



# Health in All Policies Trainers` Meeting

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PHE/Social Determinants of Health Unit  
WHO Staff Participants

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## **1. SOCIAL DETERMINANTS OF HEALTH UNIT**

### **a. BACKGROUND**

Despite major improvements in life expectancy and health outcomes globally, health inequities remain a significant – and in many cases growing – challenge. While individuals naturally differ in their health profiles, health inequity refers to *avoidable, unfair* systematic differences in the health of populations. Health inequities are rooted in the social determinants of health (SDH) – that is, the conditions in which people are born, grow, work, live, and age.

Health equity and social determinants are acknowledged as a critical component of the Post-2015 and sustainable development global agendas and of the push towards progressive achievement of universal health coverage (UHC). If health inequities are to be reduced both SDH and UHC need to be addressed in an integrated and systematic manner.

The SDH/PHE Unit is responsible for coordinating WHO support to countries in the implementation of the *Rio Political Declaration on the SDH* (resolution WHA65.8). To this end, it leads the integration of the *social* component of the 12<sup>th</sup> GPW Leadership Priority on “addressing the social, economic, and environmental determinants of health as a means to promote health and reduce health inequities within and between countries” into WHO programmes and initiatives.

The SDH Unit works to support, guide and strengthen the capacities of countries to develop, implement, monitor and evaluate initiatives to promote health equity through addressing the SDH.

The team currently focuses on three areas:

1. Improved country and regional policies and capacities for intersectoral actions (including through a Health-in-All-Policies approach) and health programme reorientation to address the SDH and reduce health inequities through training and technical support;
2. Technical guidance on important policy linkages between social and environmental health determinants, and between social and health policies;
3. Monitoring trends and progress on action on the SDH and health equity, including within the universal health coverage framework, the sustainable development goals and the post-2015 development agenda.

### **b. KEY MESSAGES**

#### **i. Working across sectors: Implementing Health in All Policies for improving health equity**

A lack of policy coherence across government can result in one part of government supporting the implementation of international treaties, like the WHO Framework Convention on Tobacco Control, while other parts of the government promote trade that is harmful to health. One reason that these inconsistencies arise is because of a lack of understanding across sectors of the linkages between health (and quality of life), on the one hand, and the broader health determinants, including economic growth, on the other.

To contribute to policy coherence across government, the health sector needs to understand the imperatives of other sectors and form common understandings of health, its determinants and broader societal well-being or quality of life.

In practice this means engaging in several different actions, including:

- supporting workshops of government policy-makers, programme leaders and health provider groups **to improve coherence in policies, services and programmes** responding to disadvantaged groups' needs;
- implementing workshops at **different administrative levels and with government and private providers.**

ii. Mainstreaming equity, SDH, gender and human rights into public health programmes for reducing health inequities

To be effective, health services need to be tailored to the needs of specific population groups. Different social groups in the population differ in their empowerment to take up health interventions, due to the accumulation of disadvantage across many areas and the life course. Many public health programmes don't have or are not reaching their health equity goals. This is the result not only of lack of health care specific interventions but also of failing to reach marginalized populations and to address key social determinants relevant to the public health issue .

With that in mind WHO is providing country support to promote the integration of equity, social determinants, gender and human rights in national health programmes (joint SDH-GER initiative). This work, in collaboration with national authorities and other partners, aims at closing coverage gaps, tackling health inequities and determinants, and applying a human-rights-based-approach through a “Step-wise methodology for reviewing how national health programmes can better account for equity, social determinants, gender and human rights”.

This methodology engages a multi-disciplinary review team from national and subnational health authorities, research institutes and academia, civil society and the multilateral system. Drawing from quantitative and qualitative data, it analyses:

- who is not accessing/benefitting from the programme;
- the barriers that different subpopulations face;
- the causes of those barriers (intermediate and structural determinants);
- the role of intersectoral action and social participation in overcoming access barriers;
- the potential ways a programme can be redesigned to better address access barriers; and
- ways to adjust the routine planning, review and M&E cycles of the programme to address inequities on an ongoing basis.

iii. Enhancing pro equity linkages between social and environmental determinants of health

There are significant socio-demographic inequalities in both exposure to and negative health outcomes arising from adverse environmental conditions. At the WHO HQ level, social determinants of health have been strategically aligned with environmental determinants of health and currently new concrete approaches and projects are being developed to streamline social and environmental determinants in technical work.

As a first step towards stronger integration of social determinants of health within environmental health work, the following approaches are being followed:

- Identification of priority areas based on evidence, available tools and global commitments: Housing and health, water and sanitation, air pollution;
- Stronger integration of social determinants in existing activities and tools, beginning with the WHO Housing and health guidelines (under development); GLAAS report on water and sanitation; Health protection in nuclear emergencies and the Environmental Burden of Disease;.
- Development of concrete project proposals focussing on social determinants of environmental health risks, including:
  - “Guidance document identifying best strategies for, and health co-benefits of, housing interventions relevant to slums and other informal settlements”
  - “Collection of case studies on healthy housing interventions, model housing legislations and regulations with a high-equity co-benefit”
  - “Developing a framework for monitoring environmental health inequalities in countries” in the context of the “Equity-oriented analysis of linkages between health sector and other sectors” and the post 2015 sustainable goals discussion

iv. Monitoring and measuring health determinants/barriers to improve health and access to health services for disadvantaged groups

In order to close health gaps, it is particularly important to consider the quality of health services experienced by disadvantaged populations. Health determinants change the environment and thereby structure individuals' health behaviours, their participation in health programmes as well as their incentives to safeguard health. Therefore, data on health inequalities and the influence of social determinants on health inequalities is critical to inform evidence-based programming and policies.

In practice this means engaging in several different actions to identify the causes of those barriers (linked to 2.1 and 2.2). Among these, one relevant action countries can take is **to improve monitoring health determinants/barriers by:**

- developing indicators to monitor programme effectiveness and quality for disadvantaged populations relative to average effectiveness and quality;
- assessing trends in health determinants for strategic prioritization of health interventions and intersectoral actions tailored to address the social gradient in health.

c. WHO SDH CONTACTS

WHO HQ:	Dr. Eugenio Villar Coordinator SDH (villare@who.int)
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## 2. WHO HQ STAFF

- a. MARIA NEIRA, DIRECTOR  
DEPARTMENT OF PUBLIC HEALTH, ENVIRONMENTAL AND SOCIAL  
DETERMINANTS OF HEALTH  
WORLD HEALTH ORGANIZATION HQ



Dr Maria P. Neira was appointed Director of the Department of Public Health and Environment at the World Health Organization, Geneva, Switzerland in September 2005. Prior to that, she was Vice-Minister of Health and President of the Spanish Food Safety Agency in the Spanish Ministry of Health, responsible for policy development and implementation of Food and Nutrition National Plans from 2002-2005. She had previously held senior positions in WHO as Director of the Control, Prevention and Eradication Programme on Communicable Diseases and as Coordinator of the Global Task Force on Cholera Control.

Dr Neira is a Spanish national, and holds a degree in Medicine and Surgery from the University of Oviedo, Spain, and a Masters degree in Public Health from the Université Pierre et Marie Curie, in Paris, France. She specialized in Endocrinology and Metabolic Diseases at the Université René Descartes, then in Nutrition at the Conservatoire National d'Arts et Métiers, both in Paris. She also obtained an International Diploma in Emergency Preparedness and Crisis Management from the University of Geneva, Switzerland.

Among her many distinctions, Dr Neira has been awarded the Médaille de l'Ordre national du Mérite by the Government of France and is a member of the Academy of Medicine, Asturias, Spain.

- b. EUGENIO VILLAR, SOCIAL DETERMINANTS OF HEALTH UNIT  
COORDINATOR  
DEPARTMENT OF PUBLIC HEALTH, ENVIRONMENTAL AND SOCIAL  
DETERMINANTS OF HEALTH  
WORLD HEALTH ORGANIZATION HQ



Mr. Villar is serving in the World Health Organization (WHO) since 1992 and currently he is a coordinator of Social Determinants of Health Unit. His previous experience within the organization has been in various fields: health in sustainable development; health financing and stewardship acting; poverty and health financing; health and development policy & health policy development and services: equity, poverty and social determinants.

Before joining WHO HQ, Mr. Villar worked in Lima, Peru: as National Director for Financing Investment and Technical Cooperation at Ministry of Health and as an Associate Professor in Public Health at Cayetano Heredia University. Also, he has been an Associate officer and National officer in PAHO/WHO, Washington and Lima respectively.

Mr. Villar is a Medical Doctor and he has a Master of Science degree in Community Health in Developing Countries (LSHTM, London, 1986.). As well, he is currently pending his master thesis in Governability & Human Development: International Institute of Governability (Open University of Catalonia).

Mr. Villar is from Lima, Peru.

- c. NICOLE VALENTINE, TECHNICAL OFFICER  
SOCIAL DETERMINANTS OF HEALTH UNIT  
DEPARTMENT OF PUBLIC HEALTH, ENVIRONMENTAL AND SOCIAL  
DETERMINANTS OF HEALTH  
WORLD HEALTH ORGANIZATION HQ



Nicole Valentine is a senior Technical Officer in the Department of Public Health, Environmental, and Social Determinants of Health (SDH) at WHO. Ms. Valentine is currently leading the department's global initiative on training in Health in All Policies, which forms part of implementation of WHO's Country Framework for Action Across Sectors.

She has 20 years' work experience in public health and health economics. In the past 15 years at WHO, she has worked in different areas. She led the team developing the global metrics for health systems' responsiveness quality of care for 4 years. She served in the Secretariat of the global Commission on Social Determinants of Health for 4 years, where she co-led the work stream dealing with policy-makers. She held the position of Acting Coordinator of the Equitable Health Systems and Policy unit. These last 7 years, her work on SDH has focused on intersectoral policy-making, and more recently, on monitoring and evaluation of determinants. Several projects and related publications she has overseen include: the SDH Discussion Paper and Sectoral Briefing Series, the Intersectoral Action Case Study database, development of the Action:SDH site for the Rio World Conference on SDH, the projects on Making the Economic Case for Addressing the Social Determinants of Health, and Supporting regional positions on Health in All Policies with an equity-focus.

Prior to WHO, Nicole worked in research and teaching at the University of Cape Town in South Africa. She holds Bachelors' degrees and a Master of Economics from the University of Cape Town, a Master of Public Health from the University of Washington, Seattle, and is completing her PhD in Public Health with the Erasmus Medical Centre in The Netherlands.

- d. TORI SAINT, TECHNICAL OFFICER  
SOCIAL DETERMINANTS OF HEALTH UNIT  
DEPARTMENT OF PUBLIC HEALTH, ENVIRONMENTAL AND SOCIAL  
DETERMINANTS OF HEALTH  
WORLD HEALTH ORGANIZATION HQ



Victoria Saint is a Technical Officer in the Social Determinants of Health Unit at WHO Headquarters in Geneva. She has worked with WHO as a staff member since 2013 and as a consultant since 2010. Prior to her current position, Victoria was the Research Development Manager for the Southgate Institute of Health, Society and Equity at Flinders University in Australia and has worked as a technical and research consultant in Australia, Sweden, Germany and India. Her focus has been on issues related to strengthening social determinants of health and health equity approaches in public health programmes and strategies, and evaluating such initiatives from an academic, programmatic and donor perspective. She holds a Master's of International Health from Uppsala University, Sweden, and Health Science and Social Science Bachelor Degrees from the University of Adelaide, Australia.

- e. NATHALIE ROEBBEL, CONSULTANT  
SOCIAL DETERMINANTS OF HEALTH UNIT  
DEPARTMENT OF PUBLIC HEALTH, ENVIRONMENTAL AND SOCIAL  
DETERMINANTS OF HEALTH  
WORLD HEALTH ORGANIZATION HQ



A sociologist (PhD) by training, Nathalie Röbbel is working as a consultant for WHO within the Unit "Social Determinants of Health" (SDH) which is part of the Department of Public Health, Social and Environmental Determinants. In this capacity, her main tasks are to provide technical support for streamlining social determinants of health within environmental health programmes. In addition to the work with the SDH unit, she manages the development of the WHO Housing and Health Guidelines currently under development.

Before joining WHO HQ, she worked as a Technical Officer at the WHO Regional Office for Europe, in Bonn (Germany) and Copenhagen (Denmark), where she was responsible for environmental health performance reviews and involved in several housing and health related projects.

- f. NADA OSSEIRAN, COMMUNICATION OFFICER  
DEPARTMENT OF PUBLIC HEALTH, ENVIRONMENTAL AND SOCIAL  
DETERMINANTS OF HEALTH  
WORLD HEALTH ORGANIZATION HQ



Ms Osseiran joined the World Health Organization (WHO) in 2002, and serves as Communications Officer for the Department of Public Health, Environmental and Social Determinants of Health. She is responsible for coordinating global advocacy events, manages and facilitates media relations and provides authoritative guidance and coordinated support for PHE-related topics at headquarters and within regions.

Before joining WHO, she worked for seven year at the United Nations as External Relations focal point. She was liaison officer with Permanent Missions, UN agencies and Intergovernmental Organizations.

Ms Osseiran is from Beirut, Lebanon and holds a Public Relations Degree from New York University (1995) and a Master degree in Marketing and Management (1989). Ms Osseiran has lived and worked in Nigeria, Lebanon, Kenya, Burkina Faso, United Kingdom, Switzerland, USA, France and Germany.



- g. ALEKSANDRA KUZMANOVIC, INTERN COMMUNICATIONS  
DEPARTMENT OF PUBLIC HEALTH, ENVIRONMENTAL AND SOCIAL  
DETERMINANTS OF HEALTH  
WORLD HEALTH ORGANIZATION HQ



Ms. Aleksandra Kuzmanovic, has recently joined World Health Organization as a Communications Intern in Public Health, Environmental and Social Determinants of Health Department. She is currently a second year master student at University of Geneva, program: Standardization, Social Regulation and Sustainable Development. Also, she is about to finish her Master of Science degree in Quality Management and Standardization at University of Belgrade. Her bachelor graduation in Management and Organization was in 2013 at the same university.

Before moving to Geneva, Ms. Kuzmanovic has been active in and lead various non-governmental organizations and international associations: European Students of Industrial Engineering and Management (HQ Financial Controller 2012, Local Group Belgrade President 2012/13), Youth Umbrella Serbia (President 2011/12), Student Technical Tournaments, and Serbia – Japan Friendship Club of twin cities (Board Member since 2011). In 2013, she served as an intern in German Certification Company TUV SUD, department in Serbia.

Ms. Kuzmanovic was born on 27th of January 1990 in Sabac, Serbia.

- h. ERICA WHEELER, TECHNICAL OFFICER  
HEALTH WORKFORCE DEPARTMENT  
WORLD HEALTH ORGANIZATION HQ



Dr Erica Wheeler is a technical officer in the Department of Health Workforce in WHO headquarters and the focal point for health workforce education and training. She has worked and studied in the field of human resources for health (HRH) including mental health in research, policy and planning for some 25 years.

Over the last 15 years Dr Wheeler has worked for WHO both at the global level and at the country level in South East Asia. During this period she worked in an emergency/disaster setting for WHO on strengthening human resources for health and improving national referral systems. She also worked for the Asian Development Bank as the team leader for capacity building of doctors, nurses and midwives. Prior to this she worked in the Ministry of Health, as well as a research fellow and lecturer. Her work for national health system strengthening has spanned the areas of curriculum development, training, health/mental policy as well as knowledge brokering in human resources for health in the Global Health Workforce Alliance.

The focus of Dr Wheeler's recent and current work in WHO headquarters in the health Workforce Department, has been for education and training of the health workforce. Together with a Steering Committee of experts, Dr Wheeler is in the process of developing an eBook on integrating a Social Determinants of Health Approach into health workforce education and training.

**3. LEAD CONSULTANT:**

- a. PROFESSOR ILONA KICKBUSCH, THE DIRECTOR  
THE GLOBAL HEALTH PROGRAMME  
THE GRADUATE INSTITUTE FOR INTERNATIONAL RELATIONS AND  
DEVELOPMENT STUDIES, GENEVA



Professor Ilona Kickbusch is the Director of the Global Health Programme at the Graduate Institute for International Relations and Development Studies, Geneva. In Switzerland she serves on the board of trustees of the Careum Foundation and on the expert panel to the Federal Councillor to advise on the implementation of the Swiss Health Strategy 2020.

She was a member of the Commission established by the Calouste Gulbenkian Foundation on Health in Portugal and was advisor on the German global health concept, adopted by the German government. From 1998 – 2003 she was Professor of Public Health (Global Health) and Political Science, and Distinguished Scholar Leader in the New Century Scholars Program of the Fulbright Scholar Program at Yale University, New Haven, Connecticut, USA. Before that, she served in various capacities at WHO.

She holds a PhD in political science and sociology from the University of Konstanz, Germany. Professor Kickbusch has been recently appointed to panel of independent experts, chaired by Dame Barbara Stocking, to assess WHO's response in the Ebola outbreak by the Who Director-General.

#### **4. WHO RO STAFF:**

- a. PETER PHORI, TECHNICAL OFFICER  
INTERSECTORAL ACTION FOR HEALTH  
WORLD HEALTH ORGANIZATION, REGIONAL OFFICE FOR AFRICA,  
BRAZZAVILLE CONGO



Mr. Phori joined World Health Organization (WHO) fourteen years ago, serving as National Professional Officer, and Health Promotion in Lesotho for twelve years. Currently, he is serving as the Technical Officer, Intersectoral action for Health in the Regional Office for Africa, Brazzaville Congo.

For fifteen years, Mr. Phori has worked for Lesotho Government serving in Ministries of Health and Education as a Senior Health Educator and Subject Specialist in development, coordination, monitoring and evaluation of HIV/AIDS including other communicable and non-communicable diseases programmes. He has also been a part time lecture in National Health Training and Lesotho College of Education. In addition, Mr. Phori has assisted the Ministry of Education in implementation of school health programme piloted in 50 primary schools and 80 high schools.

Mr. Phori holds Msc degree in health education and health promotion from Leeds Metropolitan University in the United Kingdom.

- b. SUVAJEE GOOD, PROGRAMME COORDINATOR  
DEPARTMENT OF SUSTAINABLE DEVELOPMENT AND HEALTHY  
ENVIRONMENTS  
WORLD HEALTH ORGANISATION, REGIONAL OFFICE SOUTH-EAST ASIA,  
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Dr Sujavee Good has been supporting WHO Member States advocating for healthy public policies. As a programme coordinator for health promotion and social determinants of health at the WHO Regional Office for South-East Asia, she contributed to bridging the linkage between health and social development, governance, human rights, and high-level policies advocacy to address equity issues beyond health system.

Dr Good has 25 years of international experiences and 10 years in the UN System. Before joining the WHO South-East Asia Regional Office, she was a Chief Technical Advisor for International Labour Organization (ILO) and a Policy and Planning officer for UNICEF Thailand, supporting country to develop comprehensive policy for child's rights and child protection measures.

On the academic side, Dr Good was an Assistant Professor and the Director of the International Health Social Sciences Program at Mahidol University in Thailand. She obtained Doctorate's and Master's Degrees in sociology from University of Pittsburgh in 1998, received another Master's Degree in Social Work from Delhi University, India in 1988.



- c. MOAGI GABORONE  
NPO HEALTH INFORMATION AND PROMOTION - WCO BOTSWANA



Mr. Moagi Gaborone is from Botswana. He has close to 30 years of experience in various Public Health settings. He started off as a Dental Therapist in 1986 and transitioned to Health Education in 1990. He worked as a lecturer and senior lecturer in the Dental Therapy and Health Education Programmes respectively before joining PATH as a Project Officer for Behaviour Change in a Sexual and Reproductive Health project for youth in Botswana.

Mr Gaborone joined WHO in 2005 where he is responsible for seven programmes namely, Health Promotion, SDH, NCDs, Alcohol, Tobacco, Mental Health as well as Violence, injuries and Disability.

Mr Gaborone holds a MPH (Health Behaviour/Health Education) from Boston University, USA.