

K3: Who has the keys to unlock equality in health?
(Annemarie Zacho-Broe and Karen Ingerslev)



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in **HEALTHCARE**
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Adapting to a changing world: equity, sustainability
and wellbeing for all



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A young woman with long dark hair and glasses is smiling and holding a white sign with both hands. The sign has the text 'We accompany people in need of extra support' written on it in a dark blue, sans-serif font. She is standing in a paved plaza in front of a modern building with a curved facade and many windows. There are some green bushes and large grey spheres in the background.

We accompany
people in need
of extra support





Who has the keys to unlock (in)equality in health?

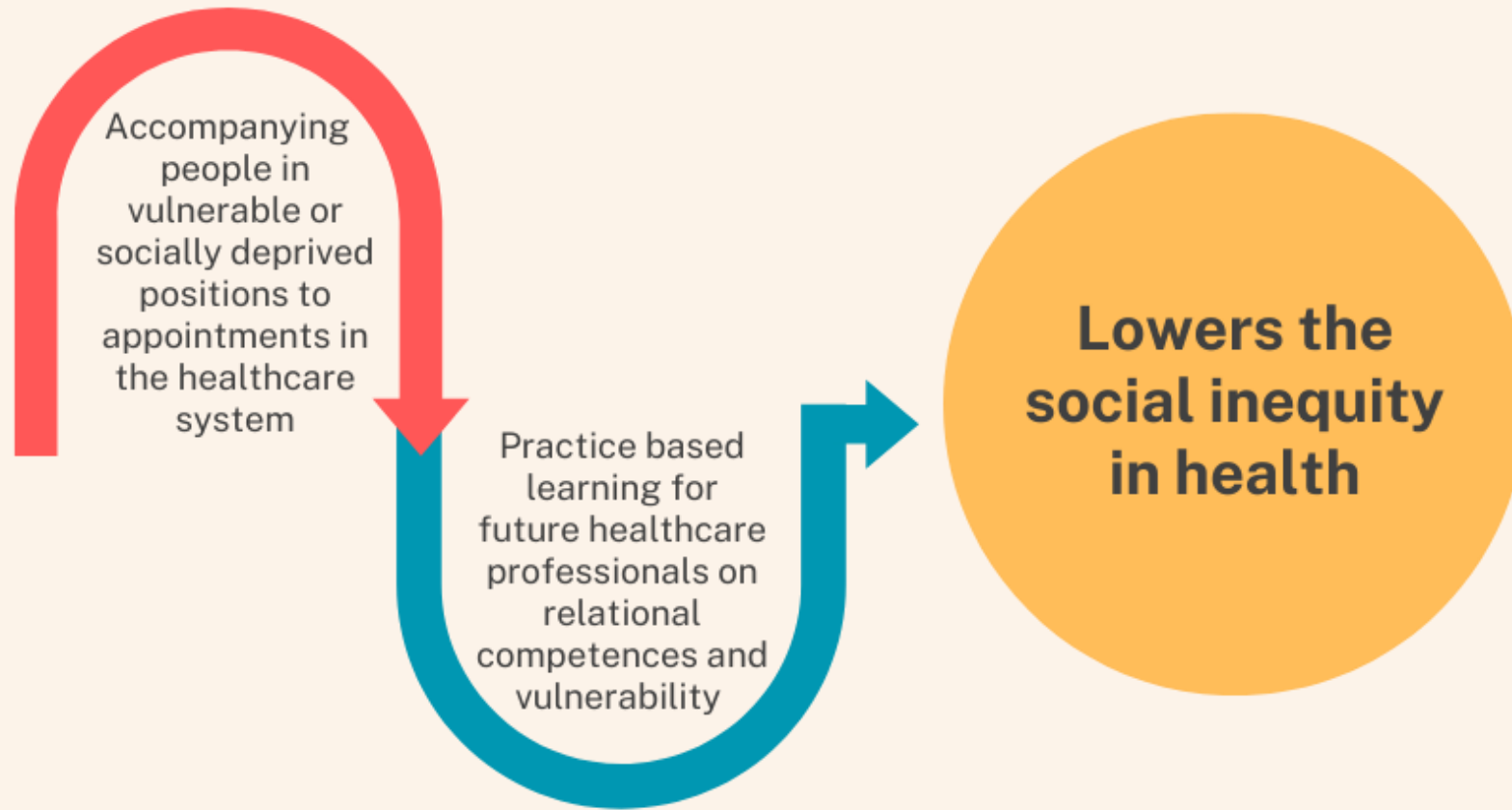
In Social Sundhed, vulnerable patients train future healthcare practitioners and inspire system innovation

Annemarie Zacho-Broe, CEO Region of Zealand and chairwoman of Social Sundhed

Karen Ingerslev, Head of Corporate Human Resource Development and Innovation, Central Denmark Region, board member in Social Sundhed

G EJ 
an må for al
t. Der er så
• at bevare et go
• især hvis man

Organisation and method developed over the past 10 years



The aim of Social Sundhed is to create greater equality in health through health innovation

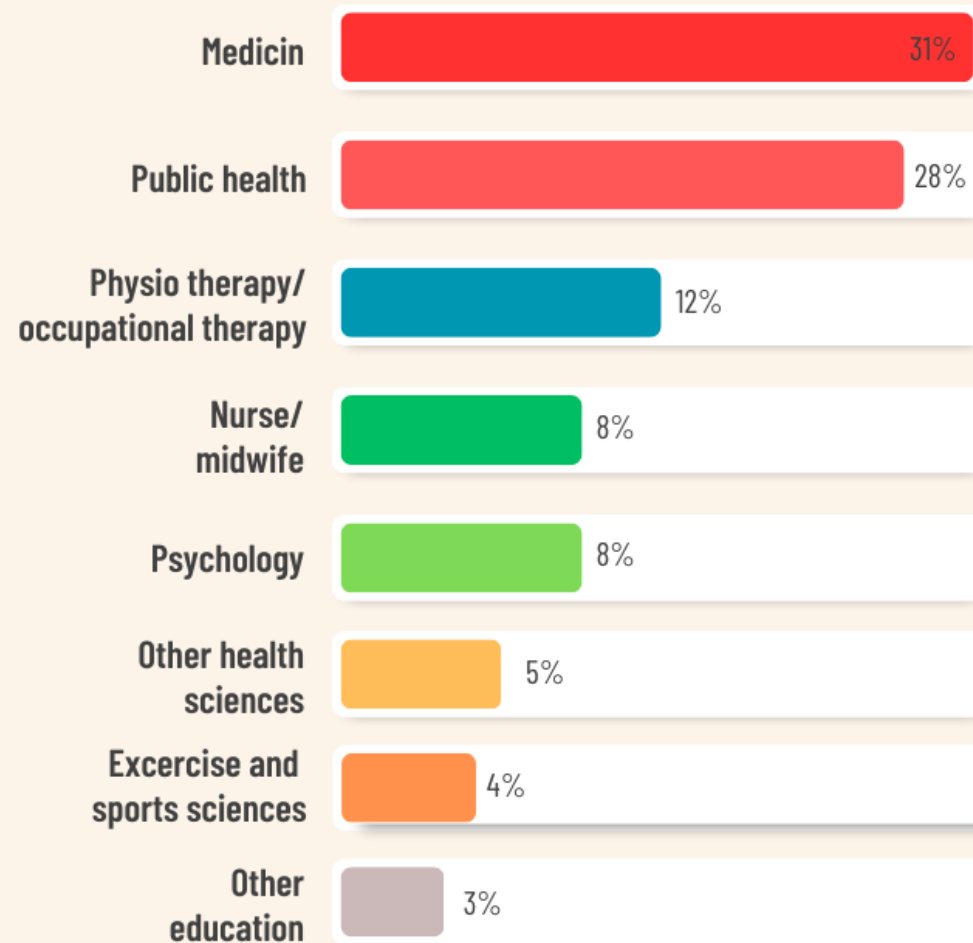
In 2022 more than
2.500 people
received help from
Social Sundhed

250 volunteer
healthcare
students

4 headquarters
covering 9
municipalities
throughout
Denmark



Which kinds of healthcare students build the bridges?



What do bridgebuilders do?

Emotional
support 32 %

Physical support
9%

Way finding
15%

Support in
transportation
17%

Communication
support 16%

Motivation 4%

Other 7%



Health and social inequality in one of the worlds best welfare societies



Meet Thomas, Lolland and Jacob, Gentofte

Difference in life expectancy 6 years

My dad is drinking too much

I have ADHD

I will not get an education

I am going to experience long periods of unemployment

I will be lonely

I will smoke cigarettes and be overweight

I will develop Diabetes, COPD, Depression and Thrombosis

My mum and dad are well-educated

I have support for my homework

I will get a long-term higher education

I will get a good job

I will have a lifelong relationship

I only drink a little bit more than recommended

I will not get any chronic diseases



People at risk have significant worse health compared to the average population

- 63 pct have longterm illness – nearly twice as many as the average population.
- 48 pct feel stressed on a daily basis –less than every fifth in the average population
- 42 pct of people at risk have less than 20 teeth remaining
- 40 pct of people at risk have attempted suicide
- 16 pct of women at risk have experienced sexual assaults in the last year – 8 time more often than the average female population
- 17 pct of people at risk have been exposed to brute physical violence – This applies only to 2 pct of the average population

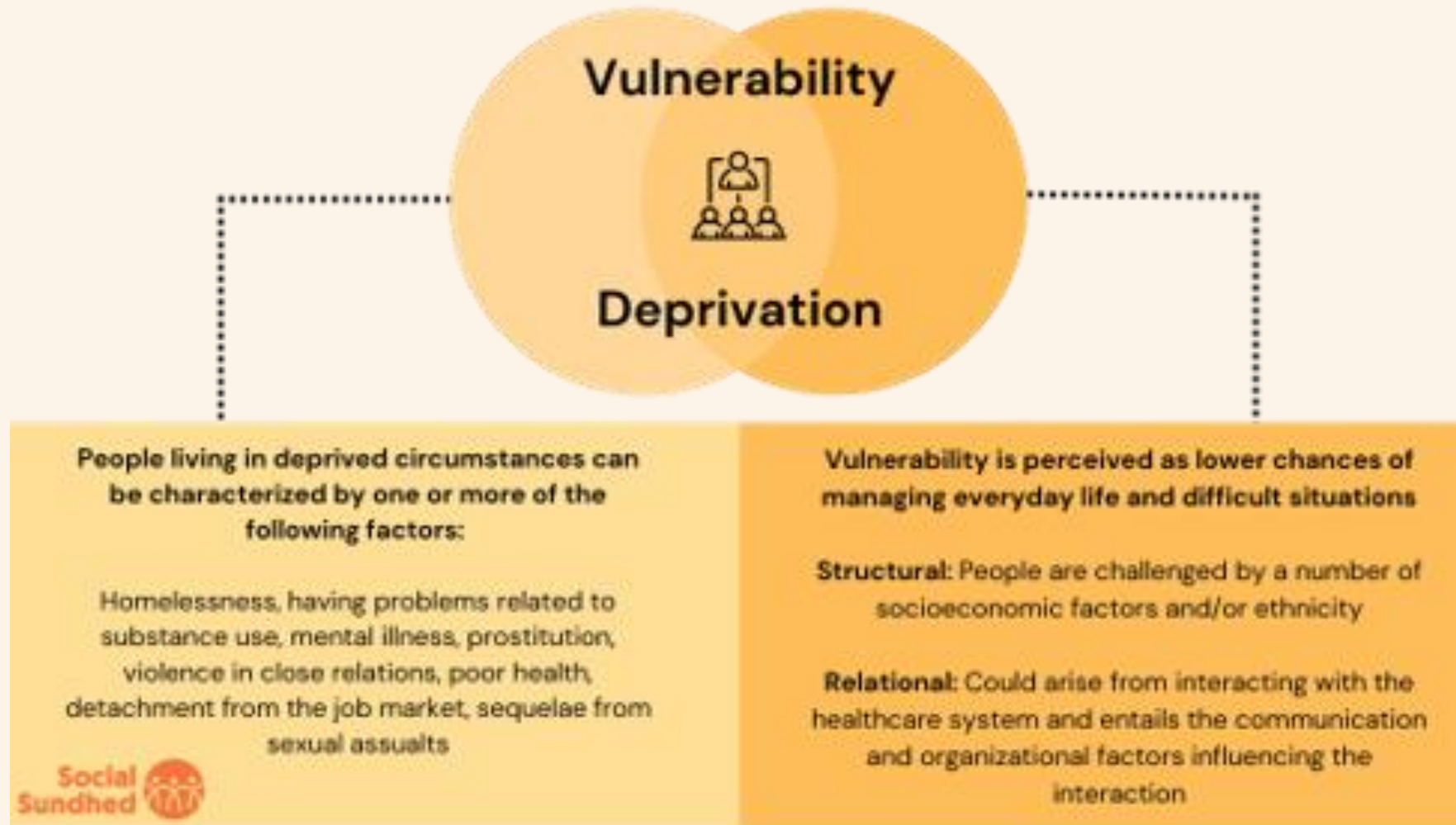


A burning platform - A complex structural problem

- Social inequality in Denmark is growing
- There is an acute shortage of health personnel and the proportion of multi illnesses and older patients are increasing – as is the social and geographical inequality in health.
- Although the Health Act provides right to free and equal access to health services in Denmark, the reality is that the Danes use and profit different from health services. Inequality costs both society and the individual dearly.
- People in socially disadvantaged or vulnerable positions experience more illness, have a greater use of acute inquiries to the healthcare system and live shorter lives than the rest of the population.
- This patient group encounters barriers in their path through the healthcare system which prevent equal access to treatment



The people behind the numbers?



Healthcare system approach to inequality

- Laws and regulations across healthcare and social care
- Health Service initiatives like social nurses
- Political ambitions and initiatives nationally, regionally and in municipalities, supported by councils, committees and investment funds
- In 2023 the government must come up with innovative and long-term solutions and work is underway – but the changes require a broad effort across sectors
- The Alliance against Inequality in Health recommends that part of the solution can be found in a closer collation between the healthcare system, civil society and educational institutions





Who has (parts of) the responsibility?

- Regions (secondary healthcare and social sector)
- General practitioners
- Municipalities (primary healthcare and social sector)
- Families, networks
- Civil society





We have to remember

- Those who are vulnerable without relatives
- Those who have difficulty finding their way
- Those who experience mental illness, vulnerability and barriers in the encounter with healthcare
- The ones that never show up



HEALTH INNOVATION THROUGH PARTNERSHIPS

- Universities
- The healthcare sector
- Municipalities
- Healthcare educations
- Organizations across civil society

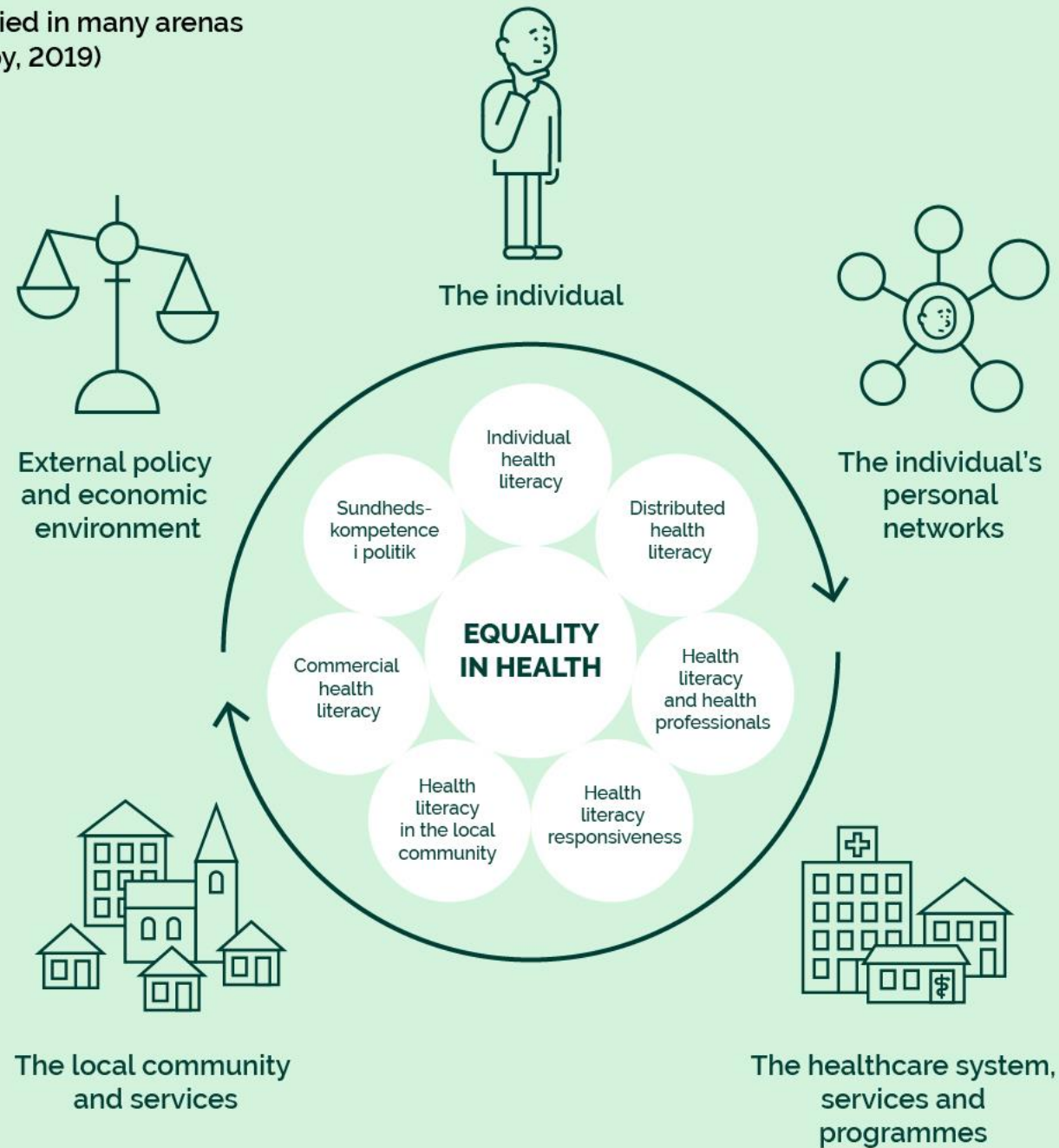


KEY TAKE AWAYS ABOUT INEQUALITY IN HEALTH

- Low-threshold services in a specialized healthcare system
- Major challenges in healthcare require common and sustainable solutions across society – this does not necessarily mean complex services and solutions!
- Greater social equality in health requires relational and organizational capacity building in the healthcare system
- Civil society spans the organizational boundaries in healthcare, alongside with the patients who are vulnerable, who experience complex pathways and who are often lost.
- Dispel two myths:
 - Civil society and NGO's are volatile and therefor not accountable partners
 - That NGO's steal work from the health professional workforce



Health literacy is developed and applied in many arenas
(illustration inspired by Maindal & Aaby, 2019)



DEFINITION

Health literacy

Health literacy is the combination of personal competencies and situational resources needed for people to access, understand, appraise and use information and services to make decisions about health. It includes the capacity to communicate, assert and act upon these decisions.



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DEFINITION

Digital health literacy

The ability to seek, find, understand, and appraise health information from electronic sources and apply the knowledge gained to addressing or solving a health problem.





Distributed and organizational health literacy are keys to unlock inequality in healthcare

For further dialogue, please contact:

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