Editorial

‘The market does not solve social problems. Public health does.’

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These words come from WHO Director General Margaret Chan’s address to the 12th World Congress on Public Health, Istanbul, Turkey, 27 April 2009.¹ She is the first head of the World Health Organization to speak out so clearly, finally echoing the prescient views of James Grant of UNICEF in the early 1990s. Her words are strong and clear. They come at a time when many more may be able to appreciate their importance.

It is almost 20 years since the World Bank began prescribing markets to improve health – structural readjustment to create liberal economies and cure poverty and bring health to all. Rich countries and charitable foundations founded by industrialist billionaires followed the marching orders with development assistance and philanthropy. There was lip service to democracy, but no major redistribution of wealth or power was contemplated.

Chan says of health, ‘we have made some impressive progress, but new challenges keep arising’.

‘Last year, our imperfect world delivered, in short order, a fuel crisis, a food crisis, and a financial crisis. It also delivered compelling evidence that the impact of climate change has been seriously underestimated’.

‘All of these events have global causes and global consequences, with serious implications for health. They are not random events’.

‘Instead, they are the result of massive failures in the international systems that govern the way nations and their populations interact. In short: they are the result of bad policies’.

‘Under the unique conditions of the twenty-first century, the consequences of faulty policies are highly contagious. This contagion shows no mercy and makes no exceptions on the basis of fair play’.

She directs her criticism at development policy in particular: ‘Too many models of development have assumed that living conditions and health status would somehow automatically improve as

countries modernized, liberalized their trade, and improved their economies’.

‘The single-minded pursuit of economic growth, compounded by behaviors motivated by greed, has had negative consequences well beyond the financial and economic sectors’.

‘Policy-makers have either failed to anticipate these consequences or assumed that problems would be solved by market forces. This did not happen’.

‘Let me be perfectly clear. I am not against free trade. I am not in favor of protectionism. I am fully aware of the close links between greater economic prosperity, at household and national levels, and better health’.

‘But I do need to say this. The market does not solve social problems. Public health does’.

Chan speaks favorably about the Millennium Declaration and its goals, the Global Fund, and the Global Alliance for Vaccines and Immunizations. In this journal, too, authors almost routinely comment favorably on these programs and their policies. But what is the real scale? How big are these problems that compromise the health of the world’s people? Perhaps the world economic crisis will help us put things in proportion.

To describe the economic crisis, commentators routinely use a new word, *trillions*, to describe the decline in economic growth or even shrinkage of economies. Yet, development assistance is still denominated in mostly *millions* and occasionally *billions*. What units will be needed to describe the needed redistribution of wealth at a scale commensurate with the challenge? Surely, trillions, as the report of the Commission on Social Determinants of Health began to suggest.^{2,3}

Director General Chan might, in the great tradition of public health, take the next step and be clear about the scale of the problem and the resources needed to overcome it. Let us know just how big a redistribution of wealth will be needed. Then, perhaps we can judge the merits of the programs and policies put forward to achieve that redistribution.

References

1. The full text is available at http://www.who.int/dg/speeches/2009/steadfast_midst_perils_20090428/en/index.html.

2. Report of the Commission on the Social Determinants of Health is available at http://www.who.int/social_determinants/thecommission/finalreport/en/index.html.
3. Mutaner, C. *et al* (2009) Income inequality social cohesion and class relations: A critique of Wilkinson's neo-Durkheimian research program. *Journal of Public Health Policy* 30: 163–175.

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