

How global is health?

Ilona Kickbusch

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What do we mean by
global health?

How global??

- **Global Health**
- **International health**
- **Public health**



- Geographical reach
- Level of cooperation
- Individuals or populations
- Access to health
- Range of disciplines

Global health is.....

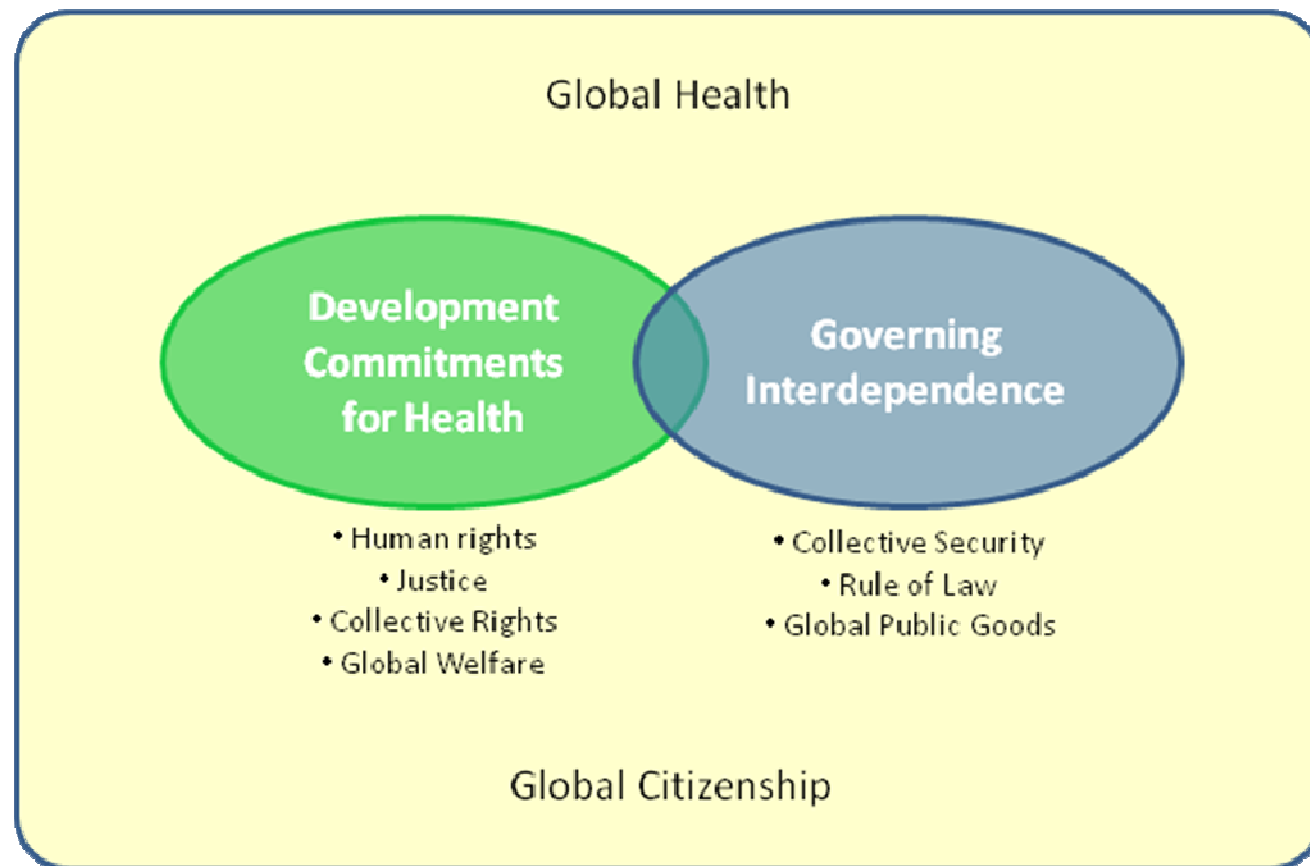
- an area for study research and practice that places a priority on improving health and achieving equity in health **for all people worldwide.**
- It emphasises **transnational** health issues, determinants and solutions
- It involves **many disciplines** within and beyond the health sciences and promotes interdisciplinary cooperation
- It is a synthesis of population based prevention and individual level clinical care.
- Koplan et al. 2009

Global Health

Global Health refers to those health issues which **transcend national boundaries** and governments and call for actions on the **global forces and global flows** that determine the health of people.

Kickbusch 2006

Global Health



“Globalization”: beyond boundaries

- Cognitive
- Spatial
- temporal



Movement of people – goods – services – ideas – life styles - viruses

Global actors: beyond states



For all: Global inequality and poverty

- Health
- Gender
- Education
- Social disparities



Global Health Governance

means taking responsibility for the determinants of health in new ways. There is a growing understanding that **health is part of a joint responsibility to manage globalisation** : trade policy, security policy, agricultural policy, environmental policy and foreign affairs

European Perspectives on Global Health
A Policy Glossary 2006

Health is a **collective** global challenge

The nature of 21st century health – the global health society - calls for a radical change of mindset and a reorganization of how we govern health in the 21st century.

Today's minister of health has a dual responsibility: to promote his or her **country's health** and to advance the health interests of the **global community**.

Strategic positioning of health in the global agenda

Foreign Policy: Oslo Ministerial Declaration

Ministers of Foreign Affairs of Brazil, France, Indonesia, Norway, Senegal, South Africa, and Thailand*

launched in September, 2006, in New York / Oslo on March 20, 2007



- In today's era of globalisation and interdependence there is an urgent need to **broaden the scope of foreign policy**. ...We believe that health is one of the most important, yet still broadly neglected, long-term foreign policy issues of our time. ...
- **We have therefore agreed to make impact on health a point of departure and a defining lens that each of our countries will use to examine key elements of foreign policy and development strategies, and to engage in a dialogue on how to deal with policy options from this perspective.**

SECURITY agenda

- a *security agenda* driven by the fear of global pandemics or the intentional spread of disease in an era where viruses have the potential to spread from one part of the world to another in a matter of hours;

Trans-boundary collective (human) security issues

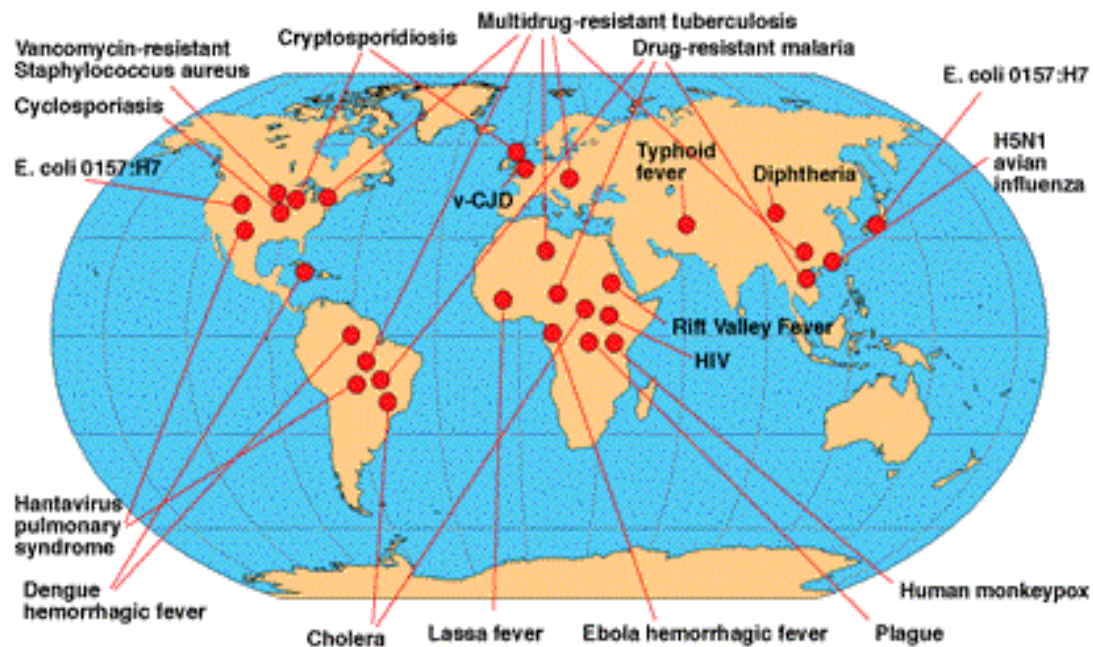
- Trade
- Mobility/Migration
- Environment
- Infectious disease
- Intellectual property
- Food
- Disaster response
- Global Crime
- Terrorism
-



- *High degree of uncertainty*
- *High degree of interconnectedness*
- *Need for collective action*

Infectious diseases

Examples of Emerging and Re-Emerging Diseases



Travel

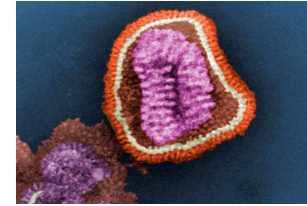
Tourism

Trade

Ecology

Migration

Influenza

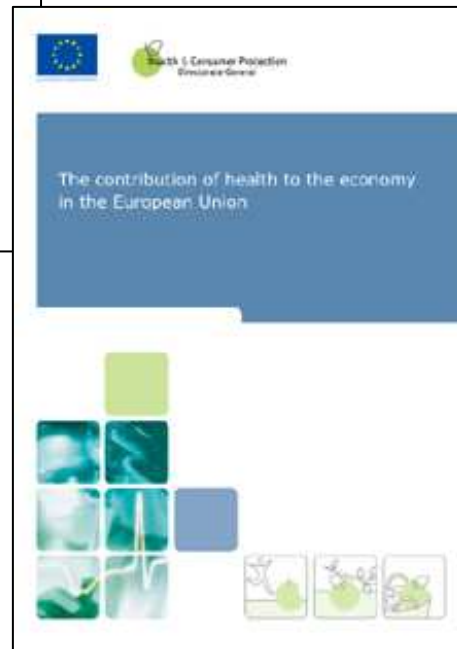
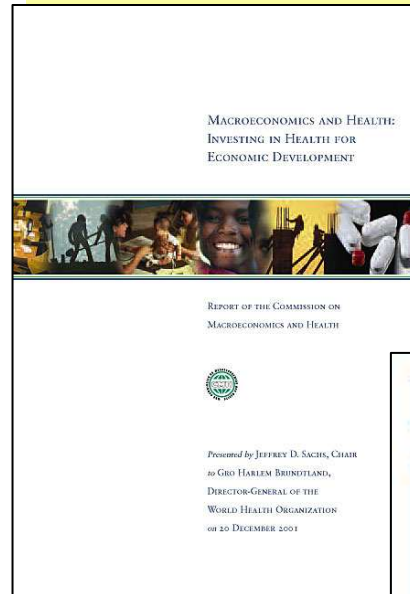


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Economic agenda

- economic impact of poor health on development
- of pandemic outbreaks on the global market place,
- the economic relevance of the health sector,
- of certain industries such as tobacco, food, medical technology and pharmaceuticals and
- the growing global market of goods and services in relation to health;

Economic change of mindframe

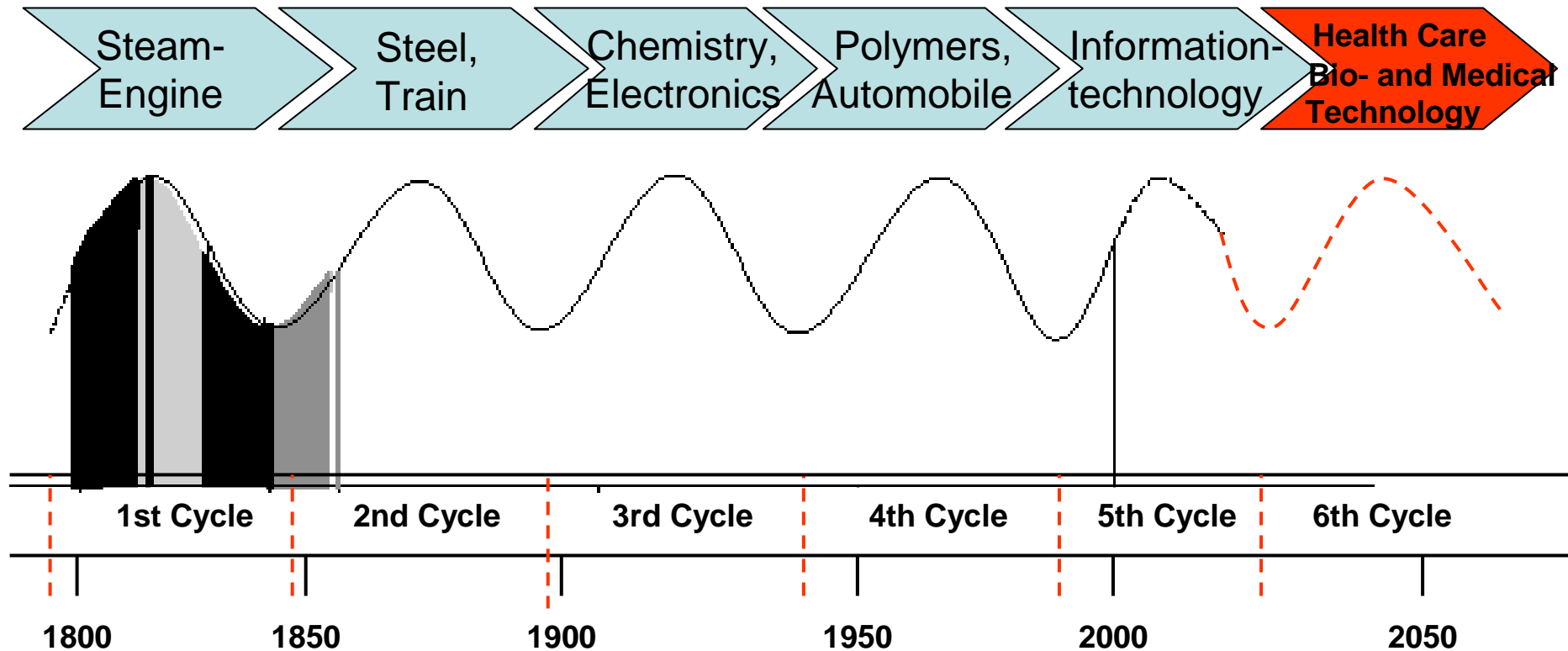


Health as Investment



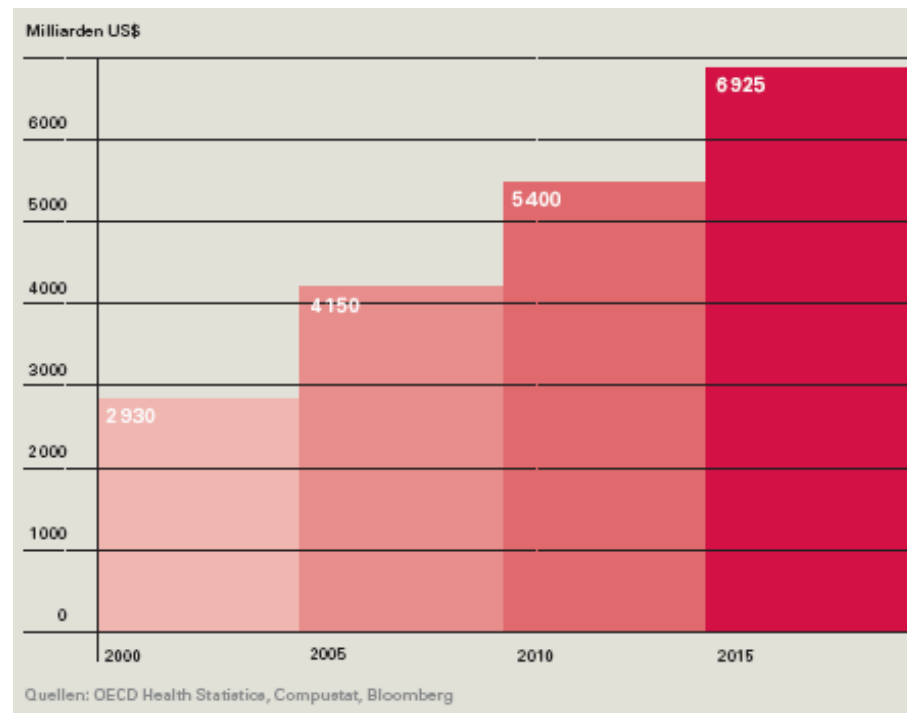
केन्द्रीय स्वास्थ्य और परिवार कल्याण मंत्री श्री सत्येन्द्र सिन्हा बुधस्वतिवार, 9 जनवरी, 2003 को नई दिल्ली में मैक्रोइकोनामिक्स और स्वास्थ्य संबंधी राष्ट्रीय आयोग के उद्घाटन समारोह को सम्बोधित करते हुए।

Kondratieff-Cycles



Source: Nefiodow, L.A., Wirtschaftslokomotive Gesundheit, Conturen, 4/99, pp. 28-35.

Global growth



- Practically no other sector has grown more rapidly than the market for health. The OECD suggests that this trend will continue:
- By 2015 health expenditures will increase by 66% compared to 2005

Social justice agenda

- a *social justice agenda* which advocates for health as a social value and human right, which includes the social determinants of health, access to medicines and universal coverage.

Social inequality is killing people on a grand scale

- **Daily living conditions:**

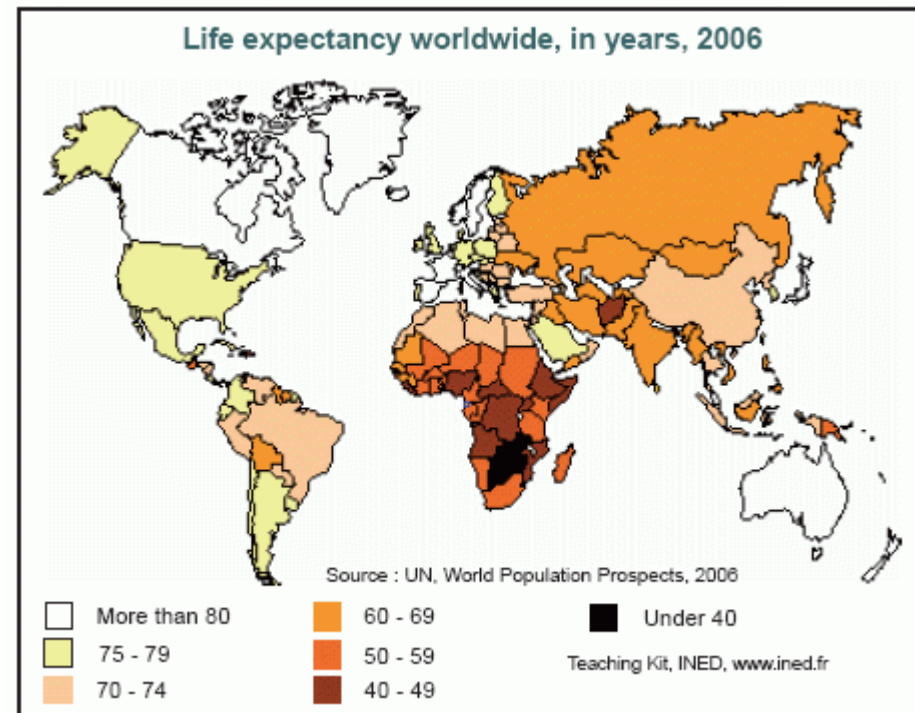
- Equity from the start
- Healthy places healthy people
- Fair employment and decent work
- Social protection across the life span
- Universal health care

- **Power money and resources**

- Health equity in all systems, policies and programmes
- Fair financing
- Market responsibility
- Gender equity
- Political empowerment – inclusion and voice
- Good global governance



Life expectancy



No end to diseases

- HIV/AIDS, TB, Malaria, diarrhoeal diseases including cholera, typhoid fever, polio, neglected disease, trachoma, plague and typhus.....

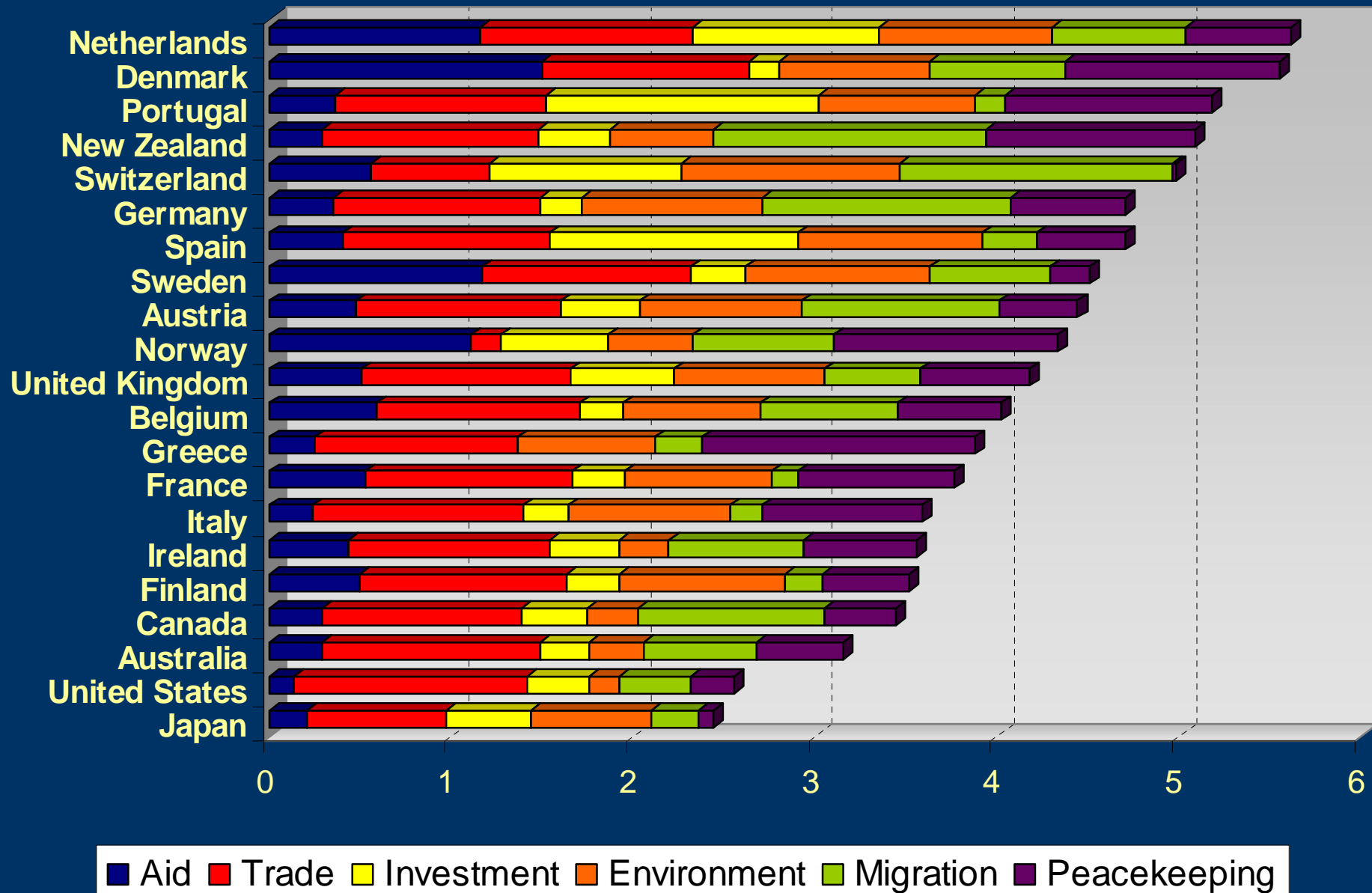
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A global compact: The Millennium Development Goals

- The Millennium Development Goals are time-bound and measurable goals and targets to be achieved between 1990 and 2015, they include:
 1. halving extreme poverty and hunger
 2. achieving universal primary education
 3. promoting gender equality
 4. reducing under-five mortality by two-thirds
 5. reducing maternal mortality by three-quarters
 6. reversing the spread of HIV/AIDS, malaria and TB
 7. ensuring environmental sustainability
 8. developing a global partnership for development, with targets for aid, trade and debt relief

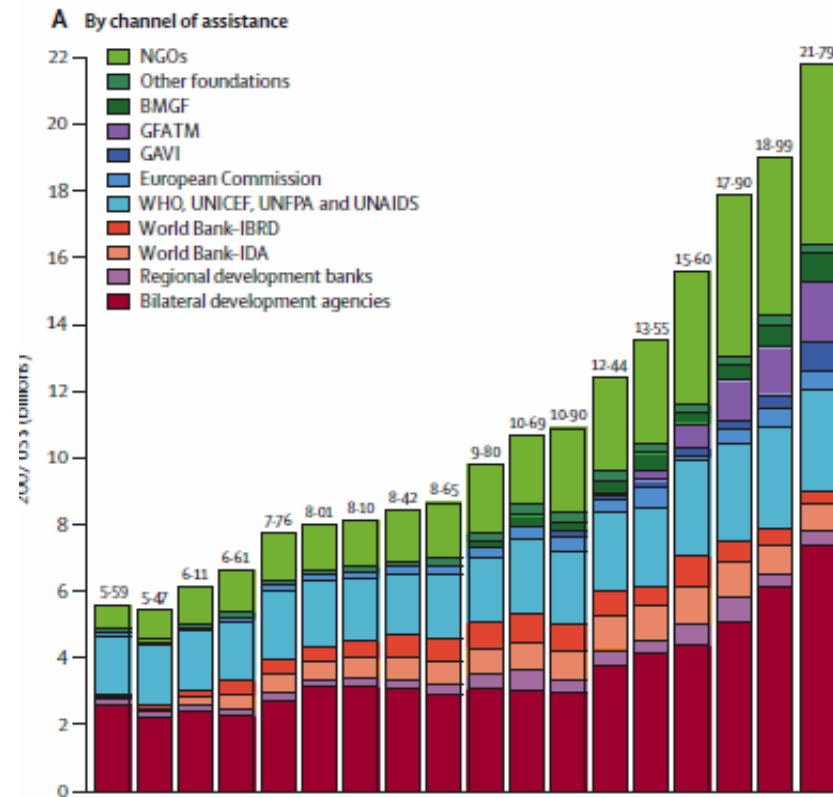
Commitment to Development Index



Global philanthropic agenda:

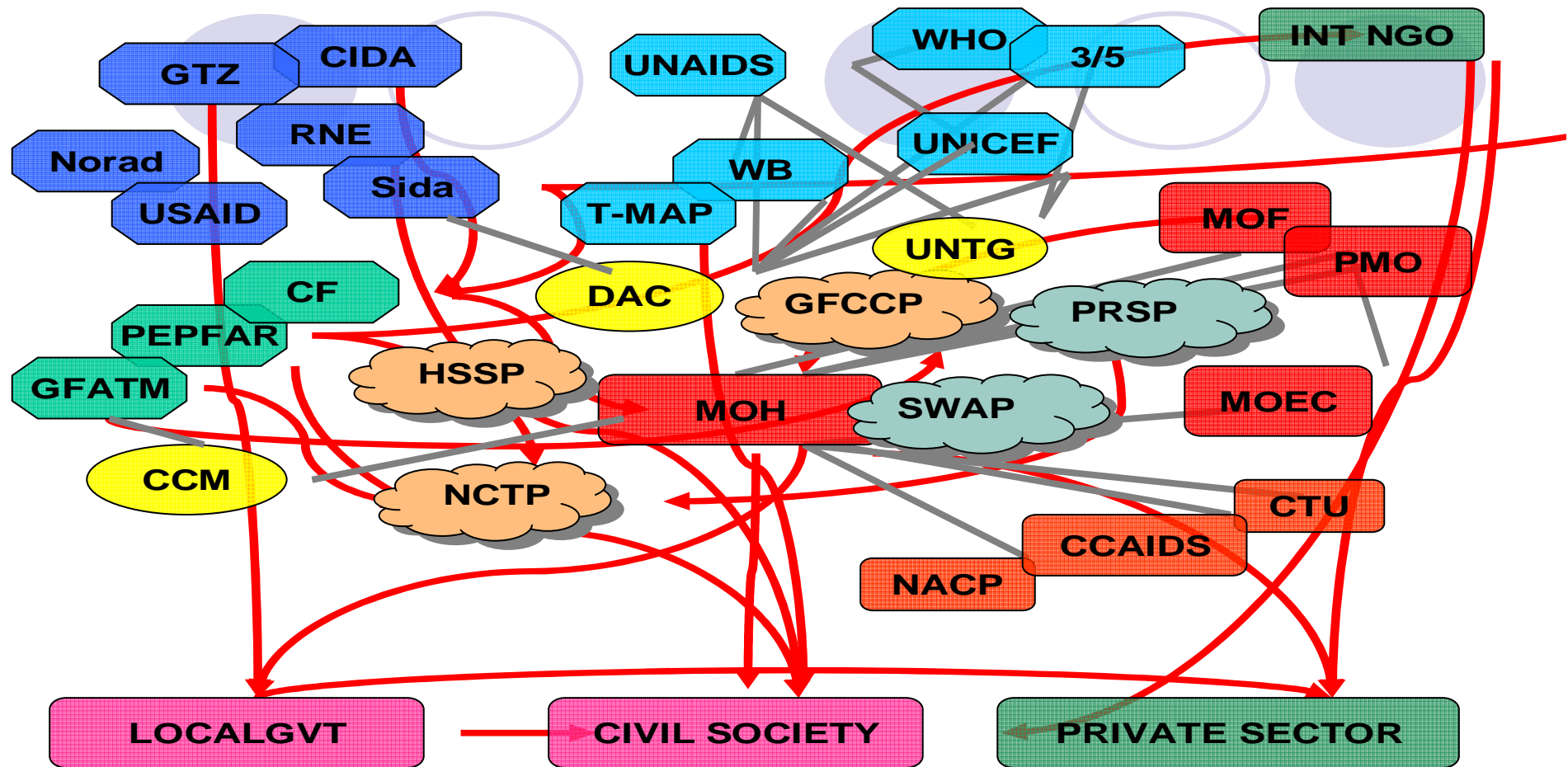
- Instrument of charity based global initiatives
- supporting the **Millennium Development Goals** for health and active engagement of philanthropies in a broad range of global health initiatives.
-

Increase in ressources



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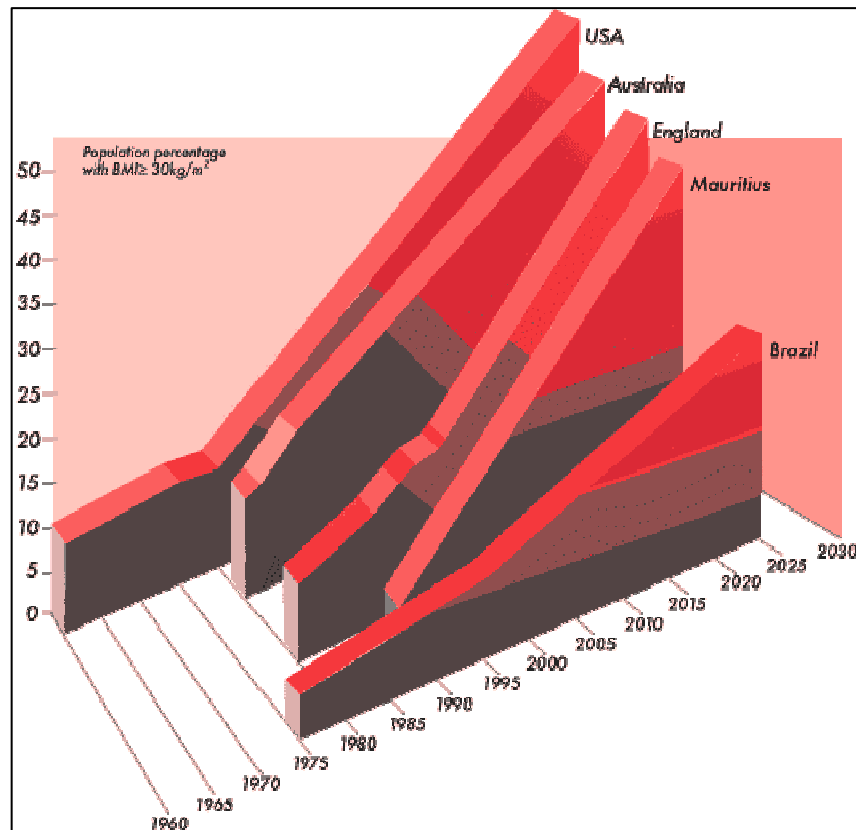
Complexity at the country level



Complex policy challenges for collective action

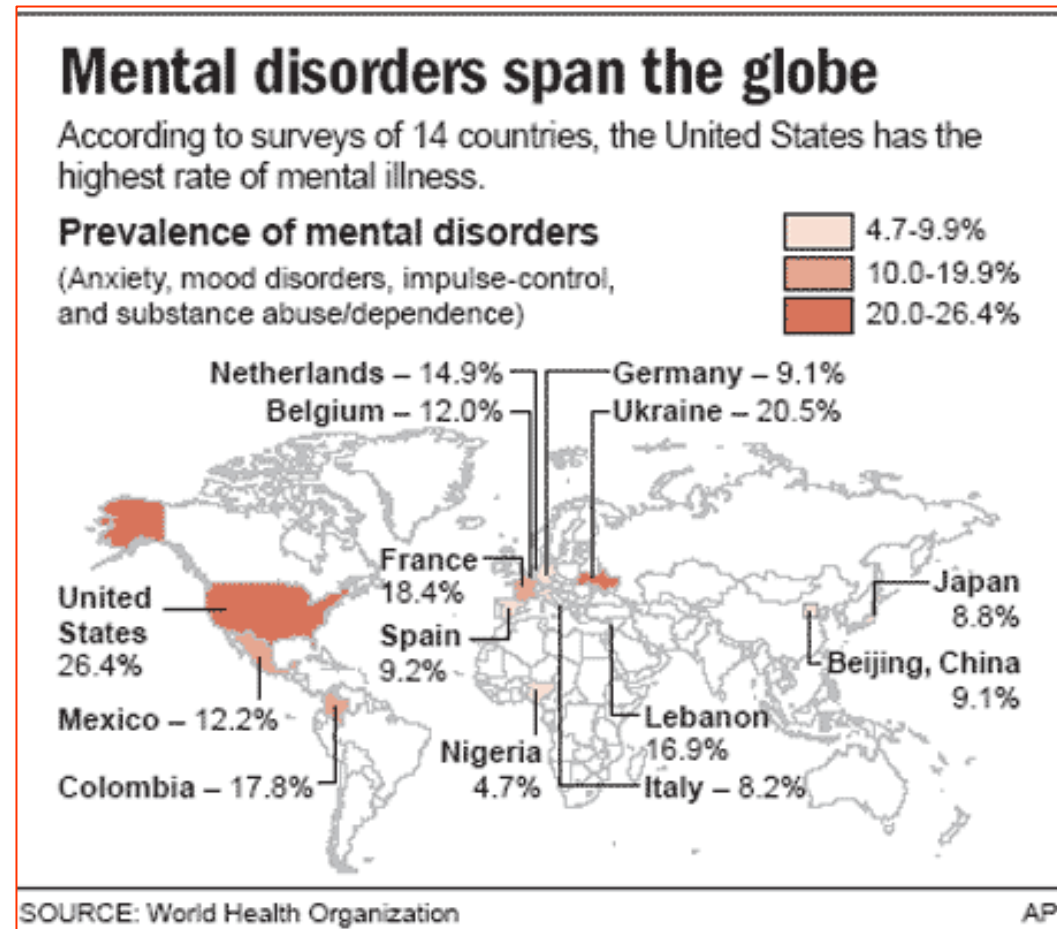
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New global chronic disease epidemics

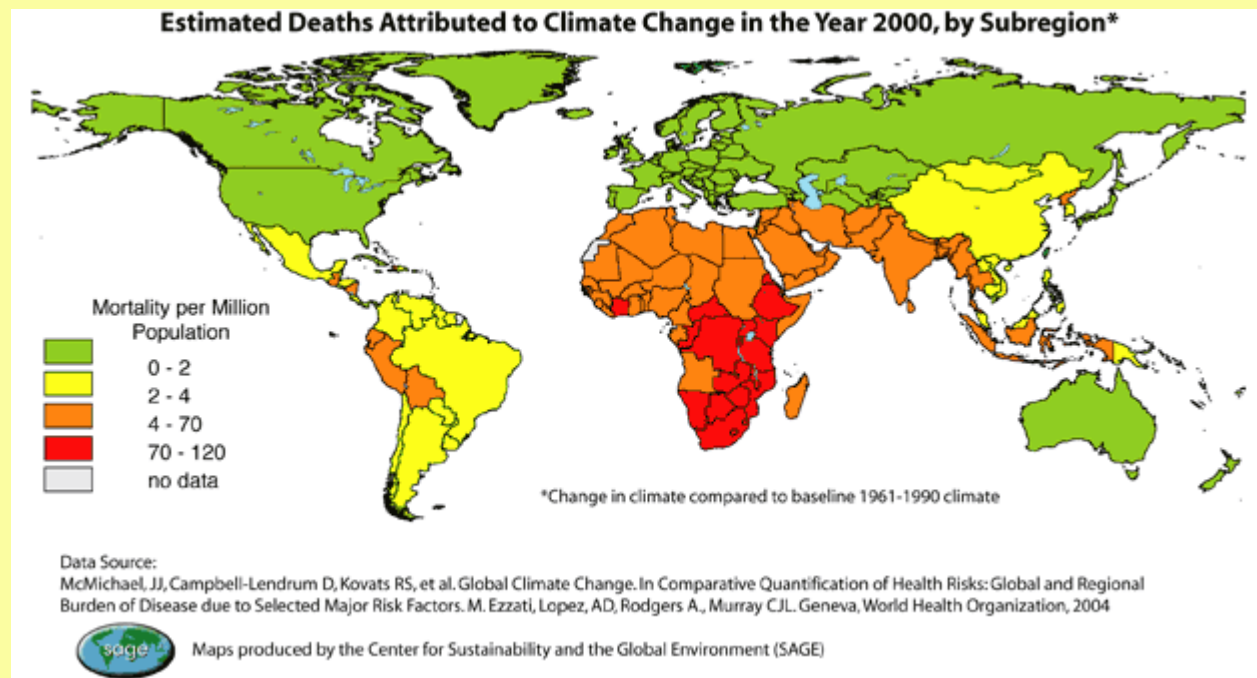
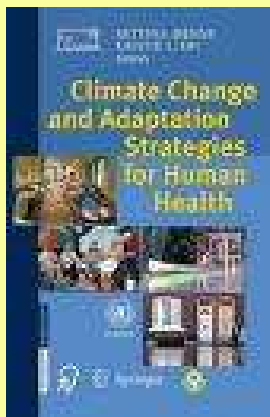


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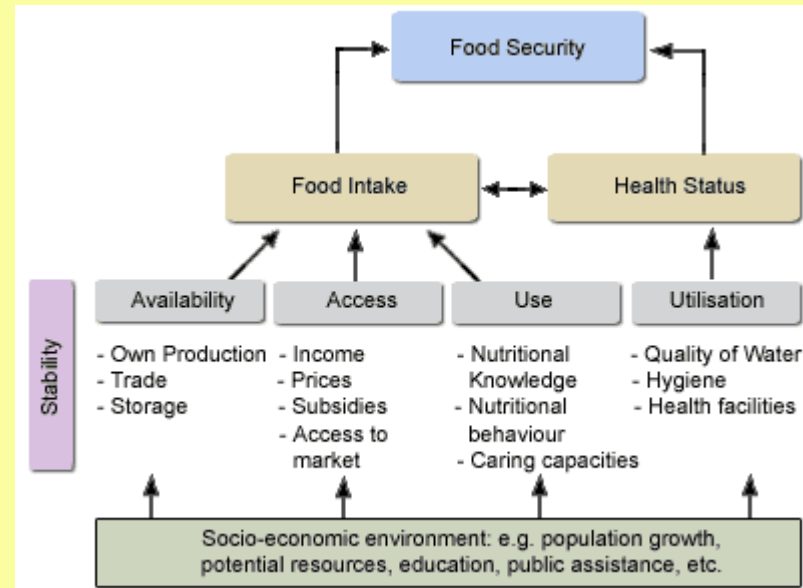
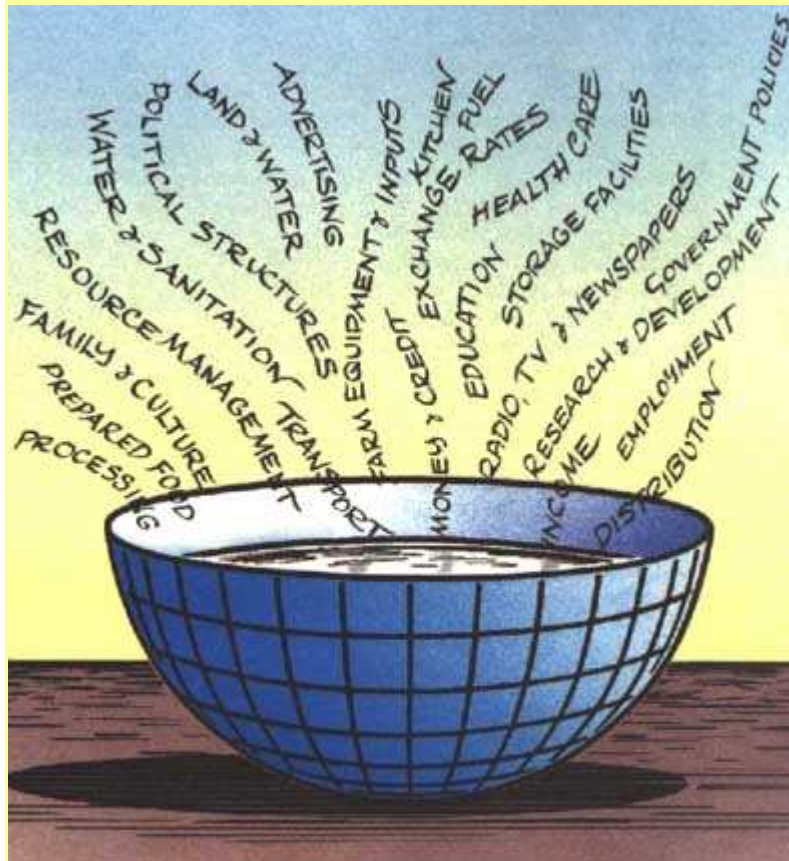
Mental Health



Climate Change



Food security



Urbanization





Water

- By 2025, nearly 2 billion people will be living in countries or regions with absolute water shortage, where water resources per person fall below the recommended level of 500 cubic metres per year. This is the amount of water a person needs for a healthy and hygienic living.



Global Health Governance

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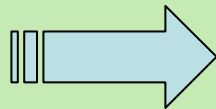
The goal: “good global governance”

- Good at delivering **results** (efficient and effective)
- Ensures that results delivered are deemed good (**fairness**, reducing poverty, increasing equity)
- Addresses the distribution of **power** through increased participation and spaces of interaction
- Requires: **global institutions and responsible stakeholders**

Shift of institutional forms



- Multi lateral, state based paradigm of global health



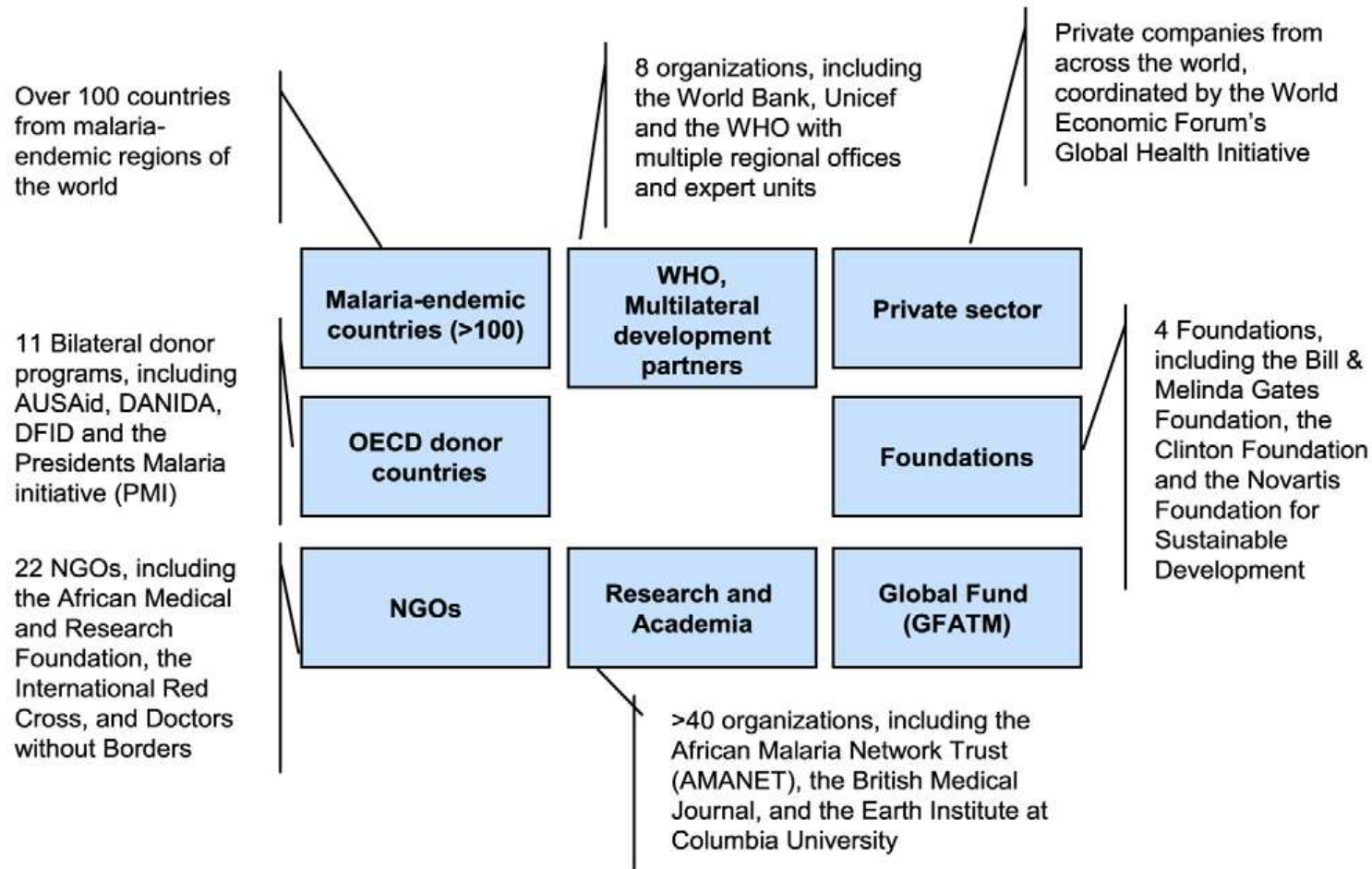
- Venture philanthropy
- Market multilateralism
- IPPP – multiactor
- The „Gates“ effect

Foundations

- Carter Foundation
- Bill and Melinda Gates Foundation
- Clinton Foundation



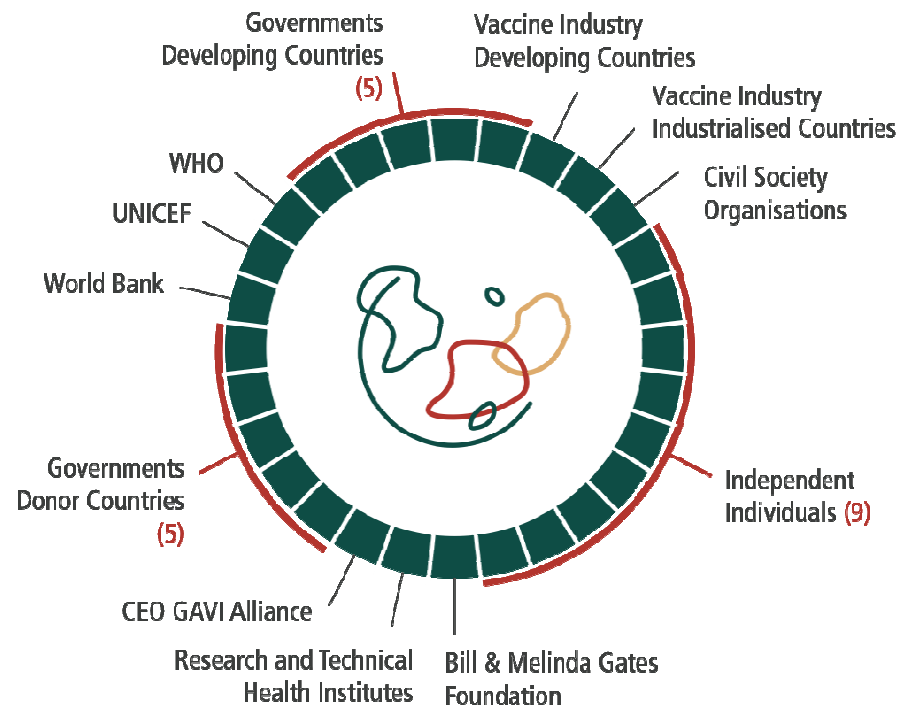
Roll Back Malaria Partnership: 500 partners



GAVI Alliance

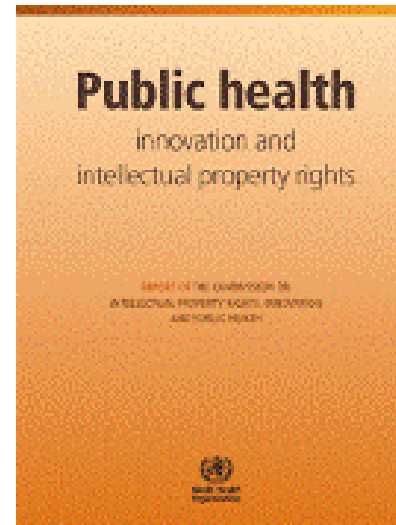


Innovative governance: Global Alliance for Vaccines and Immunization



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Treaties and agreements



TRIPS – DOHA
FOOD SECURITY
CLIMATE CHANGE

Strengthen international organisations

Codes on marketing, migration of health workforce...

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G8 Muskoka Declaration

June 26 2010

- Launch MUSKOKA Initiative „a comprehensive and integrated approach to accelerate progress towards MDGs 4 and 5 – \$10 billion for 2010-2015
- GFATM – polio eradication
- Food security
- Training medical personnel
- (consultation with African Union)

Health at the United Nations



- Security Council HIV AIDS 2000
- Millennium Development Goals 2000
- UNGASS HIV AIDS 2001
- General Assembly: Global health and Foreign Policy 2009
- General Assembly: Non Communcable Diseases 2011

EU Council conclusions 2010 –

- Council of the European Union Adopts Conclusions on the EU Role in Global Health 10 May 2010
- *The Council welcomes the Commission Communication on the EU Role in Global Health which highlights the need to take action to improve health, reduce inequalities and increase protection against global health threats. Health is central in people's lives, including as a human right, and a key element for equitable and sustainable growth and development, including poverty reduction.*



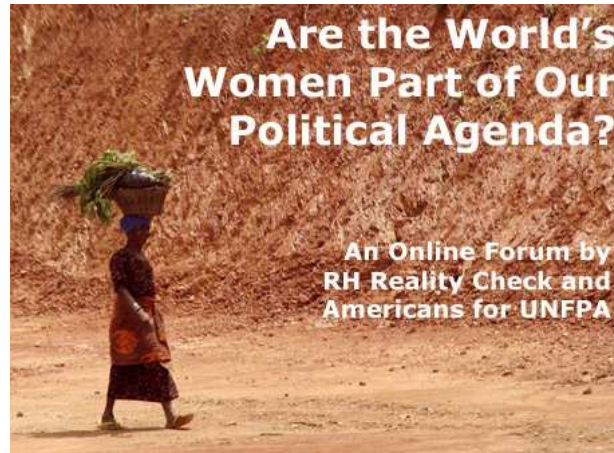
Challenge: rethinking development

- Half of global economic growth occurs in the developing world
- Reforming decision making institutions:
- „China effect“
- Increase in South South Initiatives;
- New clubs and coalitions: IBSA, BRICS, regional bodies; Shanghai Cooperation Organization
- New focus on Africa (x-Africa summits)
- Rethinking health and treatments



- Critical gender issues in global health

Question:



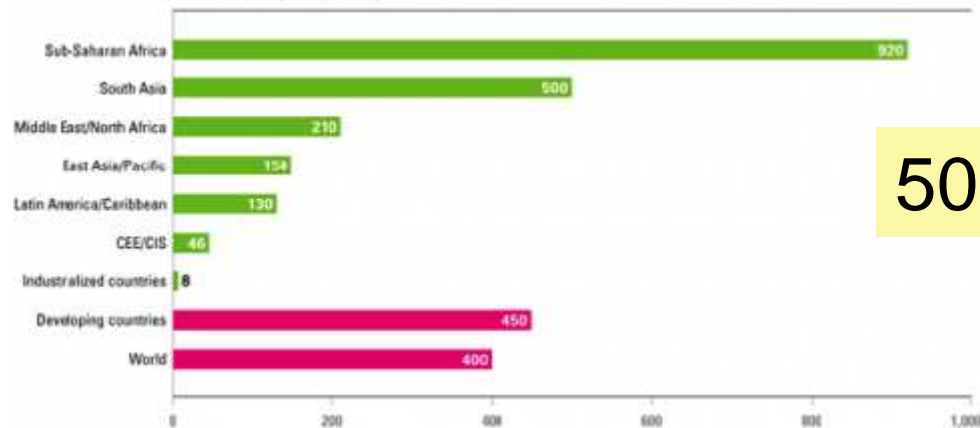
- Societies and their health systems are failing women
- WHO Report Women and Health 2009

GLOBAL

Maternal mortality

500 000 women a year

MATERNAL MORTALITY IS HIGHEST IN SUB-SAHARAN AFRICA AND SOUTH ASIA Maternal mortality ratios per 100,000 live births, by region (2005)

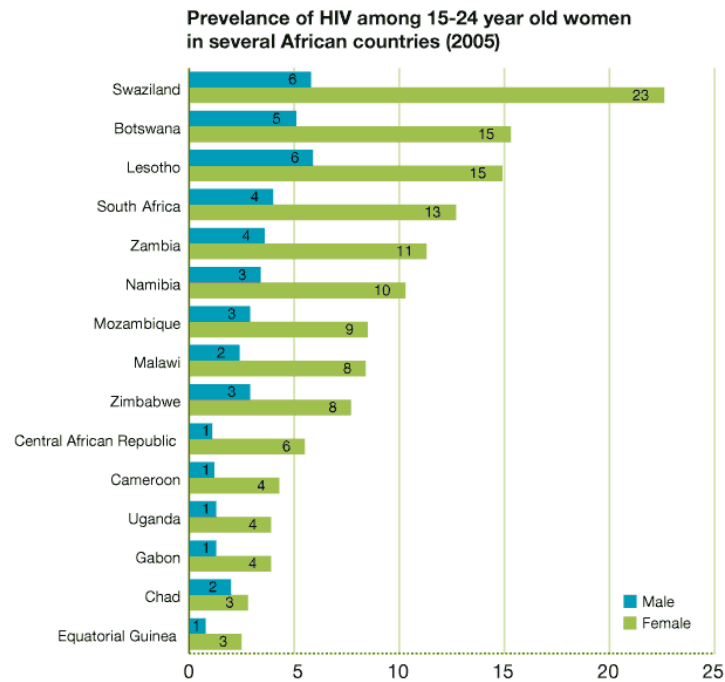


MATERNAL MORTALITY IS HIGHEST IN COUNTRIES OF SUB-SAHARAN AFRICA AND SOUTH ASIA Maternal mortality ratios (MMR) per 100,000 live births (2005)



Sexuality and death

- On a global scale HIV/AIDS is the main cause of death of women in reproductive age



UNAIDS 2008

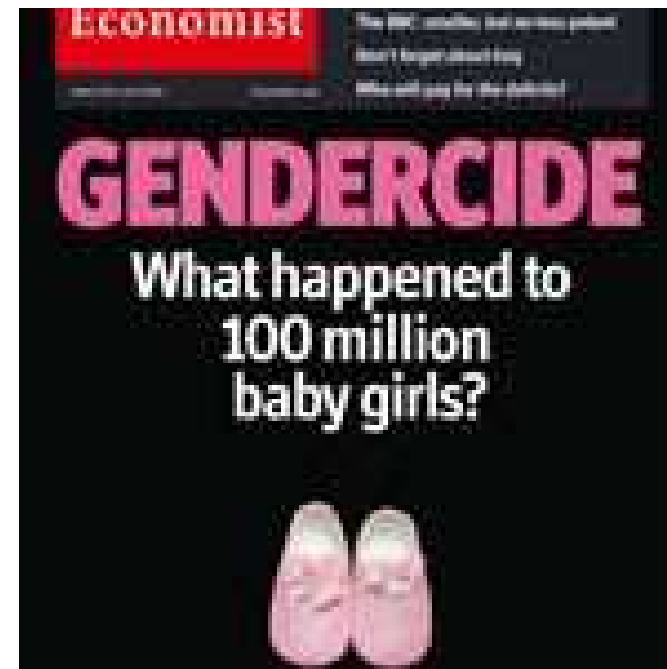
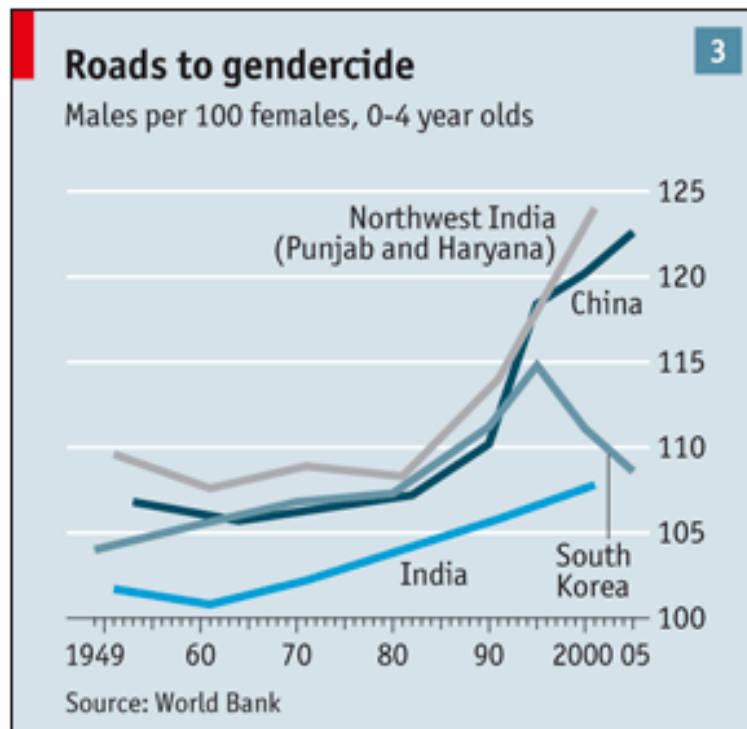


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Inequality
Violence
Prostitution



Gendercide 8. März 2010



Global products change behaviours



- “the largest single product marketing opportunity in the world”



Gender as an organisational principle of society is repositioned globally



Sex and gender are central to global social change.

Ambiguity:

- Old patterns are destroyed
- New identities are possibly
- New constructions of male – female are created
- New social relationships manifest themselves

Body change: Global Reduction

- The presented body is 20% thinner than in the die Normalmasse
- Is a global phenomenon through global media
- Global increase in eating disorders – profit driven disorders



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„Global girls“

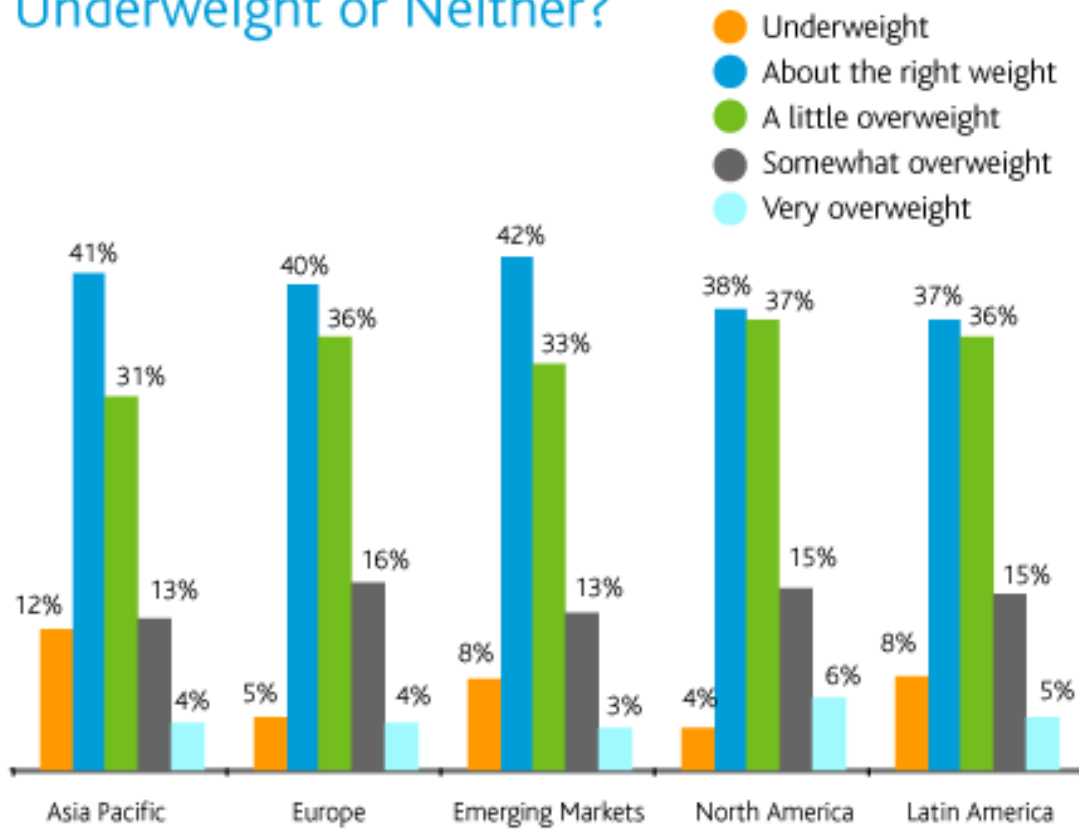
There are no historical precedents for this new socio cultural pressure – nor for the psycho social experiences that go with it

Self - objectivation



New dimensions of mental health

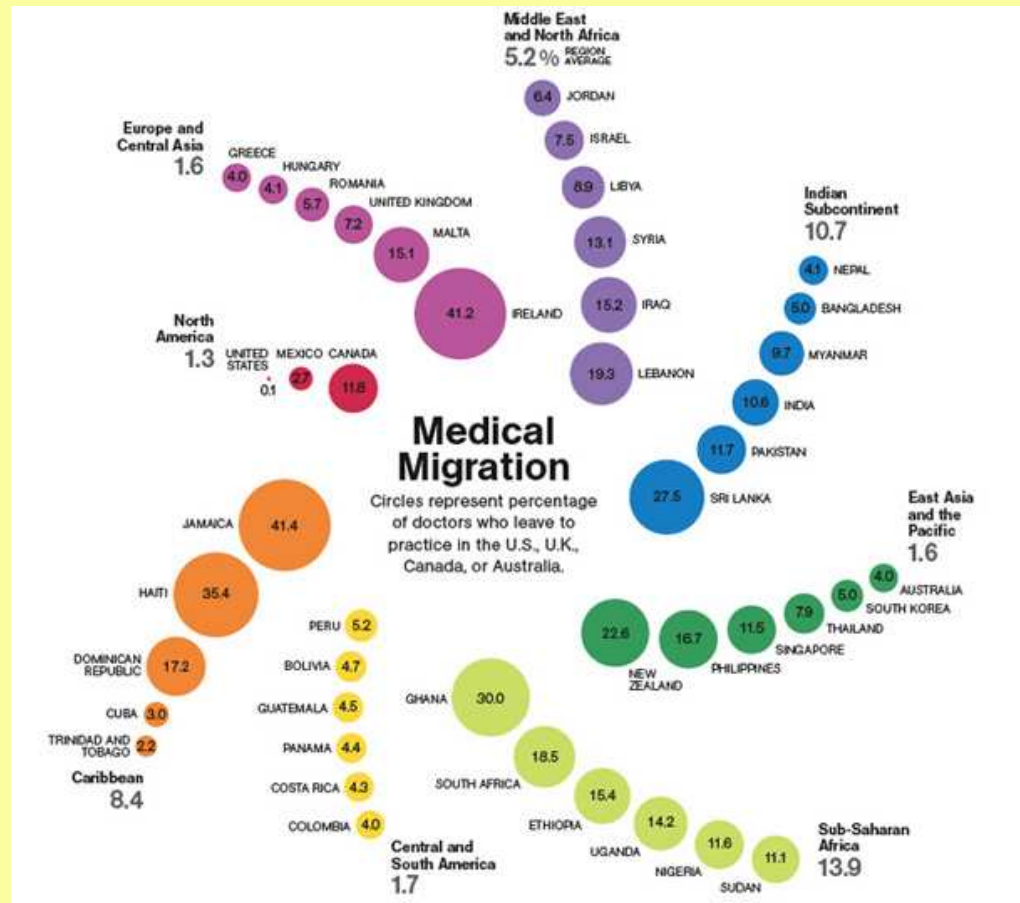
Would You Consider Yourself Overweight, Underweight or Neither?



Source: The Nielsen Company, Global Survey 52 Countries, Fielded October 2008



Migration of health professionals



Nurses



The Philippines exports
14.000 nurses every year.

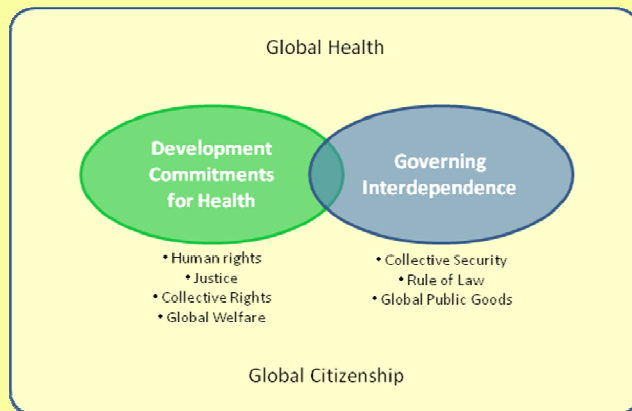
- Women constitute half of global migrants ILO
- They pay a significant part of global remittances
- SSA lacks 600 000 nurses
- One quarter of US nurses comes from abroad – need of + 1 mill. in the next ten years

The global is here

- Public health is a public good – benefiting all members of every society.
- A domestic focus of population health need not compete for attention with an international focus – we need to recognize the interface.
- In a global health system strengthening one strengthens the other Frenk et al 2010

Global health

- Global health and public health are indistinguishable
- Frenk 2010



Public health

- Public health is the science and the art of preventing disease, prolonging life and promoting physical health and efficacy through organized community efforts

.....

- Winslow 1920