Disasters and Social Determinants of Health

Aleksandra Kuzmanovic

World Health Organization
Department of Public Health, Environmental and Social Determinants of Health
The social determinants of health (SDH) are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies and political systems.

50% of mortality reduction in child under-5 mortality between 1990 and 2010 was attributed to non-health sector investments.

50% of inequalities in major NCDs are accounted by social inequalities in risk factors.

Integrated social and medical services show up to 10-fold reductions in child mortality between treatment and control groups, as well as educational and employment co-benefits.
Health equity:
The absence of unfair and avoidable or remediable differences in health among groups defined socially, economically, demographically or geographically.

Population health interventions:
Aim to change the social context that influences health (Rose in Frohlich, 2014)
HEALTH IN THE SDG ERA

3 GOOD HEALTH AND WELL-BEING
ENSURE HEALTHY LIVES AND PROMOTE WELL-BEING FOR ALL AT ALL AGES

17 PARTNERSHIPS FOR THE SDGS
16 PEACE AND JUSTICE
15 LIFE ON LAND
14 LIFE BELOW WATER
13 CLIMATE ACTION
12 RESPONSIBLE CONSUMPTION AND PRODUCTION
11 SUSTAINABLE CITIES AND COMMUNITIES
10 REDUCED INEQUALITY
9 INDUSTRY, INNOVATION AND INFRASTRUCTURE
8 DECENT WORK AND ECONOMIC GROWTH
7 AFFORDABLE AND CLEAN ENERGY
6 CLEAN WATER AND SANITATION
5 GENDER EQUALITY
4 QUALITY EDUCATION
2 ZERO HUNGER
1 NO POVERTY

EMPOWERING STRONG LOCAL INSTITUTIONS TO DEVELOP, IMPLEMENT, MONITOR AND ACCOUNT FOR AMBITIOUS NATIONAL SDG RESPONSES
MOBILIZING PARTNERS TO MONITOR AND ATTAIN THE HEALTH-RELATED SDGs
PRIORITIZING THE HEALTH NEEDS OF THE POOR
ADDRESSING THE CAUSES AND CONSEQUENCES OF ALL FORMS OF MALNUTRITION
SUPPORTING HIGH-QUALITY EDUCATION FOR ALL TO IMPROVE HEALTH AND HEALTH EQUITY
FIGHTING GENDER INEQUALITIES, INCLUDING VIOLENCE AGAINST WOMEN
PREVENTING DISEASE THROUGH SAFE WATER AND SANITATION FOR ALL
PROMOTING SUSTAINABLE ENERGY FOR HEALTHY LIVES AND LIVESTOCK
PROMOTING NATIONAL R&D CAPACITY AND MANUFACTURING OF AFFORDABLE ESSENTIAL MEDICAL PRODUCTS
ENSURING EQUITABLE ACCESS TO HEALTH SERVICES THROUGH UNIVERSAL HEALTH COVERAGE BASED ON STRONGER PRIMARY CARE
FOSTERING HEALTHIER CITIES THROUGH URBAN PLANNING FOR CLEANER AIR AND SAFER AND MORE ACTIVE LIVING
PROMOTING RESPONSIBLE CONSUMPTION OF MEDICINES TO COMBAT ANTIBIOTIC RESISTANCE
SUPPORTING THE RESTORATION OF FISH STOCKS TO IMPROVE SAFE AND DIVERSIFIED HEALTHY DIETS
PROTECTING HEALTH FROM CLIMATE RISKS AND PROMOTING HEALTH THROUGH LOW-CARBON DEVELOPMENT
PROMOTING HEALTH AND PREVENTING DISABILITY THROUGH HEALTHY NATURAL ENVIRONMENTS

World Health Organization
WWW.WHO.INT/SDGS
SUSTAINABLE DEVELOPMENT GOALS
Conflicts

• The number of conflicts is decreasing but conflicts are getting more violent, affecting more people and lasting longer periods.

  - 63 active conflicts in 2008 / 40 in 2014
  - 56 000 fatalities in 2008 / 180 000 in 2014

(International Institute for Strategic Studies)

• Global impacts of conflicts in a globalized World: Migration and Global insecurity.
The impact of conflict on social determinants of health

Socioeconomic & political Context
- Civilian authorities replaced
- Absence of rule of law
- Institutions and elections are effaced
- GDP and public revenue decreases

Governance - Policy
- Social policies weaken
- Reinforcing income insecurity

Cultural & societal norms
- Ethnic polarization
- Social cohesion fragments

Education
- Disruption in girls schooling
- Destruction of schools

Occupation
- Increase in unemployment

Income
- Gender
- Sexual violence and stigmatization increase
- Increase of poverty due to additional care taking duties

Ethnicity / Race
- Material circumstances
- Lack of clean water, sanitation, shelter, food
- Social cohesion
- Loss of community support and social networks

Psychosocial factors
- Behaviours
- Increase in risk behaviours: risky sexual behaviour, drug use, domestic violence

Biological factors
- Distribution of health & well-being

Health System
- Universal Coverage declines
- Accessibility decreases due to geographical and financial barriers created by conflict
- Breaches of medical neutrality

Child health in Syria: recognising the lasting effects of warfare on health
Delan Devakumar¹, Marion Birch¹, Leonard S. Rubenstein², David Osrin³, Egbert Sondorp² and Jonathan C. K. Wells⁴

Interface of culture, insecurity and HIV and AIDS: Lessons from displaced communities in Pader District, Northern Uganda
Joseph Rujumba¹*, Japheth Kwiringira²
Examples of interventions

The Palestinian Medical Relief Society:
• A comprehensive program to tackle malnutrition and anemia combined with job creation activities.
• Provide individuals with sheep and goats as source of milk and cheese for household and assist women to enter the job market.


Unconditional cash transfers
• Studies in conflict countries have demonstrated that school fees and other indirect costs such as books and uniforms are a key expenditure priority when households receive income support.
• Increase in girls schooling by 40%.

Source: The Role of Social Protection Programmes in Supporting Education in Conflict-Affected Situations- Rebecca Holmes 2010 UNESCO.
Suggestions for addressing the SDH in conflicts – the way forward

**Prevention**

• Strengthen the health sector leadership in working with other sectors to tackle the social determinants of health and promote equity and social justice.

**During conflicts**

• Strengthen international legislation to protect schools and medical structures to be targeted during conflicts.

• Identify violations of international humanitarian law.

• Implement equity analysis and reporting to better identify the key underlying factors which can reduce the impact of conflicts to the most vulnerable.

• Promote intersectoral action between humanitarian agencies.

• Enhance community engagement.

**Post conflict**

• Promote an inclusive policy making process: post conflict as an opportunity to establish a more participatory model of governance.

• Reorient the health sector towards SDH and towards addressing health inequities.
Conflicts in the context of the SDGs

Game Changer

- Focusing on broad development and building fair communities and societies.
- Strengthening the rule of law and promoting human rights through the achievement of The SDG 16.

Integration - Indivisibility

- The achievement of Goal 16 requires progress in all the SDGs.
- Achieving the targets of Goal 16 is crucial to the advancement of the other goals.
Social Determinants of Health in Gaza

https://www.youtube.com/watch?v=9NGxZ-7lc7w
Thank you! Merci! Gracias!

kuzmanovica@who.int