SOCIAL DETERMINANTS OF HEALTH AS ENTRY POINT FOR HEALTH EQUITY AND HiAP IN EUROsociAL.

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- European Union program for **social cohesion** in Latin America
- **Health equity** is fundamental for social cohesion.
- Monitoring health equity and social determinants of health (SDH) represents the **theoretical** and **operational** basis for action aiming at reducing health inequities.

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SOCIAL DETERMINANTS OF HEALTH AND MECHANISMS GENERATING HEALTH INNQUITIES


Source: Diderichsen et al. (2001).
ACTION ON SDH: WHO CONCEPTUAL FRAMEWORK

Key dimensions and directions for policy

- **Intersectoral Action**
  - Policies on *stratification* to reduce inequalities, mitigate effects of stratification
  - Policies to reduce *exposures* of disadvantaged people to health-damaging factors
  - Policies to reduce *vulnerabilities* of disadvantaged people
  - Policies to reduce *unequal consequences* of illness in social, economic, and health terms

- **Social participation and empowerment**

- Monitoring and follow-up of health equity and SDH
- Evidence on interventions to tackle social determinants of health across government.
- Include health equity as a goal in health policy and other social policies
CONTRIBUTION OF DETERMINANTS TO HEALTH

- Health care (up to 15%)
- Social circumstances and environmental exposure (45%)
- Health behaviour patterns (40%)

Canadian Institute of Advanced Research (2012)
- Health care (up to 25%)
- Socio-economic (50%)
- Environmental (10%)
- Genetics (15%)

- Health care (43%)
- Other factors (57%)

TURNING THE ICEBERG UPSIDE DOWN

The causes of the causes

Structural determinants

Intermediate determinants

Result

UPSTREAM

DOWNSTREAM
SDH AND HEALTH IN ALL POLICIES

• Action on SDH to reduce health inequities requires collaboration across multiple sectors (intersectoral action), since health determinants extend beyond the direct influence of the health sector.

• Likewise, Health in All Policies relies heavily upon intersectoral action, due to its approach to public policies that takes into account the health implications of decisions and policies of different sectors.
EUROsociAL METHOD AND TOOLS

- **Demand-driven**: EUROsociAL supports change processes already underway, through the exchange of experiences.
- **Strategic focus**: on policies within the government agendas of the countries of the region.
- **Results-oriented**: as contribution to the reform of public policies, which aim to improve social cohesion in Latin America.
- **Regional dimension**: to foster the establishment of practice communities or networks.
- **Intersectoral**
- **South-South** and triangular cooperation
EUROsociAL HEALTH EQUITY INTERESTED COUNTRIES

- Mexico
- Costa Rica
- Panama
- Colombia
- Ecuador
- Peru
- Chile
- Paraguay
- Uruguay
URUGUAY: HEALTH INIQUITY REPORT

- **Social Determinants of Health Iniquites in Uruguay.** Ministerio de Salud Pública de Uruguay. May 2015
- **Territorial Stratification Index**, built from the Human Development Index (UNDP) and the Social Vulnerability and Life Condition Index (Ministry of Health, Chile)
  - Education
  - Income
  - Household
  - Working condition

http://www.msp.gub.uy/sites/default/files/INFORME%20%20SVES%20Documento%201.pdf
REPORT ON HEALTH INEQUALITIES IN URUGUAY

TERRITORIAL STRATIFICATION INDEX

http://www.msp.gub.uy/sites/default/files/INFORME%20%20SVES%20Documento%201.pdf
URUGUAY: TERRITORIAL STRATIFICATION INDEX AND INFANT MORTALITY RATE (2015)

http://www.msp.gub.uy/sites/default/files/INFORME%20%20SVES%20Documento%201.pdf
COLOMBIA: PUBLIC HEALTH INTERSECTORAL COMMISSION

– Public Health Intersectoral Commission (Comisión Intersectorial de Salud Pública - CISP)
– Representatives from Ministries of:
  – Household
  – Transport
  – Education
  – Work
  – Agriculture
  – Environment
  – Health
  – ...
– National Planning department
– National Institute of Statistics
PUBLIC HEALTH INTERSECTORAL COMMISSION

Tasks:

– To define technical aspects for intervening on SDH
– To coordinate each sector role
– To propose institutional, political, administrative, social, economic and cultural mechanisms that allow the sustainability of actions on SDH in the long run

Comisión Intersectorial de Salud Pública
CONCLUSIONS

• Persistent inequities across socioeconomic groups hinder population’s wellbeing, social stability and sustainable development.

• Monitoring health inequalities (and iniquities) represents the first step to reduce them.

• Knowledge and consequent action on social, economic, cultural and environmental barriers to ensure equity, represent the entry point for intersectorial work and inspire the HiAP strategy designed by WHO to ensure well being and sustainable development.

• The health equity action of EUROsociAl concentrates in this direction.
THANK YOU!