Globalization, Poverty and Health

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Objectives: There are two central objectives to this work: 1) to analyze the relationship between globalization, poverty and health, and 2) presenting the main features of globalization today.

Methodology: Analytical Descriptive

Results: The author presents a series of evidence indicating the relationship between globalization and poverty, and shows how these phenomena impact health. The phenomenon of globalization and its effects are not new. They can be seen since the sixteenth century when large colonies began in Africa, Asia and the Americas.

The author notes in this regard that measures to open markets and the financial and economic considerations are far beyond the social considerations. A series of comparative data showing the gap between rich and poor countries is presented. In the latter, life expectancy decreases by 28 years in reference to the former; in rich countries the mortality rate is 6 per thousand live births, while in the poor, the ratio is 100 per thousand live births. The differences in access to health services also appear as evidence of such disparities. These data are just samples of how globalization has impoverished some countries, creating their global exclusion and economic and social inequity. They also make clear who is receiving the greatest benefits of globalization and who are suffering from its negative impacts.

Another important consequence of globalization lies in the impact it has on health systems through market-based sectoral reforms. This results in greater inequity in health, and encourages such reforms to the health care management that are motivated by profit and individualized medical practices, and leaves no room for collective health programs or other alternatives.

The author makes it clear, however, that not all the economic and social impacts of globalization are the fault of developed countries and international financial organizations. The blame also lies with the governments and political elites of some of the underdeveloped countries, who show little social engagement and foster levels of corruption that ultimately weaken the few existing social programs.

Conclusions: The author concludes that globalization has had a role in increasing marginalization and poverty, causing adverse effects on collective health. They propose to combat the equation of "globalization/poverty and exclusion/deteriorating health" through the creation of global solutions associated with national and local initiatives.