Valedictory Speech
WMA President Sir Michael Marmot October 2016

This year I have been ever more vigorous in promoting my two key messages on health equity: evidence based policy and the central role of social justice. It seemed ever more urgent given the rise of some rather nasty political movements with scant regard for the truth, which has led to the notion of ‘post-fact’ politics.

Martin Luther King said it rather better than I:

*I believe that unarmed truth and unconditional love will have the final word in reality. This is why right, temporarily defeated, is stronger than evil triumphant.*

My mission as WMA President, stated clearly from the outset, was to encourage doctors’ involvement in social determinants of health and health equity. ‘Encouraging doctors’ includes individual doctors, National Medical Associations and other bodies, and the World Medical Association.

To support this mission, I set out three aims:

- WMA issue a statement on social determinants of health and health equity; and produce a supporting publication that would answer the question: “what do we do?”
- Support post-graduate education and training.
- Promote regional networking on social determinants of health

WMA Statement and Publication

The Declaration of Oslo, agreed at the Council meeting in Oslo in April 2015, was passed by the General Medical Assembly in Moscow. It sets out the importance of social determinants of health (SDH) and principles of action for WMA, NMAs and individual doctors.

A question commonly put, sometimes even a cri de coeur, is of the form: “I am convinced but what do you want me to do?” My colleagues at the UCL Institute of Health Equity have prepared a document, *Doctors for Health Equity*, which seeks to answer that question. We emphasise five domains of activity:

- Education and training
- Seeing the patient in broader perspective
- The health service as employer and its impact on the local community
- Working in Partnership
- Advocacy

In addition, there is the crucial issue of measurement of health equity and key determinants.

The report is as a way of developing communities of action, sharing knowledge and a source of material for budding partnerships at local level. It is an opportunity for the WMA to show by their actions what they are doing. Sharing through the report and the web site are good ways of helping each other in each of our member’s countries.
We see this publication as continuing to develop with the addition of case studies. We have invited NMA’s to contribute examples.

During the year WMA put out statements consistent with this SDH theme. In particular, following the meeting in Istanbul on War, Migration and Health, WMA issued a declaration.

**Training**

We run a Summer School at UCL in London on social determinants of health. In addition, we are planning one or more workshops with the International Association of Academies of Medical Science (IAMP). The first was in Trieste. We conducted a regional workshop at the University of Brasilia in Brazil.

With BMJ Publishing we have developed a MOOC, Mass Online Open Course on Social Determinants of Health. It was launched in October 2016, and is running at the same time as the WMA General Medical Assembly.

**Networking**

My agenda for the year was clear, involving doctors in social determinants of health and health equity. It is part of my broader, longer term mission promoting the importance of social determinants of health in research, training, policy and practice. Accordingly, my choice for the year, was to attend those meetings that had the prospect of advancing that agenda. And proudly wearing the WMA hat while doing so. The networking has taken three forms.

1. **Country visits**

These visits have included:

- BMA House London
- Livingston Zambia
- Helsinki
- Alpbach Austria
- USA, various cities
- Suriname
- Taipei
- Sweden – Commissions++
- Kolkata
- Bangkok
- Istanbul
- Tashkent, Uzbekistan
- Montevideo
- Buenos Aires
- Ghent and Brussels
- Trinidad and Tobago
- Panama
- Canada various cities
- German MA, Hamburg
Geneva
Tel Aviv
Tokyo
Australia
Malta
Sri Lanka

I single out Sweden from this list to make the point that action on social determinants of health and health equity can be at city level as well as at country level. Sweden has now set up a national commission on social determinants of health. But prior to that it had several city commissions to plan city level action.

Similarly in the UK, we have had action at city level which is very encouraging.

We did a report for the government of Taiwan on health inequalities. We recommended cross government action on the social determinants of health.

2. Networking with groups

My general strategy has been to probe gently to see where interest is to be found. I have spoken at meetings of CONFEMEL, the confederation of Latin American Medical Societies, CMAAO, confederation of medical associations of Asia and Oceania, the Commonwealth Medical Association, and the World Health Professionals Alliance. I spoke at the EFMA meeting in Uzbekistan, which involved doctors from the Eastern part of the WHO European Region.

We have a partnership which includes the constituent countries of the UK – England, Scotland, Wales and Northern Ireland – as well as the Republic of Ireland.

We held a side event with the International Committee of the Red Cross at the World Health Assembly. We will now be working with them to bring a social determinants of health framework to their work.

3. Commission on Equity and Health Inequalities in the Americas

I have been asked by the Pan American Health Organisation, PAHO, to lead a review of social justice and health in the Americas. It will focus on social determinants of health putting equity and human rights, gender and ethnic differences, at the heart of social action to improve health. I will seek to engage the active cooperation of medical societies. We have now had our second meeting of Commissioners. We are due to report in Spring 2018.

Fourteen countries will become active partners in this PAHO Commission.

While in Washington DC, I came across this quotation from President FD Roosevelt:

*In these days of difficulties, we Americans must and shall choose the path of social justice...the path of faith, the path of hope, and the path of love toward our fellow man.*

Inspiring words for our Commission on Equity.
Fantasy Land?

I was in Australia giving lectures for the ABC. On a Television programme I described extreme inequalities in income. I used the example that the top 25 hedge fund managers in New York, with a combined annual income of $25 billion, had the same combined income as the 48 million people of Tanzania. When I mused about what a fairer distribution of income could achieve, I was told I was in Fantasy Land.

In my lecture I responded. When Martin Luther King rose in Washington to declare: “I have a dream that on the red hills of Georgia, the sons of former slaves and the sons of former slave owners will be able to sit down together at the table of brotherhood”, what if he had said: “I’ve been told I’m in Fantasy Land. We should accept the status quo”, there would have been no civil rights act.

Let me invite you to join me in my Fantasy Land and let us seek a fairer world and more socially just societies.