



REGIONAL OFFICE FOR Europe



Organisation mondiale de la Santé

BUREAU RÉGIONAL DE L' Europe



Weltgesundheitsorganisation

REGIONALBÜRO FÜR EUROPA



Всемирная организация здравоохранения

Европейское региональное бюро

Inequalities in health: challenges and opportunities in Europe

Dr Zsuzsanna Jakab WHO Regional Director for Europe

21st Congress of the European Association of Dental Public Health 1 October 2016 Budapest

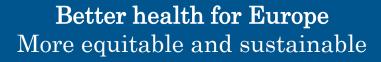














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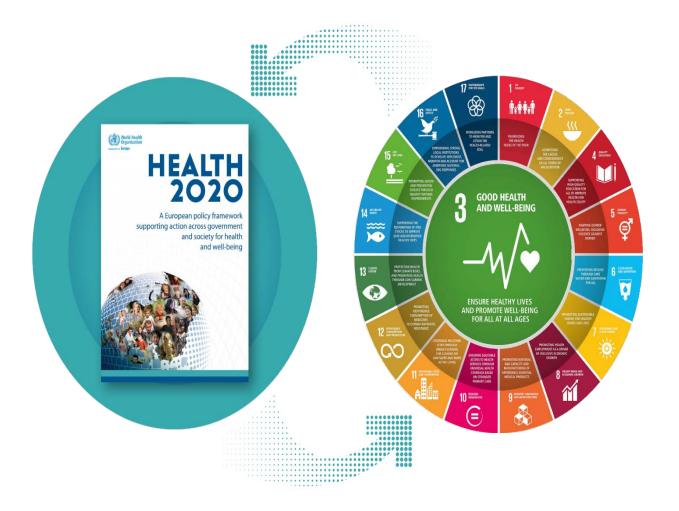
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Всемирная организация здравоохранения

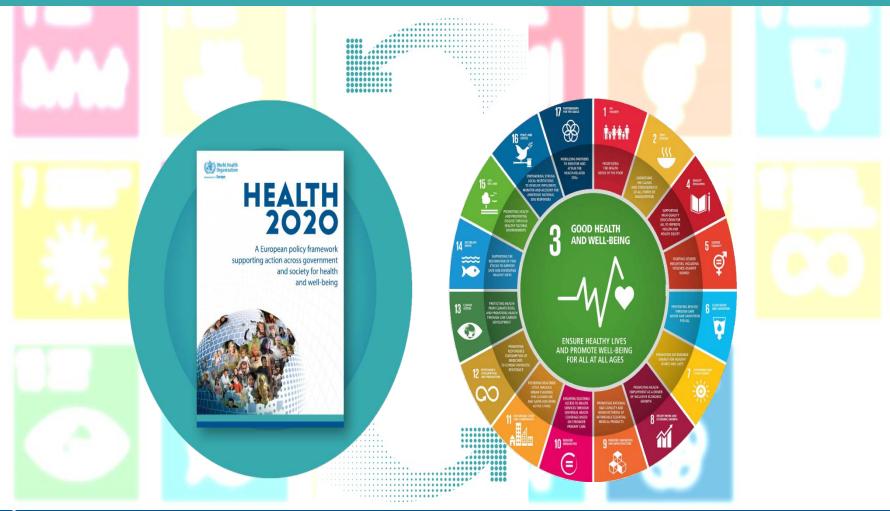
Европейское региональное бюро

The new global framework: <u>United Nations 2030 Agenda for Sustainable Development</u>





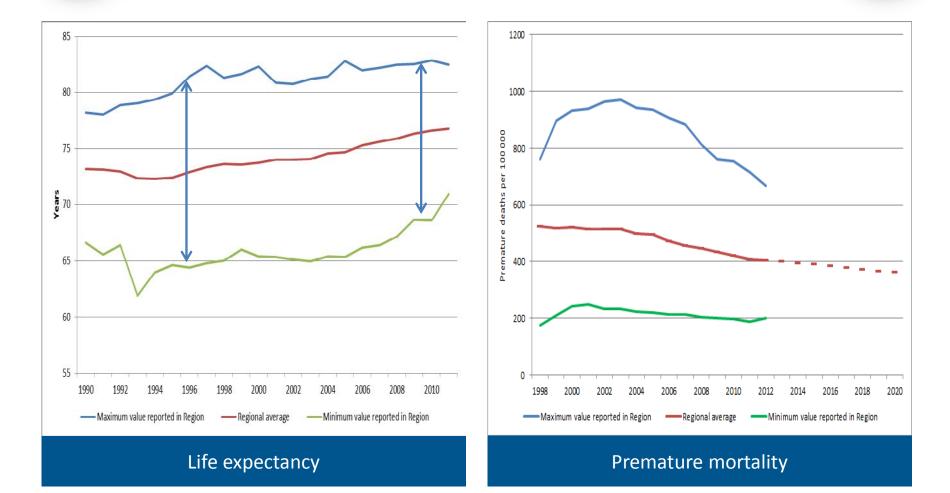
Towards a roadmap for implementation of Sustainable Development Goals (SDGs) in the Region





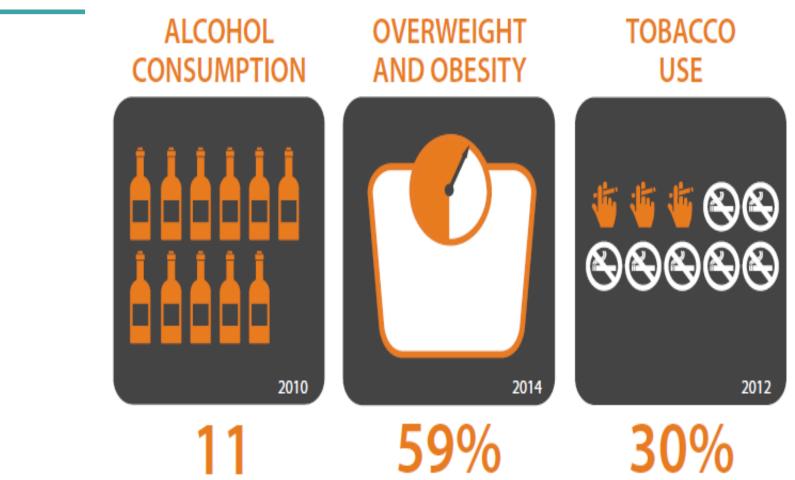
We are on track to create a healthier Europe





Yet challenges remain

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litres of pure alcohol is drunk per person per year of the population is overweight or obese

of the population uses tobacco



What is Health 2020? Health is a political choice

- Public health policy framework to improve health and reduce inequities
- Focus on upstream actions and addressing root causes of ill health – addressing all determinants systematically early on, before diseases emerge
- Higher and broader reach



Countries are taking up the Health 2020 challenge





European health report 2015

Main aims:

- to report on progress towards the Health 2020 targets (since 2010 baseline)
- to highlight new frontiers in health information and evidence, including subjective well-being measurements





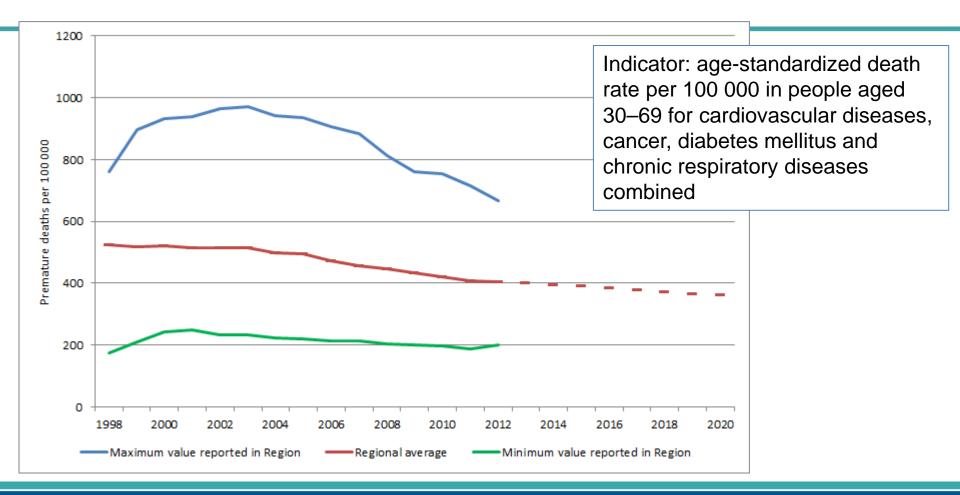
Premature mortality

Regional Health 2020 target: a 1.5% relative annual reduction in premature mortality from cardiovascular diseases, cancer, diabetes and chronic respiratory diseases until 2020

Although the European Region is on track to achieve the Health 2020 target to reduce premature mortality, much more can be done to address the determinants for faster progress



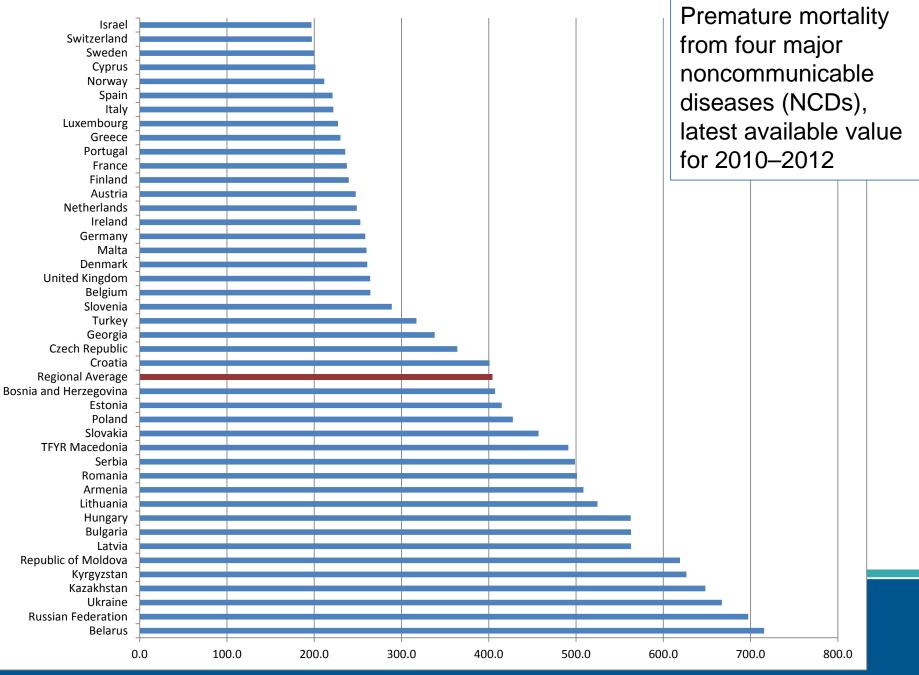
Regional trend







Premature mortality



Inequalities in oral health



Challenges and opportunities

- Across Europe, a high relative risk of oral disease is related to socioeconomic determinants.
- The major oral diseases are avoidable through effective prevention and health promotion.
- Reducing social inequities in oral health depends solely on political will.



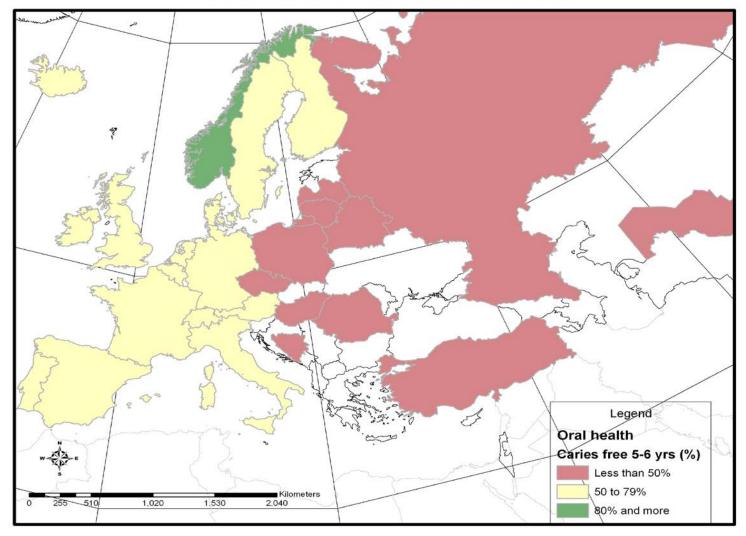
Inequities in health and health care

- Between countries
- Within countries
 - Income
 - Education
 - Occupation
 - Gender
 - Age
 - Residence
 - Ethnicity





Caries free children in European countries, 2011

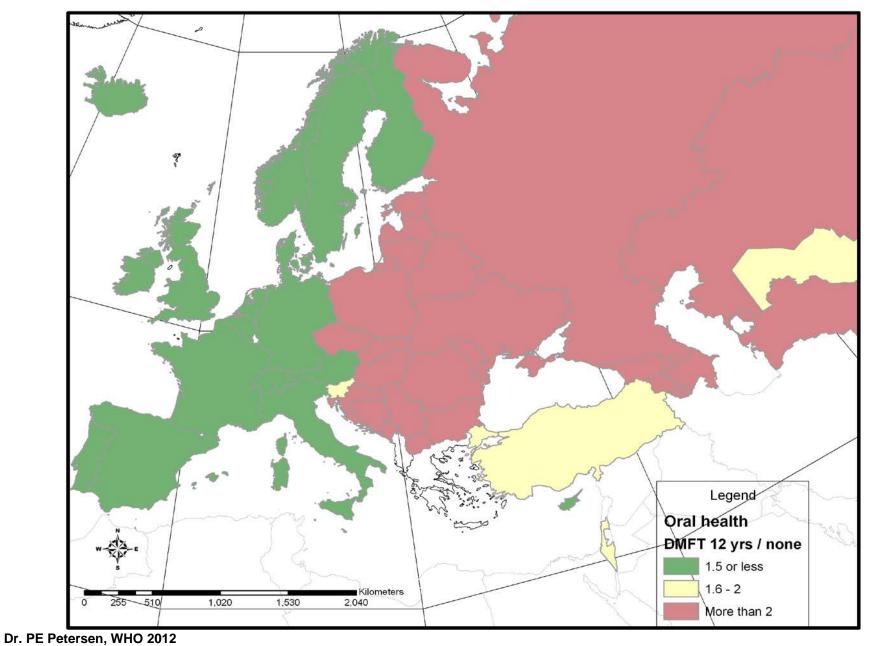


Dr. PE Petersen, WHO 2012

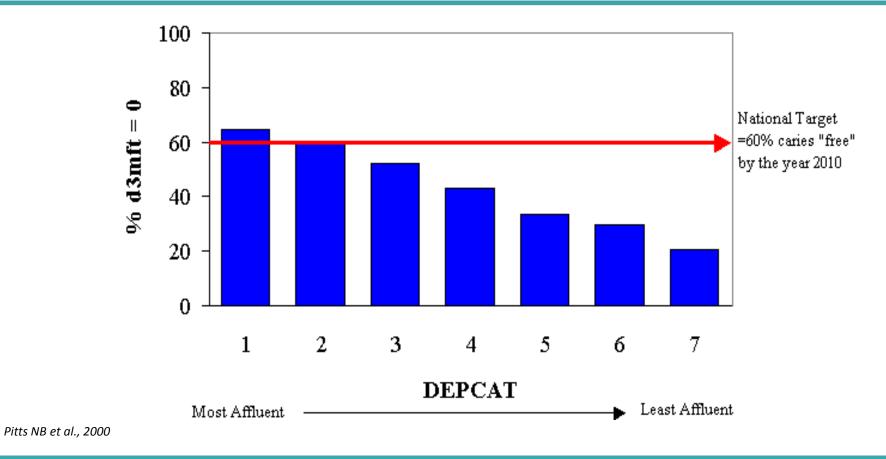


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DMFT index of children in European countries, 2011

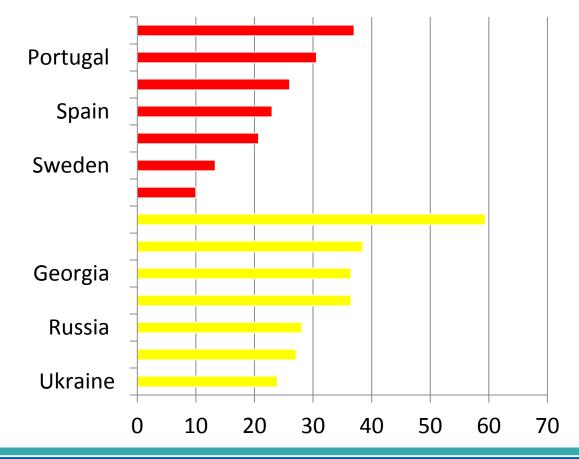


Within-country inequalities in oral health Percentage of Scottish 5-year-olds "free" of dental caries by deprivation (DEPCAT) score





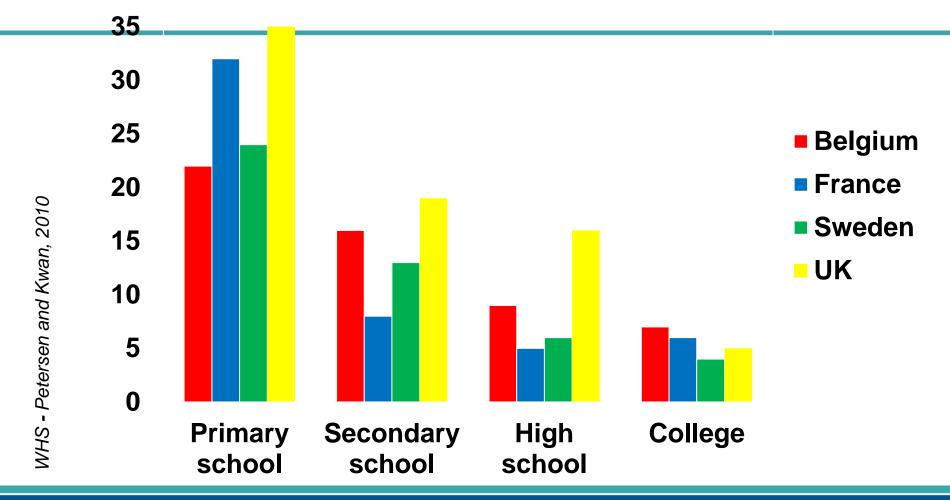
Percentage of people aged 65–74 having lost all natural teeth, western and eastern European countries





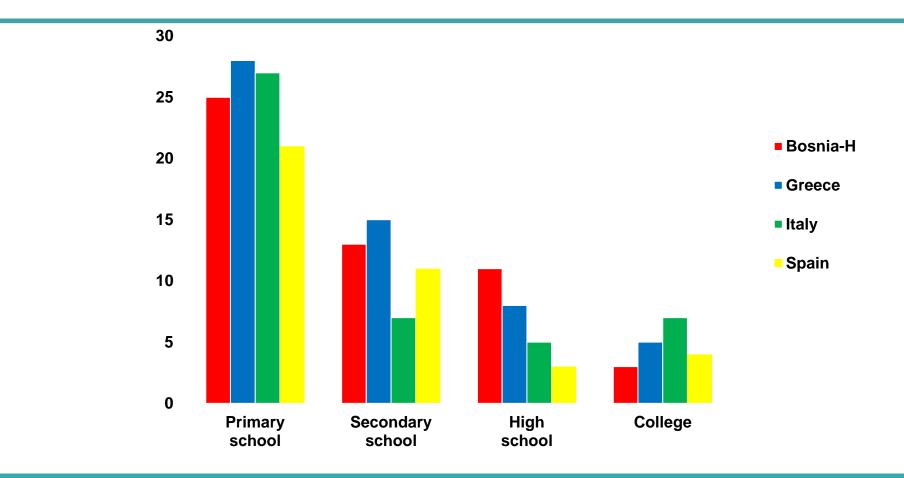
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Percentage of adults (18 yrs+) having lost all 40 atural teeth, by education, selected countries





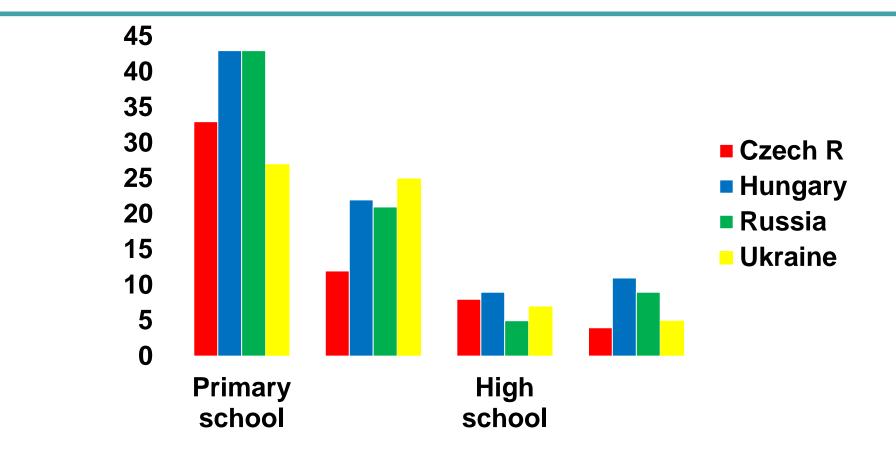
Percentage of adults (18 yrs+) having lost all natural teeth, by education, selected countries





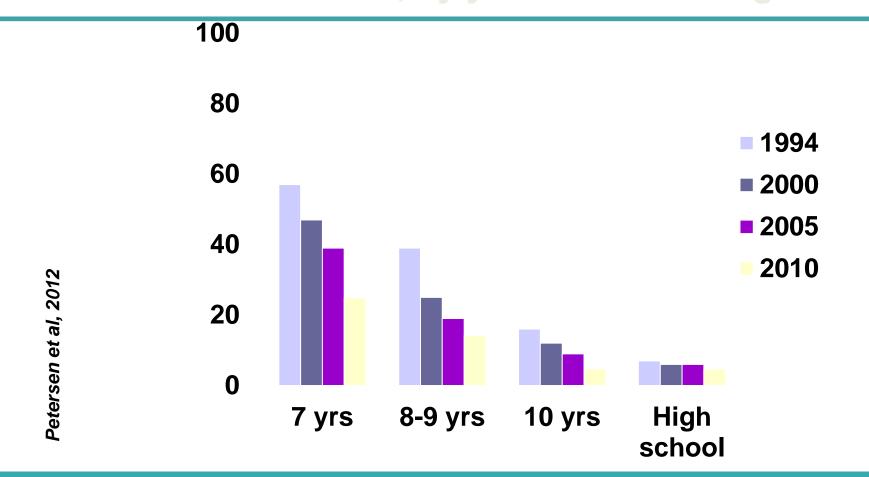
WHS - Petersen and Kwan, 2010

Percentage of adults (18 yrs+) having lost all natural teeth, by education, selected countries





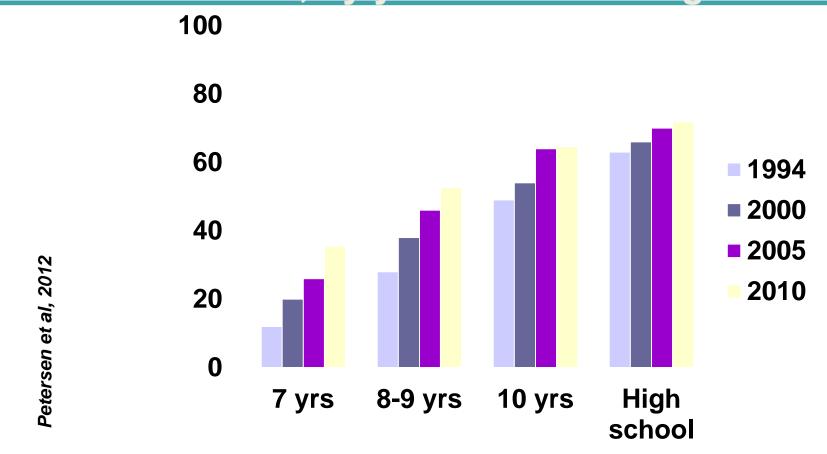
Within-country inequalities in oral health Percentage of Danes aged 65+ years having lost all natural teeth, by years of schooling





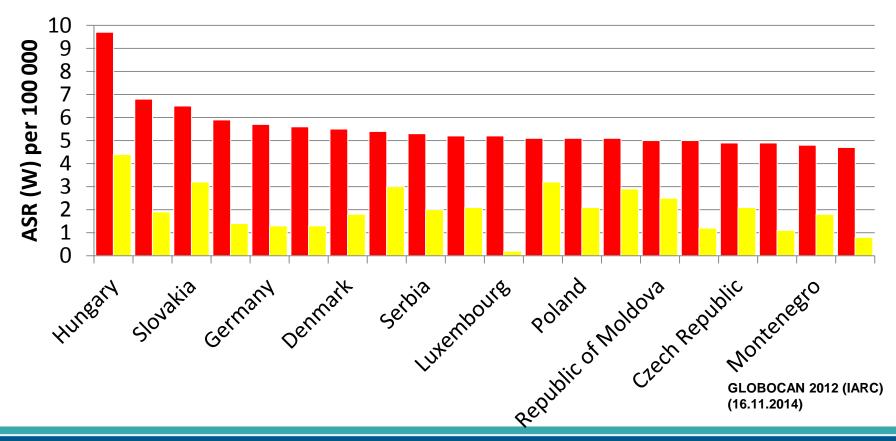
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Within-country inequalities in oral health Percentage of Danes aged 65+ years with 20+ teeth, by years of schooling





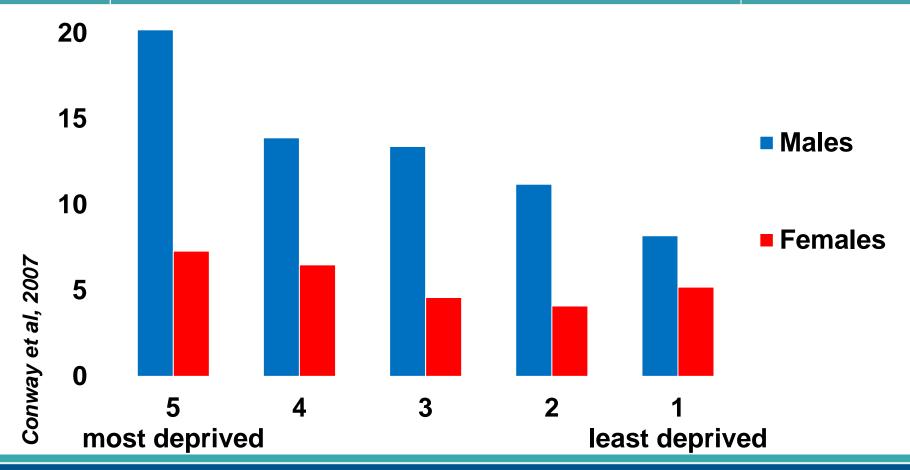
Europe: lip and oral cavity cancer ASR(W), both sexes, all ages





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Age-standardized incidence rates (2002) of oral and oropharyngeal cancer, by sex and deprivation score, Scotland 2002





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Equity, social determinants and public health programmes









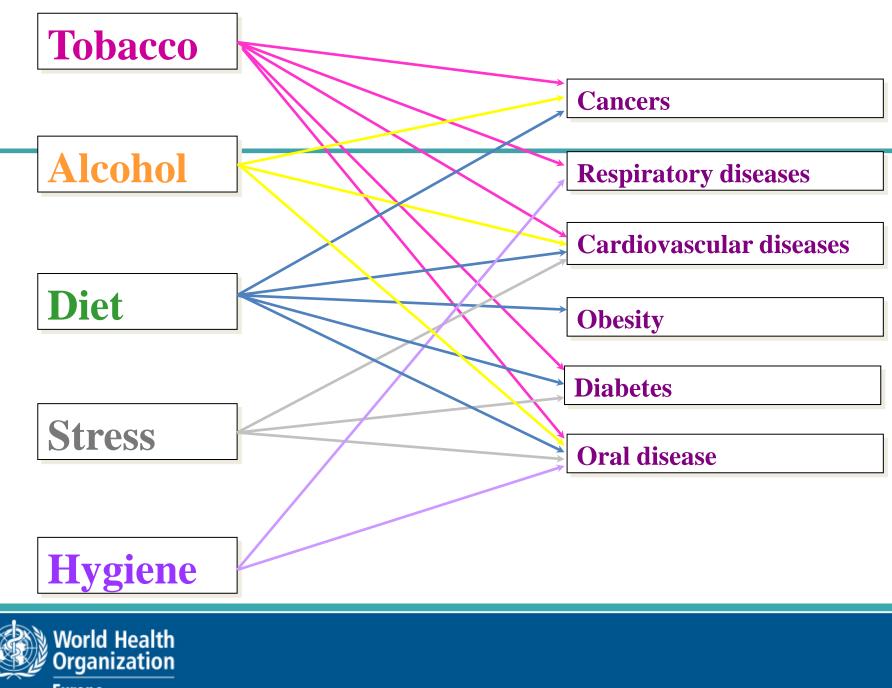












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WHA60.17 (2007) Oral health – action plan for promotion and integrated disease prevention

Tackling inequities in oral health through:

- shared modifiable risk factors
- chronic diseases
- settings for health
- environment
- health systems
- structural factors of society





Settings for health

• Health-promoting schools

Oral health through schools: children-youth-school teachers-family-community

• Settings for older people

Age-friendly primary health care and quality of life



Environment for public health

Automatic fluoridation

- Vehicles are water, salt or milk
- Proper oral hygiene and effective use of high-quality fluoridated toothpaste (1000–1500 ppm)

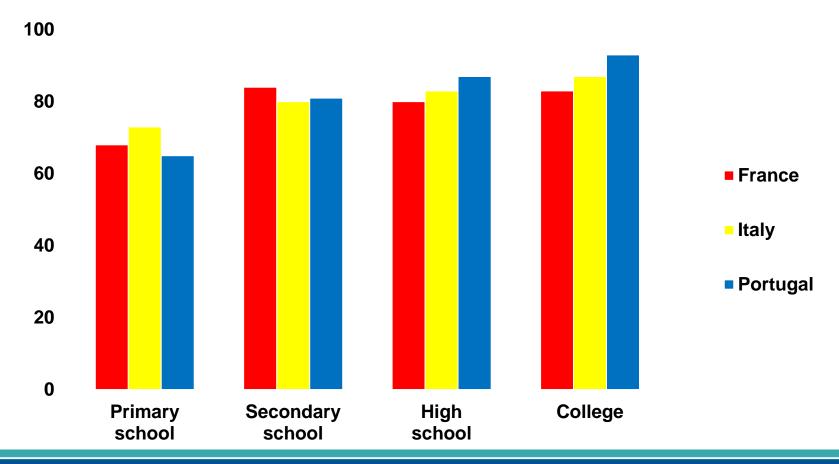


Upstream interventions

- National policy for oral health
- Legalization and regulation
- Directives for oral health care
- Financially fair primary oral health care
- Universal coverage
- Integration of oral health with NCD
 prevention

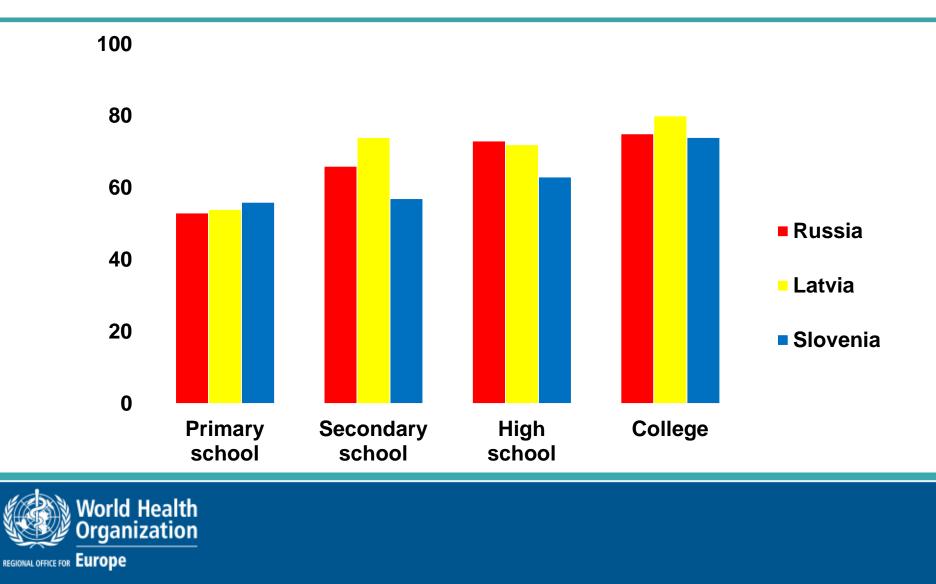


Percentage of adults (18+ years) who have had health care for oral problems, by education, selected countries





Percentage of adults (18+ years) who have had health care for oral problems, by education, selected countries



Universal primary oral health care

- Oral health care provided by dentists must be financially fair
- Health is a public good, guaranteed by government
- National health insurance
- Dentists must give priority to prevention and health promotion
- Outreach to people and communities

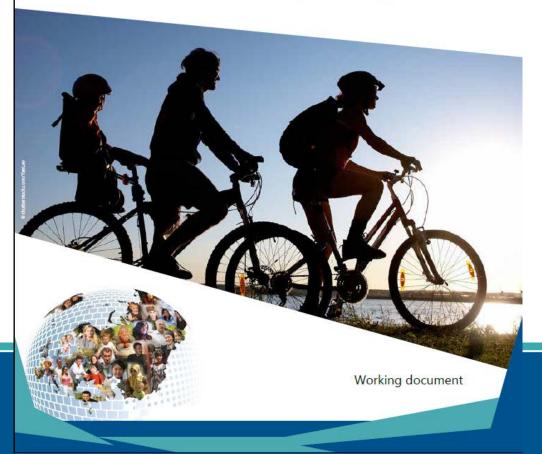






REGIONAL COMMITTEE FOR EUROPE 66TH SESSION Copenhagen, Denmark, 12–15 September 2016

Action plan for the prevention and control of noncommunicable diseases in the WHO European Region





Challenges for reducing inequities in health

- Lack of political interest
- Lack of political will
- Neglect of health inequities
- Blaming the victims
- Lack of recognition by private dental practitioners
- From ministries of *health care administration* towards ministries of *health*
- Financially fair oral health care



Opportunities for equity in oral health

- Healthy diet and reducing sugars
- Tobacco and alcohol control
- Organizing public health and primary oral health care
- Health care in the workplace
- Outreach to people in low-resource settings and disadvantaged groups
- Outreach to vulnerable groups, including poor and marginalized groups, homeless people, refugees, disabled people and people living in institutions
- Strengthening surveillance



Thank you!

