Social Determinants of Health: evidence for action

Professor Sir Michael Marmot
12th Sept 2014
200th anniversary of the Faculty of Medicine, Oslo
Key principles

- Social justice
- Material, psychosocial, political empowerment
- Creating the conditions for people to have control of their lives

www.who.int/social_determinants
Marmot Review: 6 Policy Objectives

A. Give every child the best start in life
B. Enable all children, young people and adults to maximise their capabilities and have control over their lives
C. Create fair employment and good work for all
D. Ensure healthy standard of living for all
E. Create and develop healthy and sustainable places and communities
F. Strengthen the role and impact of ill health prevention
Why we need to tackle health inequalities

- Moral responsibility
- Much can done in countries at all levels
- Financial difficulties are not a barrier
Estimated odds of reporting poor or very poor general health by socioeconomic characteristics, 25 EU Member States*, 2010

Source: Health inequalities in the EU
Life expectancy at age 25 by education, men

Source: Health inequalities in the EU 2013
Life expectancy at age 25 by education, women

Source: Health inequalities in the EU 2013
Country clusters by level of policy response

- **Cluster 1**: Relatively positive and active response to health inequalities.
  - At least one national response to HIs or comprehensive regional HI policy responses.

- **Cluster 2**: Variable response to health inequalities.
  - No explicit national policy on HIs, but at least one explicit regional response or a number of other policies with some focus on health inequalities.

- **Cluster 3**: Relatively undeveloped response to health inequalities.
  - No focused national or regional responses to health inequalities, no explicit health inequality reduction targets (though there may be targeted actions on the social determinants of health).

Source: Report on Health Inequalities in the EU
Values and Principles

• Social justice
  – Health equity
  – Intergenerational equity
  – Gender equity
• Human rights
• Life course approach
  – Social arrangements, institutions and policies
  – Conditions of daily life
• Vulnerability and exclusionary processes
• Empowerment
• Social inequities
• Social gradient in health
• Mutual responsibility
• Evidence
Accumulation of positive and negative effects on health and wellbeing

Themes
Intergenerational transmission:

Adequate social and health protection for mother-to-be and young families
Early child care and education

• Parenting and family support
  – Perinatal services
  – Care before and during pregnancy
  – Help for new mothers
• Pre-school education and care
• Primary, secondary and tertiary education and training

Source: WHO Review of Social Determinants and the Health Divide in the European Region
Child poverty rates before and after transfers, ranked by after-transfer rate, EU–SILC 2009

Source: WHO Review of Social Determinants and the Health Divide in the European Region, using data from EU SILC
Integrated approach across the social determinants

- Family income
- Parental leave arrangements,
- Availability & affordability of childcare at particular ages and stages
- Aligning policy - child care and education, employment, housing and transport

Source: WHO Review of Social Determinants and the Health Divide in the European Region
Areas for outcomes:

- **Development**
  - Cognitive
  - Communication & language
  - Social & emotional
  - Physical

- **Parenting**
  - Safe and healthy environment
  - Active learning
  - Positive parenting

- **Parent’s lives**
  - Mental wellbeing
  - Knowledge & skills
  - Financially self-supporting

21 Proposed outcomes see page 8
Accumulation of positive and negative effects on health and wellbeing

Perpetuation of inequities

Source: WHO Review of Social Determinants and the Health Divide in the European Region
Employment and working conditions have powerful effects on health and health equity

When these are good they can provide:-

- financial security
- paid holiday
- social protection benefits such as sick pay, maternity leave, pensions
- social status
- personal development
- social relations
- self-esteem
- protection from physical and psychosocial hazards

... all of which have protective and positive effects on health

Source: CSDH Final Report, WHO 2008
Occupational stress in European countries

Source: WHO Review of Social Determinants and the Health Divide in the European Region
1% rise in unemployment associated with:

- 0.8% ↑Suicide
- 0.8% ↑Homicide
- 1.4% ↓Traffic death

No effect on all-cause mortality

Source: Stuckler et al 2009 *Lancet*
Intended retirement – assessed by asking:
‘Thinking about your present job, would you like to retire as early as possible?’

Figure: Source: Siegrist J, Wahrendorf M (2009) Quality of work, health and retirement (Comment). The Lancet
Older ages:
3 components of healthy ageing:

• Staying alive
• Avoiding disease
• Having good positive physical and mental functioning

Each of these is strongly related to the social environment
Mean SF-36 physical component scores and mental component scores by age group: Whitehall II respondents from phases 3-7.

Chandola T et al. BMJ 2007;334:990
Older ages

- People in professional and managerial classes reach the same level of disability as those in routine and manual classes about 15 years later.
- Professional and managerial classes have less illness in their 70s than ‘routine and manual’ classes 15 years earlier.

Source: English Longitudinal Study of Ageing (ELSA)
Are older people more likely to be poor than the rest of the population? Not necessarily...

Source: OECD Income-Distribution Database; see OECD (2008), Growing Unequal?, Tables 5.1 and 5.3.
At risk of poverty rate of people aged 65 and over after social transfers, 2010

% aged 65 or over with an equalized disposable income below 60% of the national median disposable income after social transfers

Source: Eurostat
Spending on basics as % of income rises steeply among poorer groups

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<tr>
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Source: English Longitudinal Study of Ageing (ELSA)
MACROLEVEL CONTEXT

WIDER SOCIETY

SYSTEMS

LIFE COURSE STAGES

Accumulation of positive and negative effects on health and wellbeing

Prenatal   Early Years   Working Age   Older Ages

Perpetuation of inequities

Source: WHO Review of Social Determinants and the Health Divide in the European Region
Wider Society

- Social exclusion
- Social protection across the life course
- Communities

Source: WHO Review of Social Determinants and the Health Divide in the European Region
Per cent of the population aged 16 and over reporting bad or very bad health in EU-SILC by social protection expenditure per person in Euros purchasing power parity, 2010

Source: Report on Health Inequalities in the EU, 2013
Self reported health by education and social expenditures: 18 EU countries

Source: Dahl & van der Wel, data from EU SILC 2005, reported in: WHO Review of Social Determinants and the Health Divide in the European Region
Social Isolation and Loneliness

• Social isolation and loneliness is associated with 50% excess risk of CHD
• Broadly similar to excess risk associated with work stress

Systematic literature review and meta-analysis of prospective cohort studies published up to December 2011 in CHD-free populations (nine studies) reported in Steptoe & Kivimaki 2012
Percentage of those lacking social support by deprivation of residential area, 2005

Source: Health Survey for England

Marmot Review
Accumulation of positive and negative effects on health and wellbeing

Prenatal  Early Years  Working Age  Older Ages

Family building

Intergenerational transmission

Themes
Transnational context:

Economic Issues

Sustainability and environment
Trends in income share among top income decile, US: 1913-2007

Source: Piketty and Saez (2003), series updated to 2007 by Saez in 2009
Higher income inequality associated with lower intergenerational mobility

\[ y = 2.2x - 0.27 \]
\[ R^2 = 0.76 \]

Source: Corak (2011), OECD, CEA estimates
Accumulation of positive and negative effects on health and wellbeing

Perpetuation of inequities

Source: WHO Review of Social Determinants and the Health Divide in the European Region
Health inequalities and policy strategies

• Health inequalities are not inevitable;
• Not just a responsibility of the health care sector;
• There is no ‘magic bullet’
• Whole of society, whole of government
Governing for health equity through action on social determinants – what’s needed?

- Conceptual understanding
- Construct a ‘Delivery-chain’
- Accountability
- Governance for health
LOCAL ACTION: ENGLAND

• Local authorities
  – 75% of local authorities have been significantly influenced by Marmot, evidence by their Health and Well-being Strategies and JSNAs (joint Strategic Needs Assessments)
  – We have worked directly with 40 plus local authorities

• English Partnership  Local government partnership between IHE and 7-8 local authorities until 2014/15 – intensive working to develop SDH approach to health inequalities. Disseminate findings
Priorities agreed by 65 Health and Well-being Boards – Local Government England

Kings Fund 2013
Local action on health inequalities: health equity briefings – children and young people

- Improving the home to school transition
- Increasing access to good quality parenting programmes
- Improving provision of adult learning services
- Reducing NEETs among younger people
- Building children and young people’s resilience in schools
Local action on health inequalities: health equity briefings - adults

• Improving provision of adult learning services
• Increasing employment opportunities and retention for people with limiting long term illness
• Increasing employment opportunities and retention for older people
• Working with local employers to encourage, incentivise and enforce good quality work
• Workplace interventions to improve health and wellbeing
Local action on health inequalities: health equity briefings – wider society

- Tackling fuel poverty and cold home-related health problems
- Addressing homelessness and overcrowding
- Improving access to green spaces
- Increasing the number of employees receiving a living wage
Health is a human right
Do something
Do more
Do better