

Poverty, Development and Health

Challenges to the Public Health Movement

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&
8th Brazilian Congress on Collective Health**



Health is a determinant of Development – UNDP 2005
Development is a determinant of Health

**The deeper determinants of both need to be addressed
as a priority at global, national and local levels**

**Corporate led globalization,
Neo-liberal economic
reforms,
Negative macro-policies**

**Adversely affect the
social majority,
nationally & globally**

**Livelihoods,
Incomes,
Food security,
Increased conflict,
War and violence,
Access to water,
Access to health care,
Environmental degradation,**

INDIA: ? Shining Global example

- Overall employment growth in 1990s was 2/3rd to half of 1980
- For agricultural labourers, bulk of poor in India, rate of growth of real wages per annum almost halved in the 1990s, compared to 1980s.
- Worsening of working conditions of labourers in the informal sector and agriculture in past decade
- Open unemployment serious

- Jeyarajan and Swaminathan, 2003

JOBLESS GROWTH

These politico- economic determinants, backed by unprecedented wealth and concentration of power

Enhance existing social determinants and inequalities of

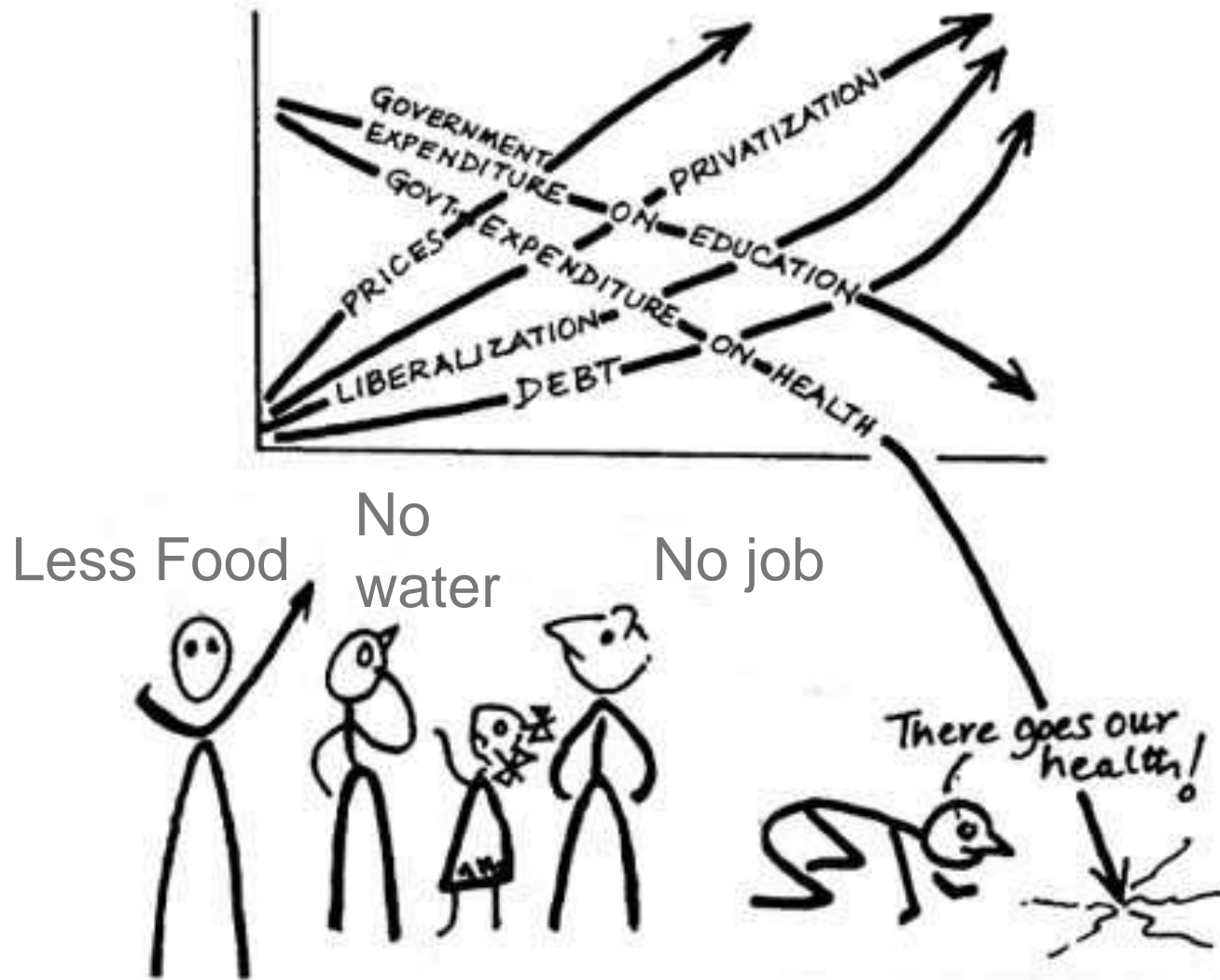
- Gender
- Race, Ethnicity
- Language
- Belief system
- Disabilities

People world wide are in a ferment

- **Change of elected governments.**
- **Protests, Campaigns, Coalitions.**
- **Evident on the streets, media and Newspapers**

Development: A Right to Health Perspective

What are the people saying?



Poverty, deprivation and quality of employment

- ▶ Informalization,
- ▶ Casualization of work,
- ▶ High prevalence of child and elderly labour,
- ▶ Work with low skills, low capital, low earnings,
- ▶ No social security,
- ▶ Adverse health effects, poor access to health care,
- ▶ Burden on women,

Persistent Inequalities

- Persistent intergenerational immobility across classes
- Takes five generations for a family 50 % below average income to reach the average without support

Global Inequalities

- ❖ High income countries represent 15 % of the world's population
- ❖ 40% of the world's population, ie 2.5 billion people living on less than \$2 a day, account for 5% of the global income

Health Effects

Every hour > 1,200 children die, equivalent to 3 tsunamis a month, every month, due to a single pathology – poverty

.....but, with a little response

Trade, Development and Health

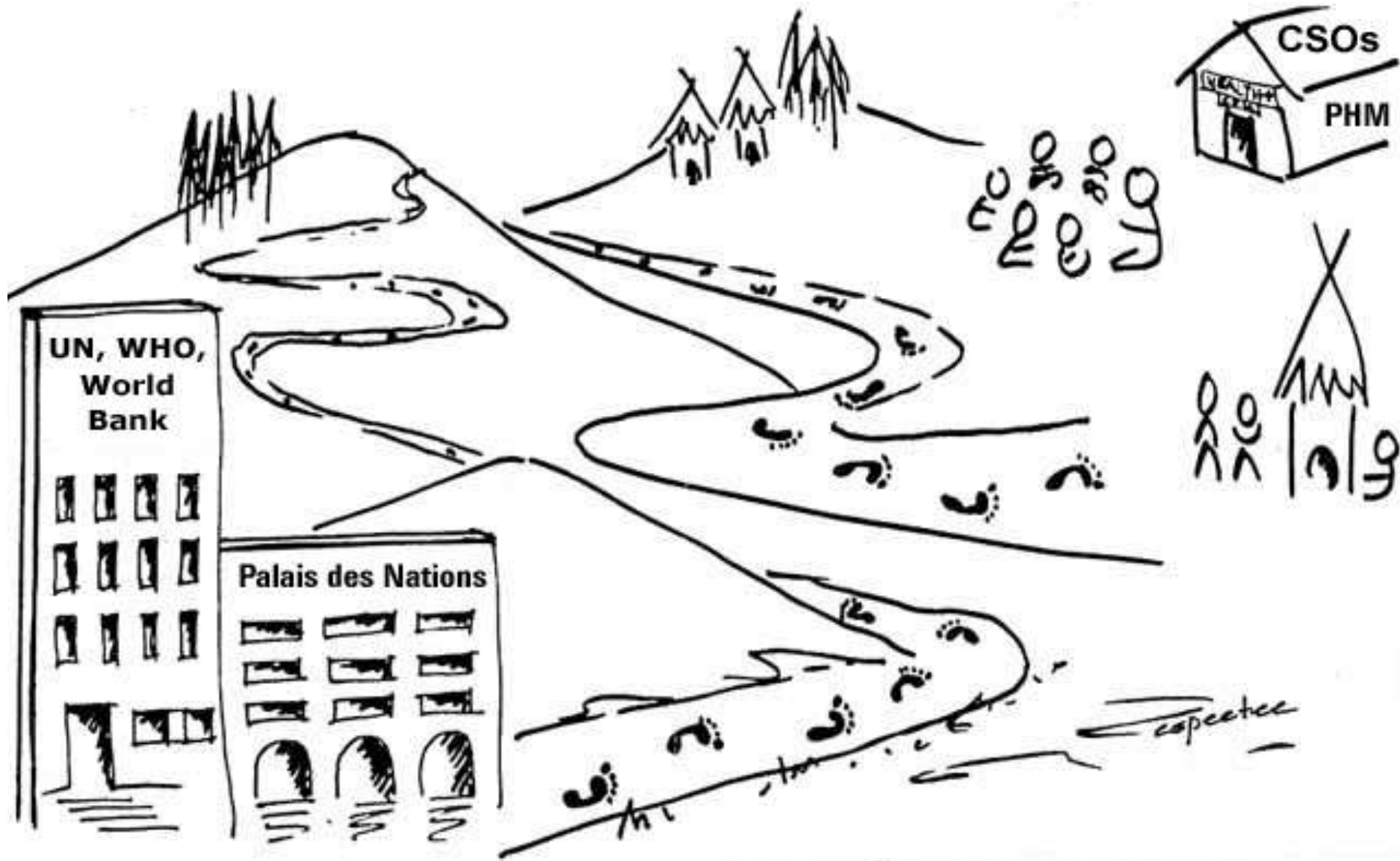
- **Over 2/3rd of the poor are small farmers / agricultural labourers**
- **Unfair trade undermines their livelihood**
- **Led by EU and USA developed country agricultural subsidies are over \$ 350 billion a year, ie, almost \$ 1 billion a day, supporting large farmers and corporate agri-business**
- **For a fraction of the cost universal education, health and water for all can be achieved.**

- UNDP, 2006

“Disparities hampering progress are systematic, reflecting hierarchies of advantage and disadvantage and public policy choice”

- *UNDP, 2005*

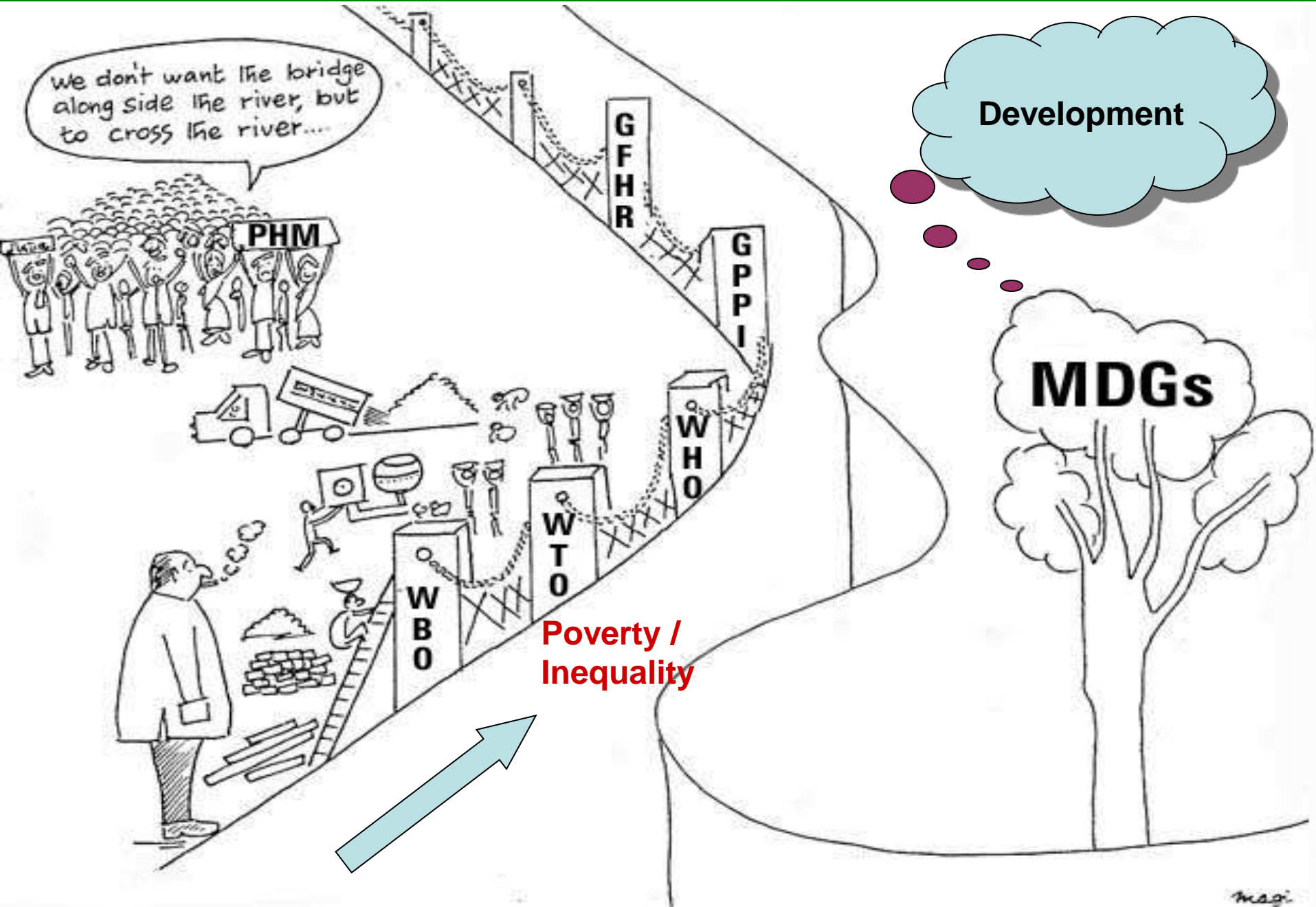
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**“Massive poverty and
obscene inequality are
social evils, like
slavery and apartheid”**

- Mandela, 2005

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Globalization from Below

The People's Health Movement

- A Globalization of solidary and informed action working on determinants of health;
- Bringing the Public back into Public Health, present in 90 countries;
- Multilevel functioning:
 - Community
 - Government
 - Global policy advocacy
- Coalition with broader movements



PEOPLE'S HEALTH MOVEMENT

www.phmovement.org

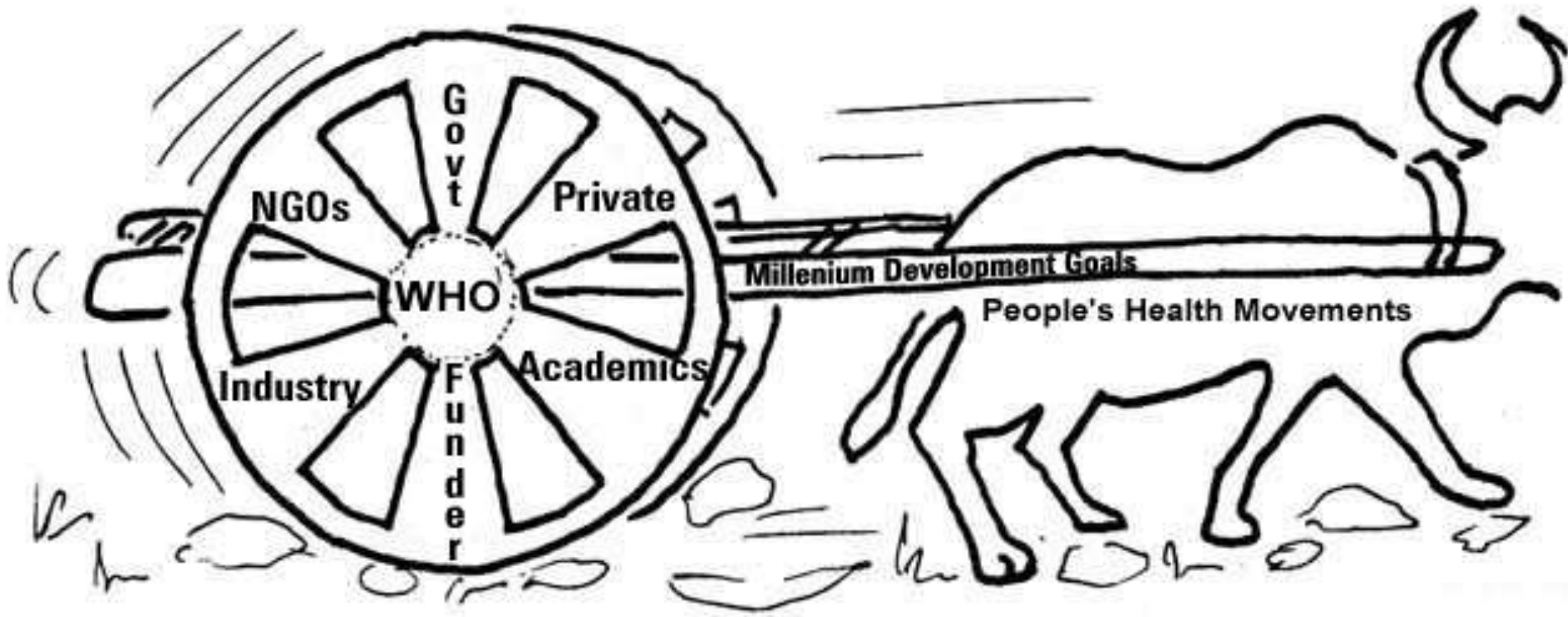
“Public Health – an art and science; and also a movement dedicated to the equitable improvement of health and well-being (of communities with their full participation).

First and foremost, public health leaders must be catalysts for the public health movement.....

The justification for action is that health is both an end in itself – a human right.....as well as a prerequisite for human development”

- WFPHA, 2004

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Thank You