

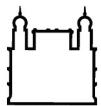
IANPHI

ANNUAL MEETING

DECEMBER 1-3, 2021 | VIRTUAL

SESSION 4: HEALTH EQUITY TOOLS AND STRATEGIES

HOSTED BY



Ministério da Saúde

FIOCRUZ

Fundação Oswaldo Cruz

THE SOCIAL STRUCTURE AS CAUSE OF HEALTH INEQUALITIES IN COLOMBIA: EVIDENCE FROM ONS-INS ANÁLISIS

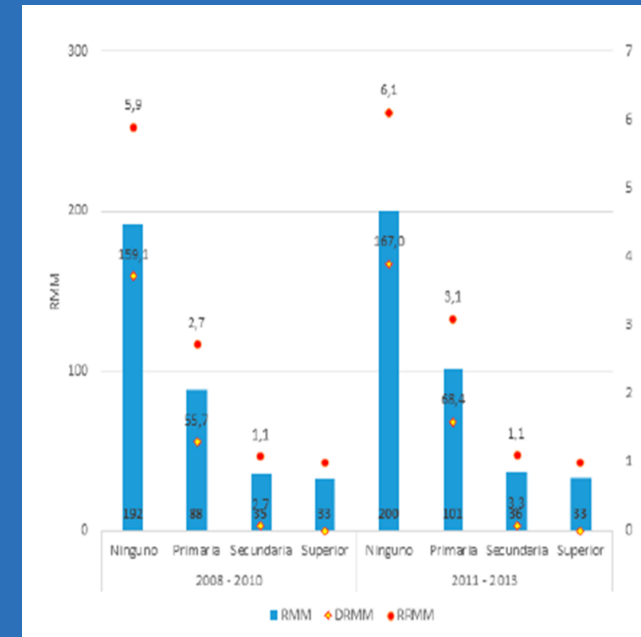
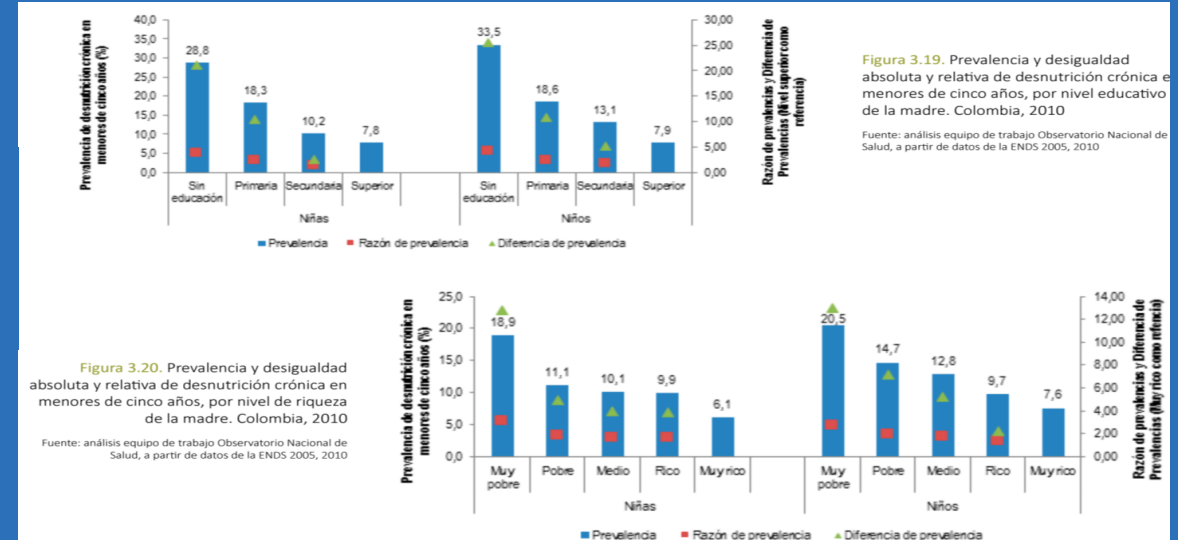
Carlos Castañeda-Orjuela
Observatorio Nacional de Salud
Instituto Nacional de Salud, Colombia

Undernutrition in less than 5 years by educational and richness level

SOCIOECONOMICS INEQUALITIES

Evidence of wide inequalities gaps and gradient in public interest events according to social position measures, as educational and richness levels

MM by educational level



INEQUALITIES BY ETHNICITY

Evidence of inequalities according to ethnicity. However limited information about this variable at individual level

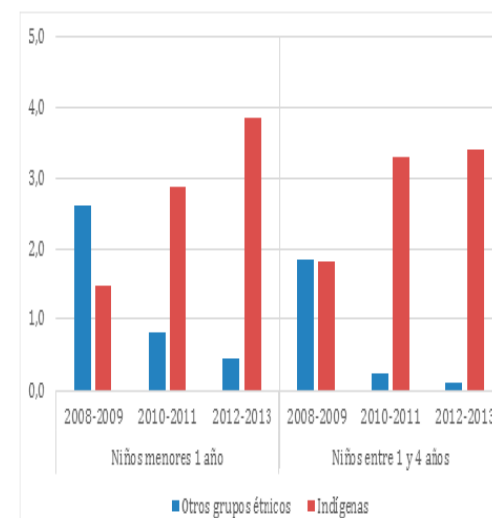
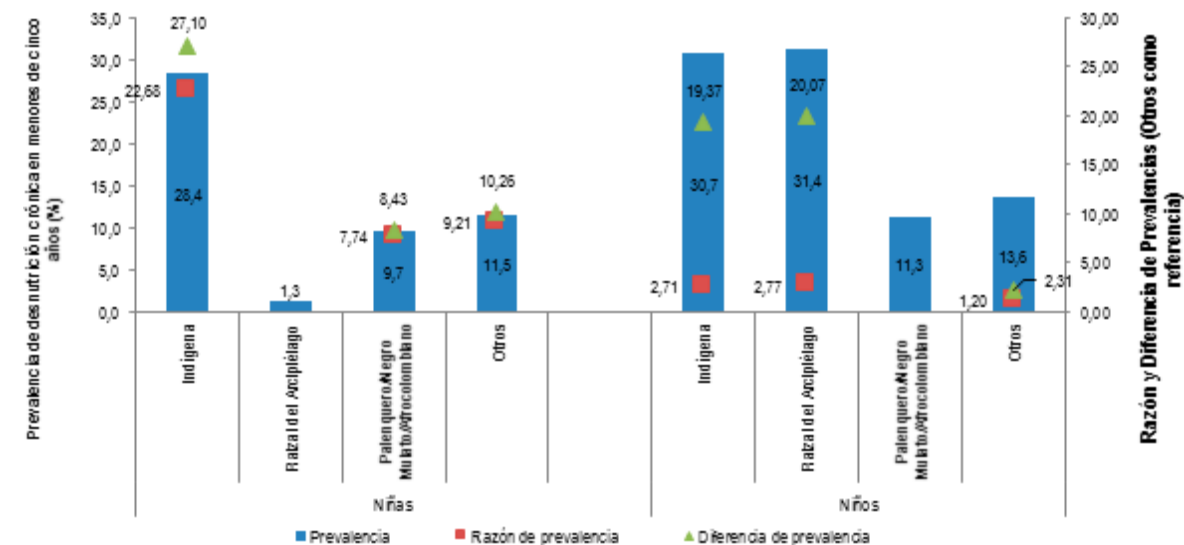


Figura 4.6. Tasa de mortalidad por pertenencia étnica según grupos de edad. La Guajira, 2008-2013

Fuente: análisis equipo de trabajo Observatorio Nacional de Salud

Tabla 4.4. Riesgo relativo de muerte por DNT según pertenencia étnica. La Guajira, 2008-2013

CUATRIENIOS	NIÑOS MENORES DE 1 AÑO	NIÑOS ENTRE 1 Y 4 AÑOS
2008-2009	0,6	1,0
2010-2011	3,5	14,5
2012-2013	8,8	31,9

REF: otros grupos étnicos o ninguna pertenencia étnica
Fuente: análisis equipo de trabajo Observatorio Nacional de Salud

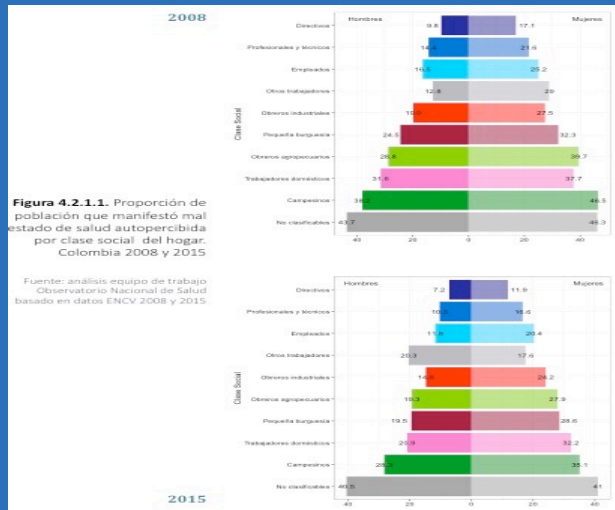


Figura 4.2.1.1. Proporción de población que manifestó mal estado de salud autopercibida por clase social del hogar. Colombia 2008 y 2015

Fuente: análisis equipo de trabajo Observatorio Nacional de Salud basado en datos ENCV 2008 y 2015



Figura 4.5.11.1. Porcentaje de personas pensionadas o afiliadas a una AFP, por clase social del hogar. Colombia, 2008-2015

Fuente: análisis equipo de trabajo Observatorio Nacional de Salud basado en datos ENCV 2008 y 2015

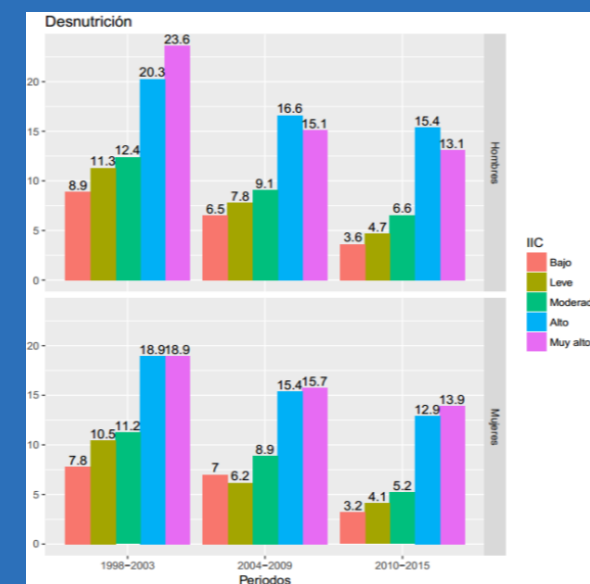
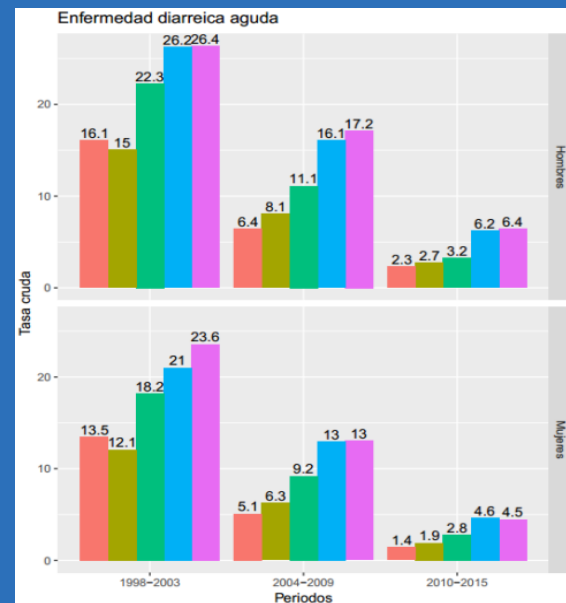
INEQUALITIES BY SOCIAL CLASS AND GENDER

Inequalities in life conditions and health according to social class
 Farmers, agricultural and domestic workers with the worst indications. Women with the worst health self-perception (triple burden)

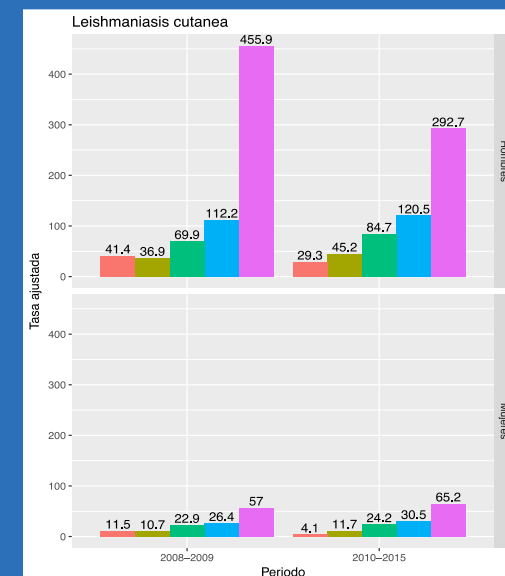
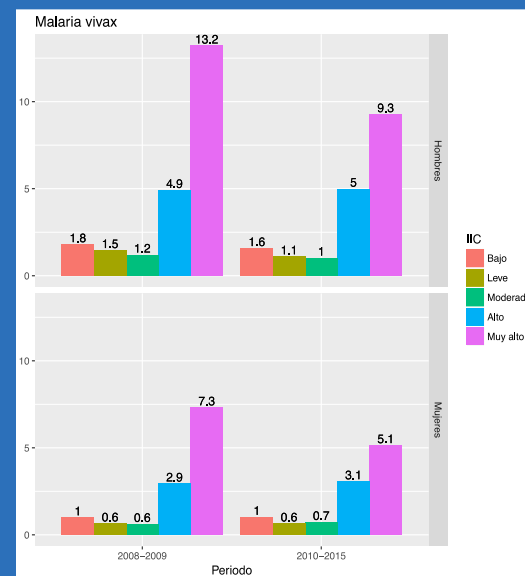
INEQUALITIES BY ARMED CONFLICT AND TERRITORY

Armed conflict is a determinant of the territorial health inequalities in Colombia

Diarreal and undernutrition mortality in less than 5 by armed conflict



Vector-borne disease by armed conflict



Inequalities and COVID-19

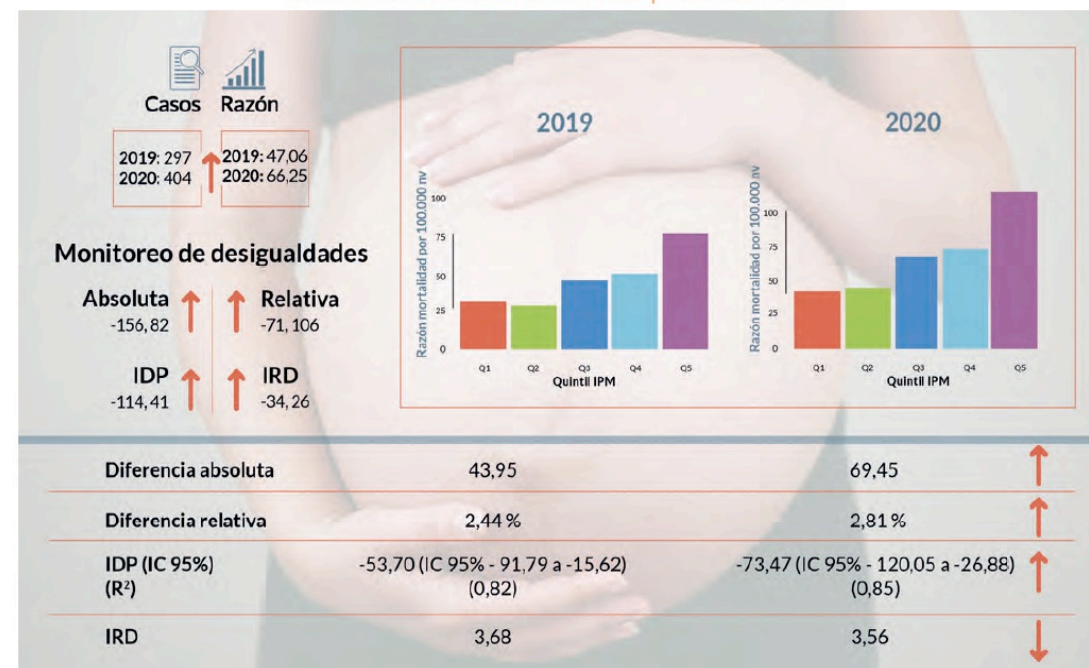
Evidence of inequalities in COVID-19
direct and indirect effects

Pandemics increase the gaps against
historic vulnerable amplió las
brechas de populations

Association between socioeconomic variables and por COVID-19 severity

Variable	Ref.		Ref.	
Población étnica				
Bajo: <0,8%	Ref.		Ref.	
Alto: ≥0,8%	2,46 (1,99 – 3,07)	0,000	1,64 (1,26 - 2,14)	0,000
RMM				
Bajo: <1,0	Ref.		Ref.	
Alto: ≥1,0	4,08 (3,23 – 5,17)	0,000	2,89 (2,23 - 3,75)	0,000
Categoría de ruralidad				
Rural	Ref.		Ref.	
Urbano	3,97 (3,15 – 5,04)	0,000	1,48 (1,04 – 2,12)	0,027

Gráfico 1. Mortalidad materna temprana 2019-2020



ADVANCES AND CHALLENGES TO REDUCE HEALTH INEQUALITIES IN COLOMBIA

Advances:

- The country has incorporated the perspective of SDH into strategic plans and programs of the health sector
- Advances in research and monitoring of social inequalities in health
- Conformation of an intersectoral commission to address the SDH

Challenges:

- Acting on the structural determinants, that implies deep social transformations in various dimensions of the life
- Advancing in the implementation of the peace accords.
- Strengthen the health system to improve access to services and health prevention and promotion from an equity approach.