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Action on reduction of health inequalities in Belgium

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Experts' conference: Moving forward equity in health

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State of the art

- There has been a research tradition in this topic in Belgium since 1982. Additional, the implementation of the health survey in 1997 and the activities of the support point for combating poverty have increased the research interest in this topic.
- Based on the information from the various population health surveys (2001, 2004) and other studies we may conclude that despite numerous actions there are still health inequalities in Belgium



State of the art

- In 2007 the King Boudewijn Foundation has mapped the most important initiatives undertaken by the various authorities in Belgium from 1990 to 2006 to reduce the existing health inequalities
- Further actions will look at
 - a more integrated approach on the different policies levels (local, regional and federal)
 - a focus on promotion and prevention
 - attention to the social gradient of health inequalities
 - research and performance measurement



Actions concerning health care access

- The improvement of accessibility and quality of health care is one of the main objectives of health care policy (focus especially on affordability)
- Close follow up by health, labour and the social affairs authorities



Actions concerning health care access

- Variety of actions taken:
 - emergency medical aid for all
 - increased reimbursement for vulnerable groups
 - maximum bill for health care costs (income and social)
 - proximity health care services
 - initiatives targeting the reduction of the price of medicines
 - intercultural mediator to facilitate communication with migrants
 - Cross-sector policy plan for combating poverty and more especially guaranty the right to health. This plan exists of 12 measures (some examples are in measures to increase hospital admission for the poor ones, increasing the use of the third-party payer system by care providers, encouraging the practice of GP in regions where prospects are poorest in socio-economic terms, etc...)



Actions concerning promotion/prevention

- More complex
- An integrated, multilevel and intersectional approach is needed.
- Collaboration with health, education, housing, labour...
- Some exemplars of the actions taken:
 - preventive measures (vaccinations, screening) free of charge to a broad public
 - information sessions for migrants to increase their participation to breast cancer screening
 - free prevention services for all in the medical-social accompaniment of young mothers and newborns
 - promote health at school in the context of a health in all policies in the Flemish community
 - preventive health checks at school
 - stress management for people who are living in poverty
 - special attention for vulnerable groups in community mental health services
 - quality, durable, affordable housing for all
 - promotion of healthy and balanced nutrition in both the general population as well as in vulnerable groups
 - fight alcohol and drug abuse in working settings
 - focus on industrial accidents and occupational illnesses



Conclusions

- There is growing awareness and willingness to act
- There are structures for intersectorial collaboration at the government level
 - The interministerial conference on health invite other relevant governmental authorities and develops integrated plans of actions which result in protocol for collaboration on specific fields
 - Working group of the interministerial conference on performance measurement of the health care system
 - At this moment we discuss the health inequalities topic in one of the working groups of the interministerial conference and Belgium will also participate to the joint action on health inequalities of the EC.

