

State of the Nordic Region 2020:

Wellbeing, health and digitalisation edition

Anna Lundgren & Linda Randall (Nordregio)

21 October, 2020

Report contributors: Anna Lundgren, Johanna Carolina Jokinen, Linda Randall, Gustaf Norlén, Louise Ormstrup Vestergård, Alex Cuadrado, Oskar Penje, Shinan Wang, Ulf Andréasson (Nordic Council of Ministers' Secretariat), Gunn Hilde Rotvold and Truls Tunby Kristiansen (Norwegian Centre for E-health Research) and Eva Franzén (Nordic Welfare Centre)

Wellbeing, Health and Digitalisation

- Background: The Nordic Region is generally performing very well on health and wellbeing indicators, but there are also important differences across regions and municipalities, socio-economic groups and gender.
- Objective: Increase knowledge as regards health, wellbeing and digitalisation and help decision makers take informed decisions.
 - How are the Nordic inhabitants doing?
 - How can digital health care and social care increase health and wellbeing in the Nordic Region?



Wellbeing, Health and Digitalisation

Four areas studied:

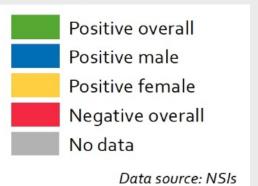
- Demography: urbanisation and ageing population
- Health: life expectancy and indicators of health performance
- Socio-economic factors: education, employment and income
- Digitalisation: broadband and digital divides

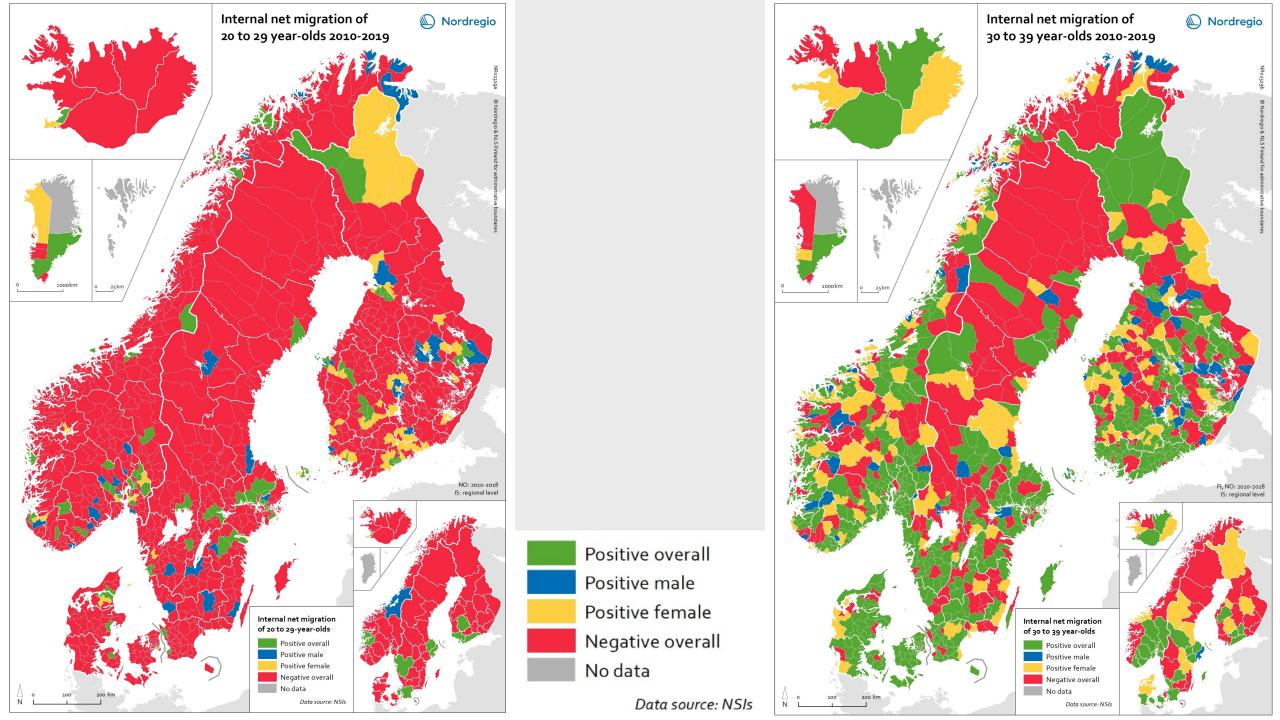


Internal net migration of Nordregio 20 to 29 year-olds 2010-2019 nternal net migration Negative overall

Demographic trends

- Population ageing (particularly pronounced in rural areas)
- Outmigration of young people (20-29 years)
- Some evidence of young people returning (30-39)





Health

- Life expectancy is increasing across the region
- Cancer and cardiovascular diseases remain the leading causes of poor health and premature death (despite improvements)



Disability-Adjusted Life Years (DALYs) per 1,000 inhabitants 2000 Males Females Males 2016 Females 2000 Males Malignant neoplasms (cancers) Females 2016 Males Noncommunicable diseases (NC Females 2000 Males Mental and substance-abuse d isorders Females 2016 Males Females Males 2000 Females 2016 Males Females Musculoskeletal diseases Males 2000 Females Males 2016 Females Communicable conditions Males 2000 Females 2016 Males Females 0 500 1,000 1,500 2,000 2,500 3,000 3,500 4,000 Denmark Finland Iceland Sweden Norway

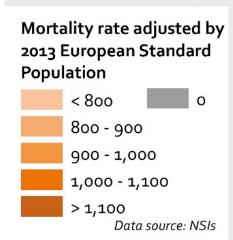


Figure 3.2. DALYs in 2000 and 2016 for males and females across the Nordic countries. Source: WHO.

Age-standardised mortality rate Nordregio per 100,000 population 2019 Mortality rate adjusted by 2013 European Standard

Health

- Life expectancy is increasing across the region
- Cancer and cardiovascular diseases remain the leading causes of poor health and premature death (despite improvements)
- Not all regional differences in lifeexpectancy can be explained by age



Socioeconomic factors

 Education, employment and income have a positive relationship with health and wellbeing



Self-perceived health by educational attainment level in 2018

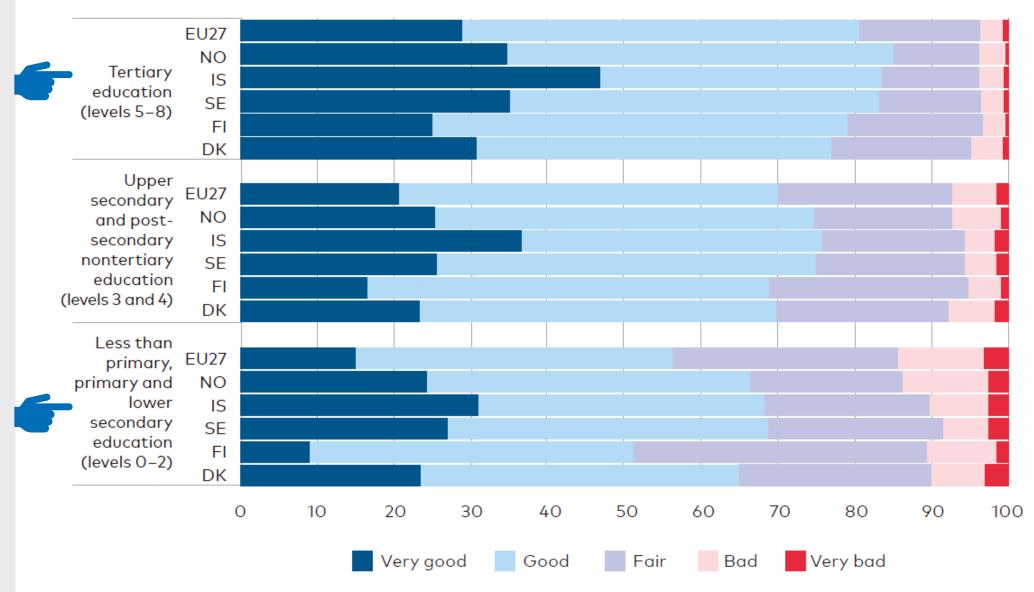




Figure 4.1. Self-perceived health by educational attainment level, 2018 (2016 for Iceland). Source: Eurostat.

Socioeconomic factors

- Education, employment and income are related to health and wellbeing
- The interaction between these factors is extremely complex



Educational attainment by sex, 2019

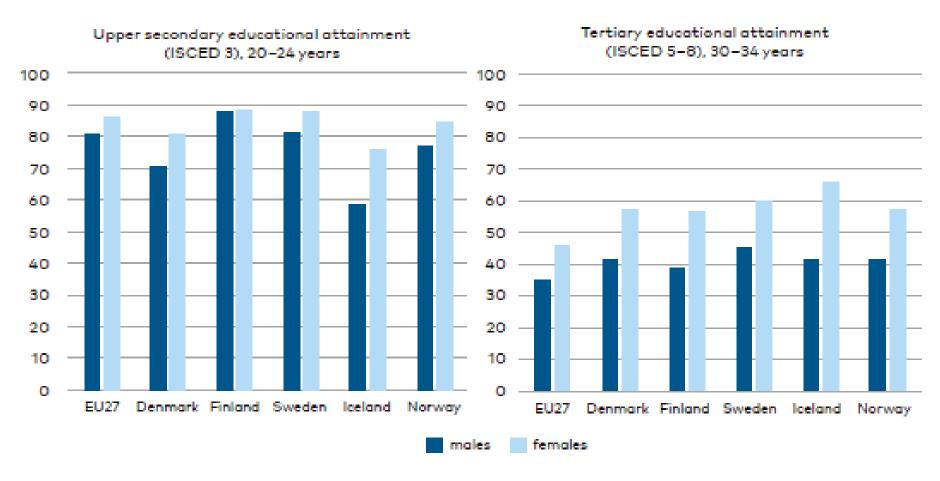


Figure 4.2. Educational attainment by sex, 2019. Data source: Eurostat.



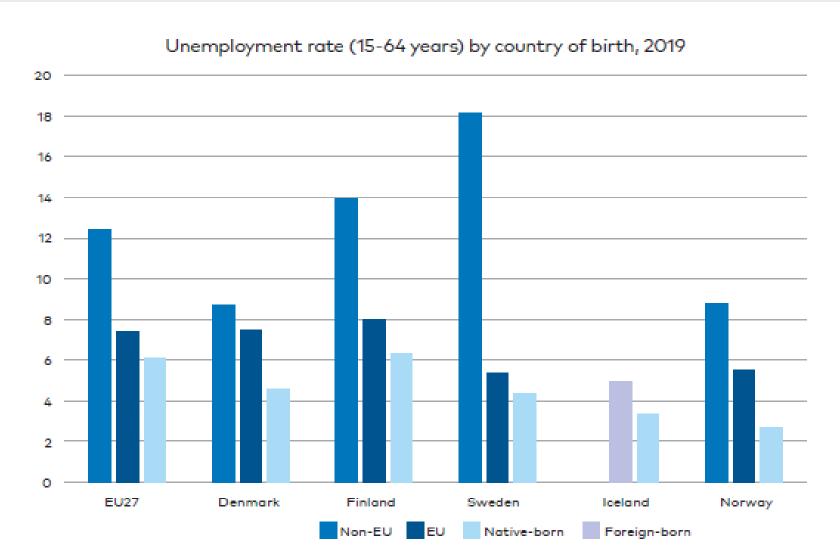


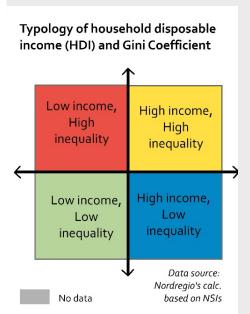
Figure 4.5. Unemployment rate (15-64 years-of-age) by country of birth, 2019. Data source: Eurostat.



Income and inequality typology Nordregio 2017 Typology of household disposable income (HDI) and Gini Coefficient High income, Low income

Socioeconomic factors

- Education, employment and income are related to health and wellbeing
- The interaction between these factors is extremely complex
- Equality plays a role, not just wealth



Digitalisation

- Use of the internet to access healthcare information and services is increasing (all countries, age groups, locations)
- Digital divides affect those who could most benefit



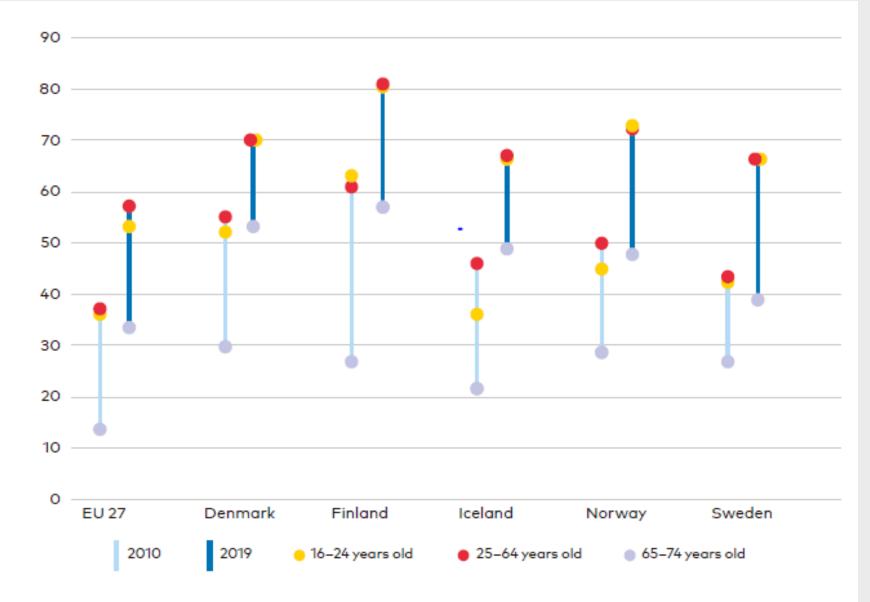


Figure 5.4. Share of individuals seeking health information via the Internet in 2010 and 2019, by age group (percent). Source: Eurostat.



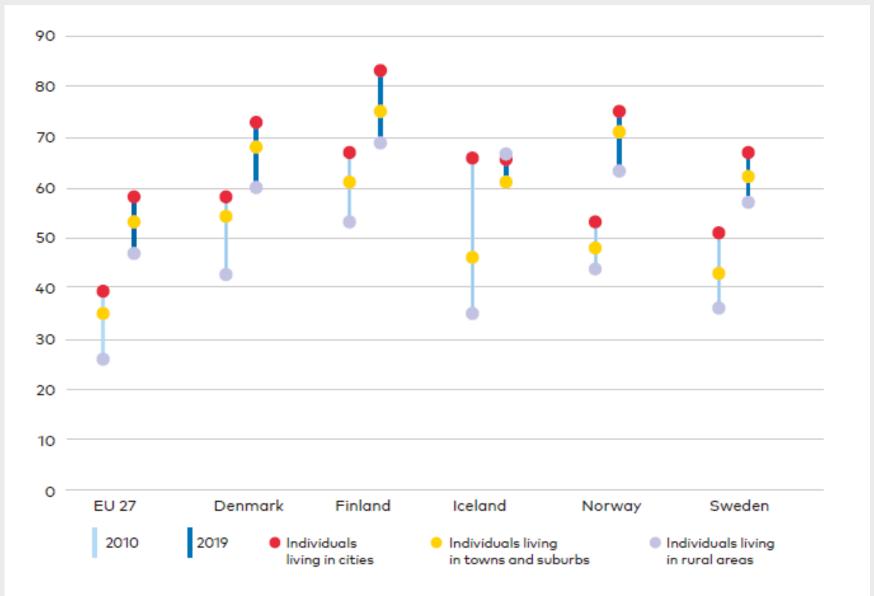


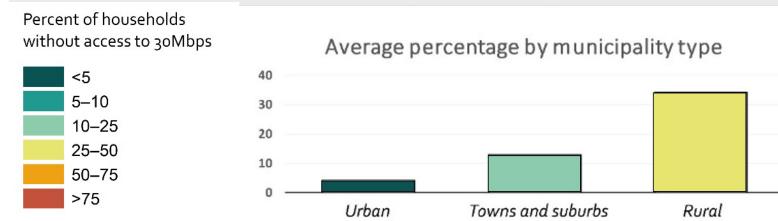
Figure 5.2. Share of individuals seeking health information via the Internet in 2010 and 2019, by degree of urbanisation (percentage). Source: Eurostat (IS: Individuals living in cities, 2011).



Households without access Nordregio to fixed broadband at download speed 30Mbps. 2018

Digitalisation

- Use of the internet to access healthcare information and services is increasing (all countries, age groups, locations)
- Digital divides affect those who could most benefit
- Infrastructure development uneven across the region



Concluding remarks

- Health and wellbeing outcomes are framed by both spatial urban and rural conditions, and by socio-economic living conditions (such as education, employment and income).
- Look into the regional and local scales to understand differences and inequalities.
- Digitalisation has the potential to increase accessibility to welfare services and improve health and wellbeing, provided that digital divides are addressed.



