

## **Health for all by the year 2000 !**

### ***What happened to WHO's magnificent social justice project ?***

*For 40 years, the World Health Organization has been subjected to pressure from powerful economic actors, separated from the people it serves and diverted from its public health mandate. Every principle and value of its 1978 social justice project « Health for All » has been undermined.*

The people's international health authority has fallen victim to neoliberal global restructuring, as have most social and economic institutions serving the public interest, including of course, many UN programmes and agencies. The WHO today is on its knees and deeply compromised. How did this happen ?

*Health for All (HfA) became WHO's slogan at the end of « Les trentes glorieuses » (1945-1975) – thirty years of genuine progress towards a fairer – and therefore a healthier – world. This was the era of decolonization when the need for redistribution of power and resources, including the rights of peoples to self determination and control over national resources was widely recognized and there was a strong commitment to universal, comprehensive public services to meet basic needs for health. It was a time of optimism, moral vision and genuine progress.*

Optimism was fully justified because the world had (and still has) ample resources to ensure the health and the wellbeing of all. It was no utopia then and it is no utopia now.

#### ***A threat to private interests and powerful nations***

*« The existing gross inequality in the health status of the people particularly between developed and developing countries as well as within countries, is politically, socially and economically unacceptable. . . . Economic development, based on a New International Economic Order, is of basic importance to the fullest attainment of health for all and to the reduction of the gap between the health status of the developing and developed countries. »*

The Declaration of Alma Ata<sup>1</sup> in 1978 at WHO's International Conference on Primary Health Care<sup>2</sup> has lost none of its power – or relevance. It was, however, a revolutionary, social justice project that identified poverty and inequality, nationally and internationally, as the major determinants of avoidable, premature illness and deaths worldwide.

HfA was predicated on the New International Economic Order (NIEO) as proposed by the Group of 77<sup>3</sup> and as such it was deeply threatening to the established order. Within two years, it had been reduced to four priority interventions unencumbered by larger issues of economic justice.

Since then, under pressure from rich Member States, WHO has been progressively diverted from its broad public health mandate of development, equity and sustainable health systems and directed towards narrow, vertical, biomedical approaches.

In simple terms, this means ignoring root causes (miserable living conditions) in favour of short term technological fixes ; neglecting prevention of disease and promotion of health, in favour of treatment (invariably pharmaceutical).<sup>4</sup> ; and ignoring the fact that rich countries all significantly and sustainably improved population health by addressing miserable living conditions.

---

1 In the former Soviet Union, now Almaty

2 Primary Health Care was conceived as an essential component of the much larger HfA project

3 Group of 77 non-aligned countries.

4 None of the four public health goals - prevention, promotion, treatment and rehabilitation - should be neglected.

## ***Health : a human right or a philanthrocapitalist commodity ?***

Extremely hostile to emancipatory projects, powerful donors imposed budget restrictions on all UN agencies towards the end of the 70s – coinciding in WHO's case with the launch of HfA. The zero growth policy<sup>5</sup> still in force today, despite much protest, is the major source of WHO's capture by private interests. Successive Director-Generals of the WHO point to the empty coffers to justify turning for « help » to industry, private foundations, and Member States acting on behalf of their multinationals.

Health represents a trillion dollar market, as the World Economic Forum never ceases to remind its constituents. And « donations » to WHO are valuable investments for multinational companies seeking new, profitable spheres for their activities. Health is no longer conceived as a human right, as declared in WHO's constitution but as a commodity or at best, an input to productivity – as promoted in 2001 by Jeffrey Sachs in the WHO report *Investing in Health for Economic Development*.

The WHO today is more or less privatized. It controls a mere 20 % of its budget. The remaining 80 % consists of extrabudgetary voluntary contributions from Member States and private foundations, almost all of which is earmarked for specific donor driven priorities and programmes.

Pointing to WHO's « inefficiency » or « irrelevance », powerful donors, including rich member states, claim to have no confidence in the organization that they have themselves helped to dismantle and corrupt . . . .

### ***From Alma Ata to Davos***

In January 1999, at the World Economic Forum in Davos, Kofi Annan proposed that the world's business leaders and the UN « initiate a global compact of shared values and principles, which will give a human face to the global market ». With no mandate from his constituency, the UN Secretary General offered UN support « for an environment which favours trade and open markets » in exchange for commitment (with no enforcement mechanism) by corporations to nine principles in the area of human rights, labour and the environment.

In similar fashion, WHO, in the 1990s, under Dr Brundtland, adopted donor driven, business models led by the private sector and launched multiple public-private partnerships (PPP) implementing vertical programmes addressing specific diseases. These arrangements have further increased the power of multinational corporations to direct health policy and undermined and fragmented the provision of health services.

The solution to the problem of resources for health is not for public bodies to go begging to the private sector or to celebrity philanthropists (themselves completely identified with multinational capitalism). The solution today, as it was at Alma Ata 40 years ago, is economic justice and an adequate tax base, at national and international levels.

### **« Social injustice is killing people on a grand scale » (WHO, 2005)**

On the rare occasions today when the World Health Organization operates without private sector influence, it does extremely valuable work. In 2005, the WHO Commission on Social Determinants of Health reported that: *The unequal distribution of health damaging experiences is not in any sense*

---

5 The freeze on assessed contributions from Member States, ie the only part of the budget that WHO controls

*a « natural » phenomenon but is a result of a toxic combination of poor social policies and programmes, unfair economic arrangements and bad politics.*

In 2017, there were 5.4 million deaths worldwide in children under five. In Sub Saharan Africa, 1 in 13 children die before the age of five, in Australia and New Zealand, the figure is 1 in 263.<sup>6</sup> Life expectancy at birth is 53 years in Sierra Leone, 63 in Syria, 78 in USA and 83 in Switzerland.<sup>7</sup>

If WHO's social justice project had been allowed to continue, there would be no deaths in the 21st century from malnutrition, unclean water and lack of sanitation<sup>8</sup> ; and differences in life expectancy between countries would be insignificant.

### ***Protect WHO from private interests and their powerful member states !***

For decades, health and environmental NGOs such as the People's Health Movement, have fought for the independence of WHO from corporate interests. It has been a losing battle given that the rich member states tend to represent the interests of their multinationals<sup>9</sup> at the World Health Assembly.

The latest « reform » is a source of despair to supporters of an independent WHO. Today, industry is free to finance WHO activities and private foundations such as the Bill and Melinda Gates Foundation have been able to gain Official Relations status with the WHO. International health operates under plutocratic governance and major conflicts of interest are no longer addressed.<sup>10</sup>

Health for All and the WHO must be reappropriated by its constituents, the peoples of this world<sup>11</sup> ; and loyalty to WHO's constitution must take precedence over loyalty to Member States. The latter must be reminded that in their dealings with WHO, they are delegated by their citizens to protect and promote their health *and not the interests of their multinational corporations.*

---

6 <https://data.unicef.org/wp-content/uploads/2018/10/Child-Mortality-Report-2018.pdf>

7 [http://www.who.int/gho/mortality\\_burden\\_disease/life\\_tables/situation\\_trends/en/](http://www.who.int/gho/mortality_burden_disease/life_tables/situation_trends/en/)

8 Accounting for at least 50 % of under five mortality

9 Not just the pharmaceutical industry, but the food, beverage and agricultural giants, and in the case of the US and UK, the health services industry

10 Richter J. Time to turn the tide : WHO's engagement with non-state actors and the politics of stakeholder governance and conflicts of interest, *BMJ* 2014; 348 doi: <https://doi.org/10.1136/bmj.g3351>

11 CETIM/People's Health Movement. *La Santé pour Tous ! Se réappropriier Alma Ata.* Genève 2007.