



Global Health: Why Be Involved?

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Why are YOU interested in Global Health?

(Pick only one.....)



- The diseases seen are fascinating
- I want to travel the world
- I want to help reduce health disparities
- It fits my core values
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- All of the above



Why does Global Health matter?

- Humanitarian Reasons
- Equity Reasons
- Direct Impact on Medical Care in the U.S.
- Indirect Impact on the Economy and Politics

www.familiesusa.org



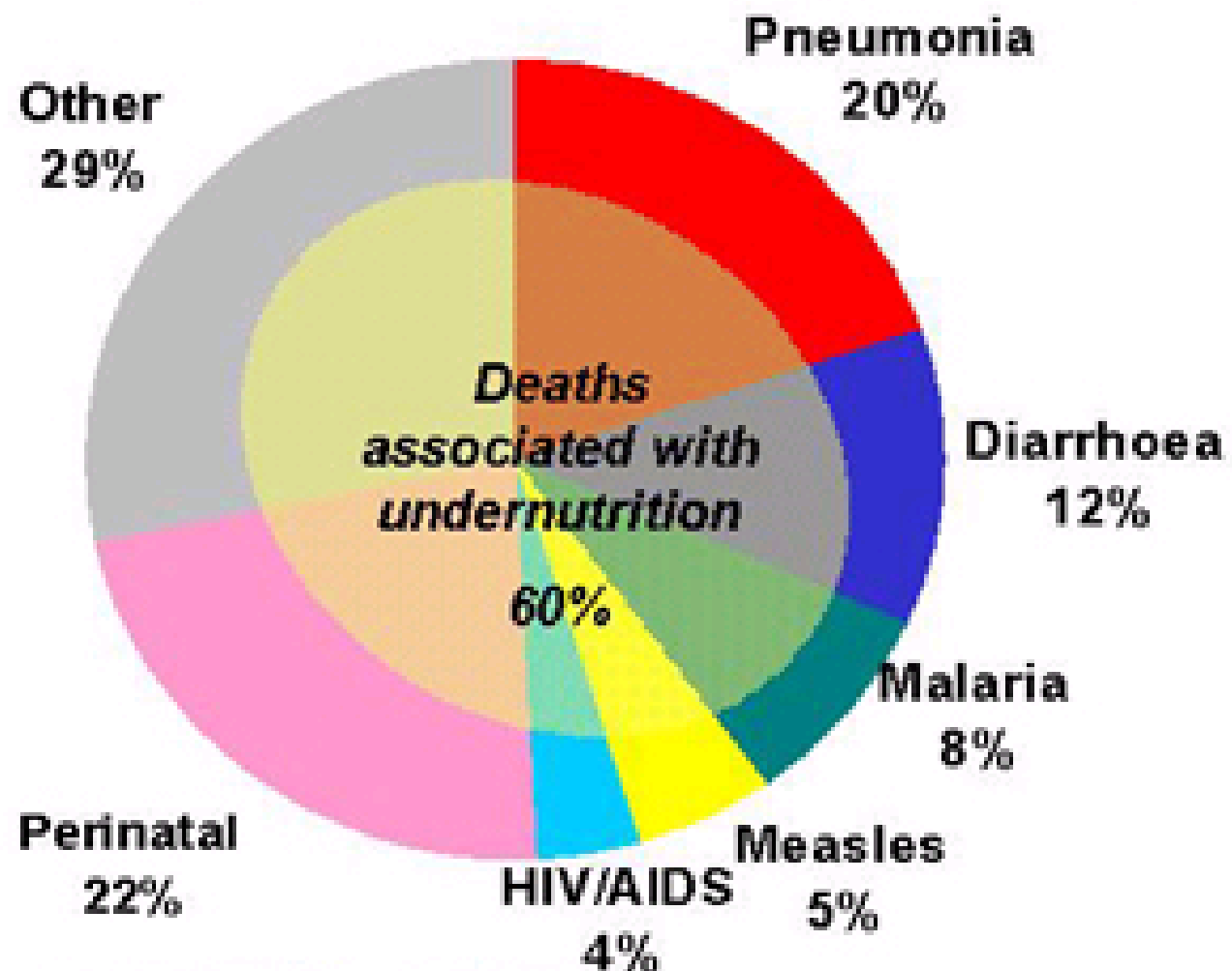
Humanitarian Reasons



- We know how to save lives
- “Children should not be dying from preventable diseases.” (UNICEF)
- Right of the Child to Health and Protection
- Children have special needs/ adults with disabilities
- Nurture humanism and compassion
- Peacemaking



Major causes of death among children under five, global, 2000



Sources:

For cause-specific mortality: EIP/WHO using 1999 data.

For deaths associated with malnutrition: Caulfield LE, Black RE. Malnutrition and the global burden of disease: underweight and cause-specific mortality. Paper in preparation;

UNEP/WHO/UNICEF

.... A World in Need



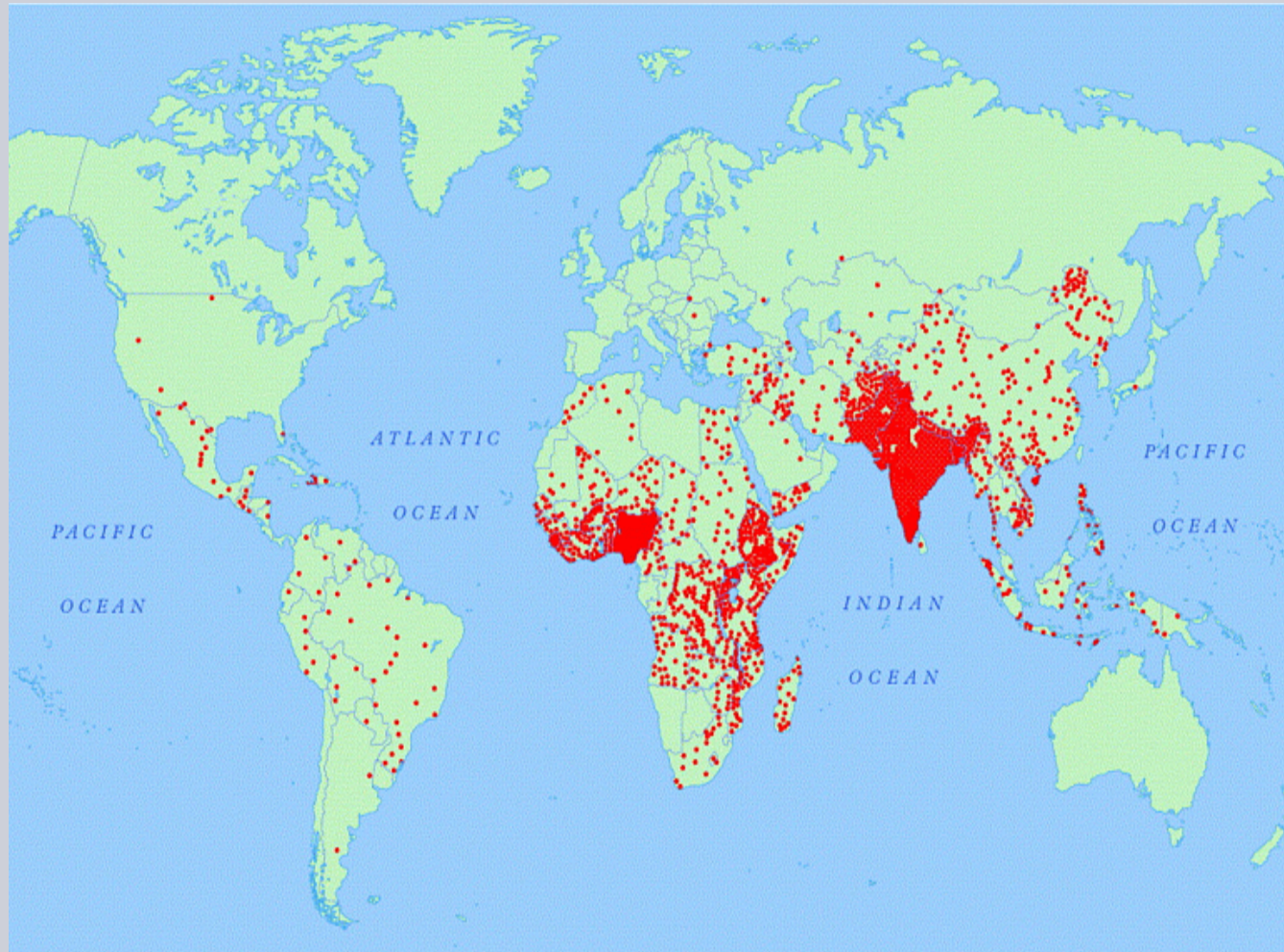
EQUITY REASONS

- Roughly 90 percent of the world's health care resources are spent on diseases that affect 10 percent of the world's population. Working to solve global health problems will help ensure that money and resources are distributed more fairly across the globe.

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Worldwide Distribution of Childhood Death

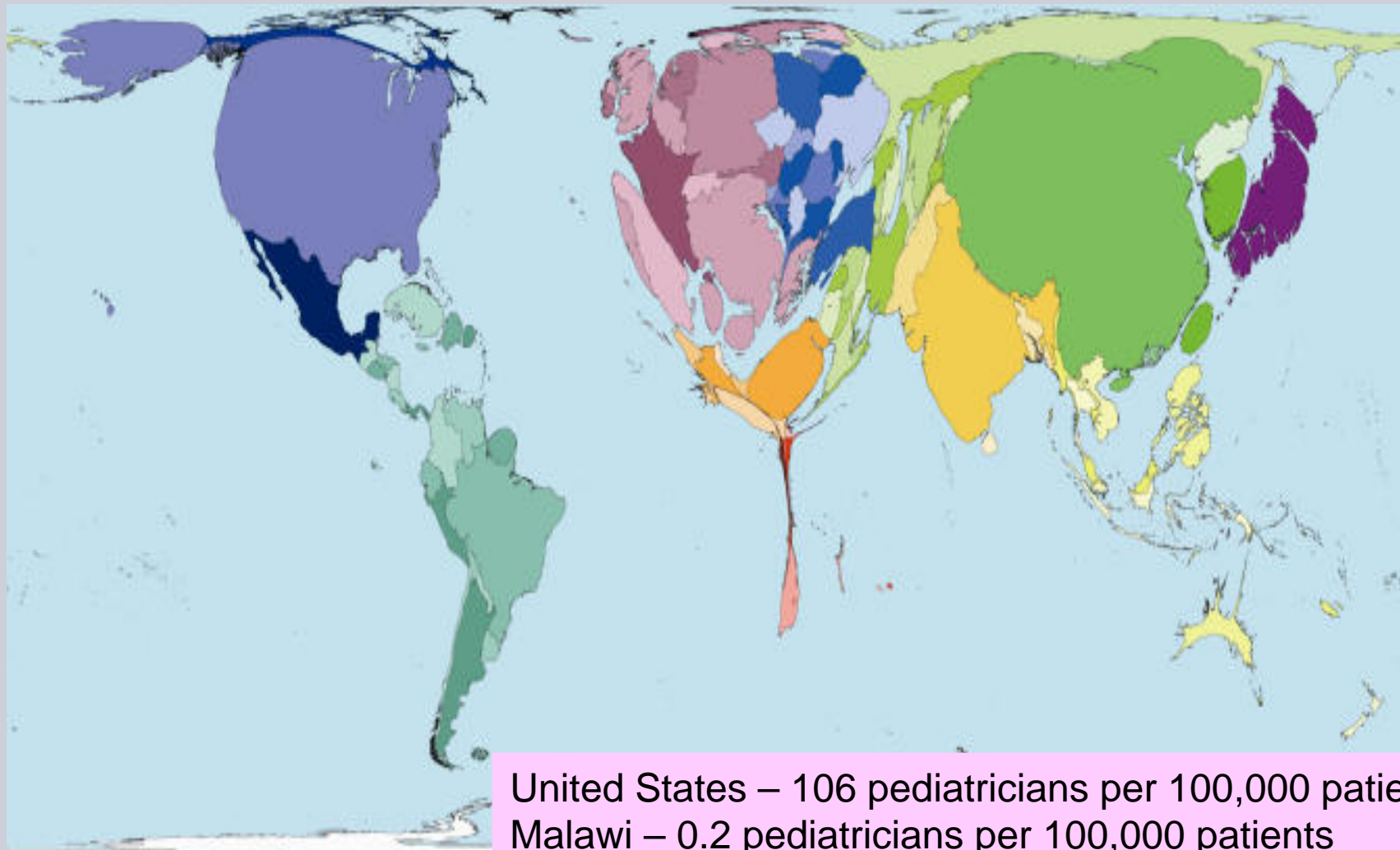


Black et al, *The Lancet*, 2003

Malaria Prevalence UNICEF and WHO Data, 2005



Physician Distribution



United States – 106 pediatricians per 100,000 patients
Malawi – 0.2 pediatricians per 100,000 patients

Direct Impact on Clinical Care in the U.S.



Two million people cross international borders daily

- Care of immigrants
- Care of refugees
- Care of international adoptees
- Care of international travelers

- Knowledge of Global Diseases
- Understanding of multiple cultures
- Awareness of different health care systems



Direct Impact on Medical Care in the U.S.

- In an increasingly connected world, diseases can move as freely as people and products.
- Infectious diseases can easily cross national borders and pose immediate threats in the U.S.—diseases such as polio, H1N1 and drug resistant TB.
- Working to solve global health problems includes addressing diseases that **people in this country don't usually think of as posing an immediate threat on our soil.**



“Diseases have no borders”

“Only a plane ride away”

H1N1

MDR TB

Malaria



Measles

SARS

Polio



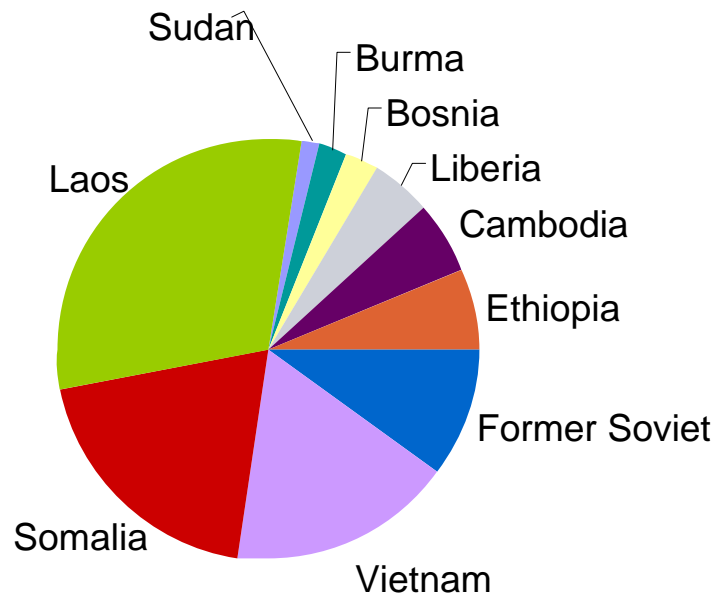
Key drivers of change: mobile populations

- Worldwide, 14M people were displaced from their countries of origin in 2007 (U.S. Committee for Refugees and Immigrants)
- Nearly 38M people currently living in the U.S. are foreign born (Migration Policy Institute)
- Refugee arrivals to U.S. average more than 80,000 persons annually (1980 to present; U.S. Citizenship & Immigrant Services)
- Speed of travel & world population growth



Minnesota: It's not just about lutefisk anymore

Top 10 Immigrant Populations Into Minnesota, 1979 - 2008



- 2nd largest Hmong population in U.S.
- 2nd only to California in # of immigrants from East Africa (19,000 in 2008)

In MN health care, the global is local...

- 85% of TB is in the foreign born
- 15% of HIV cases are in African born (<1% of population)
- Malaria occurs much more often in VFR (visiting friends and relatives) travelers

MDH, 2007



Health Status of New Refugees, Minnesota, 2008

Health status upon arrival	No (%) of refugees screened	No (%) with infection among screened
• TB infection*	1,142 (99%)	340 (30%)
• Hepatitis B infection**	1,139 (99%)	97 (9%)
• Parasitic Infection***	1,032 (90%)	166 (16%)
• Sexually Transmitted Infections(STIs)****	832 (72%)	8 (1%)
• Malaria Infection	17 (1%)	0 (0%)
• Lead*****	117 (92%)	4 (3%)

Refugee Health Program, Minnesota Department of Health



Direct Impact on Medical Education

- Enriches medical knowledge
- Improves clinical competence
- Experience with challenges of international research
- Facilitates understanding of a different health care system
- Facilitates understanding of beliefs about health other than one's own
- Develops teaching skills

“It has changed my life forever and I have only become a better physician.”



Millennium Development Goals

United Nations

- MDG 1: Eradicate extreme poverty and hunger
- MDG 2: Achieve universal primary education
- MDG 3: Promote gender equality and empower women
- MDG 4: Reduce child mortality, 2/3 reduction by 2015
- MDG 5: Improve maternal and child health
- MDG 6: Combat HIV/AIDS, malaria, other diseases
- MDG 7: Ensure environmental sustainability
- MDG 8: Develop a global partnership for development



Indirect Impact on Economy and Politics

- Rising cost of disease
- Increasing poverty
- Increasing political instability

“The failure to engage in the fight to anticipate, prevent, and ameliorate global health problems would diminish America's stature in the realm of health and jeopardize our own health, economy, and national security.”

-The Institute of Medicine,

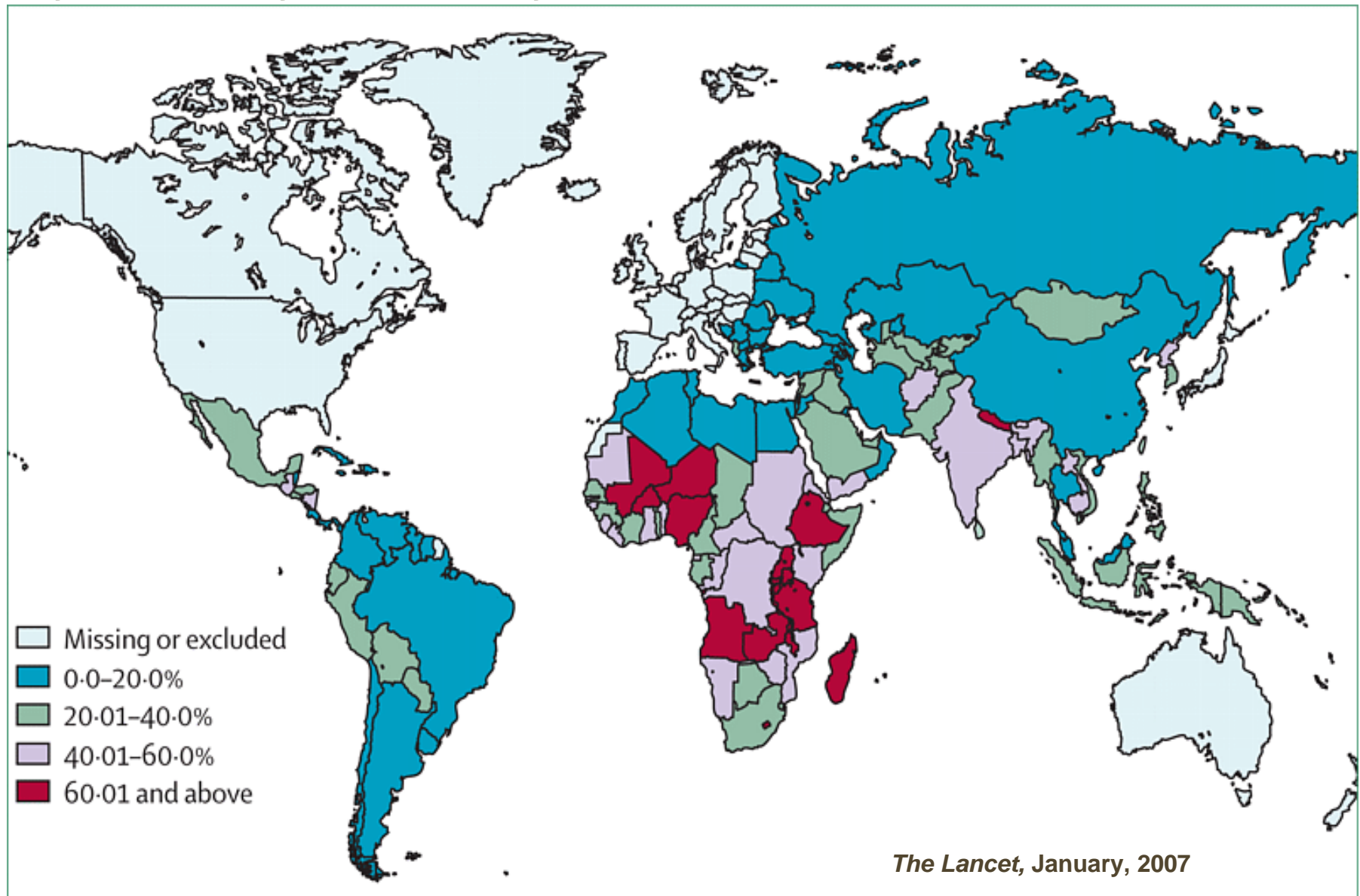
America's Vital Interest in Global Health, 1997

Calculating the number of children at risk for loss of developmental potential →

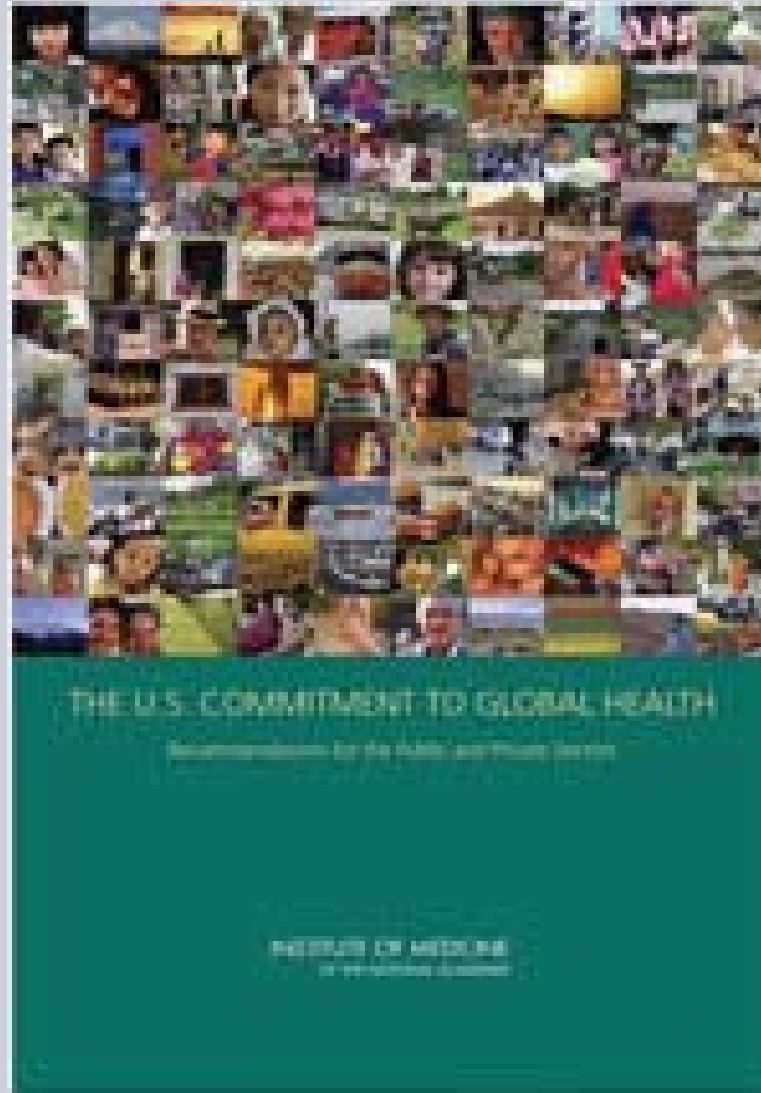
- **559 million children <5y in developing countries**
- **156 million are stunted (WHO)**
- **63 million in absolute poverty, not stunted (UNICEF)**
- **219 million (39%) at risk for loss of developmental potential**



Percentage of disadvantaged children under 5 years by country in 2004



IOM Update 12 years later



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Why does Global Health matter to me?



Bibliography

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- **Global Health Council,**
www.globalhealth.org
- **Families USA, www.familiesusa.org**

