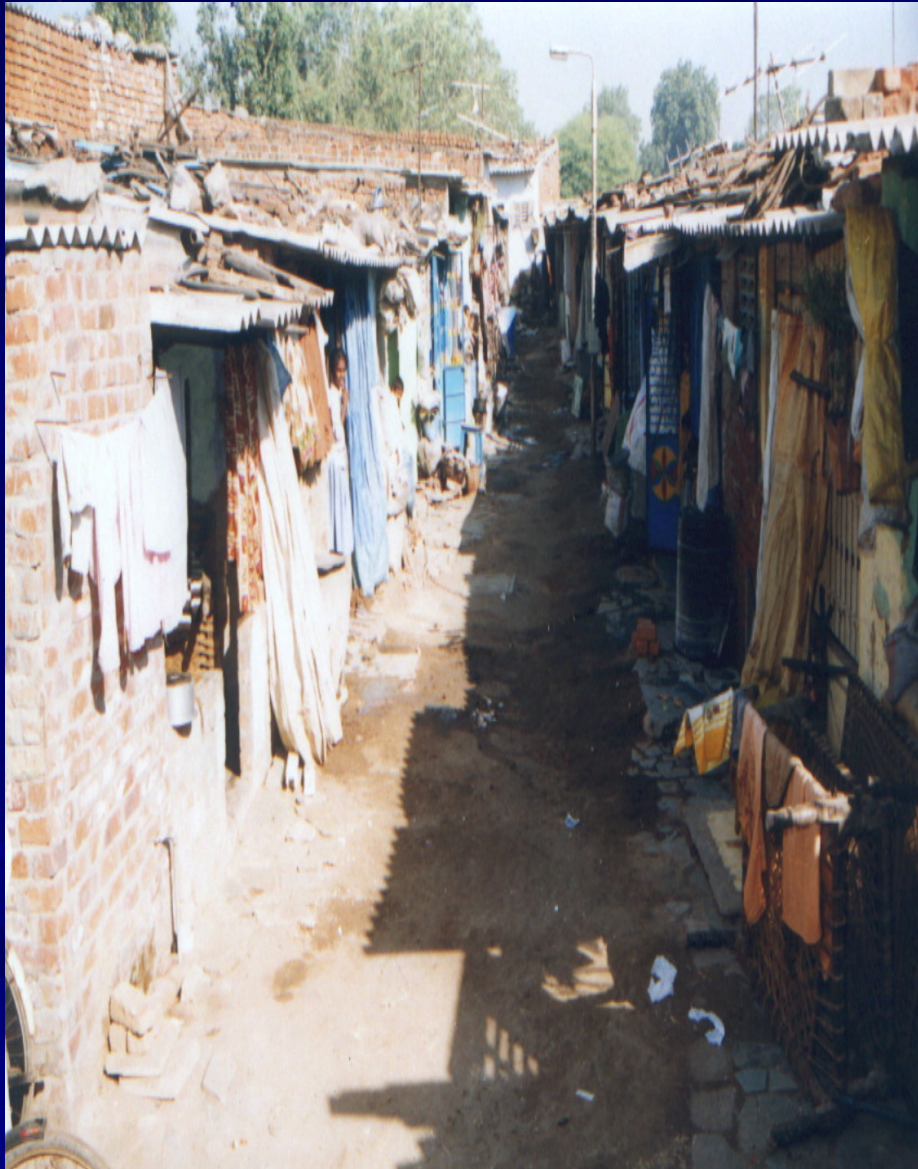
SEWA Case Study: The Parivartan Programme - Aims

- Improve the basic physical infrastructure within the slums and in the homes;
- Community development;
- City-level organisation for environmental upgrading of the slums

MELADI NAGAR

Before

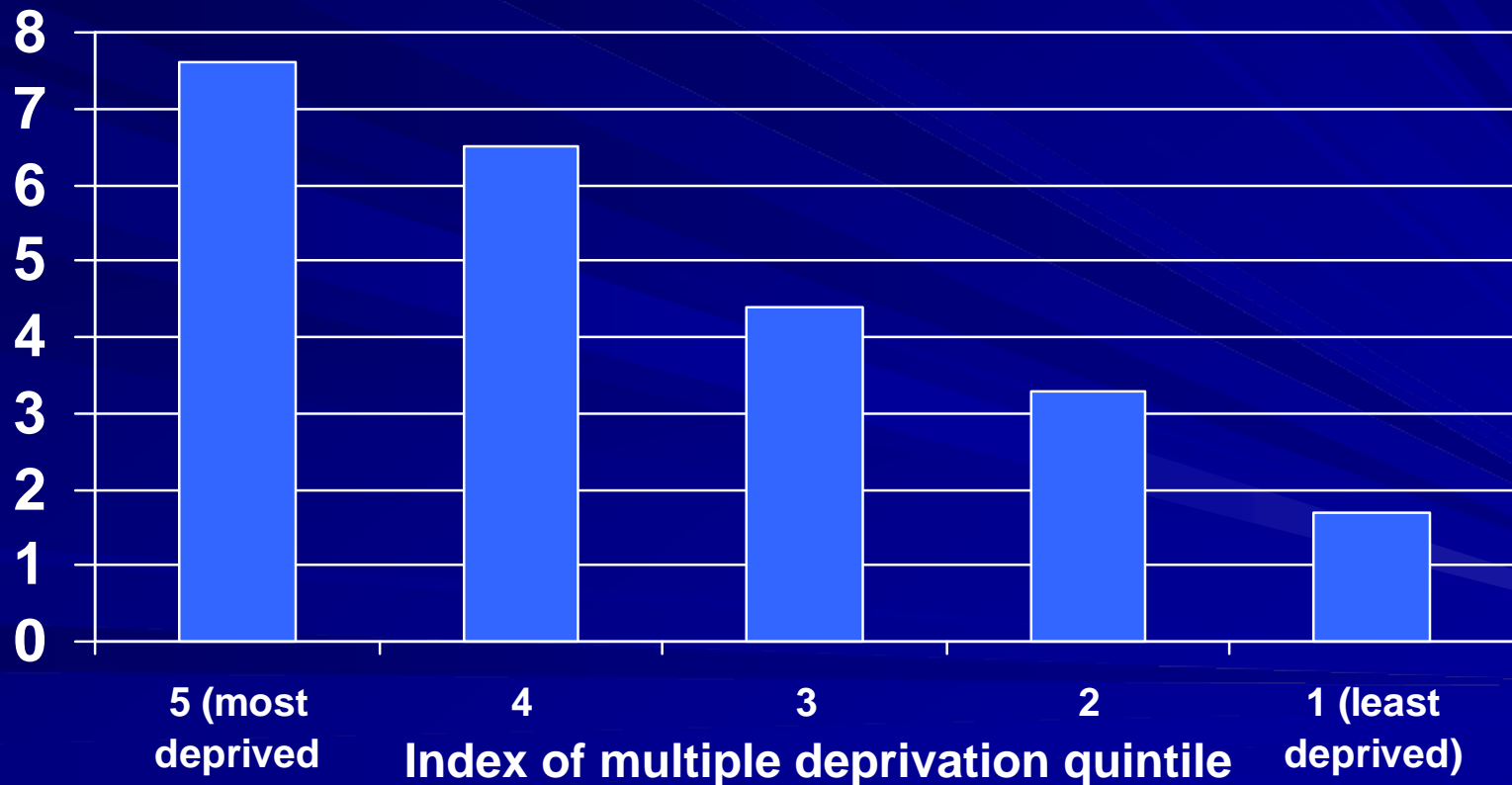
After



Slide courtesy of Gujarat Mahila Housing SEWA Trust

Fast food chains more common in deprived areas: England and Scotland

■ Mean number of fast food outlets* per 100000 people



(*McDonald's, Burger King, KFC and Pizza Hut)

During current recession - Not all business is declining ...

- McDonald's UK: 4,000 new jobs
- extra two million customers a month compared to last year (Aug 2008)
- McDonalds Europe: 240 new restaurants mostly in Spain, France, Italy, Russia and Poland
- 'consumers, particularly in Germany and Spain, favouring the cheapest menu items' (Jan 09)



CSDH – Areas for Action

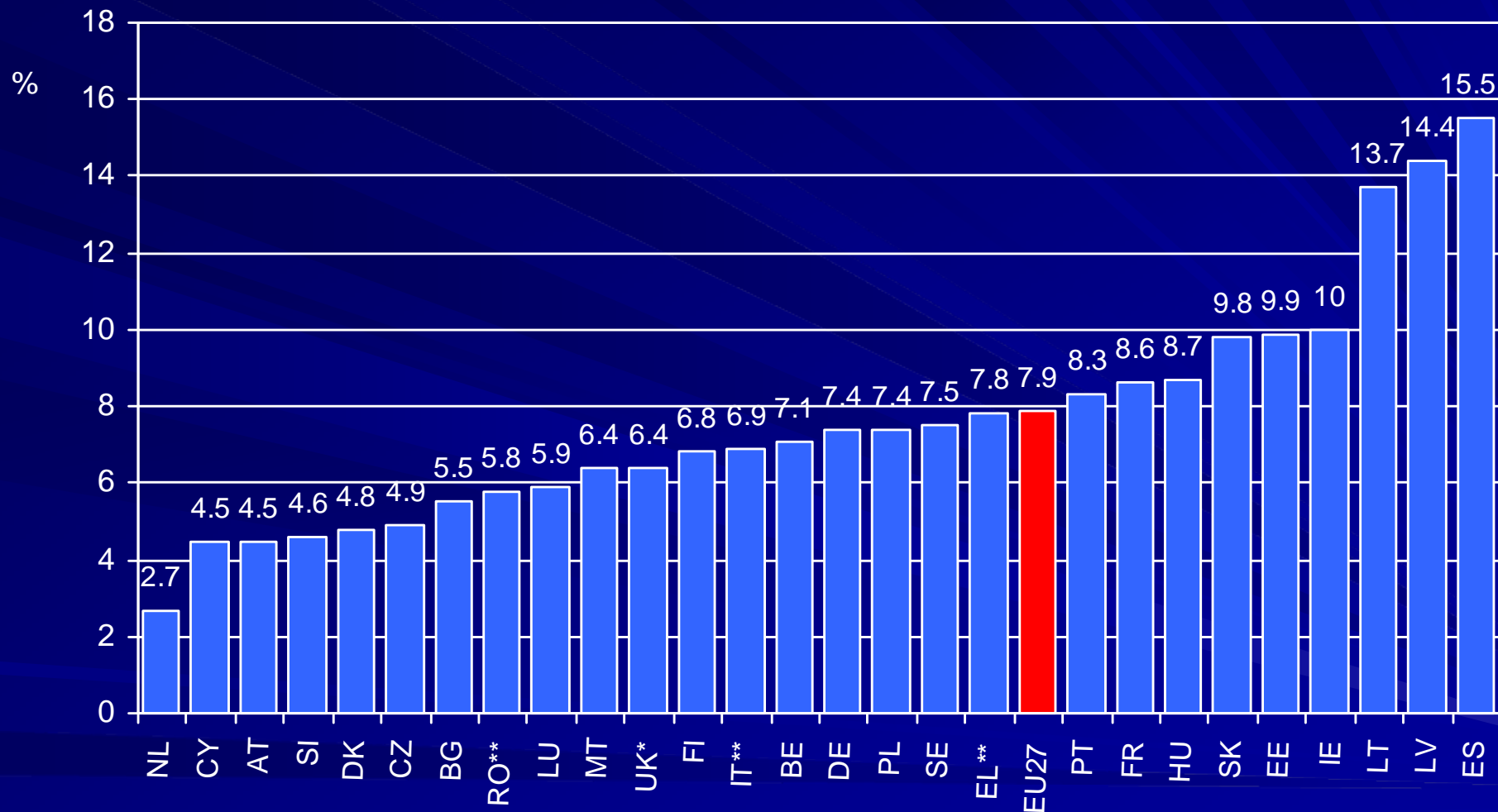


Employment policy is health policy

Good work

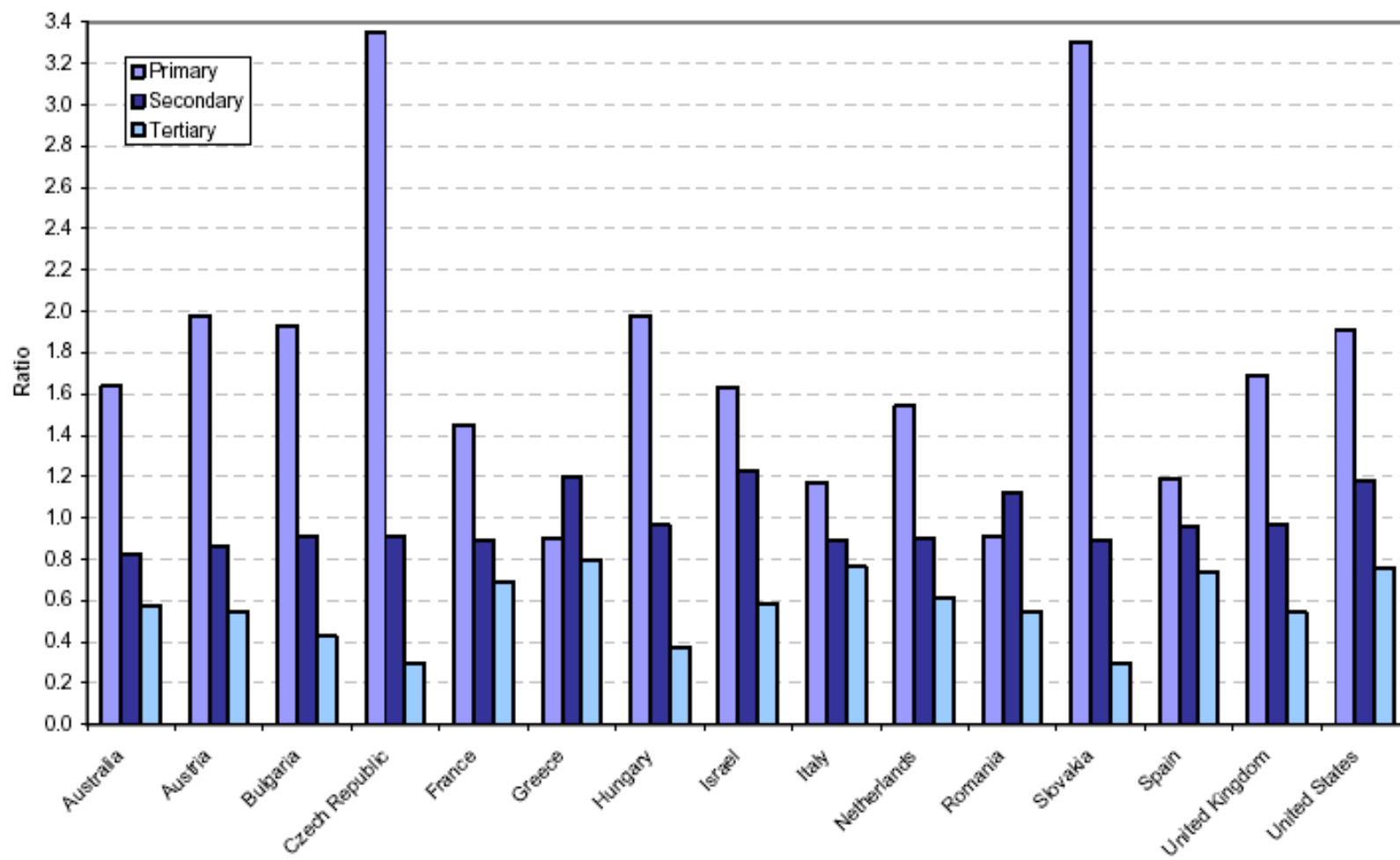
- Financial security
- Social protection
- Paid holiday
- Social status
- Personal development
- Social relations
- Self esteem
- Protection from physical and psychosocial hazards

Unemployment rates in Europe, February 2009, seasonally adjusted

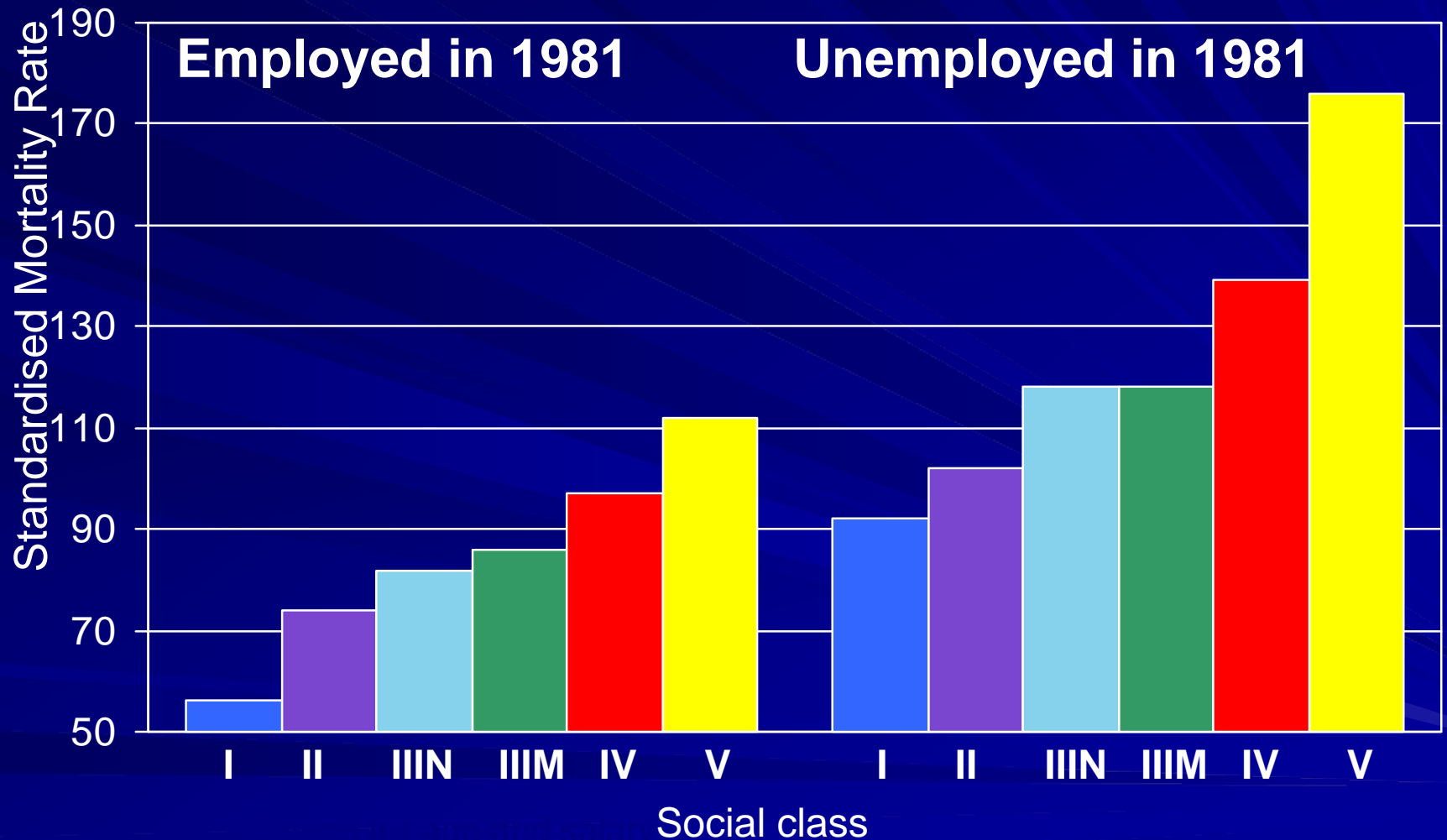


Source: Eurostat April 2009

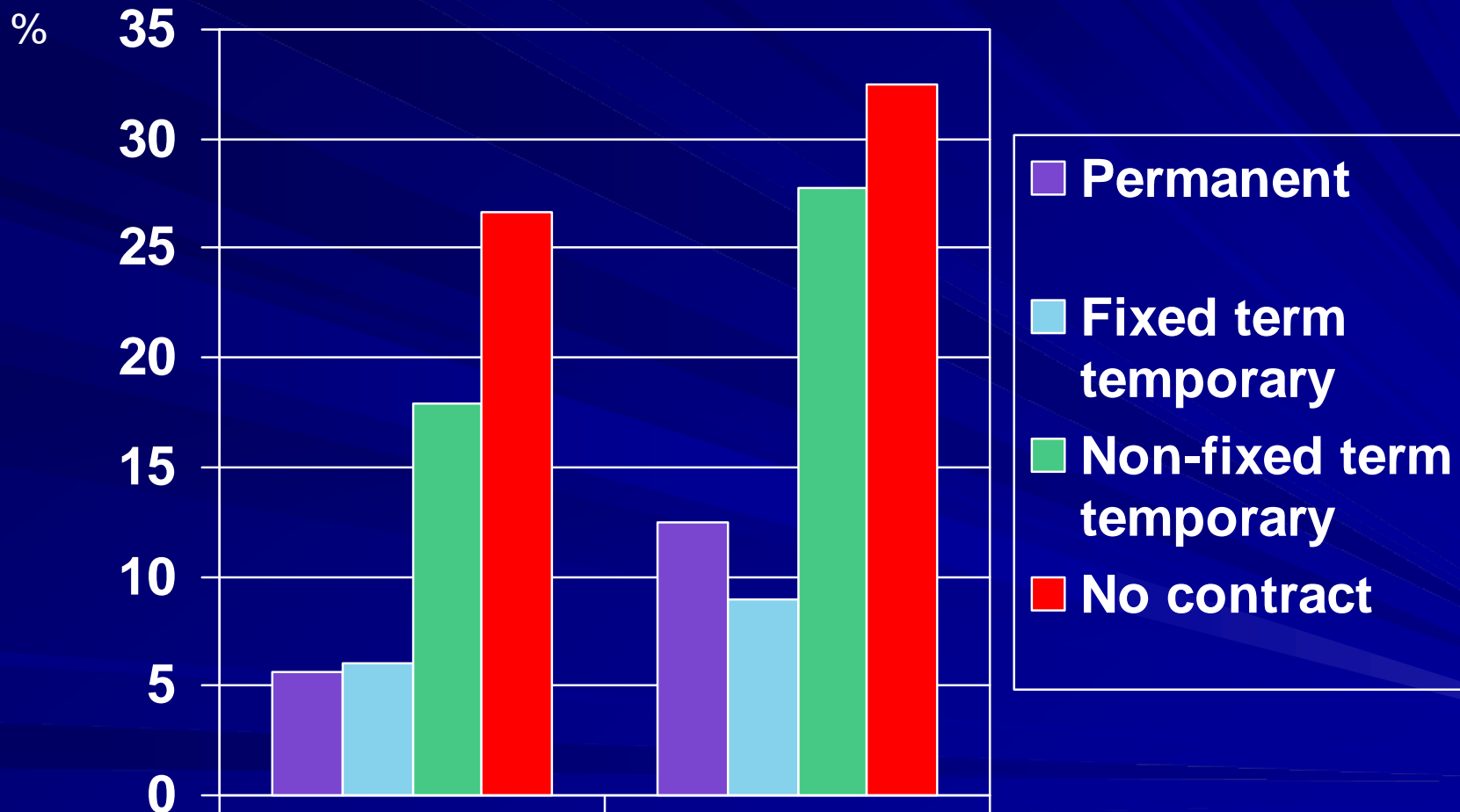
Figure 11b. Ratio of share of unemployed to share of the labour force, by level of educational attainment, selected countries in the Developed Economies & European Union region, 2005



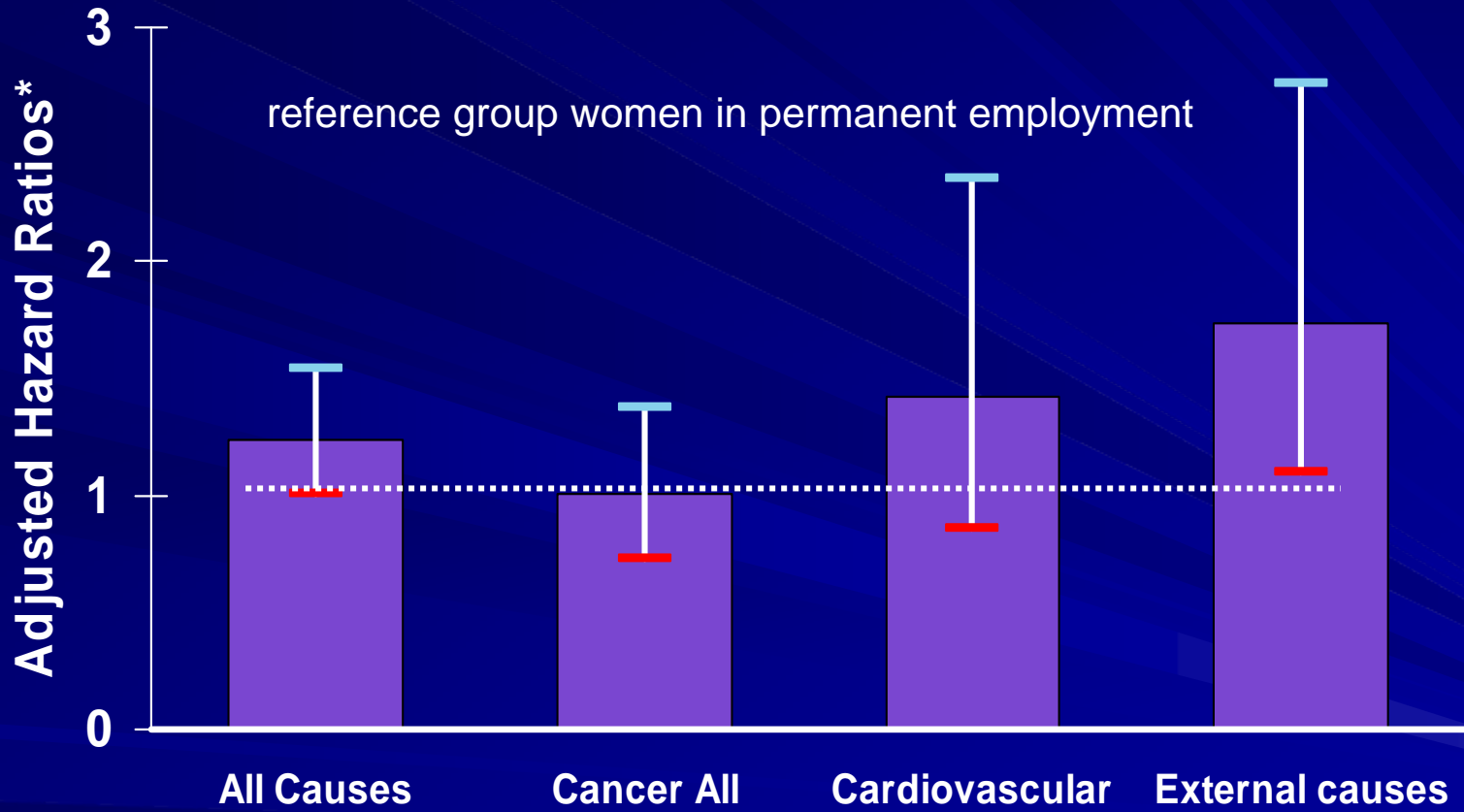
Mortality* of men aged 16-64 by social class and employment status at the 1981 census



Prevalence of poor mental health in manual workers by type of contract: Spain



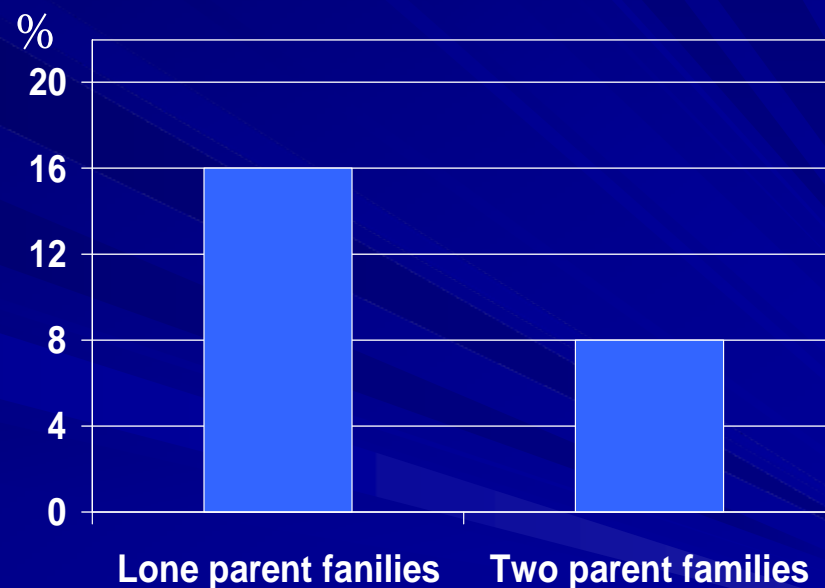
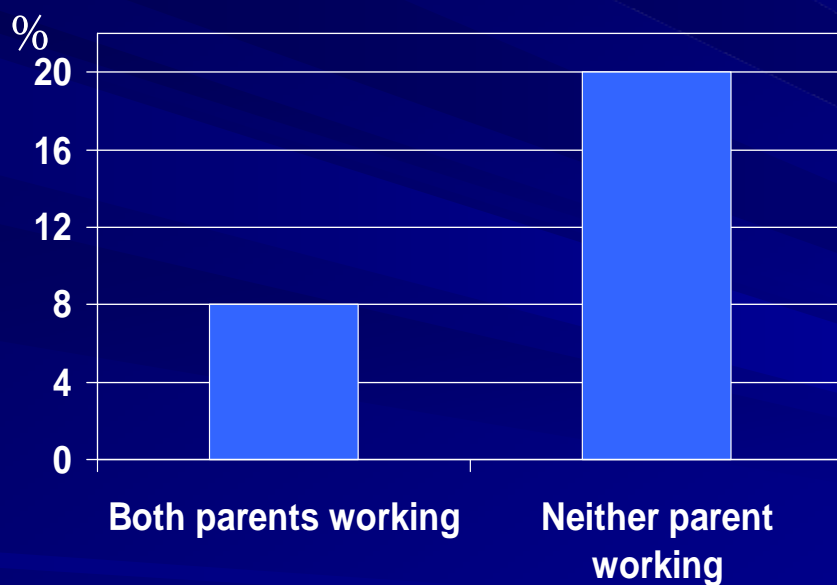
Mortality 1990-2001 for women on temporary contracts: Finland



The Iso-strain concept of stress at work

- Socially isolated
 - (no supportive co-workers or supervisors)
- High strain
 - (High demands and low control)

Prevalence of children's mental disorders by family characteristics: GB 2004

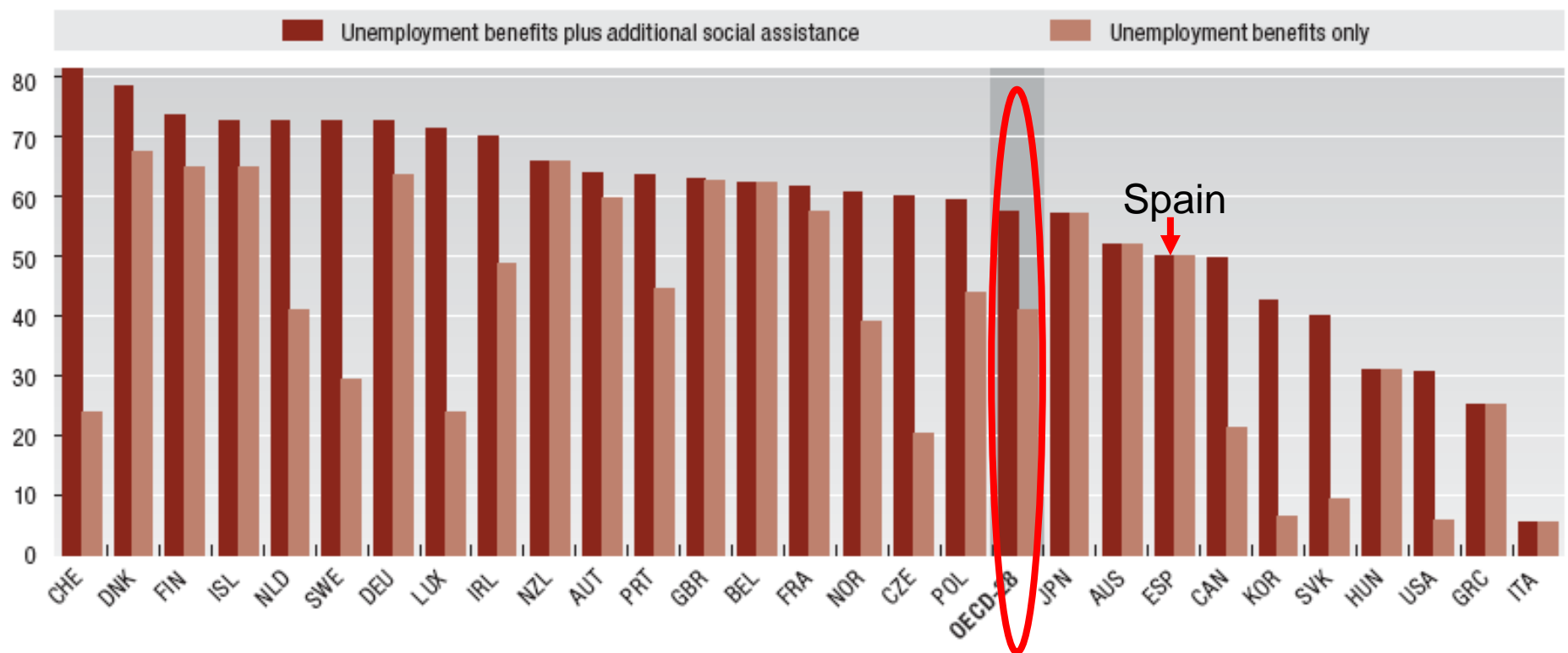


(Source: Survey of the mental health of children and young people in Great Britain, ONS)

CSDH – Areas for Action



Unemployment benefits replace on average 40% of previous earnings – but there is huge variation within OECD



Average of net replacement rates over a period of 60 months of unemployment in 2004, for four family types and two earnings levels in percentage – data are for 2004

Source: OECD 2007 SOCIETY AT A GLANCE

■ Building social protection for the elderly

- material
- psychosocial

■ Minimum income for healthy living – Morris et al.

- Diet
- Physical activity/body and mind
- Psychosocial relations/social connections/active minds
- Getting about
- Medical care
- Hygiene
- Housing

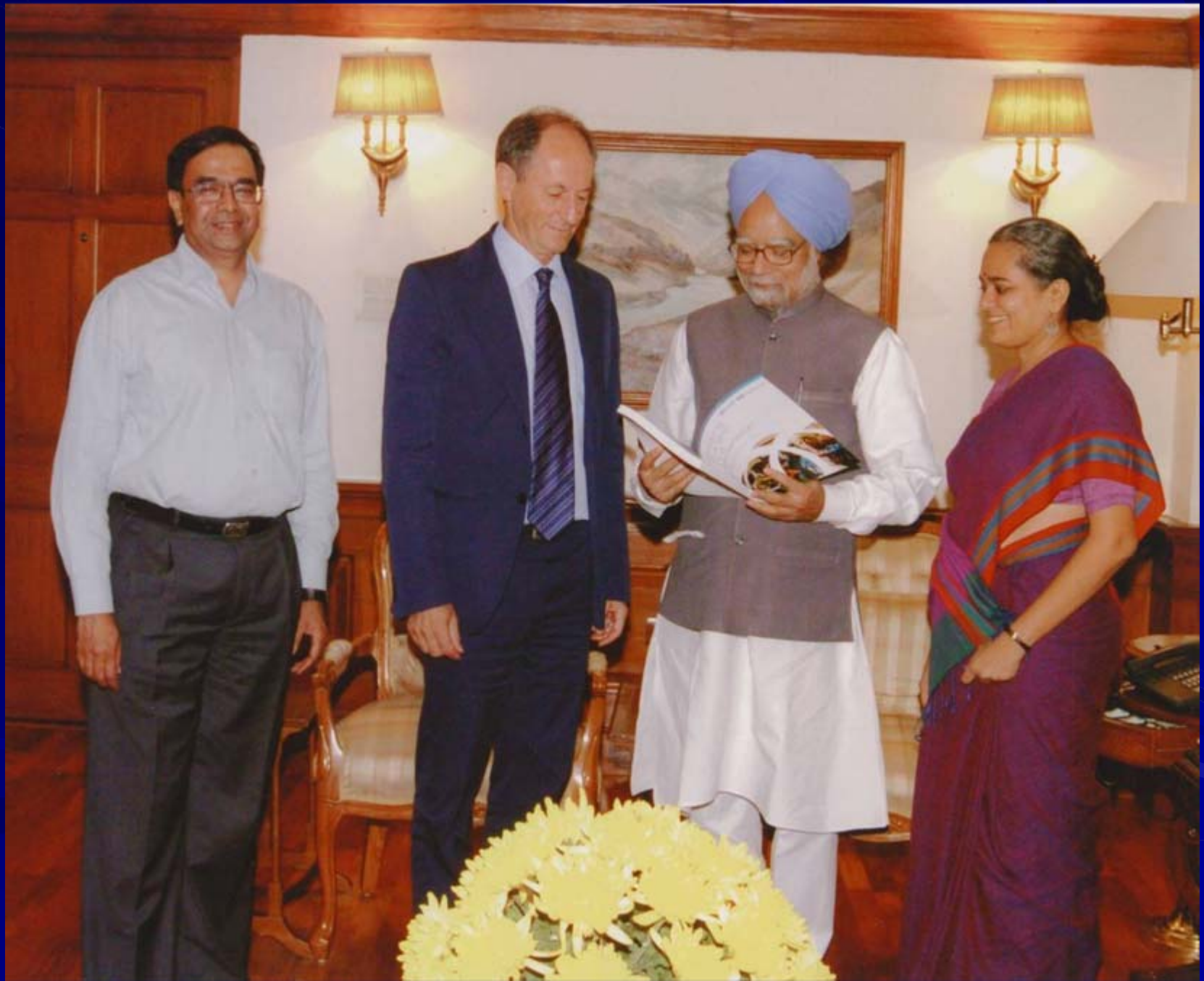
Moving forward – Global movement

- Global Meeting London ‘Closing the Gap’ 2008
- Country initiatives: England, Brazil, Chile, Argentina, Thailand, Nordic ...
- Regional Meetings: Euro, Sri Lanka, Cairo, PAHO, Addis Ababa, Asian Parliamentarians
- WHO resolution
- ECOSOC Agenda - Core Development Goal
- Proposed Global Report on SDH and equity
- South American Commission

EU? Bring the directorates together

Health equity as an outcome of good social
policy









Closing the Gap in a Generation

**A world
where social
justice is
taken
seriously**

