

**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 the result of the distribution of power and resources at the global, national and local levels and at the same time depend on the policies adopted.

**SDH** account for the vast majority of health inequities, that is, unfair and avoidable differences observed between and within countries in relation to the health situation.

At present, all countries in the world present health inequalities. And Mozambique is a clear example of this reality. Many of the most relevant health problems are subject to the influence of social determinants and people's living conditions. It is estimated that 80% of the determinants of health lie in fact outside the health system. Nonetheless, comparatively difficult access to health services and a reduction in their quality for disadvantaged social groups can undoubtedly result in worse consequences on their health and well-being and greater inequality.

The World Health Organization (WHO) Commission on **SDH** has indicated that the combination of these social determinants can result in harm to collective health and generate health inequalities. The unequal distribution of health problems is not a "random" or "natural" phenomenon, nor the product of unhealthy behaviors. On the contrary, it is, above all, the result of the combination of the social and economic policies carried out in a particular territory or country. Therefore, improving health and equity requires the implementation/enforcement of policies, programs and interventions covering all key social and environmental sectors in each society, not just the healthcare sector.

**SDH** can explain and even become an ideal theoretical-conceptual and practical framework of reference for improving health inequities, particularly in Mozambique.

To date, health research in Mozambique presents an almost exclusively medical-clinical character. However, we understand that the country faces challenges that go beyond this sphere, and that individual and collective health cannot be improved without a better understanding of the determinants that affect it.

It is in this context that **medicusmundi** intends to organize **the First International Conference on Social Determinants of Health**.

In particular, communications based on experiences in Mozambique or sub-Saharan Africa will focus on the following thematic areas (relevant experiences from other regions will also be studied):

1

### Inequities in Health:

- a. Scientific studies that present data on inequalities in the health of the population, either globally, or analyzing social determinants such as gender, social class, migratory status, etc.
- b. Experiences and presentation of research institutions and/or networks in Africa whose purpose is the study of inequities.
- c. Political and strategic actions to know and fight social inequalities in health.

2

### Environment (as one of the most important social determinants) and its impact on health:

- a. Extractive industry, artisanal mining and health.
- b. Agriculture and food models and their impact on health.
- c. Environmental problems arising from the degradation of ecosystems and climate change and their impact on health.

3

### Primary Health Care (PHC) as a social and health model:

- a. Research on "systemic and structural" aspects of the NHS: Health Information System (HIS), logistics, human resources, health network coverage, etc.
- b. Financing of national health systems as a key element for the promotion of PHC.
- c. Challenges for PHC: external dependence and verticalization of health programs.
- d. Trends in the expansion of public and private health services.

4

### Civil Society and its role in monitoring the implementation of comprehensive health policies that guarantee the Right to Health:

- a. Presentation of national and international social movements in defense of the Right to Health.
- b. Studies and experiences of political advocacy actions in defense of the Right to Health.
- c. Successes and challenges of Civil Society in the performance of Participatory Governance actions.

### Instructions for abstracts:

- ✓ Title of the work
- ✓ Full name of the author and institutional affiliation
- ✓ Proposals may be individual or collective (with more than one author)
- ✓ Summary of the paper with a maximum of 500 words (in Portuguese or English)
- ✓ Please, indicate the theme (Inequities in Health, Environment , Primary Health Care (PHC), Civil Society)
- ✓ 3 to 5 keywords
- ✓ E-mail and other contacts (telephone, Skype or other)

Abstracts must be submitted by **May 31, 2018** to the following addresses: **conferencia.dss@medicusmundi.es**

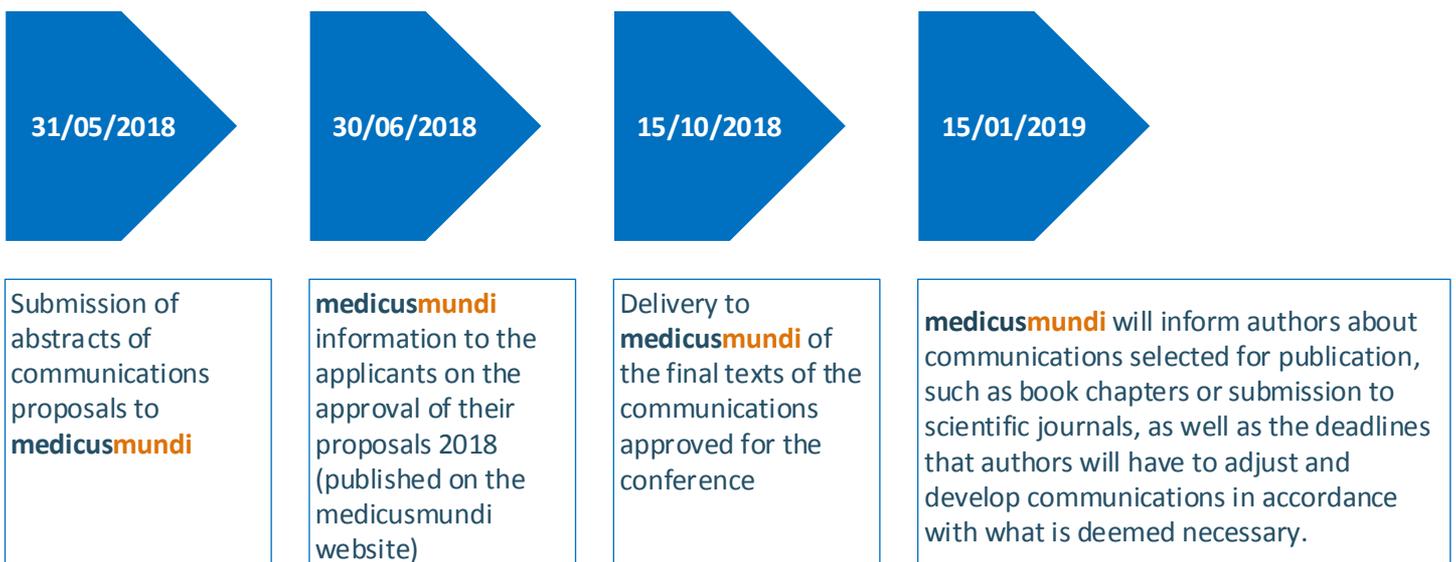
Abstracts submitted with incomplete information will not be considered.

Applicants may only submit proposals for individualized communications.

Although they may have generic theoretical or methodological approaches or be based on case studies from other countries or continents, the topics of communications should be relevant to the debates and challenges faced not only by Mozambique but also by other African countries.

After the conference, all communications submitted will be published on the website ([www.medicusmundimozambique.org](http://www.medicusmundimozambique.org)), provided that the authors have not explicitly requested that such publication not be made. Some of these communications will subsequently be selected for publication as chapters of books or articles in scientific journals, after being duly reviewed by their authors.

### Important deadlines to consider:



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For any further information, please contact **medicusmundi**, at the above e-mail addresses.

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