

The importance of politics in policy

Gavin Mooney¹ touches on an important issue that is frequently set aside or ignored in public health academic circles: the political context that has an enormous influence on the level of health of the populations. The growing awareness that health is determined by social, economic, cultural and other forces has led to the important realisation that public health interventions are far more than medical care provided to populations or the behavioral changes promoted by preventive medicine programs. One recent example of this awareness is the WHO Commission on Social Determinants of Health² that came to the strong conclusion that "inequalities kill people". That commission should be applauded for that courageous statement, which is supported by overwhelming scientific evidence.

And yet this is also insufficient. It is not inequalities that kill people. It is the people who produce and reproduce inequalities through their public and private interventions that kill people. In most cases, we have the specific names of those responsible for those inequalities and, therefore, for those deaths.

Here is the root of the problem: the political context so frequently avoided in the halls of academia, in medical and public health circles. There is a deliberate policy

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to avoid 'politics' in public health circles. What I mean by politics is the relationships between class, gender, race and national forces and how they are produced through the apparatus and ideology of the state. These are subjects of inquiry, research and intervention in public health, an area dramatically underdeveloped and which needs to be expanded. The awareness of this need has been clear for some time. It was not too long ago when the American Public Health Association (APHA) denounced the fascist coup of General Pinochet as a pathologic agent that would damage the health and quality of life of the Chilean population, as indeed happened. It named Professor Hugo Behm, dean of the Chilean School of Public Health (jailed in a fascist concentration camp), as honorary president

of the APHA. It was not too long ago either that the South African Public Health Association condemned apartheid in South Africa also as a pathological agent that created enormous disease and inhibited the full development of the enormous potential that every human being has. These were indeed cases of public health practice in the most profound sense. Let's never forget what one of the founders of public health, Virchow, once said: "Politics is public health in the most profound sense."

Mooney continues in that tradition, raising the elements of a denunciation of the Western establishment's support for horrible dictatorships in Arab countries, justified as bringing stability over justice and end of exploitation. This is indeed a much needed task.

References

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the military in Pakistan, may also have fostered fundamentalist Islam. The biggest challenge to public health is the need for a more equitable geopolitical world and for an inclusive and honest framework for decision-making.

Third, the effects of 9/11 are multi-faceted. True, the immediate reactions in the US, and world-wide, have been negative: two wars, xenophobia, paranoia, stereotypical prejudices about Islam, diversion of resources toward border security, and a skewing of public health investment toward bioterrorism. These are visible, loud, and dramatic, and the impact on the public's health probably adverse. But within the US, quietly, less visibly, there are some tectonic shifts which offer hope. Barack Obama's election as President heralded a

major shift in US foreign policy towards a more thoughtful and equitable global engagement. There is greater interest within the United States in global affairs, evident in the greater breadth and objectivity of world news coverage, and of global education in schools. The American Civil Liberties Union has increased its efforts to prevent stereotyping of groups. There is dialogue on terrorism, religion, history, and these have helped to place 9/11 in perspective. Even in traditional public health, there is now greater engagement between the United States and the rest of the world. Overall, we believe that the people of America are recovering from the trauma of 9/11, the country is reshaping itself for a more participative global role. That can only benefit the health of the world.

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