ABSTRACT

Investigating the Relationship between Socioeconomic Status and Equity in the Allocation of Healthcare Services: The Case of St. Vincent and the Grenadines

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This is an investigation into the concern of inequity in the allocation of healthcare services by the public healthcare delivery system. Inequity occurs when health districts are providing less healthcare services in poor communities although there is an increased need for these services. The inability to access healthcare places a further strain on their financial circumstances and the risk of deteriorating health. This relationship between socioeconomic status and the allocation of healthcare services by the public healthcare delivery system is investigated in the small island state of St. Vincent and the Grenadines using the prevalence of diabetes as a measure of health outcome given its presence among the socioeconomic classes.

The investigation uses the country’s nine (9) health districts serving thirty-nine (39) health centers; and an accumulative total of 7445 diabetics who utilize these facilities during period 2006 to 2010. Inequity is evaluated using Time Series Cross-Sectional analysis with Fixed Effects, which allows for the investigation into health inequity within the health districts. The findings suggest socioeconomic status did not create an inequity in the allocation of healthcare services, and the size of the health districts served may be inhibiting the ability of health districts to provide the necessary healthcare services where needed the most. The results are important because the methodology used in this investigation also provides an opportunity to use an approach which can aid in monitoring and evaluating inequity in the allocation of healthcare services in this country.

Keywords: Julian Prescod; equity; healthcare; socioeconomic status; time series cross-sectional analysis.