

# ***WHO (SEARO) Regional Conference on Public Health in South-East Asia in the 21st Century***

## **Report and Recommendations**

### ***Executive Summary***

Health sectors of the developing countries of the South East Asia region face enormous challenges from rapid globalization, increasing movement of people, and a changing economic scenario that negatively impacts health. The **Regional Conference on Public Health in South-East Asia in the 21<sup>st</sup> Century** reviewed the progress in Public Health education, training, practice, and research in the countries of the South-East Asia Region, as well as the lessons from related policies and programs. The **Calcutta Declaration on Public Health**, adopted on the concluding day at a special session chaired by the Honorable Chief Minister of West Bengal, India sets forth strategies and directions for enhancing health development in the South-East Asia Region in the 21<sup>st</sup> Century.

This Declaration urges the promotion of Public Health as a discipline essential for health development in the region. It advocates Public Health's leadership role in formulating and implementing evidence-based public policies and programs, creating supportive environments, enhancing social responsibility by involving communities, and increasing the allocations of human and financial resources. Public Health should address issues related to poverty, equity, ethics, quality, social justice, environment, community development and globalization.

The Declaration calls for creation of appropriate career structures for Public Health professionals at national, state, provincial and district levels. Policies also need to be established mandating competent background and relevant expertise for persons responsible for the health of populations.

The Declaration has also emphasized the need for strengthening and reforming Public Health education, training, and research, by networking with institutions and using information technology for improving human resource development. Creative and committed partnerships will enhance the use of all available societal resources for advancing the agenda of Public Health action.

The Conference was organized by the **World Health Organization** from 22 to 24 November 1999 in Calcutta to review the state of Public Health in countries of the South East Asia Region. Its objective was to advocate the importance of Public Health for national, socio-economic and political development, and to promote new strategies for developing sound Public Health systems in the 21<sup>st</sup> Century. The initiative brought together leaders in Public Health education, research and services from the South East Asian countries, international experts, and representatives of bilateral and multi-lateral agencies. Issues and concerns in Public Health were discussed, with focus on the quality of the schools of public health, professional capacities, societal commitment, shrinking resources for health and the resultant need for greater efficiency and realization of national Public Health goals. Presentations by 19 eminent experts in five plenary sessions, combined with extensive deliberations and group work, helped identify key strategies and initiatives for strengthening Public Health in South-East Asia.

From the original, narrow biomedical view of Public Health, we have now moved toward visualizing Public Health more comprehensively as

the process of mobilizing local, state, national and international resources effectively to ensure the conditions and facilities for healthy living. While basic requirements and resources for Public Health vary from country to country, there are common problems in Public Health that countries share. Many countries are facing the challenge of triple burden of disease. The capacity for Public Health training and leadership development in various countries was grossly inadequate. Large Public Health institutions were moribund. Career opportunities for Public Health personnel were limited. Often, Public Health positions are not occupied by persons with Public Health qualifications or experience. Finally, politicians, bureaucrats, and medical professionals do not attach adequate importance to the discipline of Public Health.

Besides starting new **Schools of Public Health**, the existing schools and training programs need to be strengthened by infusing new resources, refocusing and regrouping, and changing organizational behavior. The centers of excellence should become centers of relevance, opening dialogue between administrators and users. Public Health institutions should have health service responsibility. Also, MPH programs need an inter-disciplinary nature.

Lessons drawn from the recent experiences of developed countries might benefit developing countries, notwithstanding the differences in disease patterns, scale of poverty, and Public Health structures. Objective needs should be identified at intra-country, intra-regional, and global levels, and networks should be developed for promoting Public Health. Good Public Health practices should be the mainstay of all efforts to develop a better quality of life for the people, especially those who are under-privileged, vulnerable, disadvantaged or marginalized. New windows of opportunity were likely to open with large increases in adolescent and youth population, while the number of under-five children would remain stable. These need to be harnessed by planning appropriate interventions.

Health in sustainable development should focus on promoting health in all settings, and integrated development to break the vicious spiral of poverty and ill health. Sri Lanka's *Sarvodaya Jana Saviya* movement, Thailand's Minimum Needs Program and India's Integrated Child Development Services program had been successful because of their strong

base in the community. Social mobilization and community action could enhance the relevance and excellence of Public Health. There was a need for massive effort at effectively transmitting the new mission and programs of Public Health to the people and training them.

The **Roll Back Malaria (RBM)** approach, in operation in over 20 countries, has been successful as a social movement. This has shown the potential for promoting Public Health through cost sharing, decentralization, prioritizing interventions, strengthening health sector reforms, taking sector-wide approaches, forming partnerships, and developing informed decision makers. WHO is already exploring synergies between RBM and other priority health interventions like controlling HIV infection/AIDS, stopping TB, and making pregnancy safer.

Fundamental values of Public Health include ethics, equity and human rights as an imperative. However, the principles underlying these values need increasing attention and application in developing countries. Considering the close interaction between health and environment, an optimum balance should be maintained between population and resources, with minimum intrusion made into the natural state. Policies which influence health must avoid conflict, be mutually reinforcing, and be consistent with Public Health objectives.

To initiate and implement Public Health activities in a concerted manner, inter-agency coordination committees should be established. Implementation of Public Health programs at the district and sub-district level must provide for horizontal integration of health, family welfare and nutrition services, ensuring that the linkage with primary health care is clearly established. Elected local bodies (like *Panchayats* in India) must be appropriately and adequately utilized for participatory planning, decentralized delivery, and creating an enabling environment to enhance Public Health in full partnership with the community.

Technologies have found wide applications in the field of Public Health for promotion, prevention, care and rehabilitation activities. The development of Oral Rehydration Salt solution, which has saved millions of lives, could be called the 'Technology of the Century'. Public Health Laboratories should be established in each district and efforts made locally to

develop rapid tests for clinical conditions. A close, informal and inter-active partnership needs to be built up between the Public Health system, laboratories and universities.

Epidemiology helps determine and understand the major political, social, economic and other environmental factors influencing the burden of ill health. Successful, time-tested approaches and models are available to usefully predict future trends in specific diseases, thus enabling timely action. While making efforts to increase the resources available to health, the existing resources should be used wisely by applying the principles of health economics. Cost effectiveness is one such approach for advocacy of particular types of health interventions. There is a need for strengthening the scientific and ethical foundation for evidence-based policy formulation in Public Health.

Indonesia's experience in health development, even in the face of the recent economic crisis, demonstrates that the role of Public Health lies in identifying and understanding the dynamics and determinants of health status, and then developing and implementing appropriate interventions. Developments in recent years in Traditional Medicine in India show the potential for these systems to act as adjuncts or adjuvant to modern medicine.

Distinct cadres of Public Health specialists should be established in the central and state/provincial governments by restructuring the Public Health system. Such a service, with a clear career structure and attractive pay scales, would help draw competent persons into Public Health. Knowledgeable persons with good records of accomplishment should be appointed to top managerial posts.

Globalization and market forces have widened the gap between the rich and the poor, especially in the least developed countries. However, there has been increasing awareness and empowerment for asserting their rights among people. Gender sensitivity, and concern about the growing environmental damage, menace of ecological catastrophes, misuse of biotechnology, and indiscriminate use of pesticides now figure high on national agenda.

Public Health experts should form an essential part of the Executive Management Team. They should clarify strategic intent, facilitate linkages, and ensure that healthy public policies were developed, and a range of 'cocktail measures' implemented for advancing Public Health. Essential future competencies in senior Public Health personnel should include leadership ability, strategic thinking, capacity to plan, skills of change management, enhanced capacity for communication and the wherewithal to meet the challenges of the 21<sup>st</sup> century.