

# Smoking: is it an equity issue?

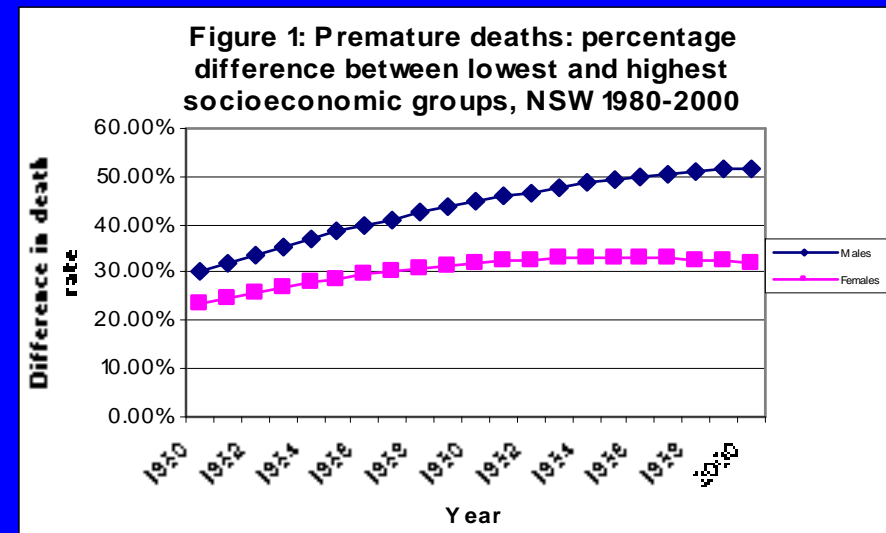
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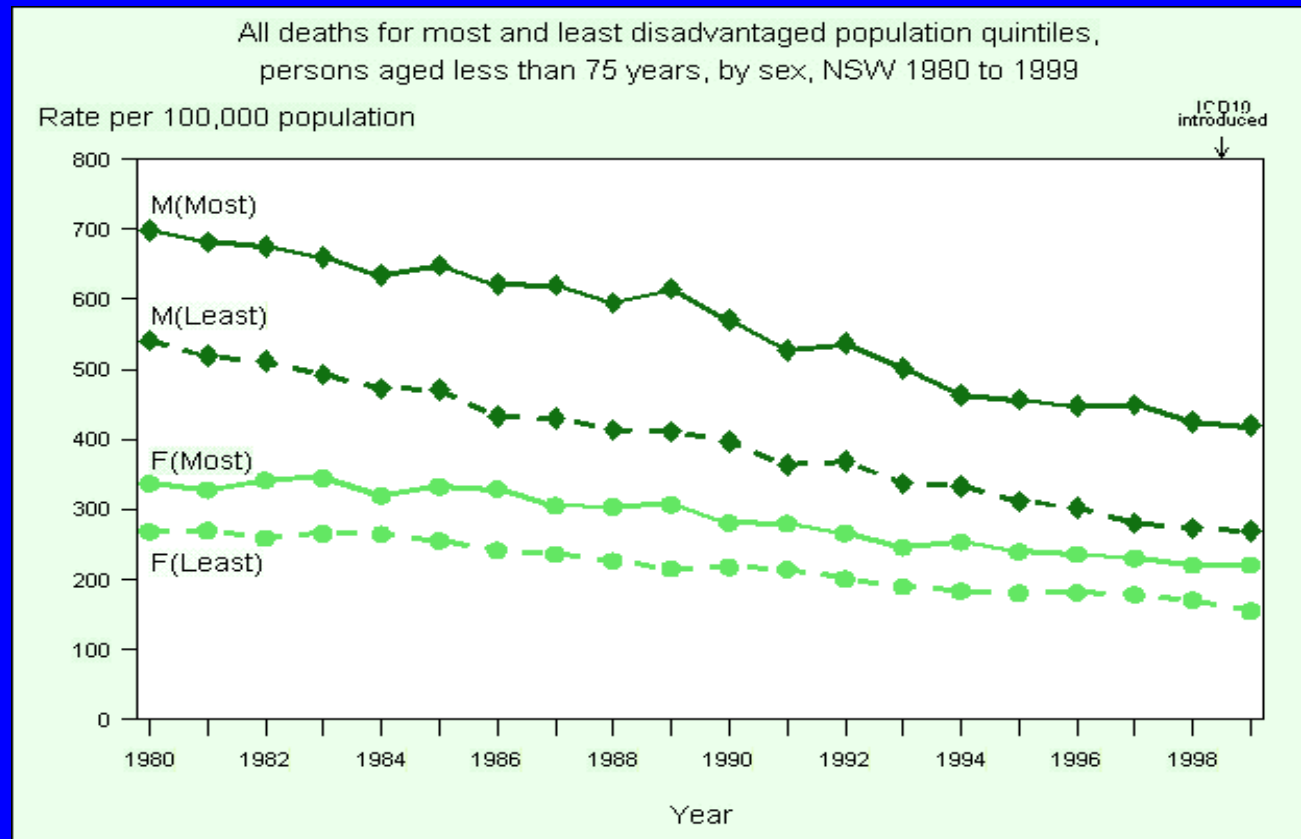
*University of New South Wales*

# Is there an equity issue?

- Strong evidence of health inequality in NSW on any health measure
- A social gradient in the way health is distributed
- The “gap” between rich and poor is widening



# Mortality Rates in NSW 1980-2000



# Systematic Differences Exist in Smoking Rates

- **Employed** 26%
- **Unemployed** 44%
- **Non-Indigenous** 24%
- **Indigenous** 40%
- **Tertiary Education** 17%
- **Some high school** 29%



## Smoke free home

- Advantaged 80%
- Disadvantaged 64%

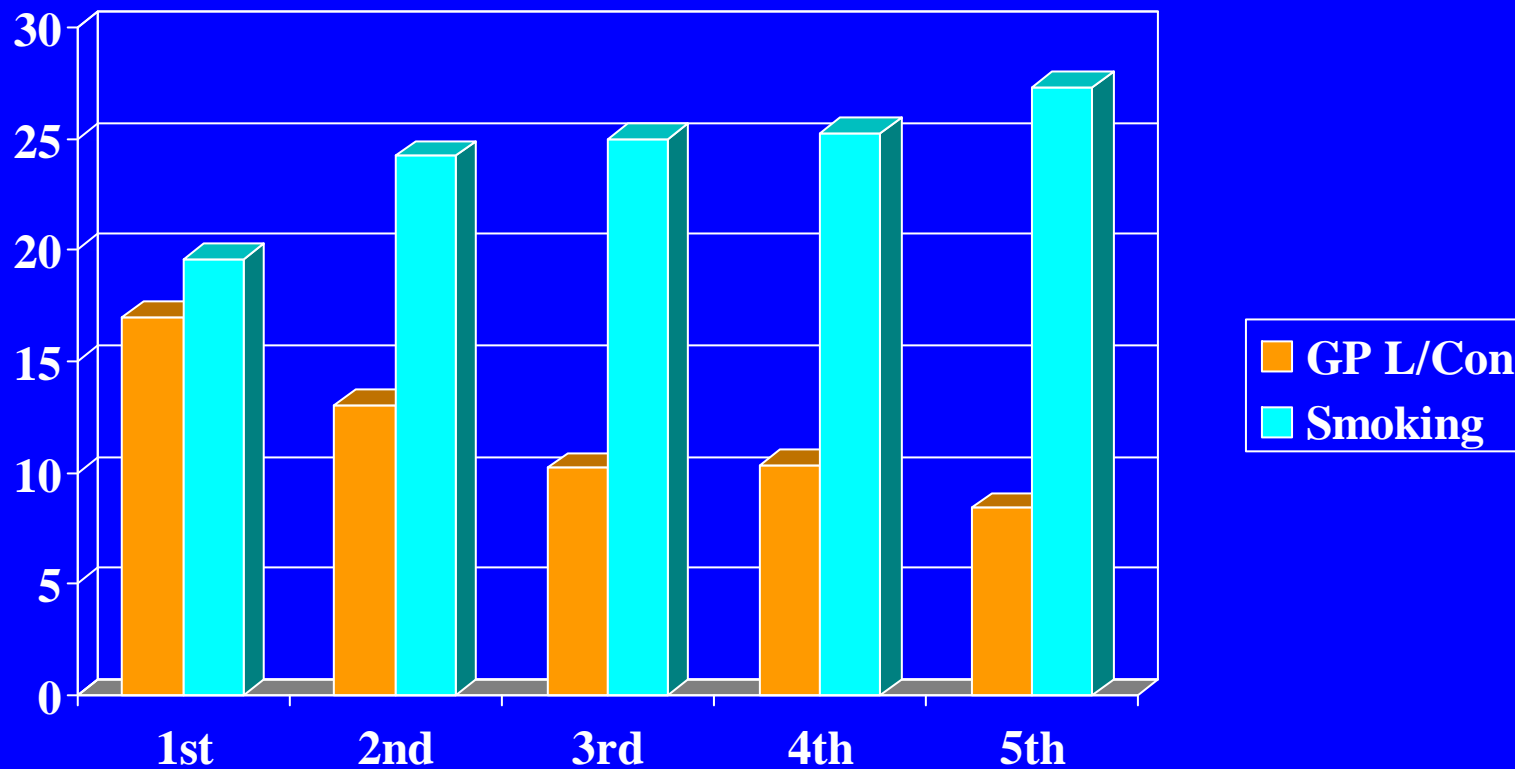
NSW Health Surveys 1997 & 1998

- Have we got the problem right?
- Have we got the principles right?
- Have we got the policy right?

# Have we got the problem right?

- How important are health risk factors to patterns of health inequality?
- Is “social exclusion” a hidden issue?
- Do we understand and respect the life choices people make?
- How do wider structural issues impact - at all levels?

# “Inverse Care Law” in Action



# Have we got the principles right?

- Are we concerned with greatest good for the greatest number or for equal opportunities for health improvement?
- Do we think there is a role for the health system in addressing health inequalities?
- What is the balance between social engineering and personal autonomy?

# Have we got the policy right?

- Can we address inequity in smoking rates without a strong anti-smoking infrastructure?
- Do we frame policy in social inclusion or social exclusion terms?
- How can the “Inverse care law” be addressed in the current fragmented health system?

# Equity Filter

- **What is the policy trying to do?**
- **What is the evidence that equity is an issue?**
- **What is the evidence of effective action?**
- **What is the implication for policy?**