

Chapter 7

Gender Inequality and Health Disparities: Addressing Social Discrimination and Poverty in the Pursuit of Equitable Healthcare

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ABSTRACT

Achieving health equity is central to the Sustainable Development Goals (SDGs). This chapter examines how gender inequality and poverty intersect to create systemic barriers to equitable healthcare. It explores the multifaceted impacts of social discrimination and marginalisation on health outcomes, drawing on global and regional data to highlight disparities. Strategies for addressing these issues are discussed, including policy reform, community-based interventions, and the integration of intersectional approaches. The chapter underscores the urgency of addressing gender and socioeconomic inequalities to foster sustainable, inclusive health systems that leave no one behind, aligning with SDG 3 (Good Health and Well-Being) and SDG 5 (Gender Equality).

1. INTRODUCTION

The Sustainable Development Goals (SDGs), established by the United Nations in 2015, represent a global commitment to address various social, economic, and environmental challenges, with health equity being a central theme (da Silva and

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Rodrigues, 2023). Health equity is defined as the absence of unfair and avoidable differences in health among different population groups, which is essential for achieving the SDGs, particularly Goal 3, which aims to ensure healthy lives and promote well-being for all at all ages (Amri et al., 2023; da Silva and Rodrigues, 2023). The intersection of health equity and gender inequality is particularly critical, as gender disparities significantly influence health outcomes and access to healthcare services. Gender inequality manifests in various forms, including economic disparities, social norms, and cultural practices that disadvantage women and marginalised genders, thereby exacerbating health disparities (Portnoy et al., 2020; Percival et al., 2018; Reis da Silva, 2024a; Reis da Silva, 2024b).

The scope of gender inequality extends beyond mere access to healthcare; it encompasses systemic issues that affect women's health outcomes, including gender-based violence, reproductive health rights, and the social determinants of health. For instance, the COVID-19 pandemic has highlighted and intensified existing gender inequities, with women facing increased rates of domestic violence, unemployment, and unpaid care burdens (Figueroa et al., 2021; Amri, 2024). These challenges are compounded by the fact that health systems often fail to adequately address the specific needs of women and marginalised genders, leading to further health disparities (Percival et al., 2018; Pauly et al., 2017). The need for a comprehensive approach that integrates gender considerations into health policies and practices is thus paramount for achieving health equity and fulfilling the SDGs.

1.1 Overview of SDGs and Health Equity

The SDGs provide a framework for global development that emphasises the importance of health equity as a fundamental human right. Goal 3 specifically calls for ensuring healthy lives and promoting well-being for all, which includes targets aimed at reducing maternal mortality, ensuring universal access to sexual and reproductive health services, and addressing communicable diseases (Zamora et al., 2018). Achieving these targets requires a concerted effort to dismantle the barriers that perpetuate health inequities, particularly those related to gender. For example, the integration of gender-sensitive approaches in health policies can significantly improve health outcomes for women and girls, as evidenced by initiatives aimed at increasing access to reproductive health services and addressing gender-based violence (Portnoy et al., 2020; Shomuyiwa, 2023).

Furthermore, health equity is not only a matter of access to healthcare services but also involves addressing the underlying social determinants of health, such as education, income, and social status, which disproportionately affect women and marginalised groups (Victora et al., 2019; Dean et al., 2019). The SDGs recognise that health is influenced by a complex interplay of factors, and therefore, a multi-

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