



POLICY BRIEF – THE SOCIAL DETERMINANTS OF HEALTH IN VIETNAM

What are the social determinants of health?

The social determinants of health (SDH) are the conditions in which people are born, grow, live, work and age, including the health system. These circumstances are shaped by the distribution of money, power 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 between countries as well as within countries between more and less advantaged social groups. Health inequities put vulnerable groups at further disadvantage, thus diminishing opportunities to be healthy. (See: WHO, 2008. *Closing the Gap in a Generation: Health Equity Through Action on the Social Determinants of Health, Report of the Commission on Social Determinants of Health*. Geneva: World Health Organization.)

Why focus on social determinants?

- Focusing on social determinants of health means tackling the 'causes of the causes' of illness. It also means closing the gap of health inequity among different groups of a society.
- Social determinants of health involve not only the health sector but every sector in a society.
- Social determinants of health deals with how social and economic policies determine health.
- In many countries, national policies in general and national health policies in particular do not give adequate attention to the social determinants of health. Health equity is not high on the agenda of national governments. The continuing drive for cost effectiveness in health reforms leaves little room for addressing issues of health equity.

What are the major health inequities in Vietnam?

The 'INTREC' Vietnam country report (see <http://intrec.info/countryreports.html>) shows that there is still a high and persistent degree of inequality in Viet Nam including:

- Health inequality in maternal and child mortality and morbidity, disfavoring poor and lower educated women and their children.
- Health inequalities between men and women. Women in general have lower physical functioning and psychological well-being.
- Inequality in different socioeconomic groups regarding mortality, lifestyle, chronic disease and injury. Poor people are more vulnerable to chronic diseases and their risk factors.
- Socioeconomic factors, education and geographical issues are associated with inequality, disfavoring the poor, women, ethnic minorities and people with low education.

What are the key SDH concerns in Vietnam?

- Knowledge and awareness on SDH and the importance of an inter-sectoral approach to tackling health issues is limited. The general perspective is that health is only the responsibility of the health sector.
- Lack of information and evidence on SDH.
- Lack of SDH curriculum/training.
- Lack of (or very limited) collaboration with other organizations working on SDH in the world.

What needs to be done in order to tackle health inequities in Vietnam through SDH?

1. Financial resources are needed for studies on specific SDH in Vietnam. This requires leaders to mobilize a budget from national and international sources to facilitate SDH studies.
2. Collaboration with research and training institutions inside and outside of Vietnam is needed to conduct SDH studies, focusing on, for example, the influence of food, traffic, and the environment on the health of Vietnamese people.
3. An SDH-specific curriculum should be developed for public health training institutions in Vietnam
4. SDH training courses should be developed and provided for Vietnamese leaders, through collaboration among training institutions and different ministries.
5. SDH communication programs should be promoted to raise community awareness on SDH through disseminating evidence on the SDH, thereby facilitating civil society to conduct relevant SDH community projects in the community.

Priority actions for SDH



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