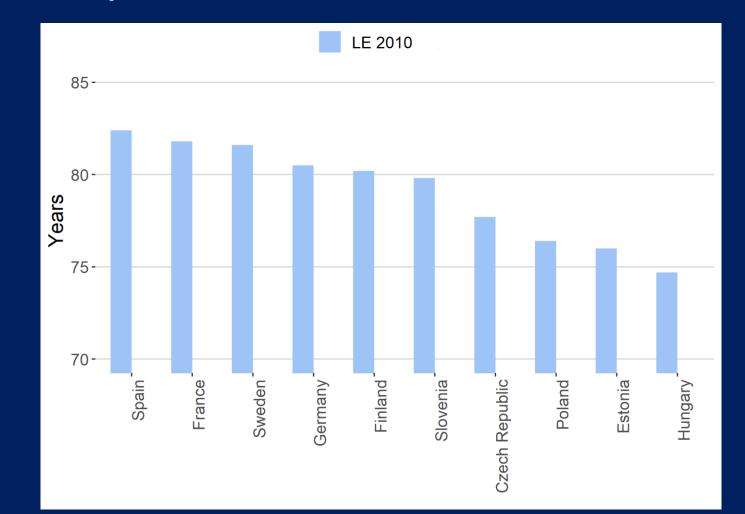
Health Inequalities in Europe: Setting the Stage for Progressive Policy Action

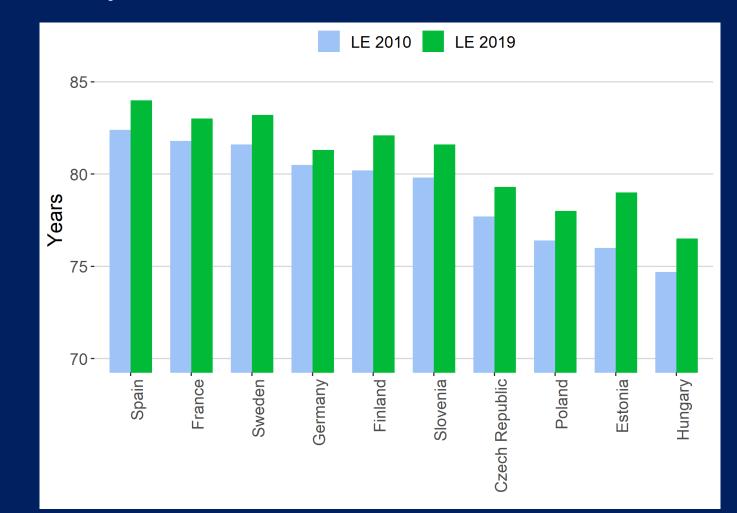
Timon Forster Alexander Kentikelenis Clare Bambra

In some ways, the health of Europeans is better than ever

Life expectancy at birth

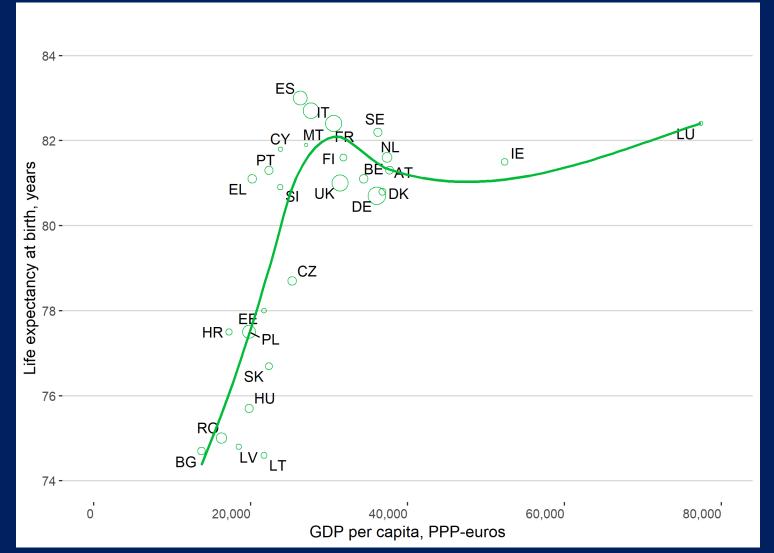


Life expectancy at birth



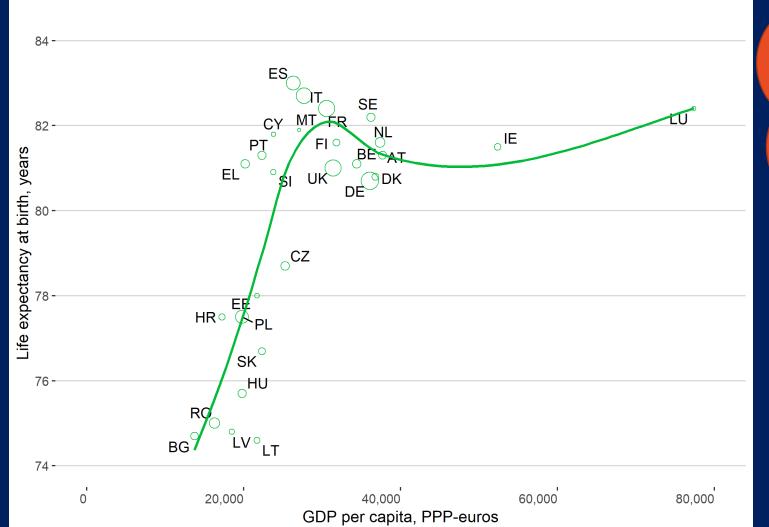
But substantial inequalities in health persist

Between country inequalities



<u>Note</u>: Data refer to 2015. Observations are weighted by the relative population size, indicated by circle size.

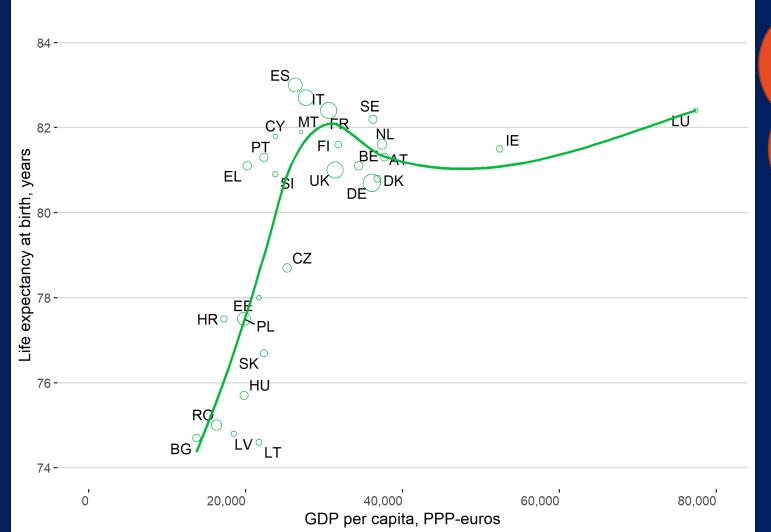
Between country inequalities



Life expectancy is higher in richer countries

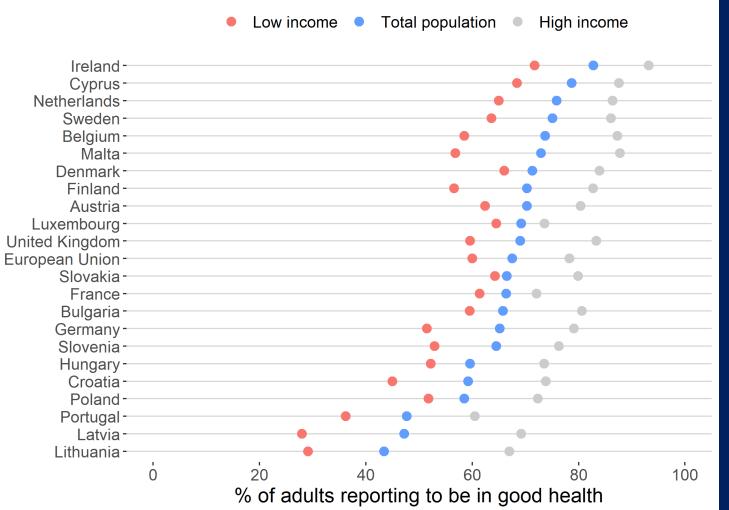
<u>Note</u>: Data refer to 2015. Observations are weighted by the relative population size, indicated by circle size.

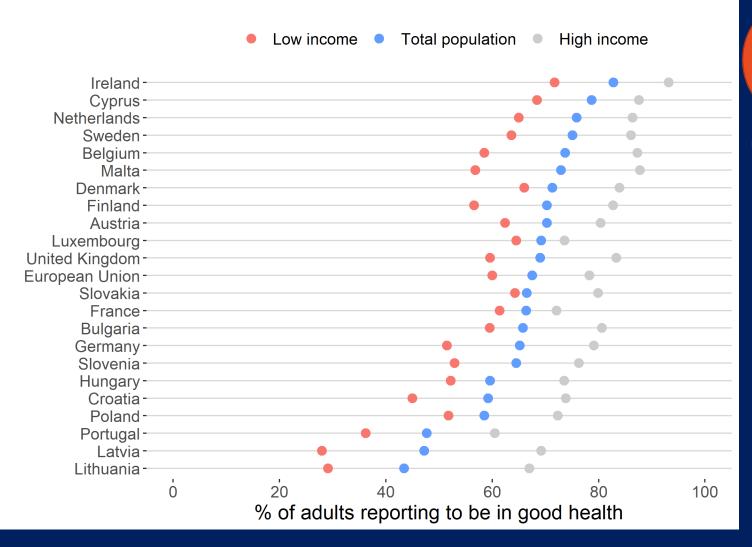
Between country inequalities



Life expectancy lower in Eastern European countries

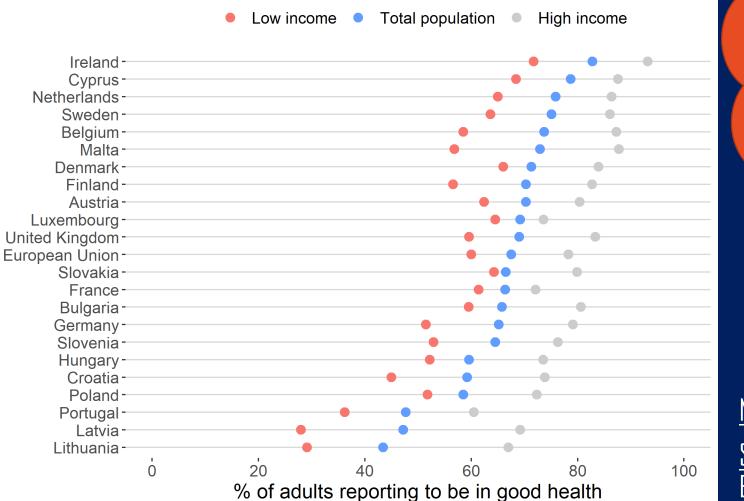
<u>Note</u>: Data refer to 2015. Observations are weighted by the relative population size, indicated by circle size.



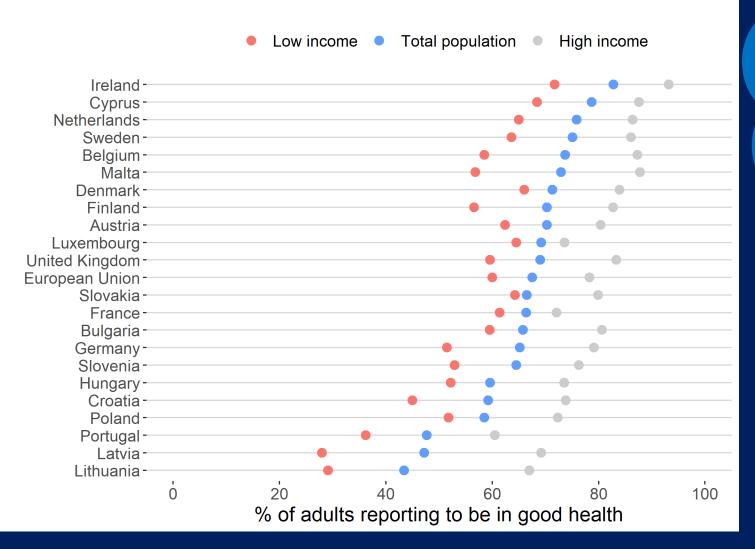


Proportion of individuals reporting good health increases with income...

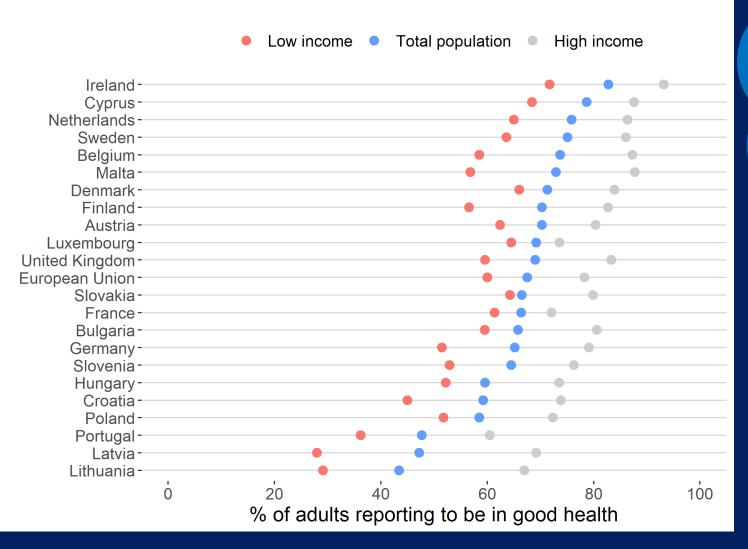
<u>Note</u>: Data refer to 2016. <u>Source</u>: Authors, based on data by Eurostat (2018).



...but still considerable variation!



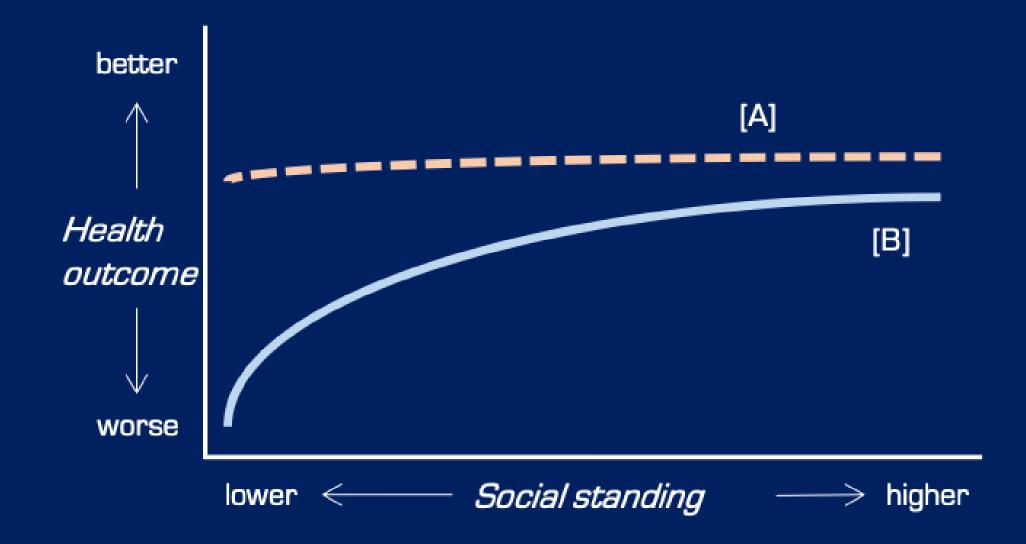
EU: 60% low-income individuals reporting good health vs. 78% high-inc.

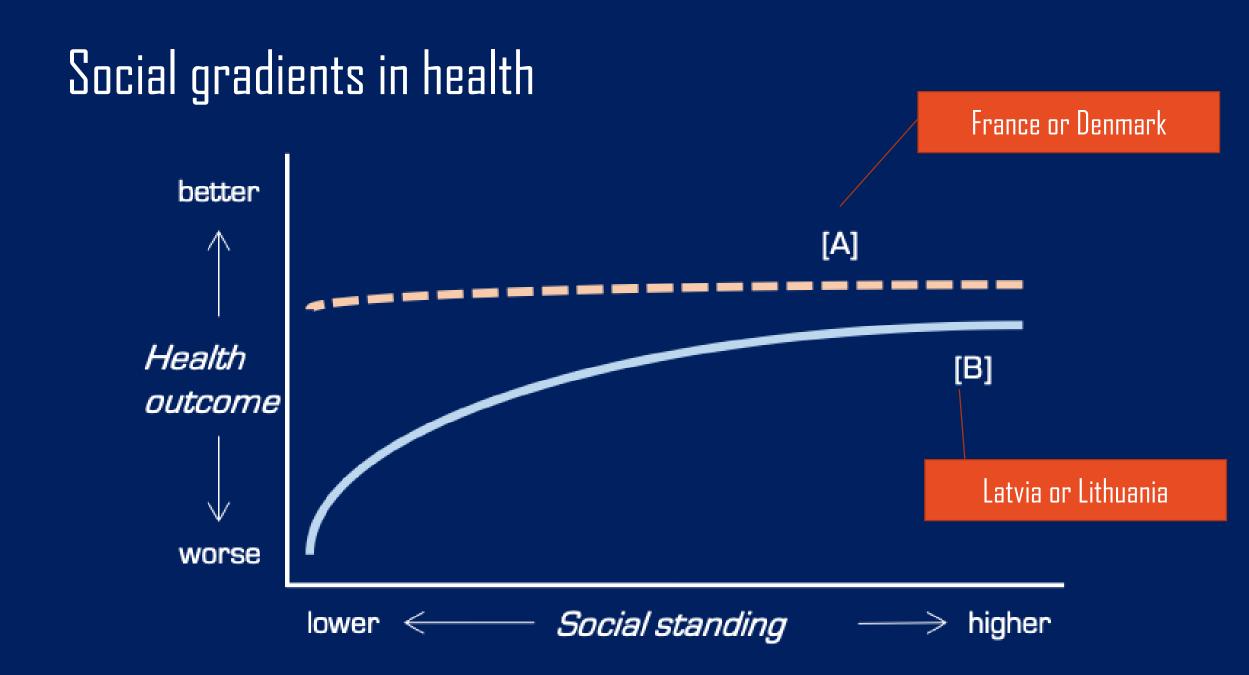


Slovenia (2019): 49% low-income individuals reporting good health vs. 79% high-inc.

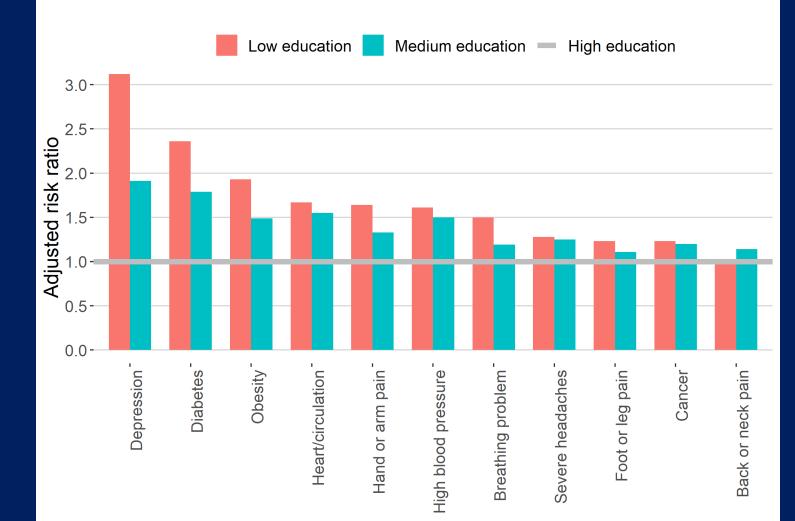
How to understand health inequalities?

Social gradients in health





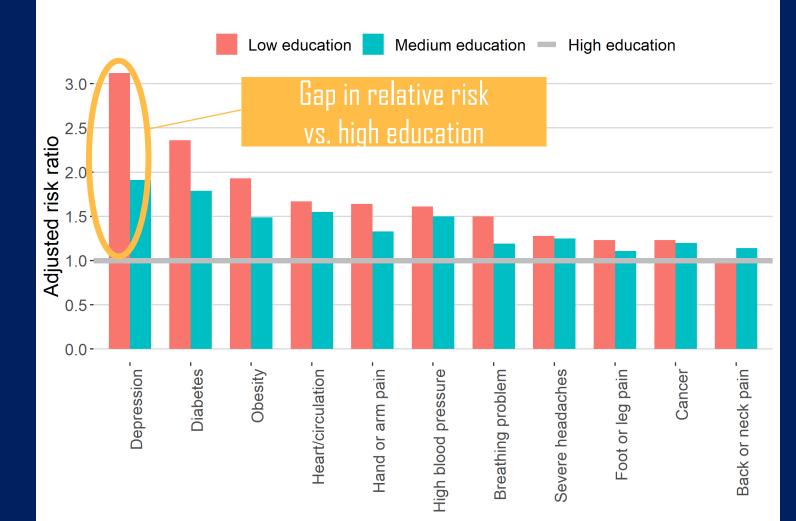
Non-communicable diseases in Europe



Note: Data refer to 2014.

<u>Source</u>: Authors, based on data by McNamara et al. (2017) from the European Social Survey 2014.

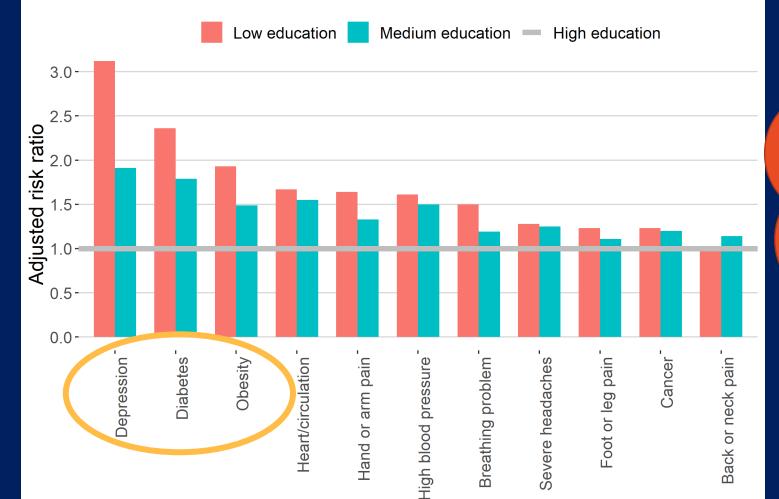
Non-communicable diseases in Europe



Note: Data refer to 2014.

<u>Source</u>: Authors, based on data by McNamara et al. (2017) from the European Social Survey 2014.

Non-communicable diseases in Europe

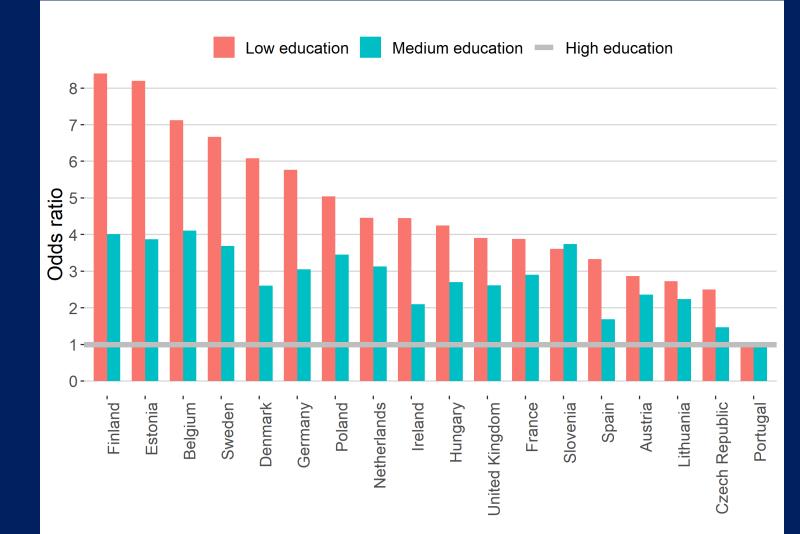


Someone with low educ is 3x more likely than someone with university educ to report depression

Note: Data refer to 2014.

<u>Source</u>: Authors, based on data by McNamara et al. (2017) from the European Social Survey 2014.

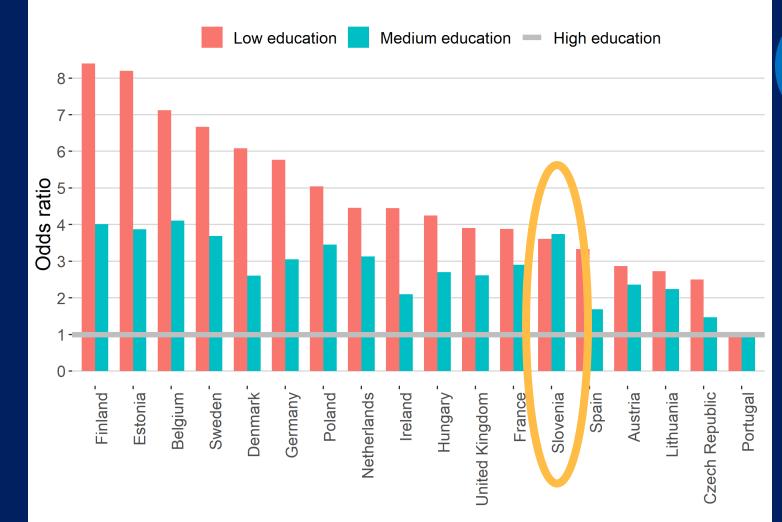
Risk of being a daily smoker



Note: Data refer to 2014.

<u>Source</u>: Authors, based on data by Huijts et al. (2017) from the European Social Survey 2014.

Risk of being a daily smoker

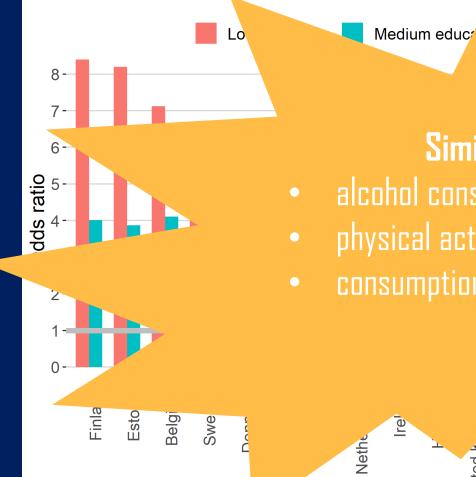


Slovenia: Individuals w/low-middle educ 3.5x more likely to smoke (vs. individuals w/high educ)

<u>Note</u>: Data refer to 2014.

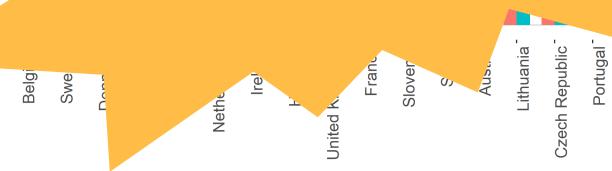
<u>Source</u>: Authors, based on data by Huijts et al. (2017) from the European Social Survey 2014.

Risk of being a daily smoker



Similar patterns:

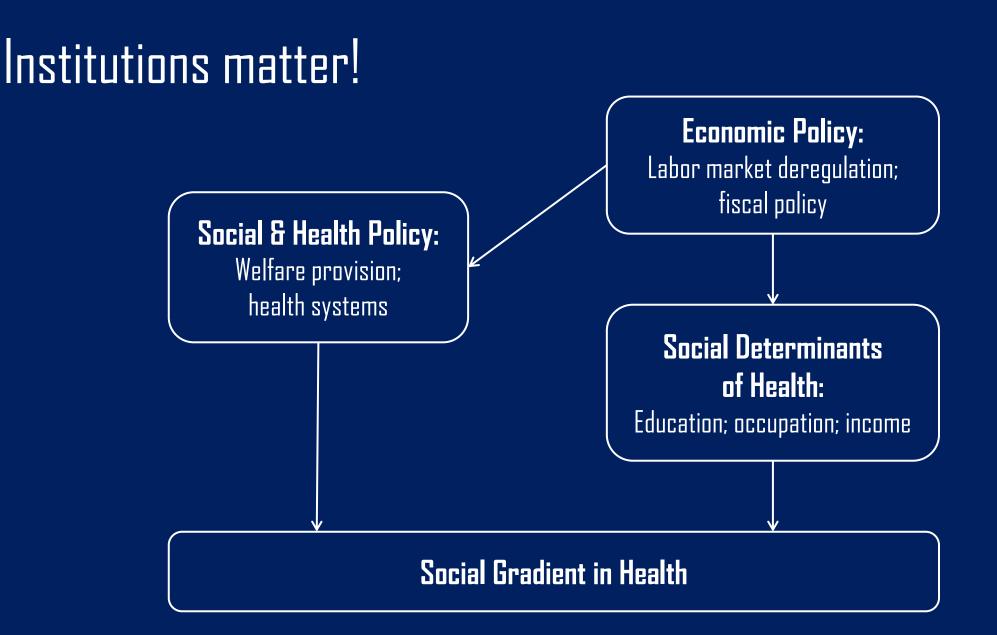
- alcohol consumption
- physical activity
- consumption of healthy food



Note: Data refer to 2014.

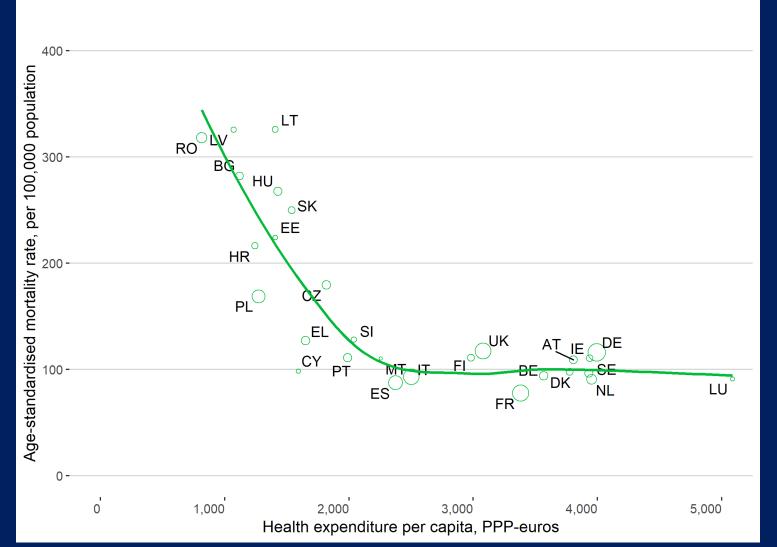
Source: Authors, based on data by Huijts et al. (2017) from the European Social Survey 2014.

What determines health inequalities?



1. The role of health systems

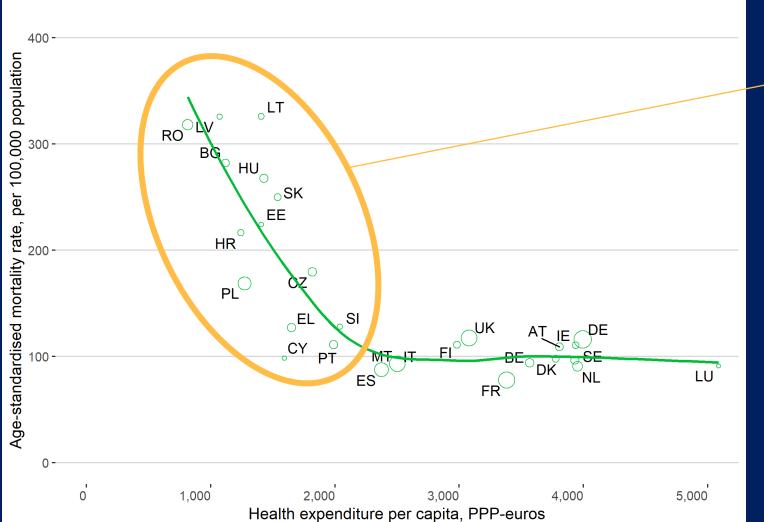
The role of health systems: *preventable deaths*



<u>Note</u>: Data refer to 2015. Observations are weighted by the relative population size, indicated by circle size.

<u>Source</u>: Authors, based on data by Eurostat (2018), OECD/European Observatory on Health Systems & Policies (2017).

The role of health systems: *preventable deaths*



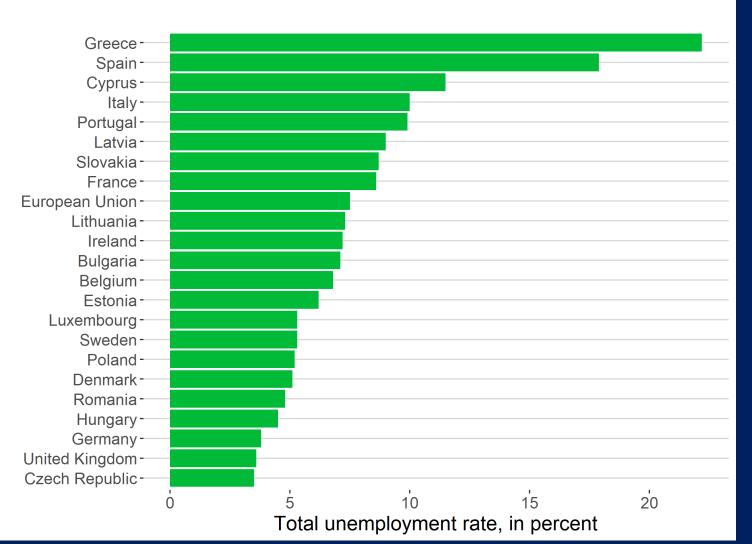
Amenable mortality above the EU average → increasing health spending can lead to better outcomes

<u>Note</u>: Data refer to 2015. Observations are weighted by the relative population size, indicated by circle size.

<u>Source</u>: Authors, based on data by Eurostat (2018), OECD/European Observatory on Health Systems & Policies (2017).

2. The role of economic policies

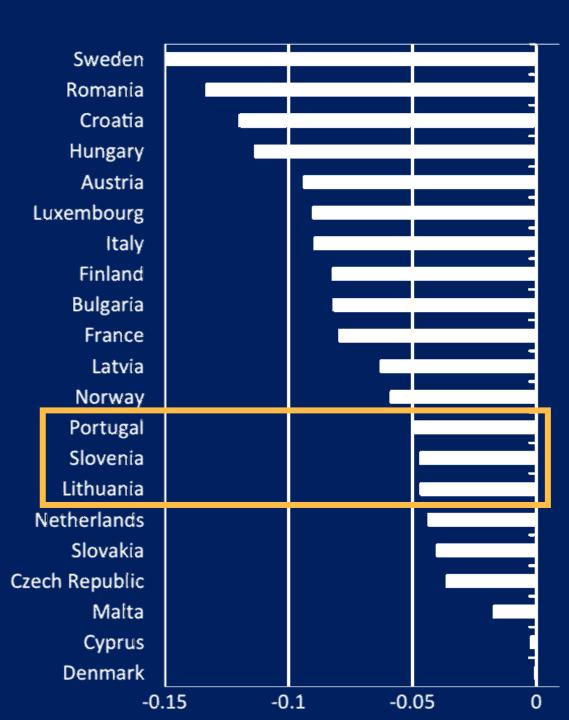
The role of economic policies



<u>Note</u>: Total unemployment rate is the annual average as a share of the active population, from 25 to 74 years. Data refer to 2016.

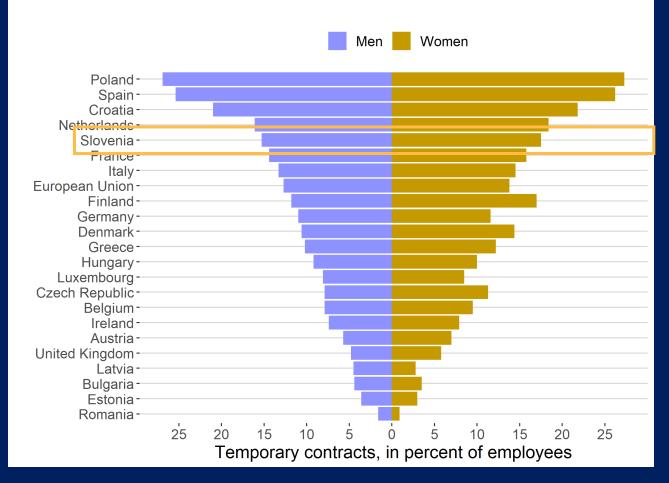
Transition to unemployment & health

<u>Data</u>: Self-reported health. <u>Source</u>: Tøge et al. (2015).



3. The role of the social determinants of health

The role of social determinants of health



<u>Note</u>: Percentage of employees aged 20 to 64. Data refer to 2016. <u>Source</u>: Authors, based on data by Eurostat (2018)

Good work \checkmark Higher wages Self-worth ✓ Social networks **Precarious Employment** X Stress and Insecurity \times Long working hours \times Lower wages

What is the impact of health inequalities?

The cost of health inequalities

• Good health empowers individuals: enables better, informed choices regarding lifestyle & health service access/utilisation

• III-health has adverse effects on

a) Well-being (e.g., employment opportunities, status, social connectedness)
b) Families and communities (e.g., social connectedness)
c) Welfare costs (e.g., cost of health services)
d) Economic costs (e.g., due to absenteeism, unemployment & lower productivity)

Has the pandemic made things worse?

COVID-19 and health inequalities

• Features of the pandemic ...

a) Virus-related infection and mortality: Different exposure to risk and vulnerabilityb) Health costs: reduced access to healthcare services for non-COVID-reasons

COVID-19 and health inequalities

• Features of the pandemic ...

a) Virus-related infection and mortality: Different exposure to risk and vulnerabilityb) Health costs: reduced access to healthcare services for non-COVID-reasons

- ... and policy responses
 - c) Lockdown: Increase in social isolation
 - d) Short and long-term effects through economic pathways (e.g., job loss or austerity)

A progressive agenda for action



Thank you!



in Europe: Setting the Stage for Progressive Policy Action

Health

Inequalities

Think-tank for action on social change

Tas