


“Towards Equity in Health”

An Overview of

Monitoring Social Determinants of Health and Reduction of Health Inequities in Europe

Chris Brown,
Program Manager
Office for Investment for Health
and Development
WHO, EUROPE

Ritu Sadana,
Coordinator
Department of Ethics, Equity,
Trade and Human Rights
WHO, GENEVA

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Introduction Talking points:

Thanks previous speaker and MOH Spain for organising the event and for inviting us to contribute to the panel and support today's debates

In next few moments would like to share with you some of the main finding from the chapter (add title) and set out key opportunities to strengthen M& Analysis of SDH HI which emerged from the work and which we believe are important steps in move us towards greater equity in health across Europe.

Many of us are already involved in action to tackle SD and Health Inequities so we have a strong starting point for action maybe the questions we want to ask what are the big opportunities for systematising action and improving the impact we can have and in doing this build a common vision

Large, avoidable differences in health outcomes exist between and within EU Member States with signs that these are Persistent and may in some cases be increasing ie for some social groups and some countries.

At same time Health as a social and capitol good is a major policy goal across most countries
Inequities are a challengege to these goals as wel as those of solidarity and cohesion within and between countries

M/ Analysis of SDH is needed to

Enable gains in health of public policies to be quantified & Improve policy learning & Intelligence in tackling SDH/HI and Measure the impact of policy/ invesment on distribution of SDs and Health Outcomes. Monitor how health equity contributes to EU Treaties and how these inturn impact Health and Disterbution of SD of Health INequities.

Both of these are important in making the nature and magnitude of Health Inequities and their SDs visible & as a basis for stimulating systematic and coherent local national& regional action

This is the basis for moving forward together, starting from where we are, as many of us know and are already involved in actions.

The chapter provides more details concerning methods, tools, and lessons learnt from national and regional experiences in monitoring health inequalities and evidence of the social gradient in health,

Why Monitor Social Determinants of Health & Health Inequities ?

Enable gains in health of public policies to be quantified

Make Health Inequities visible

Measure the impact of policy/ investment on distribution of SDs and Health Outcomes

Stimulate local, national & European Action.

Improve policy learning & Intelligence in tackling SDH/HI

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Slide 2: Why Monitoring Social Determinants of Health & Health Inequities ?

Large, avoidable differences in health outcomes exist between and within EU Member States with signs that these are growing in many countries, as part of policy formulation, realisation and learning, monitoring will:

Enable gains in health of public policies to be quantified

Make Health Inequities visible.

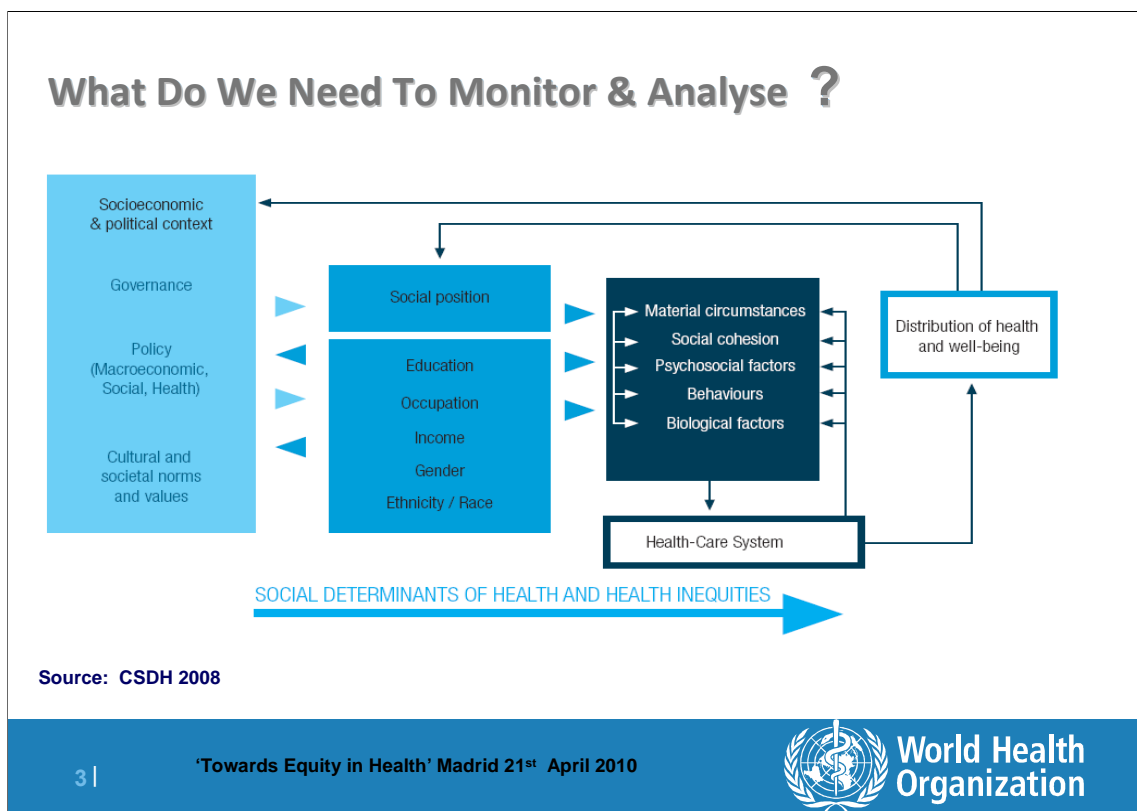
Measure the impact of policy/ investment on distribution of SDs and Health Outcomes.

Stimulate local, National & European Action.

Improve policy learning & Intelligence in tackling SDH/HI

This is the basis for moving forward together, starting from where we are, as many of us know and are already involved in actions. And it also requires a vision, to go beyond marginally or incrementally improving existing data sources and to consider innovations that offer a shift in the approach to data collection, analysis and application, so that policies improve the distribution of health and contributing social factors across society.

This is of course simpler to say and know, than to actually do it.



Slide 3: What Do We Need To Monitor & Analyse?

Enable gains in health of public policies to be quantified & Improve policy learning & Intelligence

A) To do so, We need to measure SDH and their distribution across the whole population & we need multiple measures of health, no single indicator - *Single Measures of health and social status are less robust in providing a picture of HI given the interrelated nature of social determinants and how these accumulate over the life course and over generations.*

B) The CSDH provides a framework which can be useful for selecting what types of SD and indicators to monitor and analyse.

C) Evidence shows that there is a need to consider a range of socio-economic and political determinants, social position, which contribute to vulnerabilities, and the interrelated nature of health inequities and can have a cumulative effect over the life course. *Examples from Spain, UNK, EST, SVN, SVK, NOR, POL*

d) Some we have, and perhaps need to harmonize, others we need to think more carefully about - developing *For example, for better planning...putting the right health measures into social and economic treaties, would enable us to more clearly measure the association between these treaties and health. or understanding what is the social impact*

Different measures or approaches to quantify inequities are needed.

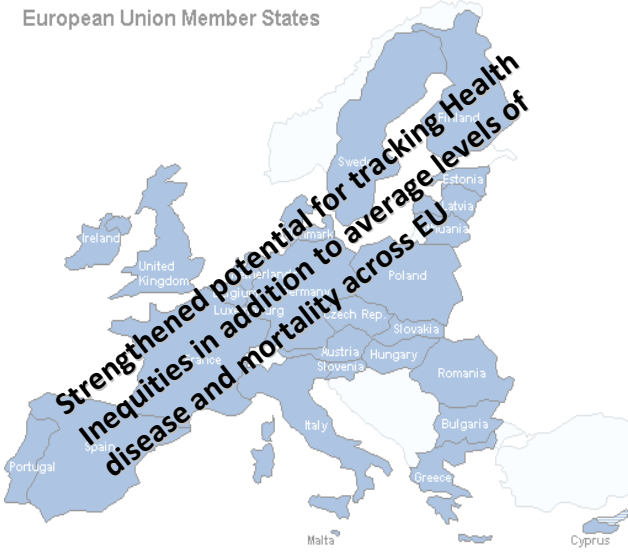
In addition to selecting the most appropriate basket of indicators there is also a need to use a range of analytical methods in assessing Health equity.

These should also match to the health equity goals being pursued at sub national, national and or pan european level. In some cases choice of indicators and analysis methods are not well matched to the health equity goals being pursued.

Relatedly there are some agreed goals on SDH/HI across Europe such as solidarity and cohesion can we strengthen the indicators and analysis of the equity dimension of these distribution, sustainability of impact etc as part of monitoring progress and attainment?

Build On and Extend Progress at Supranational Level


European Union Member States



OPPORTUNITIES

- Enable measurement of a broader set of social inequities & measures of well being – beyond mortality
- Strengthen EU surveys to cover more countries & monitor more effectively the implementation of policies
- Develop Guidance for the Collection and Sharing of disaggregated data while ensuring protection, privacy & security of personal information

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Slide 4: Build on and extend progress at supernational level

Across the EU, efforts have realized improved Health Information Systems, greater Harmonising of Health Indicators, Development Of Surveys And Multiple Mechanisms for Dissemination and Uptake Of Data On Social & Health Related Topics.

However, many opportunities exist to

Advance harmonisation processes which enable measurement of a broader set of social inequities & measures of well being – going beyond mortality as an indicator of health given aim to improve health in the current generation and reduce intergenerational inequities in health

Strengthen EU surveys to cover more countries, increase disaggregation & monitor more effectively the implementation of policies across DGs and their impact on health inequities

Develop Guidance for the Collection and Sharing of Disaggregated data while ensuring protection, privacy & security of personal information

Learning from Countries and Existing Policies

- Heavy reliance on aggregate data & national surveys which lack appropriate equity stratifiers
- Health measures are not well linked to the policy monitoring systems of other sectors at national and sub national level
- Capacity for Analysis of disaggregated data and policy impact on SDH/HI is fragmented

OPPORTUNITIES . . .

- + Use EU mechanism and platforms to strengthen capacity of health information systems to collect & analyse data disaggregated by age, gender, ethnicity, occupation, education, income and employment
- + Enhance data sources - surveys, census, civil registration, and institutional based data in health and other sectors.
- + Increase linking data sources across sectors and DGs

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Slide 5: Learning from Countries and Policies in Place

- 1. Heavy reliance on aggregate data & national surveys which lack appropriate equity stratifiers** Undermines potential to understand magnitude and patterns of inequities across the whole population within countries & approaches to address specific national health inequity challenges; this national focus underlines the importance for local or regional level analysis/ understanding and actions
- 2. Health measures are not well linked to the policy monitoring systems of other setors** - increasing the potential for i) mismatch between interventions and 'real' health equity challenges and ii) bias in reporting of SDH/HI.
- 3. Capacity for Analysis of disaggregated data and policy impact on SDH/HI is fragmented – and needed for local, regional and national across sectoral dialogue on policy and investment.**

Further expanded comments if time allows

1. The use of national samples does not give full picture of situation of health distribution across sub population groups within a country in a country.
2. Agregate data not robust enough on its own to inform and direct policy/investments of the size and scale necessary to have an impact onSDH/HI
3. Focus on Harmoinisation could be seen at expense of national development in monitoring and analysis of health by social and economic factors limits understanding of specific HI challenges within countries and an over reliance on generalised solutions

Opportunities:

- + Use EU mechanism and platforms to strengthen capacity of health information systems to collection & analyse data disaggregated by age, gender, ethnicity, occupation, education, income and employment
- + Develop Guidance for the Collection and Sharing of Disaggregated data while ensuring protection, privacy & security of personal information

Extend Action to the Wider Community in Collaboration with European Bodies



OPPORTUNITIES

Use EU instruments & mechanisms in collaboration with other organisations to . . .

Create incentives for action and strengthen capacity in monitoring & analysis of SDH/HI as part of mainstream health governance processes.

Establish collaboration across countries and European organisations to

Inform EU policies impact on SDH/HI in EU and wider community, and influence research priorities and health intelligence to improve SDH/HI

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Slide 6. Extending Action to the Wider Community in Collaboration with European Bodies

Use EU instruments & mechanisms in collaboration with other organisations to . . .

Create incentives for action and strengthen capacity in monitoring & analysis of SDH/HI as part of mainstream health governance processes.

Establish collaboration across countries and European organisations to

Inform EU policies impact on SDH/HI in EU and wider Community

Influence research priorities and health intelligence towards improve SDH/HI

Engage in International Efforts and Contribute to Global Action on SDH/HI, in Collaboration with other European & International bodies



OPPORTUNITIES

- Establish norms and standards for indicators and measurement approaches, relevant to high, middle, and low income countries
- Global health equity observatory, working with WHO
- Increase global evidence base on what works to reduce health inequities under what conditions
- Adding health equity within global development goals, working with other UN agencies

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Slide 7. Engage in international efforts of mutual benefit and contribute to global action on socially determined health inequities, in collaboration with other pan european bodies and international bodies

Establishment of norms and standards for key targets, indicators, and measurement approaches, relevant to high, middle, and low income countries – contributing to a global health equity observatory

Increase global evidence base on what works to reduce health inequities under what conditions

Greater equity in the health status of populations, within and between countries, should be regarded as a key measure of how we, as a civilized society, are making progress – as recently echoed by Stiglitz commission; Adding health equity within global development goals, as recommended by the CSDH, working with other UN agencies

Moving Forward Towards Equity in Health the contribution of Monitoring & Analysis of SDH/HI

- Make a shift in the approach to data collection, analysis and application to monitor the distribution of health and contributing social factors across society. **Go beyond marginally or incrementally improving existing data sources and routinely monitor across the whole population.**
- Harmonisation of data and systems for health surveillance which extend benefits across EU and to wider European community. **Use existing coordination processes to develop common targets relevant for Europe & minimize reporting burden.**
- Establish collaboration across European countries, organisations and research institutions which increase the accessibility and usefulness of health intelligence for policy-makers. **Track and inform the impact of European policies and governance addressing determinants and inequities.**
- Create incentives to strengthen norms & capacity in monitoring & analysis as part of mainstream health governance processes. **Use EU instruments & mechanisms in collaboration with other European and International organisations.**



SLIDE 8. KEY OPPORTUNITIES FOR ADVANCING M&A of SDH/HI IN EUROPE

Options

Policy / Mechanisms

The EU and Member States should agree on objectives and milestones for long-term monitoring that is not constrained by existing data. A first step could be to support development of a set of indicators to monitor important policy targets and illustrate the social gradient of each health measure across countries and over time.

Further develop guidance for collection and sharing of disaggregated data and its use while ensuring the protection, privacy and security of personal information.

Use existing instruments such as structural funds and those for accession to support and incentivize countries to strengthen capacity and data for monitoring and analysis of inequalities as part of the mainstream harmonization process.

Shape policy and practices so that DG funded research or programme evaluation link action on broader determinants of health and reduction in health inequalities.

EU and Member States can support an expanding body of research addressing the solutions to -
problems identified: assessing the strategic drivers of reductions in health inequalities, the differential health effects of policy interventions, and the impact of alternative options for enhancing equity.

Methods

Strengthen systems of national census data (with information including equity stratifiers) and annual cause-of-death data that can be individually linked. For example, select an important stratifier, such as educational level, and in the short-term disaggregate death records and annual population data, and in the longer term, link death certificates with census information.

Adopt norms and standards for data collection and analysis to monitor progress and trends in reduction of inequalities.

EU to map national data sources, including health and other social indicators and equity stratifiers, and to compare this list against the country-specific health priorities in order to indicate whether the required data for measuring inequalities already exists or they need to be collected.

Collaboration

Strengthen collaboration between WHO, WHO Regional Office for Europe, Organisation for Economic Co-operation and Development, Council of Europe and the EU in monitoring inequalities and mechanisms for collecting evidence and supporting solutions for reducing health inequalities within and between countries.

Strengthen links between existing institutions specializing in SDHI monitoring and create a European network structure for know how development and exchange, that the EU could benefit from. In addition, the network should seek to strengthen the capacity of and alliances with institutions from countries that joined the EU after 2004.

Continue efforts discussed during Country Health Systems Action Plan (Bellagio, Italy 2008), Bamako Ministerial Forum for Health Research (Mali, 2008), the 12th European Health Forum (Gastein, Austria, 2009) and other forums on health inequalities and research featuring a review of EU-funded research projects that evaluate interventions addressing broader determinants of health and health equity.

Strengthen efforts to increase research accessible and useful to policy-makers within the EU and other European countries, including strengthening networks of other potential users, such as civil society organizations and centers of excellence outside of the European region.

Develop with WHO's new Scientific Resource Group on Equity Analysis and Research global norms and standards for monitoring health inequalities; and coordinate with WHO Regional Office for Europe's responses to policy makers' queries, balancing evidence-based options and data from monitoring systems.

Muchas Graças! Thank You!

Chris Brown (chb@ihd.euro.who.int)
WHO European Office for
Investment for Health & Development
www.euro.who.int/SocialDeterminants

Ritu Sadana (sadanar@who.int)
WHO Headquarters
www.who.int



Many thanks and we look forward to contributions from our collaborators Charles Price, and Margaret Whitehead and the opportunity for further discussion during this session.