

Action on social determinants of health in the Americas

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Over the last century, the Region of the Americas has made tremendous progress in increasing life expectancy, as well as addressing many challenges to improve the health and well-being of its communities. In recent decades, the Region has witnessed political stability and economic prosperity at unprecedented levels. Yet, as the area continues to prosper in economic terms, its income levels are the most inequitable in the world. So, while the Americas today is an eminently urban and middle-income area, it masks enormous heterogeneity and inequality. Inequality has important ramifications for both health and the social determinants of health (SDH), leading to greater stratification and larger inequities among and within countries.

The need to address health inequities through an approach that goes beyond the health sector was first addressed in the Alma-Ata Declaration of 1978, followed by the Ottawa Charter for Health Promotion in 1986. Since then, there has been a global movement to investigate and act upon the determinants of health, *the causes of the causes*, of health inequities. The World Health Organization (WHO) Commission on the Social Determinants of Health (CSDH) concluded in 2008 that the social conditions in which an individual is born, grows, lives, works, and ages are the single most important determinants of health status.

The work conducted by CSDH has now become an important component of the global and regional health agenda. Clear evidence is this: the active participation of official delegations at the 2011 World Conference on the Social Determinants of Health, in which 120 of the 194 WHO Member States participated; the ratification of the Rio Political Declaration on the Social Determinants of Health by the World Health Assembly as part of Resolution WHA 65.8; *The Future We Want*, a document approved during the Rio + 20 Conference that included health and SDH among the pillars of sustainable development; as well as the adoption of an SDH approach in the definition of objectives and goals of sustainable development in the post-2015 agenda. Thus, the global movement to address the SDH has gained momentum, and the Region of the Americas is actively working towards creating linkages between SDH and other international development agendas.

The movement to adopt universal health coverage (UHC) is long overdue. To achieve good health and health equity for populations requires UHC and addressing the SDH through joined and coordinated action across sectors on the five priority areas outlined in the Rio Political Declaration on the Social Determinants of Health. Universal coverage and social and psychological health are firmly rooted in the WHO Constitution of 1948, which declared health a fundamental human right. The Health for All agenda set by the Alma-Ata Declaration sees health as an essential part of development, influenced by actions beyond the health sector, as well as by UHC.

Attention to the SDH and health equity, as well as efforts to translate these into political action, have been central to the Region's tradition throughout history. The regional movement of social medicine has offered a rich analysis on the economic, political, and social determinants of health and has played an important role in promoting health reforms and rights in the Region as a whole. Countries in the Americas have made concrete progress in reducing health inequities through action on SDH. Different strategies have been adopted to promote the SDH approach—as seen in Brazil, where a National Commission on SDH was established, and in Argentina and Chile, where structures were created to promote this approach in the ministries of health or at high levels of the national government. The overarching purpose of these strategies has been to

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further the SDH agenda within their respective countries through action at the local and national level. Similarly, in South America, the Union of South American Nations' Council of Ministers of Health identified SDH as one of the five priorities in its 2010–2015 Plan of Action. Furthermore, Mercosur created an Intergovernmental Commission on Health Promotion and Social Determinants of Health, and most recently, in the development of the Pan American Health Organization's Strategic Plan (2014–2019), the Region's Member States ensured that SDH is an integral part of the Organization's five-year plan.

Programs and policies have similarly been implemented in the Region that address one or more key SDH. The Bolsa Familia program in Brazil is a case-in-point, as it provides support to promote and improve access to public services networks for health, social welfare, education, and social assistance with the aim of reducing poverty and inequity. One key factor that made this program so successful was the commitment at the highest level of government, as well as different sectors coming together around the common goal of addressing social exclusion and inequities.

This special issue of the *Pan American Journal of Public Health* on the social determinants of health was largely a product of the overwhelming interest among countries to grasp more fully the concept of social determinants and to make SDH a priority on national health agendas. The adoption of the Rio Political Declaration at the Global Conference on Social Determinants in 2011 sparked a dialogue between WHO Member States on sharing experiences in addressing health inequities through the SDH approach and discovering best ways to translate their respective visions into practice.

The articles in this special issue reflect the diversity of the Region and the many regional challenges that persist in narrowing the equity gap. Mullings and colleagues highlight some of these challenges by exploring urbanization in Jamaica and its effect on mental health, while Barrionuevo-Rosas and colleagues examine the main determinants of obtaining access to Pap-smears in Peru using an "equity lens" in the data analysis. The study by Paolino and colleagues similarly examines access to Pap smears in Argentina, and like the study in Peru, concludes that both living conditions and the organization and quality of health services affect access to screening programs for cervical cancer. Soares and colleagues present evidence from Brazil assessing factors associated with inequalities in the use of oral health services. Growing consensus indicates that progress in tuberculosis control in low- and middle-income countries will require not only investment in strengthening tuberculosis control programs, diagnostics, and treatment, but also action on the social determinants of tuberculosis. Pinheiro and colleagues look at the association between individual demographic and socioeconomic variables and the occurrence of tuberculosis in Brazil, and argue that better housing conditions among those most vulnerable to tuberculosis and improved access to diagnostics, should be priority strategies to achieve disease control. The Bolsa Familia program has been documented extensively, but in this special issue, authors Alves and Escorel specifically assess its impact on social exclusion. Lastly, Vega and Frenz argue that SDH are central to both the pursuit of healthy lives and the provision of health services for all and should be addressed in the framework of UHC, since both SDH and UHC are critical in narrowing the health equity gap. Work in both of these areas requires countries to track progress, not just across the national population, but within different groups, addressing issues of income level, education, gender, age, place of residence, migrant status, and ethnic origin.

Health inequities continue to persist, including in countries where efforts are being made to address SDH. Moreover, countries are increasingly expressing the need for effective models and tools to measure progress. The article by Russell and colleagues is a systematic review of the literature providing an analysis of five health systems models that demonstrates interactions between SDH and health systems. Application of these models will be useful in

developing indicators for monitoring and evaluation. Prasad and colleagues, as well as Collie-Akers and colleagues, also show how progress is made through the use of tools and measurements for addressing health inequities. De Pietri and colleagues present the work that they conducted on developing indicators, specifically addressing vulnerable populations' access to services and how these have facilitated better planning and programming. The link between sustainable development, health promotion, SDH, and equity within the broader framework of the post-2015 agenda is addressed by Jackson and colleagues, as well as by Bueno and colleagues, but is also featured throughout the special issue as a whole. Global strategies to achieve health equity can mirror those strategies in local communities by building social, political, and economic power in communities where resources are scarce and where health inequities are concentrated.

This special issue aims to facilitate a platform for further enhancing dialogue and the sharing of best practices throughout the Region. There is an increasing need to publish new knowledge on inequities and SDH and to do so in English, Portuguese, and Spanish in order most effectively to disseminate the knowledge base throughout the Region. Thus, this special issue is a potential tool for countries to sustain south-to-south cooperation and encourage concrete SDH action among governments and policymakers that will further narrow the health inequity gap in the Americas.

Today, public health enjoys support from a number of partnerships and stakeholders implementing programs on health and SDH. This support has translated into the effective strategies currently in place. Countries need to continue to measure their advancements in addressing SDH, identify new and emerging challenges and improvement strategies, and progressively adjust their policies and programs in response to new information. This is the century of innovation—let the Region continue to build on its drive to ensure health and equity for all.

Appreciation

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Their contributions and dedication to this special issue on social determinants of health were extraordinary and helped make the manuscripts more interesting, more accurate and more useful to our readers and all others who work to improve the health of the peoples of the Americas.
