



Lec no : **Lecture 16**

File Title :

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# Objectives

After completing this subject, students will be able to:

1. To understand **health disparity and health equity**.
2. Explain **causes of disparity in access to health care**. Because you know There are no different level of Health sTates of population whether it is inside the country or outside the country ( global disparity )
3. Shed the light on the changes or the improvement in the health status of the population.
4. Propose some **governmental strategies** for provision of better health.

# Definitions

الفوارق الصحية

**Health Disparities:** " a population where there is a significant disparity [difference] in the : measurement of morbidity

➤ overall rate of disease incidence, prevalence, morbidity, mortality, or survival rates in the population as compared to the health status of the general population".

الاختلاف في الحالة الصحية او المستوى الصحي من ناحية الامراض الموجودة والوفيات بين الناس لاسباب معينه

**Health equity:** Health status of population is equal in mortality , morbidity ... " the absence of systematic disparities in health between groups with different levels .

عدم المساواة في المستوى الصحي

**Health Inequities:**

" Disparities in health [or health care] that are systemic and avoidable and considered unfair or unjust."

We aspire to justice and distance from differences

The World Health Organization defines health inequity as “systematic differences in the health status of different population groups.”

This means that certain groups experience worse health and increased difficulty accessing healthcare as a result of the systems that influence their lives.

ينعكس الفقر على :

For example, economic and political systems can influence poverty. People born in areas where poverty is high may have reduced access to safe housing, clean water, healthy food, education, and medical care — all of which impact health.

This creates an avoidable and unfair divide between different groups.

Changes in government policy are necessary to overcome this. Health inequity occurs on a local, national, and global scale, and it affects all countries.

# What is the impact?

إذا أصبح هناك عدم عدالة في المستوى الصحي بين السكان سيصبح هناك اثر سلبي على كل شيء

Health inequity **negatively impacts everyone**. It leads to **deteriorated outcomes** not just for the people it directly affects, but also for those with more power and resources.

For example, health inequity:

## Impacts



- makes it **more difficult to contain and treat infectious diseases**.

Because they are poor people and they have low immunity more liable to get infection and this infection will spread between people

- **increases levels** of **crime** and **violence** across communities.

- **drug, alcohol and substance misuse**.

- **increases stress** and **anxiety** by damaging social cohesion

- **decreases productivity and employment**. يقلل الترابط بين فئات المجتمع

- pushes **100 million people** into poverty each year and **prevents** at least half of the world's population from getting the **healthcare they need**.

# Healthcare inequity and healthcare disparity:

It refers to the study of differences in the quality of health and health care across different populations.

This may include differences in the :

□ Morbidity : presence of disease, acute or chronic .

□ Mortality

□ Health outcomes, or

People with poor health status حتى في وضع المرض ال outcome يختلف عن people with good health status , they recovers easily and quickly

□ Access to health care

across racial, ethnic, and socioeconomic groups

عنصري

هناك اختلاف في استخدام الخدمات الصحية على مختلف طبقات المجتمع

# Health Outcome

Health outcome

هي نتائج نتيجة تداخلات صحية في المرض

• In health economics, the term 'outcome' is used to describe the result of a health care intervention weighted by a value assigned to that result. i.e.:

Complete recovery, incomplete recovery (chronic) or disability, or death.

اما النتيجة تكون :

السنوات التي تم اكتسابها نتيجة

تدخل الصحة للعلاج وايضا

الفائدة نتيجة اي تدخل طبي

## Quality-Adjusted-Life-Year (QALY)

مقياس من المنفعة

+

(1) Units of measure of utility which combine life years gained as a result of health interventions/health care programs with a judgment about the quality of these life years.

احد الطرق الذي يقاس فيها التطور الصحي وايضا احد economic

evaluation methods التي من طرقها cost utility analysis

(2) A common measure of health improvement used in cost-utility analysis; it measures life expectancy adjusted for quality of life

فائدة الخدمات الصحية

كم سنة رح يستفيد وجودة الحياة التي يعيشها

الانسان نتيجة تلقي العلاج والتدخل الصحي

# Quality of life (QOL)

QOL is the **general well-being** of individuals and societies, **outlining negative and positive features of life, and people expectations for a good life.** هي subjective feeling كيف تشعر عن ما هو بداخلك اما يكون اجابي حالة جيدة او سلبي حالة صحية سيئة

Qol

What is the health status ( جودة الحياة هل هو مريض او عاجز او صحي )

life satisfaction الحالة العامة للإنسان ( كيف بحس ؟ ) وبتعبر عن مدى

QOL contributes to **one's subjective well-being** - is called **life satisfaction**.

مقاييس ال QOL اما positive or negative features

QOL includes **physical health, family, education, employment, wealth, safety, security to freedom, religious beliefs, and the environment.** الحرية

Health related QOL is an **evaluation of QOL and its relationship with health.** Positive Or negative

QOL should not be confused with the concept of **standard of living, which is based on income.**

poor people have a good QOL المستوى المعيشي العالي يتحدد من خلال الدخل لكن الدخل ليس له علاقة بال QOL لان هناك



# Global burden of disease (GBD)

■ **GBD** is a comprehensive regional and global assessment of mortality and disability from diseases, injuries and risk factors.

مجموعة شاملة لكل القياسات  
للعجز والمرضة والاصابات

■ It provide a full picture of which diseases, injuries and risk factors contribute the most to poor health in a specific population, including:

■ **identification** of the most important health problems and

من خلاله رح نعرف health problems الموجودة واذا كان السكان يتحسنوا ويتحسن وضع هذه المشاكل مع مرور الوقت او يزيد سوء

■ whether they are getting better or worse over time.

GBD  
يعكس دائماً كم عنا مرضة وعوامل خطيرة واصابات ...  
التي تؤثر وتعطي الصورة الواقعية لحالة السكان

# International Health Disparities

- ❑ Even in the wealthiest countries, there are disparities in health between the rich and the poor. حتى في الدول المتقدمة هناك اختلافات في الحالة الصحية بين الفقير والغني
- ❑ There is significant differences among developed nations in health status indicators such as life expectancy, infant mortality, incidence of disease, and death from injuries. مقاييس الحالة الصحية كيف نعرفه انها جيدة او لا
- ❑ These disparities may exist in the context of the health care system. الاختلافات ايضا موجودة في استخدام الخدمات الصحية
- ❑ Access to health care is essential for equitable health. حتى يصبح هناك health equity يجب ان يكون هناك access to health care
- ❑ There is substantial variation in health care systems and coverage from country to country.
- ❑ Variation in access to clean and safe water, working conditions. تختلف البلدان في الحالة الصحية والتغطية الصحية فهناك بلدان تعتمد على public and government Institution , national health services تكون مدعومه من الحكومة والبعض الاخر يعتمد على insurances التأمينات الصحية مثل الاردن

## Causes of

# Disparities in access to health care

Not all people can use the health care services when they need it

1

■ **Lack of insurance coverage:** Without health insurance, patients are more likely to **postpone medical care**, more likely to **go without needed medical care**, and more likely to go **without prescription medicines**. **Bad outcomes** بالتالي سيكون هناك

الخدمات الصحية عالميا هي خدمات مكلفة جدا لذلك الكثير من الدول تعتمد على التأمينات الصحية

2

كلام وجود مصدر عادي للرعاية الصحية

■ **Lack of a regular source of care:** Without access to a regular source of care, so:

1. patients have **greater difficulty obtaining care**,
2. **fewer doctor visits**,
3. **more difficulty obtaining needed drugs**.
4. **more likely to use emergency rooms and clinics as their regular source of care.** ليس دائما يتم استقبال جميع الحالات في الطوارئ

■ **Lack of financial resources:** Although the lack of financial resources is a barrier to health care access, the impact on access appears to be greater for minority populations.

اهم المشاكل انه ال poor people ليس لديهم المال الكافي لتغطية الخدمات الصحية التي يحتاجونها خصوصا الذين ليس لديهم تأمين صحي

معيقات / العوائق

■ **Structural barriers:** These include:

معيقات تحدث في الخدمات الصحية نفسها اما المستشفيات او المراكز الصحية

- **poor transportation,**
- **an inability to schedule appointments** quickly or during convenient hours, and
- **excessive time spent in the waiting room,**

الخدمة الصحية في مكان بعيد

كلام القدرة على جدولة المواعيد

عدد المرضى هائل فينتظر المريض اوقات طويلة

في بعض الاحيان هناك صعوبة في اتخاذ مواعيد وتنظيمها من قبل المستشفى اعطاء مواعيد بعد اوقات طويلة بسبب ازدياد البرامج سيؤدي الى نتائج سلبية وخصوصا في المستشفيات الحكومية بسبب قلة الاطباء والكوادر الصحية وبعض الناس يكون مواعده يتعارض مع اشغاله فلا يتناسب مع convenient hours

all of which affect a person's ability and willingness to obtain needed care.

حوادث قانونية

حواجز قانونية وتشريعات في بعض الدول تعيق عملية تلقي الرعاية الصحية فمثلا بعض المهاجرين الذين لا يكونوا محسوبين على المواطنين يتعرضون لاجراءات قانونية تعيق تلقيهم للعلاج

■ **Legal barriers:** Access to medical care by low-income immigrant minorities can be delayed by legal barriers to public insurance programs (have no health insurance).

■ **The health care financing system:** financing system is a barrier to accessing care. Its' effects vary in different countries. حسب طريقة التمويل من بلد لبلد فتعتمد على ال resources الموجودة

■ **Scarcity of providers:** access to medical care can be limited due to the scarcity of primary care practitioners, specialists, and diagnostic facilities.

قد يصعب الوصول للخدمة الصحية بسبب قلة مقدمين الرعاية الصحية

حواسخ لغوية

آقيد

■ **Linguistic barriers:** Language differences restrict access to medical care for minorities who have different languages.

اختلاف اللغات خصوصا بالبلدان التي فيها هجرات بين مقدمين الرعاية الصحية والمرضى

الجهل الصحي

■ **Health literacy:** This is where patients have problems obtaining, processing, and understanding basic health information.

i.e., patients with a poor understanding of good health may not know when it is necessary to seek care for certain symptoms, the problem can be more pronounced in these groups than that due to socioeconomic and educational factors.

هناك بعض الناس ليس لديهم معلومات صحية كافية مثلا ال healthy life style وغيرها وهناك ناس ليس لديهم معلومات عن كيفية استخدام الخدمات ومتى يستخدموها وهذا يعتمد على مدى المفهوم الصحي

■ **Age:** can also be a factor in health disparities for a number of reasons:

1. As many older have many health problems ( comorbidity), which cause a financial burden on their fixed incomes which may make paying for health care expenses difficult.
2. Additionally, they may face other barriers such as impaired mobility or lack of transportation which make accessing health care services challenging for them physically.
3. Also, they may not have the opportunity to access health information . This could put older individuals at a disadvantage in terms of accessing valuable information about their health and how to protect it.

كبار السن لديهم العديد من الامراض التي تحتاج الى رعاية صحية مكلفة بالنسبة للدخل البسيط لديهم

صعف التنقل

# What is the inequality between sexes?

Gender inequality has been prevalent in all societies for centuries and continues to exist even today

لا تزال عملية عدم المساواة بين المرأة والرجل موجودة الى الان

التمييز على اساس الجنس

Gender inequality is discrimination on the basis of sex or gender causing one sex or gender to be routinely privileged or prioritized over another.

تحيين

اولوية

اساسية

التهلك التمييز

Gender equality is a fundamental human right and that right is violated by gender-based discrimination.

Gender inequality weakens women in many areas such as health, education, and business life.

يؤثر هذا الامر على المرأة من الناحية الصحية والتعليم

Studies show the different experiences of genders across many areas including education, life expectancy, personality, interests, family life, careers, and political membership



## Some of the key areas or examples of gender inequality where women face discrimination include:

- People still prefer the birth of a boy rather than a girl.
- less access to employment, and education,
- poorer health and nutrition than men,
- and the most obvious violence against women.
- less access to health care services.
- Job discrimination. ... كانت اعمال المرأة محددة بامور معينه غقط مثل التدريس
- Lack of legal protections. ...
- Lack of autonomy. ... <sup>الرجوع على الذات</sup>
- **Child Marriage** : Children specially the girls are married at a very young age. اكثر المنظمات العالمية النسوية مهتمه بموضوع منع زواج الاناث في سن مبكر



تطوير / تمكين المرأة

## Women Empowerment

تسعى العديد من المنظمات العالمية إلى تمكين المرأة وتعزيز قوتها والمساواة بينها وبين الرجل عن طريق:

Women's empowerment refers to the process of enabling women to have greater control over their lives and to be able to make their own decisions.

This can include empowering women to participate fully in the economy and in the political process, as well as empowering them to make decisions about their own education, health and well-being.

أكثر النساء العاملات يساعدون في الاقتصاد لعمل أسرهم وبلدنا في مجال السياسة هذا يعزز دور المرأة وإعطائها أكبر فرصة للتعليم ولا الحصول على صحة جيدة

Women's empowerment is important because it can lead to a range of positive outcomes, including: The positive outcome

- increased economic growth and development,
- improved health and well-being, and
- greater gender equality.

# Improving Health Status

كبيرة

■ Profound improvements in health status have occurred in industrialized nations since 1900.

أكثر الحكومات تسعى إلى تطوير الرعاية الصحية للناس لذلك بدأ التطور في الرعاية الصحية والتطور في الحالة الصحية للناس منذ 1900

■ The access to improved medical care and improved health care are responsible for these differences.

أهم الأسباب التي ساعدت على تحسين المستوى الصحي هي تقليل الاختلافات في الصحة وتطوير الرعاية الصحية

اهم الامور التي ساعدت على التطور في الصحة

■ The introduction of vaccines and medical treatments are responsible for the profound declines in mortality from infectious diseases 1900.

تحسين

■ Improvements in behavior (e.g., reductions in tobacco use, changes in diet, increased exercise, etc.) have also been responsible for improved longevity, how they improve their behaviour and healthy lifestyle

اصبح هناك وعي عند الناس

طول العمر

health status هذا الشيء حسن ال

■ that improvements in health are due to the improving material conditions of everyday life experienced by people since 1900.

Material conditions : cars , houses...

■ These improvements occurred in the areas of early childhood:

- education,
- food processing and availability,
- health and social services,
- housing,
- employment security and working conditions.

ثلاجات وتصنيع نظيف

# Social Justice العدالة الاجتماعية

عندما يكون هناك مساواة بين الناس

بجودة عالية

A desirable quality that, when achieved, results in:

تحسين مرغوب فيه عند التحقيق يحدث  
❖ equitable (fair) access and exposure to social, economic, and political resources, opportunities, burdens and their consequences.  
عدالة في توزيع كل المصادر وكذلك الأعباء

## Equitable access

■ Geographical access – overcoming barriers of distance.

■ Economic access – overcoming barriers of cost.

Everybody can use it

■ Cultural and social access :

مثلا بعض الدول تفضل معالجة نساءهم  
من قبل الطبيب الأنثى وليس ذكر لذلك  
يجب مراعاة هذه الامور

■ Adequate, appropriate services

■ No barriers for women, and disadvantaged

groups

مجموعة من الناس حالتهم قد تؤدي الى ان يكونوا في موقف اضعف من الاخرين مثلا كالمرأة  
في بعض المجتمعات او مثلا اصحاب البشرة السوداء او الناس ذوي الاحتياجات الخاصة او  
الاطفال احيانا

■ Providers who deal with all patients/clients

fairly, equally; according to their needs

# Governmental strategies to improve health

هذا الشيء الذي ادى إلى التغيير في المستوى الصحي الاستثمار في الوقاية

1. **Invest in Prevention** : Promotion and protection of health, and prevention of health problems (communicable and non-communicable) are major aspect in the improvement of health . Main programs are:

- a. Provision and implementation of health policies , i.e.:
  - Iodization of salt, fluoridation of water, smoking control and prevention, seat belt ,.....
- b. Promote healthy behavior by health education at different levels or groups, i.e.: healthy diet, physical activity, smoking cessation , prevention of drug or alcohol abuse, good hygiene and cleanness (hand washing).....
- c. Provision of accessible, affordable, equitable, continuous Primary Health Care services ,i.e.: Maternity and Child Health services, Family planning, School Health Services, Environmental and Occupational Health Services, etc....

Acceptable for everybody and everybody can use it

d. Prevention and control of communicable diseases ,  
early <sup>كشف</sup> detection, <sup>إشعار</sup> notification and treatment or  
vaccination.

e. Implementation of <sup>التحري عن بعض المشاكل الصحية</sup> screening of health problems , i.e.:

- Vision screening for school children and seniors, <sup>كبار السن</sup>
- Prenatal <sup>الحمل</sup> screening of women during pregnancy for congenital problems, <sup>مشاكل خلقية</sup> or for infections which might <sup>الجنين</sup> affects the fetus etc...  
<sup>عمل فحوصات دورية للمرأة الحامل في أثناء الحمل للكشف عن وجود مشاكل خلقية عند الجنين او التهابات</sup>
- Screening for diabetes and hypertension, etc.....
- Breast cancer screening for women or colon cancer screening for men.
- Screening for goiter (enlargement of the thyroid gland ) due to Iodide deficiency. <sup>كوسيع الغدة الدرقيه</sup> ⇒ <sup>نقص اليود</sup>

التضخم في الغدة الدرقيه نتيجة نقص الغذاء الذي يحتوي على اليود

## 2. Other Governmental Strategies:

- a. Providing high quality education programs for children and providing safe and high-quality school environment, prevent early involvement of children in labor work.  
*العمل في سن مبكر*
- b. Increasing job opportunities, by providing education and training for better jobs to improve the socioeconomic condition & income.
- c. Provision of healthy environment, proper water supply, proper sewage disposal, prevention of radiation and proper waste product disposal.  
*التخلص من مياه المجاري*
- d. Provision of houses with good quality, i.e., good ventilation, prevention of overcrowding and safe to prevent accidents, proper water supply, proper sewage disposal.  
*التهوية*



e. Investments in **health infrastructure** that support the patient's responsibility in his or her own care, and the efforts of patients, families and their clinicians to work together in a coordinated way.

**Provision of public hospitals with** : health care يجب ان تكون ال

- high quality care and safety with good infection control ,
- proper health information system (HIS),
- Wide coverage area to achieve universal coverage.
- Sufficient payment policies for health care provider that offer incentives
- Provision of health insurance for most of the population with main consideration of disadvantaged groups.
- Promote safety and prevent medical harm or malpractice (errors)

سوي الحمار مسة // الامطار

