



International Health and Aid Policies The Need for Alternatives

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This important book challenges the dominant discourse on global health and the growing commoditization of health care to the detriment of poor people all over the world.

Anna Mariotti, Health Policy Advisor, Development Finance and Public Services Team, Oxfam GB.

This book comes at a time of a highly needed reform in the global Health Governance and the international Health Aid Architecture. The reflections of this book will be a valuable reference for our debate and the enhanced EU role in the global health challenges.

Juan Garay, Public Health Physician, Health Team Co-ordinator, Dg Development, European Commission.

International health and aid policies of the past two decades have had a major impact on the delivery of care in low- and middle-income countries. This book argues that these policies have often failed to achieve their main aims and have, in fact, contributed to restricted access to family medicine and hospital care.

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M & G FOYLE
9 780521 174268
27/09/2010
ISSN : 9780521174268

CAMBRIDGE UNIVERSITY PRESS
Cambridge, New York, Melbourne, Madrid, Cape Town, Singapore, São
Paulo, Delhi, Dubai, Tokyo

Cambridge University Press
The Edinburgh Building, Cambridge CB2 8RU, UK

Published in the United States of America by
Cambridge University Press, New York

www.cambridge.org
Information on this title: www.cambridge.org/9780521174268

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University Press.

First published 2010

Printed in the United Kingdom at the University Press, Cambridge

A catalog record for this publication is available from the
British Library

Library of Congress Cataloging in Publication Data

International health and aid policies : the need for alternatives /
[edited by] Jean-Pierre Unger ... [et al.].
p. cm.

Includes bibliographical references and index.
ISBN 978-0-521-17426-8 (pbk.)

1. Public health--International cooperation. 2. World health. 3. Poor--Medical
care. 4. Medically underserved areas. 5. Medical care--Developing countries.
I. Unger, Jean-Pierre, 1954--II. Title.

RA441.L565 2010
362.1--dc22 2010021038

ISBN 978-0-521-17426-8 Paperback

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Preface

This book explores health policies through examining patterns of commercialization that have underpinned the vast majority of these policies in different regions of the world, at the same time providing the reader with both concepts in public health and techniques to develop health services with a social mission. The chapters in the book include case studies and an extensive review of the literature.

We began this task with one main purpose: to explore the extent to which donors and international agencies have, over the past two decades, shared the same underlying motivation: that is to primarily commercialize the health sector of low-income countries (LIC) and middle-income countries (MIC), despite the stated aim of improving access to health care and addressing issues of poverty and exclusion. In this book, we provide evidence showing the contradictions between access to care and strengthening health systems on the one hand and increased commercialization on the other.

The ideas and evidence presented in this book thus call for an exploration of the contradictions of commercialized health care delivery under the guise of maintaining public provision. The book challenges the discourse and status quo among national bodies, in global policy circles, among donors and northern governments. It argues for

- the creation of health care services that have a social rather than a commercial motivation, and
- delivery of publicly oriented health care based on (professionally defined) 'needs' and on the (population) 'demand' to access quality, polyvalent health care, rather than on health interventions efficiency only.

Biographies

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This book comes at a time of a highly needed reform in the Global Health Governance and the International Health Aid Architecture. The attention to health has been enhanced in global fora and health aid has tripled in the last decade. We all share responsibility and the challenge to address the highly fragmented health landscape. The EU is developing a new policy framework aimed at greater equity and coherence in the EU role in global health. The agreed global commitment to universal coverage rescuing the Alma Ata principles and applying the principles of partnership and ownership to health in development aid are clear opportunities. The reflections of this book will be a valuable reference for our debate and the enhanced EU role in the global health challenges.

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Introduction – Overview and purpose

Confident in the infinity of time, a certain conception of history discerns only the rhythm, faster or slower, at which men and times move along the path of progress.
Walter Benjamin, 1915. *La vie des étudiants*. In: W. Benjamin, *Œuvres I, Folio Essais*, Editions Gallimard, 2000, p. 125.

Plato was the first to discern between those who know without acting and those who act without knowing while in the past, action was divided in enterprise and achievement: the result was that the knowledge of action to accomplish and its implementation became two radically different concepts.
H. Arendt. *Condition de l'homme moderne*. Calmann Levy Ed., Paris, 1983, p. 286.

After 15 years of neoliberal international health policy, data from 26 sub-Saharan countries reveals that more than 50% of the poorest children receive no health care when sick (Marek et al., 2005). Data from 44 low- to middle-income countries (LMICs) suggest that the greater the participation of the private sector in primary health care (PHC), the higher the exclusion from treatment and care (Macintosh & Koivusalo, 2005) across sectors.

This is a textbook about public health with a difference. Firstly, it addresses policies relating to the delivery of health care – while the study of public health has historically evolved around issues of disease control. This book makes a case for alternative policies that could shape the structure and provision of universally accessible, polyvalent, discretionary health care, rather than making it work through its commodification¹ and the priorities of cost-effective interventions in public services. Secondly, the articles we have included are critical of the debates over the political and technical paradigms of such discussion, often predicated, in our view, on international political ties and commercial relationships. Thirdly, a strong current of thinking in the book is the view, often neglected, that policies have a direct impact on the motivation and practice of professionals in the health sector and that such professionals can, and should, contribute towards developing health services with a social mission whatever the national health policy might dictate. In other words, the book approaches many of the contradictions of current policies from the perspective of practice. It thus offers a combination of theory, evidence from four continents and practice interwoven with guidance directed at policy makers, researchers, doctors, and nurses on ways and means to achieve comprehensive health care (CHC) provision in order to strengthen health systems.

Consequently, this is a textbook also on health services organization, designed to open avenues for reflection and action for the reader. Its targeted audience includes students, researchers, and practitioners of public health as well as health professionals with a practice in LMICs.

Whilst hierarchy conveys a top-down flow of authority, information, and ideology, this book aims at providing health professionals with action perspectives to amend (inter)national health policies in an experience-based perspective, in order to encourage the development of publicly oriented health services under any circumstance, wherever the health practitioners may be posted and whatever might be the national health policy. The book thus offers the reader arguments

¹ To turn into, or treat as, a commodity; make commercial.