REPORT OF THE COMMISSION ON EQUITY AND HEALTH INEQUALITIES IN THE AMERICAS

Background

1. While there has been notable improvement in the health of peoples in the Americas in recent years, significant inequalities still persist. These improvements are not consistent across countries or between social groups, especially those living in situations of vulnerability, whose well-being and health continue to be adversely affected. Mindful of this situation, in 2016 the Director of the Pan American Sanitary Bureau (PASB, or the Bureau) established the Commission on Equity and Health Inequalities in the Americas (the Commission) and entrusted it with advancing recommendations to reduce inequities and inequalities throughout the Region of the Americas. This initiative is the first large-scale effort to gather evidence on health inequities and inequalities in the Region.

2. The Commission is composed of 12 experts, each specializing in one or more of the four cross-cutting themes—gender, equity, human rights, and ethnicity—highlighted in PAHO’s Strategic Plan 2014-2019 and which are applied across all categories and program areas of the Organization’s work to improve health outcomes and reduce inequities in health (1). Throughout their work, commissioners have evaluated evidence on the causes of inequalities in the Region and developed proposed actions that can improve health and well-being for everyone.

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1 The PAHO Commission on Equity and Health Inequalities in the Americas has partnered with 15 countries across the Region: Argentina, Belize, Brazil, Canada, Chile, Colombia, Costa Rica, Cuba, El Salvador, Jamaica, Mexico, Peru, Suriname, Trinidad and Tobago, and United States of America.

2 PAHO has appointed 12 commissioners from different fields who are recognized for their work on equity, gender, ethnicity, and human rights. The Commission is chaired by Sir Michael Marmot, Director of the Institute of Health Equity at University College London (UCL/IHE), and co-chaired by Nila Heredia (Bolivia) and María Paula Romo (Ecuador). The other commissioners, in alphabetical order, are Victor Abramovich (Argentina), Mabel Blanco (Argentina), Cindy Blackstock (Canada), Jo Ivey Boufford (United States of America), Paulo Buss (Brazil), Pastor Murillo (Colombia), Tracy Robinson (Jamaica), David Satcher (United States of America), and Cesar Victora (Brazil).
3. This information document summarizes the Commission’s accomplishments and presents an overview of the Commission’s recommendations, presented in an Executive Summary of the Commission’s final Report.

Analysis of Progress Achieved

4. The Commission has conducted 13 evidence reviews on thematic areas covering a wide range of social and biological factors that impact equity and equality in health in the Region. The specific topics of the evidence reviews are varied and comprehensive, including: a) intergenerational transmission, early years, young people, and education; b) working life; c) healthy aging; d) gender, sexuality, and gender identity; e) race and ethnicity; and f) disabilities. A second area of attention concerned the socioeconomic and political context. From this perspective, the Commission has analyzed variables pertaining to g) macroeconomic and environmental policy, and h) governance. In addition, the evidence reviews have also considered pathways to health, including: i) material circumstances; j) social cohesion, resilience, and cultural and societal norms and values; and k) health care, public health services, and priority public health conditions.

5. To accomplish its objective, the Commission built strong country partnerships to identify the work that countries are doing to improve health equity, thus creating a record of positive and innovative practices and case studies. These country partnerships also provided the Commission with the opportunity to obtain qualitative and quantitative data on gender, equity, human rights, and ethnicity that help to identify and overcome barriers.

6. In 2016, the Commission held two initial meetings in Washington, D.C., to establish its core objectives. It then held four more meetings, each with one of the cross-cutting themes as the main agenda item while also addressing the three remaining themes. In 2017, the Commission met in Colombia, where it discussed ethnicity and its impacts on health, and Costa Rica, where it focused on issues pertaining to gender and violence. In 2018, the Commission met in Trinidad and Tobago to address human rights in health and, in the United States of America (Atlanta, Georgia), under the auspices of the Morehouse School of Medicine, to discuss issues related to civil rights and minority populations in Canada and the United States, including Afro-descendants, Latino-Americans, and indigenous populations. A final meeting was convened at PAHO Headquarters in June 2018 to review a set of draft recommendations.

7. The Commission’s meetings were held in different countries to ensure geographic representation. The diversity of venues also provided the commissioners with invaluable opportunities to receive input from civil society, government, academia, and other sectors, thus impacting on the pertinence and quality of their final Report and recommendations.

8. This information document provides an overview of the Executive Summary of the Commission’s final Report. The final Report, including the results of the 13 evidence reviews and a list of action-oriented recommendations, will be completed in late 2018.
9. It is anticipated that the Commission’s Report will provide new ways of understanding and prioritizing equity and equality in health. The Report will also present evidence and data to serve as a basis for monitoring, evaluating, and reducing inequities and inequalities in the Region of the Americas.

10. The Commission’s final Report and recommendations will become a tool to support PAHO Member States as they monitor and evaluate health inequalities, taking into account the mandates contained in the following resolutions of the PAHO Governing Bodies: Plan of Action on Health in All Policies (Resolution CD53.R2 [2014]) (2), Health and Human Rights (Resolution CD50.R8 [2010]) (3), and Policy on Ethnicity and Health (Resolution CSP29.R3 [2017]) (4), among others.

Overview of the Executive Summary of the Commission’s Report

11. The Executive Summary of the Commission’s final Report, which will be presented to the 56th Directing Council, is divided into the following sections:

a) Section 1 of the Executive Summary introduces the Commission’s Report, summarizes the work of the Commission, provides an overview of the issues and sets out a conceptual framework of and approach to the work – the structural drivers, the conditions of daily life, the levers and entry points for action to achieve better health and a dignified life for all;

b) Section 2 provides a brief overview of health inequalities in the Region of the Americas – describing health inequalities within and between PAHO Member States. These inequalities relate to socio-economic status, ethnicity, gender, disability status and relate to stage of life;

c) Section 3 of the Executive Summary explores the structural drivers of health inequalities – first, inequalities in political, social, cultural and economic arenas; second, the unequal impact on socially disadvantaged people of environmental degradation, climate change and natural disasters, and; third, the continuing impact of colonialism, slavery and structural racism across this Region;

d) Section 4 sets out inequalities in conditions of daily life – those in early years, education, working life and for older people; inequalities in income and social protection, impacts of violence and living conditions and the health system;

e) Section 5 of the Executive Summary sets out the most effective governance arrangements for greater health equity, including involvement of communities and civil society and effective monitoring systems which capture inequalities related to socio-economic status, gender, ethnicity and other dimensions of inequity. This section emphasizes the importance of human rights in ensuring greater health equity and greater accountability across the Region.

12. Finally, the Executive Summary of the Report of the PAHO Commission on Equity and Health Inequalities in the Americas contains the following recommendations that
describe priority objectives and specific actions to be taken under the following broad headings:

a) achieving equity in political, social, cultural, and economic structures;
b) protecting the natural environment, mitigating climate change, and respecting relationships to land;
c) recognize and reverse the health equity Impacts of ongoing colonialism and structural racism;
d) equity from the start—early life and education;
e) decent work;
f) dignified life at older ages;
g) income and social protection;
h) reducing violence for health equity;
i) improving environment and housing conditions;
j) equitable health systems;
k) governance arrangements for health equity; and
l) fulfilling and protecting human rights.

**Action by the Directing Council**

13. The Directing Council is invited to take note of this information document and to provide any comments it deems pertinent.

**References**

