

Working Document

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REGIONAL AND GLOBAL PUBLIC HEALTH GOODS IN THE 21ST CENTURY AND THEIR RELATION TO PAHO MANDATE

Introduction

1. The Region of the Americas is experiencing a process of globalization and internationalization of production and consumption, which is generalizing common values and customs in the Region. **Among the multiple dimensions that process of globalization has, the present document facilitates the discussion on Regional Public Health Goods.** This concept has instrumental value in guiding the cooperation of the Pan American Health Organization in order to achieve its Mission: "To lead strategic collaborative efforts among Member States and other partners to promote equity in health, to combat disease, and to improve the quality of, and lengthen, the lives of the peoples of the Americas".
2. **The process of globalization, accelerated during the last decades, is producing positive and negative impact on population health. Globalization is modifying the nature of health needs, as well as the type of interventions required to fulfill them.** In addition to local problems, communities in general and health systems¹ in particular, should now confront increasingly the international transfer of health risks.

Background

3. The Economic Theory proposes the concept of **Public Goods**, which are defined as **goods or services benefits that nobody should be excluded from**, since they are highly necessary for all. At the same time, their universal access is guaranteed by the cost of their distribution.
4. **Within the framework of the opportunities and positive effects that globalization can give, it is possible to identify Global Public Health Goods, whose profits go beyond national borders.** They are public goods whose benefits should be available for all the population groups, regardless of

¹ Control of international transfer of risk and of frequently joint damages, exceeds national governments capacity to protect their populations. The Institute of Medicine of the United States reports that "differences among domestic and international health problems are losing usefulness and frequently generate confusion". Institute of Medicine. America's vital interest in global health: protecting our people, enhancing our economy and advancing our interests. Washington: National Academy Press, 1997.

their social, economic, ethnic, cultural or gender condition, and over several generations.

5. **Within that same framework, the most propitious conditions to generate and distribute Public Health Goods are obtained at regional and subregional scale.** In this way, processes of general integration and of integration in health are being consolidated throughout the Region: Caribbean, Andean Region, and South Cone². The production of Regional Public Health Goods gets greater importance when it is thought from the regional and subregional perspective. Such production implies a responsibility that transcends the exclusive responsibility of the States.
6. **The joint identification of Regional Public Health Goods creates a space where it can be possible a greater benefit for all,** greater effectiveness, and economies of scale through the design and implementation of joint interventions (production, dissemination, exchange of those goods) between several countries, organizations of civil society and international cooperation agencies.
7. **Thus, globalization can be taken as an opportunity for the achievement of greater equity in the sanitary field.** However, it should be taken into account that globalization also involves new risks in health and that this phenomenon can imply an increase of inequalities between nations that are integrated competitively in the market and those that remain in the shade of it.
8. **Current debate on the impact on health of globalization generates the need for finding practical responses on how to arrange the provision of Regional Public Health Goods.** Formulation and implementation of policies in relation with the provision and management of public goods implies a process in which public, private, national, governmental, nongovernmental and transnational actors participate.

Role of PAHO/WHO in the management of Regional Public Health Goods

9. A first step in the analysis of PAHO's role in the management of Regional Public Health Goods would be the **identification and joint characterization (Member States–Secretariat) of which are the most required Regional Public Health Goods in the Region, and a diagnosis of trends, current situation of those goods production and provision, and their possible contribution to the achievement of the Millennium Development Goals (MDG).**
10. **Some of these Regional Public Health Goods to be initially considered are:**

² In the Region of the Americas, about thirty agreements on economic and politic integration, bilateral and multilateral, can be found with varied levels of development.

- 10.1. Research on public health, about investment in health in the Region, and its relationship to the social, economic and human development. Establish the degree of contribution of this research to the development of health policies.
- 10.2. Development of health information systems; facilitate access and the exchange of health databases.
- 10.3. Build consensus for health based on equity and solidarity principles, establishing health as a fundamental civil right. Facilitate health plans and programs development.
- 10.4. Identify "best practices" in health and intensify cooperation among countries.
- 10.5. Negotiation and management of international agreements on health.
- 10.6. Joint negotiation for procurement of drugs and other strategic goods and technologies for health.
- 10.7. Harmonization of norms and standards in health.
- 10.8. Contribution from health sector to the achievement of peace and regional stability.
11. It is necessary **to increase regional studies on economic evaluation** (update estimates - monitoring) of social cost, as well as the cost of regional and subregional intervention of diseases like HIV/AIDS, malaria, dengue, Chagas, tuberculosis, etc. (It is necessary to estimate regional gaps, country per country, as well as the costs to control this type of diseases). Calculate the proportion of missing GDP per year due to public health problem selected. Estimate knowledge requirements, health services (technologies, human resources, financing), international support.
12. It is needed **to characterize the strategies utilized until now for disease prevention and control** (characterize and disseminate the best practices and also develop a mechanism of external evaluation of national responses in a more extended form), to **intensify the regional exchange of information and experts, planning of joint activities with the countries**. To this end it is necessary to better scale the selected public health problem in each country.
13. **"Priority countries" could be defined by types of regional public health problem**, as 5 priority countries were selected by their state of health and of their economic development. Ex: priority countries in malaria, tuberculosis, Chagas, etc, could interact more closely among themselves with the support of PAHO (joint review of the current situation, strategies utilized, new interventions).
14. PAHO could negotiate, jointly with Member States, **the purchase and/or generation of health information and databases**, and guarantee a more equitable access to all the Member States.

15. **The capacities of Ministries of Health technical teams should be strengthened in order to negotiate international health agreements**, to identify the need to optimize available resources in the country and when additional resources are required to guarantee timely and adequate supply of Regional Public Health Goods.
16. **The contribution of health sector should be strengthened for generating peace and regional safety**: intensify regional exchange concerning intersectorial interventions for prevention of violence (with emphasis on modification of the principal health determinants: nutrition, education, housing, employment, environment), models of mental health care (mental primary health care).
