HOW TO SEE THE FUTURE: FORECASTING AND GLOBAL POLICY | FALL 2021





How to See the Future: Forecasting and Global Public Health

Ridhwaan Suliman, Senior Researcher, Information and Cyber Security Centre, Council for Scientific and Industrial Research (CSIR), South Africa

Introduction

Global health is a function of the health of individual countries, while a country's wellbeing is dependent on the wellbeing of its communities. The single most important trend in global public health that policymakers are not paying enough attention to is inequality.

Global health inequality is defined as a systematic difference in the health status of different groups of people and in the distribution of health resources between these various groups.

These health inequalities are the avoidable and unjust differences in people's health across the population and between specific population groups. These differences are due to an unfair and unjust system that negatively affects people's health, their living conditions, and their access to quality healthcare.

Structural inequities run deep in society, encompassing governance, law, and culture. Wide disparities among social groups contribute to a many global health inequalities that have significant economic, social, and opportunity costs on a personal as well as on a global level.

Increasing evidence indicates that many health outcomes, from life expectancy to obesity and infant mortality, can be linked to the level of economic inequality within a given population. The greater the economic inequality the worse the health status. This means that certain groups or communities

within a population experience increased difficulty in accessing healthcare and worse health in general.

The health of the individual goes beyond genetic makeup and access to clinical healthcare services. Factors such as education level, ethnicity, employment status, gender, and income level all play a significant role in how healthy a person is. There is a direct correlation between the socio-economic position and the health of an individual. The lower the socio economic position, the higher the risk of poor health.

The goal is health equity, whereby everyone is given the opportunity to achieve their optimal health potential, regardless of the social conditions in which people are born into and grow up with and the systems that govern their lives.

Health Inequality is a Global Issue

Despite an increase in global healthcare access and quality, inequalities between the best and worst-performing countries have grown over the years. This is the most important trend that policymakers must pay more attention to.

Health inequality occurs on a local, national, and global scale and affects all countries. This imbalance is not an occurrence reserved between countries, but exists within countries and cities too.

Why is Health Inequality Bad: The Effects

Health inequalities go against the principles of social justice because they are avoidable, with significant financial and social ramifications.

The existence of health inequalities means that the right to attain optimal physical and mental health is not distributed equally across the population.

Inequality in health has a significant financial cost to society, by and large, due to higher welfare payments, higher health care costs, losses in productivity, neglected educational initiatives, and reduced tax revenue. This leads to a deceleration in economic development.

There is a tremendous human cost too. These high costs force millions of people into poverty annually, draining household resources and limiting development.

With an equitable health system in place, individuals and families can spend their time and efforts on community building and addressing other areas of concern instead of struggling with health issues. Prosperous and functioning communities add to the wellbeing of a nation and a global community.

Causes of Health Inequality

The main causes of inequalities in health can be determined by a closer examination of the social, political, environmental, and economic circumstances that form the structures within a community.

These causes of systematic conflict can be narrowed down to an unbalanced and unequal dispersal of resources, wealth, power, and income that result in the marginalization of groups within society, as well as poverty, discrimination, and the added strain of accessing health services of those in need.

The environment in which people live shapes their individual experiences across the population, leading to further health inequalities. These fundamental causes also influence the availability of education, employment, and housing.

Economic Factors

Poverty and ill-health are intertwined. Poverty is a key factor in health inequality as a direct result of negative health effects due to socio-economic status, environmental, and living conditions. This increases in premature mortality, chronic disease, communicable disease, and healthrisk behaviors.

Barriers to healthcare access

Systemic ideologies form the basis of a lack of quality healthcare. This lack of access is a result of discrimination and structural racism as resources are channeled to affluent areas, leaving others to struggle to even meet basic needs. These discriminations and biases can often also lead to delays in diagnosis and treatment.

A lack of healthcare access is also common in densely populated areas due to a larger number of patients than healthcare providers can serve as well as facilities to accommodate these patients with chronic illnesses.

Environmental factors

Environmental factors, such as the work environment, access to water, healthy and affordable nutrition, and health care facilities, influence health, with an undersupply leading to disparities.

Behavioral factors

The behavior of the individual, as well as

the community, is an important factor in health disparities.

Examples of Global Health Inequities

The WHO has recognized many censorious global health inequities. These include:

Early childhood mortality

Children from rural and poorer households are disproportionately affected and are almost twice as likely to die before reaching the age of five when compared to children of the richest households. Every single day, over 16,000 children die from malaria, pneumonia, diarrhea, and other diseases that are easily preventable with the correct treatment.

Maternal mortality

Another key indicator of health inequality is seen in the death rates of pregnant women. Almost 99% of worldwide maternal deaths each year occur in developing countries.

Premature death or disability from non-communicable diseases

A distressing 87% of premature deaths from non-communicable diseases occur in low- and middle-income countries. Similarly, almost 95% of tuberculosis deaths take place in the developing world, affecting young adults who find themselves in poor economic conditions. Social determinants of health

Additional disparities include a lack of access to clean drinking water, and fresh fruit and vegetables. Other risk factors include high exposure to pollutants, violence, and limited space for exercise.

Lower life expectancy

The effects of global health polarities result in the variability of wellbeing, morbidity, mortality, and life expectancy.

Life expectancy varies a significant deal, by as much as 34 years, between countries. For example, the average life expectancy in high-income countries is 81 years compared to 62 years in low-income countries.

How to Reduce Global Health Inequality

It is imperative to address the systematic root causes of health inequalities. The cornerstone of addressing these issues is through education, research, training, and the correct implementation of governmental policies. Healthcare policy, healthcare management, and public safety support all play a vital role.

System-level changes are needed to reduce poverty, increase education, decrease structural racism, and reduce systemic inequalities.

Leveling the playing field requires funding, the implementation of new laws, and changes in government policy. Health policy emphasizes educating those who create and execute public health policy. These policies to solve public health problems are done through the implementation of health education programs.

Health inequalities within a community need to be assessed to come up with a multidisciplinary approach to reducing these deficiencies.

Public resources and the provision of universal services should be allocated according to need so that medical care in the world's poorest areas is improved. Healthcare management professionals need to ensure that the administration and delivery of these healthcare services are done efficiently and equitably .

Studying patterns of disease and responding to shifting priorities is essential to identify possible health issues and developing strategies to combat the inequalities that cause them.

The advances in technology and mobile computing power can address global health challenges. Artificial Intelligence (AI)-driven health interventions could lead to improved health outcomes, particularly in low- and middle-income countries. These interventions could be used in patient diagnosis, risk assessment, prediction in disease outbreaks, and health planning policy.

Conclusion

Policymakers need to look beyond their boundaries, understanding that global public health cannot be achieved without equitable healthcare across all regions. Policy must be clear, quantitative, and inclusive. The difficulties of communicating with and advising policymakers must be overcome, and the use of quantitative data points and forecasting to inform decisionmaking is a necessity. The current pandemic has exaggerated the widening gap between rich and poorer countries and their abilities to manage a global health crisis. Whilst richer countries are looking to return to normalcy, poorer countries are left far behind. Ultimately though, the pandemic has shown us that we will not get this health crisis under control and achieve global health until all countries can achieve that.

Disclaimer: This article was drafted for the 2021 Global Order Colloquium at Perry World House, the University of Pennsylvania's global affairs hub. The workshop was made possible in part by the generous support of Carnegie Corporation of New York. The statements made and views expressed are solely the responsibility of the author.