



UCL Institute of Health Equity



Health Equity Global and National

Michael Marmot

European Health Forum

Bad Hofgastein

October 2017

@MichaelMarmot

Commission on Equity and Health Inequalities in the Americas

Gender

Ethnicity

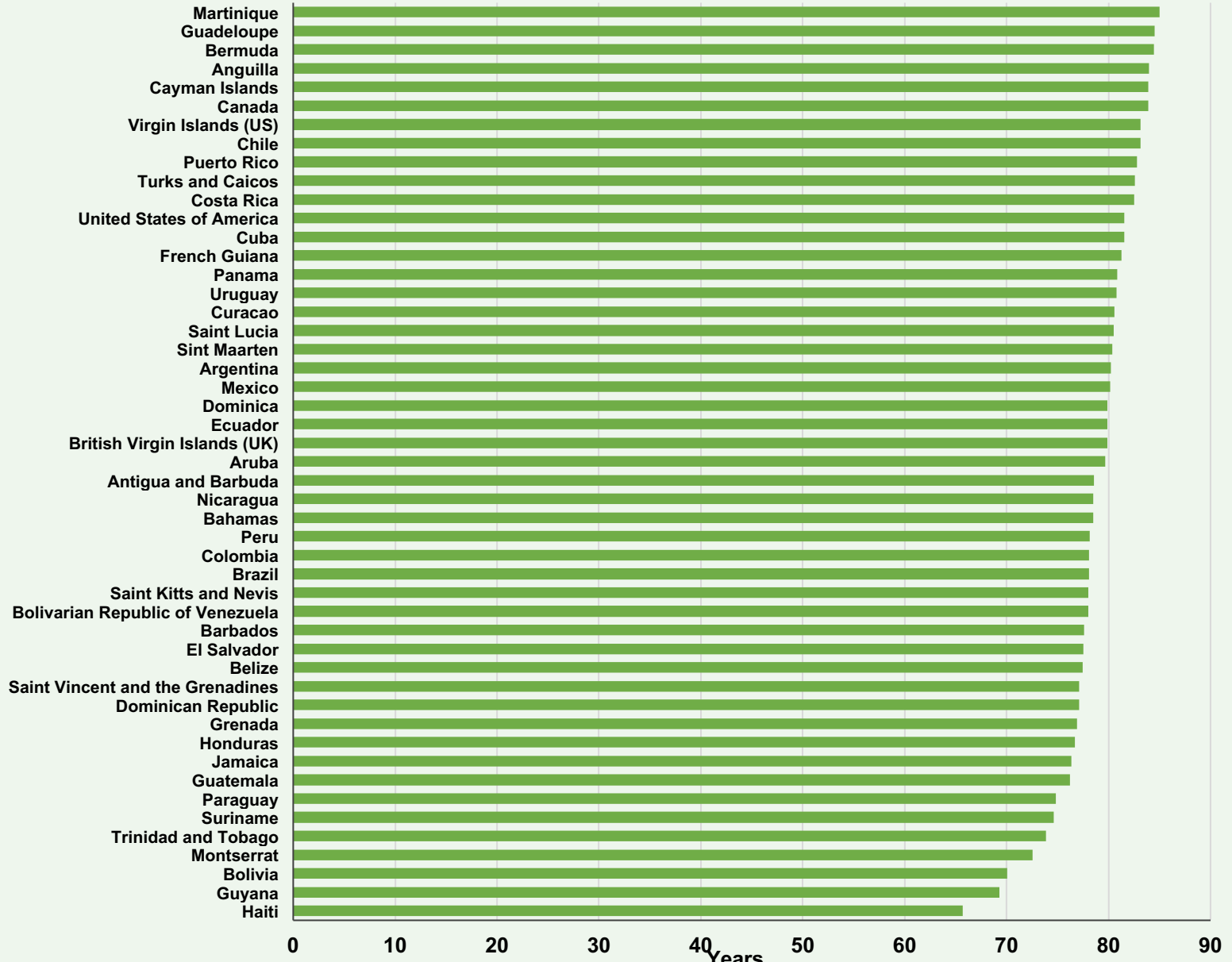
Social, economic, environmental, political and
cultural arrangements

Human Rights

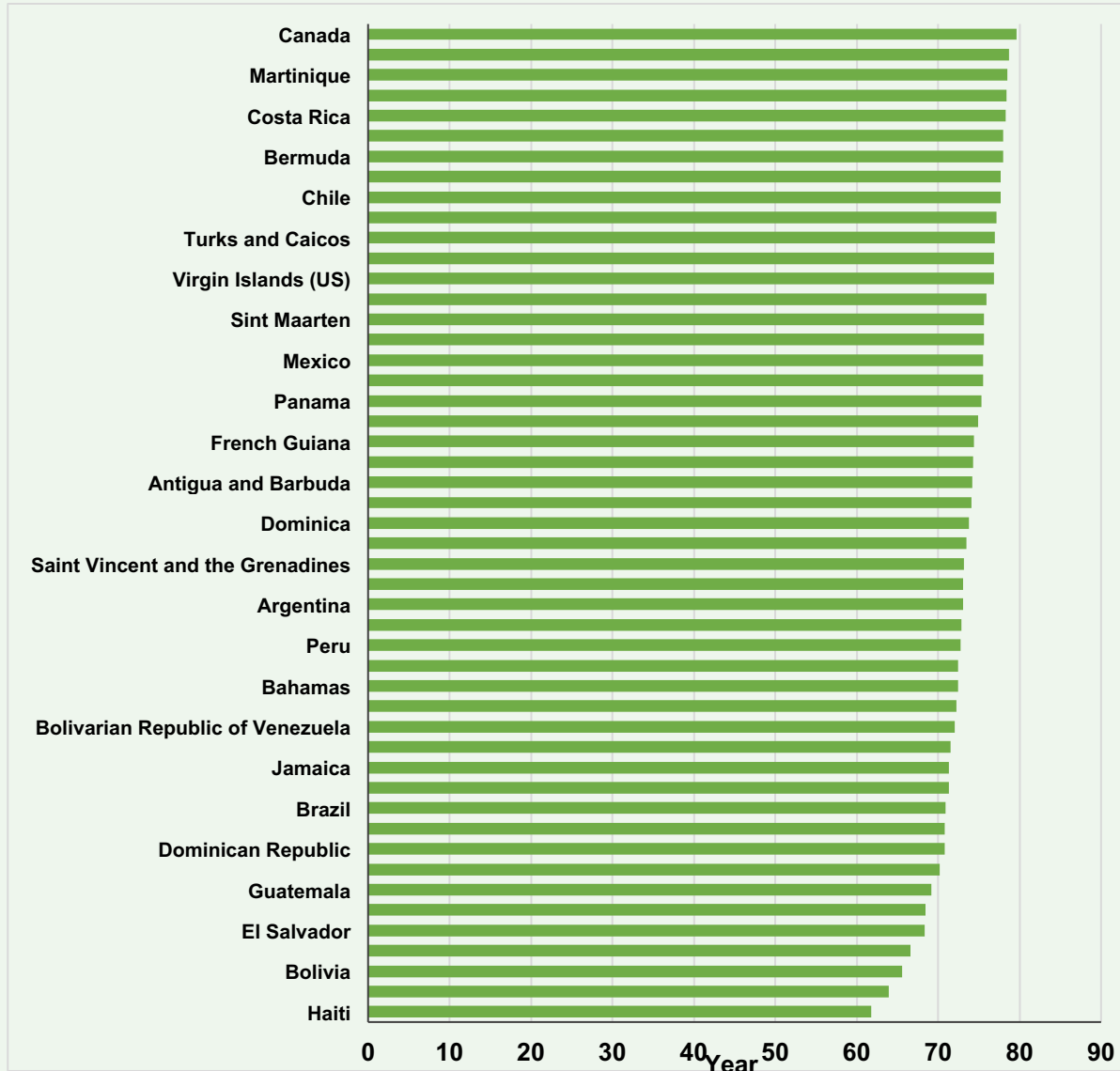
Sustainable Development Goals



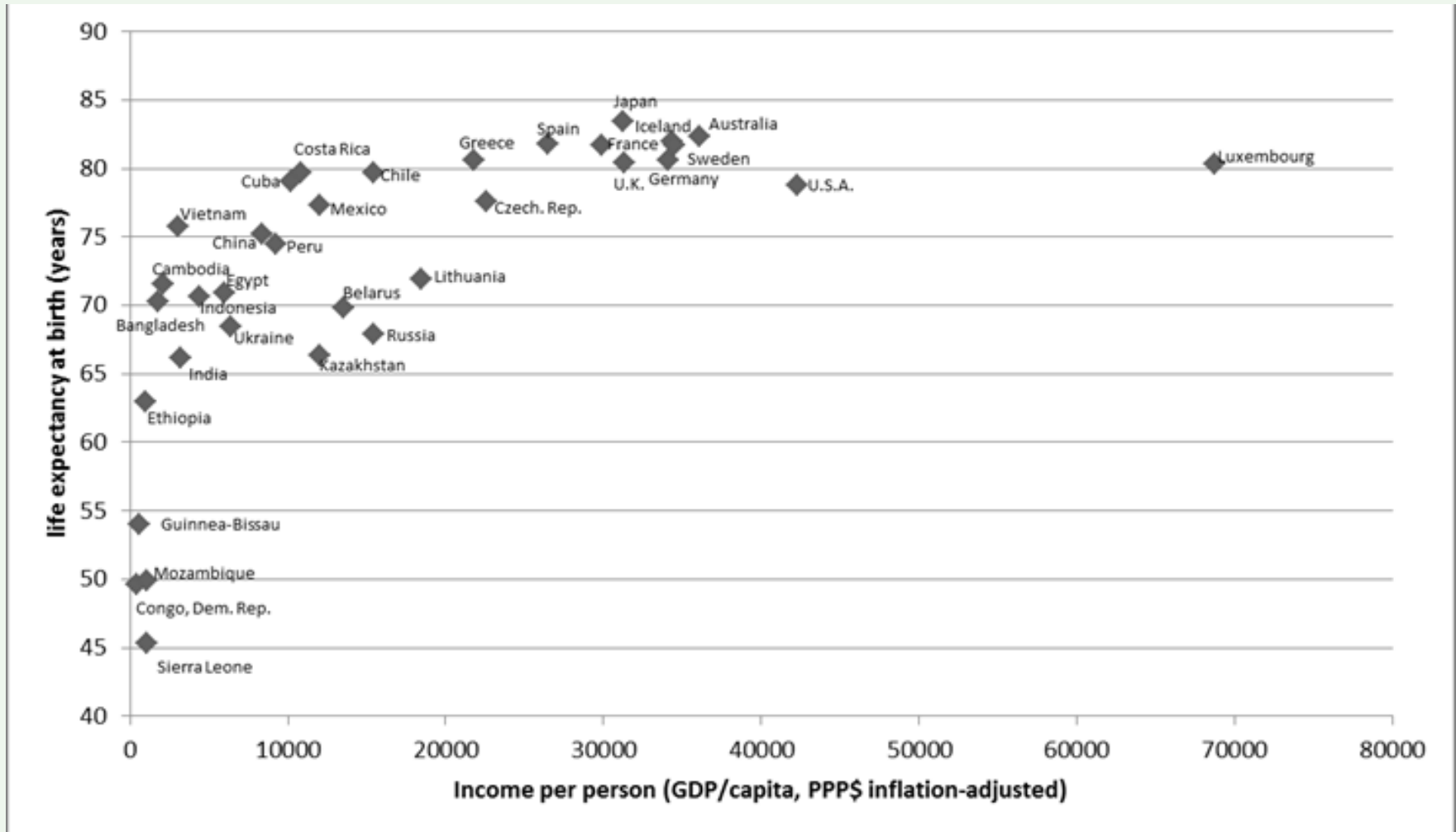
Life expectancy at birth 2014 Females range 66 to 85



Life expectancy at birth 2014 males 62 to 80 y

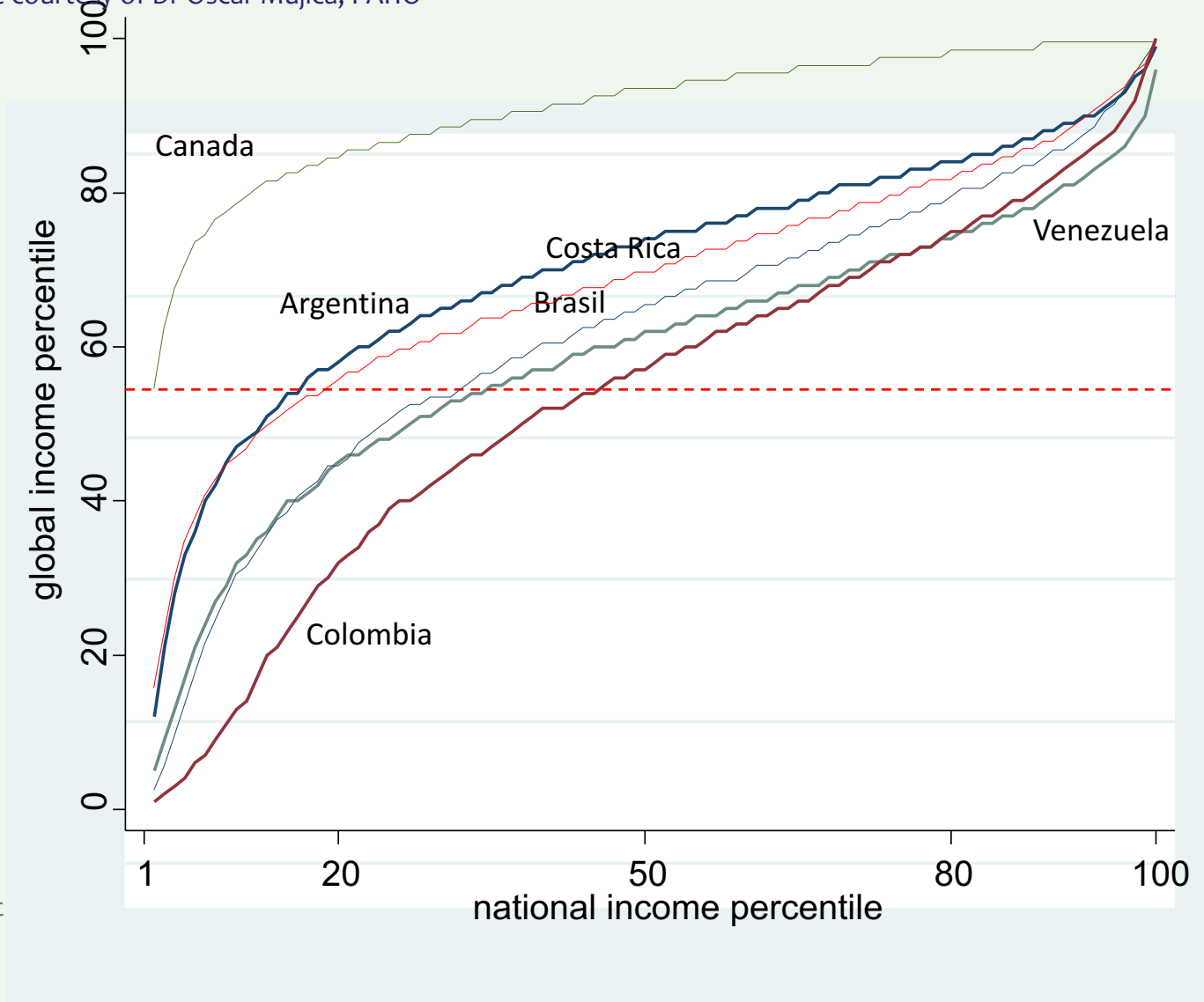


The relationship between wealth and health, 2012



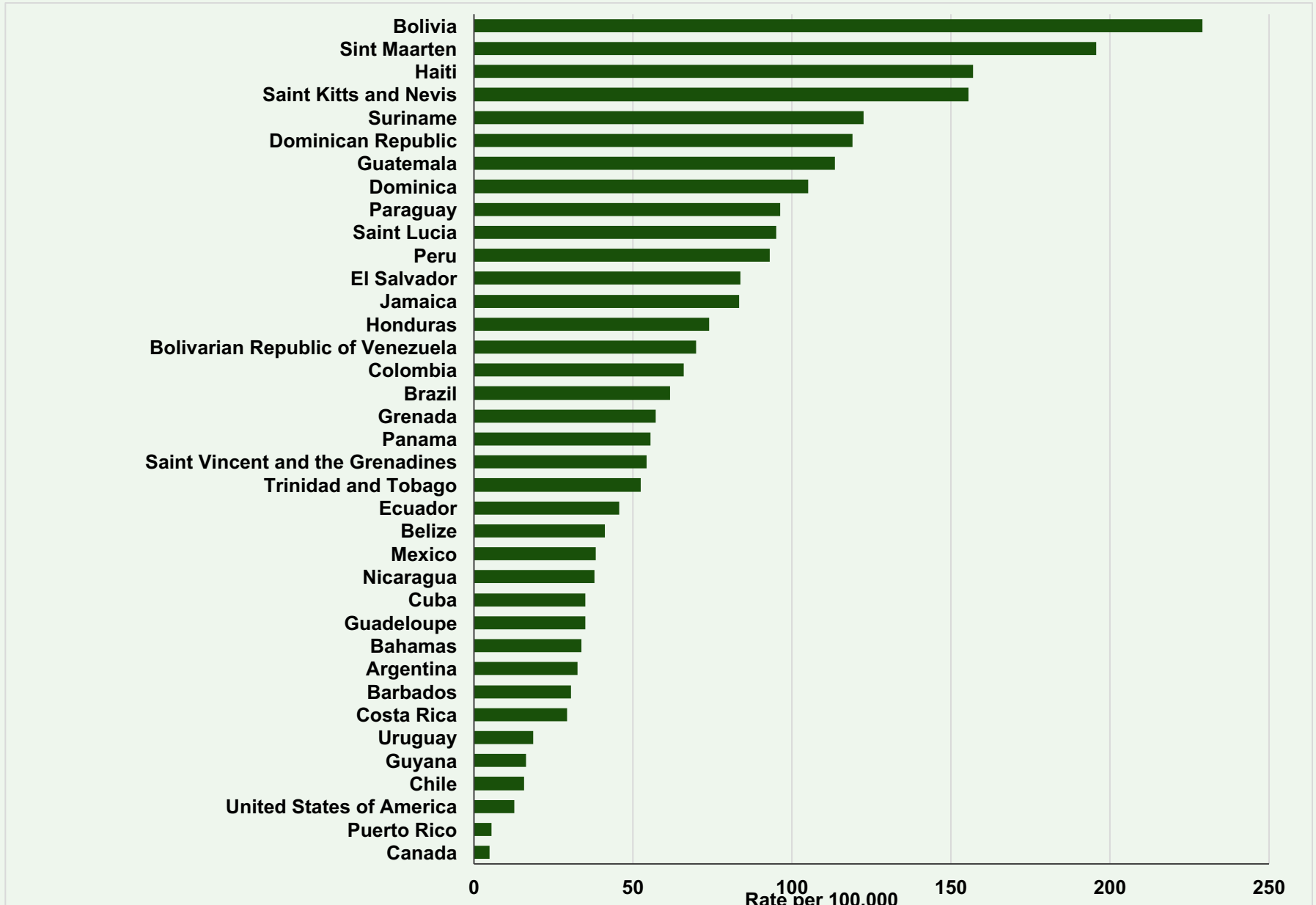


Slide courtesy of Dr Oscar Mujica, PAHO



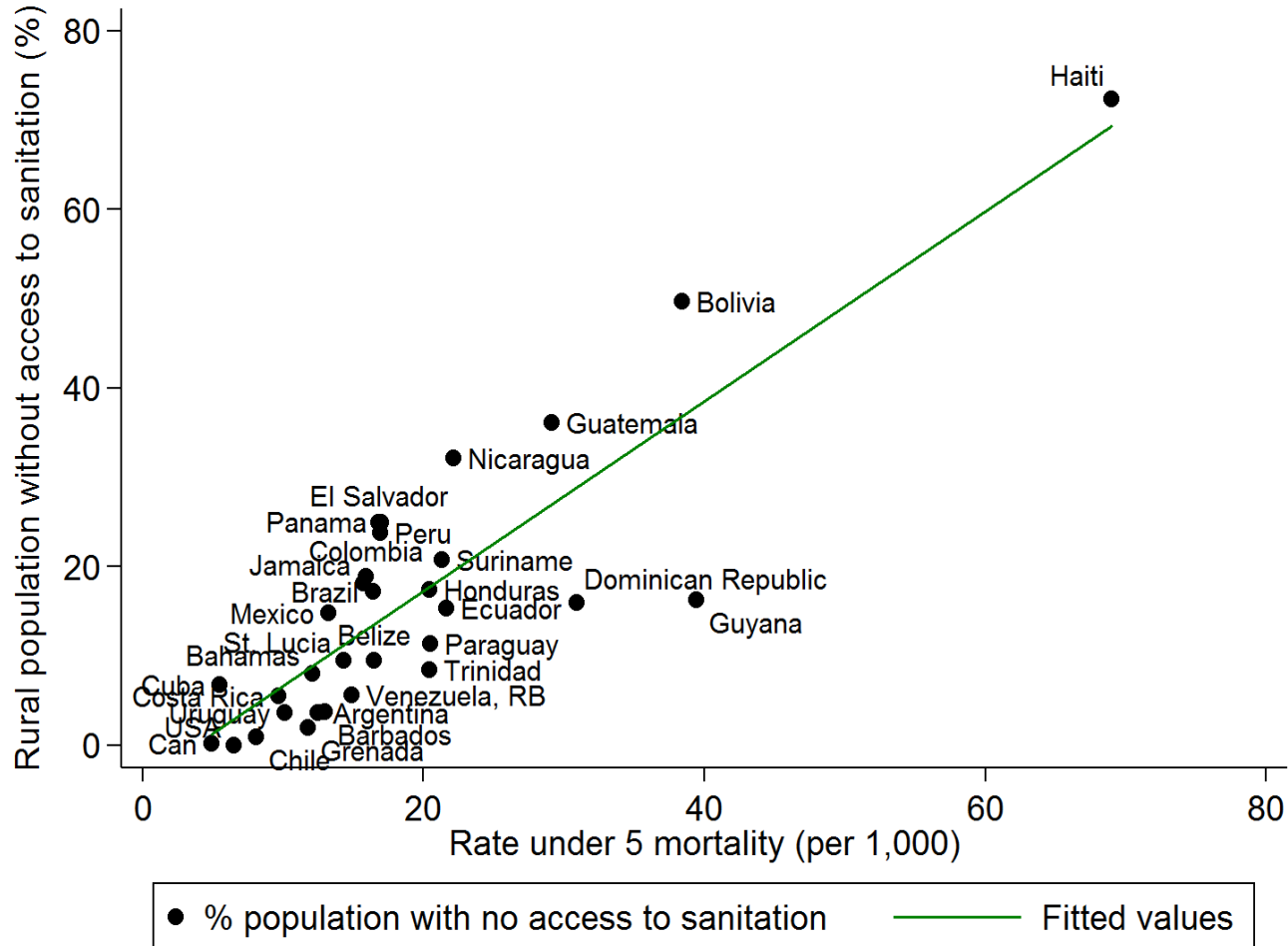


Maternal Mortality Rates





% of rural population without access to sanitation and u5 mortality rate, 2015

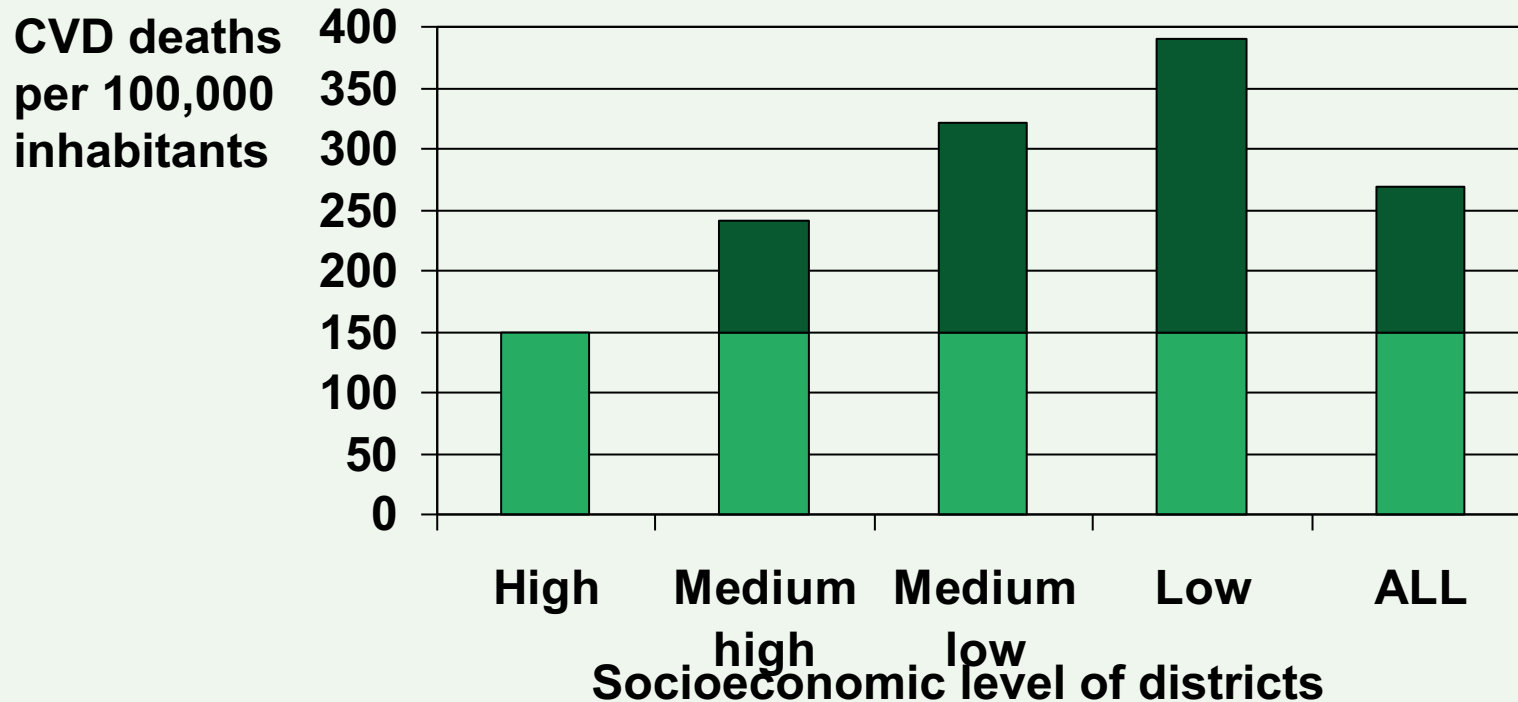


Cardiovascular deaths of people aged 45 - 64 and social inequalities: Porto Alegre, Brazil

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■ CVD deaths ■ Attributable CVD deaths



45% all premature CVD deaths in Porto Alegre caused by socioeconomic inequality

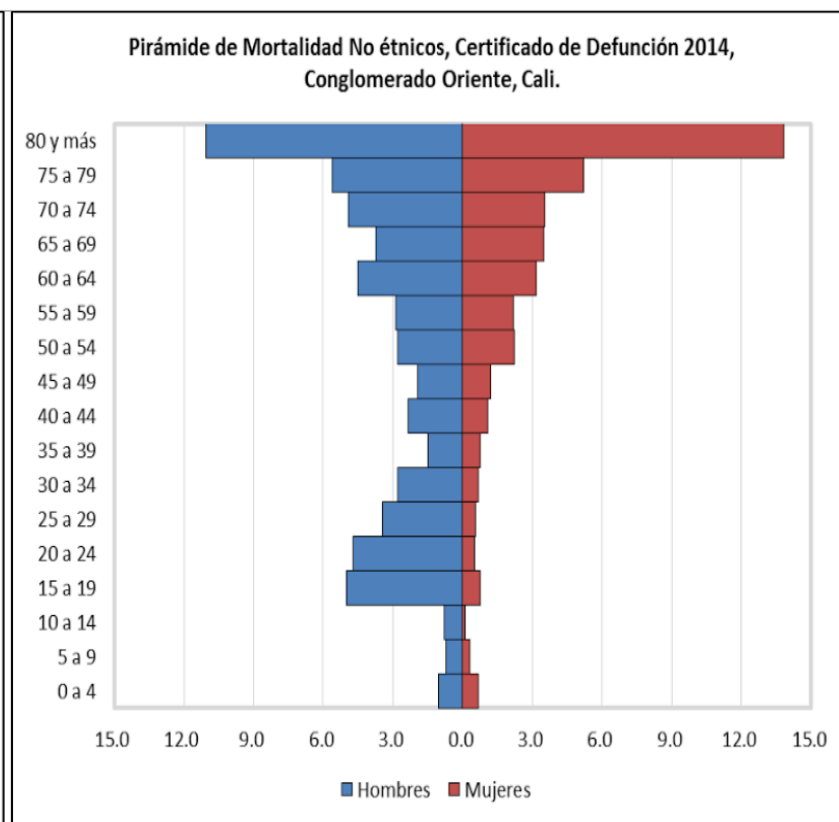
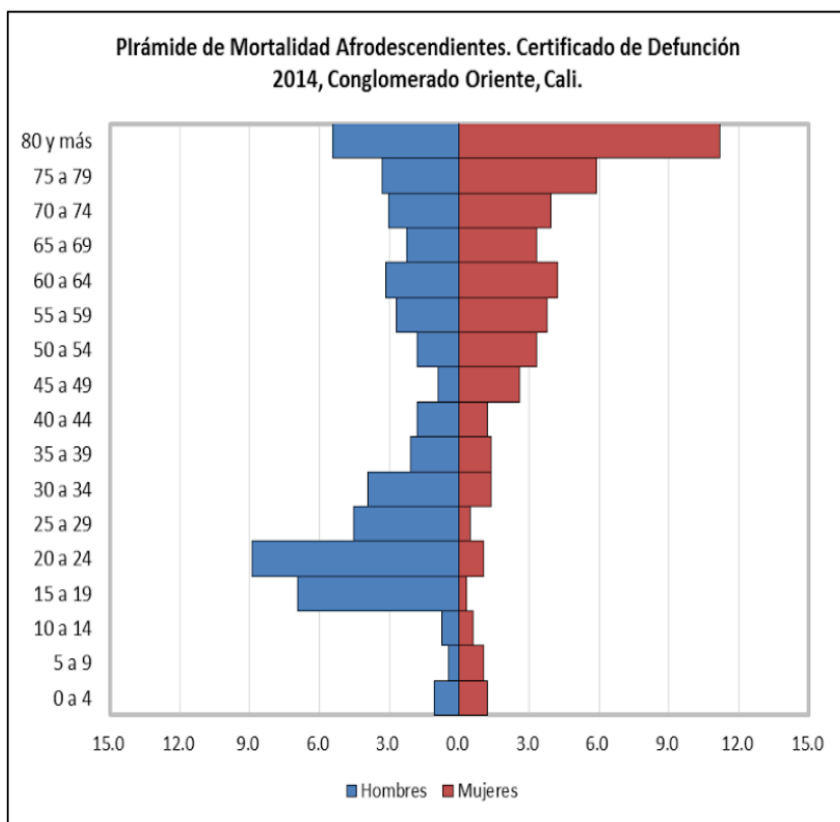
Premature mortality by CVD 2.6 times higher in lowest compared to highest districts by socioeconomic level

(Source: Bassanesi, Azambuja & Achutti, Arq Bras Cardiol, 2008)

Mortality in Cali: Afro- (L) and Blanca-mestiza (R)

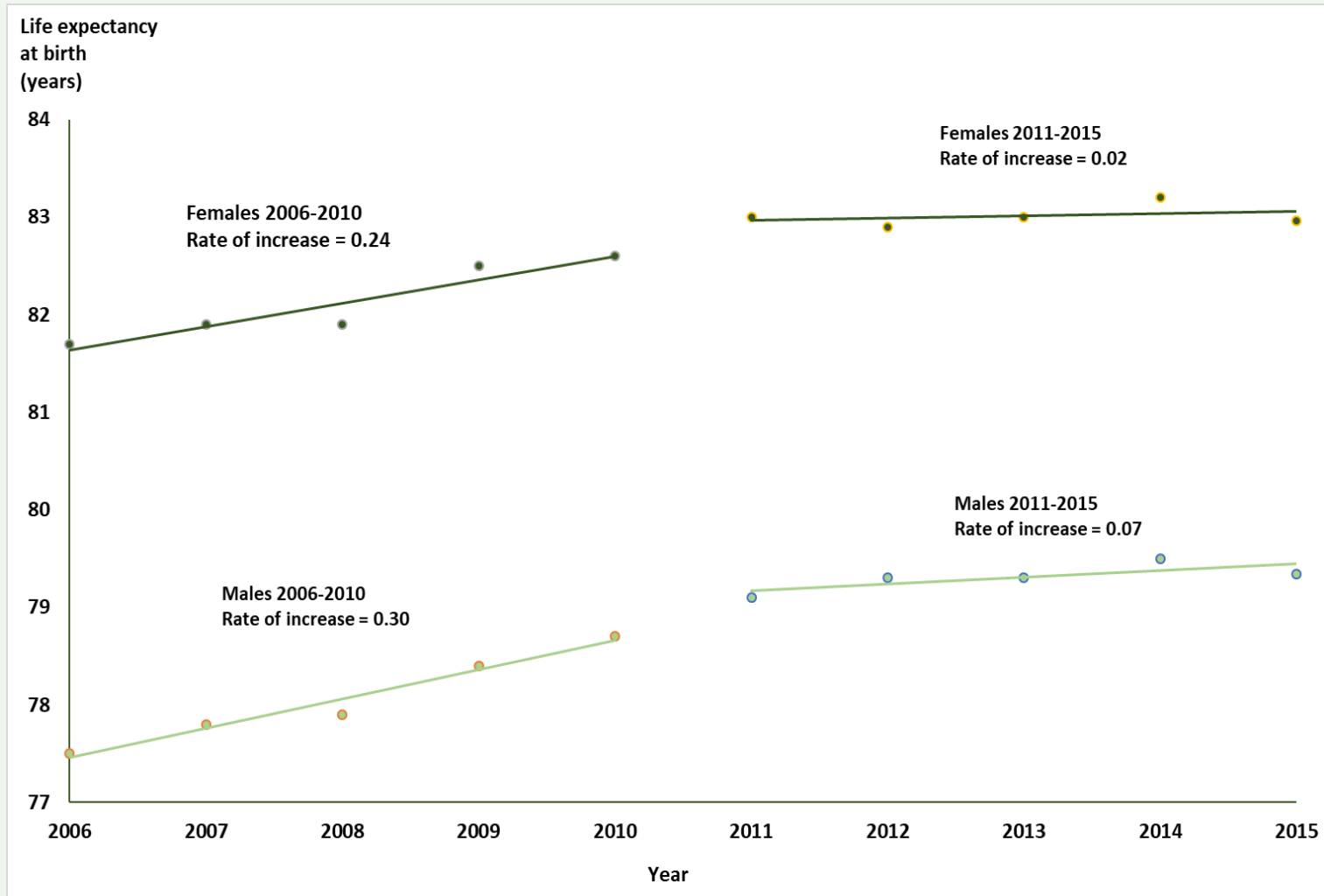
Slide courtesy of Dr Pastor Murillo, commissioner

Pirámides de mortalidad por grupos étnicos, Certificado de Defunción 2014, Conglomerado Oriente Cali

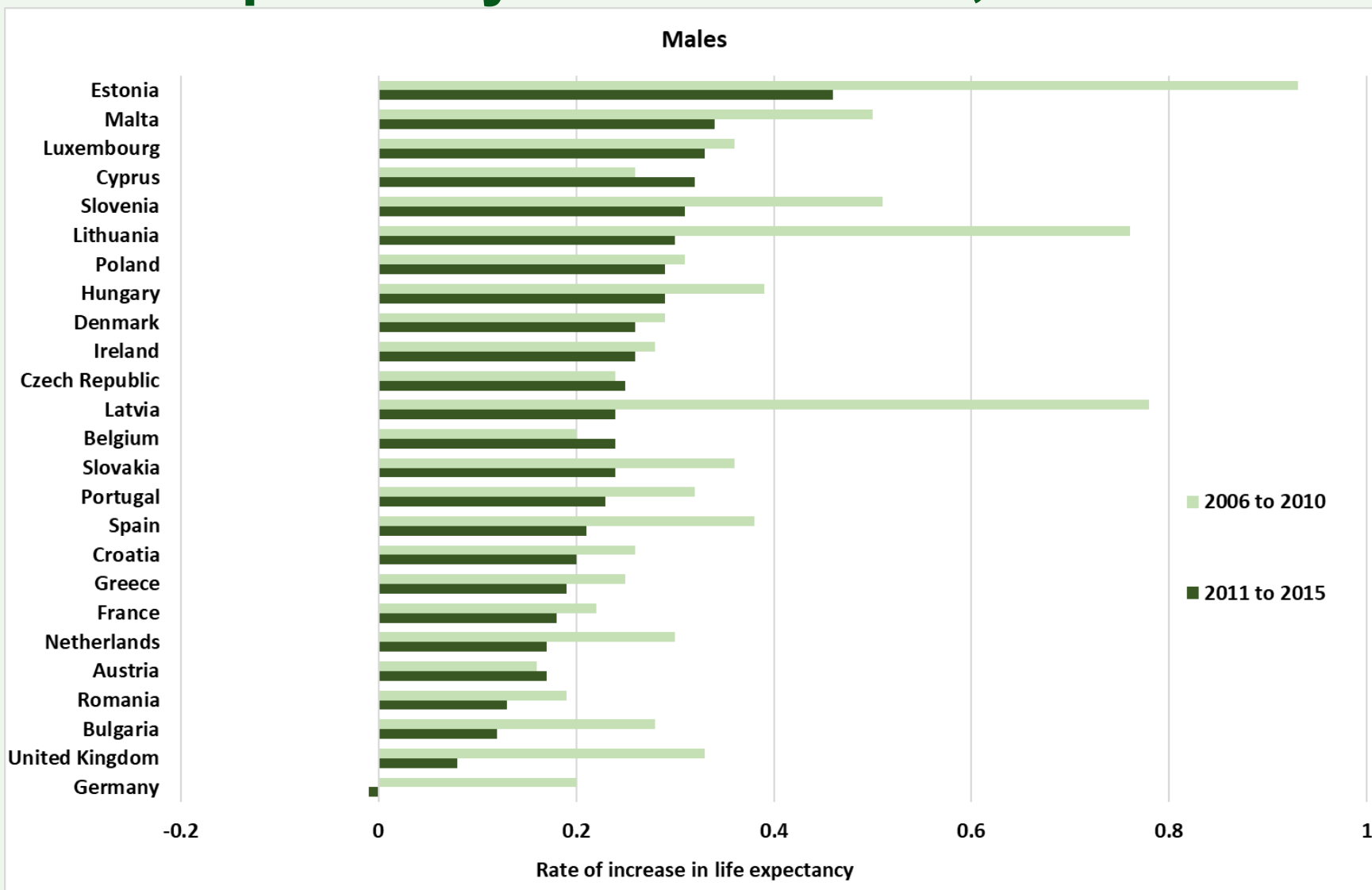


Fuente: Urrea, F. et al (2015). "Patrones de mortalidad comparativos entre la población afrodescendiente y la blanca-mestiza para Cali y el Valle". En: CS 16, págs. 135-171.

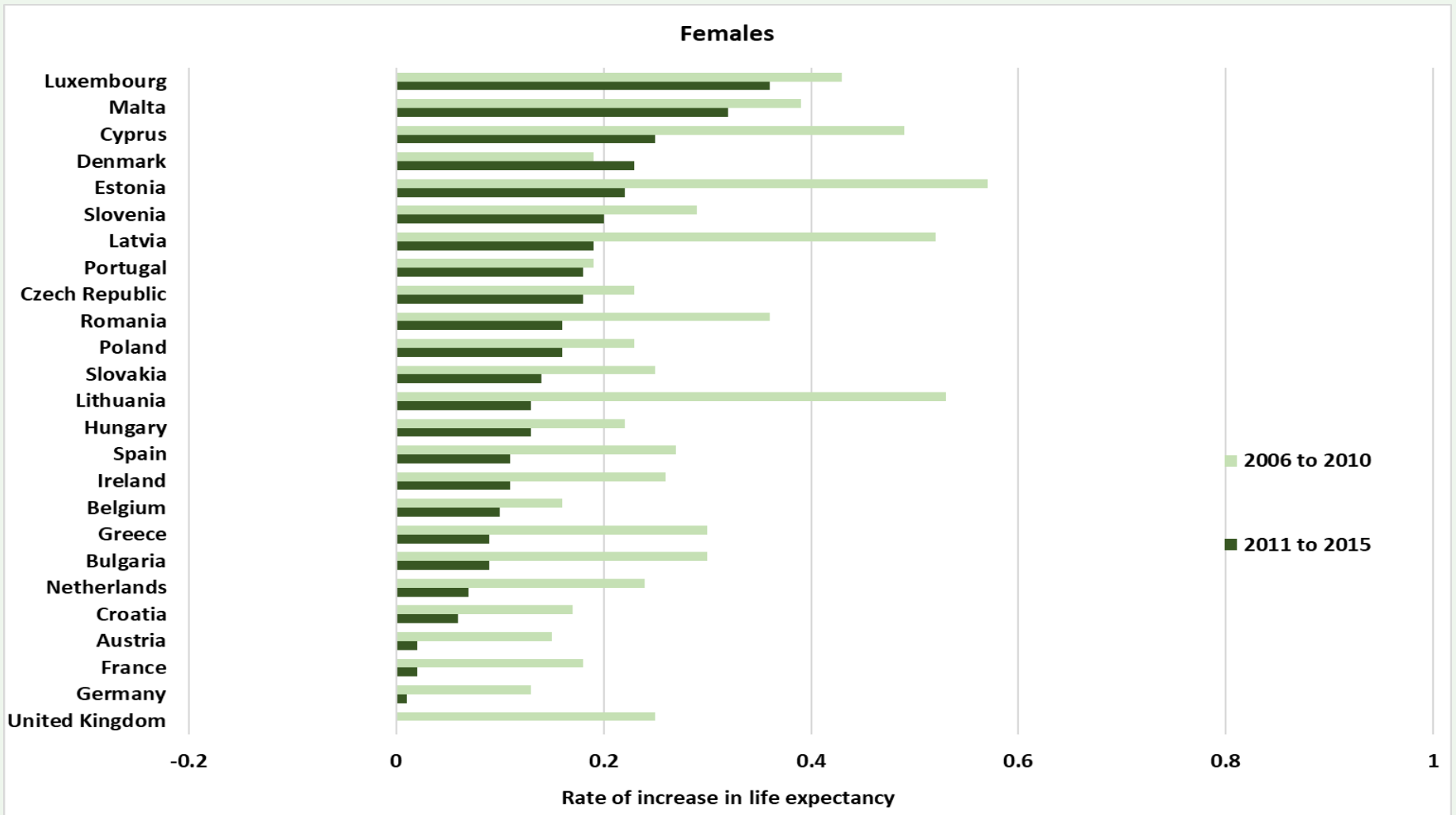
Life expectancy England 2006-2015



Life Expectancy increase 2006-, 2011-2015



Life expectancy increase 2006-, 2011-2015



Can strategies to reduce health inequalities work?

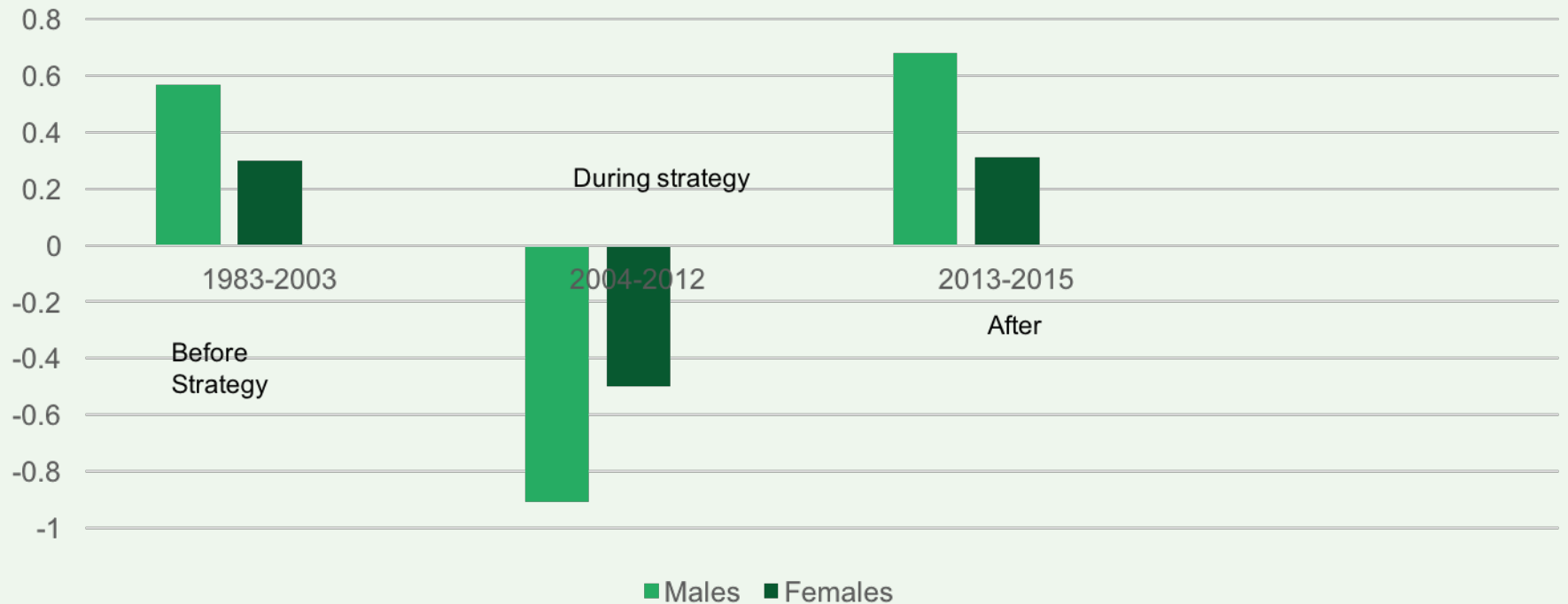
New Labour did have a strategy

Any evidence?

Trends in life expectancy gap between most deprived areas and the average

Annual difference in months

England



Fair Society, Healthy Lives: 6 Policy Objectives

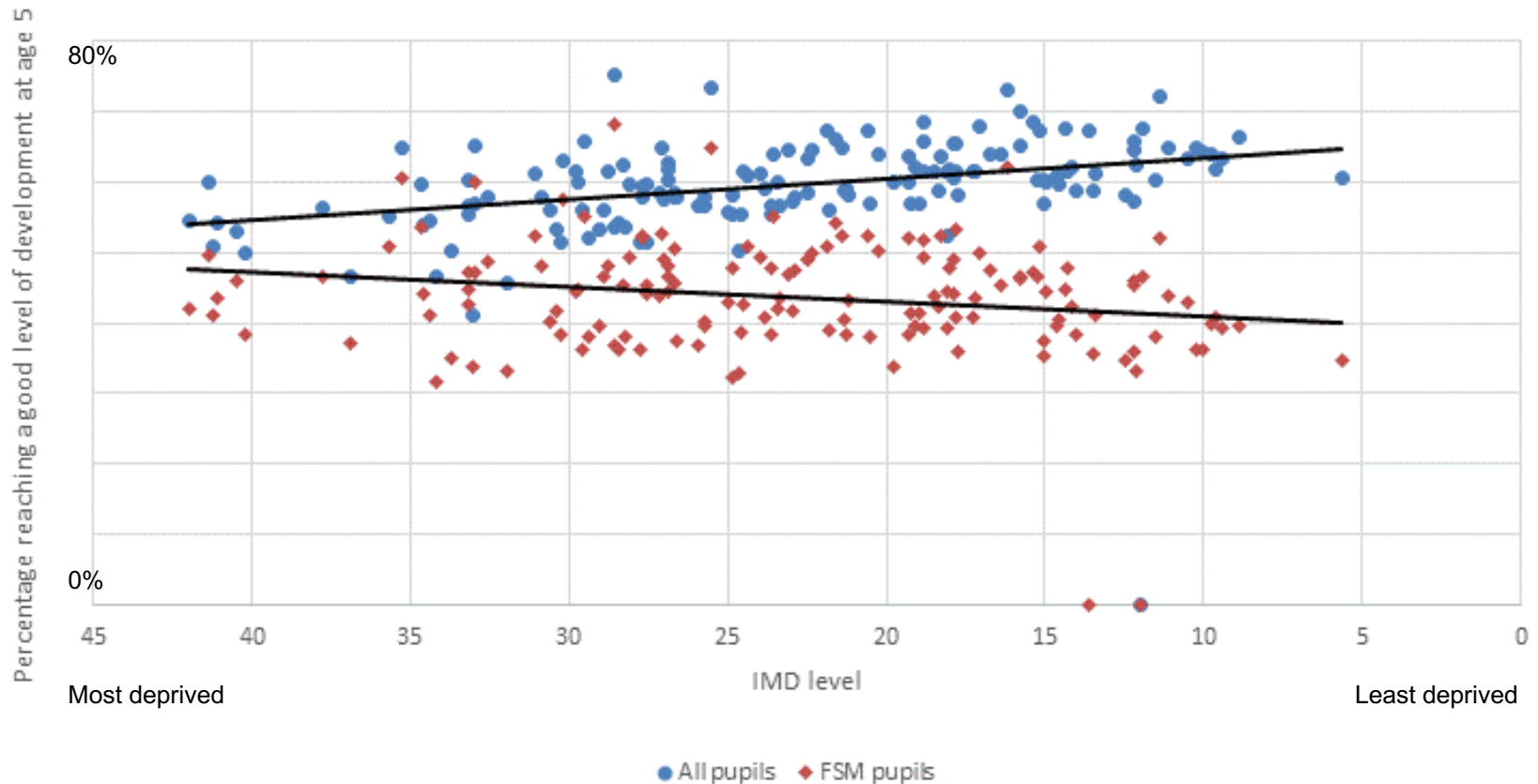
- A. Give every child the best start in life**
- B. Enable all children, young people and adults to maximise their capabilities and have control over their lives**
- C. Create fair employment and good work for all**
- D. Ensure healthy standard of living for all**
- E. Create and develop healthy and sustainable places and communities**
- F. Strengthen the role and impact of ill health prevention**





Level of development at end of reception

The percentage of children achieving a good level of development at the end of reception 2013/14, IMD 2015



Level of development at end of reception

England and selected local authority areas	Level of development at age 5, 2013/14		
	All pupils (%)	FSM pupils (%)	Gap between all and FSM pupils (percentage point)
England	60.4	44.8	15.6
Hackney	64.9	60.7	4.2
Bath and North East Somerset	62.5	33	29.5

Figure 18: Proportion of children below MIS by family type

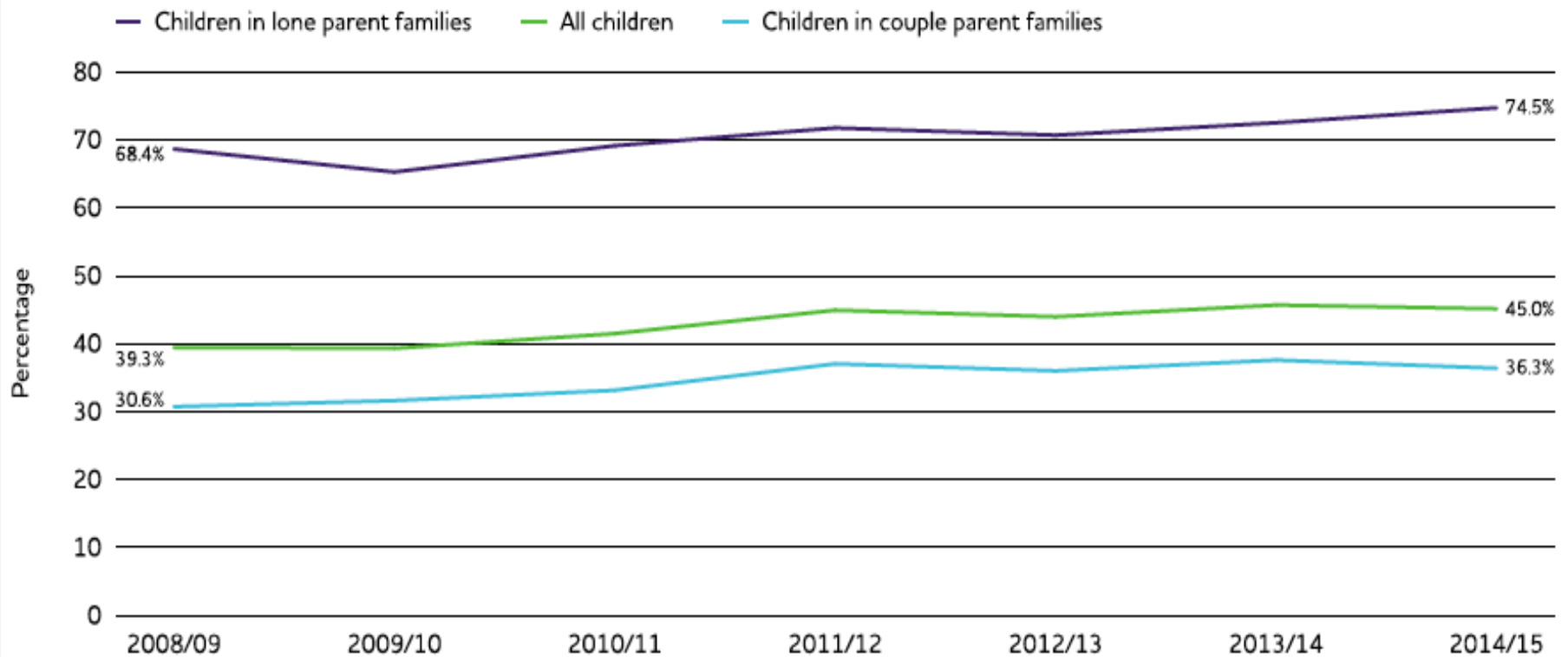
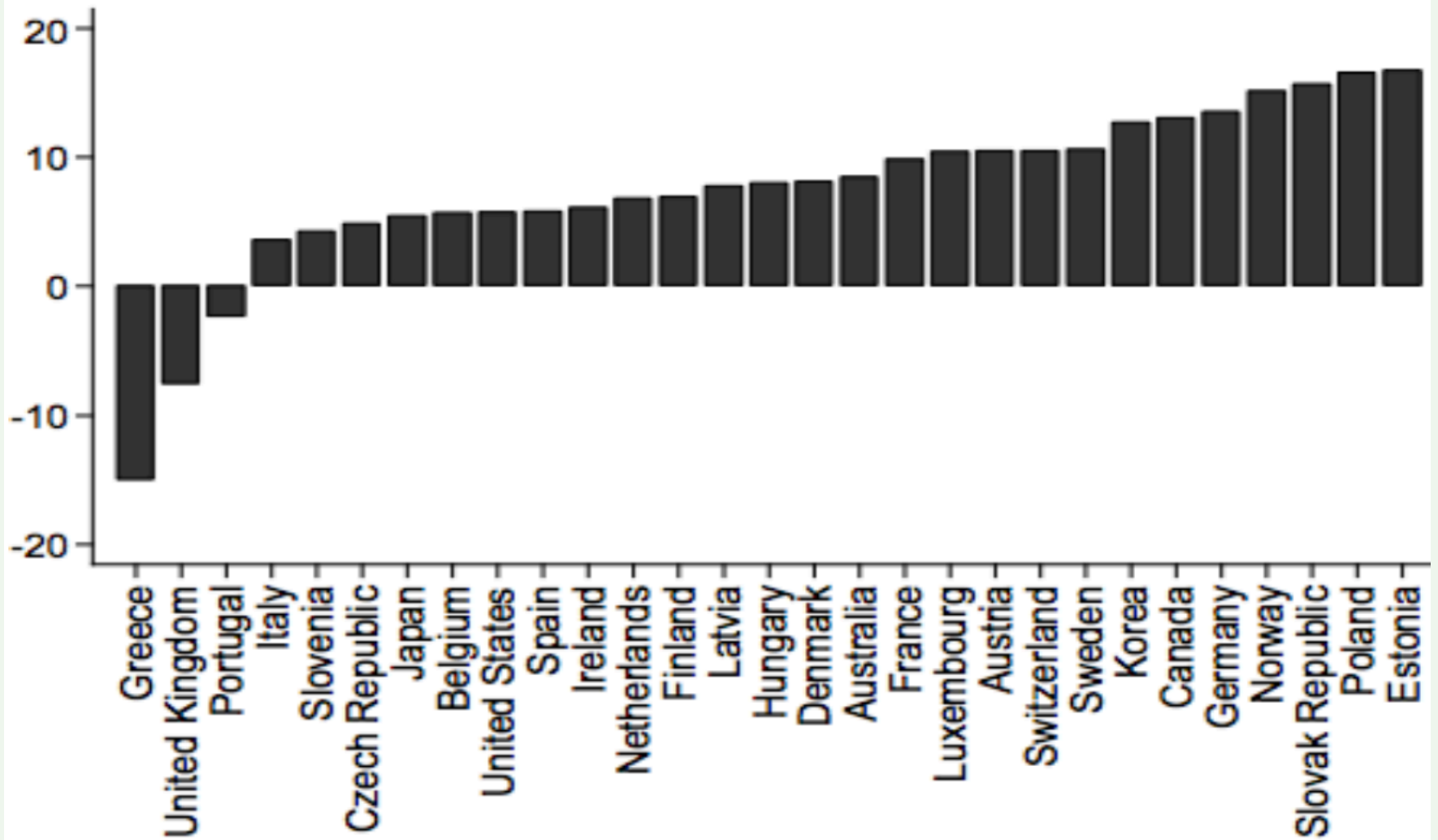
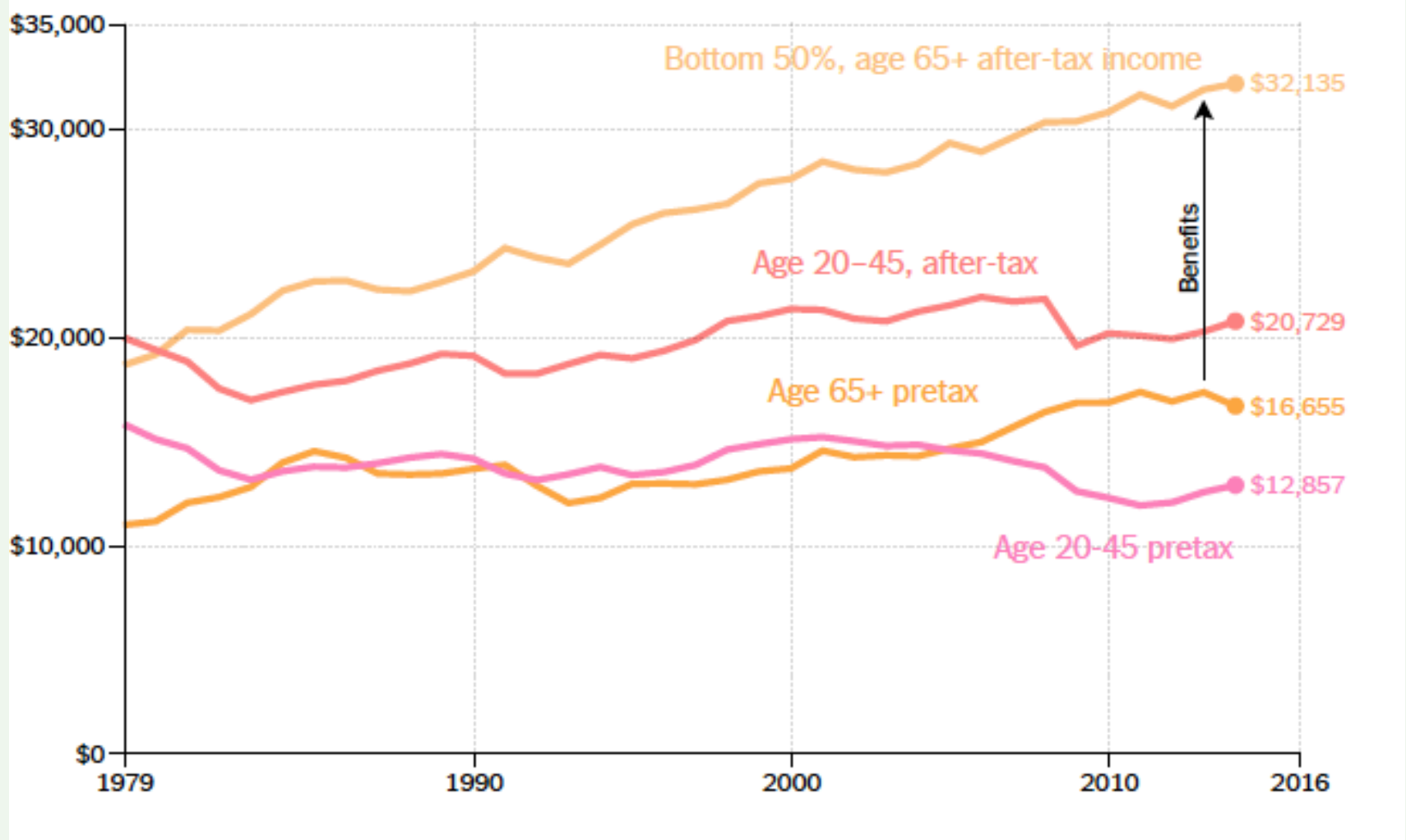




Figure 5: International average real wage growth, 2007-15



In the US, trickle down didn't work to increase low income, but tax and benefits did



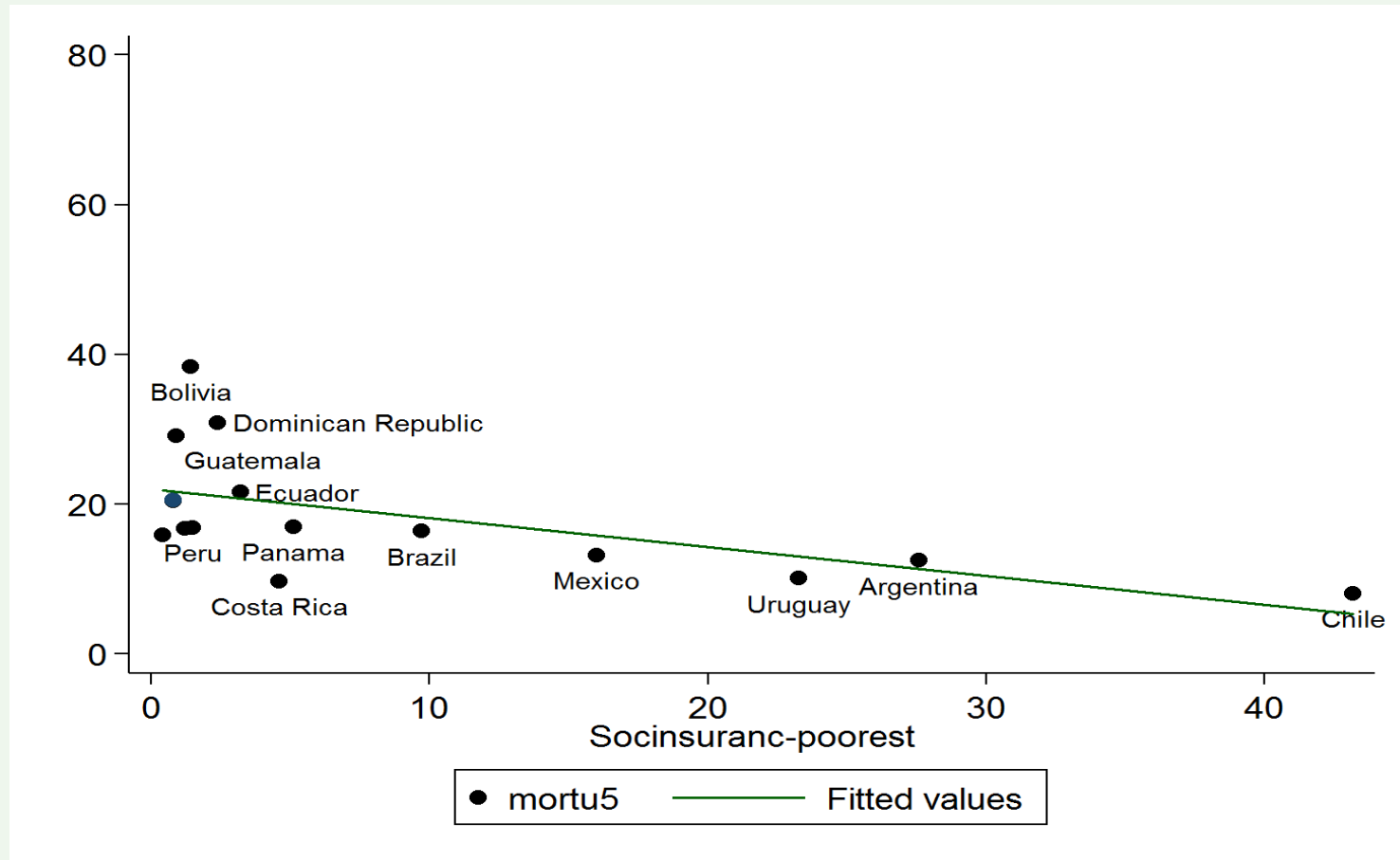
Conditional Cash Transfer works

Comparison of Conditional Transfer Programmes in Latin America

COUNTRY	BRAZIL	MEXICO	CHILE	PERU	ARGENTINA
Program	Bolsa de Familia	Oportunidades	Chile Solidario	Juntos	Asignación Universal por Hijo
Attribute					
Beneficiary Age	Children under 18	Children under 18	Children under 18	Children under 18	Children under 18
Type of Benefit	Per family and per child	Per family and scholarships	Per child	Per family with children	Per child
Conditionality	Health and education	Health and education	Social assistance follow up	Health, education and documentation	Health and education
Beneficiary families	12400000	5000000	370000	420000	1600000
Annual budget (in millions of local currency)	11400	44014	92000	730	7000
Annual budget (in millions of US dollars)	6440	3319	169	253	1800
Monthly benefit per family (in current USD)	43	55	38	50	94
Percentage of GDP	0.39%	0.31%	0.10%	0.20%	0.58%

Source: Panigo, D, Agis, E, and Cañete, C. (2010)

Coverage of social safety net programs in poorest quintile (% of population) and under five mortality rate, per 1,000 live births, 2014





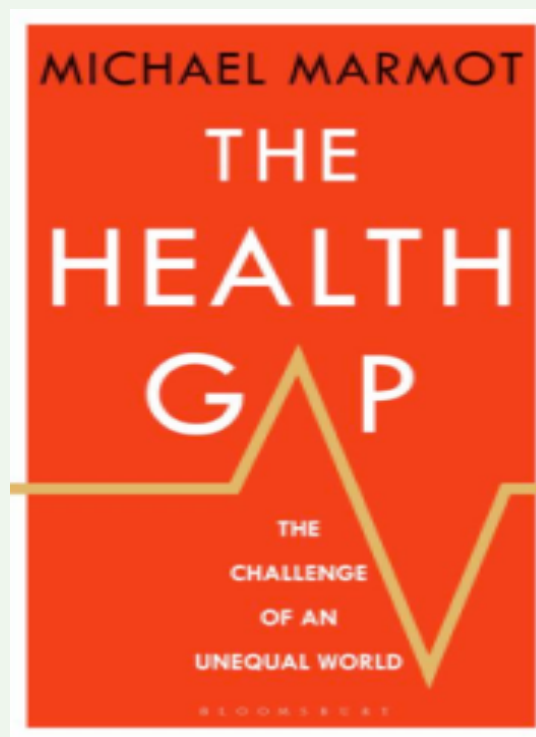
Report from the President

I spent the year as:

WMA President 2015-16



Why treat people and send them back to the conditions that made them sick?



My two messages in a world of post-fact politics

- Evidence-based policy
- Spirit of social justice

Remember: We said that

“Social injustice is killing on a grand scale”



Welcome

Tharawal
Aboriginal Corporation

"Your Health, Our Commitment"





The popular Belly Cast Program

We also have a
Breast Feeding
Support
Program



What we do

Educational gatherings before pregnancy, during pregnancy and after birth of baby.

Pregnancy and Postnatal Care at clinic or at their home.

Care for women and baby after the delivery.

Ongoing support , education, and baby checks up to the youngest child is five.

Development of resources for families around parenting.



Every family
complete adult and
child health checks
link to speech,
audiology,
optometry and
dental



Every family attends either;

Triple P parenting,

123 Magic

or grass roots parenting.



Bringing Them Home

Martin Luther King

