



Agenda 2030- Prospects for Health and Equity

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Master Programme in Global Development Theory and Practice

- Foundations of Health Promotion
- Gender Analysis in Global Development - Core perspectives and Issues

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‘Caring for those infected means caring for the future’ (2002-2006)

Aim: To create a support initiative addressing HIV positive people in the Limpopo Province, based upon a thorough exploration of their perceptions, needs and resources. Participatory, longitudinal PhD project





Building social capital in community HIV care and support KwaZulu-Natal (2007-2011)





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Fanny Duckert

Social capital has become a focus of interest in health research, and serves as a useful framework to understand aspects of care and support for those living with HIV/AIDS. *Response-ability in the era of AIDS: Building social capital in community care and support* explores the social norms, mechanisms and practices related to HIV/AIDS care and support in a semi-rural community in KwaZulu-Natal, South Africa and makes specific recommendations for improvement of the current care and support situation.

The chapters in the book provide different yet complimentary ways of understanding and responding to HIV/AIDS care and support in a local setting. The first section of the book introduces social capital as a framework for study of HIV/AIDS care and support. In the second section, broader community and system responses are discussed, paying particular attention to participation, cooperation and coordination between community organisations, and challenges connected to this. Home-based care and volunteering are the themes of section three. While being a corner stone of HIV/AIDS care and support efforts, support for the volunteers are often lacking. Through in-depth exploration, important messages concerning the current situation and potential ways of strengthening the volunteer work are given. Section four contains novel perspectives on HIV/AIDS care and support, and tells of how one can empower and give results back to the community using narrative theatre as a tool.

The aim of this book is to disseminate the results of our research, and to further inform, inspire and create a platform for debate between practitioners, academics, researchers, trainers and facilitators interested in addressing community needs in terms of HIV/AIDS and support. The whole research process was approached in the context of capacity building and the book formed part of developing the voice of postgraduate students. The book is mainly written for a graduate and professional public, but will be interesting and useful for practitioners as well. We hope that the lessons we have learnt during this time will also inspire others working in the field.

Wenche Dageid (PhD), Yvonne Sliop (PhD), Olagoke Akintola (PhD), and Fanny Duckert (DrPhilos) are the research team behind the research project reported in this book. They have extensive experience with research, teaching and supervision in international settings.

Response-ability in the era of AIDS

Response-ability in the era of AIDS

Building social capital in community care and support

Edited by:
Wenche Dageid, Yvonne Sliop,
Olagoke Akintola and Fanny Duckert.



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Overview

- Agenda 2030 and the Sustainable Development Goals (SDGs)
- Health inequity and inequality
- Prospects for health and equity





Transforming our world:

The 2030 agenda for sustainable development

- Adopted by the UN member states in 2015
 - **P**eople
 - **P**lanet
 - **P**rosperity
 - **P**eace
 - **P**artnership





SUSTAINABLE DEVELOPMENT GOALS

1 NO POVERTY 	2 ZERO HUNGER 	3 GOOD HEALTH AND WELL-BEING 	4 QUALITY EDUCATION 	5 GENDER EQUALITY 	6 CLEAN WATER AND SANITATION
7 AFFORDABLE AND CLEAN ENERGY 	8 DECENT WORK AND ECONOMIC GROWTH 	9 INDUSTRY, INNOVATION AND INFRASTRUCTURE 	10 REDUCED INEQUALITIES 	11 SUSTAINABLE CITIES AND COMMUNITIES 	12 RESPONSIBLE CONSUMPTION AND PRODUCTION
13 CLIMATE ACTION 	14 LIFE BELOW WATER 	15 LIFE ON LAND 	16 PEACE, JUSTICE AND STRONG INSTITUTIONS 	17 PARTNERSHIPS FOR THE GOALS 	SUSTAINABLE DEVELOPMENT GOALS



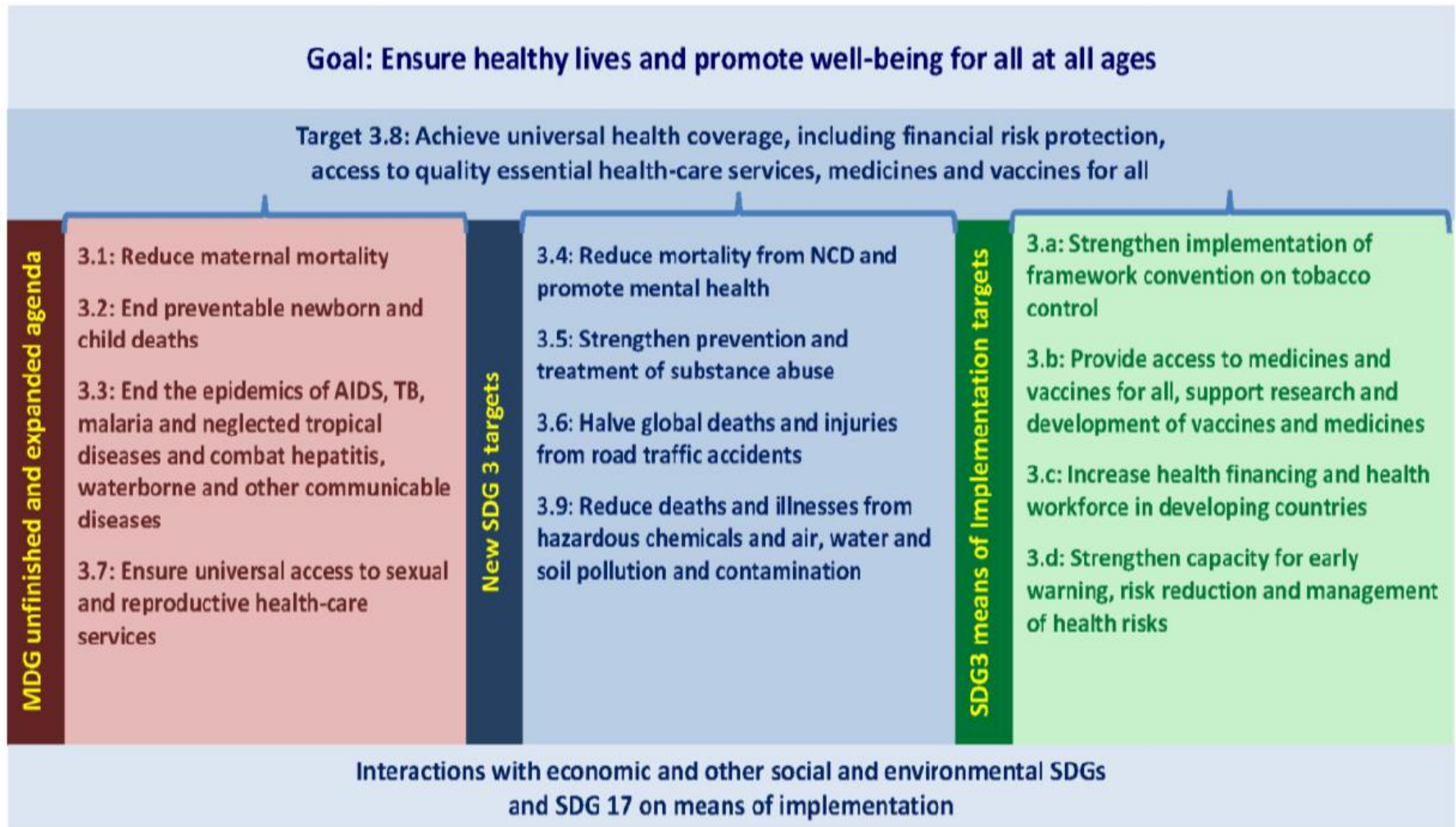


More than a continuation of the MDGs...

- SDGs...
 - are global in nature and universally applicable
(we are all developing)
 - are integrated and indivisible
 - have a strong focus on equity
(leaving no one behind)
 - are a national, regional and global responsibility
 - were created and agreed upon in a global process



Fig.1. A framework for the health Goal and targets in the 2030 Agenda for Sustainable Development

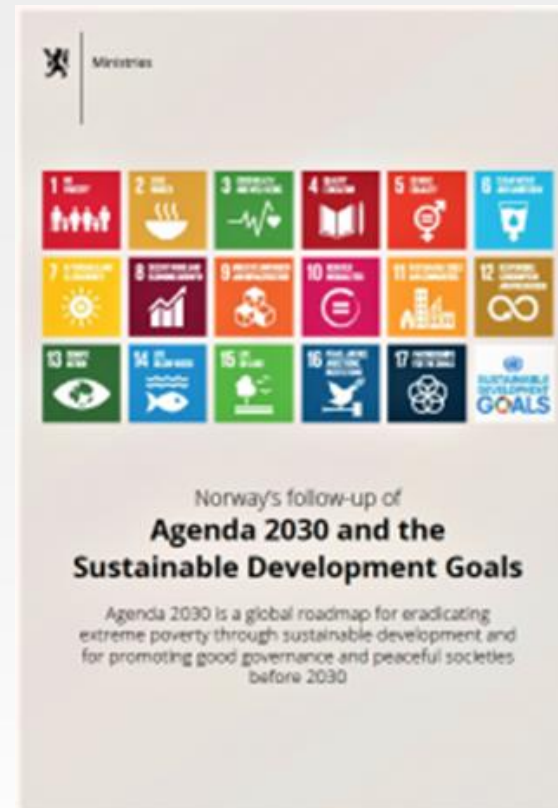
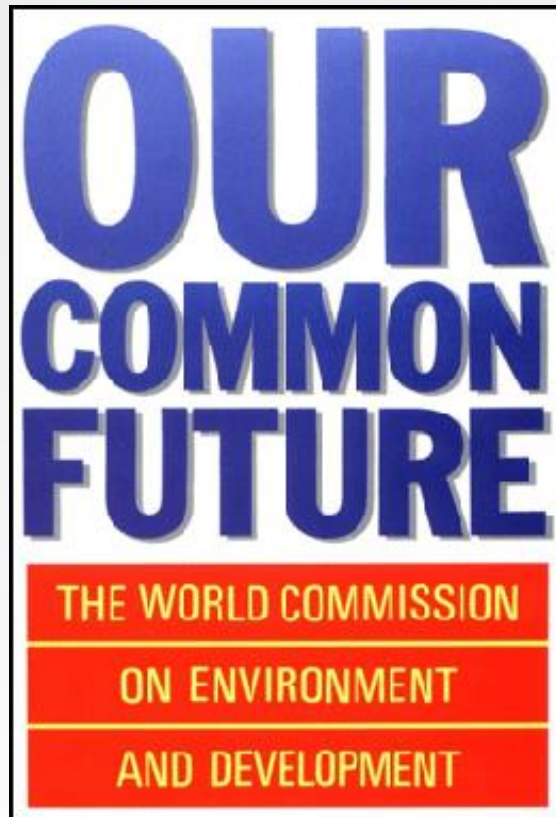


World Health Organization. (2015). *Health in the 2030 agenda for sustainable development*





Sustainable Development





(One) definition of health

Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity

(WHO, 1948)





The importance of health

- Health **instrumental** for achieving other goals
- Health is a **resource** for everyday life, not the objective for living
- Health a **means** of achieving a socially and economically productive life

"the extent to which an individual or group is able to realize aspirations and satisfy needs and to change or cope with the environment. Health is a resource for everyday life, not the objective of living; it is a positive concept, emphasizing social and personal resources, as well as physical capacities"

(WHO, 1984)





Health inequity

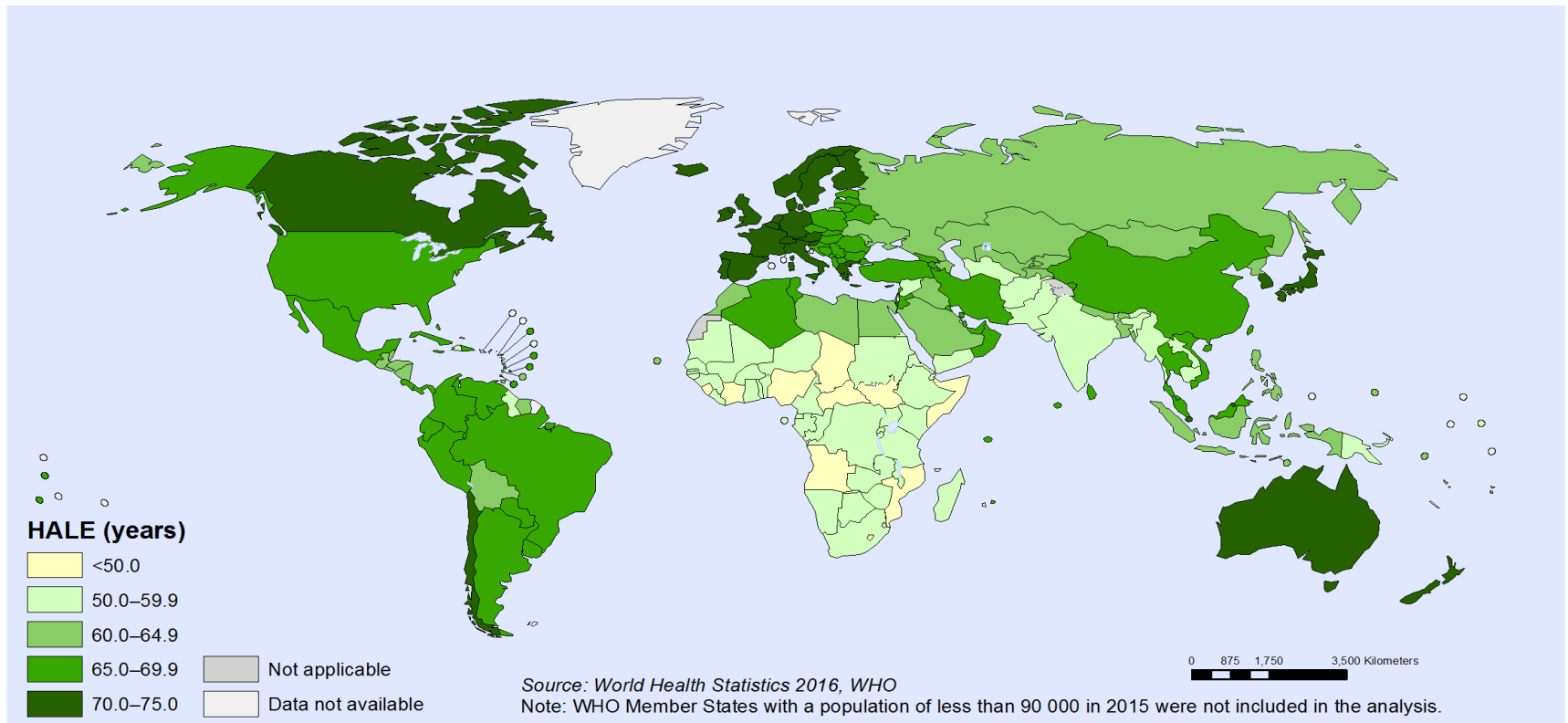
- **Health inequities** are differences in health status between population groups that are socially produced, systematic in their unequal distribution across the population, avoidable and unfair
- They come from the social conditions in which people are born, grow, live, work and age. Health inequities have significant social and economic costs both to individuals and societies and could be reduced by the right mix of government policies





Inequity: healthy life expectancy

Healthy life expectancy (HALE) at birth, both sexes, 2015



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

Data Source: World Health Organization
 Map Production: Information Evidence and Research (IER)
 World Health Organization



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”Inequalities in health between and within countries are avoidable. There is no necessary biological reason why life expectancy should be 48 years longer in Japan than in Sierra Leone (...) Reducing these social inequalities in health, and thus meeting human needs, is an issue of social justice”

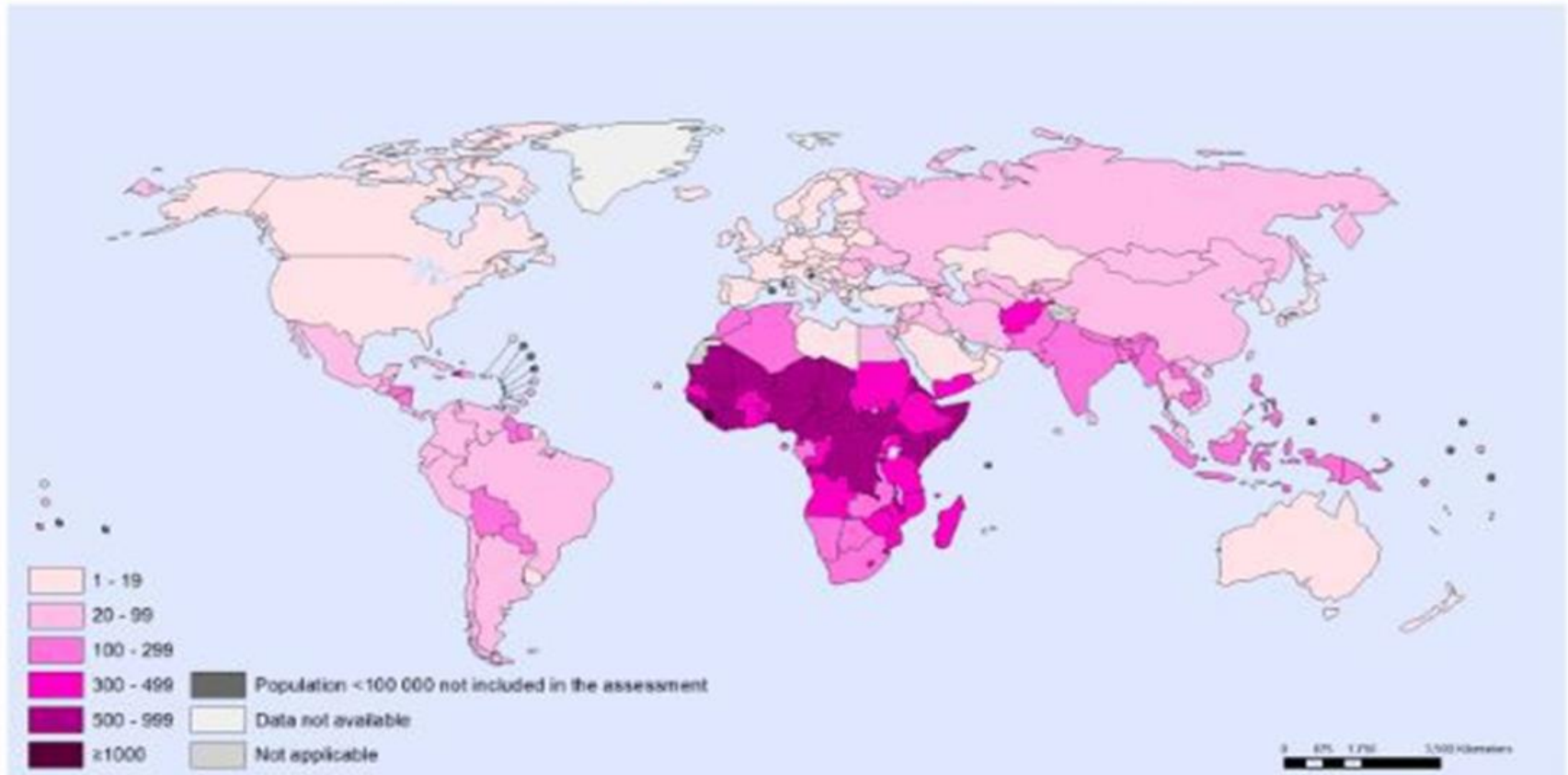
Marmot, M. (2005). Social determinants of health inequalities. *Lancet*, 365, 1103





Inequity: maternal mortality

Maternal mortality ratio (per 100 000 live births), 2015



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Data Source: World Health Organization
Map Production: Health Statistics and
Information Systems (HSIS)
World Health Organization



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Inequalities

- Sometimes used interchangeably with inequity, but they are conceptually different
- **Inequalities** in health status between individuals and populations are inevitable consequences of genetic differences, of different social and economic conditions, or a result of personal lifestyle choices





Equality and equity



EQUALITY



EQUITY

<http://jech.bmj.com/content/56/9/647>





Social justice

- Social justice refers to the equal rights and opportunities of members of society, particularly those members who are at a disadvantage due to societal factors beyond their control
- Social justice ethic is defined as collective action to distribute resources equitably to protect and restore health





Health as a human right

“The right to the highest attainable standard of health” including the availability of health services, safe working conditions, adequate housing and nutritious foods. Achieving the right to health is closely related to that of other human rights, including the right to food, housing, work, education, non-discrimination, access to information, and participation”

(WHO)





Human rights principles

- Non-discrimination
- Availability
- Accessibility
- Acceptability
- Quality
- Accountability
- Universality





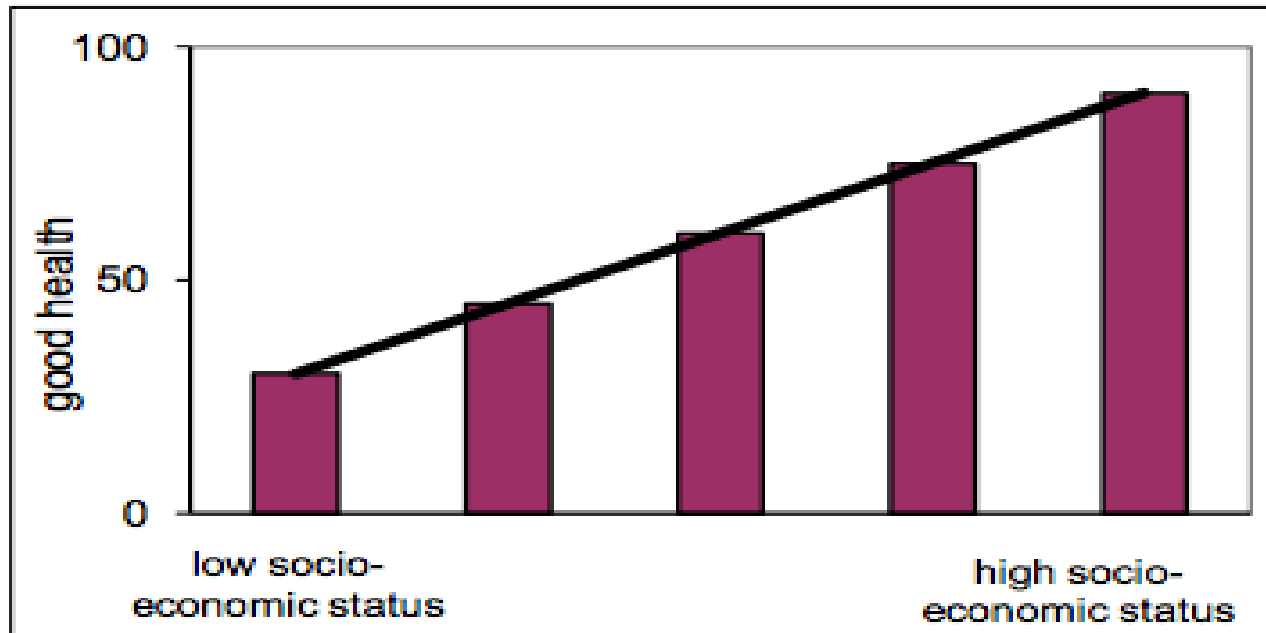
Responsible for rights?

- Primary responsibility for protecting health equity rests with government
- The realization of the human right to health implies the **empowerment** of deprived communities to exercise the greatest possible control over the factors that determine their health (WHO, 2010)





Social gradient in health



Social gradient in health

<https://www.physiospot.com/wp-content/uploads/2013/10/Screen-Shot-2013-10-20-at-10.57.27.png>





Social determinants of health

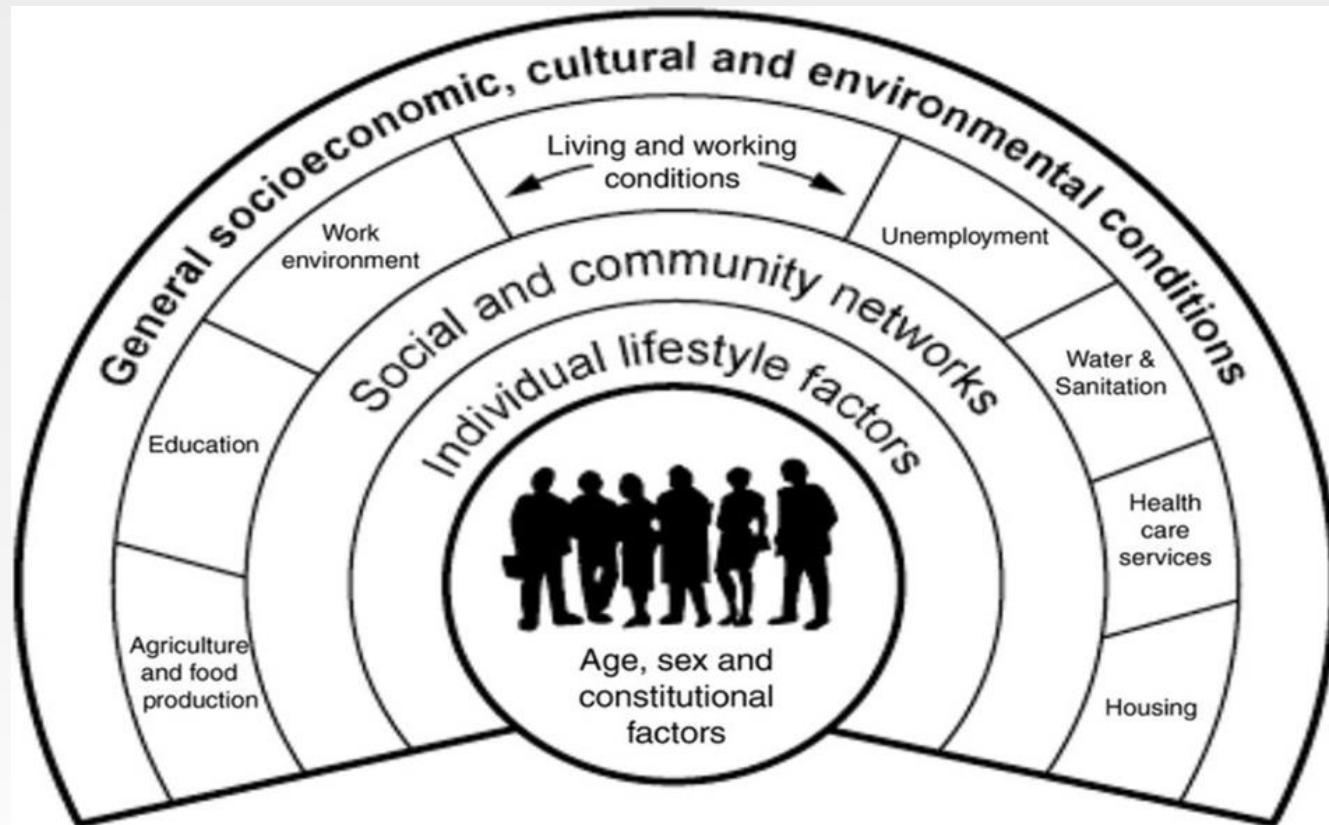
- The conditions in which people are born, grow, live, work and age, circumstances that are shaped by the distribution of power and resources and which are themselves influenced by policy choices

WHO (2008). Closing the gap in a generation. Commission on social determinants of health. Final report. Geneva: WHO.





Determinants of health



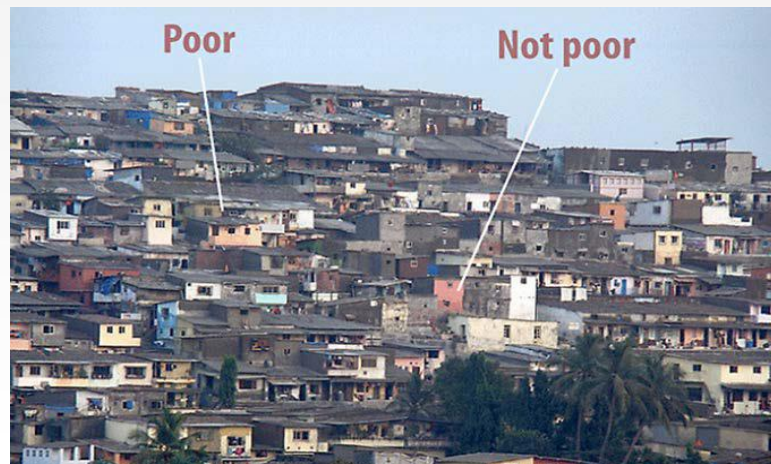
Dahlgren, G., & Whitehead, M. (1991). Policies and Strategies to Promote Social Equity in Health. Stockholm: Institute for Future Studies.





Example: poverty

- Different definitions of poverty:
 - Absolute poverty is the inability of people to provide for the basic necessities of life (<\$1.90/ZAR 25 day)
 - Relative poverty (lack the means to participate fully in society – normative standards)





Example: poverty cont.

- Poverty as lack of **capabilities** (Amartya Sen), not just income-based – include aspects like literacy, life expectancy, aspirations and agency, education
- Inequalities accumulate over a lifetime





The Commission's overarching recommendations

1. Improve daily living conditions
2. Tackle the inequitable distribution of power, money and resources
3. Measure and understand the problem and assess the impact of action

To achieve this: build a global movement





Hans Rosling: global health and income

<https://www.youtube.com/watch?v=jbkSRLYSojo>

<https://www.gapminder.org/>





Prospects for health and equity?

- MDG effect often exaggerated
 - Halving of poverty (China)
 - Growing inequalities (the richest get ahead)
 - Low-hanging fruits
- Inequality of what?
 - Opportunities or outcomes?
 - Focus on distribution hampered by extreme wealth disparities and self-interested regimes

Watkins, K. (2014). Leaving no one behind: an agenda for equity. *The Lancet*, 384, 2248-2255.





Indicators

- The purpose of indicators is to capture key aspects of an intervention and its effects
 - **S**pecific
 - **M**easurable
 - **A**ppropriate
 - **R**elevant
 - **T**ime related
- Governments' will, implementation of effective and equitable policies, and accountability





«Recall the face of the poorest and weakest person you may have seen and ask yourself if the step you contemplate is going to be of any use to them»

Mahatma Gandhi





Can you think of a group of people in your home country that experiences worse health and well-being than others in the country?

- What are the causes of their health situation?
- Talk about this situation in terms of inequality, inequity, social justice, human rights
- How can the SDGs improve the situation?





Recommended readings

Commission on Social Determinants of Health. (2008). Closing the gap in a generation: health equity through action on the social determinants of health: final report of the commission on social determinants of health. Geneva: World Health Organization. Retrieved from: http://www.who.int/social_determinants/thecommission/finalreport/en/

Samdal, O., & Wold, B. (2012). Introduction to health promotion. In B. Wold & O. Samdal (Eds.), *An ecological perspective on health promotion: systems, settings and social processes* (pp. 3-10). Sharjah, UAE: Bentham Books.

United Nations (2015). *Transforming our World: The 2030 Agenda for Sustainable Development*. Retrieved from: <https://sustainabledevelopment.un.org/post2015/transformingourworld/publication>

Viner, R. M., Ozer, E. M., Denny, S., Marmot, M., Resnick, M., Fatusi, A., & Currie, C. (2012). Adolescence and the social determinants of health. *The Lancet*, 379(9826), 1641-1652.

Watkins, K. (2014). Leaving no one behind: an agenda for equity. *The Lancet*, 384, 2248-2255.

World Health Organization. (2015). *Health in the 2030 agenda for sustainable development*. Geneva: Executive Board report EB138/14.







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