Social Determinants of Health

Ali Montazeri

Iranian Institute for Health Sciences Research

Acknowledgment

Distinction
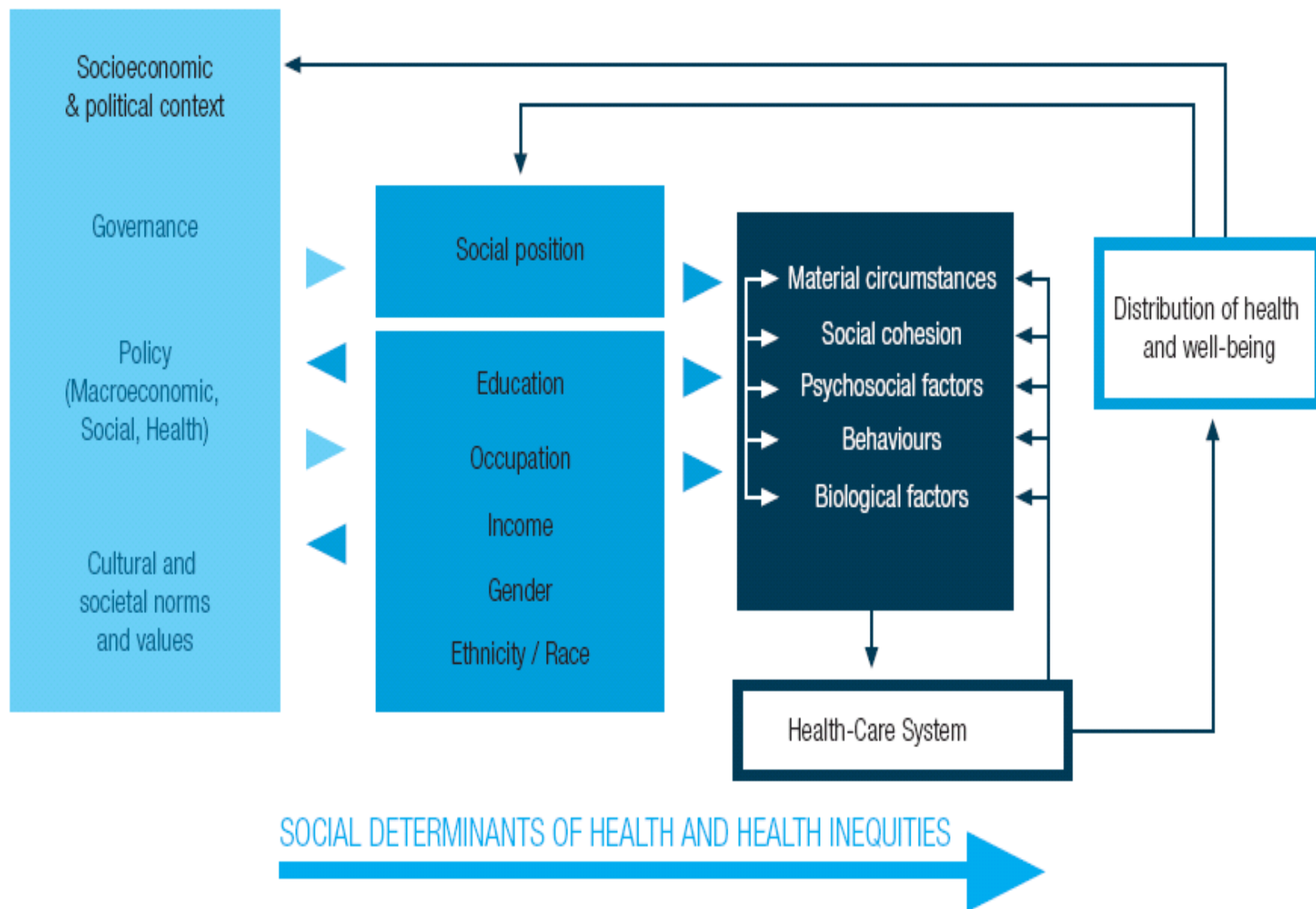
Social Health

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Social Determinants of Health

Introduction

- Determinants of Health

  1. Biological factors

  2. Lifestyle

  3. Environment

  4. Social and economic factors

  5. Use and access to health services

Commission on Social Determinants of Health conceptual framework.

Socioeconomic & political context

- Governance
- Policy (Macroeconomic, Social, Health)
- Cultural and societal norms and values

Social position

- Education
- Occupation
- Income
- Gender
- Ethnicity / Race

Material circumstances
Social cohesion
Psychosocial factors
Behaviours
Biological factors

Distribution of health and well-being

Health-Care System

SOCIAL DETERMINANTS OF HEALTH AND HEALTH INEQUITIES

Source: Amended from Solar & Irwin, 2007

A holistic view

- The poor health of the poor, the social gradient in health within countries, and the marked health inequities between countries are **caused** by the unequal distribution of power, income, goods, and services, globally and nationally, the consequent unfairness in the immediate, visible circumstances of peoples lives – their access to health care, schools, and education, their conditions of work and leisure, their homes, communities, towns, or cities – and their chances of leading a flourishing life.

Toxic combination

- Unequal distribution of health-damaging experiences is not in any sense a **'natural'** phenomenon but is the result of a *toxic combination* of:

1. Poor social policies and programmes,
2. Unfair economic arrangements,
3. Bad politics,
4. The structural determinants, and
5. Conditions of daily life

   that constitute the social determinants of health and are responsible for a major part of health inequities between and within

Two key determinants

- Daily living conditions.
- Inequitable distribution of power, money, and resources.

Daily living conditions

- Equity from the Start
- Healthy Places, Healthy People
- Fair Employment and Decent Work
- Social Protection Across the Life course
- Universal Health Care

Inequitable distribution of power, money, and resources

- Health Equity in All Policies, Systems, and Programmes
- Fair Financing
- Market Responsibility
- Gender Equity
- Political Empowerment – Inclusion And Voice
- Good Global Governance

Three principles of action

- 1. Improve daily living conditions
- 2. Tackle the inequitable distribution of power, money, and resources
- 3. Measure and understand the problem, and assess the impact of action

Improve daily living conditions

- Improve the well-being of girls and women and the circumstances in which their children are born, put major emphasis on early child development and education for girls and boys, improve living and working conditions and create social protection policy supportive of all, and create conditions for a flourishing older life. Policies to achieve these goals will involve civil society, governments, and global institutions.

Tackle the inequitable distribution of PMR

- In order to address health inequities, and inequitable conditions of daily living, it is necessary to address inequities –such as those between men and women – in the way society is organized. This requires a strong public sector that is committed, capable, and adequately financed. To achieve that requires more than strengthened government – it requires strengthened governance: legitimacy, space, and support for civil society, for an accountable private sector, and for people across society to agree public interests and reinvest in the value of collective action. In a globalised world, the need for governance dedicated to equity applies equally from the community level to global institutions.

Measure and understand the problem, and assess the impact of action

- Acknowledging that there is **a problem**, and ensuring that health inequity is measured – within countries and globally – is a vital platform for action. National governments and international organizations, supported by WHO, should set up national and global **health equity surveillance systems** for routine monitoring of health inequity and the social determinants of health and should **evaluate the health equity impact of policy and action**. Creating the organizational space and capacity to act effectively on health inequity requires investment in training of policy-makers and health practitioners and public understanding of social determinants of health. It also requires a stronger focus on social determinants in public health research

Knowledge, monitoring and skills

- Birth registration systems
- National health equity surveillance systems
- A global health equity surveillance system
- Expanding the knowledge base training and education on the social determinants of health

Concluding remark

- Social injustice is killing people on a grand scale.

- Differences in health that are avoidable, unfair and unjust should be eliminated.