

# **Social Inequalities in the State of Health**

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# Keywords

- Social determinants of health
- Educational attainment
- Life expectancy
- Healthy life expectancy
- The East-West health divide
- Gender inequalities
- Vaccine non-compliance
- Health risks

# Functional limitations: social determinants

Large population-based survey data

European Social Survey (2016), N=28.221

*Odds ratios are calculated for living free of functional limitations*

Functional limitations are associated with (in descending order):

- **perceived socio-economic status** (poor – affluent)
- **welfare system** type (post-socialist countries – conservative welfare model)
- **gender**
- **partnership** status (single – coupled)
- **employment relation** (employee – self-employed – unemployed)

# Mental health: social determinants

Large population-based survey data  
European Social Survey (2018), N=14.525

*Mental health is measured with the CESD-8 scale,  
impact of predictors are calculated*

Mental health is determined by (in descending order):

- **Income**
- **Partnership status**
- **Migration status**
- **Number of intimate social relations**
- **Employment contract type** (limited - unlimited - no contract)
- **Gender**

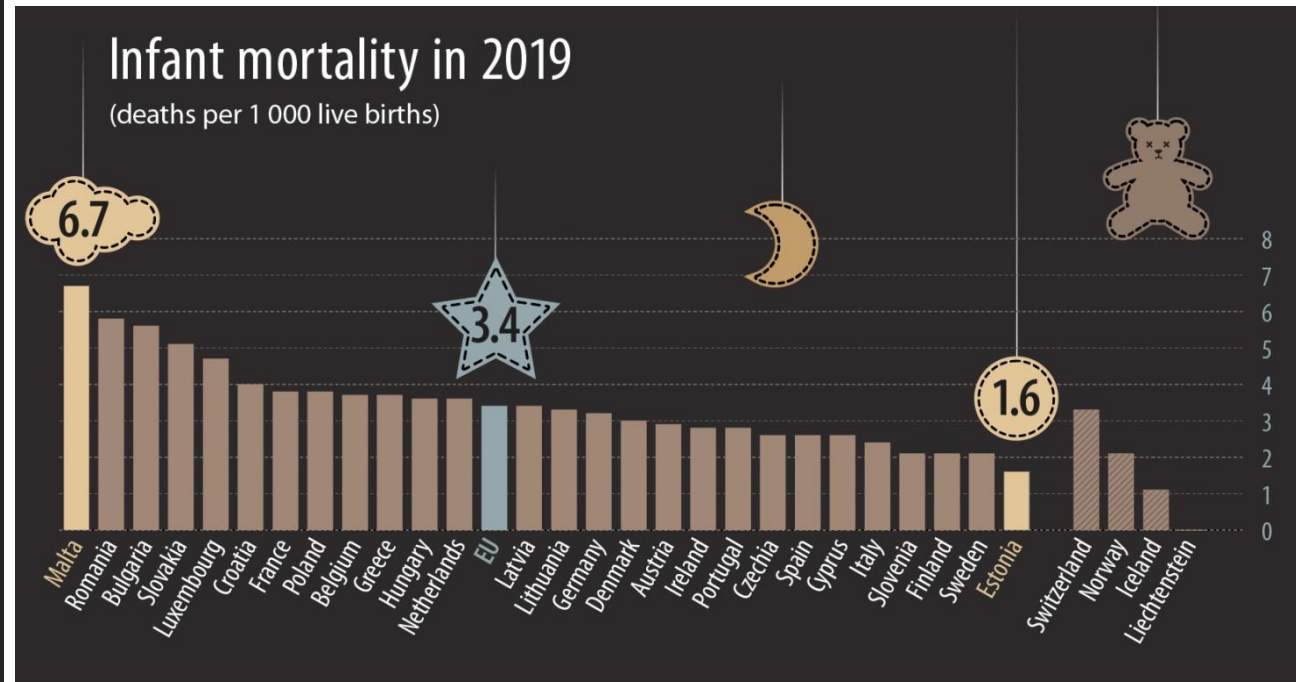
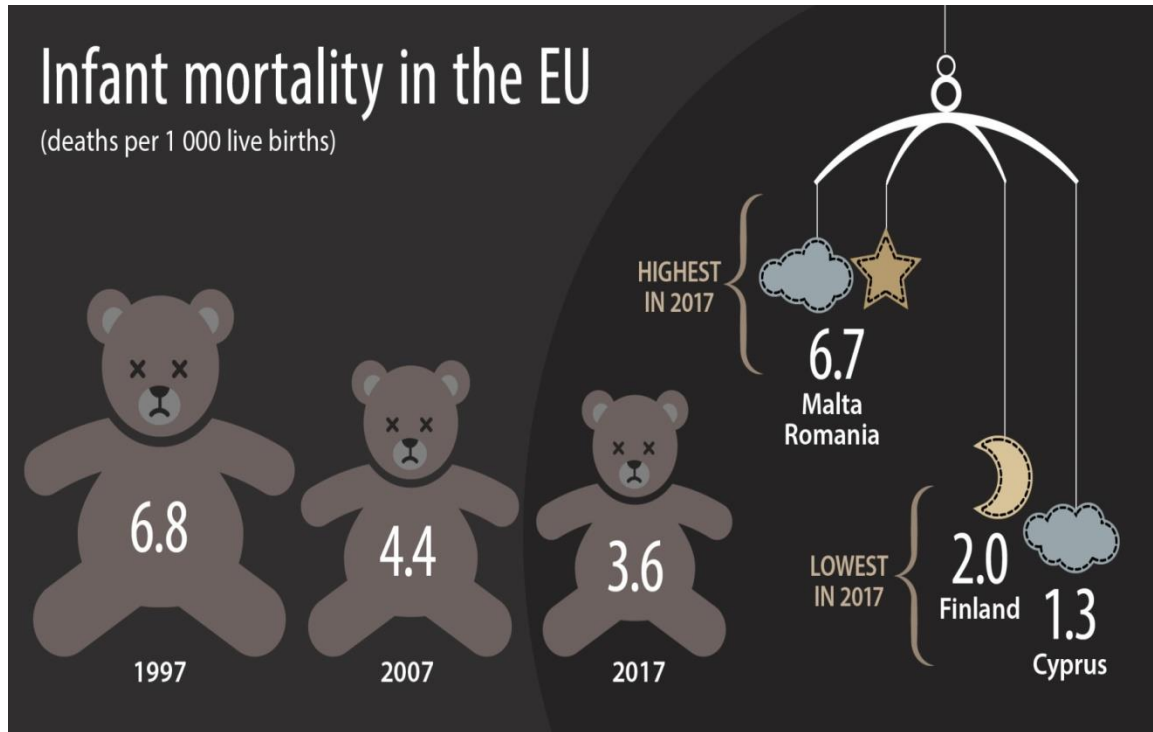
# Who were/are at risk of infectious diseases?



*Nicolas Poussin: The Plague of Ashdod*  
Italy, 1629-1631

- **The poor**
- **Town dwellers**
- **Men**

# The East-West health divide



# The East-West health divide

- Life expectancy is lower for both genders in Eastern Europe.
- Divergence since the 1960's due to better healthcare performance in the West (Meslé, Vallin & Andreyev, 2002)
- Emerging new signs of a convergence (Meslé & Vallin, 2017)
- No difference in youth smoking habits

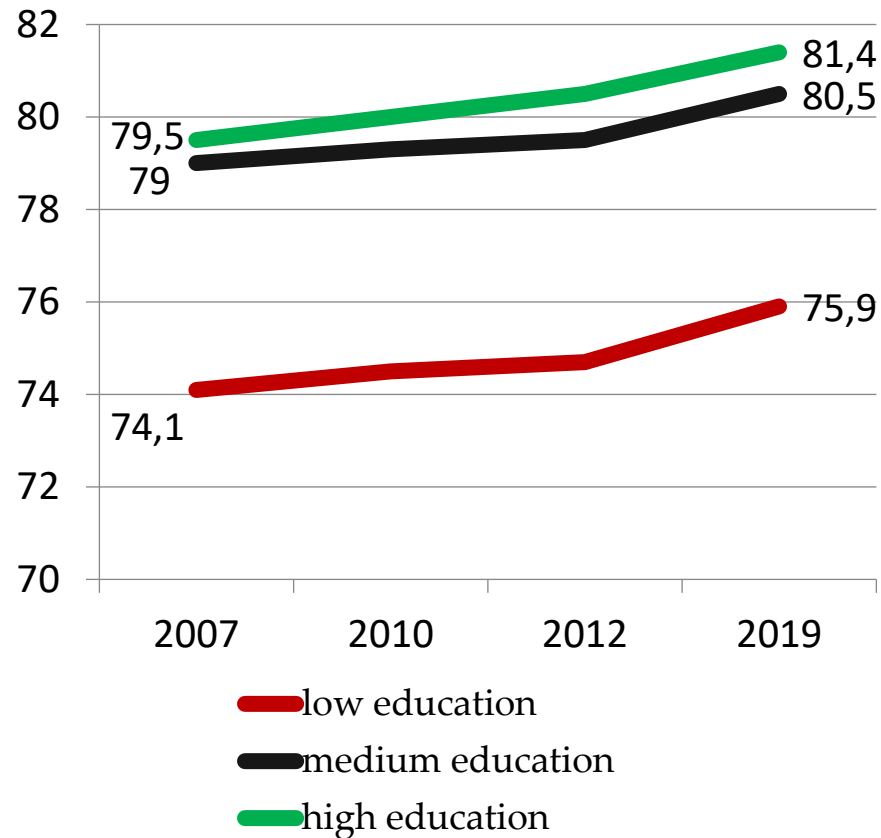
# Socioeconomic status and health

- **Hidden morbidity:** undiagnosed illness
  - particularly among the poor

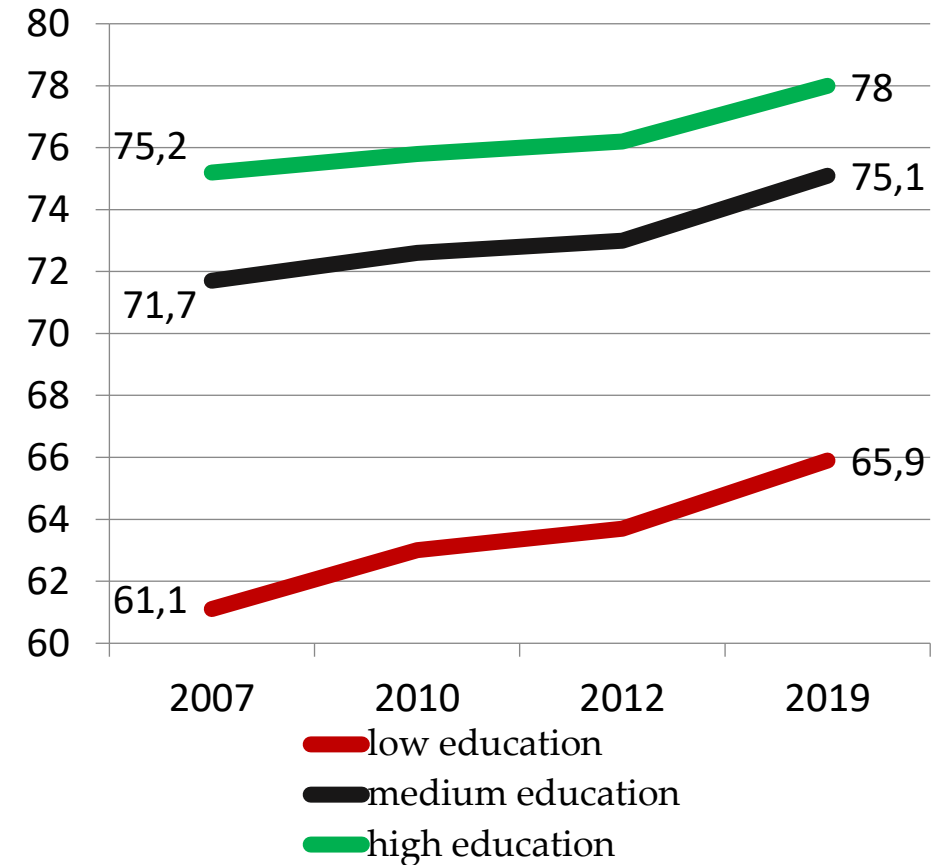


# Educational attainment and life expectancy

Hungary: Life expectancy at birth by educational attainment, women



Hungary: Life expectancy at birth by educational attainment, men



**There is a social gradient in morbidity and mortality for most diseases.**

# Gender inequalities: the male-female health-survival paradox

## Life expectancy at birth:

the number of years a newborn baby is expected to live

EU-average for  
men:  
77,2 years

EU-average for  
women:  
82,9 years

## Healthy life expectancy:

the number of years living free of functional limitations

EU-average for  
men:  
63,5 years

EU-average for  
women:  
64,5 years

- Women report more chronic illnesses and functional limitations, but male mortality indicators are worse.
- Reasons:
  - Health risks
  - Health care use
  - Gender norms

# What is a health risk?

a **non-medical** determinant of health

*any attribute, characteristic or exposure of an individual that increases the likelihood of developing a disease or incurring an injury (OECD iLibrary)*

- Occupational hazards (“3D-jobs”)
- Stress and coping difficulties
- Environmental risks
- Health behaviour
  - Nutrition
  - Sedentary behaviour
  - Obesity
  - Smoking, alcohol and drug use
  - Health service underuse
  - Vaccine non-compliance

# Vaccine non-compliance

## *Vaccination of the poor (Britain, 1867)*



- Long history since compulsory child vaccination
- 20th century: huge increase in life expectancy
  - mass immunization
- Social gradient in vaccine compliance: **polarisation**
  - measles cases in Romania (*INSP 2019*)

# Morbidity and mortality associated with social status

## Low social status:

- Injuries and accidents
- Cardiovascular diseases  
(*Rose & Marmot 1981*)
- Infectious diseases  
(tuberculosis)

## High social status:

- Breast cancer!

## Mediatory factors:

- malnutrition, undernutrition
- housing conditions
- lacking health competences
- the culture of poverty

## Parental social status and child health outcome

- early habits are resistant to change

# Summary

- There is an association between morbidity and mortality rates and socioeconomic status.
- More affluent people generally have better health.
- The state of health is to a large extent socially determined.
- 50% of our health can be traced back to our postal code.

**THANK YOU FOR THE ATTENTION!**

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