

What are Social Determinants of Health?

The social determinants of health are the circumstances in which people are born, grow up, live, work and age, and the systems put in place to deal with illness. These circumstances are in turn shaped by a wider set of forces: economics, social policies, and politics that are distribution of power, money and resources at global, national and local levels. The social determinants of health are mostly responsible for health inequities - the unfair and avoidable differences in health status seen within and between countries.

Peace, shelter, education, food, income, a harmonious eco-system, resources, social justice and equity were considered as prerequisites for health as the importance of social determinants of health was reinforced in Ottawa conference in 1986. It is now well-accepted that poverty, quality of life, employment, working and living conditions influence health and behavioural modifications and health education will have a limited impact on improving health status unless the larger structural issues which sustain inequality are addressed.

The Commission on social determinants of health, 2006, takes a holistic view. The poor health of the poor, the social gradient in health within countries, and the marked health inequities between countries are caused by the unequal distribution of power, income, goods, and services, globally and nationally, the consequent unfairness in the immediate, visible circumstances of people's lives – their access to health care, schools, and education, their conditions of work and leisure, their homes, communities, towns, or cities – and their chances of leading a flourishing life. This unequal distribution of health-damaging experiences is not in any sense a 'natural' phenomenon but is the result of a toxic combination of poor social policies and programs, unfair economic arrangements, and bad politics. Together, the structural determinants and conditions of daily life constitute the social determinants of health and are responsible for a major part of health inequities between and within countries.

How are determinants of health related to health?

Determinants of health are factors that contribute to a person's current state of health. These factors may be biological, socioeconomic, psychosocial, behavioral,

or social in nature. Generally five determinants of health of a population are recognized:

- Genes and biology: for example, sex and age
- Health behaviors: for example, alcohol use, injection drug use (needles), unprotected sex, and smoking
- Social environment or social characteristics: for example, discrimination, income, and gender
- Physical environment or total ecology: for example, where a person lives and crowding conditions
- Health services or medical care: for example, access to quality health care and having or not having insurance

As the figure below shows, in theory, genes, biology, and health behaviors together account for about 25% of population health. Social determinants of health represent the remaining three categories of social environment, physical environment/total ecology, and health services/medical care. These social determinants of health also interact with and influence individual behaviors as well. More specifically, social determinants of health refer to the set of factors that contribute to the social patterning of health, disease, and illness.

Social – Economic and Political determinants which impact health:

- Social: A distorted caste system has put a very large section of our population at considerable disadvantage vis-à-vis their social and economic mobility
- Economic: In spite of focused and priority steps to address the problem of the poor, the nation still has 32% of the population living below the poverty line. The economic status determines the purchasing power, standard of living, quality of life and patterns of disease and deviant behaviours.
- Political: In spite of adult authorization, representation of poor families in governance in India has been limited. Decisions concerning to resource allocation, manpower policy, degree or extent to which health services to be made accessible were made by political party or its ideology.

- Gender Issues: Like most developing countries, the gender inequity has been a considerable impediment towards progress in health and development in India.
- Location Problems: Far flung, cut off areas and ecologically vulnerable areas where the large section of the population lives.

Why is it important to address SDH?

Addressing social determinants of health is a primary approach to achieving health equity. Health equity is "when everyone has the opportunity to 'attain their full health potential' and no one is 'disadvantaged from achieving this potential because of their social position or other socially determined circumstance'". Health equity has also been defined as "the absence of systematic disparities in health between and within social groups that have different levels of underlying social advantages or disadvantages—that is, different positions in a social hierarchy". Social determinants of health such as poverty, unequal access to health care, lack of education, stigma, and racism are underlying, contributing factors of health inequities.

SDH, health inequality and social exclusion

There are gross inequalities in health between countries. One welcome response to these health inequalities is to put more effort into the control of major diseases that kill and to improve health systems. A second response is to deal with poverty. To reduce inequalities in health across the world there is need for a third major thrust that is complementary to development of health systems and relief of poverty: to take action on the social determinants of health. Such action will include relief of poverty but it will have the broader aim of improving the circumstances in which people live and work.

The understanding that poverty in the form of material deprivation—dirty water, poor nutrition—allied to lack of quality medical care can account for the tragically foreshortened lives of people is insufficient. It fails properly to take into account that relief of such material deprivation is not simply a technical matter of providing clean water or better medical care. Who gets these resources is socially determined.

Health inequities are *avoidable* inequalities in health between groups of people within countries and between countries. These inequities arise from inequalities within and between societies. Social and economic conditions and their effects on people's lives determine their risk of illness and the actions taken to prevent them becoming ill or treat illness when it occurs. Hence unsatisfactory health condition of the economically and socially deprived sections of the communities is caused by unequal distribution of income, goods, social structures and services. Their vulnerability makes it difficult for them to achieve satisfactory health status since they are continuously affected by poor social policies and programmes, unfair economic arrangements and decades of economic and social deprivation.

SDH and right to health perspectives

Ethics and human rights as a framework for tackling socially determined health inequities: Human rights provide a useful framework for efforts to identify and respond directly to the underlying determinants of health, i.e. the “conditions in which people can be healthy”.

The General Comment on the Human Right to Health published in 2000 by the UN Committee on Economic, Social and Cultural Rights explains this by stating that the right to health must be interpreted broadly to embrace key health determinants, including (but not limited to) “food and nutrition, housing, access to safe and potable water and adequate sanitation, safe and healthy working conditions, and a healthy environment.” The General Comment echoes WHO's Constitution and the 1978 Declaration of Alma-Ata in asserting governments' responsibility to address social and environmental determinants in order to fulfill citizens' rights to the highest attainable standard of health.

A human rights-based approach to addressing the social determinants of health means supporting the collective action of disadvantaged groups to analyse, resist and change social structures and policies, assert their shared power and alter social hierarchies towards greater equity. A human rights-based approach argues that the primary responsibility for protecting and enhancing health equity rests with national governments. When inequalities arise systematically as a consequence of individuals' social positions, governance has failed in one of its prime

responsibilities, i.e., ensuring fair access to basic goods and opportunities that condition people's freedom to choose the life they value.

These human rights arguments are important for policy-makers and advocates: "A human rights perspective removes actions to relieve poverty and ensure equity from the voluntary realm of charity... to the domain of law" Reducing these social inequalities in health, and thus meeting human needs, is an issue of social justice.

WORD COUNT- 1372