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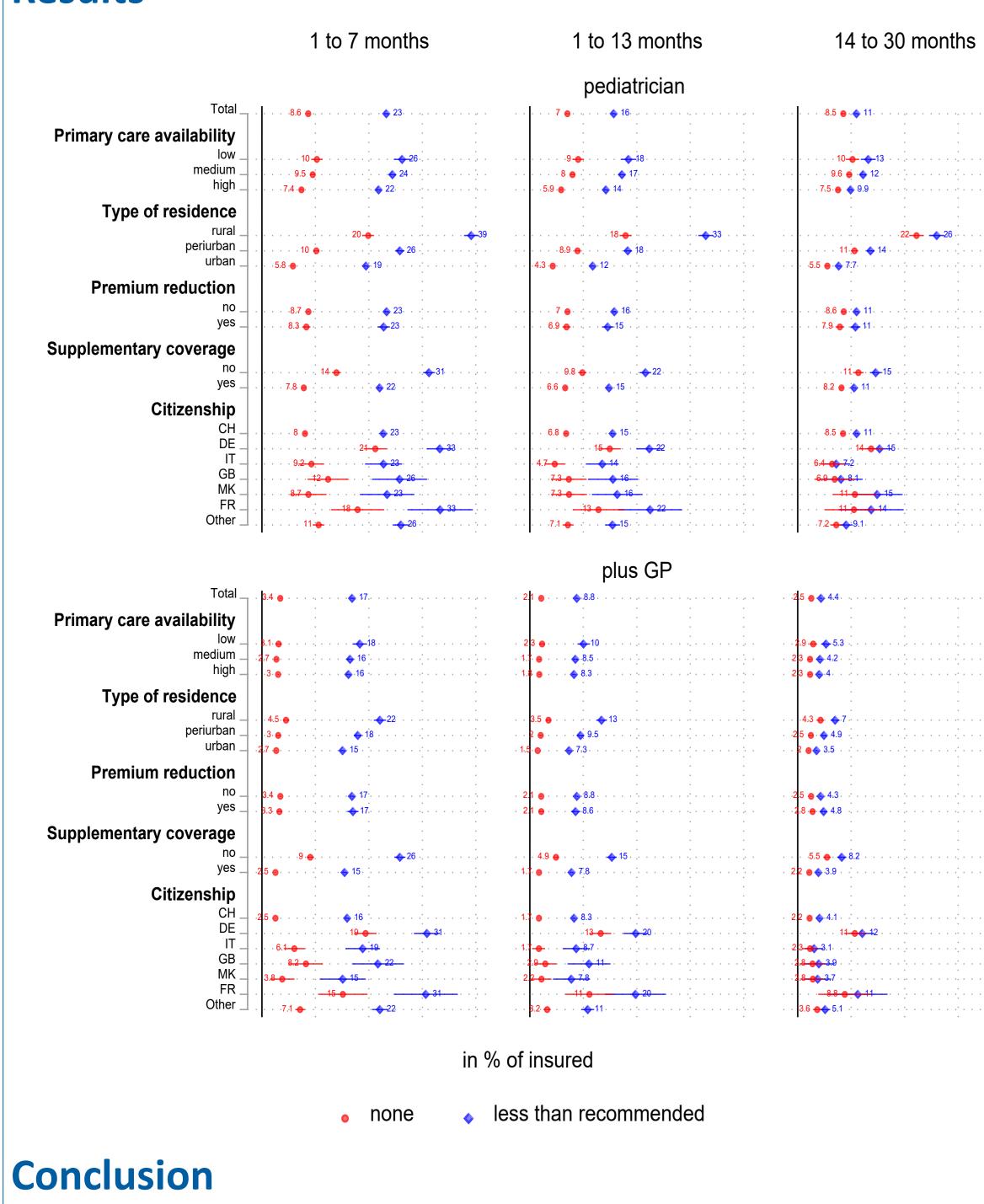
The aim of this project is to explore the integration of vulnerable groups (children, elderly with chronic illnesses, immigrants) and focus on the following research questions: 1. To what extent do inequalities in health status and health service use and non-use exist among vulnerable groups? 2. What are the risk factors for inadequate health care among vulnerable groups? 3. What are the underlying factors and mechanisms?

## Children

### Background

Regular pediatric primary care consultations are important for early detection of diseases Risk of falling ill, access to health care and coping capabilities are influenced by social and cognitive impairments. Health service use influenced by socioeconomic status (SES). determinants of health (SDH). Aim: to describe the consequences of NCDs on various Aim: to investigate to what extent pediatric primary care is used and differences between health outcomes over time according to the WHO International Classification of SE groups in early childhood Functioning, Disability and Health (ICF) in elderly and asses the impact of SDH on these Methods aspects.

- Health care claims data from a large health insurer from 2012-2019
- Consultations in primary health care (pediatrician or GP; TarMed tariff) during the age of 0-7 months (M), 0-13M and 14-30M. Not possible to distinguish between preventive and sick-child consultations. Results



Although most children have an adequate amount of health care consultations in early childhood there are socioeconomic barriers which need to be addressed.

# Health inequalities and risk factors of inadequate health care among vulnerable groups: children, elderly with chronic conditions, and immigrants

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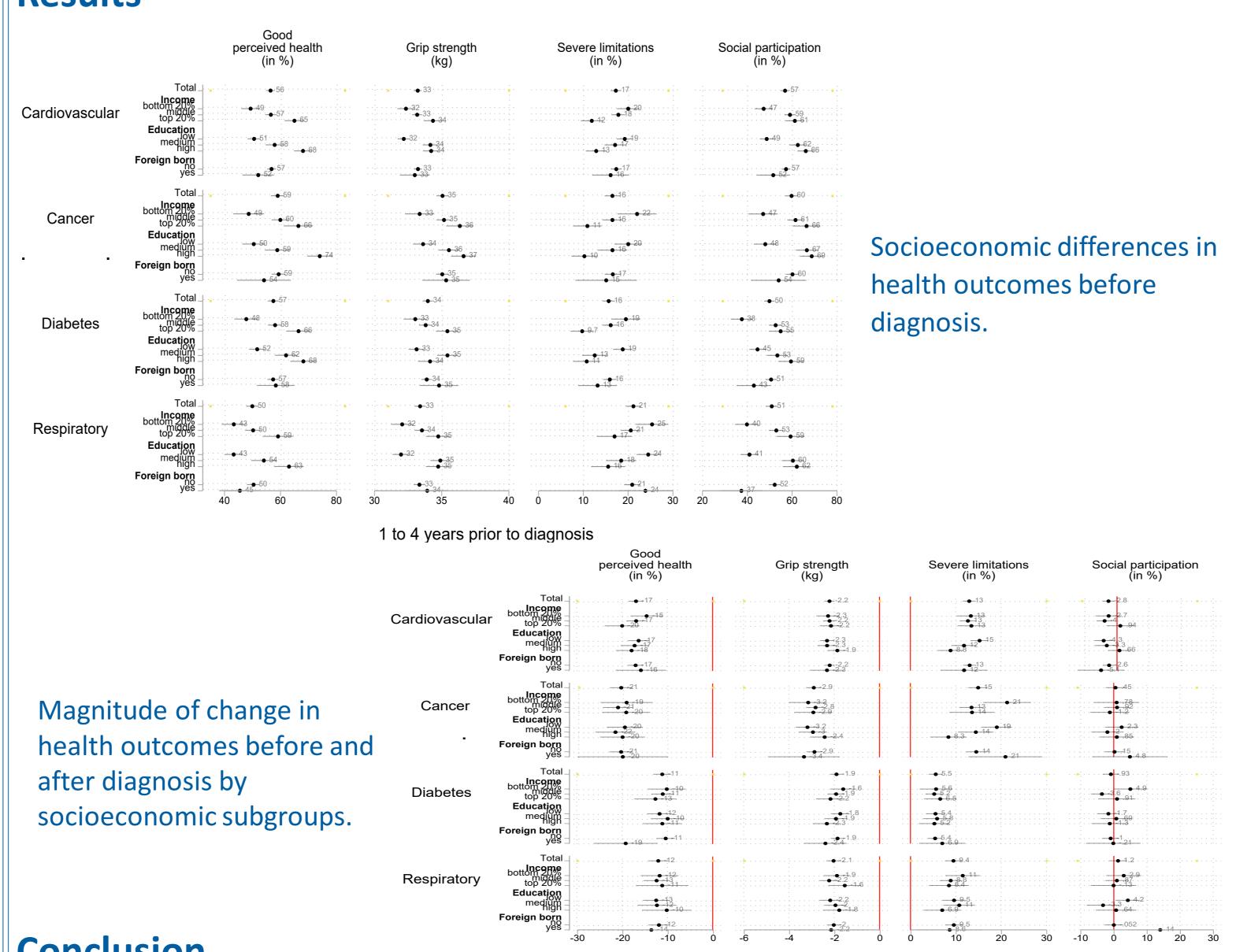
## **Elderly with chronic conditions**

Percantage of children who did not have any primary care consultations or less than the Swiss Society of Pediatricians recommend for a specific age bracket

### Background

### Methods

- Data from 9 European countries from the longitudinal SHARE- survey study. Operationalization of SDH using SHARE-questions on income, education, and migration background. Impact on SDH on NCDs was modelled according to ICF.
- Outcomes: self-perceived general health, grip strength, Global Activity Limitation Index (GALI), SHARE-question on involvement in various social activities Results



### Conclusion

- Small impact of SES on life with NCD
- Further studies on the possible double burden of the underprivileged, i.e., higher prevalence of NCDs and more negative consequences when suffering from them, needed.

Change post diagnosis (vs. prior)

### Background

There are significant differences in health care use between some immigrant groups and non-migrants in Switzerland, little is known about the importance of immigrant-specific factors. The aim of this study is to identify the immigrant-specific factors that are associated with health care utilization in culturally different immigrants in Switzerland and examine their importance relatively to other well-established factors and to each other

### Methods

- 2010 (GMM II)
- analyses.

### Results

Different immigrant-specific factors are statistically relevant depending on the indicator of health care utilization.

status, in describing the intensity of doctor visits.

### (a) Any doctor visit

Nationality Frequency of feeling lonely Confidence in choosing a doctor Discriminated in general Victim of political persecution/violence Person available for companion/help

Nationality, communication skills, confidence in choosing a doctor and self-inefficacy are the most important factors.

### Conclusion

Immigration-specific factors are very important in describing health care utilization. Understanding their statistical relevance can be particularly informative for policies aiming at addressing inefficiencies of the health care system.



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### Immigrants

Data source: Second Health Monitoring of the Migrant Population in Switzerland

We empirically apply a theoretical framework for describing health care use in immigrants and test the framework by applying a data-driven approach. We estimate the relative importance of the identified factors by applying dominance

