



LETTER TO THE EDITOR

My Health, My Right. World Health Day

Mi Salud, Mi Derecho. Día Mundial de la Salud

Minha Saúde, Meu Direito. Dia Mundial da Saúde

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Dear Editor:

The World Health Organization (WHO) celebrates World Health Day every April 7th, marking the anniversary of its founding in 1948.¹ This year's theme is "My Health, My Right." This slogan emphasizes that health is a fundamental human right and is profoundly influenced by social determinants.

Health is much more than the absence of disease, as defined by WHO: "Health is a state of complete physical, mental, and social well-being." This balance is determined by multiple factors, such as access to healthcare, food security, housing, education, the geographical area of residence, air quality, employment and job stability, and the socio-political conditions of the country, among many others. Therefore, it must be recognized that health does not depend solely on the individual and their decisions, but also on their environment and the conditions in which they are born, grow, develop, and age.²

There are deep inequalities at a global level that persist to this day and that disproportionately affect the most vulnerable communities. Gaps in access to healthcare, education, housing, and employment continue to exacerbate health disparities among different groups of the population. The recent Coronavirus Disease (COVID-19) pandemic has highlighted these inequalities, revealing how social and economic conditions influenced health, risk of disease, the severity of the disease, and mortality, as its impact was vastly unequal. A study conducted during the early part of the pandemic in the Metropolitan region of Chile, which examined demographic, health, and socioeconomic factors, concluded, among other things, that COVID-19 infections and deaths were influenced by social determinants, particularly structural ones such as poverty.³

To address these inequities, it is essential to adopt an intersectoral approach that recognizes the interconnection between health and other aspects of life. Intersectoral public policies in Chile, such as the *Chile Crece Contigo* subsystem,^{4,5} among others, are moving in the right direction as they provide a structural approach to the social determinants of health. Furthermore, policies that support adequate housing, better working conditions, less polluting means of transportation, and the reduction of violence in environments are also aimed at improving health.

In addition to addressing structural determinants, it is necessary to ensure that health services are accessible and culturally appropriate for all individuals. On the other hand, policies such as *Régimen General de Garantías en Salud*,⁶ zero co-payment in the public health network,⁷ and the Ricarte Soto Law,⁸ among others, while not addressing structural determinants, reduce barriers to accessing healthcare and ensure that the services provided are enforceable by those receiving care.

However, despite notable progress made in Chile over the past decades, there are still deep inequities that need to be addressed. This World Health Day, in particular, calls for a necessary and profound reflection on how to guarantee the right to health for everyone.

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REFERENCES

- 1. World Health Organization. ¿Quiénes somos? https://www.who.int/es/about/who-we-are
- 2. World Health Organization. Social determinants of health. https://www.who.int/health-topics/social-determinants-of-health#tab=tab_1
- Dintrans PV, Castillo C, De La Fuente F, Maddaleno M. COVID-19 incidence and mortality in the Metropolitan Region, Chile: Time, space, and structural factors. PLoS One. 2021;16(5) e0250707. https://doi.org/10.1371/journal.pone.0250707
- 4. Ministerio de Planificación. Crea el sistema intersectorial de protección social e institucionaliza el subsistema de protección integral a la infancia Chile Crece Contigo. Bliblioteca del Congreso Nacional de Chile, Ley 20.379 Chile; Sep 1, 2012. https://bcn.cl/2fbd7
- Ministerio de Desarrollo Social y Familia. Sobre garantías y protección integral de los derechos de la niñez y adolescencia. Biblioteca del Congreso Nacional de Chile, Ley 21.430 Chile; Mar 15, 2022. https://bcn.cl/2ymh5
- 6. Ministerio de Salud Chile. Establece un régimen de garantías en salud. Ley 19.966. agosto, 2004. https://bcn.cl/2fckl
- Ministerio de Salud Chile, Subsecretaria de Salud Pública. Modifica Resolución N°176 exenta, de 1999, del Ministerio de Salud, que aprueba el arancel de prestaciones de salud del Libro II del DFL N°01/2005 del Ministerio de Salud. Resolución 111. Agosto 2022. https://bcn.cl/35co5
- 8. Ministerio de Salud Chile. Crea un sistema de protección financiera para diagnósticos y tratamientos de alto costo y rinde homenaje póstumo a don Luis Ricarte Soto Gallegos. Ley 20.850, junio 2015. https://bcn.cl/2fpjz