World Health Organization

SIXTY-SIXTH WORLD HEALTH ASSEMBLY **A66/15**
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Social determinants of health

Report by the Secretariat

1. The Executive Board at its 132nd session noted a previous version of this report.[1] In response to the comments and requests of Board members, further information on WHO's work with other bodies in the United Nations system is included in this version (paragraphs 23–26). Updated information on the membership of the interactive web platform, Action:SDH, is provided in paragraph 16.

2. In May 2012, the Health Assembly in resolution WHA65.8 on the outcome of the World Conference on Social Determinants of Health requested the Director-General, inter alia: to consider social determinants of health duly in the assessment of global needs for health; to provide support to Member States in implementing the Rio Political Declaration on Social Determinants of Health; to work closely with other organizations in the United Nations system on advocacy, research, capacity-building and direct technical support to Member States; and to continue to convey and advocate the importance of integrating social determinants of health perspectives into forthcoming United Nations and other high-level meetings related to health and/or social development.

3. Since the World Conference in 2011, the Secretariat has observed a considerable increase in the action on social determinants of health. This report describes some of the main developments.

SOCIAL DETERMINANTS OF HEALTH IN THE ASSESSMENT OF GLOBAL NEEDS FOR HEALTH

4. Following the close attention given by WHO's governing bodies to the important role played by social determinants of health in global health, especially in relation to the WHO reform process and the Organization's future activities, further review and consultation have taken place. Tackling social determinants of health is recognized as being both a fundamental approach to the work of the Organization and a priority area of work in itself in the draft twelfth WHO general programme of work 2014–2019, which has been discussed by the regional committees before its further consideration by Executive Board and the Health Assembly.

5. In order to provide support to Member States to implement the Rio Political Declaration, the Secretariat has prepared a global workplan involving various programmes and different levels of the Organization. This internal WHO workplan addresses the five action areas of the Rio Political Declaration, and identifies tangible outputs and responsible entities within the Secretariat.

[1] See the summary record of the ninth meeting of the Executive Board at its 132nd session, section 1.

6. WHO's regional offices have all been engaged in work on social determinants of health. Some examples of regional activities include the following. The Regional Office for Eastern Mediterranean has identified a regional strategic direction for operationalizing the Rio Political Declaration, in line with the global workplan and in response to resolution WHA65.8. This regional strategic direction was discussed and agreed by representatives of Member States at a workshop (Cairo, 2–4 September 2012), and a few Member States in the Region have already initiated activities. In the Islamic Republic of Iran a national action plan for social determinants of health is being implemented, and the Ministry of Health and Medical Education has asked all universities of medical sciences and health services at the provincial level to establish research centres on social determinants of health in order to collect evidence and design responses to the existing equity gap.

7. The Regional Office for Europe has commissioned a review of the social determinants of health in order to measure and explore the causes of the health divide among and within its 53 Member States. Using the conceptual framework created by the Commission on Social Determinants of Health, the review identified new evidence and recommended actions that were incorporated into Health 2020, the new European policy framework for health and well-being, which was adopted by the Regional Committee for Europe in September 2012.[1] Health 2020 provides a guiding framework that European countries can adapt to their specific context for the promotion of health and reduction of health inequities through addressing the social determinants of health by "whole-of-government" and "whole-of-society" approaches and improved governance for health.

8. By providing information on other sectors' agendas and policy approaches, and their health impacts, and by illustrating areas for potential collaboration, WHO's *Social Determinants of Health Sectoral Briefing Series* aims to encourage more systematic dialogue and problem solving, as well as more collaboration with other areas of government. The Secretariat continues to produce policy briefs and thus provides guidance on understanding the agendas of other sectors.

SUPPORT PROVIDED TO MEMBER STATES FOR IMPLEMENTATION

9. In April 2012, the Planning Commission of Pakistan, with support from the Secretariat, held a national workshop for senior officials of provincial-level health authorities to design an institutional framework for action on social determinants of health. The workshop recommended inter alia the establishment of a contact group for social determinants of health involving officials from the provinces, the organization of provincial consultations on interventions, and the formulation of a medium-term strategic plan.

10. With financial support from San Marino, the Regional Office for Europe initiated a project to support European countries with small populations in addressing the social determinants of health and in reducing health inequities. The project will establish a strategic platform for investment for health and development for small-population countries, which will bring together governments, WHO, academic institutions and regional development organizations with a shared interest in formulating policy and governance responses that advance health equity as part of a fair and sustainable society.

11. Additional capacity-building initiatives on social determinants of health are being carried out at the regional, country and subnational levels in the European Region. For example, Phase VI (2013–2018) of the WHO European Healthy Cities Network focuses on the issue of promoting population health

[1] Resolution EUR/RC62/R4.

and increasing health equity at the local level. Similarly the Regional Office for Europe has revived the Regions for Health Network as a special multi-year programme to increase exchange of ideas and experience and to build expertise about ways to tackle social determinants of health and redress related health inequities at subnational level.

12. The World Conference on Social Determinants of Health also generated tremendous interest on social determinants of health in the South-East Asia Region. The Secretariat supported health ministries and partners in most countries, particularly India, Indonesia and Thailand, in holding consultative meetings to strengthen their response to social determinants of health and redressing health inequity in their respective countries. WHO's Country Office in India has begun work on a study of barriers to access to health services for selected chronic diseases services in order to analyse the wider social determinants of health influencing access to health care. This study is built on one of the themes of Rio Political Declaration "further reorient health sector towards reducing health inequities" and aims to prepare the way towards universal health coverage, with a focus on noncommunicable diseases. The key theme of the National Health Assembly in Thailand 2012 was implementation of health in all policies in order to address the broad range of determinants and health impacts.

13. To support capacity-building for implementing health in all policies, the Secretariat is developing a tool for standardizing the way in which case studies are summarized and used to compare intersectoral practices for their effectiveness in addressing the social determinants of health. This tool will be used in the collection of good practice examples of health in all policies and multisectoral action in the African, South-East Asia and Western Pacific regions, and to support Member States in analysing strategies for expanding implementation of the health in all policies approach. Moreover, regional assessments of intersectoral action and health in all policies, and opportunities for extending the latter, are being carried out by the regional offices for Africa and the Americas, the South-East Asia Regional Office and the Regional Office for the Western Pacific.

14. Strengthening the capacity of Member States to deal with social determinants of health requires engagement of various stakeholders. Hence the Secretariat is working towards facilitating an informal global network for capacity-building on the social determinants of health. Initially, this network will include leading capacity-building institutions, primarily, schools of public health and civil society organizations (professional as well as grassroots bodies) which have the interest, capabilities, resources and close linkages to public policy on the social determinants of health in different regions. It is envisaged that the network will eventually engage academic institutions, policy experts and analysts, as well as development specialists.

15. The International Meeting on Health in All Policies (Adelaide, Australia, 13–15 April 2010) identified the need for active engagement of government officials and policy-makers in order to harness their skills better in working with other policy sectors across government. Following the first Summer School on Health in All Policies (Adelaide, Australia, 28 November–2 December 2011), a manual is being prepared for the training of trainers on health in all policies around the globe; this manual is ready for testing.

16. In order to facilitate the development of a community of practice on social determinants of health within the broader public health community, the Secretariat has created an interactive web platform, Action:SDH.[1] The platform facilitates discussion and information sharing among practitioners about how health equity could be improved through action on social determinants of

[1] http://www.actionsdh.org/.

health in the five action areas of the Rio Political Declaration on Social Determinants of Health. As at February 2013, its membership had grown to more than 1300. The first set of moderated discussion forums on the links between health impact assessment and health in all policies was held in July 2012 in cooperation with the health ministry of Québec, Canada.

17. Engaging other sectors in work on social determinants of health requires building sound evidence-based economic arguments. Therefore, with the support of the Government of Canada, the Secretariat is currently summarizing economic rationales for other sectors to tackle the social determinants of health in the light of existing evidence of economic benefits overall, and for specific sectors.

18. The Regional Office of Africa has established a programme on determinants and risk factors in order to accelerate the response to the main determinants associated with priority public health conditions. Four countries in the African Region, namely Botswana, Kenya, Uganda and Zambia, organized multistakeholder meetings with representatives of the public and private sectors, bodies in the United Nations system, academia and civil society to examine how they could work on the social and economic determinants of health in order to improve health and well-being of populations. Participants in these meetings resolved to establish coordination mechanisms at national level in order to strengthen leadership and stewardship roles of health ministries.

19. The Regional Office for Africa analysed the main social determinants of health and the causes of the rise in noncommunicable diseases in small island developing States (Cape Verde, Mauritius, Sao Tome and Principe and Seychelles) and Madagascar in the Region. Dialogues are being held to make recommendations for intersectoral actions in the African Region.

20. PAHO has created a Cross-Organizational Team on the Determinants of Health and Risks, which promotes interprogrammatic and intersectoral work inter alia on the concept of health in all policies. The 2012 edition of PAHO's quinquennial report *Health in the Americas*[1] focuses on social determinants of health and health equity.

21. The WHO Centre for Health Development, Kobe, Japan, is engaged in developing guidelines for establishing and sustaining local urban health observatories with a special emphasis on social determinants of health at local level. As an initial step, it organized an expert consultation (Amsterdam, 10–12 September 2012), which laid the foundations for the guidelines.

22. Increased awareness and interest on acting on the social determinants of health and health equity are also reported across the Western Pacific Region. The Regional Office has provided technical support to Member States through regional and national meetings and training workshops and through adaptation of tools. In collaboration with the WHO Centre for Health Development, Kobe, the Urban Health Equity Assessment and Response Tool (Urban HEART) was adapted to island settings, and piloted in Fiji in August 2012. In addition, the Regional Office provided support to Cambodia, Lao People's Democratic Republic, Papua New Guinea and Philippines for work on addressing various aspects of social determinants of health such as equity analysis, gender, working with specific populations and intersectoral action related to noncommunicable diseases.

[1] Pan American Sanitary Bureau. *Health in the Americas: regional overview and country profiles*, 2012 edition. Scientific Publication No. 636. Washington DC, Pan American Health Organization, 2012.

WORKING ACROSS THE UNITED NATIONS SYSTEM ON ADVOCACY, RESEARCH, CAPACITY-BUILDING AND DIRECT TECHNICAL SUPPORT

23. Numerous bodies in the United Nations system are engaged in action on social determinants of health. In response to the request by the Health Assembly for the Director-General to work closely with other United Nations partners, the Secretariat coordinated a meeting in March 2012 to draw up an output-oriented two-year plan for work with ILO, UNICEF, UNDP, UNFPA and UNAIDS. The first review of the workplan, in July 2012, revealed that social determinants of health comprised a strong technical component for each of the participating organizations.

24. An informal joint statement of the United Nations platform on social determinants of health entitled *Health in the post-2015 development agenda: need for a social determinants of health approach*[1] was contributed to the web-based consultations on the post-2015 sustainable development goals, providing information on how best to consider social determinants of health aspects in the post-2015 global thematic consultations organized by the United Nations Development Group. It is now clear that social determinants of health carry great potential for the design of sustainable development goals in the discussions about what follows the Millennium Development Goals after 2015.

25. Coordinated action by United Nations entities is crucial in forming effective responses that address social determinants of health, within the health sector and across other sectors. To this effect, the Secretariat is working with UNDP in formulating policies, strategies and actions to address social determinants of health in health sector programmes. This work covers in particular noncommunicable diseases (such as cardiovascular diseases, cancers, chronic respiratory diseases and diabetes), focusing mainly on: linking noncommunicable diseases with development instruments in order to encompass prevention and impact mitigation; supporting the planning of national strategies to deal with noncommunicable diseases; and advancing prevention and control of tobacco use through support for national strategy development and national coordination mechanisms, legislative reviews, and prevention of corruption as appropriate. Similarly, the Roll Back Malaria Partnership is facilitating a consultative meeting in the second quarter of 2013, with other United Nations partners and stakeholders in order to draft a framework document on a multisectoral strategy for tackling the social determinants of malaria control.

26. Monitoring the social determinants of health using agreed indicators also requires joint work across the United Nations, as many of the indicators are already monitored by different organizations in the system, and many of them lie outside the health sector. Hence the Secretariat is planning collaboration with other United Nations bodies to agree on those indicators and their monitoring.

27. In addition to these activities, the Secretariat, in consultation with other United Nations bodies at their headquarters and respective regional and country offices, is preparing a plan for coordinated planning and implementation of activities on social determinants of health in three countries, namely: Mozambique, Rwanda and Suriname. Joint United Nations missions to these countries, in order to assess country needs and to identify next steps, are being considered for second quarter of 2013.

[1] http://www.google.com/url?sa=t&rct=j&q=&esrc=s&frm=1&source=web&cd=1&ved=0CDQQFjAA&url=http%3A%2F%2Fnew.paho.org%2Fequity%2Findex2.php%3Foption%3Dcom_docman%26task%3Ddoc_view%26gid%3D94%26Itemid%3D&ei=BkgjUcDYPMbJswall4H4Dw&usg=AFQjCNFAz1za2rJuRus-diy7r_Cch3dMfg&sig2=3JBexfoEexaXP-31qhdWZg&bvm=bv.42 553238,d.Yms (accessed 19 February 2013).

ADVOCACY FOR INTEGRATING SOCIAL DETERMINANTS OF HEALTH INTO HIGH-LEVEL MEETINGS

28. It is essential to ensure coherence of the messages on social determinants of health from the High-level Meeting of the United Nations General Assembly on the Prevention and Control of Non-communicable Diseases and the World Conference on Social Determinants of Health. Hence the Secretariat was actively engaged in the United Nations Conference on Sustainable Development (Rio+20; Rio de Janeiro, Brazil, 20–22 June 2012). Member States and technical teams across the Secretariat participated in several consultative meetings and seminars before the Conference with effective advocacy, as reflected in the outcome document.[1] The focus of the 8th Global Conference on Health Promotion (due to be held in Helsinki, 10–14 June 2013) will be on clarifying how to operationalize the health in all policies approach, and on exchanging experiences in implementing intersectoral public policies as well as health in all policies, including the identification of tools and other prerequisites for country action.

ACTION BY THE HEALTH ASSEMBLY

29. The Health Assembly is invited to note this report.

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[1] United Nations General Assembly resolution 66/288, "The future we want".