

**Analysis of social determinants of health and health inequities
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Abstracts of key-note lectures

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Health equity surveillance system

Social justice affects the way people live, their chance of illness, and their risk of premature death. Health inequalities arise because of the circumstances in which people grow, live, work, and age; and these are, in turn, shaped by political, social, and economic forces. Due to a complexity of the problem a holistic view of social determinants of health should be adopted when trying to reduce the health gap. Key leaders in tackling the problem of health inequities agree that evidence-based policy-making on the social determinants of health offers the best hope for closing the health gap. Action on the social determinants of health will be more effective if basic data systems are in place and there are mechanisms to ensure that the data are understood and applied to develop more effective interventions. In Europe several initiatives exist that deal with health indicators such as ECHI, ISARE, EURO-URHIS, ENHIS, ISG, SDS, EUROTHINE, but some of them concentrate on specific populations (urban, rural), whereas others revealed that collected health indicators are not comparable across countries. The WHO Commission on Social Determinants of Health aspires to adopt a stewardship role in supporting the creation of a comprehensive health equity surveillance system. This system should include vital registration and routine monitoring of health inequity and the social determinants of health and it has to be structured so that it is possible to follow time-trends on social determinants of health separately for men and women and for different social strata. Moreover, in order to ensure knowledge accumulation and to prevent unnecessary duplication of effort there is a need for international collaboration. A creation of a 'clearing house' for evidence on interventions on the social determinants of health could help improving mechanisms for global knowledge accumulation and sharing.