# Special Initiative for Multi-country Action on the Social Determinants of Health Equity (SIMASHE) - Theory of change

Inadequate technical

co-benefits to inform

integration of human

Insufficient financing,

data, capabilities, and

intersectoral mechanisms

equity in the conventional

practice and operations of

organizations dealing with

health care, public health

and public policy.

Political reluctance to

address equity policy as a

priority through universal

commercial determinants

and adjusting governance

measures such as social

protection, addressing

to include community

promote health equity.

engagement and to

for addressing the social

determinants of health

and health equity.

development approaches

knowledge about

GOAL By 2028, ensure health equity is integrated into sectar, health for at least 20 million disadvantaged people in at least eight countries. By 2028, ensure health equity is integrated into social, economic and development policies, to improve the social determinants of



**Barriers to** 



**Activities and resources** 



Outputs – building on the WHO World report on social determinants of health equity (SDHE)

**ビ**≡ Outcomes 



**Re-enforced human rights** and the Sustainable **Development Goals** 

Organization

WHO 14th General **Programme of Work** 

Outcome 2.1: Health inequities reduced by acting on social, economic, environmental and other determinants of health.

#### **Sustainable Development Goals** and Indicators













Tracer indicator: SDG1.3.1 Proportion of population covered by at least one social protection benefit.

# **SIMASHE Mission**

Strengthen capacities for intersectoral strategies, policies, models and practices to address the social determinants of health equity successfully.

### Vision

A world where health equity is a shared societal value, ensuring all social groups enjoy healthy living and working conditions.



# **Country and local action**

Ground-level action is pivotal. Local activities in pioneer areas, combined with national policies, are fundamental to gaining traction and changing minds, to show what is possible in implementing the World report on social determinants of health equity recommendations (World report). Primary health care is an important vehicle for such action.

#### Regional roles in facilitating success

Regional cooperation, both in support of countries and between regions, is instrumental in facilitating translation of knowledge into practice. Activities include conducting regional assessments and collecting data on social determinants and health equity; supporting country action and scale-up of successful interventions; and fostering coalitions for advocacy and communities of practice for sharing experience, evidence, and trainings.

# Capabilities for implementation

At the global level, WHO and partners invest in and shape the on-going building of learning materials and practice evidence that are essential for enhancing people's capabilities to act and to support action by others.

## Global uptake through increased knowledge translation, data, and advocacy

Addressing structural factors - the social determinants of health equity - is crucial for improving health outcomes and equity globally. The WHO World Report focuses on 14 recommendations and four areas for action. The fourth area, new governance, is crucial to strategies for uptake across all action areas. Global uptake focuses on dissemination and dialogue on these recommendations and the investment case, and the development of operational models and policy guidance for supporting national and subnational action.

In-depth country strategies and models for implementation of actions advanced and scaled up.

Experiences and evaluations documented and shared with other countries.

Regional evidence, data and assessments of the social determinants of health equity enhanced, along with related social and public policies, and guidance for action, fostering competencies, and intersectoral and civil society collaboration.

Augmented regional solutions platforms convened, to share best practices and innovations for taking action on the social determinants of health equity, and fostering cross-country communities of practice.

Mechanisms developed for coalition building, advocacy and broader scale-up of action across each region and beyond, including through regional education, research, resources and mechanisms.

Improved education and training resources on 6 Improved education and training resources the social determinants of health equity available and used by health, social and economic policy and development organizations and professionals.

mproved training resources developed for engagement of civil society organizations on the right to development and action on the social determinants of health equity.

Evidence, and guidance on the social determinants of health equity translated into practice, promoting a common understanding and narrative among health, social, economic, development and technical programmes and leaders.

Increased global discussions and higher uptake of monitoring to increase visibility of the social determinants of health equity.

**Country Pathfinders and** regional champions have implemented actions addressing SDHE.



Organizational and professional capabilities on SDHE are scaled up globally.



**Policies supportive** to SDHE in multilateral environments are advanced.







