



# The role of the health system in reducing health inequity

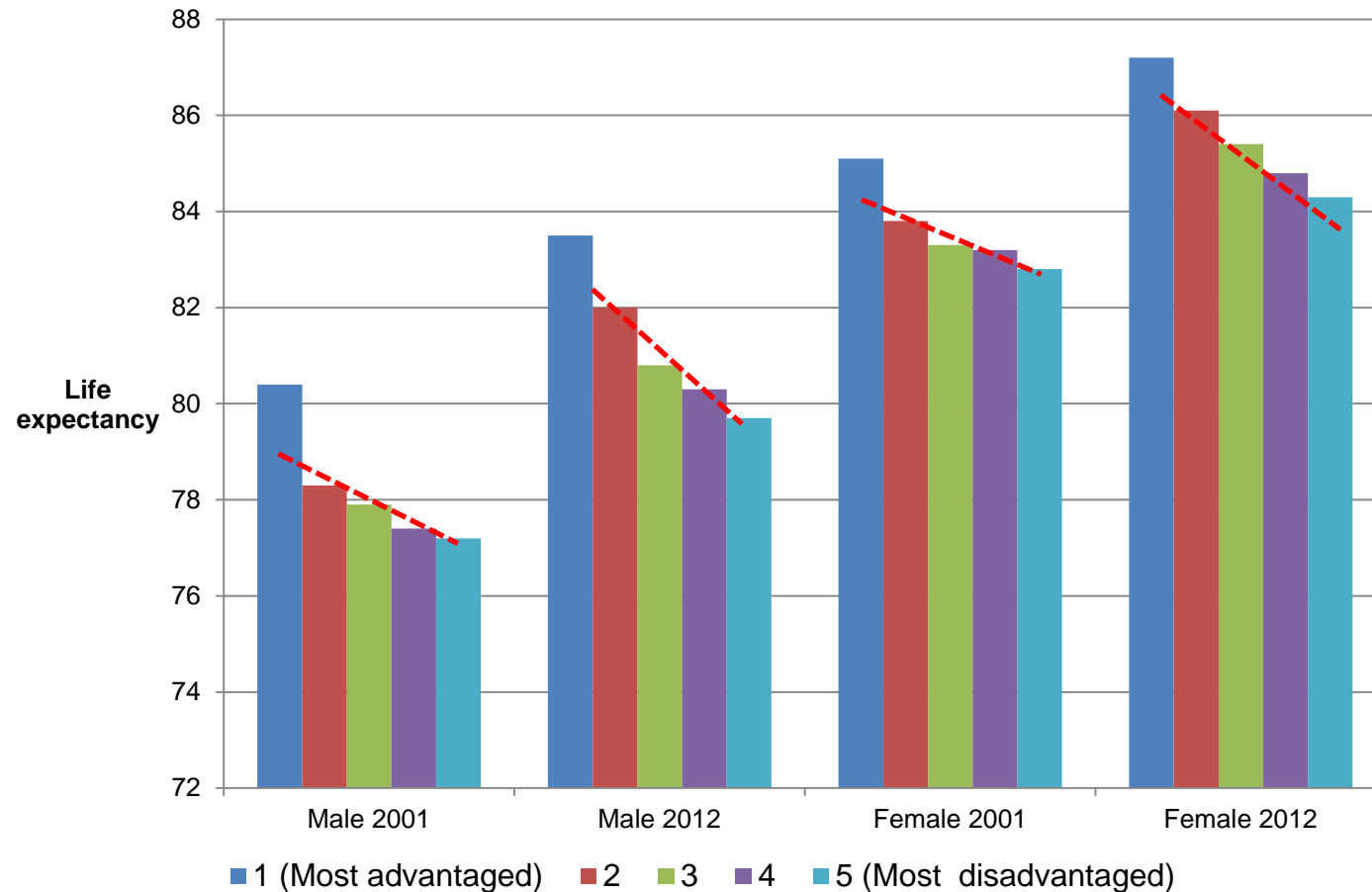
Never Stand Still

Medicine

**Mark Harris**

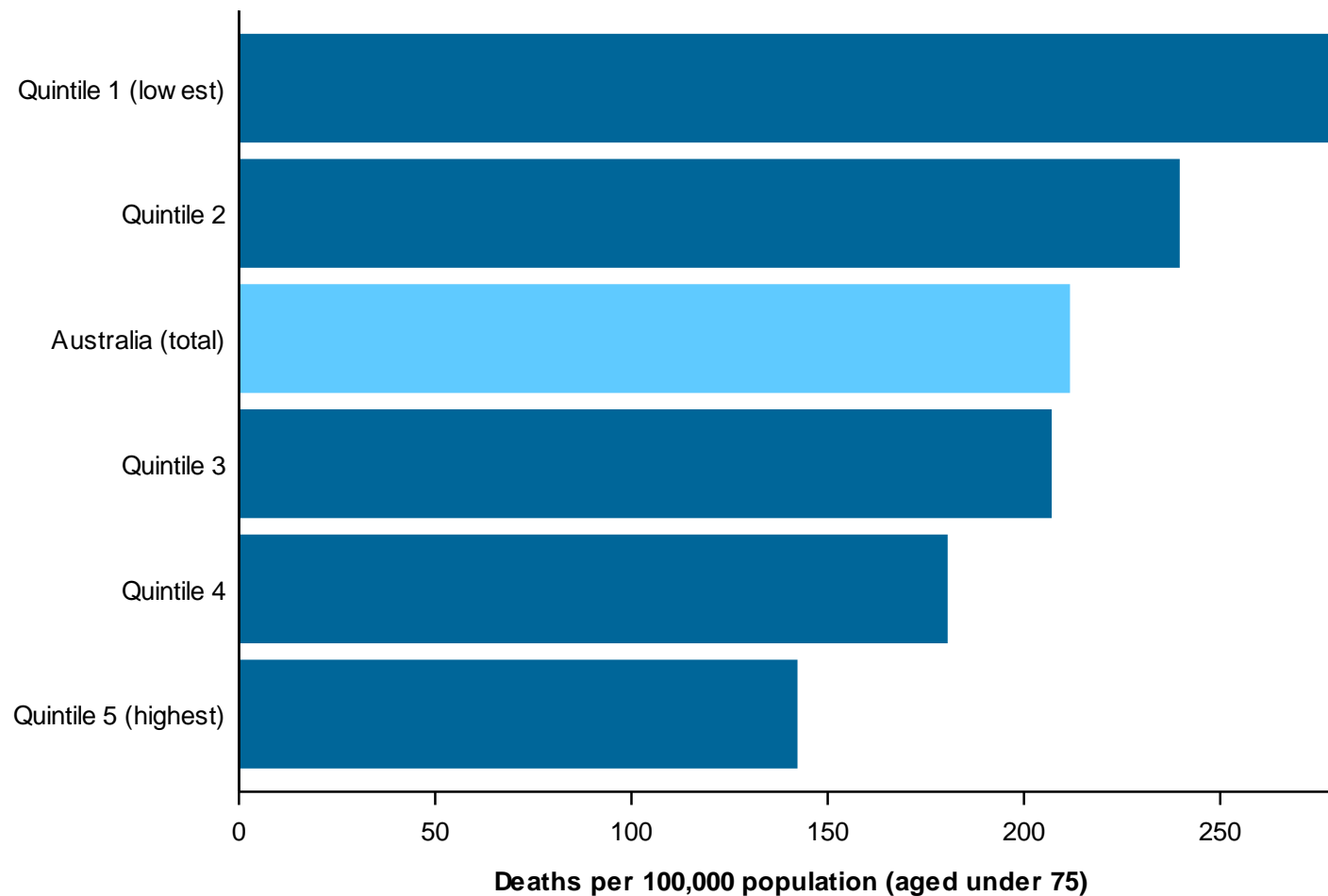
Workshop 29 June 2016

# TRENDS IN LIFE EXPECTANCY AT BIRTH BY SOCIOECONOMIC STATUS AND GENDER IN NSW 2001 – 2012



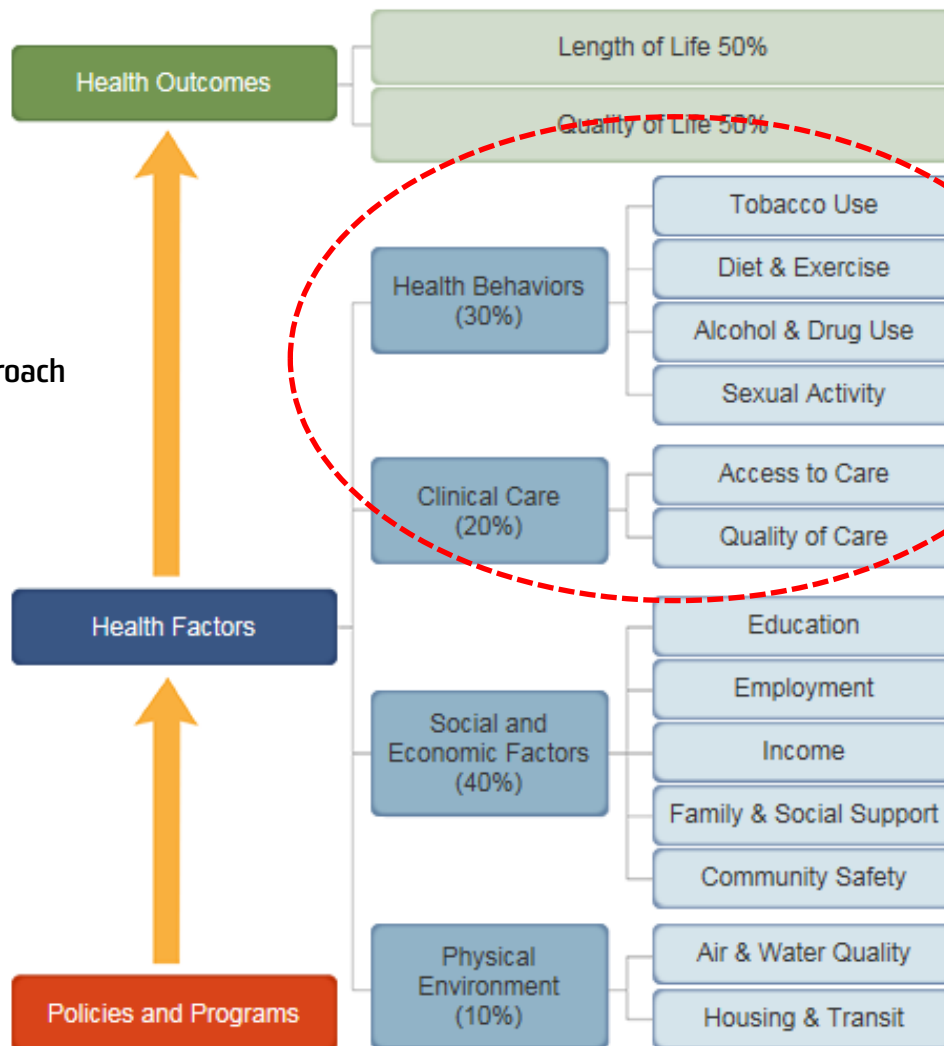
Source: Health Statistics NSW

# Premature deaths (aged under 75) by socioeconomic group 2009-2013



# Addressing the determinants of health inequity

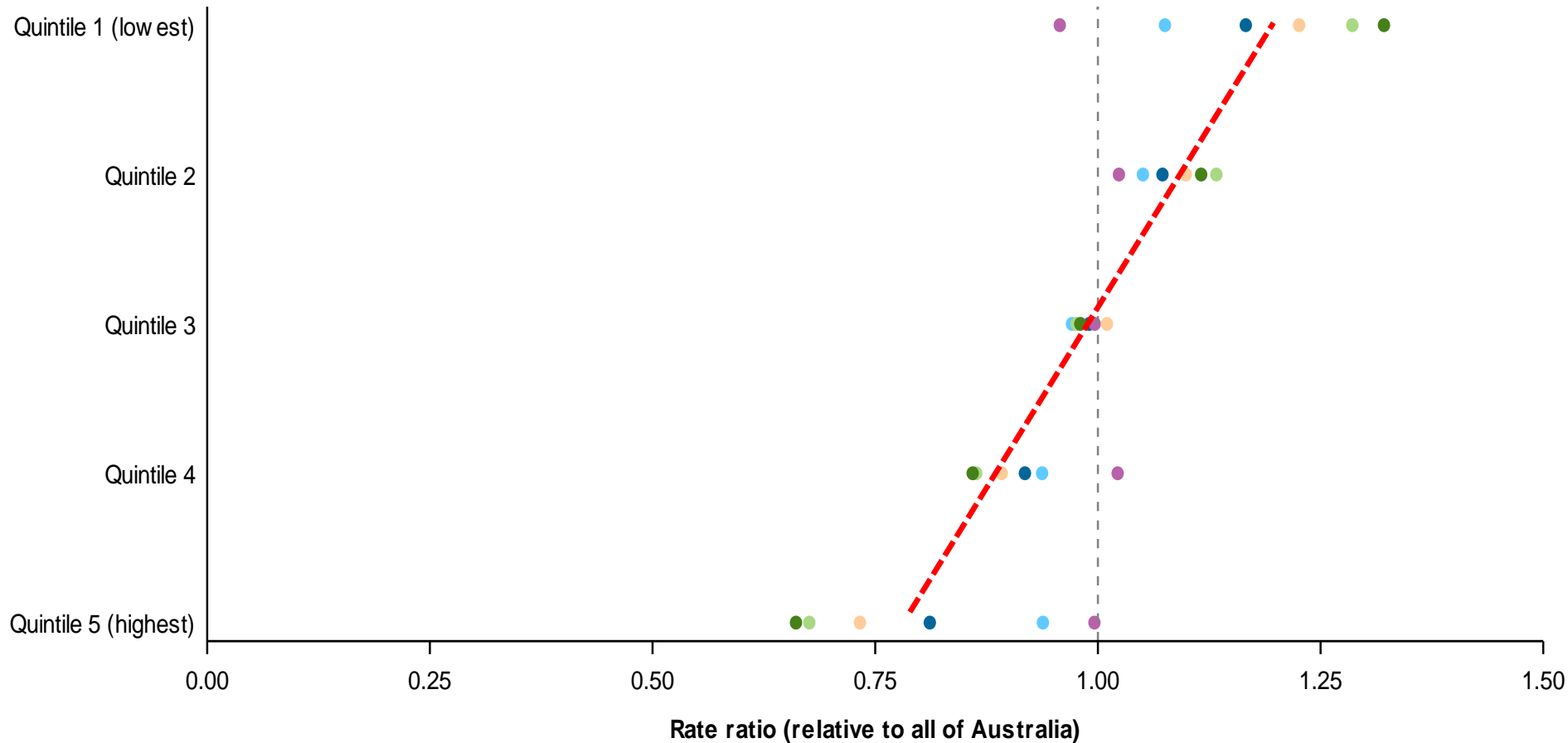
University of Wisconsin 2014  
[www.countyhealthrankings.org/Our-Approach](http://www.countyhealthrankings.org/Our-Approach)



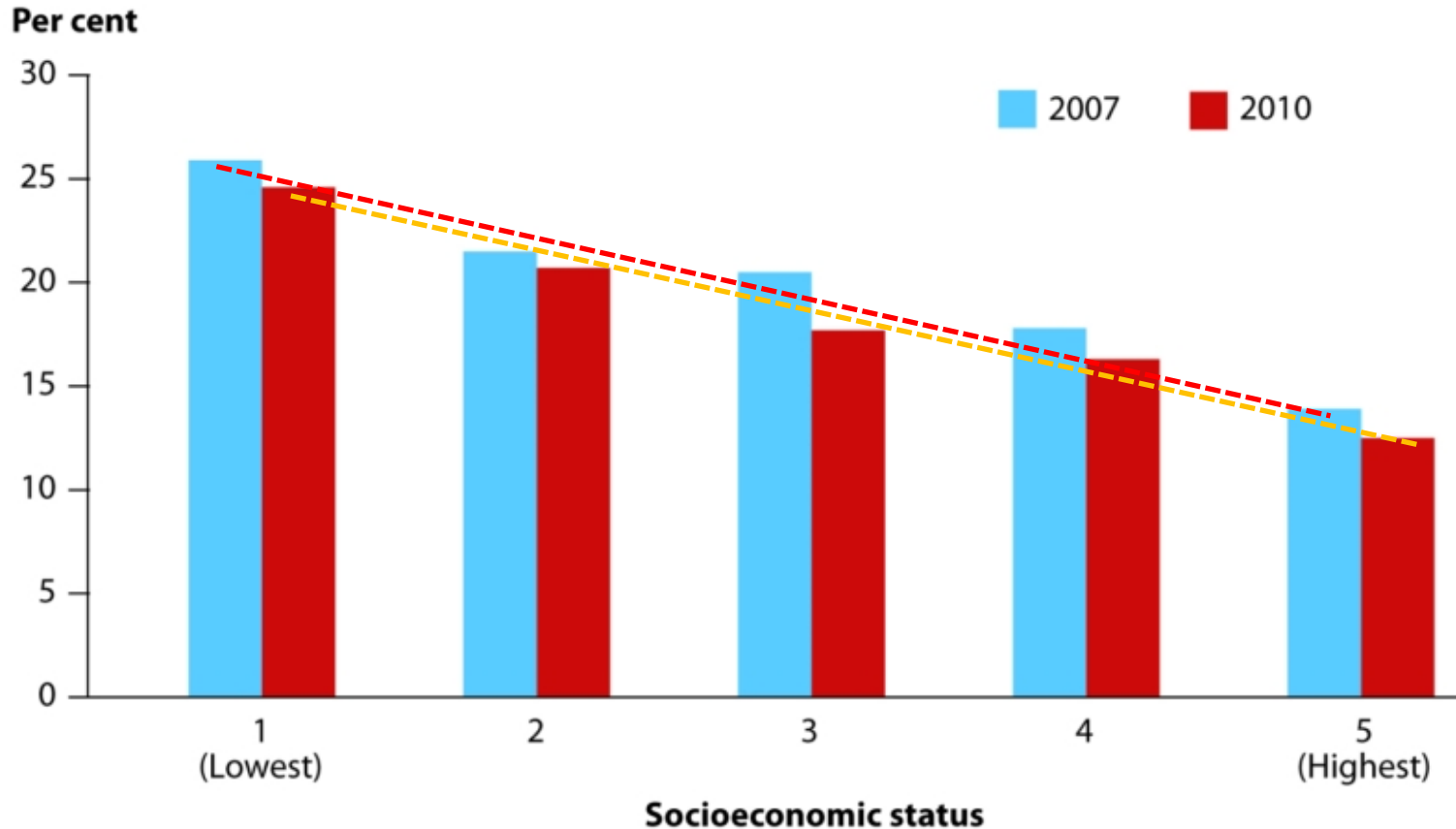
County Health Rankings model © 2014 UWPHI

# Preventable admissions

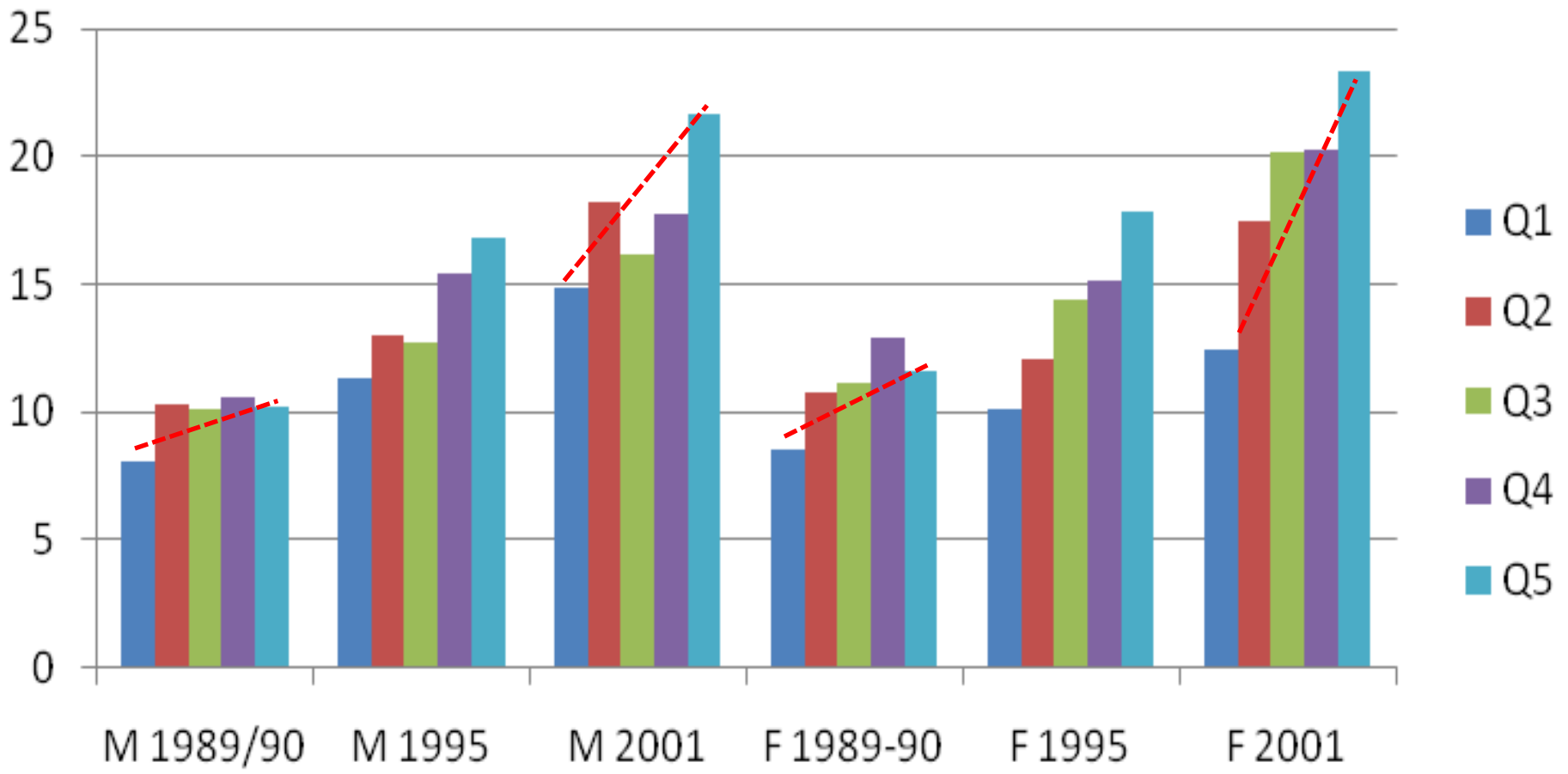
- Coronary heart disease (I20–I25)
- Dementia and Alzheimer disease (F01, F03, G30)
- Chronic obstructive pulmonary disease (COPD) (J40–J44)
- Cerebrovascular disease (I60–I69)
- Lung cancer (C33, C34)
- Diabetes (E10–E14)



# Smoking by socioeconomic status (AIHW 2012)



# Obesity (%) by Disadvantage, Males and Females Aged 25-64, 1989 to 2001



# In Summary

- Men's health is improving more rapidly than women
- Life expectancy is improving for everyone but the gradient is becoming steeper.
- The health system can directly influence 50% of the determinants of life expectancy and quality of life.
- The health system itself has important role in addressing health inequity and is itself a social determinant of health