
EQUITY IN HEALTH AND HEALTHCARE IN PERU: 2004-2008

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ABSTRACT

Background. Peru is characterized by large socio-economic inequalities, including health inequalities. However, recent trends are particularly hopeful for improvements in health equity. In that sense, we estimate health inequities in Peru for 2004 and 2008, and use an inequality decomposition analysis to try to explain factors behind observed changes.

Methods. The study focuses on measures of health status (self-reported morbidity) and use of health care services obtained from the Peruvian National Household Survey (ENAHO). We focus on health inequities associated to socio-economic status (SES), and use inter-quantile differences (gradient), concentration indexes, with and without needs-based adjustments, and its decomposition.

Findings. Our findings show low inequities in our measures of health status, with a slightly pro-poor self-reported health problem and slightly pro-rich self-reported chronic illness. Inequity in the use of outpatient curative services had a significant decline from 2004 to 2008, while inequity in the use of healthcare for hospital and dental services slightly increased, during the same period.

Interpretation. Limitations of self-reported morbidity measures are probably underestimating the results of health inequalities across SES groups. Many recent positive trends may explain the decline in the inequality in the use of outpatient curative services, namely increases in household mean income, reductions in economic inequality, the *Juntos* conditional cash transfer program, and the gradual expansion of public health insurance (SIS-*Seguro Integral de Salud*), the main public policy for the promotion of health equity in Peru. A rigorous impact evaluation of the coming SIS expansion would be an ideal opportunity to identify some causal relationships.

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Conflicts of Interest. The authors declare no conflicts of interest.

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