

HEALTH AND THE MILLENNIUM GOALS

At the start of the new century world leaders and representatives of 189 countries gathered in a summit meeting at the UN. Their purpose, springing from a global consciousness, was to make commitments to help promote the well being of the entire world. They decided on eight goals, to be reached by 2015, planning them to be achievable, affordable, and measurable. From an ethical perspective, it was a dramatic event and a revolutionary commitment to reduce extreme poverty, increase primary education, reduce child mortality and disease, and promote maternal health. They also committed themselves to providing the basic minimum for civilized living, sanitation and clean water. These goals can be monitored, have mobilized actions by governments, who can be accountable and held to their word. Three of the goals focused on health, specifically on the health of the world's poorest people.

Statistics from the Industrial Revolution in Europe and the United States provide valuable information on the importance of public health measures. Data from England, Wales and Sweden tell us that in 1700 the average male lived just 27 to 30 years. Yet by 1971 male life expectancy had reached 75 years, More than half of that achievement had occurred before 1900. Most of the decline in death from infectious diseases occurred prior to the age of antibiotics. The great improvement came earlier from public health measures providing sanitation and clean water.

In rich countries people have the illnesses of advanced societies, cardiovascular disease and cancer, where medical intervention is very important. In poor countries people die mostly from infectious and respiratory diseases. Modern medical care is obviously important and much needed, but especially in poor countries, it must be combined with public health measures.

Popular wisdom has always held that the health of a population automatically improves as a result of economic growth. Is prosperity the creator of health? Or does health promote prosperity? Research has shown that economic development, most particularly in poor countries, depends very much on the general health of the population. Health can be the horse that pulls the cart--not as has been previously supposed, only a consequence, but also a cause. Thinking in concrete terms it becomes more obvious-- the prevalence of disease and disability, early death

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damages family life, hurts community life, and inevitably makes a country less productive and poorer.

The link between health status and social well being was recognized by the German leader, Otto von Bismarck in 1883 when he enacted the first national health insurance program. Recently there has been a welcome and unprecedented increase in financial support for health care in developing countries. Between 1997 and 2002, the amounts donated ranged from 6 to 8 billion from the Gates Foundation and the Global Fund for Malaria, TB and HIV/AIDS.

The vast majority of the funds has been allocated to specific disease projects, not the less glamorous improvements needed for population health. Little or no funding is designated for preventive measures, primary care services, the all important training of local community workers to perform some of the simple tasks which have been shown to have enormous success. Malaria is a great killer of African children. Yet this disease is preventable and entirely treatable if treatment is given early. Highly effective medicines, notably the Chinese herbal extract of artemisinin, can cure the disease if given within the first few hours of fever. It is effective, cheap and can be given by anyone.

Rushing children to a hospital far away, often over difficult or barely existing roads is a recipe for more disease, not cure. Research coordinated by WHO has demonstrated that pneumonia, the number one killer of young children, can be treated in homes as well as in hospitals, perhaps even more safely, as in the hospitals they can be exposed to other infections.

Another example of an extremely cheap and simple method to reduce the horrifying childhood death rates for diarrhea is oral rehydration therapy-- clean water with a mix of sodium and glucose-- a treatment that any mother can be taught to give. Many lifesaving interventions of simple, safe, inexpensive and highly effective treatments are not available. 10 million young children and pregnant women continue to die for lack of access to these simple treatments. More than 1 billion people suffer from disabilities caused by neglected tropical diseases which have simple low cost solutions. These are extremely disturbing facts. In the words of Aldous Huxley, "facts do not cease to exist because they are ignored."

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The World Health Organization is promoting the revitalization of primary health care in communities. A separate campaign to strengthen primary health care around the world is named "15 by 2015." They are requesting donor organizations to allocate 15% of their disease-specific funding towards sustainable comprehensive primary health care, accessible and affordable to everyone. (www.15by2015.org). Because of escalating costs everywhere and a tremendous shortage of trained health workers, the importance of prevention and primary health care continues to grow.

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