Health, Wealth & Poverty

Module 4 • i2P • Expedition India

Source: Ken Wieland
The first wealth is health
~Ralph Waldo Emerson

This module takes a look at the link between health, wealth and poverty.

Although the United Nation upholds health as a universal right, equal access to health is not uniform around the world. One of the principal factors that drives inequality in health care is disparity of wealth. People who live in poverty are far more likely to have poor health and to die prematurely compared to people who are wealthy. Indeed the population of wealthy countries has better health outcomes than the population of impoverished nations.

According to the World Health Organization:

“The probability of a man dying between the ages of 15 and 60 is 8.2% in Sweden (wealthy country), 48.5% in the Russian Federation (mid-range wealth), and 84.5% in Lesotho (Impoverished country),”
“A child born in Japan (wealth country) has a chance of living 43 years longer than a child born in Sierra Leone (poor country).”

In short the lower an individual’s socioeconomic position the worse on average their health will be (see: World Health Organization).

**SOCIAL DETERMINANTS OF HEALTH**

Social determinants of health are the conditions in which people are born, grow, live, work and age. These conditions are shaped by a number of factors, important among them the distribution of money. People with greater wealth tend to have better health care, than those with less wealth. Similarly countries with greater wealth (developed countries) tend to have better health care systems than poorer nations.

There are a variety of manners in which poverty has a negative impact on health:

1. **Food**
   People in poor countries, or those living in poverty have greater difficulty obtaining enough quality food. Poor quality food, or a lack of food leads to illness, malnourishment and a host of other illnesses.

2. **Water**
   People who live in poverty tend not to have more difficulty accessing clean water. Just as clean water is essential to health, dirty or polluted water is a significant vector of disease. Thus people who live in poverty are far more frequently exposed to disease through polluted sources of water, or in some cases become ill.
because of an inability to access water. According to the World Health Organization, “In 2002, nearly 11 million children died before reaching their fifth birthday – 98% of these deaths were in developing countries”. Many of these deaths result from a lack of clean water in poor nations.

3. Air
Air quality in poorer nations with a lack of industrial regulation can be poor, leading to the development of respiratory illness.

4. Housing & Sanitation
Poverty leads to poor housing, overcrowding and poor sanitation systems. All of these factors contribute to the spread of disease, illness and death.

5. Health care services
Poorer countries often have inadequate health care services such as hospitals, clinics and pharmacies. A lack of medical services means that people who become ill may not be able to be treated which may lead to further illness and death.

6. Cost of health care
In some countries there may be adequate health services, but these can only be accessed for a fee. Those living in poverty may be unable to afford health care, thereby becoming ill and dying with greater frequency.

7. Infrastructure
Low income countries often
have poorer infrastructure such as roads, and communication systems. This contributes to greater difficulty moving ill people to health care services and to greater road deaths. According to the World Health organization, “Low- and middle-income countries account for 85% of the world’s road deaths.”

Did You Know?

Many Doctors in India are not qualified as physicians. In the Indian health private sector ‘doctors’ are often untrained and largely unregulated. According to a study, 41 percent of those who called themselves “doctors” do not have a medical degree, 18 percent have no medical training whatsoever, and 17 percent have not graduated from high school.”

Source: [Doctors in India](#)

School Exercise

Establish the availability and use of the following basic health services in your community:

- Is an infant or child immunization program available in your community?
- If not, what is the reason?
- If so, what is the cost of this program for users?
- Out of the total possible, how many infants or children are actually immunized by the program?
- Why is the answer to the above question not 100%?