



PARALLEL SESSION 1.2

**ACTION BEYOND THE HEALTH SECTOR - ADDRESSING THE SOCIAL
DETERMINANTS OF NCDS**



| BACKGROUND

The social determinants of health have been described as “the causes of the causes” of illness. They affect people’s health and well-being in the environment into which “they are born, grow up, live, work and age.”

Key behavioural pathways leading to NCDs and jeopardizing the achievement of SDG3.4 (by 2030, reduce by one third premature mortality and promote mental health and well-being) have long been identified, and frequently the focus in NCD prevention has been on improving diet, reducing smoking prevalence and harmful use of alcohol, and increasing physical activity, as well as managing conditions following diagnosis. Much of this work is within the remit of public health and health professionals. As low- and middle-income countries strive to address NCDs as a major threat to sustainable development, a social determinants approach is increasingly highlighted as one of the important focus areas due to its relevance to all sectors.

Social determinants of NCDs include: socio-economic context; inequality; level of education; gender; ethnicity; social norms; cultural beliefs and practices; social exclusion; income; employment; access to health services; and transportation; social and community support networks, including social cohesion. In addition, public policies (policy coherence) and the economic and political structures and accompanying ideologies shape the adverse circumstances negatively influencing health.¹

By definition, the social determinants of health are the result of human action and therefore their transformation requires human efforts involving intersectoral and coherent public policies that can be implemented through the whole-of-society and whole-of-government approach for health equity.

The social determinants approach is central to achieving not only SDG targets, including SDG 3.4 on the one third reduction of premature mortality from NCDs, but other related targets as well, such as SDG 3.8 on enhancing universal health coverage. However, aligning policies, regulations and actions across various sectors and stakeholders has proved to be a challenge, as countries strive to implement their NCD commitments and achieve universal health coverage.

Interventions on the social determinants of NCDs can be defined through using analysis of the determinants in shaping interventions across the life-course in order to enable children, young adults and elderly to live up to their full potential and have control over their lives. Taking action to improve the conditions of daily life well before birth, during early childhood, at school age, during reproductive and working ages, are particularly important to improve populations’ mental health and to reduce the risk of those mental health disorders that are associated with health inequalities.²

These interventions may include poverty-reduction strategies, social protection measures, community engagement, including addressing social norms and cultural beliefs, enhanced health literacy and tailored health promotion approaches. Furthermore, social determinants of health underpin the implementation of all SDGs due to their interlinked nature and the need for policy coherence and intersectoral interventions, most of which fall outside the health sector.

The health sector, an important social determinant itself, also has an important role within the Health-in-all Policies, whole-of-government and whole-of-society frameworks to act as a facilitator of policy development and coordination across sectors and stakeholders. As a backbone of health systems, medical professionals have a critical role in the prevention and control of NCDs. Therefore, it is important to ensure that healthcare workers are trained to have clinical competency in global health and primary care and understand the preventive strategies for NCDs and their social determinants.

Current medical and nursing curricula, particularly in low- and middle-income countries, have not kept pace with the changing dynamics of public health, health policy and health demographics. As a result, medical education in these countries does not adequately cover the prevention and control of NCDs. Medical education and training should be reoriented by introducing competency-based, health system-connected curricula that reflect national needs and priorities. In addition, continuous education should incorporate knowledge of social determinants for NCD prevention to respond to the demands of evolving health systems, changing disease patterns and growing patient expectations.

1 Raphael D. The Social Determinants of Noncommunicable Diseases: A Political Perspective. Global Handbook on Noncommunicable Diseases and Health Promotion 2013: pp95-113.

2 World Health Organization and Calouste Gulbenkian Foundation. Social determinants of mental health. Geneva, WHO 2014.

| OBJECTIVES

- Take stock of available evidence on interventions and public policies to address the social determinants and promote social equity in different contexts for the prevention and control of NCDs
- Highlight the importance of early childhood interventions to prevent NCDs throughout the life-course
- Explore the role of the social determinants of health as modifiable risk factors that, if addressed, could lead to major health improvements in socially disadvantaged and marginalized groups, such as people living with mental health and substance abuse disorders
- Highlight the role of medical education in preparing healthcare workers with clinical competencies to address NCDs and their social determinants
- Highlight examples (delivery platforms, NCD-specific actions) of the successful implementation of the social determinants of health approach through policy coherence and action across sectors, departments, health agencies and community groups for NCD prevention
- Understand the role of enhanced health literacy for action on the social determinants of NCDs



Moderator

Michael Marmot

Director, Institute of Health Equity

Department of Epidemiology and Public Health, University College London
United Kingdom

Professor Sir Michael G. Marmot MBBS, MPH, PhD, FRCP, FFPHM, FMedSci, FBA Director of the Institute of Health Equity (UCL Department of Epidemiology & Public Health). Sir Michael Marmot is Professor of Epidemiology at University College London. He is the author of *The Health Gap: the challenge of an unequal world* (Bloomsbury: 2015) and *Status Syndrome: how your place on the social gradient directly affects your health* (Bloomsbury: 2004). Professor Marmot held the Harvard Lown Professorship for 2014-2017 and is the recipient of the Prince Mahidol Award for Public Health 2015. He has been awarded honorary doctorates from 18 universities. Marmot has led research groups on health inequalities for over 40 years. He chairs the Commission on Equity and Health Inequalities in the Americas, set up in 2015 by the World Health Organization's Pan-American Health Organization (PAHO/ WHO). He was Chair of the Commission on Social Determinants of Health (CSDH), which was set up by the World Health Organization in 2005, and produced the report entitled: 'Closing the Gap in a Generation' in August 2008. At the request of the British Government, he conducted the Strategic Review of Health Inequalities in England post 2010, which published its report 'Fair Society, Healthy Lives' in February 2010. This was followed by the European Review of Social Determinants of Health and the Health Divide, for WHO Euro in 2014. Professor Marmot chaired the Expert Panel for the WCRF/AICR 2007 Second Expert Report on Food, Nutrition, Physical Activity and the Prevention of Cancer: a Global Perspective. He chaired the Breast Screening Review for the NHS National Cancer Action Team and was a member of The Lancet-University of Oslo Commission on Global Governance for Health. He set up and led a number of longitudinal cohort studies on the social gradient in health in the UCL Department of Epidemiology & Public Health (where he was head of department for 25 years): the Whitehall II Studies of British Civil Servants, investigating explanations for the striking inverse social gradient in morbidity and mortality; the English Longitudinal Study of Ageing (ELSA), and several international research efforts on the social determinants of health. He served as President of the British Medical Association (BMA) in 2010-2011, as President of the World Medical Association in 2015. He is President of the British Lung Foundation. He is an Honorary Fellow of the American College of Epidemiology; a Fellow of the Academy of Medical Sciences; an Honorary Fellow of the British Academy, and an Honorary Fellow of the Faculty of Public Health of the Royal College of Physicians. He was a member of the Royal Commission on Environmental Pollution for six years and in 2000 he was knighted by Her Majesty The Queen, for services to epidemiology and the understanding of health inequalities. Professor Marmot is a Member of the National Academy of Medicine.





Panelist

Anselm Hennis

Director, Noncommunicable Diseases and Mental Health

Pan American Health Organization

United States of America

Dr. Hennis is Director of the Department of Noncommunicable Diseases and Mental Health, Pan American Health Organization/World Health Organization. This Department coordinates activities on non-communicable diseases and related risk factors, nutrition, violence and injuries, road safety, disabilities, and mental health and illicit substance use throughout the Americas. He graduated in Medicine from the University of the West Indies (UWI), and qualified in Internal Medicine in the UK. Dr. Hennis was Wellcome Trust Clinical Epidemiology Fellow to the London School of Hygiene and Tropical Medicine, University of London, where he obtained an MSc. and PhD in Epidemiology. He has been Professor of Medicine and Epidemiology at the University of the West Indies, as well as Research Associate Professor in Preventive Medicine at Stony Brook University, NY. Dr. Hennis has collaborated on several NIH grants which conducted research into eye disease, diabetes as well as diabetes in pregnancy; cardiovascular disease and stroke, population genetics, cancer and social disparities of health. He led the establishment of a national NCD surveillance system and the population-based cancer registry in Barbados and authored/co-authored more than 150 peer-reviewed papers. Dr. Hennis has spent his career working to tackle NCDs through clinical practice, research and publication, teaching, working collaboratively with civil society, and through public health practice.





Panelist

Carrie Brooke-Sumner

Implementation Adviser

South African Medical Research Council
South Africa

Dr Brooke-Sumner is Implementation & Systems Advisor in the Alcohol, Tobacco and Other Drug Research Unit of the South African Medical Research Council. Zimbabwean by nationality, she completed a Master's degree in Public Health at the London School of Hygiene and Tropical Medicine and has worked as a consultant in health promotion in the HIV prevention, gender equality and youth development sectors in Southern Africa for more than 10 years. She has extensive expertise in community health, including developing training programmes for community workers and youth peer educators. Her PhD in Psychology from the University of KwaZuluNatal in South Africa focused on developing, piloting and evaluating a community-based psychosocial rehabilitation programme for people with schizophrenia. She co-authored the recent systematic review of reviews covering linking of social determinants of mental disorders with the Sustainable Development Goals. Dr Brooke-Sumner's current work focuses on implementation and scaling up of psychosocial interventions for people with non-communicable diseases and comorbid mental disorders in low resource primary care South African settings.





Panelist

Dina Tadros

Medical Doctor

Ludwig Maximilian University Munich
Germany

Dina is a medical doctor, young researcher and global health advocate. She served as National Officer on Human Rights and Peace Issues in the national medical students' association and founded a youth led organization that supports healthcare provision for refugees and asylum seekers in Germany. She proposed a new curriculum for her medical faculty aiming at increasing awareness of public and global health issues for medical students. Dina worked in several health institutions around the world including Germany, Switzerland, France, the US, Bolivia and Egypt. Dina was an intern at World Health Organization where she focused her work on multistakeholder and multisectoral engagement for noncommunicable diseases prevention and control. Apart from this she successfully advocated for reforms of the internship program including health insurance coverage and stipends for interns as President of the WHO Intern Board.





Panelist

Johan Carlson

Director General

Public Health Agency of Sweden
Sweden

Johan Carlson [M.D., Ph. D., D.T.M. & H], took up office as the first Director General of the Public Health Agency of Sweden in 2014. The Agency is a merge between The Swedish Institute for Communicable Disease Control and The National Public Health Institute. It is an expert authority with a broad responsibility for public health issues at a national level, including both communicable and non-communicable diseases as well as environmental health issues. The Agency develops and supports activities to promote health, prevent illness and improve preparedness for health threats. It is involved in many international projects as well as bilateral projects with countries in Asia and Africa. Dr Carlson is the former Director General of the Swedish Institute for Communicable Disease Control (2009-2013). In 2005-2009 he served as Director for the Supervision of Health Services at the National Board of Health. He has a background in clinical medicine (infectious diseases and tropical medicine). In addition, he has held research positions at the Karolinska Institute in the 1990s and has served as an expert in the field of public health and communicable disease control at the European Commission (1998-2001). Dr Carlson is member of the Management Boards of the European Centre for Disease Prevention and Control (ECDC) and of the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA). He is also the Swedish representative in the European Union Steering Group on Promotion and Prevention.



Panelist

Mary Bassett

Director

Harvard FXB Center for Health and Human Rights
United States of America

Mary T. Bassett is the Director of the FXB Center for Health and Human Rights at Harvard University, as well as the FXB Professor of the Practice of Health and Human Rights at the Harvard School of Public Health. With more than 30 years of experience in public health, Dr. Mary Travis Bassett has dedicated her career to advancing health equity. Prior to her directorship at the FXB Center, Dr. Bassett served for four years as commissioner of Health for New York City. As commissioner, she worked to ensure that every New York City neighborhood supported the health of its residents, with the goal of closing gaps in population health across the city. Originally from New York City, Dr. Bassett lived in Zimbabwe for nearly 20 years. Previously, she was the Program Director for the African Health Initiative and the Child Well-being Program at the Doris Duke Charitable Foundation. She received her B.A. in History and Science from Harvard University and her M.D. from Columbia University's College of Physicians and Surgeons. She served her medical residency at Harlem Hospital Center, and has a master's degree in Public Health from the University of Washington, where she was a Robert Wood Johnson Clinical Scholar.





Panelist

Monika Arora

Executive Director

HRIDAY (Secretariat of Healthy India Alliance), New Delhi-110049
India

Dr Monika Arora is a public health scientist working in the area of health promotion and health advocacy. She is Executive Director of HRIDAY, an NGO working on NCD prevention and control in India and also serves as the secretariat of Healthy India Alliance (India NCD Alliance) and India Network for NCDs and Youth (INNY). She is also the Director of the Health Promotion Division and Additional Professor at Public Health Foundation of India. Her expertise is in designing, implementing, managing and evaluating intervention trials in various health promotion settings, large scale group randomized trials as well as qualitative research on NCD prevention and control. Her research in India has focused on scientifically developing multi-component interventions for NCD prevention and control. She has led Rapid Program Reviews, Impact Evaluations, Implementation Science Research and Health Impact Assessments of various policies and programs in India and has proposed convergence models for National health programs. She has worked extensively with government at National and sub-national level. She has special interest in studying multi-sectoral working and convergence models across sectors to address various health issues. She has been involved in empowering youth with health advocacy skills in India and globally. She has published more than 100 scientific papers in high impact public health journals and her research recommendations have informed National Health Programs in India. Dr. Arora has been a member on various national and international expert committees on NCDs, tobacco control, Alcohol control and Adolescent Health related issues, formed by Ministry of Health and family Welfare, Government of India. She has been a member of Ad Hoc Working Group on Implementation, Monitoring and Accountability on Ending Childhood Obesity, formed by WHO Director General during 2014-2016. She is also a member of WHO Civil Society Working Group on the third High-level Meeting of the UN General Assembly on NCDs. She has been a commissioner on the Lancet Report “Our Future: A Lancet Commission on Adolescent health and Wellbeing” published in 2016. Dr. Arora has been honoured with the Best Practices Award in Global Health in 2011 by the prestigious Global Health Council, for demonstrating best practice example in the area of health promotion among youth and community, especially focusing on preventing NCDs. She has been awarded with the WHO Director General’s World No Tobacco Day Award in 2012; Dr. Prem Menon outstanding service award in January 2018 by World-India Diabetes Foundation (WIDF) in recognition of her contributions to the education and prevention of diabetes among children in India and “Exceptional Women of Excellence 2018 Award” by Women Economic Forum (WEF) in April 2018.



