Health inequalities in Slovenia

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A call to Action on Social Determinants and Health Equity in Slovenia – High Level Forum, Brdo pri Kranju, 1st February 2011
Health inequalities in Slovenia report

- National Institute of Public Health
- Statistical Office of the Republic of Slovenia
- Institute of Macroeconomic Analysis and Development
- Institute of Oncology Ljubljana,
- Centre for Health and Development Murska Sobota
- World Health Organization Regional Office for Europe
Key emphasis

• Determinants of health and socio-economic inequalities in health

• Review of inequalities and some comparisons between Slovenia and the countries of the EU

• Approaches and policies that are effective in reducing socio-economic inequalities in health

• Challenges
General socioeconomic, cultural and environmental conditions

Living and working conditions

Work environment

Unemployment

Social and community networks

Education

Water and sanitation

Individual lifestyle factors

Agriculture and food production

Health care services

Age, sex and hereditary factors

Housing

Dalgreen & Whitehead, 2006
What influences the occurrence of inequality in health

• The distribution of power and access to other sources
• Different exposure to risk factors
• The same level of exposure to risk factors can lead to different health consequences
• The impact of socio-economic determinants of health throughout life
• Various socio-economic impacts of disease
Differences in health among countries in Europe

Mortality from all causes in the EU and Slovenia, 2006 (WHO, HFA 2010; NIPH Database of deaths 2004-2008).
Infant mortality in the EU and Slovenia, 2006

(WHO, HFA 2010; NIPH Database of deaths 2004-2008)
Premature mortality (0-64 years) due to unintentional injuries in the EU and Slovenia, 2006

(WHO, HFA 2010; NIPH Database of deaths 2004-2008)
Stillbirths, perinatal mortality, and infant mortality by the level of the mother’s education, Slovenia, 2004–2008

(NIPH PIS 2004-2008; NIPH Database of deaths 2004-2008)
Percentage of overweight and obese individuals relative to socioeconomic status, Slovenia, 1997 and 2008

(Koch, 1997; Gabrijelčič et al., 2009)
Percentage of inhabitants with good or very good self-assessed general health status relative to education and age

(NIPH EHIS, 2007)
Prevalence of cardiovascular disease relative to social class, population group aged 45–64 years

(CINDI Slovenia, 2008)
Premature mortality (0–64 years) from liver cirrhosis in groups of municipalities relative to income tax base per capita by gender

(NIPH Database of deaths 2004-2008)
Life expectancy at 30 relative to education and gender

(Corsini, 2010)
Ascertained differences are comparable to health inequalities in other countries of the EU.
Reducing inequities in health

The population approach throughout the entire social gradient
Reducing inequalities in health

- Reducing the gap between the socio-economically weakest group and most privileged group or average
- Targeted measures for particularly vulnerable groups
Investment for Health and Development: Programme Mura
Challenges

• Health and reducing inequalities in the development strategy and other development documents
• Joint strategic national framework for reducing inequalities
• The use of effective inter-sectoral mechanisms
• Systematic monitoring of inequalities in the broader context of social progress and prosperity
• Integration into European and global processes in reducing inequalities
Thank you!