

Socioekonomske nejednakosti i zdravlje



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Osnovni pojmovi

- **Jednakost** - vrijednosno i etički neutralan pojam koji označava istost (engl. *equality*)
- **Pravičnost (pravednost)** - pojam koji se temelji na vrijednosnoj i moralnoj prosudbi pojedinaca, društvene skupine, društva ili međunarodne zajednice (engl. *equity*)

Definicija SEN u zdravlju

- Pojava različitih zdravstvenih pokazatelja i ishoda među osobama koje imaju drugačiji socioekonomski status



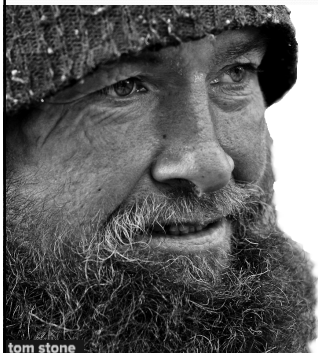
Odrednice zdravlja



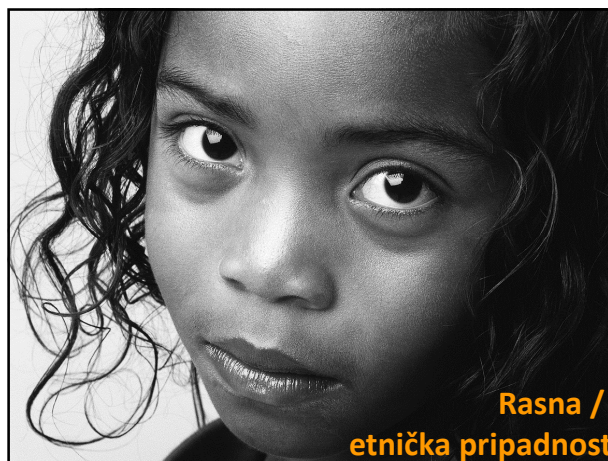
The King's Fund

The Acheson Report (1998)

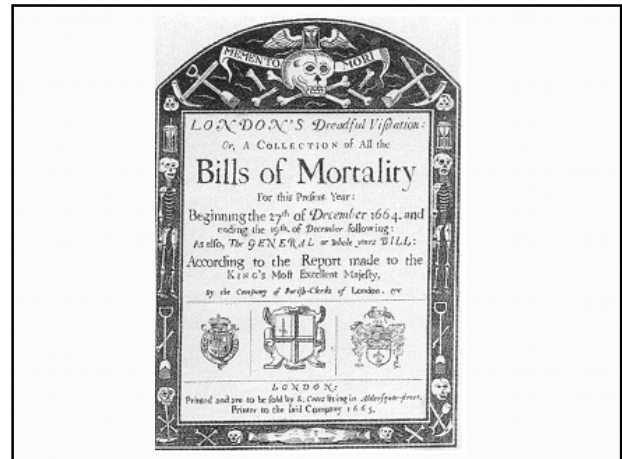
Glavne sastavnice SE statusa



- Obrazovanje
- Zanimanje
- Bračno stanje
- Materijalno stanje
 - (objektivno ili subjektivno)
- Veličina društvene mreže
- Podrijetlo
- ...



Rasna /
etnička pripadnost



Društvena stratifikacija u Velikoj Britaniji

- I **stručnjaci** (*professionals*) - liječnici, odvjetnici, knjigovođe;
- II **srednji niži stručnjaci, posrednici** (*intermediate*) - manageri, medicinske sestre, nastavnici;
- III N **obrazovani nemanualni** (*skilled non-manual*) - službenici, tajnice, prodavači;
- III M **kvalificirani manualni** (*skilled manual*) - vozači, mesari, rudari;
- IV **djelomično kvalificirani** (*partly skilled*) - radnici u poljoprivredi, poštari, kondukteri;
- V **nekvalificirani** (*unskilled*) - čistači, lučki radnici

Townsend and Davidson 1982

Povijest istraživanja SEN

- The Black Report (1980)
- The Health Divide (1987)
- Working Together for a Healthier Scotland (1998)
- The Acheson Report (1998)

Table 2.1: Death rates by sex and social (occupational) class (15-64 years)

Rates per 1000 population England and Wales 1971

Social (occupational) class	Males (all)	Females	Ratio M/F
I (Professional)	3.98	2.15	1.85
II (Intermediate)	5.54	2.85	1.94
IIIa (Skilled non-manual)	5.80	2.76	1.96
IIIb (Skilled manual)	6.08	3.41	1.78
IV (Partly Skilled)	7.96	4.27	1.87
V (Unskilled)	9.88	5.31	1.86
Ratio V/I	2.5	2.5	

The Black Report (1980)

TABLE 2.4 Occupational Class and Birth Weight

Birth weight	class (mother's husband)			Fatherless
% who were	(I & II)	III	(IV and V)	
Less than 2500 grams	4.5	5.6	8.2	9.5
More than 3000 grams	81.0	76.3	72.7	66.7

The Black Report (1980)

TABLE 2:14 Sickness and Medical Consultation in Middle Age (45-64) (rates per 1,000 population)

Socioeconomic group	Longstanding illness		Restricted Activity	
	Males	Females	Males	Females
1. Professional	228.9	291.3	71.1	92.2
2. Managerial	257.0	265.7	75.4	77.0
3. Intermediate	368.0	329.7	98.4	94.6
4. Skilled manual	357.7	315.1	102.6	102.7
5. Semi-skilled manual	387.6	380.8	101.0	114.9
6. Unskilled manual	485.5	401.6	120.0	111.9

The Black Report (1980)

Usporedivost SEN?



Teorijska podloga SEN

- Materijalna / neomaterijalna teorija
- Sociološka / Teorija društvene mreže/socijalni kapital
- Obrazovna teorija
- Cjeloživotna teorija (engl. *life-long*)

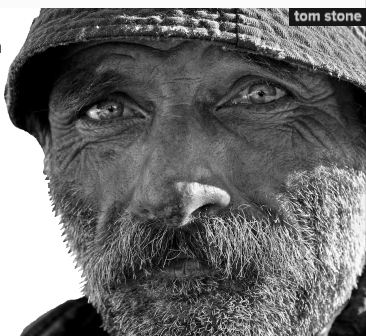


Socijalni kapital

- Snaga zajednice
 - Veza među ljudima i njihove interakcije
- Šest sastavnica
 - Uključenost građana (volonteri)
 - Povjerenje (šetnja noću)
 - Odgovornost građana (novčanik)
 - Snaga članova zajednice (aktivnosti u zajednici)
 - Mreže (*bonding* i *bridging*)
 - Vitalnost kolektiva (raznolikost članova)

Socijalni kapital – uvjetni kapital

- Formalni
 - Članstvo u udrugama
- Neformalni
 - Opseg prijatelja
 - Komuniciranje sa susjedima



Teren za istraživanje socijalnog kapitala

- Migranti
- Studenti
- Škola
- Recesija

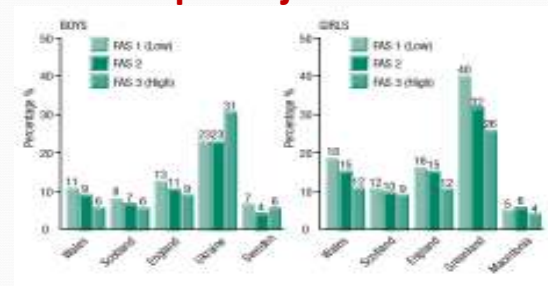


SEN danas



- Znanstvena istraživanja gotovo sustavno prikazuju lošije zdravstvene pokazatelje osoba s nižim SE statusom
- Često se prikazuje i **socioekonomski gradijent** – progresivno lošiji ishodi osoba s nižim SE statusom

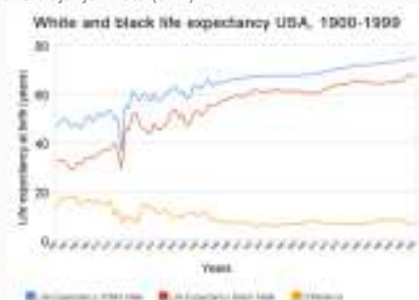
SES oca i pušenje



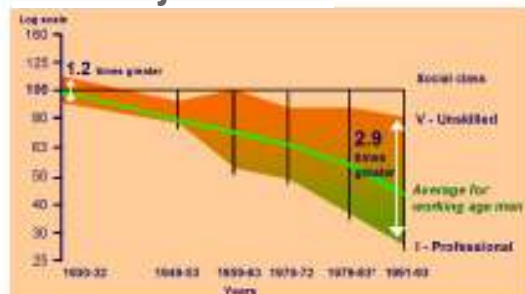
HBSC Survey, 2001

Promjene kroz vrijeme

Očekivano trajanje života (SAD)



Povećanje razlike?



PROSJEČNA NETO PLAĆA

Prosječna mjesečna isplaćena za rujan 2010. iznosila je 5 291 kunu.



Struktura dohodovne nejednakosti u odabranim srednjoeuropskim zemljama

	Hrvatska		Mađarska		Češka Republika		Slovačka	
	Udio u dohotku	Doprinos nejednakosti	Udio u dohotku	Doprinos nejednakosti	Udio u dohotku	Doprinos nejednakosti	Udio u dohotku	Doprinos nejednakosti
Plaće	59.6%	0.188	74.1%	0.277	77.6%	0.237	77.3%	0.214
Ostali tržišni dohoci**	32.2%	0.232	4.7%	0.025	8.7%	0.032	6.1%	0.027
Naturalni dohodak***	6.5%	0.008	7.9%	0.015	5.7%	0.010	7.3%	0.015
Privatni transferi	5.7%	0.014	2.6%	0.006	1.3%	0.004	1.2%	0.003
Mirovine	15.6%	0.002	24.2%	0.028	12.6%	-0.048	11.1%	-0.036
Ostali transferi	3.9%	0.001	10.0%	-0.019	10.2%	-0.008	11.5%	-0.008
Porezi i doprinosi	-23.5%	-0.092	-23.4%	-0.100	-16.1%	-0.054	-14.5%	-0.047
Neto dohodak	100.0%	0.352*	100.0%	0.232*	100.0%	0.174*	100.0%	0.168*

Korištenje skrininga

ORIGINAL RESEARCH

Breast, colon, and prostate screening in the adult population of Croatia: does rural origin matter?

O Polasek¹, I Kolcic¹, L Voncina¹, M Strnad², S Vuletic¹, J Kern¹

¹Andrija Stampar School of Public Health, Medical School, University of Zagreb, Rockefellerova, Croatia

²Croatian National Institute for Public Health, Rockefellerova, Croatia

Polasek O, Voncina L, Kolcic I, Strnad M, Vuletic S, Kern J. Social disparities related to breast, colon and prostate cancer screening in the adult population of Croatia – Does rural origin matter? Rural and Remote Health 2007;7(3):749.

Socioekonomski gradijent

Predictor	Breast (women)
Education	
Without primary school	10.9 [8.8-12.9]
Completed primary school	18.9 [16.6-21.2]
Completed secondary school	30.4 [27.9-32.9]
University degree	38.0 [33.1-42.8]
Occupation	
Blue collar	17.2 [15.3-19.0]
White collar	32.7 [30.0-35.4]
Residence	
Urban	27.4 [25.7-29.1]
Rural	14.5 [12.6-16.2]
Household income	
Less than 2000 Kn	12.6 [10.6-14.6]
2001-4000 Kn	23.0 [19.3-26.7]
4001-6000 Kn	26.6 [23.4-29.8]
More than 6000 Kn	30.7 [26.9-34.5]

Polašek O et al. Rural Remote Health 2007;7:e749

Rural and Remote Health

The International Journal of Rural and Remote Health Research, Education, Practice and Policy

Podrijetlo i uspjeh studenata medicine?

Student variable	Student group			
	High-urban	Mid-urban	Rural and remote	P
Number of students (n, %)	100 (49.0)	75 (36.8)	29 (14.2)	n/a
Females (n, %)	61 (61.0)	54 (72.0)	20 (69.0)	0.296
Age (median and interquar)	25.0 (2.0)	25.0 (1.0)	25.0 (1.5)	0.421
Grade point average (n range)	3.8 (0.8)	3.5 (0.6)	3.5 (0.5)	0.022
Ever failed a year	32 (32.0)	31 (41.9)	17 (58.6)	0.032
Multiple year failures (n, %)	7 (7.0)	6 (8.1)	4 (13.8)	0.030
Research involvement (n, %)	30 (30.0)	13 (17.3)	4 (13.8)	0.002

Polašek O. et al. Rural Remote Health. 2006;6(2):e530.

Rodne (spolne) razlike

Table 1. Age, education level, and socioeconomic status in the sample of adult population of island Vis, Croatia

Variable	Men; median (25, 75 percentile)	Women; median (25, 75 percentile)	P*
Age	56.0 (46.0, 68.0)	56.0 (45.0, 70.0)	0.555
Education level	11.0 (8.0, 12.0)	9.0 (7.0, 12.0)	<0.001
Socioeconomic status†	10.0 (8.0, 12.0)	9.0 (7.0, 11.0)	<0.001

*Mann-Whitney test.
†Defined as the sum of 16 various material household possessions.

SES; 16 pitanja: WC, drvene podove, 2 televizora, umjetničke predmete, biblioteku, drugi stan, brod, ...

Smoljanovic A, et al. Croatian Medical Journal. 2007;48(5):734-40.

SES supružnika

- Muškarci "imaju" oko 10% bolje materijalno stanje od svojih supruge s kojima dijele kućanstvo



Kolcic I, et al. Journal of Epidemiology and Community Health. 2009;63(2):175-6.

Subjektivna procjena materijalnog stanja, muškarci

	Below average	The same as average	Above average
Men			
Northern Croatia	34.6	53.2	12.3
Central Croatia	47.4	44.2	8.4
Eastern Croatia	31.9	50.5	17.6
Western Croatia	33.6	57.6	8.7
Southern Dalmatia	40.2	47.1	12.7
City of Zagreb	29.4	53.1	17.5
Total men	36.6	50.3	13.0

Polasek O, et al. Collegium Antropologicum. 2009;33 (Suppl 1):171-6.

Subjektivna procjena materijalnog stanja, žene

	Below average	The same as average	Above average
Northern Croatia	38.8	51.6	9.6
Central Croatia	42.9	47.9	9.3
Eastern Croatia	39.5	51.6	8.8
Western Croatia	36.5	52.7	10.8
Southern Dalmatia	39.5	50.6	9.9
City of Zagreb	31.9	51.7	16.5
Total women	38.3	50.8	10.8
Total Croatia	37.5	50.6	11.9

Polasek O, et al. Collegium Antropologicum. 2009;33 (Suppl 1):171-6.

Sudjelovanje u anketama, M

		20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	over 84
CAHS	Coll_Uni	0.0	-0.6	-0.6	-0.5	-0.7	0.3	0.0	1.1	0.7	1.0	0.9	0.5	0.4	0.1
	Sec.	-4.9	-4.0	-2.8	-2.3	-0.5	-0.5	1.6	1.1	1.6	2.1	2.9	2.1	0.4	0.0
	Prim.	-0.9	-1.0	-0.7	-0.3	-0.2	-0.3	0.2	0.3	0.9	1.6	2.0	1.4	0.6	0.1
	W/O	-0.2	-0.1	-0.1	-0.1	-0.4	-0.5	-0.1	-0.5	-1.2	-0.5	-0.3	0.2	0.4	-0.3
CHS	Coll_Uni	0.4	1.7	0.2	0.2	-0.2	-0.1	1.6	0.5	0.1	1.0	1.0	0.2	0.2	0.0
	Sec.	-1.3	1.6	-0.8	-1.6	-2.0	-1.2	-0.6	0.1	2.0	2.2	1.5	1.1	0.3	0.4
	Prim.	-0.7	-0.8	-0.9	-1.1	-0.5	-0.8	-0.5	0.3	0.2	1.1	0.6	0.5	0.5	0.4
	W/O	-0.2	-0.1	-0.1	-0.2	-0.3	-0.5	-0.6	-0.8	-1.2	-0.6	-1.1	-0.2	-0.2	-0.1
TPS	Coll_Uni	-0.1	-0.8	-0.4	-0.8	-0.2	-0.1	0.6	0.5	0.4	0.5	1.2	0.1	-0.1	-0.1
	Sec.	-1.9	-1.3	-1.3	-2.8	0.7	3.6	0.2	0.7	1.2	1.1	1.7	0.7	-0.3	-0.1
	Prim.	-0.9	0.0	-0.1	0.9	0.3	-0.4	0.7	1.4	0.7	0.2	0.2	2.1	-0.2	0.0
	W/O	0.0	-0.2	0.0	-0.3	0.2	-0.6	-0.8	-1.1	-1.5	-2.3	-0.5	-0.2	-0.5	-0.4

LEGEND

Underestimation (-1.0 and more)
Mild underestimation (-0.6 to -0.9)
Representative (-0.5 to 0.5)
Mild overestimation (0.6 to 0.9)
Overestimation (1.0 and more)

Kolčić I and Polašek O. Do public health surveys provide representative data? Comparison of three different sampling approaches in the adult population of Croatia? Collegium Antropologicum, In Press 2009.

Sudjelovanje u anketama, Ž

CAHS	Coll_Uni	0.0	-0.7	-0.3	-0.4	0.0	-0.2	0.2	0.5	0.4	0.4	0.1	0.1	0.1	0.1
	Sec.	-3.9	-1.6	-1.1	-0.4	-0.3	0.3	0.4	1.1	1.0	0.9	0.9	0.4	0.5	0.0
	Prim.	-0.5	-0.5	-0.3	-0.6	-0.4	-0.3	0.5	1.0	1.0	3.1	1.2	1.0	1.0	0.1
	W/O	0.0	-0.1	-0.1	-0.2	-0.3	-0.2	-0.5	-1.0	-1.6	-0.7	0.2	0.6	0.5	-0.7
CHS	Coll_Uni	0.4	0.5	-0.2	0.7	0.2	0.5	0.5	0.0	0.2	0.2	0.1	0.1	0.0	0.2
	Sec.	-1.3	1.6	-0.1	-0.8	0.0	-0.4	0.1	0.3	0.5	1.2	1.1	1.0	0.1	0.2
	Prim.	-0.3	-0.3	-0.5	-0.9	-0.7	-0.3	-0.4	0.7	0.8	1.4	1.6	1.0	0.5	0.4
	W/O	-0.1	0.0	-0.1	-0.2	-0.5	-0.5	-0.7	-0.3	-1.6	-1.4	-1.7	-1.4	-0.8	-0.6
TPS	Coll_Uni	0.6	-0.7	-0.4	-0.4	-0.2	-0.3	0.6	0.7	0.2	0.4	0.1	0.0	-0.1	0.0
	Sec.	-4.0	-2.1	-1.4	0.2	-0.1	1.8	0.9	2.1	2.2	0.8	0.6	0.0	-0.2	-0.2
	Prim.	-0.8	-0.2	0.7	1.1	0.6	0.2	0.4	4.4	4.0	3.4	2.6	0.5	-0.4	-0.1
	W/O	-0.1	-0.1	0.6	-0.3	-0.6	-0.8	-1.3	-1.9	-3.6	-3.2	-2.2	-1.6	-1.5	-1.2

LEGEND

Underestimation (-1.0 and more)
Mild underestimation (-0.6 to -0.9)
Representative (-0.5 to 0.5)
Mild overestimation (0.6 to 0.9)
Overestimation (1.0 and more)

Kolčić I and Polašek O. Do public health surveys provide representative data? Comparison of three different sampling approaches in the adult population of Croatia? Collegium Antropologicum, In Press 2009.

Pravilo inverzne zaštite

- Inverse care law
- Ljudi kojima je skrb najpotrebnija imaju najmanju šansu da ju i dobiju
- Razlozi:
 - Financijske prepreke
 - Zemljopisne i logističke prepreke
 - Kulturalne prepreke



tom stone

Klizanje nadolje



- **Downward drift**
- Ljudi lošijeg zdravlja imaju progresivno lošiji socioekonomski status, što negativno utječe na zdravlje
- Npr. siromaštvo i depresija – depresivne osobe imaju lošije poslove, a u konačnici bez posla im se pojačavaju simptomi depresije

tom stone

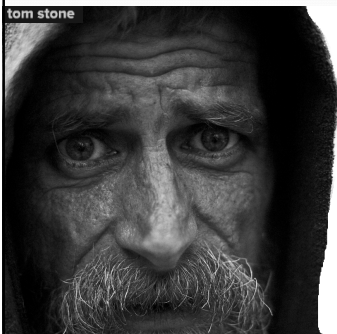
Kako smanjiti utjecaj SEN?

- **Mjere socijalne politike:** povećanje prihoda i obrazovanja, smanjenje nezaposlenosti, poboljšanje stanovanja, ...
- **Mjere za unapređenje zdravog življenja:** mjere za promociju zdravog ponašanja
- **Unapređenje dostupnosti** socijalnih i zdravstvenih usluga za svakoga



tom stone

Ciljane intervencije



- Provedba programa na razini populacije vjerojatno će **povećati** SEN
- Potrebno je istražiti, osmisliti i provoditi ciljane intervencije
- Mjere prema siromašnima ne mogu biti iste kao mjere prema bogatima

tom stone

Dostupnost zdravstvene skrbi

Predictor	Breast (women)		Prostate (men)	
	OR	P	OR	P
Access				
Problems [Ref.]	1.00		1.00	
No problems	1.76	<0.001	1.67	0.037
	[1.25-2.45]		[1.03-2.69]	

Predictor	Colon (men)		Colon (women)	
	OR	P	OR	P
Access				
Problems [Ref.]	1.00		1.00	
No problems	1.92 [1.03-0.58]	0.040	3.38 [2.03-5.62]	<0.001

Polašek O et al. Rural Remote Health 2007;7:e749



tom stone

Reorganizacija zdravstvenog sustava



- Fokus na dostupnosti zdravstvene skrbi
- **Sveobuhvatnost** – Ustav RH jamči svakom građaninu pravo na zdravstvenu zaštitu
- **Kontinuiranost** – zdravstvena zaštita kroz cijeli život
- **Dostupnost** – raspored zdravstvenih ustanova

tom stone

Socioekonomske nejednakosti i zdravlje

Svi grafički i video materijali u ovoj prezentaciji korišteni su isključivo u obrazovne svrhe, a dobiveni su pretraživanjem sadržaja na Internetu. Neki dijelovi prezentacije preuzeti su iz drugih javno dostupnih prezentacija u izvornom ili prilagođenom obliku. Neki materijali su promijenjeni da bolje odgovaraju sadržaju koji predstavljaju. Prezentacija predstavlja stavove autora, i nikako ne odražava službene stavove Medicinskog fakulteta Sveučilišta u Splitu. Autor zahvaljuje svim osobama koje su doprinijele postavljanjem svojih sadržaja na Internet.

Za sva dodatna pitanja obratite se autoru prezentacije na e-mail adresu: ozren.polasek@mefst.hr



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Katedra za javno zdravstvo