DOMAİN 1
LİFE
AND HEALTH

THE MULTIDIMENSIONAL INEQUALİTY FRAMEWORK:
THE OXFAM TOOLKIT
This domain covers inequalities in the capability to be alive, enjoy longevity and avoid premature death. It also captures health inequalities across physical and mental health outcomes.

**DOMAIN 1 – LIFE AND HEALTH**

*Inequality in the capability to be alive and to live a healthy life*

The multidimensional inequality framework allows you to measure inequalities in seven domains that matter for human life, through a number of suggested indicators, measures and variables of disaggregation.

This paper contains a brief description of the life and health domain and the list of sub-domains, indicators and measures suggested to measure and assess inequalities in the capability to be alive and to live a healthy life. Please, remember that the MIF is flexible and it is up to you to decide how to use it, based on what makes sense in your unique context.

**Brief description**

Domain 1, the life and health domain, covers the capability to be alive, enjoy longevity and avoid premature death. It also captures health inequalities across physical and mental health outcomes.

**Inequality in premature death** refers to instances of death as a result of violations and infringements of people’s safety and security. This can be by individuals, organisations and the state. Therefore, it includes deaths from non-natural causes – such as in police custody or care homes – as well as deaths as a result of war, conflict and protest. Gang-related homicides, deaths resulting from ‘terrorist’ activity and suspected deaths reported as ‘disappearances’ are also relevant here. This domain also covers premature death as a result of unequal exposure to natural disasters, climate change and other environmental factors.

**The capability to live a healthy life** is affected by biological, physical and mental factors, economic resources and social conditions in the environment. Unequal distribution of income and poor living conditions can play an important role in shaping health inequalities. One of the main causes of premature death is disease. Inequalities exist due to differences in exposure (also affected by poor living conditions), lifestyle factors and differences in medical treatment.

People need to benefit equally from access to quality health services, medical advances in the treatment of disease, should the need arise, and be protected from communicable diseases. Women need to receive the right treatment and protection during pregnancy, childbirth and in the post-natal period. The treatment and protection of children, particularly during the first five years of life, is a critical element. Also, some aspects of health (for example, mental health) have not received the same level of attention or investment and new types of epidemic, such as obesity, are on the rise. All of these aspects are captured under this domain.

The sub-domains covered in the life and health domain are:

1. **A**: Avoid premature mortality through disease, neglect, injury or suicide
   1. **B**: Be protected from being killed or murdered
   1. **C**: Be protected from natural and non-natural disasters
   1. **D**: Achieve the highest possible standard of physical health
   1. **E**: Enjoy good mental health
   1. **F**: Have good sexual and reproductive health
Indicators and measures

It is highly unlikely that you will find data for your city, country or region for all measures across all domains. What is suggested here is a relatively comprehensive list of indicators and measures, presented by each sub-domain. You can choose priority measures from this list and add or adapt measures to suit your context.

To find data related to this domain, as well as using any national surveys and sources available, you can consider the following global data sources (please, visit the online Oxfam toolkit for updated global and regional data sources):

- Demographic and Health Surveys
- Global Burden of Disease
- Global Health Observatory, World Health Organisation
- OSCE – Office for Democratic Institutions and Human Rights (Hate crime reporting)
- Sustainable Development Goal Indicators Global Database
- UN Crime Trends Survey, UN Office on Drugs and Crime
- UN Data, Live Births by Gender
- World Values Survey

Sub-domain 1.A. Avoid premature mortality through disease, neglect, injury or suicide

Indicator 1.1: Inequality in life expectancy
Measure 1.1.1: Live births by gender
Measure 1.1.2: Perinatal, infant and under 5 mortality rates
Measure 1.1.3: Inequality in age-mortality rates
Measure 1.1.4: Period life expectancy at birth

Indicator 1.2: Specific-cause mortality rates
Measure 1.2.1: Mortality rates due to the top 3 communicable diseases (country specific – e.g. influenza, HIV, malaria, tuberculosis, hepatitis)
Measure 1.2.2: Mortality rates due to the top 3 non-communicable diseases (country specific – e.g. cardiovascular disease, cancer, diabetes, chronic respiratory disease, hypertension, disease related to diet and nutrition)
Measure 1.2.3: Maternal mortality ratio – the number of maternal deaths during a year per 100,000 live births
Measure 1.2.4: Mortality rate attributed to unsafe water, unsafe sanitation and lack of hygiene
Measure 1.2.5: Age-standardized death rate attributable to air pollution (per 100,000)
Measure 1.2.6: Death rate due to (a) road traffic accident injuries; (b) other unintentional injuries
Measure 1.2.7: Suicide mortality rate (SDG)

Sub-domain 1.B. Be protected from being killed or murdered

Indicator 1.3: Homicide
Measure 1.3.1: Homicide rate
Measure 1.3.2: Domestic homicide rate
Measure 1.3.3: Racially motivated, religiously motivated and homophobic homicide

Sub-domain 1.C. Be protected from natural and non-natural disasters

**Indicator 1.4: Death rates from natural disasters**
Measure 1.4.1: Deaths from natural disasters – earthquakes; volcanic eruptions; flood; fire; famine

**Indicator 1.5: Death rates from non-natural causes**
Measure 1.5.1: Deaths from non-natural causes during or following police custody
Measure 1.5.2: Deaths in prisons: (a) from non-natural causes; (b) self-inflicted
Measure 1.5.3: Deaths from non-natural causes for people resident in health or social care establishments
Measure 1.5.4: Deaths from torture and political oppression
Measure 1.5.5: Civilian deaths as a result of war, conflict, unrest and protest (*includes disappearances*)

Sub-domain 1.D. Achieve the highest possible standard of physical health

**Indicator 1.6: Subjective evaluation of current health status and treatment**
Measure 1.6.1: Percentage who report poor current health status
Measure 1.6.2: Inequality in self-reported current health status
Measure 1.6.3: Percentage who are treated with dignity and respect in health treatment

**Indicator 1.7: Prevalence of key diseases associated with deprivation and low income**
Measure 1.7.1: Prevalence of new infections per 1,000 or per 100,000 uninfected population (HIV, Tuberculosis, Malaria, Hepatitis B)
Measure 1.7.2: Percentage requiring interventions against neglected tropical diseases

**Indicator 1.8: Healthy life**
Measure 1.8.1: Inequality in healthy life expectancy
Measure 1.8.2: Prevalence of: (a) Stunting in young children; (b) undernourishment
Measure 1.8.3: Rates of obesity/Prevalence of Type II diabetes
Measure 1.8.4: Percentage diagnosed with eating disorders
Measure 1.8.5: Rates of: (a) alcoholism; (b) drug addiction; (c) tobacco use
Measure 1.8.6: Prevalence of asthma
Measure 1.8.7: Percentage who report participation in sport/physical activity on regular basis

**Indicator 1.9: Limiting illness, disability and mental health**
Measure 1.9.1: Percentage who report a long-standing health problem or disability that substantially limits their ability to carry out normal day-to-day activities

Sub-domain 1.E. Enjoy good mental health
Indicator 1.10: Mental Health
Measure 1.10.1: Percentage who report poor mental health and well-being
Measure 1.10.2: Inequality in mental health score

Sub-domain 1.F. Have good sexual and reproductive health

Indicator 1.11: Sexual and reproductive health
Measure 1.11.1: Rates of sexually transmitted infections
Measure 1.11.2: Percentage of women with unmet need for family planning
Measure 1.11.3: Percentage of women who have given birth in the last five years having delivery attended by a qualified health professional
Measure 1.11.4: Percentage of women who have given birth in the last five years who were given the choice of where to give birth and birthing method
Measure 1.11.5: Percentage of women in the last five years who have undergone an unofficial, unregulated abortion
This Oxfam toolkit was written by Claire Kumar. The Multidimensional Inequality Framework and online toolkits are free resources which have been developed as part of a collaboration between academics in the Centre for Analysis of Social Exclusion (CASE) at the London School of Economics (LSE) and the School of Oriental and African Studies (SOAS), led by Abigail McKnight, and practitioners in Oxfam, led by Alex Prats. The initial project was funded by the LSE’s International Inequalities Institute’s Atlantic Visiting Fellows Programme.

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This paper is part of a series of papers written to inform public debate on development, poverty and inequality. For further information on the issues raised in this paper please email inequality.toolkit@oxfam.org

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