

## The Impact of Economic Status on Health Status in the Context of Bangladesh

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**Abstract :** Bangladesh, a South Asian developing country, has achieved a remarkable breakthrough in health indicators during the last four decades despite immense income inequality. This phenomenon results in the mystical exclusion of marginalized people from obtaining health care facilities. However, the persistence of exclusion of the disadvantaged remains troubling. Exclusion occurs from occupational inferiority, pay and wage differences, educational backwardness, gender disparity to urban-rural complexity and eliminate the unprivileged from seeking and availing the health services. Evidence from Bangladesh shows that many sick people prefer to die at home without securing medical services because in previous times they were not treated well, not because the medical facilities were inadequate or antediluvian but the socio-economic class allows them to receive obdurate treatment. Furthermore, government and policymakers have given enormous emphasis on infrastructural development and achieving health indicators instead of ensuring quality services and inclusiveness of people from all spheres. Therefore, it is high time to address the issues concerning this and highlight the impact of economic status on health status in a sociological perspective. The objective of this study is to consider ways of assessing and exploring the impact of economic status for instance: occupational status, pay and wage variable, on health status in the context of Bangladesh. The hypotheses are that there are a significant number of factors affecting economic status which are impactful for health status eventually, but acute income inequality is a prominent factor. Illiteracy, gender disparity, remoteness, incredibility on services, superior costs, superstition etc. are the dominant indicators behind the economic factors influencing the health status. The chosen methodologies are a qualitative and quantitative approaches to accomplish the research objectives. Secondary sources of data will be used to conduct the study. Surveys will be conducted on the people who have ever been through the health care facilities and people from the different socio-economic and cultural backgrounds. Focus group discussions will be conducted to acquire the data from different cultural and regional citizens. The findings show that 48% of people who are from disadvantaged communities have been deprived of proper health care facilities. The general reasons behind this are the higher cost of medicines and other equipment. A significant number of people are unaware of the appropriate facilities. It was found that the socio-economic variables are the main influential factors that work as the driving force for both economic dimension and health status. Above all regional variables and gender, dimensions have an enormous effect on determining the health status of an individual or community. Amidst many positive achievements for example decrease in the child mortality rate, an increase in the immunization programs of the child etc., the inclusiveness of all classes of people in health care facilities has been overshadowed in Bangladesh. However, this phenomenon along with the socio-economic and cultural phenomena significantly demolishes the quality and inclusiveness of the health status of people.

**Keywords :** cultural context of health, economic status, gender and health, rural health care

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