

# Social determinants approaches to public health:

from concept to practice



*Editors*

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## About this book

The thirteen case studies contained in this publication were commissioned by the research node of the Knowledge Network on Priority Public Health Conditions (PPHC-KN), a WHO-based interdepartmental working group associated with the WHO Commission on Social Determinants of Health. The publication is a joint product of the Department of Ethics, Equity, Trade and Human Rights (ETH), Special Programme for Research and Training in Tropical Diseases (TDR), Special Programme of Research, Development and Research Training in Human Reproduction (HRP), and Alliance for Health Policy and Systems Research (AHPSR). The case studies describe a wealth of experiences with implementing public health programmes that intend to address social determinants and to have a great impact on health equity. They also document the real-life challenges in implementing such programmes, including those in scaling up, managing policy changes, managing intersectoral processes, adjusting design and ensuring sustainability.

This publication complements the previous publication by the Department of Ethics, Equity, Trade and Human Rights entitled *Equity, social determinants and public health programmes*, which analysed social determinants and health equity issues in 13 public health programmes, and identified possible entry points for interventions to address those social determinants and inequities at the levels of socioeconomic context, exposure, vulnerability, health outcomes and health consequences.

## Acknowledgements

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The study design and implementation team consisted of Erik Blas, Johannes Sommerfeld, Sara Bennett, Shawn Malarcher and Anand Sivasankara Kurup. Bo Eriksson, Jens Aagaard-Hansen and Norman Hearst reviewed and provided inputs to the publication at different stages. Valuable inputs in terms of contributions, peer reviews and suggestions on various chapters were also received from a number of WHO staff at headquarters, regional offices and country offices, as well as other partners and collaborators. The editors would like to acknowledge specifically the contributions of Marco Ackerman, Anjana Bhushan, Davison Munodawafa, Benjamin Nganda, Sarah Simpson, Susan Watts, Erio Ziglio and Ramesh Shademani. The editorial team consisted of Erik Blas, Johannes Sommerfeld and Anand Sivasankara Kurup.

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# Foreword

The health of a population is measured by the level of health and how this health is distributed within the population. The WHO publication from early 2010, entitled *Equity, social determinants and public health programmes* analysed from the perspective of thirteen priority public health conditions their social determinants and explored possible entry points for addressing the avoidable and unfair inequities at the levels of socioeconomic context, exposure, vulnerability, health-care outcome and social consequences. However, the analysis needs to go beyond concepts to explore how the social determinants of health and equity can be addressed in the real world. This publication takes the discussion on social determinants of health and health equity to a practical level of how programmes have actually addressed the challenges faced during implementation.

*Social determinants approaches to public health: from concept to practice* is a joint publication of the Department of Ethics, Equity, Trade and Human Rights (ETH), Special Programme for Research and Training in Tropical Diseases (TDR), Special Programme of Research, Development and Research Training in Human Reproduction (HRP), and Alliance for Health Policy and Systems Research (AHPSR). The case studies presented in this volume cover public health programme implementation in widely varied settings, ranging from menstrual regulation in Bangladesh and suicide prevention in Canada to malaria control in Tanzania and prevention of chronic noncommunicable diseases in Vanuatu.

The book does not provide a one-size-fits-all blueprint for success; rather, it analyses from different perspectives and within different contexts programmatic approaches that led to success or to failure. The final chapter synthesizes these experiences and draws the combined lessons learned. These lessons include: the need for understanding equity as a key value in public health programming and for working not only across sectors but also across health conditions. This requires a combination of visionary technical and political leadership, an appreciation that long-term sustainability depends on integration and institutionalization, and that there are no quick fixes to public health challenges. Programmes must get out of their comfort zones and, in addition to applying traditional biomedical and programmatic tools, they have to learn to address the economic, social, cultural and political realities in which public health conditions and inequities exist.

A common lesson learned from all the analysed cases is to not wait to identify what went right or wrong until after the programme has elapsed or failed. Research is a necessary component of any implementation to routinely explore, gauge, and adjust strategies and approaches in a timely manner. We believe that this publication will inspire programme managers, policy-makers and researchers to work hand-in-hand to launch new and better public health programmes and to further strengthen existing ones.

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## Acronyms and abbreviations

AHPSR	Alliance for Health Policy and Systems Research
AKU	Aga Khan University
ALGON	Association of Local Governments of Nigeria
AMC	Assembly of Manitoba Chiefs
ANIS I	Anthropometric Nutritional Indicators Survey
ARI	acute respiratory infections
ASIST	applied suicide intervention skills training
AusAID	Australian Agency for International Development
BAPSA	Bangladesh Association for the Prevention of Septic Abortion
BCC	behaviour change communication
BWHC	Bangladesh Women's Health Coalition
CEPS	cultural, economic, political and social
CHEW	community health extension worker
CIE	communication, information and education
CLAS*	Local Health Administration Communities
CLTS	community-led total sanitation
CNCDs	chronic non-communicable diseases
CO	community organizer
CSDH	Commission on Social Determinants of Health
DFID	Department for International Development (UK)
DGFP	Directorate General of Family Planning
DHS	Demographic and Health Survey
DIRESA*	Regional Health Directorate
DPT3	diphtheria, pertussis and tetanus third dose
DSNC	District School Nutrition Committee
ERC	Research Ethics Review Committee
ERC	Expert Review Committee
FANA	federally administered northern areas
FATA	federally administered tribal areas
FGD	focus group discussion
FMOH	Federal Ministry of Health
FNIHB	First Nations and Inuit Health Branch
FW	field worker

FWV	family welfare visitor
GAVI	Global Alliance for Vaccines and Immunizations
HMIS	Health Management Information System
HNPSP	Health and Nutrition Population Sector Programme
HPSP	Health and Population Sector Programme
HRP	Special Programme of Research, Development and Research Training in Human Reproduction
IBRD	International Bank for Reconstruction and Development
ICC	Interagency Coordinating Committee
ICDDR,B	International Centre for Diarrhoeal Disease Research, Bangladesh
ICPD	International Conference on Population and Development
IDB	Inter-American Development Bank
IDRC	International Development Research Centre
IMAGE	Intervention with Microfinance for AIDS and Gender Equity
IMCI	Integrated Management of Childhood Illnesses
INAC	Indian and Northern Affairs
IPD	immunization plus days
IPV	intimate-partner violence
IRKs	insecticide retreatment kits
ITN	insecticide-treated nets
KINET	Kilombero Net Project
KYI	Keewatin Youth Initiative
LGA	local government area
LLIN	long-lasting insecticidal net
MCH	Maternal and Child Health
MDG	Millennium Development Goal
MEF	Ministry of Economy and Finance
MFI	microfinance initiative

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