

A prospective reflection day

The approach based on social determinants of health and health equity: Towards a new development paradigm

Jan 10, 2023

FROM HEALTH EVIDENCE TO EVIDENCE FOR HEALTH AND HEALTH EQUITY

Sherine Shawky, MD, Dr.PH
Social Research Center
The American University in Cairo

OUTLINE

I

The rationale for the move towards new evidence

II

The type of new evidence for health and health equity

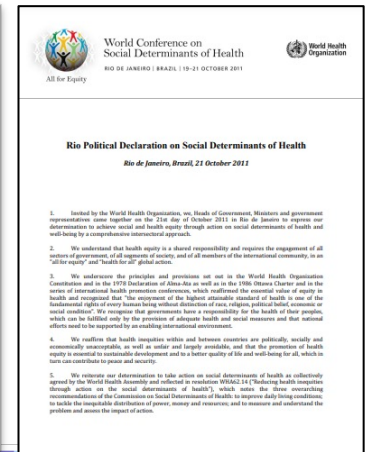
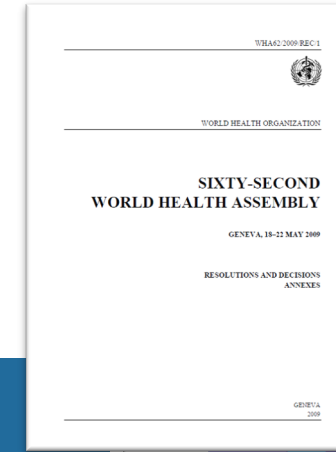
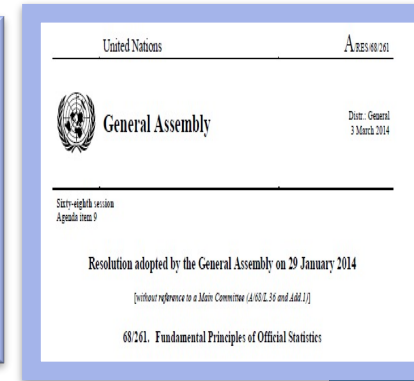
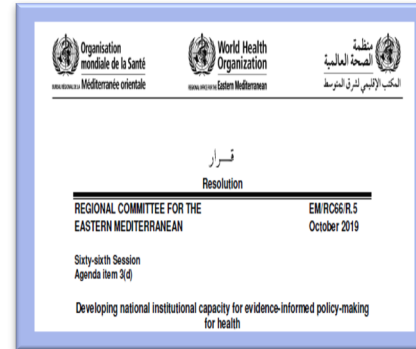
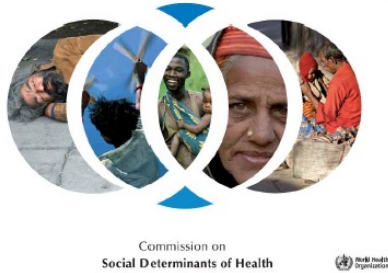
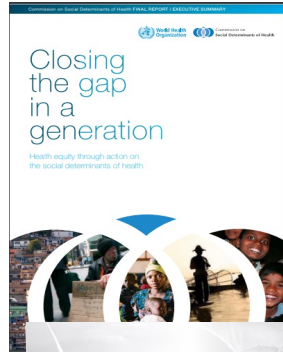
III

A health and health equity approach for producing comprehensive evidence

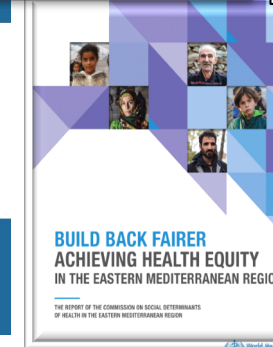
IV

The utilization of the comprehensive evidence for informing policies and actions

I.1. RATIONALE - DEVELOPMENT AND HEALTH PARADIGMS



All for Equity



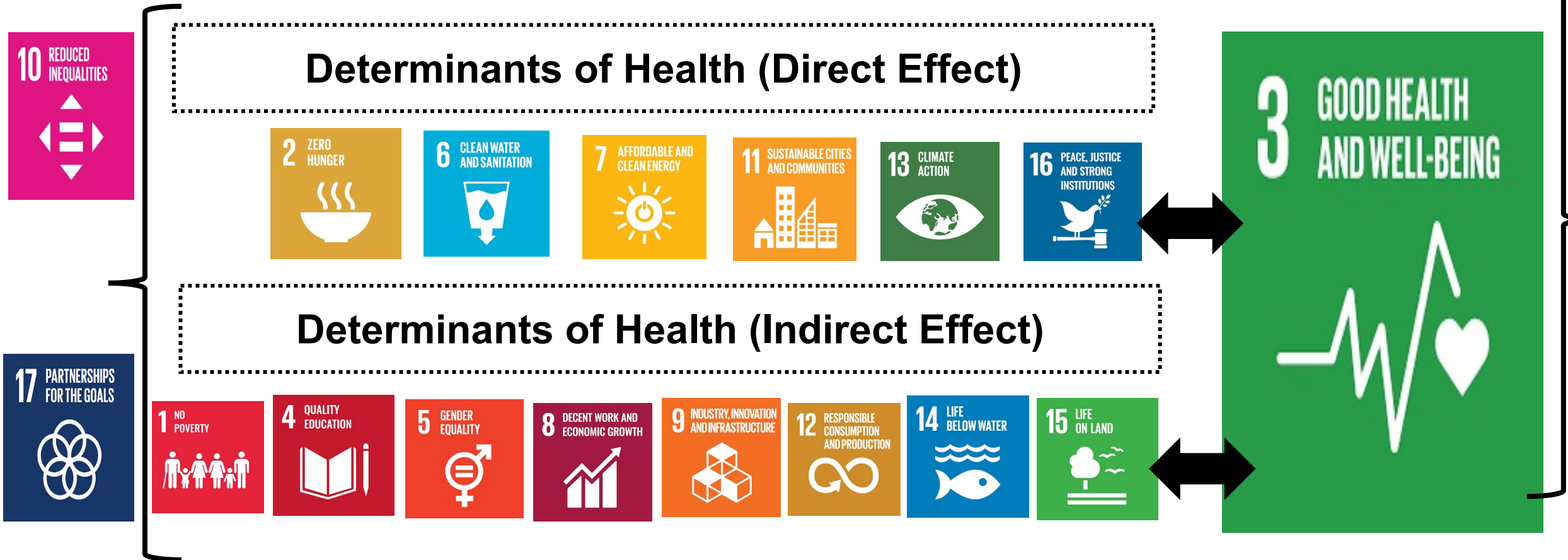
Health
Whole-of-Nation
Responsibility

Evidence
Health, determinants
and interlinkages

Policies & Actions
Effective, Efficient &
Fair

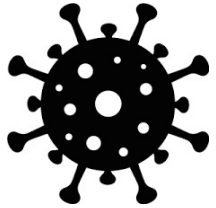
I.2. RATIONALE - HEALTH INTERLINKAGES WITH OTHER SOCIAL POLICIES

Action in One Area Affects Action in Other Areas



I.3. RATIONALE - MEGATRENDS

Megatrends Influence Health, Inequities in Health and their Determinants



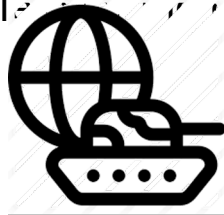
Pandemics are threatening the globe



40% of the world's population currently lives in areas where water is scarce



Food insecurity are threatening millions of people across the globe



War & conflicts are threatening people's lives



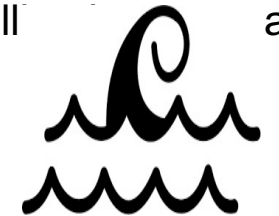
Climate change is disrupting national economies and affecting



Of the 8,300 known animal breeds, 8% are extinct and 22% are at risk of extinction



Due to drought and desertification every year 12 million people are



40% of the world's oceans suffer from pollution, depleted fisheries and loss of coastal habitats.

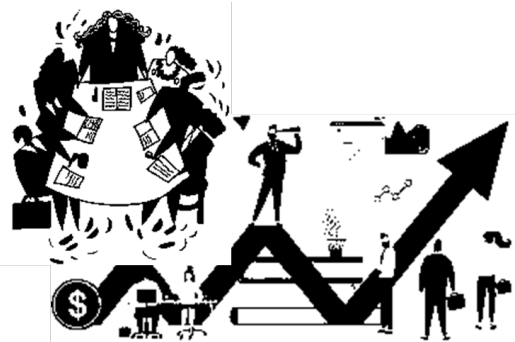
II.1. TYPE OF EVIDENCE: FROM HEALTH INFORMATION SYSTEM TO INFORMATION SYSTEM FOR HEALTH

Health Information System

The production of relevant information that health system stakeholders can use for making transparent and evidence-based decisions for health system interventions (WHO, 2012)



**As health is not the business of the health system alone
Evidence for health should go beyond the health system**

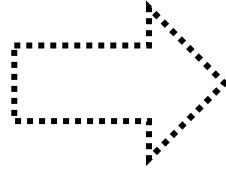


Information System for Health

The production of relevant information on health, health inequality, health inequity and their underlying determinants (social, economic and environmental determinants) that all stakeholders can use for making transparent and evidence-based decisions for fair, effective and efficient policies and actions

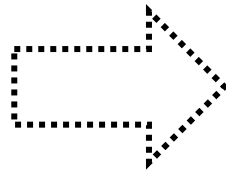
II.2. TYPE OF EVIDENCE – COMPREHENSIVE EVIDENCE FOR HEALTH AND HEALTH EQUITY

**Evidence on health
≠
Evidence on health inequality**



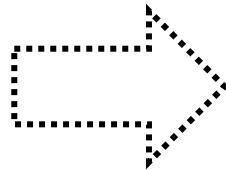
Evidence on health inequality is not just about producing overall national averages in health but is about detecting the inequalities in health between the population subgroups

**Evidence on health inequality
≠
Evidence on health inequity**



Evidence on health equity is not just about detecting health inequalities but is about linking the health inequalities to the fairness of the determinants shaping them

**Evidence on health inequity
≠
Evidence on healthcare inequity**



Evidence on health inequity is not just about assessing fairness of the health policies and actions but is about evaluating the fairness of the package of national policies and actions

III. APPROACH FOR HEALTH AND HEALTH EQUITY

1

Adapting and articulating a comprehensive monitoring framework for health and health equity

2

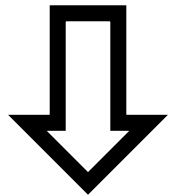
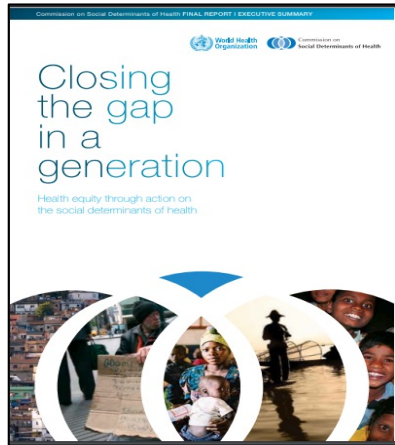
Selecting and organizing indicators and measures over the full breadth of the framework

3

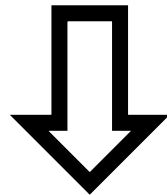
Assembling indicators and measures at country level

II.1 ADAPTING AND ARTICULATING A COMPREHENSIVE MONITORING FRAMEWORK FOR HEALTH AND HEALTH EQUITY

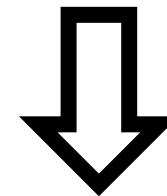
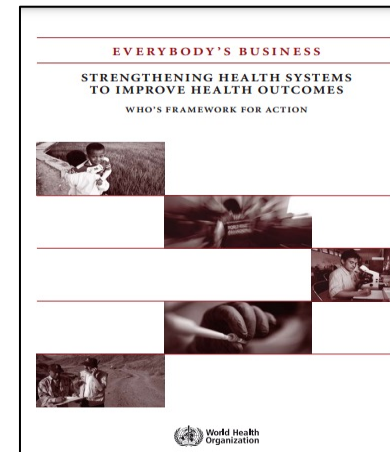
“Health is a State of Physical, Mental and Social Well-being”



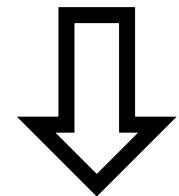
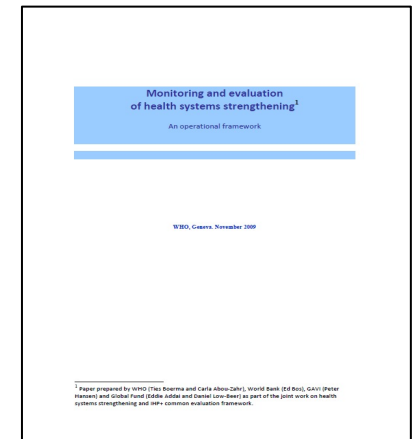
Build interlinkages between health level and distribution and their multilevel determinants



Define the domains & subdomains for the indicators and measures

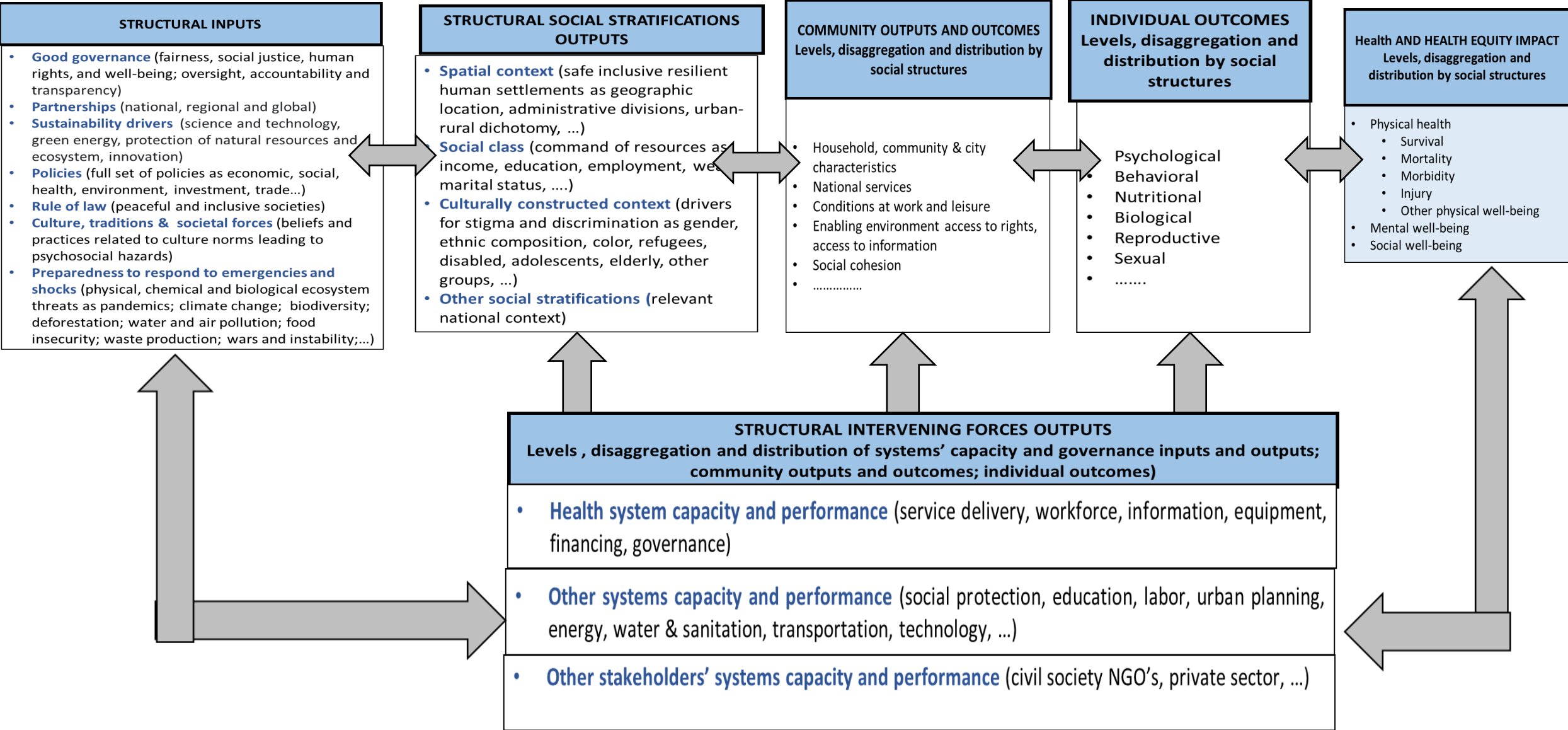


Define the health systems' building blocks that can be applied to any system



Define the domains & subdomains for the systems' indicators & measures

III.1. MONITORING FRAMEWORK FOR HEALTH AND HEALTH EQUITY



III.2. SELECTING AND ORGANIZING INDICATORS AND MEASURES OVER THE DOMAINS AND SUBDOMAINS OF THE FRAMEWORK

Literature, Databases, Observatories, Platforms

Lists of indicators

Lists of population
subgroups

Lists of inequality
measures



Sustainable
development Goals

+

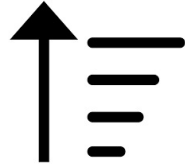
Region specific

+

Country specific

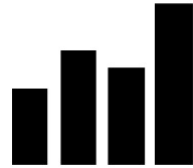
III.3. ASSEMBLING INDICATORS AND MEASURES AT COUNTRY LEVEL

Evidence on overall national averages



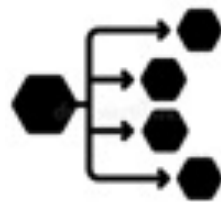
Some indicators are not available, available but not shared, available but not produced in standard format, available but outdated

Evidence on health Inequality



Not all types of disaggregation are available, health inequalities are only available by individual characteristics

Evidence on health equity



Only simple measures (ratio/difference) are available, computing distribution measures ($rID\%$)/ $rCI\%$) is not possible as not all types of disaggregation are available, and when available total counts are not available and sharing of raw data is not possible

Evidence of unfairness in national context



- Refining the list of indicators?
- Using pre-post regulation differences?
- Comparing countries with different regulations or enforcement measures?
- ????????

IV. THE UTILIZATION OF THE COMPREHENSIVE EVIDENCE FOR INFORMING POLICIES AND ACTIONS

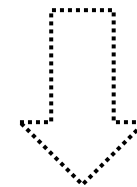
Guide the health and social programs to become more effective, efficient and fair

Strengthen the health and social sectors and steer multisectoral action to improve health and the conditions in which people live

Inform the development programs and initiatives to respond to the needs of the furthest left behind

Use health and health equity as sensitive measures to assess national success and drive an intersectoral action for health and well-being

**Bandaging
Policies**



**Transformative
Policies**

Thank You
