

Role of Social Determinants in Equity and Primary Health Care

Ravi P. Rannan-Eliya

Institute for Health Policy, Sri Lanka

**Regional Consultation on Social Determinants of
Health: Addressing the Health Inequalities**

Colombo

19th February 2009

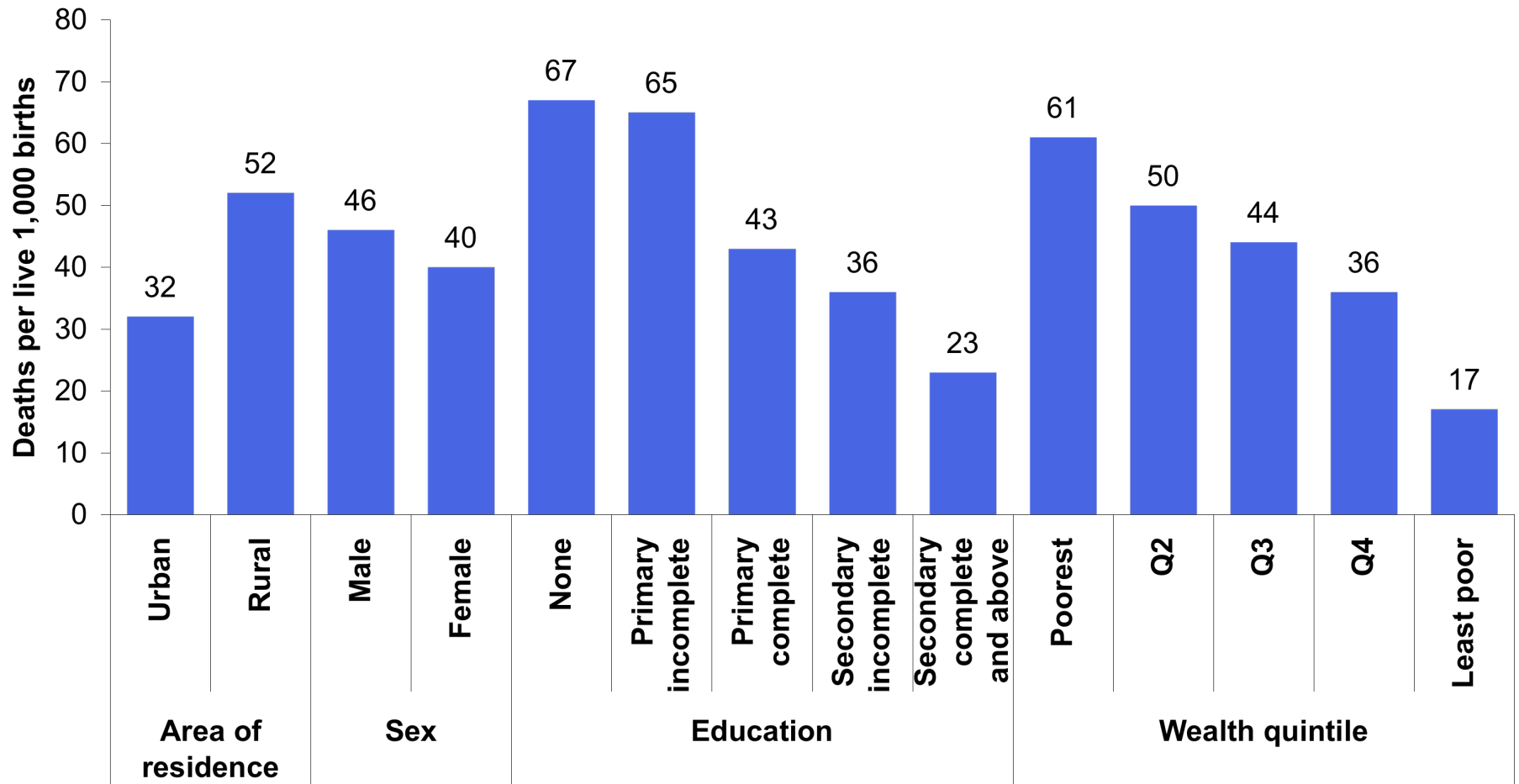


Acknowledgements

- Fazana Saleem-Ismael and colleagues at Institute for Health Policy and other regional collaborators who participated in WHO SEARO *Situation Analysis of Health Equity and Social Determinants of Health in the South-East Asian Region Study*
- WHO SEARO for funding
- Peter Berman, Harvard University, for support during doctoral thesis

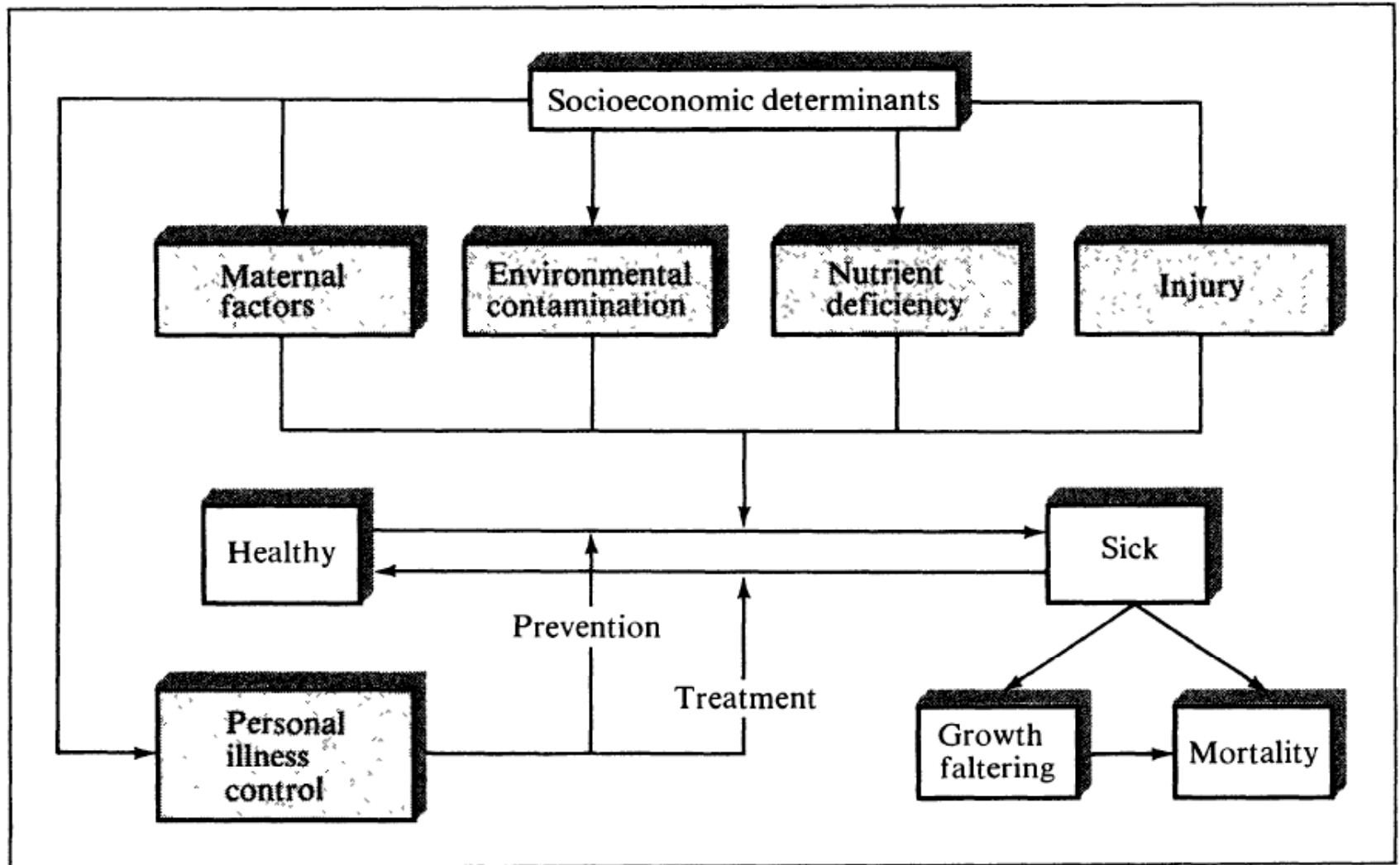
The reality of health inequalities

IMR differentials, Indonesia 2002-2003

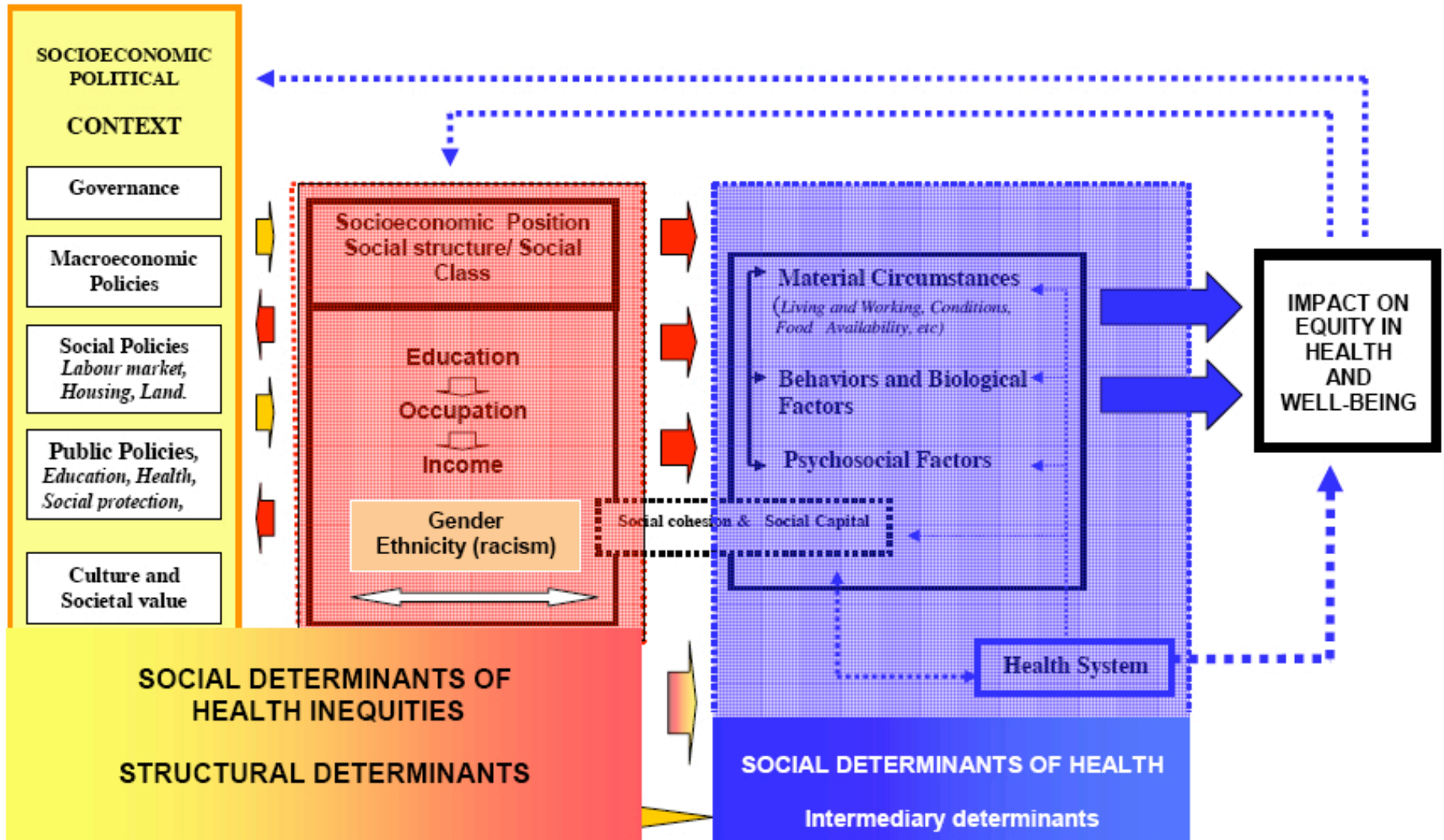


Why do we have inequalities?

Proximate determinants framework



WHO social determinants framework



Causes of social inequalities in health

- Environmental risk factors are social determinants
 - Sanitation, access to water, access to food, unsafe work and living environments
- Differences in social position affect exposure to environmental risk factors
 - Poor people less likely to be able to obtain adequate food
 - Girl children less likely to be given available food
- Differences in social position affect access to medical interventions
 - Poor people less able to overcome financial costs in accessing medical care
- Differences in social position associated with differences in health seeking behavior
 - Education influences willingness of mothers to seek treatment for sick child, receptivity to health information

**Does a social determinants
approach mean that medical
care does not matter for
PHC?**

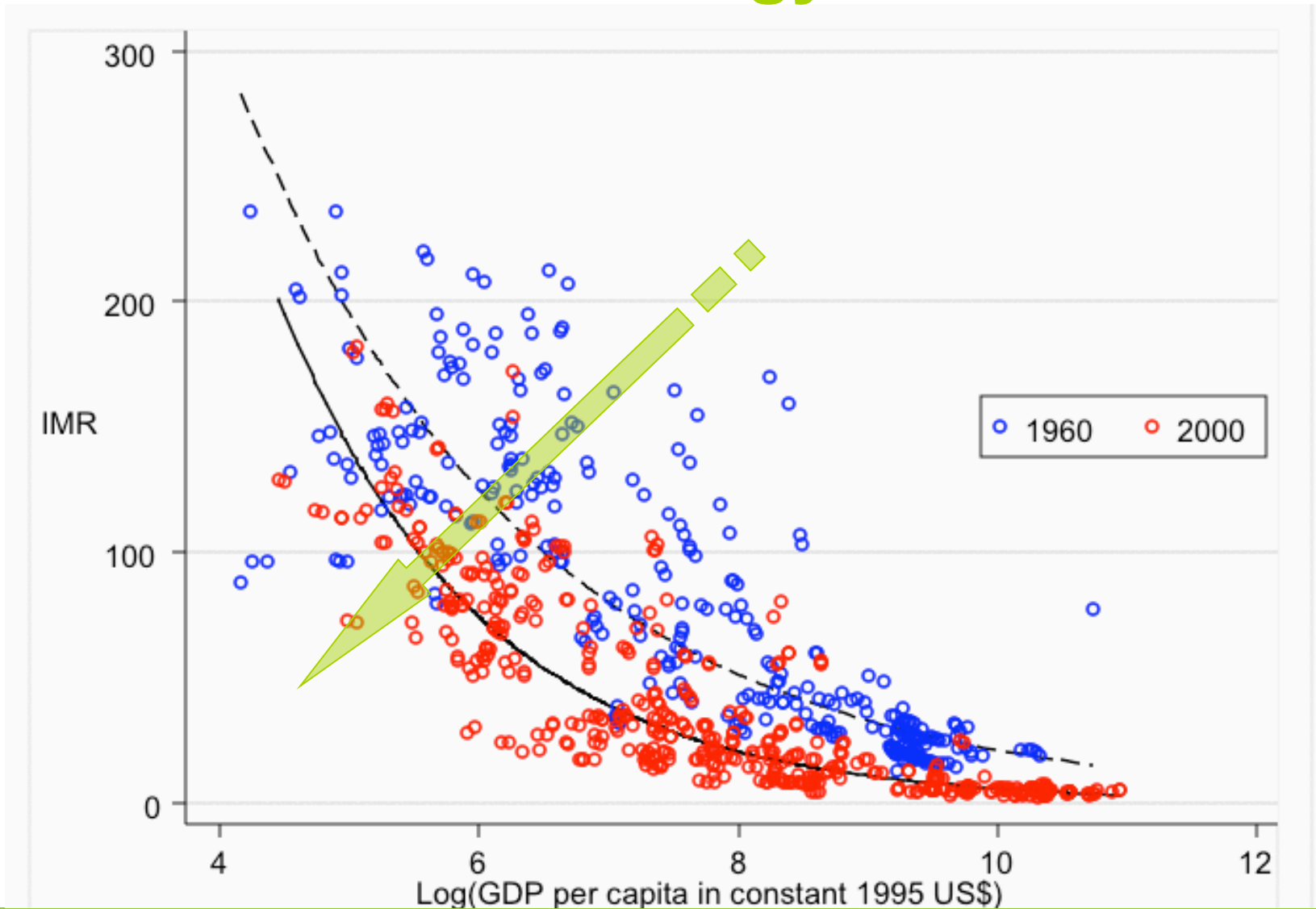
Environmental factors versus health system as social determinants

- Population health outcomes strongly influenced by living standards - per capita income, sanitation, nutrition, education
- Impact of medical care difficult to show prior to 1950s in developed countries

⇒ MEDICAL CARE DOES NOT MATTER?

- NO. Medical care matters increasingly since 1950s, and makes it possible for people at low living standards to achieve good health
 - Compare Sri Lanka in 1990s with USA in 1900s

The changing impact of medical technology



Healthcare is a key social determinant

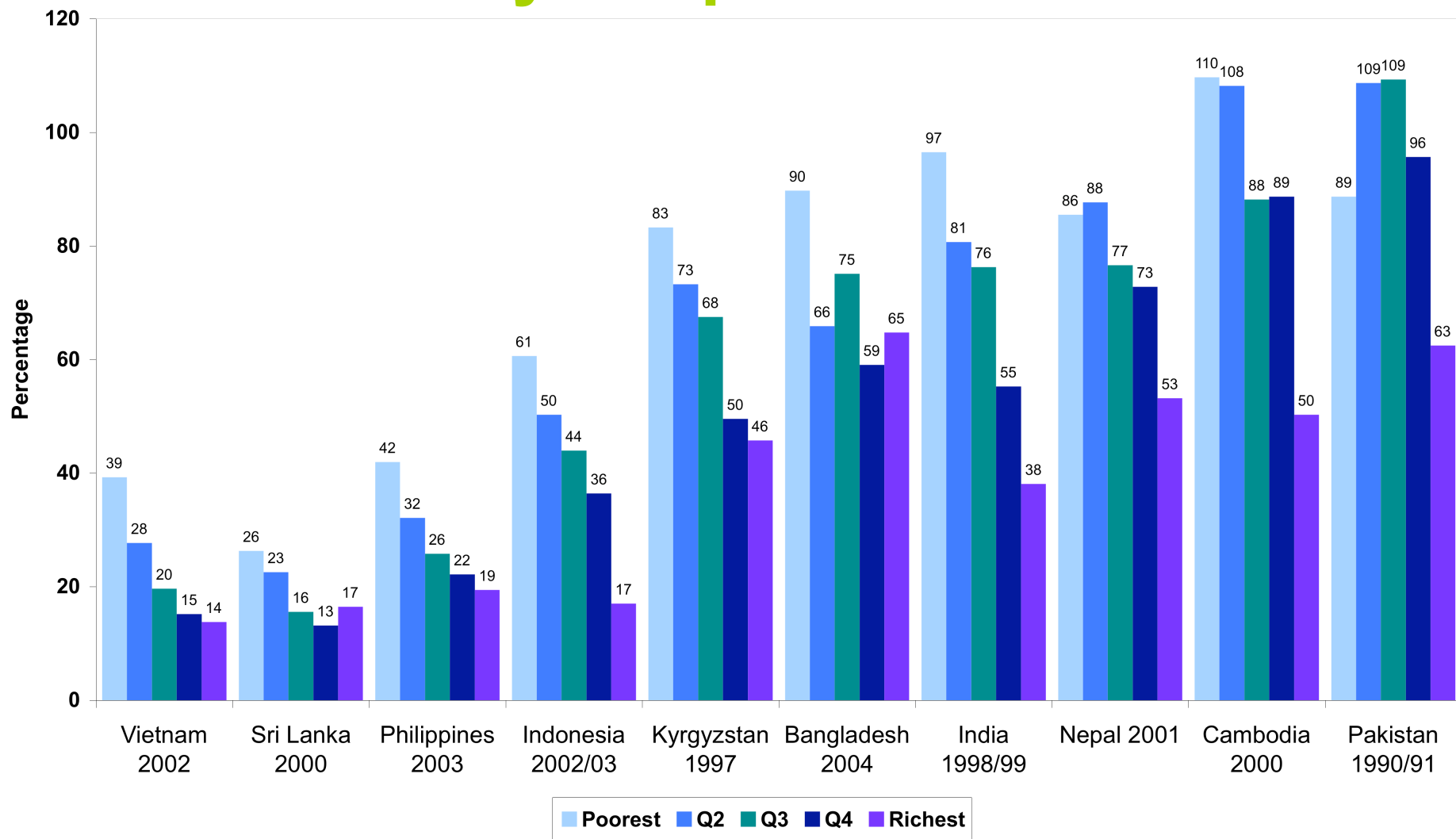
- Use of medical care can reduce impact of differentials in risk exposure for many health conditions, but not all
 - Most infections, maternal mortality, many NCDs
- Sri Lanka examples
 - Poor access to clean water does not translate into high mortality from diarrheal diseases
 - Exposure to mosquito vector no longer means high mortality from malaria
 - Use of healthcare related to health outcomes
- Policies that reduce barriers to accessing medical care will reduce many health inequalities

Access to medical care matters

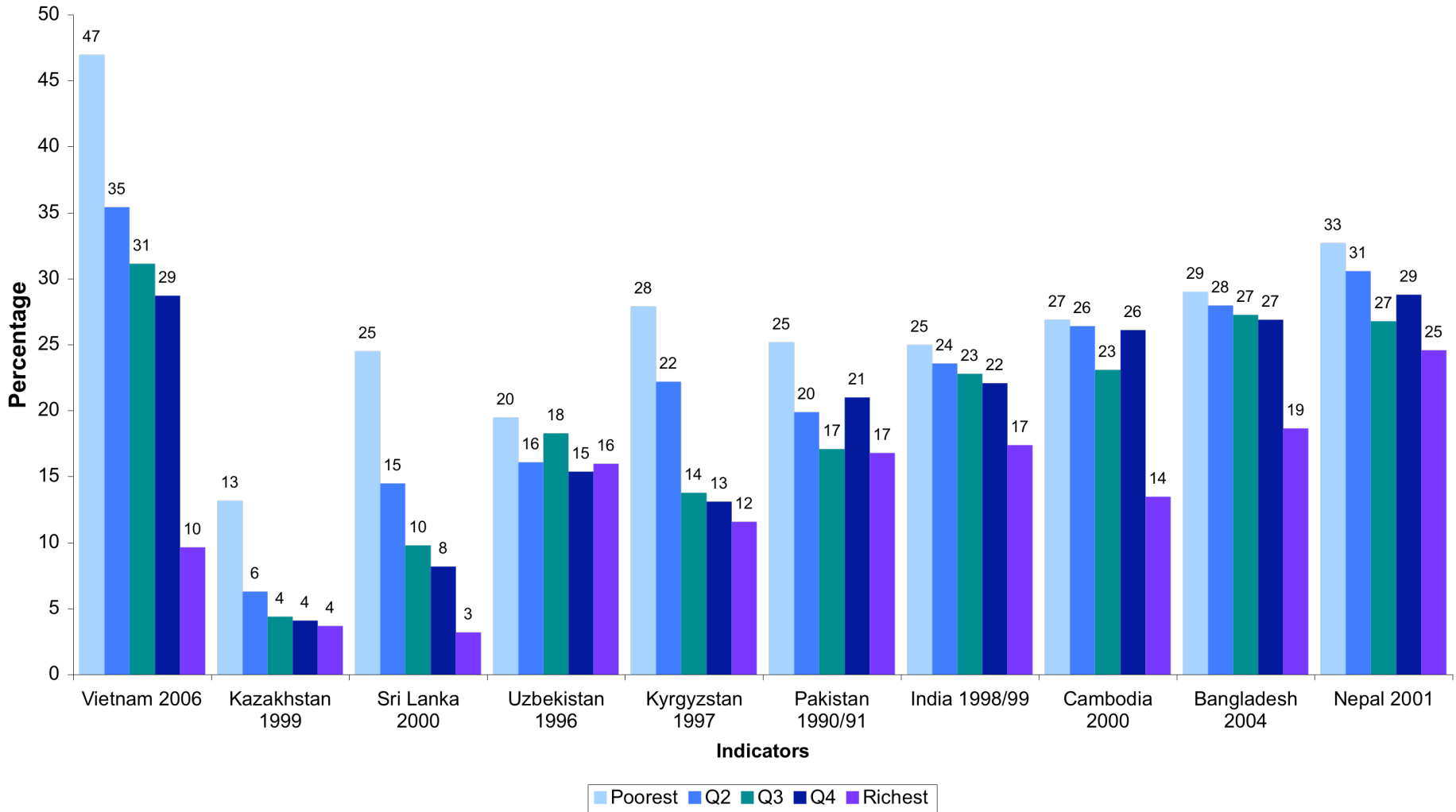
- Medical care is a key intervention that can reduce social inequalities in health outcomes
- Countries that approach universal access to medical care have smaller inequalities in most health outcomes
- Commitment to universal access to medical care is key necessity for reducing social inequalities in access
 - Sri Lanka, Thailand, Maldives
- Universal access is achievable at low incomes and without heavy expenditures on health
- . . . But TWO caveats

**(1) Not all ill-health is
susceptible to medical
intervention, especially
malnutrition**

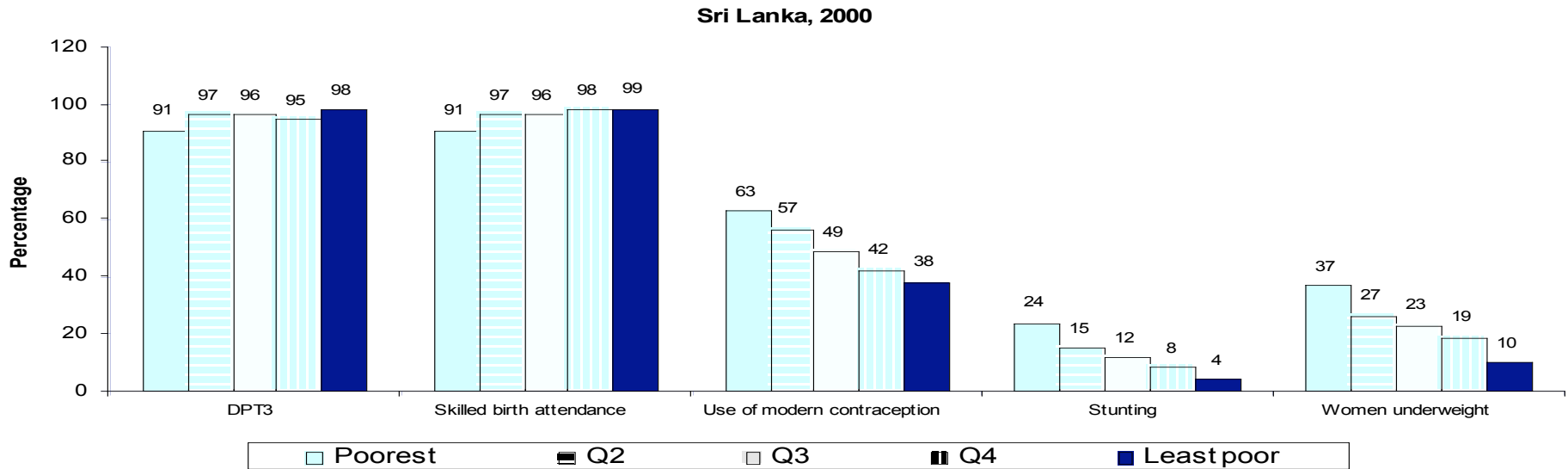
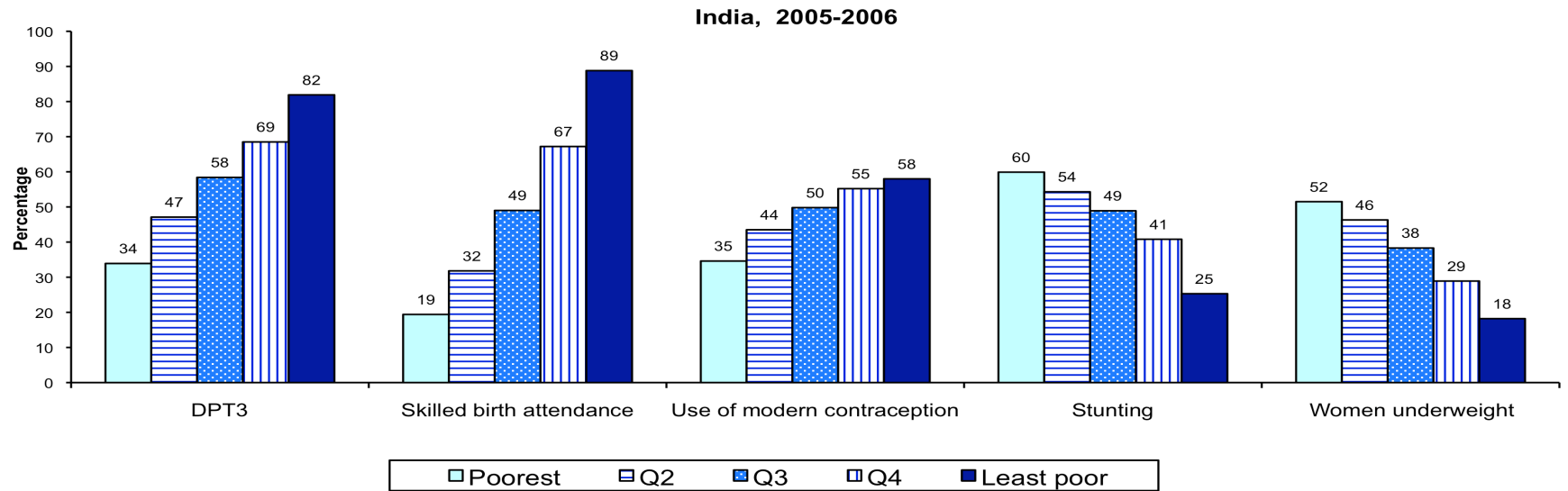
Country inequalities – IMR



Inequalities in moderate stunting



Comparison of Health Indicators by Wealth Quintiles

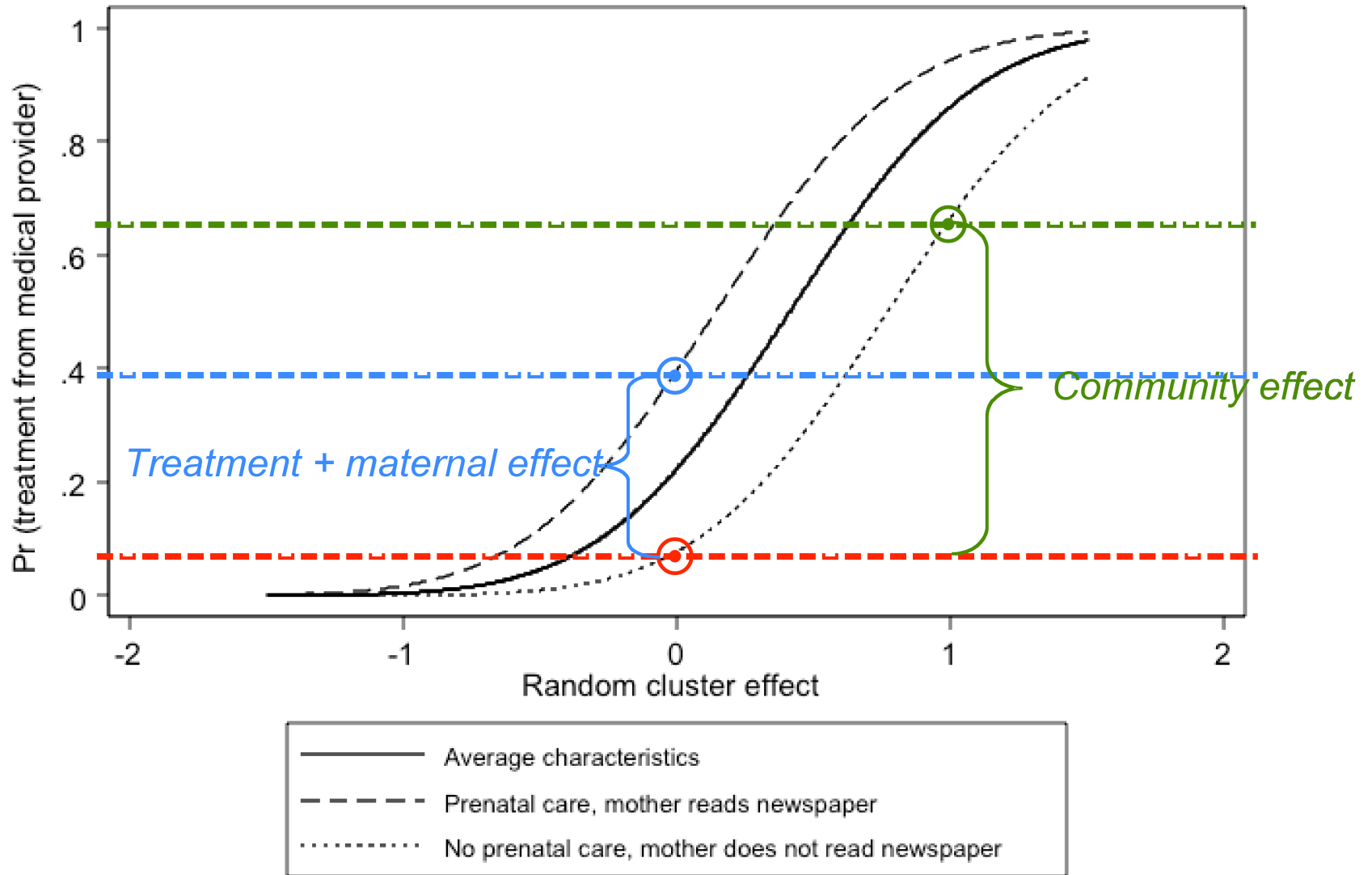


(2) Some social inequalities in health outcomes are due to differences in behavior and norms

Demand-side factors

- Increasing supply alone is not enough, unless sick patients or their carers:
 - Are aware of needs
 - Are willing to use services
- Changing behavior takes time, but can be accelerated
 - Particular problem for maternal care
 - Reduce barriers to use
 - Create positive incentives to choose over existing alternatives
- Behavior is not only an individual issue
 - It matters who you live with
 - Involves social beliefs & culture
 - Equity may require interfering in existing beliefs

It matters where mothers live in India



Key messages

- **Social determinants cause health inequalities**
 - People are exposed differentially to illness risk
 - People face different barriers to obtaining necessary medical care to treat illness
 - Social position influences health behaviors and norms
- **Medical care of illness is a key social determinant that can mitigate many other inequalities**
- **PHC's concern for health equity requires that the root social determinants of health inequity be addressed in a balanced manner**
 - Social inequalities must be addressed as feasible
 - Medical care matters and requires efforts to achieve universal access to healthcare
 - Access must be reinforced by strategies to change health attitudes and behaviors that disadvantage people

Thank you