GLOBAL HEALTH AND EQUITY

CNA POSITION

Health is a global issue and global health – the optimal well-being of all humans from the individual and collective perspective – is a fundamental human right. The Canadian Nurses Association (CNA) endorses a primary health-care approach whereby essential health care, aimed at preventing illness and promoting health, is universally accessible to people by means people find acceptable and at a cost communities and countries can afford. CNA believes that the principles of accessibility, public participation, health promotion and intersectoral cooperation, together with the use of appropriate technology, are fundamental to improving health, ensuring respect of diversity, and integrating global thinking in matters of health and equity. Although more research is needed on the links between global health and equity and between globalization and nursing, it is not sufficient to simply generate knowledge. Integrating cost-effective, high-quality findings into nursing and health-system practices is essential if global health and equity are to be achieved. Therefore, nursing research needs to help us better understand the role of nursing in population health, health care and health-care systems.

Many different groups and individuals share responsibility for achieving global health and equity. Governments have an obligation to promote the best interests of the public. CNA encourages governments to measure and monitor access to health care and health outcomes among population groups, engage society in improving outcomes and access, and take action to reduce inequities domestically, regionally and globally. The Canadian government can be a strong advocate for global health and equity by initiating and funding research, influencing international policy, working to improve the factors that determine health in communities and countries at risk, assisting development, sharing best practices in health care and creating alliances for peace-building. All global initiatives, from trade treaties to educational projects, should take into consideration the potential impact on the determinants of human health, including access to health care. There is an urgent need for global health research to provide evidence to guide policy-makers, researchers and health professionals who are committed to advancing global health and equity.

Non-governmental and voluntary organizations have the right and responsibility to advocate for global health and equity by supporting improvements in education, housing, employment, social stability and the other factors that influence the health of a society. These organizations can also use their networks and resources to contribute to the advancement of health research and policy development.

National, provincial/territorial and international nursing organizations have the right and responsibility to support national nursing organizations working in vulnerable nations and contexts as they respond to local, regional and international health issues. When individual professionals, nursing organizations and nursing networks are reinforced in this way, they are empowered to speak out vibrantly on issues concerning the regulation and education of nurses. The organizations then gain strength and credibility and can benefit from valuable and durable partnerships with international partners; most importantly, such capacity-building leads to better nursing and more equitable health care for vulnerable populations.

Canadian health professionals, including registered nurses, have the right and responsibility to be cognizant and raise awareness of the root causes of inequity in global health and to participate in finding solutions. It is only through collaboration, cooperation and communication among all health professionals that we will be able to advance an

agenda that improves global health and equity. Registered nurses have a responsibility to advocate for the elimination of social inequities;[1] as a result of their position as the largest group of health professionals in Canada and the respect they are accorded by the public, they are well placed to lead the call for a reduction in health inequities both at home and abroad. Every day, registered nurses see the link between people's social condition and their health; nurses' insights concerning the social determinants of health give them an important voice to advocate for policies that would positively affect these determinants, including environmental health, and that would improve health equity. Nurse educators can play a pivotal role by encouraging students to use social and political science theories to analyze global health and equity issues. Nurse researchers can participate in the identification and investigation of research problems that relate to global health and equity.

Communities have the right to participate fully in defining their health-care needs and deciding on approaches to address those needs. Public participation can help planners to ensure that health-care services are effective from the community's perspective.

Individuals should inform themselves about their rights as citizens of a particular state and their human rights more broadly. As global citizens, individuals should inform themselves not only about issues that will affect their well-being and the well-being of their own community but also about issues that will affect the well-being of communities around the world. It is no longer possible for anyone to ignore what transpires on the other side of our planet. With globalization of the world's economies and the advent of the Internet, awareness of what we all have in common as humans has grown, concern for others has increased and the world has become a much smaller place. Citizens of the world have the right and responsibility to remain aware of what affects others, act upon inequities to the best of their ability, and speak on behalf of those who have no voice and no resources.[2]

BACKGROUND

Health is a global issue and global health – the optimal well-being of all humans from the individual and collective perspective – is a fundamental human right that should be accessible to all. The way to achieve health for all citizens of the world is to ensure that they have access to adequate income, food, education and shelter; that the ecosystem in which they live is stable; that their community uses its resources in a sustainable way; and that peace, social justice and equity are experienced by everyone in their society. In other words, the basic prerequisites for health outlined in the World Health Organization's *Ottawa Charter for Health Promotion, 1986* [3] must be met.

If an individual is in good health there are benefits for the health of those around him or her and thereby there are benefits for the health of the individual's broader society.[4] The World Health Organization considers health to be a fundamental human right, and therefore the attainment of global health is "a socially desirable objective – actually a primary objective – on which to focus…."[5] In recent years, international organizations have focused their attention and efforts on the plight of the world's poor: in 2000, the United Nations adopted the Millennium Declaration, which put forth a set of targets that have become known as the Millennium Development Goals. These eight goals include

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[1] (Canadian Nurses Association [CNA], 2008)

[2] (Byers, 2005; United Nations, 1948; Ibid)

[3] (World Health Organization [WHO], 1986; CNA, 2006)

[4] (Jan, 1997)

[5] (Berlinguer, 1999)

targets to reduce poverty, hunger and disease affecting billions of people by the year 2015.[6] As well, the World Health Organization's Commission on Social Determinants of Health released its final report in 2008. The commission's overarching recommendations, which are in line with several of the Millennium Development Goals, are as follows: "to improve daily living conditions," to "tackle the inequitable distribution of power, money and resources," and "to measure and understand the problem [health inequity] and assess the impact of action."[7]

Although equity is often equated with fairness, it is integrally connected to values and thus has no single definition that transcends social context.[8] Health equity and social justice go hand in hand and must be conceptualized at a broad social level to ensure that solutions to inequities extend to broad social policies.[9] Equity is different from equality in the sense that the former encompasses the just treatment of individuals in their social context.[10] In societies where broader inequalities exist, unequal distribution of resources may be required in order to achieve health equity.[11] According to the Regional Network on Equity in Health in Southern Africa, "there is general agreement that inequity in health status refers to differences in health status that are unnecessary, avoidable and unfair."[12] The concepts of equity and equality are complex but they become easier to understand when they are applied to primary health care. The World Health Organization's Commission on Social Determinants of Health defines primary health care as essential health care, accessible to everyone in a given community, by a means acceptable to them and with their full participation, at a cost the community and country can afford.[13]

Globalization is a process resulting from a combination of forces that is increasing the flow of information, goods, capital and people across political and geographic boundaries. Globalization is generally considered in economic terms, but it is having broader effects: the world's communities are being amalgamated into a single community through the dissolution of local identity and cultural distinctiveness, on the one hand, and the potential for sharing of knowledge and resources on the other. The impact of globalization on health and social structures is a contentious issue. There is consensus that globalization has changed the dynamics of world health; the increase in international trade in goods and services is having both positive and negative effects on health and health care.[14] For example, the flow of goods, people and information across borders can negatively affect determinants of health such as access to employment, shelter, education and social support, and can increase health risks, but the sharing of knowledge and resources through enhanced technology can have tremendous benefits.[15] Economic exploitation may reinforce and exacerbate health inequity, representing "the dark side of progress."[16] Simply put, equity is the just treatment of individuals within their own social context.[17] "Inequity [in the conditions of daily living] is systematic, produced by social norms, … policies and practices that tolerate or actually promote unfair distribution of and access to power, wealth and other necessary social resources."[18]

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[6] (United Nations, 2005)

[7] (WHO, 2008a)

[8] (Jan, 1997; CNA, 2006)

[9] (Peter & Evans, 2001)

[10] (CNA, 2006)

[11] (Jan, 1997)

[12] (EQUINET, 2000)

[13] (WHO, 2008a)

[14] (Axford, 2000; Collier & Dollar, 2002; Gersham & Irwin, 2000)

[15] (Chen & Berlinguer, 2001)

[16] (Benatar, 1998)

[17] (CNA, 2006)

[18] (WHO, 2008a)

Environmental health has become an increasingly important issue in recent years as more and more evidence links climate change to growing health inequity. "Our core concerns with health equity must be part of the global community balancing the needs of the social and economic development of the whole global population, health equity and the urgency of dealing with climate change."[19]

In recent years, interest in global health has increased and the search for equity in health care has gained momentum worldwide. Laurie Garrett has been critical of the uncoordinated international efforts to address health challenges and the detrimental impact of this international assistance on recipient countries.[20] Many organizations have commissioned studies on global health and many non-governmental, private and philanthropic organizations have poured large amounts of cash into developing countries to help their chosen causes, with mixed results. According to Paul Farmer, the way ahead is to "focus on how the new enthusiasm about global health can be translated into efforts to close the widening 'outcome gap' between rich and poor."[21]

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[19] (Ibid)

[20] (Garrett, 2007)

[21] (Farmer, 2007)

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