



The Federation's Pages

WFPHA: World Federation of Public Health Associations

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Global health equity: Opportunities and threats

Interestingly enough, the term 'Equity' is mainly associated with the financial and banking world such as 'private equity' or 'home equity'. The meaning of equity in the sense of fairness is more used in the areas of law, employment, and health. The public health arena refers to fairness and justice both in health care and in access to health, a fundamental human right. More than other human rights, health is influenced by the man-made threats such as global insecurity (wars and conflicts), global warming, economic imbalance, and lack of governance. All of these are closely interconnected. For example, global warming constitutes a key cause of natural and man-made disasters, floods, water shortages, and desertification, in turn, contributing to wars, and demographic and economic divides, all of which too often result in poverty and hunger, therefore impeding the health of entire populations. Instead of health equity, we see today a broadening health inequity. This inequity is found everywhere in affluent and less affluent countries alike; the divide is found within countries and not (only) between countries. The public health effort has to be as broad as the problem, which means including political action, societal awareness, and local public health work. Moreover, public health has to take into account the global financial world that pursues other objectives than health, and has not (yet) integrated into its own agenda and insisted with others that an acceptable health status is a precondition for economic

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development (Commission on Macroeconomics and Health¹), which can reduce the risk of violent conflicts for scarce resources and risk of environmental damage. Among the several divides in our societies, political solutions have not been sufficient to tackle the consequences such as migration, accelerating urbanization, and insecurity. International health aid has quadrupled since 1990, but is imbalanced. One of the obvious reasons for imbalances is the extreme fragmentation, and therefore ineffectiveness of international aid.

In this context, more than 3000 delegates from approximately 120 countries assembled at the 13th World Congress on Public Health in Addis Ababa from 23 to 27 April 2012, and formulated a declaration on Global Health Equity: A Call to Action:

We recognise the ever-changing context within which we operate and the many acute challenges to the achievement of global health equity. In particular, we are cognisant of the global economic crisis and its impact on individuals, families, communities and countries. The WFPHA calls on all governments and stakeholders to safeguard and promote the essential values of public health. These include, but are not restricted to: good governance, solidarity, equity and fairness, empowerment and participation, and social justice to achieve the highest possible standards of health for all.

On behalf of its member associations, the WFPHA pledges to:

1. Promote and facilitate the linkage between the academic and public health association communities, in cooperation with World Health Organization (WHO), for innovative research and the generation of evidence to expand the knowledge base about the social determinants of health and health equity;
2. Advocate for the utilization of evidence as the basis for formulating healthy public policy and informing practice to reduce health inequity;
3. Make health equity an integral part of local, national, and global policy, and development agendas, and to ensure that structural issues such as food insecurity, rapid urbanization, migration, man-made environmental degradation, conflict and militarization, climate change, and economic crisis are taken into consideration;
4. Advocate for equitable access to high-quality health services;
5. Advocate for fair trade in all commodities that affect human health;
6. Advocate for and encourage linkages between public health actors and communities as a means of fully engaging people at the front line in our discussions and to be accountable to them in our actions;

7. Give a voice through its member associations to frontline health practitioners and community workers;
8. Strengthen partnerships with other international federations and organizations as a means of taking common action on global public health priorities;
9. Strengthen networking and collaboration among national and regional public health associations to facilitate the sharing of experience and the building of capacity to enhance both influence on policy and action on health equity; and,
10. Bring to the 14th World Congress on Public Health, to take place in Kolkata (India) in February 2015, a progress report on how the public health association movement has achieved these aforementioned actions and contribute to achieving Healthy people – Healthy Environments.

We, the WFPHA, call on the WHO to take up its leadership role on global public health and to revisit all the Millenium Development Goals (MDGs) from a public health perspective to ‘close the gap’.

We, the WFPHA, call on all governments and all parties to recognize and live up to their responsibility for global health equity. This includes working across sectors and disciplines, and in true partnership with communities to:

1. Promote and attain social justice and equity in health by acting through a ‘Social Determinants of Health’ approach;
2. Accelerate the attainment of national and international development goals by building and redistributing resources to strengthen international, national, and local capacity and leadership in public health;
3. Ensure that better context-specific, comprehensive, and equitable targets covering universal health coverage, and health for all are integrated into and made more visible within the MDGs as soon as possible;
4. Enhance and strengthen, both numerically and in capability, the public health workforce, in addition to developing new and effective strategies to retain qualified health professionals;
5. Combat fraud and corruption, as these are major determinants of health that affect all, but especially the poor and vulnerable;
6. Recognize physical and mental disabilities, and injury prevention as critical components of a public health approach to health equity; and,
7. Fulfill their financial pledges with respect to the MDGs and to, in addition, fulfill their pledges with respect to the Paris Declaration and to the political declarations on Non-Communicable Diseases and the Social Determinants of Health.



We, the WFPHA, call on the various communities represented at this 13th World Congress on Public Health to engage with their governments and other stakeholders, including their national public health associations, to formulate and put into place the conditions that support healthy environments and healthy communities, and the attainment of health equity.

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Reference

1. Sachs, J. (2001) *Report of the Commission on Macroeconomics and Health: Investing in Health for Economic Development*. Geneva, Switzerland: World Health Organization, <http://whqlibdoc.who.int/publications/2001/924154550X.pdf>, accessed 30 March 2010.