

Equity in Health with an Emphasis on Women's Health

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Dear Editor

Health is considered as one of the fundamental values and requirements of human development, emphasized in divine religions and international documents. Therefore, all governments are obliged to mobilize all their resources to meet the health needs and provide quality and affordable health care at all levels of public health, medical, and rehabilitation services for each member of the society. This responsibility has been devoted to the health system (1). In addition, the health systems have tried to properly do their responsibilities to ensure the health of communities, move towards universal health coverage (UHC), and achieve the sustainable development goals (SDG) by establishing various mechanisms (2). One of the essential factors that should be considered by policy-makers, planners, and economists of the health system in this regard is health equity.

Health equity is an interdisciplinary concept with three dimensions, including equitable access to healthcare services, equitable financing, and equity in health outcomes (3). The link between each of these dimensions and women's health will be discussed below:

1. Equitable access to health care services: Studies indicate that women are more vulnerable to disease than men, the prevalence of some diseases is higher among them, they have higher health needs, and therefore healthcare services at all levels of public health, medical, and rehabilitation should be accessible to them. In this regard, to meet the health needs of women living in deprived areas of the country, further attention with a more favorable way should be paid to them by the health system. This can be achieved by allocating more funds to more deprived provinces, equitable distribution of health care centers in the country, and devoting specialized human resources to these areas.

2. Equitable financing: Accordingly, women's access to healthcare services should be based on their need and affordability. In other words, the factors such as the inability to pay for healthcare services should not prevent anyone from receiving these services. This is especially important for rural women, female-headed households, migrant women, elderly women, women with disabilities, jailed women, and addicted women. The lack of financial support for these groups by the health system may leave households with catastrophic and impoverishment health expenditure and threaten their health again. Therefore, financial protection approaches should be considered by health policy-makers and health economists in this regard.

3. Equity in health outcomes: According to the previous studies, the indices such as mortality rate, quality of life, life expectancy, as well as the incidence of disease and disorders (physical, mental) have a significant relationship with socio-economic status and social determinants of health (SDH) (3, 4-6). Therefore, the existence of social inequalities, gender discrimination, class divisions and poverty in society will have adverse effects on women's health indicators. Therefore, communities concerned with development and progress must take practical steps to promote social justice and ensure the health needs of various population groups, including women.

To achieve universal health coverage and sustainable development goals, all members of society should benefit from the healthcare services they need at the right time and right place, and any obstacles in this regard should be removed (2, 7). On the other hand, governments need to take more effective steps to achieve equity in many ways, although its full implementation will be far from expected, even in developed and leading countries. Health equity has always been a challenge in the health systems of developing countries such as Iran. Despite different policies, studies

have shown that service recipients do not have the desired access to healthcare services, and adequate financial protection of households is not provided when receiving these services (3, 8, 9). These situations are more severe in deprived areas of the country and households with poor socio-economic status. Furthermore, the existence of various inequalities in society will affect the status and final indices of health. Women's responsibilities in the multiple roles they take may endanger their health. On the other hand, women at the micro and macro levels support the health and development of families and communities, respectively. Efforts to promote women's health in all aspects physically, mentally, psychologically, emotionally, socially, and spiritually would be the best approach to achieve the health goals of the whole society, have healthy communities, and improve the quality of human life. So, the presence of any defect in women's health may disrupt this chain. Therefore, health promotion programs for this critical and sensitive population should be made of the all country's main and most important measures. During the coronavirus epidemic, women showed their importance and influential role in crisis management in the family and society in various aspects. Finally, it should be noted that each dimension of health equity has broad implications. In this paper, an attempt was made to discuss the vital issue of women's health with a justice-oriented perspective. It is suggested that particular policies and planning be made to promote equity in matters related to women's health. In this regard, valid scientific products can provide the basis for evidence-based policy-making (10). It is also recommended that specific studies be conducted to examine women's health regarding each mentioned dimension of health equity to better define the basis for decision-making and planning at the macro level by specifying a more accurate view of the issue.

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