

## The inverse care law re-examined: a global perspective

Richard Cookson, Tim Doran, Miqdad Asaria, Indrani Gupta, Fiorella Parra Mujica  
The Lancet, Vol 397 February 27, 2021

### Summary

An inverse care law persists in almost all low-income and middle-income countries, whereby socially disadvantaged people receive less, and lower-quality, health care despite having greater need. By contrast, a disproportionate care law persists in high-income countries, whereby socially disadvantaged people receive more health care, but of worse quality and insufficient quantity to meet their additional needs. Both laws are caused not only by financial barriers and fragmented health insurance systems but also by social inequalities in care seeking and co-investment as well as the costs and benefits of health care. Investing in more integrated universal health coverage and stronger primary care, delivered in proportion to need, can improve population health and reduce health inequality. However, trade-offs sometimes exist between health policy objectives. Health-care technologies, policies, and resourcing should be subjected to distributional analysis of their equity impacts, to ensure the objective of reducing health inequalities is kept in sight.

### Weblink:

[https://www.thelancet.com/pdfs/journals/lancet/PIIS0140-6736\(21\)00243-9.pdf](https://www.thelancet.com/pdfs/journals/lancet/PIIS0140-6736(21)00243-9.pdf)