



TUMS' Talk

پیام دارالفنون



دانشگاه علوم پزشکی
و خدمات بهداشتی درمانی تهران



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مرکز تحقیقات عدالت در سلامت
Health Equity Research Center



I H S R

رؤیگر علوم بهداشتی جهاد دانشگاهی
"مرکز تحقیقات سنجش سلامت"

SDH HERC Talk

السلامة للجميع



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ژوئیه ۱۳۹۸
مرکز تحقیقات سنجش سلامت



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Toxic Combination

Ali Montazeri



مرکز تحقیقات عدالت و سلامت
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انستیتوی تحقیقات خدمات بهداشتی
و خدمات بهداشتی درمانی تهران



مؤلفه های اجتماعی سلامت

مؤلف: علی منتظری
مترجم: پروفسور دکتر علی منتظری

ترجمه: دکتر علی منتظری
پژوهشگاه علوم بهداشتی، دانشگاه تهران

Acknowledgment

- CSD (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

Determinates of Health

- 1. Biological factors
- 2. Lifestyle
- 3. Environment
- 4. Social and economic factors (social determinants of health)
- 5. Use and access to health services



Social determinates of health

- The social determinants of health (SDH) are the non-medical factors that influence health outcomes. They 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.
- https://www.who.int/health-topics/social-determinants-of-health#tab=tab_1



The role of social determinates of health

- A study cited by the National Academy of Medicine found that medical care itself only accounted for 10–20% of the contributors to people’s health outcomes.
- By contrast, the many social determinants of health play a much bigger role in influencing a person’s health, making up 80–90% of the contributing factors.

<https://nam.edu/social-determinants-of-health-101-for-health-care-five-plus-five/>



The cause

- 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.



Is not natural

- Unequal distribution of health-damaging experiences is not in any sense a ‘**natural**’ phenomenon but is the result of a **toxic combination** that constitute the social determinants of health and are responsible for a major part of health inequities between and within countries.

Toxic combination

1. Poor social policies and programmes,
2. Unfair economic arrangements,
3. Bad politics,
4. The structural determinants, and
5. Conditions of daily life



Two Key Determinants

- Daily living conditions.
- Inequitable distribution of power, money, and resources.



Daily Living Conditions

- Equity from the Start
- Healthy Places, Healthy People
- Fair Employment and Decent Work
- Social Protection Across the Life course
- Universal Health Care



Inequitable distribution of power, money, and resources

- Health Equity in All Policies, Systems, and Programmes
- Fair Financing
- Market Responsibility
- Gender Equity
- Political Empowerment – Inclusion And Voice
- Good Global Governance



Three principles of action

- 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

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