Disuguaglianze di salute: politiche sanitarie e non sanitarie

Istituto Superiore di Sanità - 30 maggio 2019

L’INMP per l’equità nella salute in Italia

Alessio Petrelli
INMP mission for equity in health

Funded annually through an interregional project, approved by the Conference between the Italian State and its Regions-autonomous Provinces (Conferenza Stato-Regioni 15 febbraio 2018), under proposal of the Ministry of Health, INMP activities aim at:

- developing innovative systems and pathways to combat health inequalities in Italy
- making access to the NHS easier for the most disadvantaged social groups
- ensuring high-quality services for Italian and foreign citizens

1. The National Epidemiological Observatory for Health Equity (OENES) produces and disseminates original knowledge deriving from specific research projects based on collaborations with regional epidemiologic units and institutions engaged on topics of interest.

2. The public health network promotes evidence-based interventions tailored on Regions
INMP mission for equity in health

More recent development:

December 1\textsuperscript{st}, 2017: the report «L’Italia per l’equità nella salute» was presented at the presence of the Ministry of Health

February 27\textsuperscript{th}, 2019: The «Italian atlas on socioeconomic inequalities in mortality» was presented at the presence of the Ministry of Health

Both ministries involved outlined the Institute's role in the field of health inequalities, particularly regarding epidemiological research and promotion and evaluation of effective interventions
Recently concluded a three-year research protocol with the Italian National Institute of Statistics (ISTAT)

A new research protocol among INMP and ISTAT was recently signed

Research lines:

✓ Mortality in inland areas

✓ The mortality of immigrants resident in Italy

✓ Socioeconomic inequalities in avoidable mortality

✓ The mediating role of behavioural risk factors in socioeconomic incidence of coronary heart disease and the role of the geographical area
«The information contained in the supplement is very rich and allows a detail that we had never had in Italy»

Fabrizio Faggiano, past-president AIE

Lo stato di salute percepito della popolazione immigrata in Italia
Self-perceived health status among immigrants in Italy

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2 Istituto nazionale di statistica (Istat), Roma

Discriminazione percepita sul luogo di lavoro in quanto straniero: uno studio sulla salute mentale percepita dagli immigrati in Italia
Perceived discrimination at work for being an immigrant: a study on self-perceived mental health status among immigrants in Italy

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La prevenzione dei tumori femminili nelle donne immigrate residenti in Italia
Cervical and breast cancer screening among immigrant women resident in Italy

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5 Servizio epidemiologia ASL TO3, Regione Piemonte, Torino

Sovrappeso e obesità nella popolazione immigrata adulta residente in Italia
Overweight and obesity among adult immigrant populations resident in Italy

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Fattori associati al ricorso a visite mediche: confronto tra cittadini italiani e stranieri residenti in Italia
Factors associated to medical visits: comparison among Italians and immigrants resident in Italy

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Gli immigrati irregolari: cosa sappiamo della loro salute?
Undocumented immigrants: what do we know about their health?

Giovanni Baglio, Raffaele Di Palma, Erica Eugeni, Antonio Fortino

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Differenze nella copertura vaccinale antinflessenziale tra sottogruppi di immigrati adulti residenti in Italia a rischio di complicanze (2012-2013)
Differences in influenza vaccination coverage among subgroups of adult immigrants residing in Italy at risk for complications (2012-2013)

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Petrelli et al., 2018
Italian atlas of mortality inequalities by educational level

The atlas includes, for 34 groups of causes of death:

- maps by Province of residence, showing SMR «smoothed*», standardized by age and education level
- population attributable fraction (PAF) by Region

*: SMR smoothed by bayesian statistical models

Tables by Region and educational level:

- Standardized mortality rates
- Standardized rates of years of life lost
- Mortality rate ratios (MRR)
Diseases of the circulatory system

PAF% by region standardized by age

UOMINI

DONNE

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[ -5, 5)
[ 5, 15)
[ 15, 25)
>= 25

Petrelli et al., 2019
2. The Italian Network of the Longitudinal Metropolitan Studies

- INMP encouraged the reinforcement of the network of the longitudinal metropolitan studies: Torino, Reggio Emilia, Modena, Bologna, Venezia, Firenze, Prato, Livorno, Roma, Catania, Siracusa (about 6.500.000 resident people)

- Funded and coordinated two projects aimed at investigating inequalities in health in a network perspective

- Mortality, hospitalization, maternal and child health in immigrants and, more generally, socio-economic differences in health was the main topic analyzed

- A monographic volume of E&P will be published collecting the main results of the projects
La salute degli immigrati e le diseguaglianze socioeconomiche attraverso la rete degli Studi Longitudinali Metropolitani (SLM)

The health of immigrants and socioeconomic inequalities through the Italian Network of Longitudinal Metropolitan Studies (IN-LiMeS)
3. Monitoring system for the health of immigrants

- Monitoring system for the health of immigrants based on 78 indicators taken from the results of previous projects funded by the Ministry of Health and revised by a panel of experts.

- Currently, 9 Regions are taking part in the project. Sicily joined the project.
Access to emergency care
4. Accidents at works among immigrants: WHIP information system

The integrated WHIP-health database

- **INPS**: work history
- **INAIL**: accidents at work and occupational diseases
- **Ministry of health**: hospital discharges
- **ISTAT**: mortality

**WHIP**
Work History Italian Panel
Temporal trend of standardized rates of total work accidents by gender and Country of birth

4. Accidents at works among immigrants: WHIP information system
Other activities

5. Systematic reviews of interventions to reduce inequalities in health

6. Health of detainees

7. Methodological support to the clinical research of INMP
Towards a shared strategy for health equity:

1. System actions
   - make rights and resources equitably accessible
   - moderate unequal effects of barriers to healthcare
   - promote equity in clinical governance
   - promote equity in prevention
   - adopt the social report to assess the impact on equity
   - develop cross-sectorial and multilevel actions

2. Interventions on the most vulnerable groups
   - equity in non-healthcare projects and fundings
   - remove barriers to access to healthcare for vulnerable groups