

Global health issues

[Health & Medicine](#)



First, we will introduce you to the world situation with regard to health care. Then, we will explain the link between health issue, poverty and economic factors. Eventually, we will talk about the actions taken against these issues. Despite incredible improvements in health since 1950, there are still a big number of challenges as regards global health. One billion people lack access to health care systems. 36 million deaths each year are caused by noncommunicable diseases, such as cardiovascular disease, cancer or diabetes .

This is almost two-thirds of the estimated 56 million deaths each year worldwide. Over 7.5 million children under the age of 5 die from malnutrition and mostly preventable diseases, each year. In 2008, some 6.7 million people died of infectious diseases alone, far more than the number killed in the natural or man-made catastrophes that make headlines. AIDS/HIV has spread rapidly: 33.4 million people are living with HIV. Tuberculosis kills 1.7 million people each year, with 9.4 million new cases a year.

Malaria causes some 225 million acute illnesses and over 780,000 deaths, annually. 164,000 people, mostly children under 5, died from measles in 2008 even though effective immunization costs less than 1 US dollars and has been available for more than 40 years. These and other diseases kill more people each year than conflict alone. Health provision varies around the world. Almost all wealthy nations provide universal health care (the US is an exception). There isn't one answer to health care provision, but a number of systems and issues seem to be emerging.

The World Health Organization (WHO) is the premier organization looking at health issues around the world. When looking at the pattern of health care around the world, the WHO World Health Report 2008 found some common contradictions: 1- Inverse care People with the most means – whose needs for health care are often less – consume the most care, whereas those with the least means and greatest health problems consume the least. Public spending on health services most often benefits the rich more than the poor in high- and low-income countries alike. - Impoverishing care Over 100 million people annually fall into poverty because they have to pay for health care. 3- Unsafe care Poor system design that is unable to ensure safety and hygiene standards leads to high rates of hospital-acquired infections, along with medication errors and other avoidable adverse effects that are an underestimated cause of death and ill-health. Health care provision is incredibly complex and many nations around the world spend considerable resources trying to provide it.

Many other rights and issues are related to health, inequality being an important one, for example. Education, gender equality and various other issues are also closely related. Viewed from the spectrum of basic rights, the right to health seems core. Following The World Health Organization (WHO), an important underlying cause of all these deaths is poverty.

Noncommunicable diseases are caused by four behavioral risk factors: Tobacco use, unhealthy diet, insufficient physical activity and the harmful use of alcohol.

The greatest effects of these risk factors hit mainly the low and middle-income countries and the poorer people within all countries. That highlights <https://assignbuster.com/global-health-issues/>

the underlying socioeconomic determinants. Among these populations, a vicious cycle may ensue: poverty exposes people to behavioral risk factors for NCDs and, in turn, the resulting NCDs may become an important driver to the downward spiral that leads families towards poverty. However, health inequalities are to be found all around the world, not just in the poorest countries, but even in wealthy nations such as the UK.

Even within a country such as the UK, then, the report finds that the average life-span can differ by some 28 years, depending on whether you are in the poorer or wealthier strata of society. In rich countries, low socioeconomic position means poor education, unemployment and job insecurity, poor working conditions, and unsafe neighbourhoods, with their consequent impact on family life. Most health problems are due to social, political and economic factors. The key determinants of health of populations are the circumstances in which people are born, grow, live, work and age.

And those circumstances are affected by the social and economic environment. Health is inextricably linked to economic issues. Without work, health cannot be afforded. Without good health, work cannot be done. Furthermore, some diseases are now not only the result of poverty, but have been contributing to poverty. Malaria has significant direct and indirect costs, and has recently been shown to be a major constraint to economic development. Annual economic growth in countries with high malaria transmission has historically been lower than in countries without malaria.

The risk of contracting malaria in endemic areas can deter investment, both internal and external and affect individual and household decision making in

many ways that have a negative impact on economic productivity and growth. To begin to address these health issues, the British commission suggested 3 principles of action: 1. Improve the conditions of daily life—the circumstances in which people are born, grow, live, work, and age 2. Tackle the inequitable distribution of power, money, and resources 3.

Measure the problem, evaluate action, expand the knowledge base and especially raise public awareness about the social determinants of health The major problem relating to the health care in developing countries remains that multinational pharmaceutical companies neglect the diseases of the tropics, not because the science is impossible but because there is, in the cold economics of the drugs companies, no market. There is, of course, a market in the sense that there is a need: millions of people die from preventable or curable diseases every week.

But there is no market in the sense that medicines for leishmaniasis are needed by poor people in poor countries. Pharmaceutical companies judge that they would not get sufficient return on research investment. Following them, their obligation to shareholders demands that they put the effort into trying to find cures for the diseases of affluence and longevity—heart disease, cancer, Alzheimer's. Of the thousands of new compounds drug companies have brought to the market in recent years, fewer than 1% are for tropical diseases. Since around 2000, a number of global initiatives have been set up to deal with various global health crises.

Mega-rich individuals, such as Bill Gates, have also shown incredible charity by donating hundreds of millions of dollars to these initiatives. Private charity

is an act of privilege; it can never be a viable alternative to State obligations. Industry and private donations are short-term interventions and no substitute for the vastly larger task of bringing health care to more than a billion poor people. Several major pharmaceutical corporations are supporting international initiatives either by donating drugs or by subsidizing drugs provision, often receiving generous tax benefits in return.

There are longstanding initiatives in place for controlling malaria, tuberculosis, and river blindness. The main problem with these initiatives is that drugs are often made available in limited quantities, and at prices which compare unfavorably with those for generic-equivalent products. Animation 1) Video You tube + Debat : Matt McIntyre: global health issues. <http://www.youtube.com/watch?v=ckiykzMTPso> Questions: What is your first impression after watching the video? What about Bill Gates's arguments? And what about the 17 years old student? Do you think the global health issue is the most pressing problem we should work on today?

Or is there other more important issues? (Economy for example?) Do you think each country should try to reduce health inequalities inside its own borders? Or should solutions involved more than one country? Explain. During the presentation we have enumerated several solutions in order to reduce health inequalities. Do you think some are impossible to achieve? Can you suggest a solution that we didn't mention? What do you think about the end of health inequalities in the world? Is it possible to eradicate it or just to reduce it? Or maybe you think