



Socioeconomic inequality in Peru

Inequality is a violation of human dignity because it prevents human beings from fully developing their capabilities.

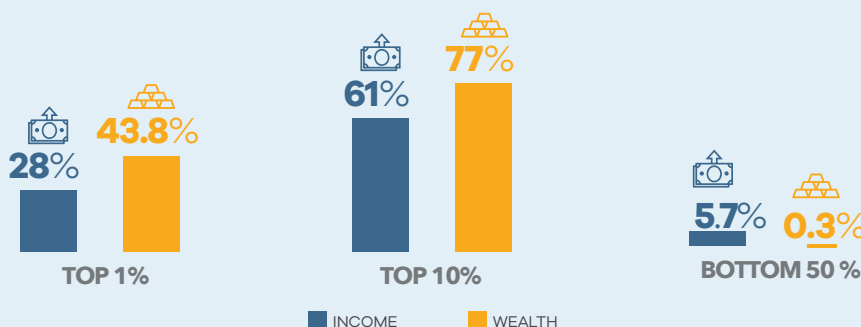
In Peru, 1% of the population owns almost 45% of the country's total wealth and 77% of the wealth is concentrated in the top 10%. At the same time, the bottom 50% of the population owns only 0.3%.

On the other hand, the top 1% concentrates 28% of income and the top 10% receives 61% of national income. In contrast, the bottom 50% of the population receives only 5.7%.

Graph 1

Income and wealth inequality in Peru

Source: World Inequality Database.



1. Inequality in several societal spheres



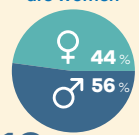
1.1. Employment inequality

According to the National Data and Statistics Institute (INEI),

THERE ARE 18 MILLION PEOPLE

in the Economically Active Population (EAP) group in Peru.

8 million
are women



10 million
are men

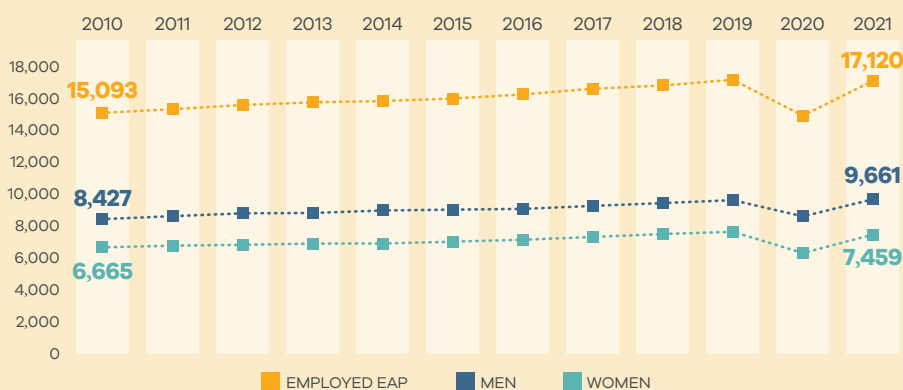
Although there are relatively fewer women in the EAP, there are 7% of unemployed women, compared to a lower percentage of men in this condition (5%). In addition, it is important to note that being employed is not the same as being

properly employed. There are legal, informal and illegal labor systems in Peru, which are interrelated and generate interdependence. While the average level of informality in the region is slightly under 50% of the EAP, it reaches 70% in Peru.

Graph 2

Economically Active Employed Population of Peru

Source: INEI.



1.2. Health inequality

The health pillar of the Regional Competitiveness Index 2022 of the Peruvian Institute of Economics analyzes the population's overall health status and access to health services, together with variables

such as average life expectancy at birth and medical staff coverage. This dimension also analyzes indicators such as chronic malnutrition, prevalence of anemia, vaccination and maternal health

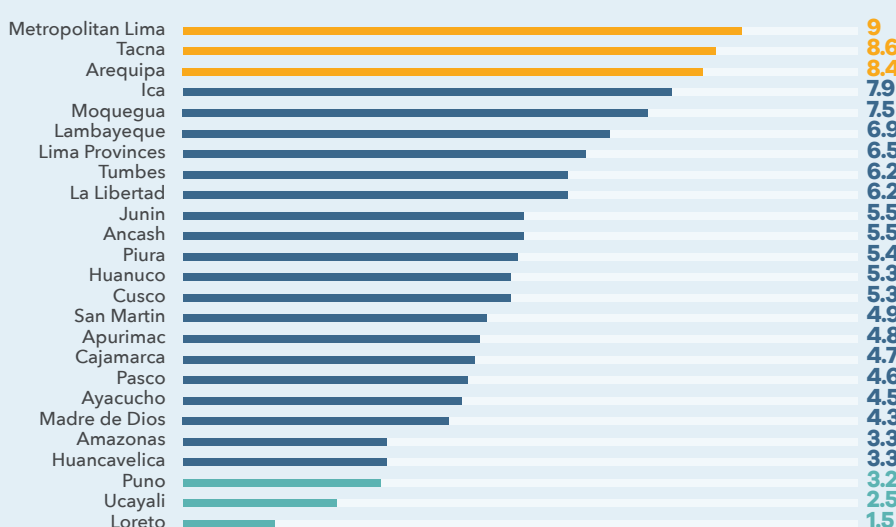
through the proportion of institutional deliveries registered in each region.

The results show the enormous territorial gaps in access to services across Peru's 25 regions.

Graph 3
Inequality in health in 25 Peruvian regions 2022, (score from 0 to 10)

While Metropolitan Lima, Tacna and Arequipa yield the best results in terms of health, the Puno, Ucayali and Loreto regions rank last, with highest rates of anemia, chronic malnutrition and vaccination of children under age 3.

Source: Peruvian Institute of Economics (2023).



1.3. Inequality and climate change

Peru's public institutions have limited capacity for action, and **the country does not have sufficient financial and technological resources to adapt and provide timely responses to climate change.**

According to the Ministry of the Environment, Peru is responsible for only

0.4% OF GREENHOUSE GAS EMISSIONS.

However, it is one of the most vulnerable countries in terms of climate risks.

22% OF THE COUNTRY'S GLACIER AREA

has been lost in the last 30 years, representing 71% of the world's tropical glaciers.

This loss represents

7 billion cubic meters of water, which equals the water consumption of Lima's population FOR 10 YEARS.

33 million 396 thousand POPULATION

7.36%

are engaged in **AGRICULTURE, FISHING AND OTHER ACTIVITIES** directly affected by climate.

PERU HAS 28 of the 35 climates identified on the planet (SENAMHI, 2005).

90%

live in arid, semi-arid and sub-humid zones.

72%

of emergencies caused by natural hazards were **CLIMATE-RELATED** and took place in the last decade.

2. Civil society's contributions to equity

In view of the situation of inequality in Peru, there are innovative initiatives arising from civil society for inequality reduction and construction of equity. Some of these initiatives are:

FOOD BANK OF PERU



It has been operating since 2014, its model works by receiving

FOOD IN GOOD CONDITION

from commercial entities, companies or individuals for donation and distribution among the population that needs it most.

The service impacts one of the most negative aspects of inequality: lack of access to adequate food and nutrition.

In addition to malnutrition and anemia, obesity is gaining relevance, affecting almost 25% of the Peruvian population. In addition, poor practices in the food production chain result in about 33% of food products being discarded. The health crisis made these social gaps more visible and led to the Food Bank currently to work with 540 organizations, out of which 400 are soup kitchens and public dining halls, in addition to shelters, schools and other entities.

CIVIL SOCIETY HEALTH FORUM



Social movement that emerged in 2002 and promotes the

FULL EXERCISE OF THE RIGHT TO HEALTH

through implementation of universal health systems.

Promotes articulation with all stakeholders in society that assume health as a human right and develop citizen surveillance and social control capabilities in this area.

During the pandemic, it strongly promoted the creation of anti-COVID community committees as a social response to address the lack of State action due to the collapse of the system. It focused on dissemination of preventive measures, case referrals and preventive campaigns. Its advocacy works through 8 thematic roundtables with nearly 5 000 organized volunteers nationwide. It also focuses on sexual and reproductive rights' promotion, access to medicine, TB and HIV case follow-up, among others.

IDEELE RADIO



Initiative of the Legal Defense Institute (IDL) created in 1983 to

PROVIDE LEGAL ADVICE

to victims of human rights violations and relatives of persons executed extrajudicially as a result of the armed conflict.

Ideele radio promotes actively engaged journalism for the defense and promotion of democracy and human rights to restore broken citizenry.

Currently, there are 102 local media networked with Ideele radio, covering the whole country with daily informative, opinion piece and denunciation radio programs. These are conducted with a United Nations Human Rights approach, where free and fair voting is also promoted, and human rights training programs are provided for those working in community media and local officials from relevant organizations.

To learn more about these and other initiatives, review the full research here.



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