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

Barriers to equity

- Inadequate technical knowledge about co-benefits to inform integration of human development approaches and health equity
- Insufficient financing, data, capabilities and intersectoral mechanisms for addressing the social determinants of health equity
- Political reluctance to address equity as a policy priority through universal measures such as social protection, addressing commercial determinants, and adjusting governance to include community engagement and promote health equity



Activities and resources

Country and local action

- Capacity building for regional and country focal points (e.g. WHO staff, community health professionals) through in-person workshops and webinars
- Documentation of practices and models for addressing SDHE and supporting populations in conditions of vulnerability during and after COVID-19
- Meaningful community engagement in the development and implementation of national work plans
- Technical assistance for the development, implementation, monitoring and evaluation of intersectoral health-promoting policies and programmes (e.g. healthy school meals)

Regional roles in facilitating success

- Development of regional profiles and baselines for process, outcome and impact indicators
- Creation of tools and guides to enhance countries' COVID-19 preparedness and responses, focused on populations in conditions of vulnerability
- Facilitation of processes for intersectoral coordination and collaboration (e.g. between education and health)



Outputs - building on the WHO

World report on social determinants of health equity (**SDHE**)

1–2 Country/local strategies, models and experiences documented

- SDHE-related programmes mapped in two countries
- Technical tools and guidance created to revise COVID-19 preparedness and response strategies for groups in conditions of vulnerability
- Local governance tools and community engagement strategies on SDHE developed, piloted and institutionalized
- · National baselines on multisectoral operations established
- Exchange visits held to support cross-country learning
- Capacity on SDHE enhanced among local stakeholders (e.g. governors, school principals, community nurses, community leaders, teachers)

2 Enhanced regional evidence and guidance for action

- Regional baselines on multisectoral operations established
- · WPRO Health Equity Dashboard developed
- Regional policy dialogues held, aligning with recommendations from the world report on SDHE
- Intersectoral collaboration promoted and institutionalized for highquality data informing SDHE action

Action and innovation platforms

- Multimedia packages developed, documenting success stories and community actions
- · Regional SDHE monitoring workshops delivered
- · Communities of practice and collaborative networks established
- Technical assistance provided for health-promoting policies and SDHE health-related indicators development

Mechanisms for coalition building, advocacy, and broader scale-up of action

- · Regional courses and webinars on SDHE delivered
- Strategic dialogues held with stakeholders and communities
- Knowledge gathered and disseminated through intra- and interregional learning exchanges and events
- WHO Healthy Cities model and other international frameworks leveraged in regional and country-level SDHE initiatives
- Platforms for multisectoral collaboration on health equity established, including a regional intersectoral network for Healthy Cities and a network for Health Promoting Schools

Outcomes for social determinants of health equity

National and local

- Countries apply strengthened multistakeholder partnerships, engagement mechanisms and surveillance systems to advance SDHE
- Communities and governments demonstrate increased use of knowledge and innovation derived from community-led and multisectoral SDHE practices
- Community and intersectoral actors influence the design and delivery of inclusive, genderresponsive policies and services
- Institutionalized governance models for SDHE are adopted and scaled nationally (e.g. CONNECT in Lao People's Democratic Republic, integrated planning in the Philippines)

Regional

- Regional experiences are highlighted and shared to guide collective learning and policy development
- New multisectoral SDHE models are recognized and applied across the region
- COVID-19 and policy impacts are analysed and used to inform regional and national action



Re-enforced human rights and the Sustainable Development Goals



Regional and national indicators

Extent of social determinants of health equity considerations included in major social, economic or development strategies.

Proportion of countries with capacity to measure and monitor health inequities and the SDH



Regional goal

Member States have developed and are implementing intersectoral and community-engagement approaches and strategies to identify and reach, through health efforts, populations living in conditions of vulnerability



Sustainable Development Goals and indicators











Vision

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



