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journal homepage: www.sciencedirect.com/journal/public-health-in-practice



#### Letter to the Editor

## Equality of opportunity and health in post-COVID world

ARTICLE INFO

Keywords COVID-19 Equality of opportunity Social mobility



Links between equality of opportunity and health in post-COVID world must be an issue of general interest to academic, health, and policy audiences in the developed countries and other parts of the world. We already know that COVID-19 disproportionally affects most vulnerable and marginalised groups, while their positions in social hierarchy are strongly shaped by intergenerational transmission of advantages and disadvantages. Further, recent evidence from the United States and Europe also suggests that inequality of opportunity has significant negative consequences for health. This correspondence end with a call that decision makers, while rebuilding the post-COVID social model, should remember that equality of opportunity is not only fair but it is also good for health.

As we gradually recover from the COVID-19 pandemic through mass vaccination programmes, countries should revisit the fundamental pillars of their social model. We have witnessed during the crisis that the virus, which is supposed to be blind to its victims, disproportionally affects more vulnerable and marginalised groups compared to those who hold positions at the higher end of the social hierarchy [1]. However, the positions that individuals hold on the socioeconomic ladder are not randomly assigned; they are rather strongly affected by intergenerational reproduction of advantages and disadvantages.

An individual's ability to go as far as their talents will take them, regardless of their social origins, is commonly regarded as one hallmark of a fair and equitable society. Recent evidence, however, suggests that, even before COVID-19, equality of opportunity was declining in many developed countries and that this had significant negative consequences for morbidity and mortality outcomes [2]. Individuals' relative loss of status, when compared to their parental generation, is believed to be one of the explanations of a substantial increase in psychological distress and rates of suicide among middle-aged white men in the United States [3].

A recent study has also identified that inequality of opportunity is linked to worse mortality outcomes across 30 European nations, and that this link is particularly strong for deaths via external causes, including suicides and assaults [4]. There are two possible explanations of this association. On the one hand, perceptions of equality of opportunity in more open societies may increase health investments among individuals from disadvantaged backgrounds because future possibilities make it more likely that the socioeconomic benefits of being healthier, such as obtaining a quality job with a high salary, will actually materialise. On the other hand, a perceived lack of fairness in the distribution of life chances and limited possibilities for upward mobility can cause anxiety among individuals and gradually compromise their mental and physical health [5].

Therefore, while rebuilding the post-COVID social model, decision makers should remember that equality of opportunity is not only fair but it is also good for health. Measures that aim to tackle ethnic, educational, labour market, and other barriers that prevent population groups with disadvantaged social origins from experiencing social mobility can be justified, not only in virtue of normative considerations of equality of opportunity, but also in terms of individuals' chances to enjoy long and healthy lives.

#### **Declaration of competing interest**

The author declares that he has no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

#### Acknowledgement

This work was supported by the Polish National Science Centre grant (Program SONATA14) [grant number UMO-2018/31/D/HS6/01877]. The sponsor did not play any role in study design; in the analysis and interpretation of data; in the writing of the report; and in the decision to submit the article for publication.

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