Social determinants of health

The Seventy-fourth World Health Assembly,

Having considered the consolidated report by the Director-General;¹

Recalling the Constitution of the World Health Organization, which recognizes that health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity, and that the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition;

Recalling also resolution WHA62.14 (2009) on reducing health inequities through action on the social determinants of health, and resolution WHA65.8 (2012) on the outcome of the World Conference on Social Determinants of Health;


Also recalling United Nations General Assembly resolution 74/2 (2019), entitled “Political declaration of the high-level meeting on universal health coverage”, which acknowledges the need to tackle health inequities and inequalities within and among countries through political commitment, policies and international cooperation, including those that address social, economic and environmental and other determinants of health;

Further recalling the report of the WHO Commission on Social Determinants of Health;²

Recalling also the Rio Political Declaration on Social Determinants of Health (2011) and acknowledging its tenth anniversary in 2021;

Reiterating the collective determination to reduce health inequities by taking action on social determinants of health, as called for by the Health Assembly;

Recognizing the need to do more at all levels to accelerate progress in addressing the unequal and inequitable distribution of health, as well as conditions damaging to health;

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¹ Document A74/9.

Recognizing also that achieving health equity requires the engagement and collaboration of all sectors of government, all segments of society, and all members of the international community, in all-for-equity and health-for-all global actions;

Recognizing further the benefits of achieving universal health coverage, including financial risk protection, access to quality health care services and access to safe, effective, quality and affordable medicines and vaccines, in enhancing health equity and reducing impoverishment;

Reaffirming the political will to make health equity a national, regional and global goal and to address current challenges, such as: eradicating hunger and poverty; ensuring food security and improved nutrition; ensuring inclusive and equitable quality education; addressing gender-, age- and disability-related inequalities in health; ensuring access to health promotion, preventative and community health services; ensuring access to safe, effective, quality and affordable medicines and vaccines; ensuring access to safe and affordable drinking water, and adequate and equitable sanitation and hygiene; fostering employment and decent work and social protection; protecting the environment and addressing ambient and household air pollution; ensuring access to safe and affordable housing; and promoting sustained, inclusive and sustainable economic growth through resolute action on social determinants of health across all sectors and at all levels;

Stressing that stigma and negative stereotyping and attitudes can affect health, including by creating and enhancing health disparities between persons;

Appreciating the tremendous health gains achieved over the past century, but expressing concern that, despite the achievements towards universal health coverage, their distribution has been vastly unequal, and that inequities in many health outcomes exist both within and between countries;

Recognizing that the ongoing COVID-19 pandemic has highlighted and even intensified pre-existing social, gender and health inequities within and among countries, and has also highlighted the need to strengthen the efforts to address social determinants of health as an integral part of the national, regional and international response to the health and socioeconomic crises generated by the current pandemic and to future public health emergencies;

Concerned that the impact of the COVID-19 pandemic has disproportionately affected those in vulnerable situations and those already suffering from poor health, and has exacerbated their vulnerability and exposure to socioeconomic drivers, leading to increases in morbidity and mortality, as well as economic damage at the individual and community levels;

Recognizing the consequence of the adverse impact of climate change, natural disasters and extreme weather events as well as other environmental determinants of health – such as clean air, safe drinking water, sanitation, safe, sufficient and nutritious food, and secure shelter – for health; and, in this regard, underscoring the need to foster health in climate change adaptation efforts, underlining that resilient and people-centred health systems are necessary to protect the health of all people, in particular those who are vulnerable or in vulnerable situations, particularly those living in small island developing States;

Recognizing also the need to establish, strengthen and maintain existing monitoring systems, including platforms and mechanisms, such as observatories, that provide disaggregated data, to assess

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1 Platforms and mechanisms for gathering, harmonizing, analysing and disseminating data and information.
inequities in health, their relation to social determinants of health and the impacts of policies on the social determinants of health at the national, regional and global levels,

1. CALLS ON Member States¹ to strengthen their efforts on addressing the social, economic and environmental determinants of health with the aim of reducing health inequities, and to accelerate progress in addressing the unequal distribution of health resources within and among countries, as well as conditions detrimental to health at all levels and in support of the 2030 Agenda for Sustainable Development;

2. FURTHER CALLS ON Member States² to monitor and analyse inequities in health using cross-sectoral data in order to inform national policies that address social determinants of health, to which end Member States may establish monitoring systems of social determinants of health, including platforms and mechanisms, such as observatories, or rely on, or strengthen, as appropriate, existing structures, such as national public health institutes or national statistical offices;

3. ENCOURAGES Member States² to integrate considerations related to social determinants of health into public policies and programmes, by applying a Health in All Policies approach, and in order to improve population health and reduce health inequities;

4. INVITES Member States,² international organizations and other relevant stakeholders, including intergovernmental and nongovernmental organizations, academia and the private sector, to mobilize financial, human and technological resources to enable the monitoring and addressing of social determinants of health;

5. CALLS ON Member States² to consider social, economic and environmental determinants of health in their recovery from the ongoing COVID-19 pandemic and in boosting resilience to both the current pandemic and future public health emergencies;

6. REQUESTS the Director-General:

(1) to support Member States, upon request, in the establishment or strengthening of monitoring systems of social determinants of health and health inequities, including, as appropriate, platforms and mechanisms, such as observatories;

(2) to prepare, building on the report of the WHO Commission on Social Determinants of Health (2008) and subsequent work, an updated report based on scientific evidence, knowledge and best practices on social determinants of health, their impact on health and health equity, progress made so far in addressing them, and recommendations on future actions, and to submit it for consideration by the Seventy-sixth World Health Assembly in 2023, through the Executive Board at its 152nd session;

(3) to prepare, in consultation with Member States and other relevant stakeholders, an operational framework, building on the work of the WHO Commission on Social Determinants of Health, and building on existing resources and tools and subsequent work, for the measurement, assessment and addressing, from a cross-sectorial perspective, of the social determinants of health and health inequities, as well as their impact on health outcomes, and to submit it for consideration by the Seventy-sixth World Health Assembly in 2023, through the Executive Board at its 152nd session;

¹ And, where applicable, regional economic integration organizations.
(4) to provide Member States, upon their request, with technical knowledge, and support, including for capacity-building in the design and implementation of cross-sectoral strategies, policies and plans to address inequities in health and the social, economic and environmental determinants of health;

(5) to foster and facilitate knowledge exchange among Member States and relevant stakeholders on best practices for intersectoral action on the social, economic and environmental determinants of health in order to achieve health equity and gender equality for all;

(6) to continue to strengthen collaboration with other United Nations agencies and other multilateral organizations, civil society and the private sector to address, from a cross-sectoral perspective, as appropriate, the social determinants of health in support of the 2030 Agenda for Sustainable Development, including through universal health coverage and in the response to the COVID-19 pandemic, including its recovery phase;

(7) to work collaboratively with academic institutions and scientific researchers to generate and make available scientific evidence and best practices on cross-sectoral interventions addressing the social, economic and environmental determinants of health and their impact on health inequities and health outcomes, as well as on the well-being of the population;

(8) to report on the implementation of this resolution to the Seventy-sixth World Health Assembly in 2023, through the Executive Board at its 152nd session.

Seventh plenary meeting, 31 May 2021
A74/VR/7