

Promoting equity in primary health care services

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Equity in access to primary health care services is a central objective of the Swedish health care system. Yet, several reports have illustrated that disparities still exist in the primary health sector, and have increased since the beginning of the 1990s. The aim of this study is to analyze and explain the reasons for continuing inequality in access to and utilization of primary health care services in a welfare system. In order to promote more equitable primary health care, there is a need for mapping, understanding, and analyzing the reasons for existing inequalities. Then, the next step is to find strategic interventions to establish more equitable primary health care. One of the most meaningful interventions is to distribute resources among different local government authorities. The distribution of resources should be based on needs-based measurements. Demographic attributes – age, sex, immigrant population, income – should provide added value in comparing the levels of needs in different county councils and municipalities. Underserved areas

with less health-literate populations and disadvantaged social groups should get more resources to provide appropriate and effective health care, regarding, for example, consultation times, continuity, starting drop-in systems, employing bilingual staff, having access to interpreters if needed, etc. Developing and strengthening patient education programs and patient associations are particularly relevant in these cases. Another essential intervention consists in “equity education” for health care providers. Health care providers need education that highlights the structural influences on health, incompatibilities between national health systems, the concept of equity/equality in health care, transcultural health care, and the implications of and responses to any kind of discrimination within the health care sector. Consistent follow-up and evaluation of outputs and the identification of obstacles are key determinants of systematic change towards more equitable primary health care. Implementing health equity as a performance measurement and financial policy can be other ways of advancing primary health care. Further, higher levels of community/patient association representation are associated with greater equity in primary health care.

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