

# [Free globalization and health essay example](https://assignbuster.com/free-globalization-and-health-essay-example/)

[Parts of the World](https://assignbuster.com/essay-subjects/parts-of-the-world/), [European Union](https://assignbuster.com/essay-subjects/parts-of-the-world/european-union/)

Globalization is a term that describes the integration of various global economies, markets, industries, cultures and policy-making worldwide. In globalization, regional and national economies, cultures and societies come together through intertwined global network of trade, transportation, communication and immigration. In the past, globalization was mainly concerned the world economies such as trade, international capital flows, and foreign direct investments. However, the term has expanded to include broader perspectives such as health, media, environmental factors and even socio-political factors. On the other hand, capitalism refers to a system of trade and production that has a basis on wealth and property being on the hands of few private individuals and ordinary people, instead of the state. These two systems have impacted on health and healing practices around the world in different ways.
Health has all along been regarded as a cross-border issue. Several attempts to protect the health of citizens within particular territories have a long history from the colonial-era practices such quarantines during epidemics. However, with the formation of the League of Nations and further the United Nations, it ceased being a national issue to a global concern. Globalization of health came up with strategies to eradicate specific diseases such as polio and smallpox (Kickbusch, Hartwig, & List, 2005). Key among such strategies includes public awareness campaigns and vaccination.
Medical practitioners have constantly linked the mobility of human beings from one part of the world to another to the global patterns of disease spread. Lee (1999) notes that each state has well-documented policies and practices aimed at controlling external health risks. Lee (1999) further highlights quarantine as the most prominent measure in place to control the spread of such diseases. For instance, due to the current Ebola outbreak, many countries around the world have put measures at their entry points to detect the disease. People having the disease are quarantined and given special medical care to avert possible spread. Lee (1999) advises that the globalization is an unstoppable force and policy makers should pay closer attention to global forces in health. It will ensure continuous delivery of quality health care and enhance disaster preparedness.
The major health problems in the world have penetrated the world due to globalization. Nowadays, major health epidemics such as HIV/AIDS, SARS (Severe Acute Respiratory Syndrome) find their way around the world rapidly and into remote geographical locations and cultures. The internal and external movements of population across borders have majorly contributed to the spread of such diseases (Skeldon, 2000; Gorrett, 2007). Similarly, the Western culture such as biomedicine is also finding its way around the world. Western biomedicine has permeated the world, in the same way, the English language, and the capitalistic market system has done. Additionally, many Westerners have started using other forms of non-biomedical and non-Western healing such as massage therapy and acupuncture.
Before the introduction of cosmopolitan medicine in Africa, traditional medicine emerged as a prominent medical system to Africans. Nevertheless, the arrival of colonialists from the West changed the perspective of the age-long traditional medication in Africa. People began embracing modern ways of healing. With time, education, the Western religion, colonialism and the globalization phenomenon negatively impacted on the views of the traditional forms of healing (Abdullahi, 2011). Conversely, the traditional medication did not end. Currently, traditional doctors who combine Western and non-Western medication have emerged all over the world.
Globalization and capitalism have also led to the emergence of alternative methods of healing. Globalization has contributed to the changing patterns in the distribution of diseases in developing countries. However, the combination of alternative methods and traditional healing methods has helped provide mitigation. Around the world, countries like China have incorporated traditional healing practices such as special diets, acupuncture, and meditative exercise. Similarly, cultures in India use the meditative exercises like yoga for healing purposes (Jamison & World Bank, 2006).
Also, globalization has contributed to the movement of other alternative healing methods such as shamanism. Shamanism is a combination of magic, spirituality, folklore and medicine. Shamanism is mostly used in Central Asia. However, with the movements of people across borders, the practice is now prevalent in many other parts of the globe like Canada and South America. Many medical experts around the world the healing process is closely tied to the body, mind, and soul. Since shamanistic healing process revolves around the connection between the body and spirit, it can provide total wellness. With more globalization, there are predictions that it will spread to the other parts of the world.
Healthcare globalization and the understanding of the differences and similarities between and among cultures and human groups have grown with time. Additionally, comparative understanding of cultures around the world has become increasingly important. Differences and uniqueness of cultures with regards to their wellness and health care patterns prove essential in identifying healing trends. Hence, there are higher chances of identifying new and profound changes in the health and healing processes (Leininger & McFarland, 2006).

## References

Abdullahi, A. A. (2011). Trends and Challenges of Traditional Medicine in Africa. African Journal of Traditional, Complementary and Alternative Medicines, 8(5), 115-123. Retrieved from http://www. ncbi. nlm. nih. gov/pmc/articles/PMC3252714/
Kickbusch, I., Hartwig, K. A., & List, J. M. (2005). Globalization, women, and health in the twenty-first century. New York: Palgrave Macmillan.
Garrett, L. (2007). The Challenge of Global Health. Foreign Affairs, 86(1), 14-38. Retrieved from http://www. foreignaffairs. com/articles/62268/laurie-garrett/the-challenge-of-global-health
Lee, K. (1999). THE GLOBAL CONTEXT - A Review of Priority Global Health Issues for the UK. Retrieved from http://www. nuffieldtrust. org. uk/sites/files/nuffield/publication/policy-futures-1-global-context-dec99. pdf
Leininger, M. M., & McFarland, M. R. (2006). Culture care diversity and universality: A worldwide nursing theory. Sudbury, MA: Jones and Bartlett.
Jamison, D. T., & World Bank. (2006). 69. In Disease control priorities in developing countries. New York ; Washington, DC: World Bank.
Johnson, A. (1997). Shamanism. Retrieved November 22, 2014, from http://www. vanderbilt. edu/AnS/psychology/health\_psychology/shamanism. htm
Skeldon, R (2000) Population mobility and HIV vulnerability in South East Asia: an assessment and analysis. Thailand: United Nations Development Programme