# 4.2 Social determinants of Indigenous health

The social determinants of health refer to the close relationship between health outcomes and the living and working conditions that define the social environment. The previous article ('4.1 Social determinants of health') reviewed a wide range of social factors that influence health. One particular well-documented aspect of this relationship is the special role played by income and other related indicators of material affluence and socioeconomic position, such as education and occupation.

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The social determinants of health related to socioeconomic position help to explain both the gaps in the average health status of Indigenous and non-Indigenous Australians, and also the wide variation observed in the health outcomes within the Indigenous population.

That is the focus of this snapshot in the context of Indigenous health outcomes.

People with higher incomes live longer and have better health, on average, than do people with lower incomes. This relationship is a key component of the overall socioeconomic 'gradient' in health status (the strong association between health outcomes and socioeconomic position), and is regularly observed across countries and within the population subgroups of a country (CSDH 2008). This strong link occurs not just with higher levels of income but with a wide range of characteristics that denote a person's socioeconomic position, including educational attainment, employment and occupation. The higher the socioeconomic position, the better the health status on average. The gradient is not limited just to comparisons between the lowest and highest parts of the socioeconomic distribution, but is evident across the whole distribution (Case et al. 2002).

# Contribution of social determinants to the Indigenous health gap

Previous studies have shown the importance of social determinants in understanding and addressing the health gap between Aboriginal and Torres Strait Islander Australians and non-Indigenous Australians (Booth & Carroll 2008; DSI Consulting 2009; Marmot 2011; Zhao et al. 2013). This was also confirmed by AIHW analyses on 'The size and causes of the Indigenous health gap' published in *Australia's health 2014* (AIHW 2014). These studies found that between one-third and one-half of the health gaps between Indigenous and non-Indigenous Australians are associated with differences in socioeconomic position (AHMAC 2015).

# Socioeconomic position and self-assessed health within the Indigenous population

Differences in social determinants can also explain a large part of the differences in health status within the Indigenous population. Indigenous Australians who are in the lowest income group, have a lower level of educational attainment or who are unemployed, are less likely to be in 'excellent' or 'very good' health (based on self-reported survey data) than those in the higher income groups, those with high educational attainment, or those who are employed (Figure 4.2.1).

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Figure 4.2.1: Indigenous Australians reporting 'excellent' or 'very good' self-assessed health status, by selected socioeconomic factors, 2012-13 Per cent 60 50 40 30 20 10 0 Year 12 Q4-5 (highest) Q1 (lowest) Year 9 Unemployed **Employed** Income Highest year of school **Employment** Selected socioeconomic factors Note: Q1-Q5 refer to income guintiles Source: AHMAC 2015.

## Socioeconomic position and behavioural risk factors

The socioeconomic gradient in health status also occurs because rates of risky health behaviours are usually higher among individuals in low socioeconomic positions. One example of this relationship is the difference in behavioural risk factors associated with employment status. Indigenous Australians who are unemployed face a higher risk of poor health through higher rates of smoking, substance use and dietary behaviour (such as lower level of daily fruit consumption) compared with Indigenous Australians who are employed (Figure 4.2.2). A counter-example of a risk factor that has a higher prevalence among employed Indigenous adults is being overweight or obese.

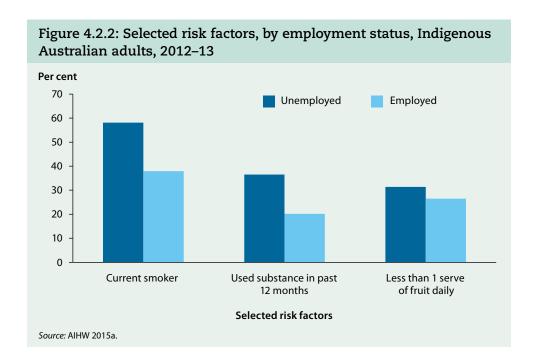
#### Socioeconomic gradient has an early start

The socioeconomic gradient in health starts early. Children in households with higher income have better health from an early age, and in many countries this relationship becomes more pronounced as children get older (Case et al. 2002).

There is limited direct evidence specifically for Indigenous children in Australia on the origins and trajectories of the gradient in health; but one proxy indicator—low birthweight—highlights the early start to socioeconomic disadvantage in health for many Indigenous children.



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AIHW analyses of the National Perinatal Data Collection show that:

- in 2013, babies born to Indigenous mothers were twice as likely to be of low birthweight as babies born to non-Indigenous mothers (12.2% compared with 6.1%) (see 'Chapter 5.2 Trends and patterns in maternal and perinatal health')
- the proportion of low birthweight babies born to Indigenous mothers in 2013 was higher in *Very remote* areas (14% in 2013) than in non-remote areas (12%)
- the proportion of low birthweight babies born to non-Indigenous mothers does not
  increase with remoteness as it does for Indigenous mothers, suggesting that greater
  social disadvantage of Indigenous families in remote areas could be an important factor
  behind the higher proportion of Indigenous low birthweight babies in remote areas
- the overall proportion of low birthweight babies born to Indigenous mothers fell slightly, from 12.7% in 2000 to 12.2%, in 2013 (AIHW 2015a, 2015b).

#### What is missing from the picture?

The relationship between health status and its social determinants can be complex. Social determinants can also influence other determinants of health, such as health behaviours and access to health services. More detailed longitudinal analysis is required. Previous analyses mainly sought to explain the health gaps between Indigenous and non-Indigenous Australians. Less is known about the role of socioeconomic factors in explaining differences in the health status among Indigenous Australians, including the health status of specific subgroups, such as Indigenous Australians with a disability.



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#### Where do I go for more information?

More information on the social determinants of Indigenous health in Australia and other related health issues is available at <a href="http://www.aihw.gov.au/closingthegap/">http://www.aihw.gov.au/closingthegap/</a>.

The report <u>Australia's mothers and babies 2013</u> has more detailed data on low birthweight babies and other outcomes for Indigenous and non-Indigenous babies.

#### References

AHMAC (Australian Health Ministers' Advisory Council) 2015. Aboriginal and Torres Strait Islander Health Performance Framework: 2014 report. Canberra: AHMAC.

AIHW (Australian Institute of Health and Welfare) 2014. Australia's health 2014. Australia's health series no. 14. Cat. no. AUS 178. Canberra: AIHW.

AlHW 2015a. Aboriginal and Torres Strait Islander Health Performance Framework 2014 report: detailed analyses. Cat. no. IHW 167. Canberra: AlHW.

AIHW 2015b. Australia's mothers and babies 2013—in brief. Perinatal statistics series no. 31. Cat. no. PER 72. Canberra: AIHW.

Booth AL & Carroll N 2008. Economic status and the Indigenous/non-Indigenous health gap. Economic Letters 99(3):604–06.

Case A, Lubotsky D & Paxson C 2002. Economic status and health in childhood: the origins of the gradient. The American Economic Review 92(5):1308–44.

CSDH (Commission on Social Determinants of Health) 2008. Closing the gap in a generation: health equity through action on the social determinants of health: final report of the Commission on Social Determinants of Health. Geneva: WHO.

DSI Consulting Pty Ltd & Benham D 2009. An investigation of the effect of socio-economic factors on the Indigenous life expectancy gap. Canberra: DSI Consulting Pty Ltd.

Marmot, M 2011. Social determinants and the health of Indigenous Australians. Medical Journal of Australia 194(10):512–513.

Zhao Y, Wright J, Begg S & Guthridge S 2013. Decomposing Indigenous life expectancy gap by risk factors: a life table analysis. Population Health Metrics 11:1–9.