Social Determinants of Urban Health

Findings and Recommendations from the WHO Commission on Social Determinants of Health

By Ariel Sloan

Sir Michael Marmot, principal investigator of the groundbreaking Whitehall Studies that uncovered a social gradient in British civil servants’ mortality, led the Urban Health Institute’s (UHI) quarterly symposium on April 14, 2010. As chair of the World Health Organization (WHO) Commission on Social Determinants of Health, he has continued to illustrate the prevalence of the social gradient in health across the world, and sharpened his message to incite academic and social engagement in urban centers. Sir Michael Marmot’s presentation demonstrated that the slope of the social gradient in health steepened over the last 20 years in the United States as an unintended consequence of social and economic changes. Therefore, he believes it is possible for Baltimore and other U.S. cities to pursue policies to level the social gradient in health. He outlined two objectives for Johns Hopkins to adopt in its efforts to combat health inequities in Baltimore:

1. Create an enabling society that maximizes individual and community potential.
2. Ensure social justice, health and sustainability are at the heart of policies.

Sir Michael Marmot is the Medical Research Council (MRC) Research Professor of Epidemiology and Public Health at University College in London and director of the International Institute for Society and Health. He leads the English Longitudinal Study of Ageing (ELSA) and works within numerous international research efforts on the social determinants of health. In all his initiatives to address global public health issues Sir Michael Marmot stresses, “Health inequalities that are judged to be avoidable by reasonable means are unjust and hence inequitable… So putting them right is a matter of social justice.”

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With social justice underlying his commitment to the world’s urban populations, Sir Michael Marmot intends to integrate his health inequities agenda with the climate change agenda. His message is timely given the following statistic: The poorest fifth of US families, earning less than $13,060 per year pay 42% of their income to own and drive a vehicle. If American families, Sir Michael Marmot protested, committed to 60 minutes per day of biking or walking instead of using a car, health would improve and carbon dioxide emissions would decrease. Additionally, families could redistribute funds previously designated for transportation towards better quality food and preventative healthcare. However, efforts to decrease dependency on vehicles require better urban planning and public transportation. Sir Michael Marmot continues to be a preeminent voice in the discussion of social determinations of health offering creative solutions to fundamental issues that affect everyone including the poorest of the poor.

After an inspiring presentation, the symposium concluded with panel discussion featuring Martha Hill, Dean of Johns Hopkins School of Nursing, and Alfred Sommer, Dean Emeritus of Johns Hopkins Bloomberg School of Public Health.

“The implication of the gradient in health is that we mustn’t focus only on the poorest of the poor. The implication of the gradient is that we need to deal with the whole of society.”

— Sir Michael Marmot

Visit www.jhsph.edu/urbanhealth to view the symposium in its entirety.