

Inequality and Health

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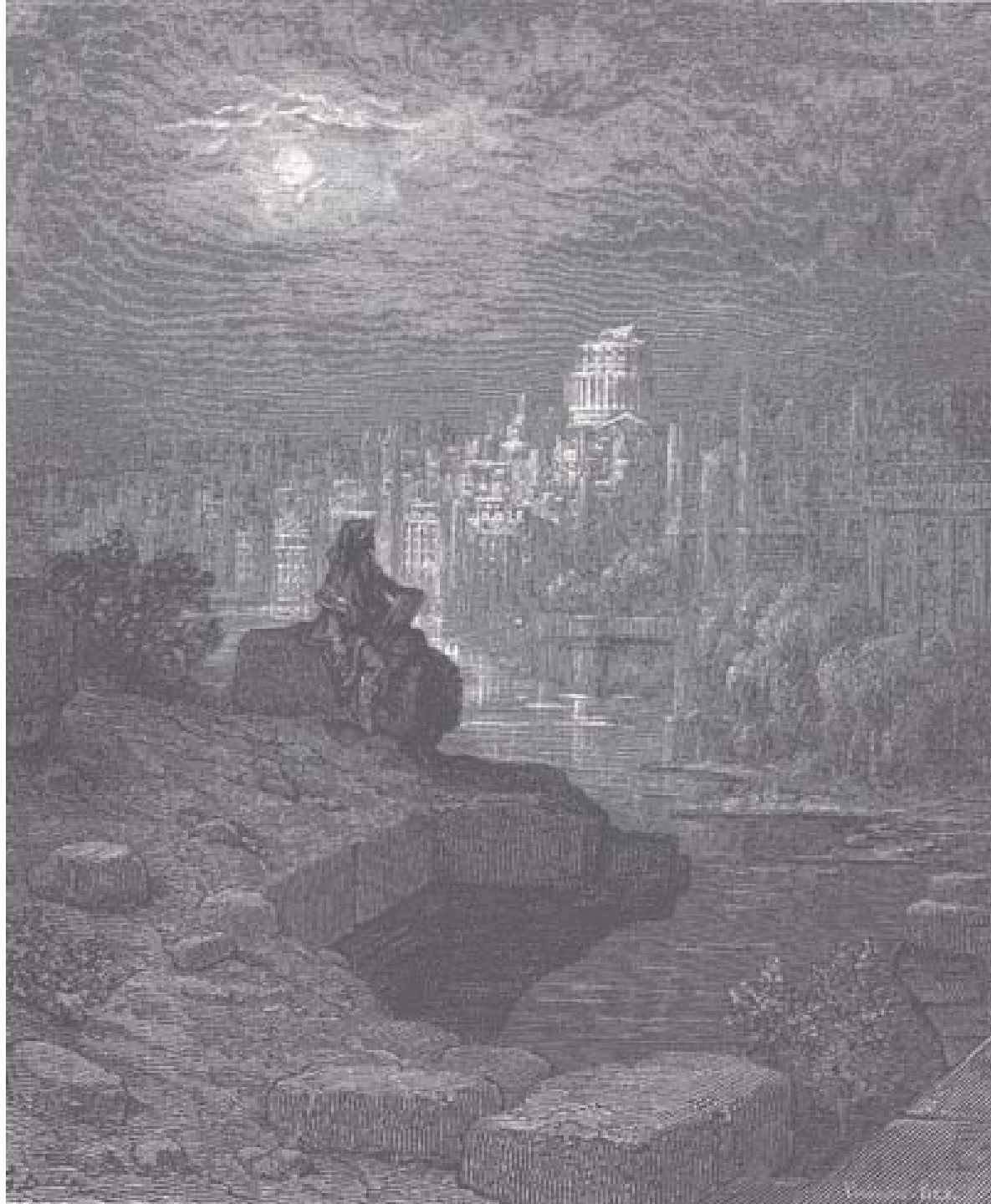
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Inequality

- Inequality affects all aspects of life
- Societies 'choose' a level of inequality
- Leads to increased social distance & lack of social empathy
- Undermines democratic power
- Affects health outcomes
- Needs to be centrally monitored and actively reduced with govt policies

“When
some
traveller
from New
Zealand
shall, in
the midst
of vast
solitude,
take his
stand on a
broken
arch of
London
Bridge to
sketch the
ruins of St.
Pauls.”
Macaulay





HERE

AND

THERE;

OR, EMIGRATION A REMEDY.







GAPMINDER WORLD

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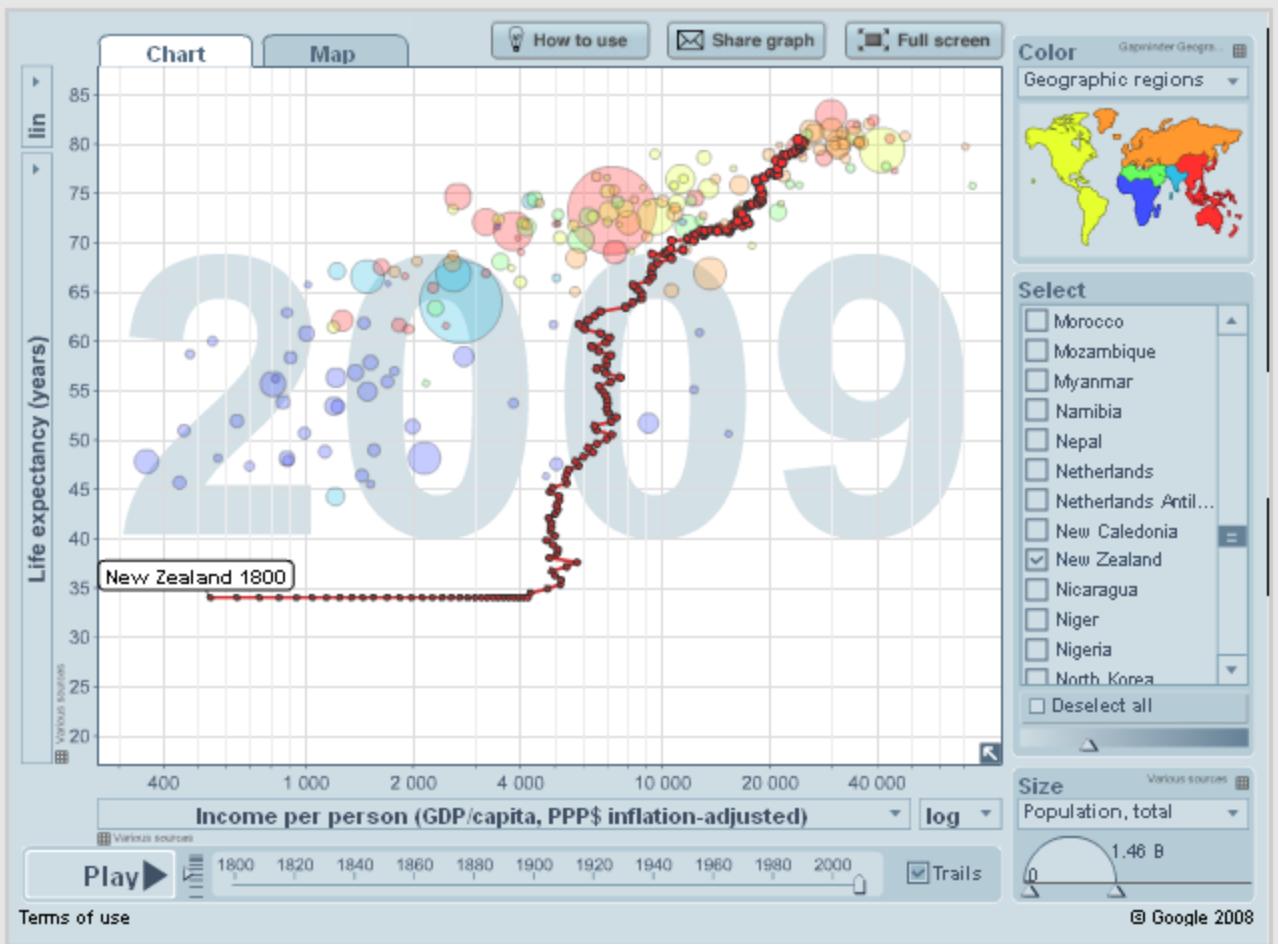
Reset Open graph menu

GLOBAL TRENDS Wealth & Health of Nations

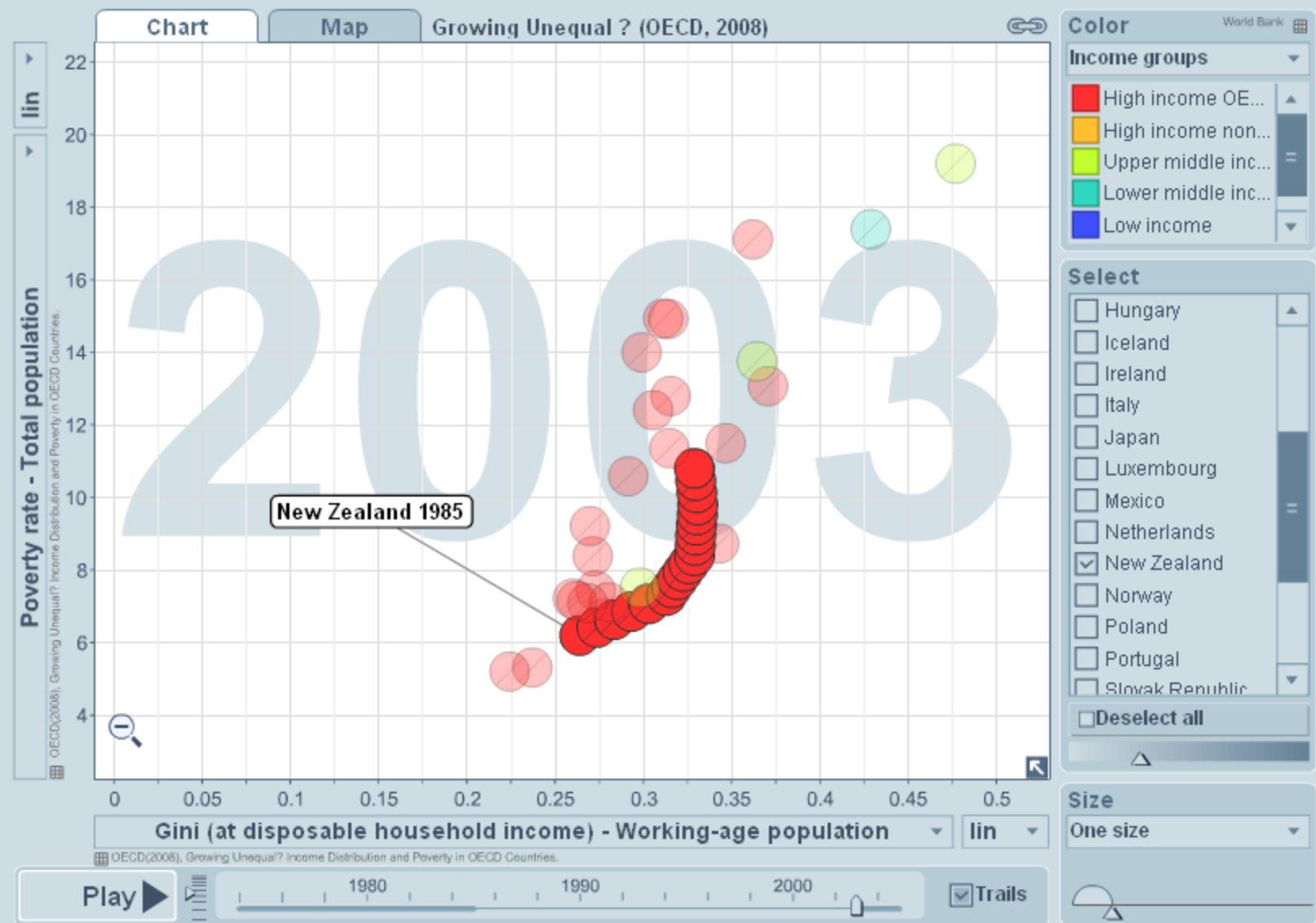
This graph shows how long people live and how much money they earn.
Click the play button to see how countries have developed since 1800.

- Explore more of Gapminder World:
- Browse example graphs
 - Learn to select indicators and more
 - Download PDF Guide

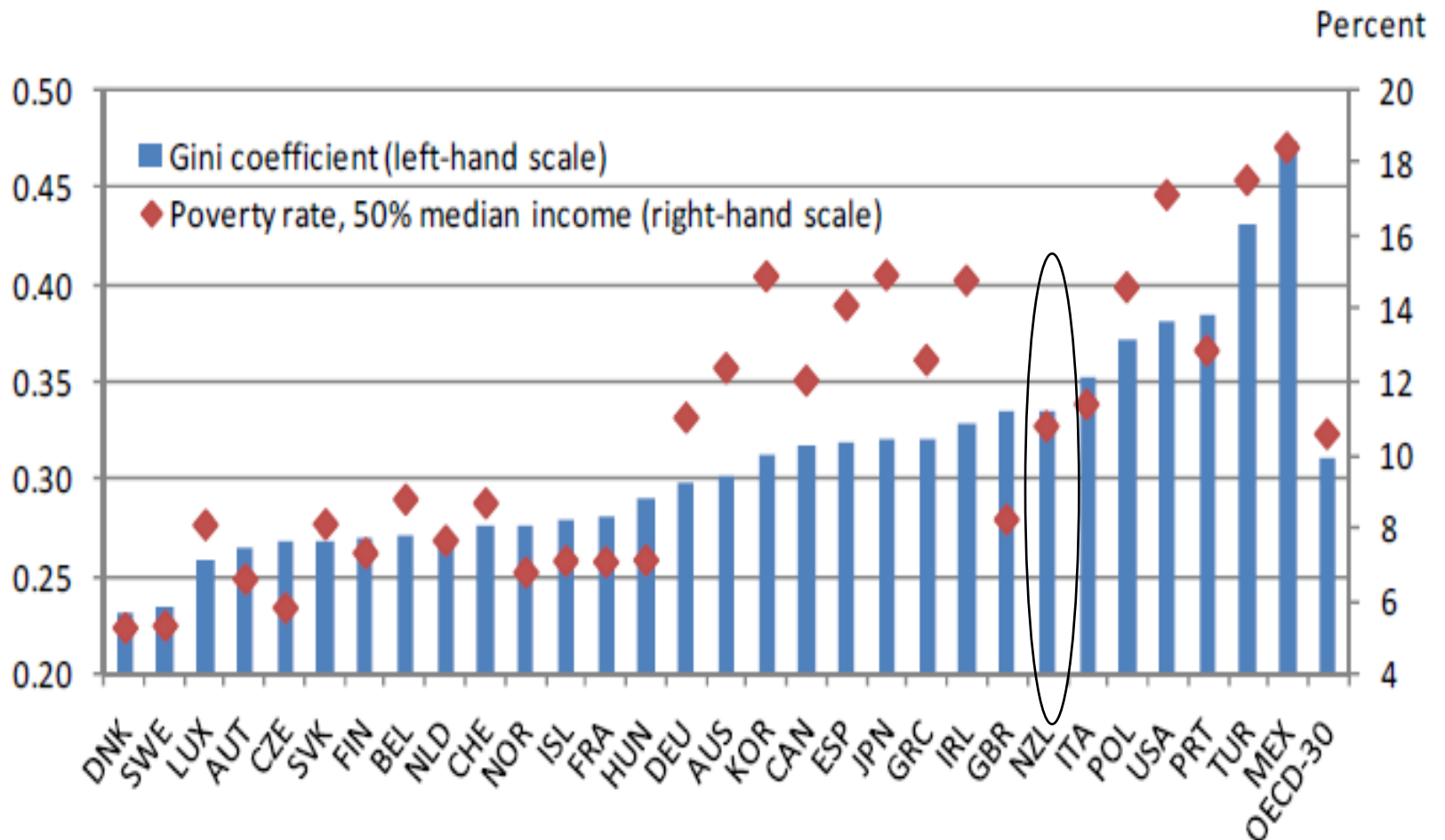
- See also:
- 200 years that changed the world
 - Stop call them "developing countries"



Income inequality



Levels of income inequality and poverty in the mid-2000s



Note: Countries are ranked in increasing order of the Gini coefficient of income inequality. Data refer to the distribution of household disposable income in cash across people, with each person being attributed the income of the household where they live adjusted for household size.

Source: OECD

Wealth, inequality & mobility

- Wealth even more unevenly distributed than income
- Entries into poverty mainly reflect family- and job-related events
- Social mobility is generally higher in countries with lower income inequality, and vice versa

Inequality & social capital

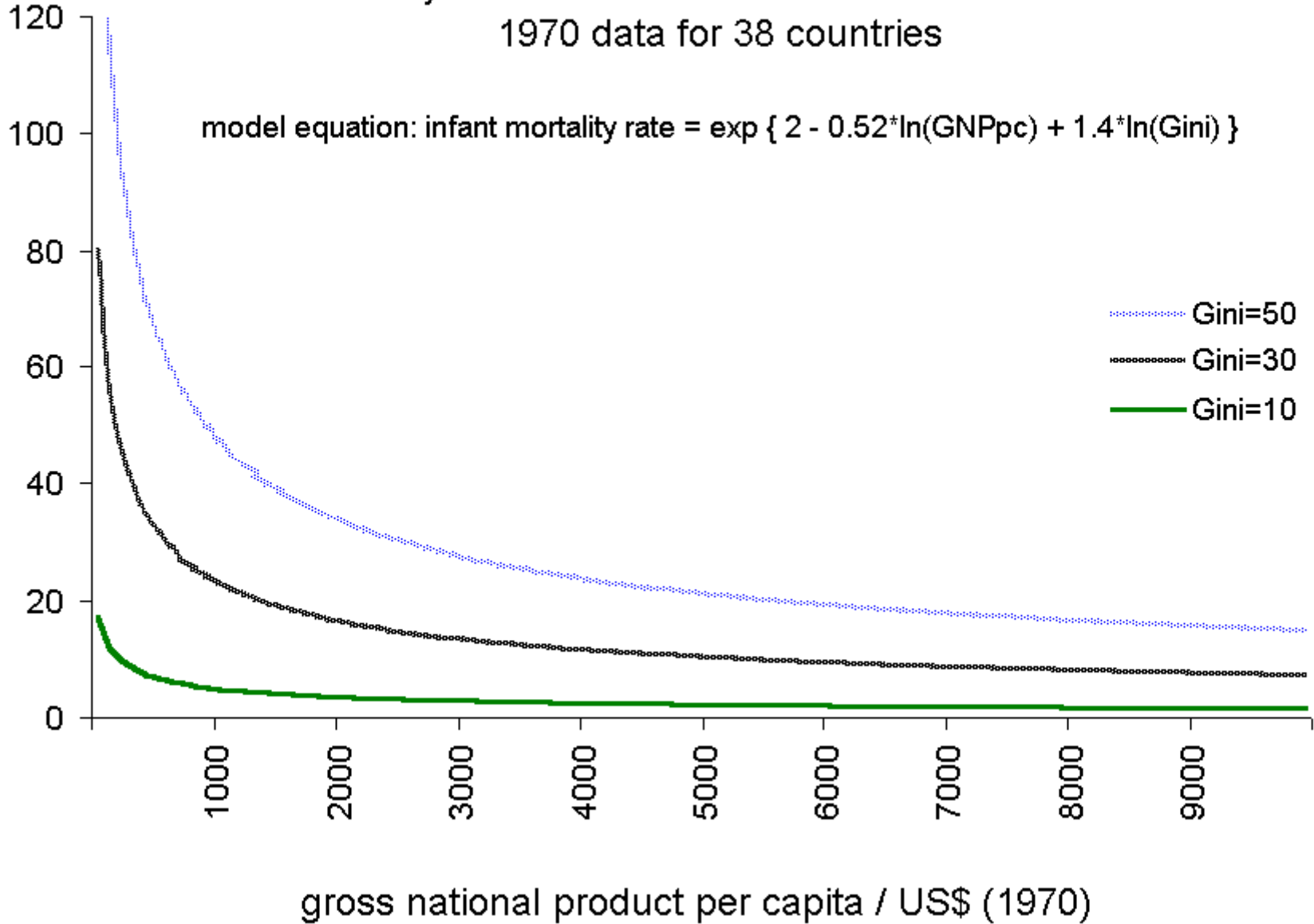
- In more unequal society, less social capital invested in civic organisations that provide flow of goodwill & trust
- Income inequality strongly associated with social capital & health outcomes in USA (Kawachi)
- Not significantly related to mortality in NZ (Blakely et al, 2008)

Health outcomes

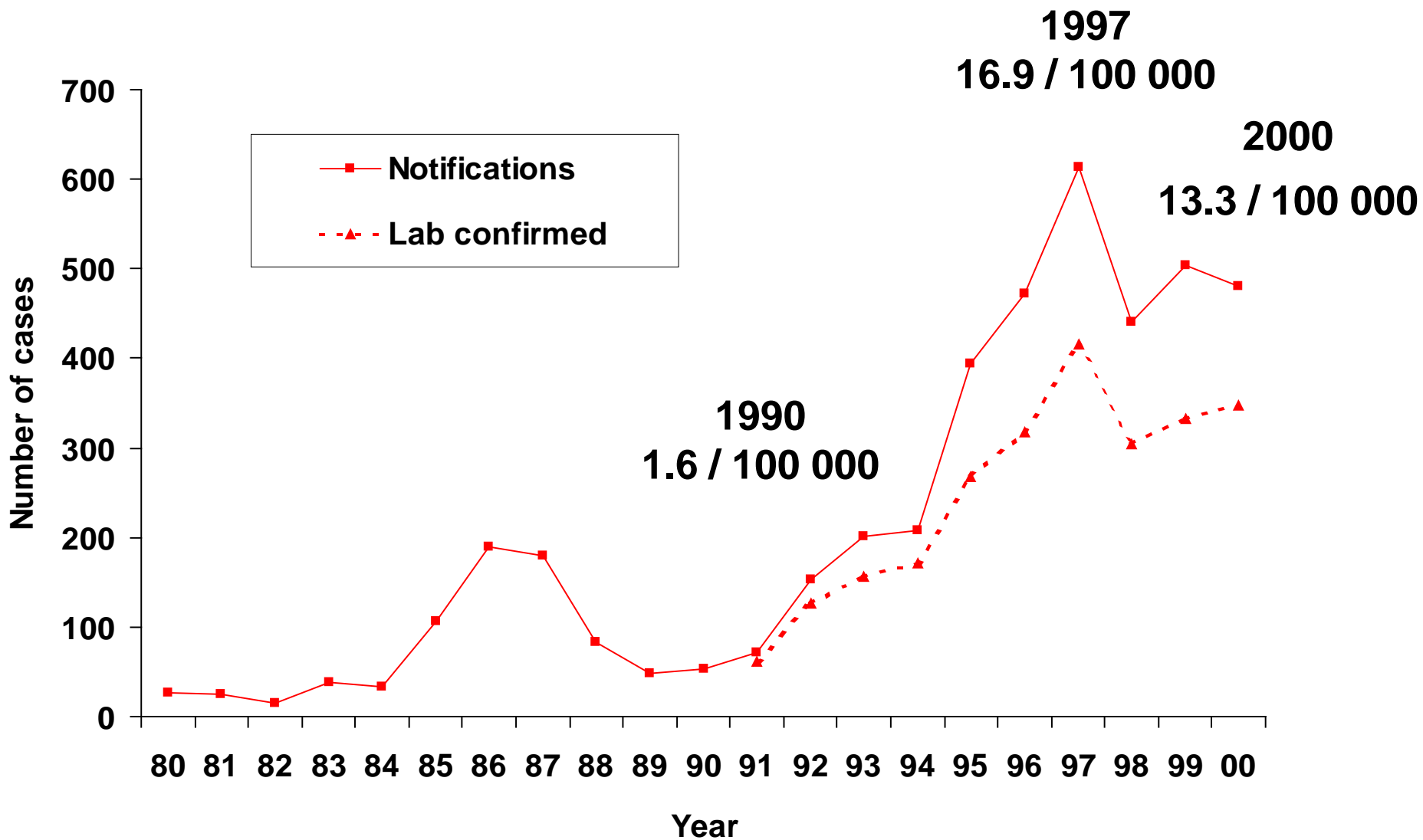
Infant mortality rate in relation to absolute and relative income:
1970 data for 38 countries

model equation: infant mortality rate = $\exp \{ 2 - 0.52 \cdot \ln(\text{GNPpc}) + 1.4 \cdot \ln(\text{Gini}) \}$

infant mortality / 1000

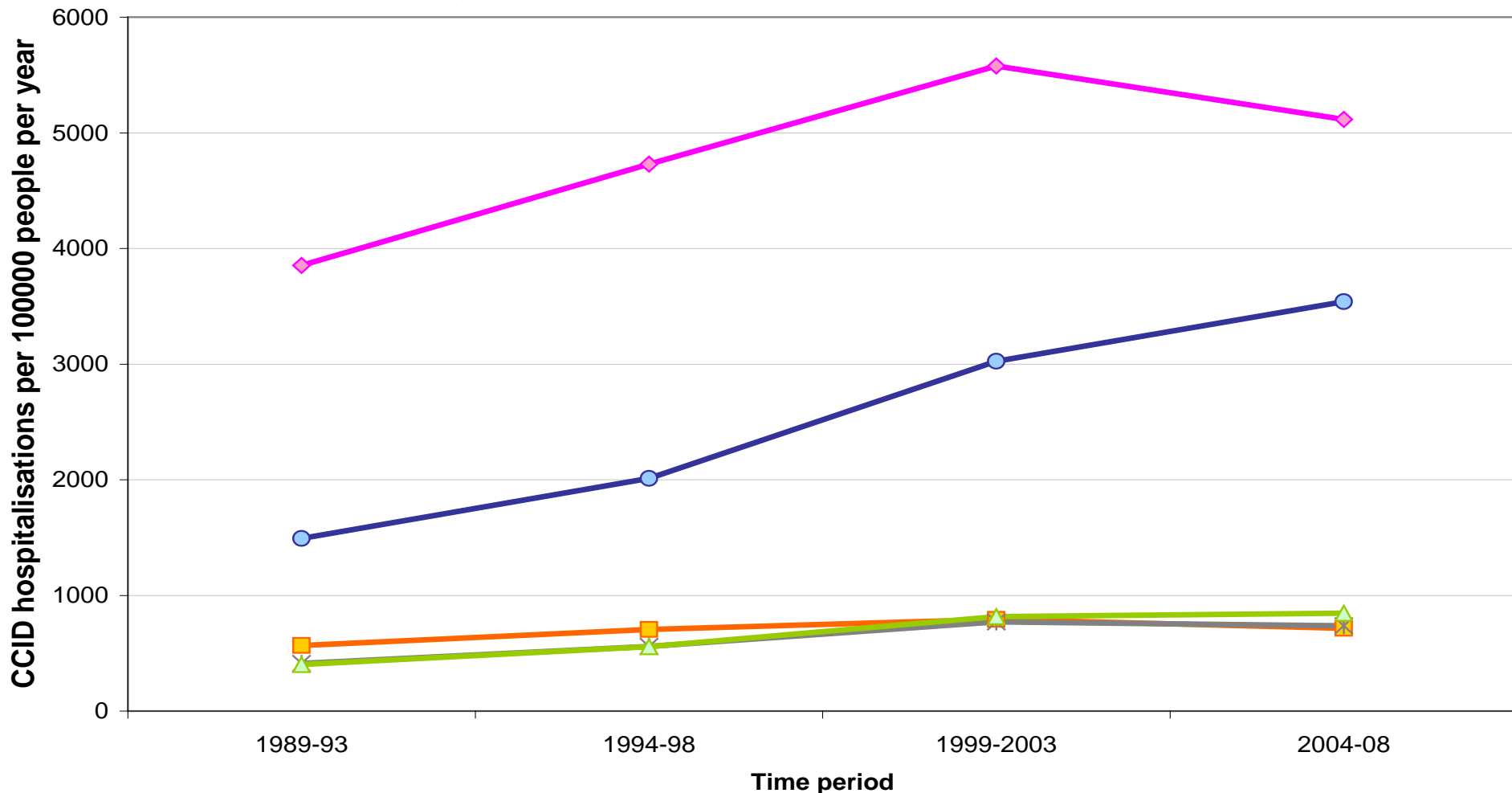


Meningococcal disease incidence by year



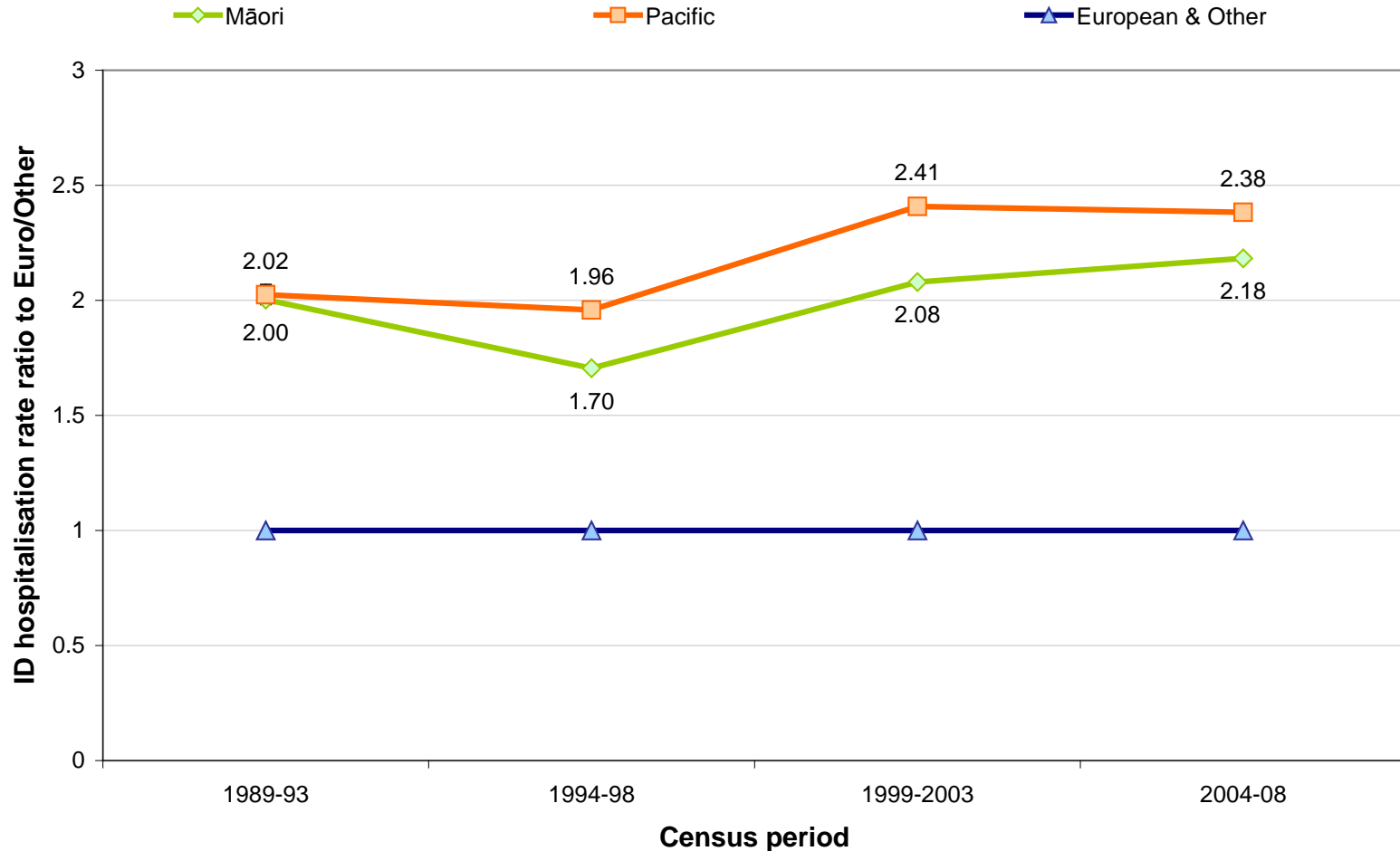
5-yearly close-contact infectious disease hospitalisation rates by age group

◆ Children <5 yrs ■ Children 5-14 * Adults 15-29 ▲ Adults 30-69 ● Adults 70+

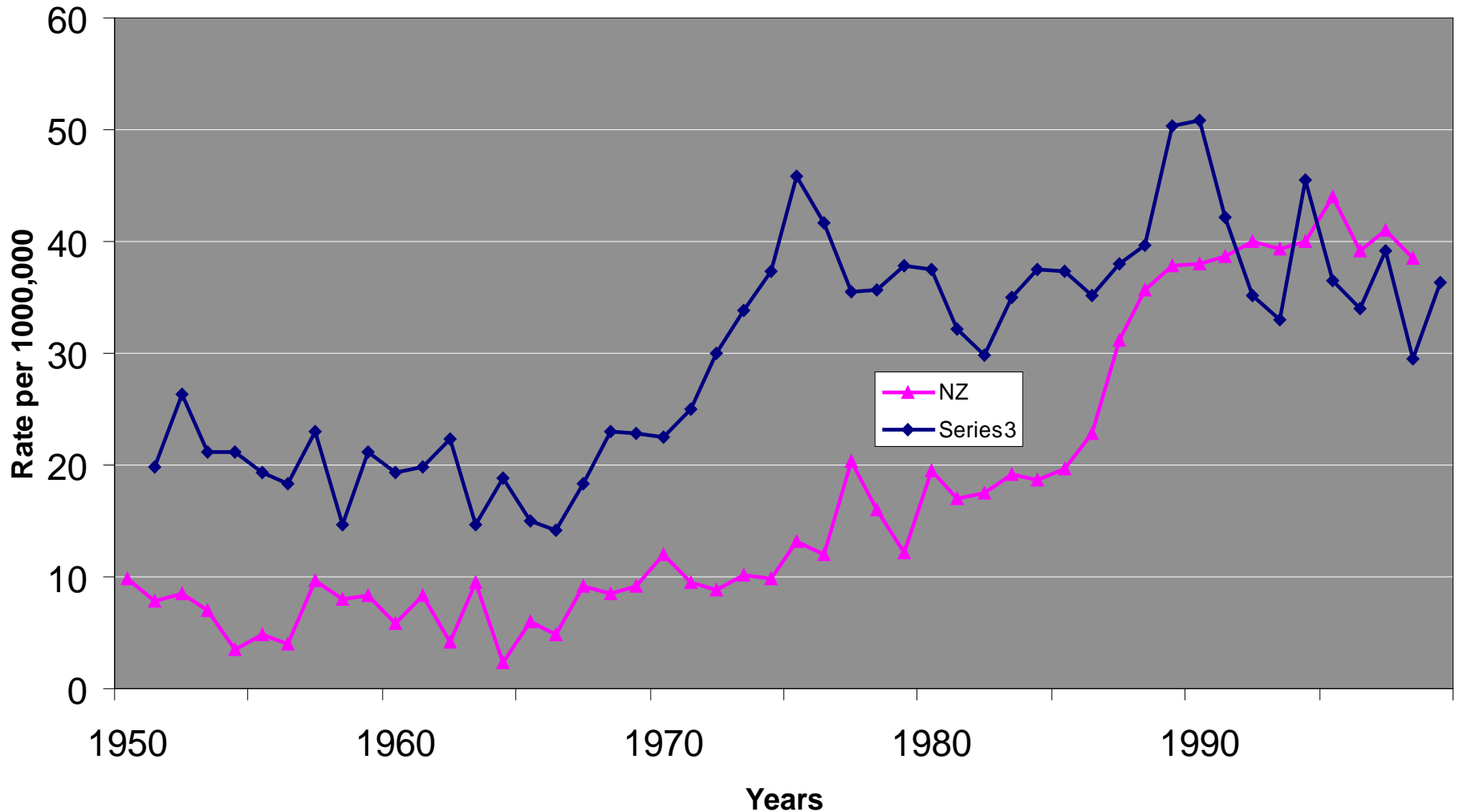


Baker M, Telfar Barnard L, Zhang J, Lanumata T, Keall M, Verrall A, Howden-Chapman, P. Close-contact infectious diseases in New Zealand: Trends and ethnic inequalities in hospitalisations, 1989 to 2008. Wellington, *He Kainga Oranga*, 2010.

Ratio of Māori and Pacific Infectious Disease hospitalisation rates to European/Other ID hospitalisation rates, for 5-year periods from 1989 to 2008 (age standardised to 2006 census).



Suicide in New Zealand and Finland, Males, 15-24, 1950-2000



Howden-Chapman P, Hales S, Chapman R, Keskimäki I. The Impact of Economic Recession on Youth Suicide: a comparison of New Zealand and Finland: Report 4. Wellington: Ministry of Health; 2005

Conclusion

- Rate of inequality varies in New Zealand
- 90s period of rapidly rising inequalities
- Rising infectious disease rates & youth suicide rates
- Rates stabilised in 2000s, but difficult to reverse results of inequalities
- Needs to be closely monitored by key agencies (MSD, Health, Treasury...) and actively reduced