

# Health is Not Sustainable

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**Croix-Rouge suisse**  
**Schweizerisches Rotes Kreuz**  
**Croce Rossa Svizzera**





## What we have achieved worldwide

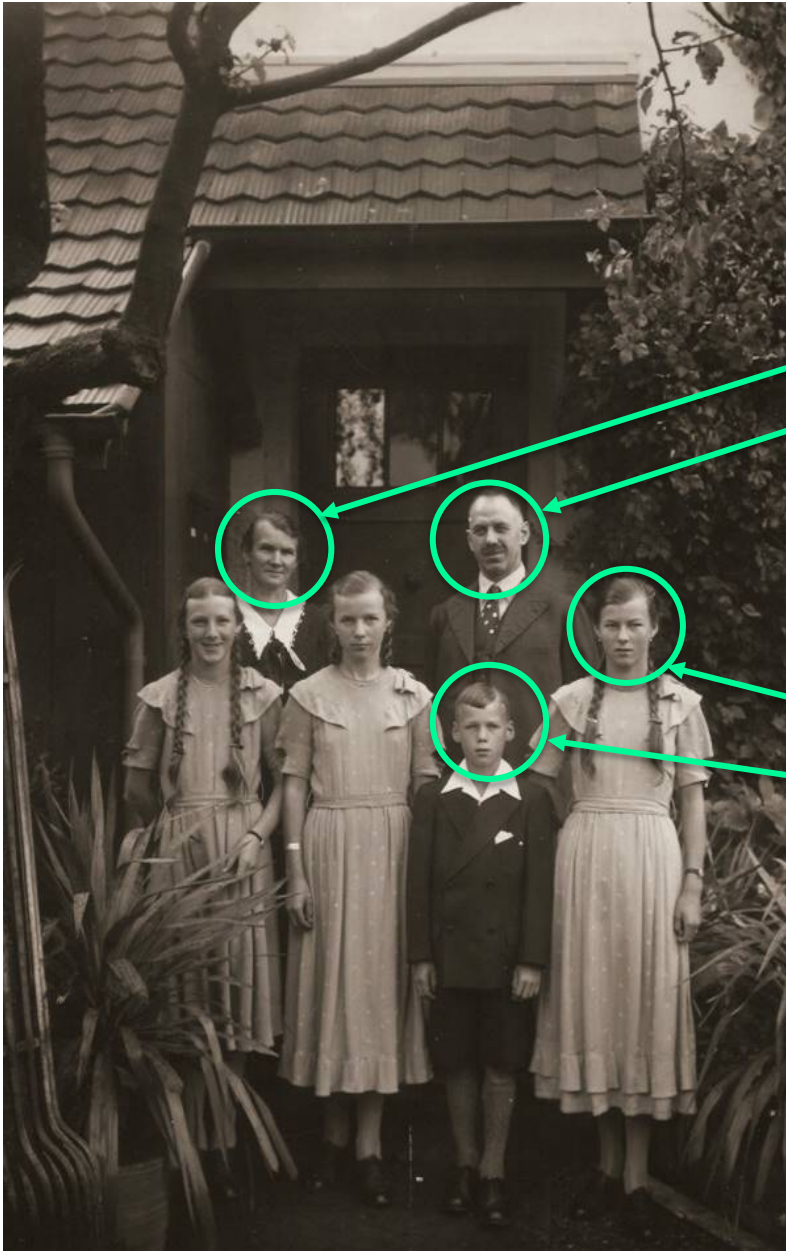
Some results of the Millenium Development Goals 1990-2015

- The number of people living in extreme poverty has declined by more than half
- The mortality rate of children under-five was cut by more than half
- Maternal mortality fell by 45 percent





## What we have achieved in industrialized countries: Switzerland



Life expectancy  
Born around 1900:  
Women 48 years  
Men 46 years

Born around 1920:  
Women 57 Jahre  
Men 54 Jahre



Born around 2000:

Women 83 years

Men 77 years

Born around 2015:

Women 85 years

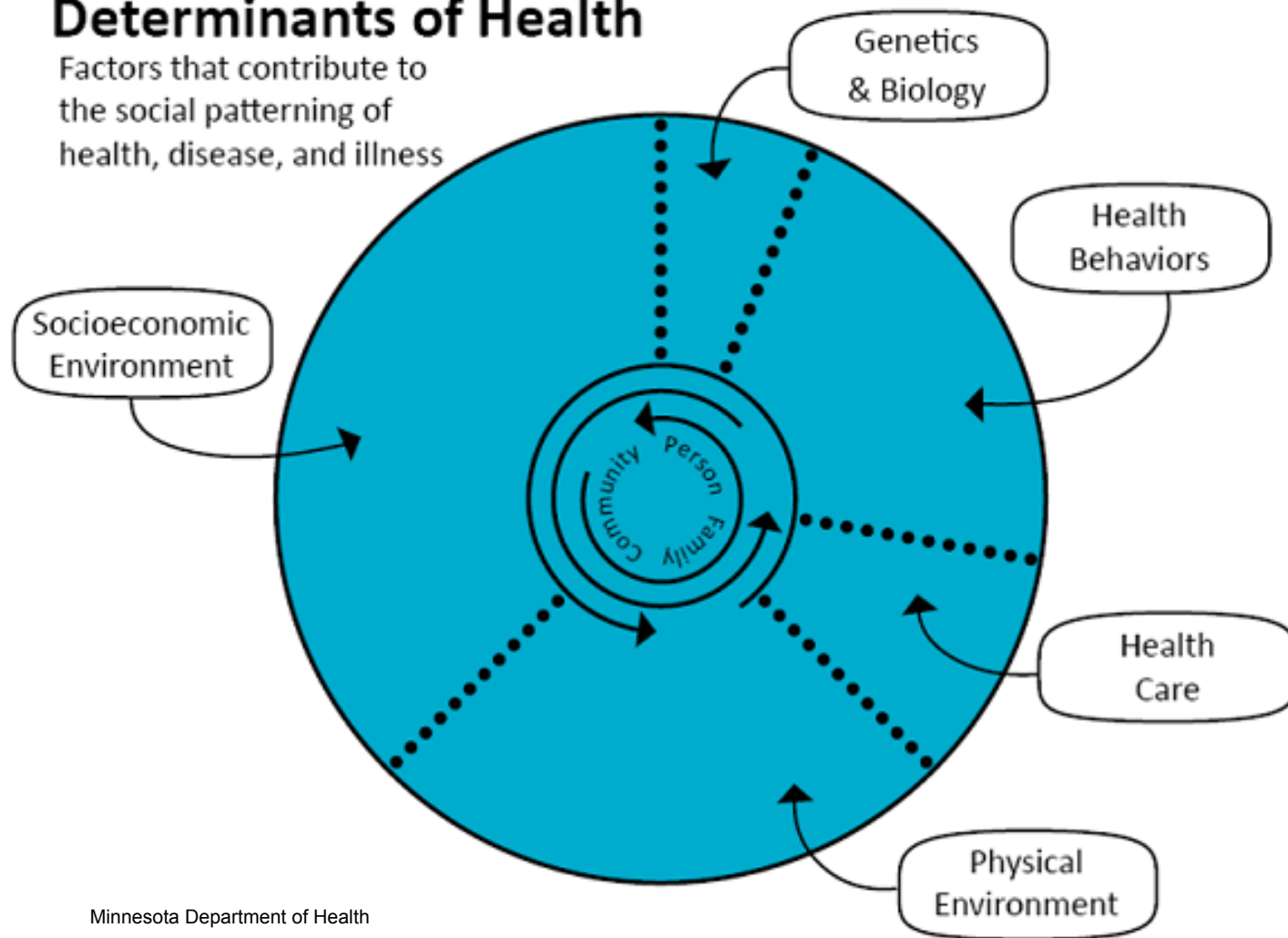
Men 81 years



# How did we achieve it? – Determinants of health

## Determinants of Health

Factors that contribute to the social patterning of health, disease, and illness



Minnesota Department of Health





# Education and wealth means health

*Standardized yearly mortality rate in a population of 100'000 persons age 25 to 64, years 2000-2005*

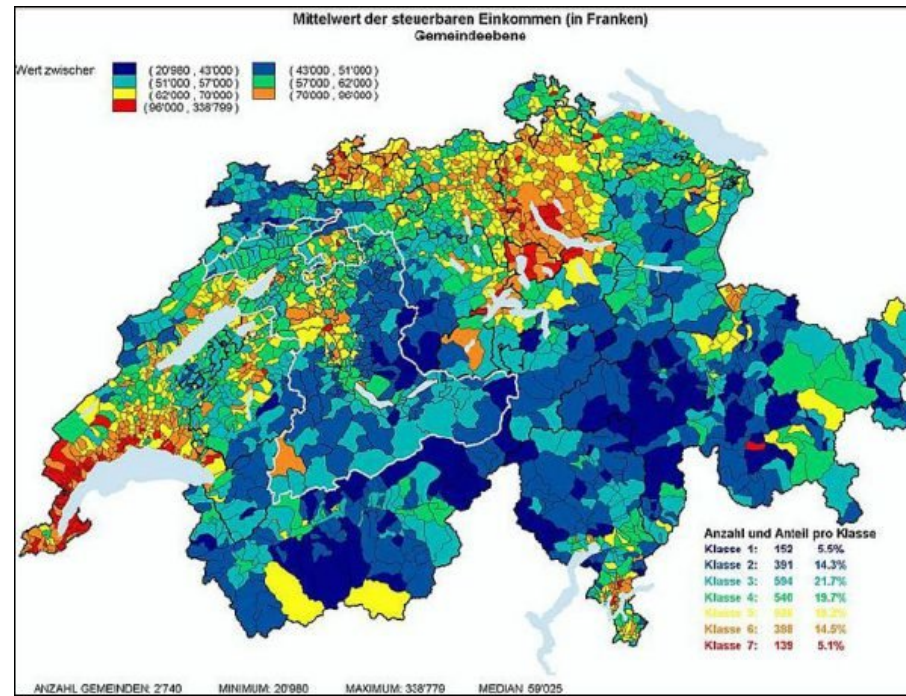
Wanner and Lerch 2012: Mortalité différentielle en Suisse 1990-2005. Swiss Federal Social Insurance Office.

*Life expectancy of men, year 2000:*

High income communities: **79,5 years**  
 Communities with high emmigration: **74.6 years**

Wanner and Lerch 2012: Räumliche Unterschiede in der Mortalität in der Schweiz seit 1970. Swiss Federal Office of Statistics.

<b>Men</b>	
No formal degree	863.6
Sec I	795.6
Sec II	629.4
Tertiary education	425.6
<b>Women</b>	
No formal degree	424.2
Sec I	379.7
Sec II	304.7
Tertiary education	273.3







Jah wart alt xxii Jar



Ritter



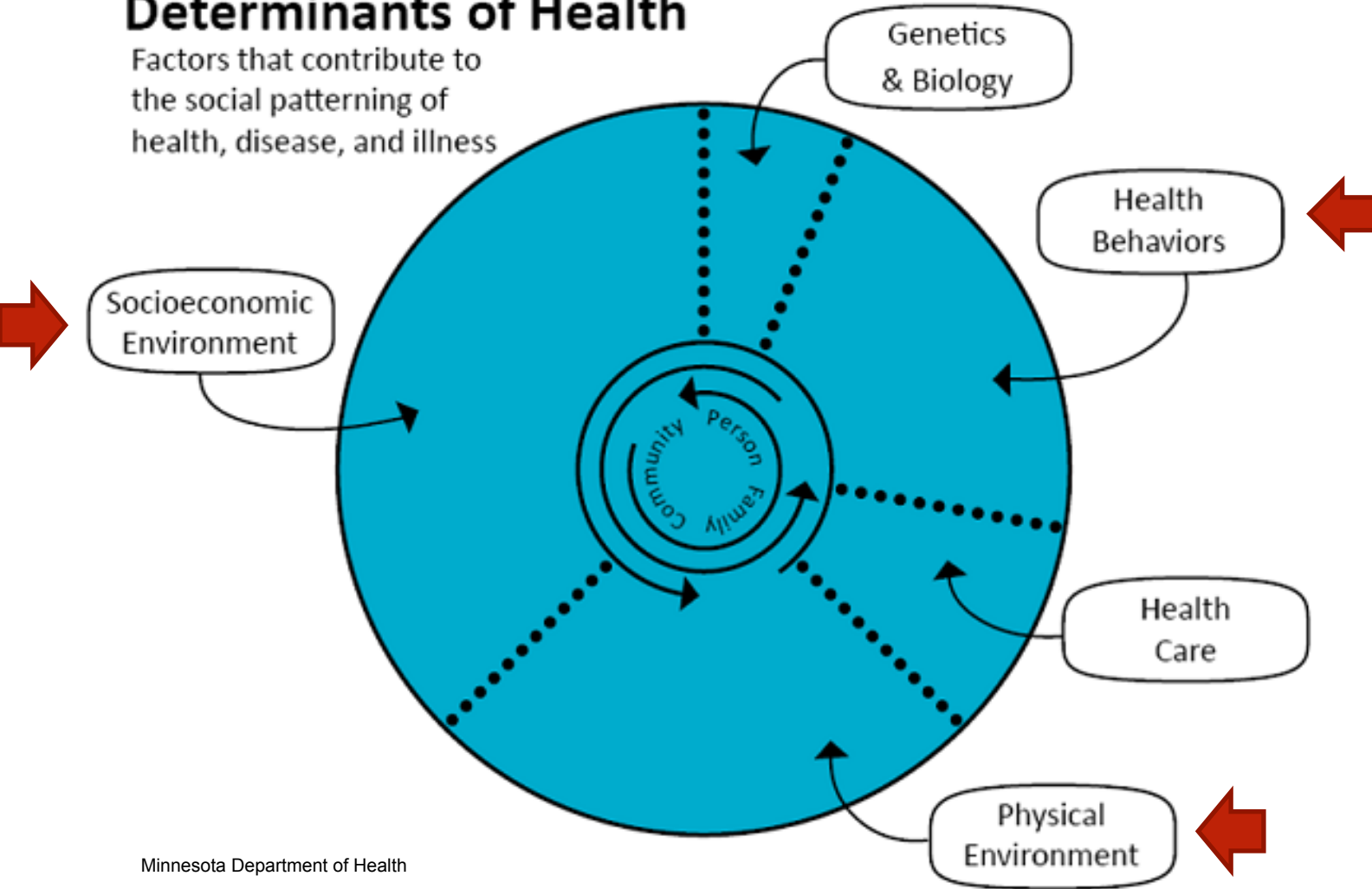
Ritter





# Determinants of Health

Factors that contribute to the social patterning of health, disease, and illness



Minnesota Department of Health



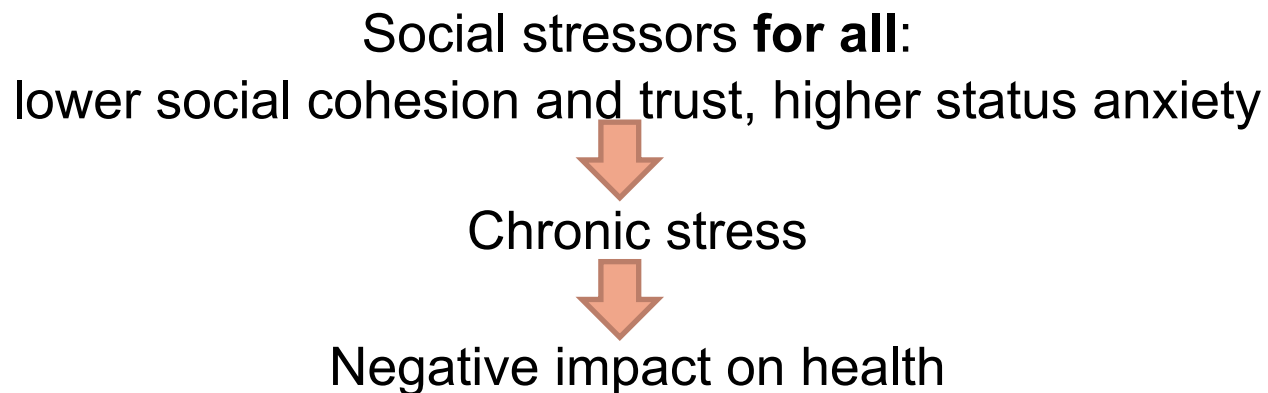
... but higher inequality means:

## a) less health **for all**

«The evidence that large income differences have damaging health and social consequences is strong and in most countries inequality is increasing. Narrowing the gap will improve the wellbeing of populations.»

Pickett and Wilkinson 2015: Income inequality and health: A casual review. Soc Sci Med 128: pp. 316-326

## Plausible explanations



... but higher inequality means:

**b) less economic growth for all**

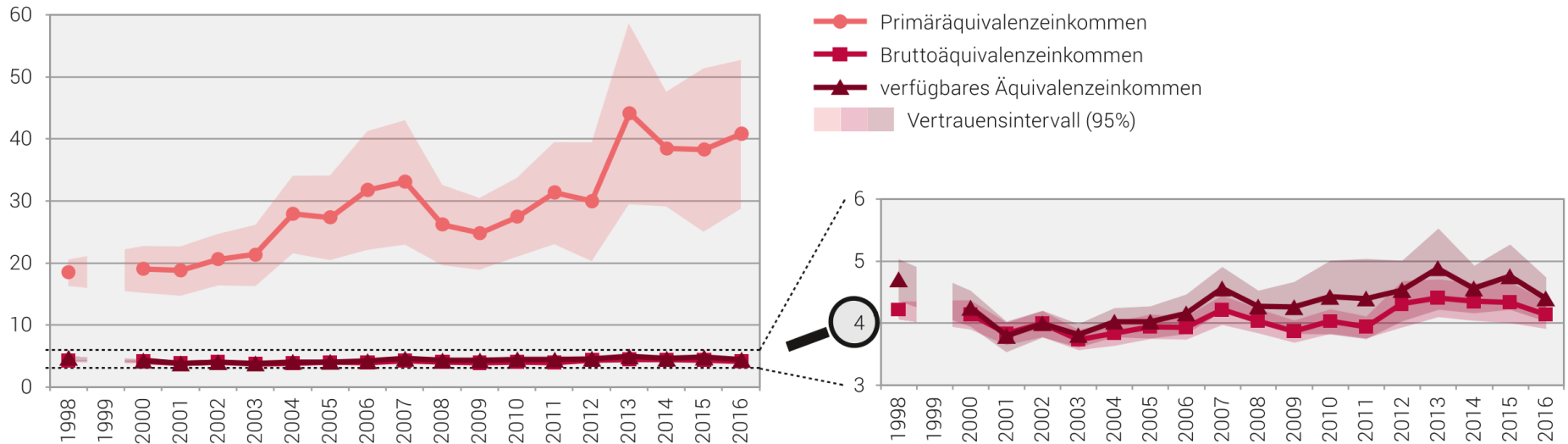
«Increases in income for the top 20% of the income distribution are negatively associated with overall economic growth, while increases for the bottom 20% positively correlate with growth.»

Income inequality and labor income share in G20 countries: Trends, Impacts and Causes. ILO, IMF, OECD and World Bank 2015



# Economic inequality in Switzerland by income

## Entwicklung der Quintilverhältnisse (S80/S20)



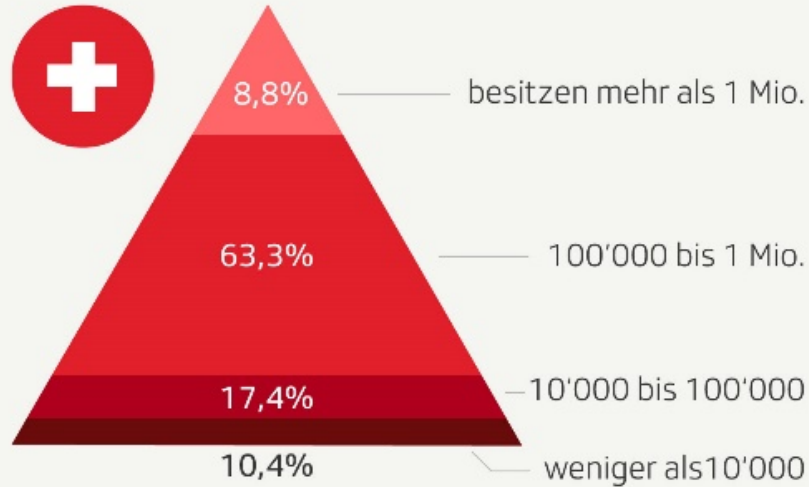
Anmerkung: Berechnungen einschliesslich der negativen Einkommen, ohne fiktive Mieten

Quelle: BFS – Haushaltsbudgeterhebung (HABE)

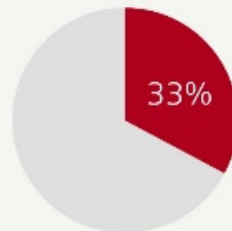
© BFS 2019

# Economic inequality in Switzerland by wealth

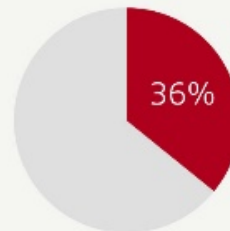
Vermögensverteilung Schweiz  
in US-Dollar



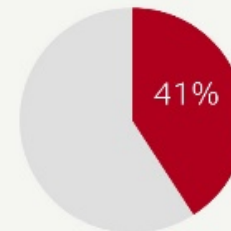
Die Schere zwischen Reich und Arm öffnet sich.  
Soviel gehörte in der Schweiz dem  
«reichsten Prozent»:



1991



2003



2013

# Current trend in economic inequality: Cutting the social security budgets

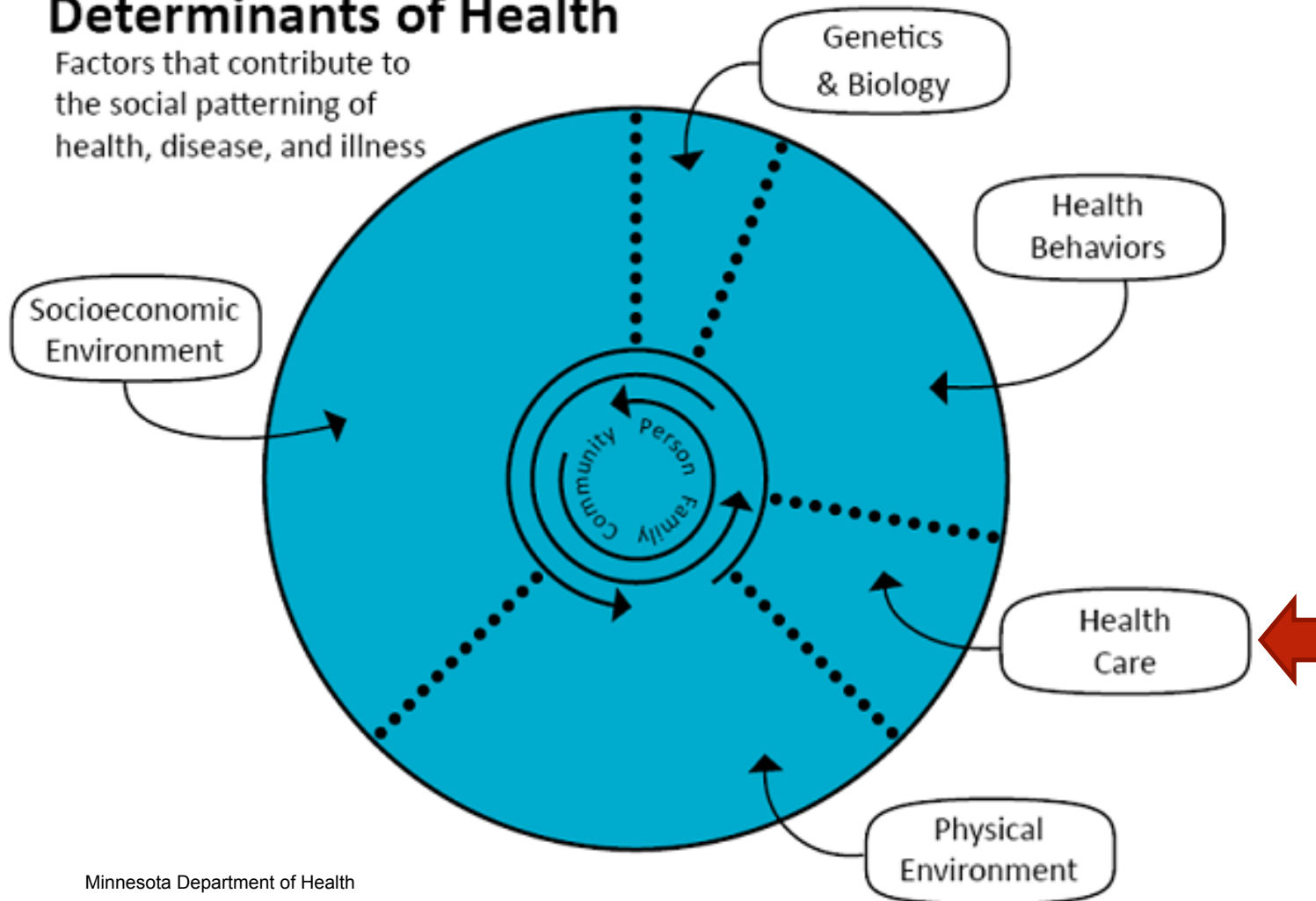




# Current trend in access to health care

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## Health care «light»?

### National Parlament, Spring Session 2019

*Motion SVP-Fraktion: «Krankenversicherung light» für Personen mit ungeklärtem Aufenthaltsrecht*

**Der Bundesrat wird beauftragt, die nötigen Schritte einzuleiten, damit Personen mit ungeklärtem oder provisorischem Aufenthaltsstatus, d.h. Asylsuchende (Ausweis N), Schutzbedürftige (Ausweis S), vorläufig aufgenommene Ausländer (Ausweis F), Sans-Papiers und Weitere, in einer "Krankenversicherung light" mit stark eingeschränktem Leistungskatalog versichert werden.**

*Motion Yvette Estermann SVP/LU: «Krankenversicherung light» - eine günstige Alternative?*

**Der Bundesrat wird beauftragt, die nötigen Schritte einzuleiten, damit interessierte Personen in der Schweiz in einer "Krankenversicherung light" mit stark eingeschränktem Leistungskatalog versichert werden können.**





# Examples of inadequate health care in Switzerland

- 1. Under-treatment of persons with psychiatric disorders**
- 2. Lack of treatment places for victims of torture and war**
- 3. Over-treatment of over-insured persons**

# Under-treatment of persons with psychiatric disorders

Only one third of the persons with Major Depression seeks professional help

Rüesch et al. 2013: Regionale psychiatrische Inanspruchnahme und Versorgungsbedarf in der Schweiz. Obsan Dossier 23, Neuchâtel, p. 81



Pontesano, Swiss Red Cross Zurich:  
Visits against loneliness and support in seeking professional help  
by volunteers

# Lack of treatment places for victims of torture and war

2013 → before the refugee crisis:

Estimated lack of 500 specialized treatment places

Oetterli et al. 2013; Ist-Analyse von psychosozialen Behandlungs- und Betreuungsangeboten für traumatisierte Personen im Asyl- und Flüchtlingsbereich. Kurzbericht zuhanden des Bundesamts für Migration BFM. Luzern. Evaluanda und Interface.



Red Cross Outpatient Clinics for Victims of Torture and War,  
Bern and St. Gallen

## No health care without communication!

«Ist professionelles interkulturelles Dolmetschen für die Ausführung einer medizinischen Untersuchung oder Behandlung sowie für deren therapeutischen Erfolg unabdingbar und können die versicherten Personen keinen Dolmetschenden zur Verfügung stellen, können die Kosten für das Dolmetschen als integrierter Teil der medizinischen Leistung betrachtet werden.»

**...but:**

«Im ambulanten Bereich, der von den Kantonen nicht mitfinanziert wird, sieht die geltende Tarifstruktur keine entsprechende Tarifposition vor.»

Swiss Federal Office of Public Health: Faktenblatt Finanzierung des interkulturellen Dolmetschens im Gesundheitswesen durch die obligatorische Krankenpflegeversicherung (OKP). March 24, 2019



## Overtreatment of over-insured persons

Persons in Switzerland with semi-private or private health insurance (25% of the population) have

2.2 times more knee operations

1.6 times more Caesarean sections

1.5 times more spinal operations

...

than persons with basic insurance.

Swiss Federal Office of Public Health: Spitalstatistik 2016



## In conclusion

- Health needs continuous efforts to be sustained
- Investing in equality and in health of the most vulnerable improves the health of all

**....So let's join forces to sustain health!**



Thank you! Grazie! Merci beaucoup! Danke!

