

ISSN 0970-7247

THIRD CONCEPT

English Monthly
Annual Subscription Rs. 200

Vol. 35

No. 411-412

MAY-JUNE 2021

Rs. 20.00

- ❖ **Democratic Crisis in Nepal**
- ❖ **India and Nuclear Disarmament**
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Vol. 35 No. 411-412 MAY - JUNE 2021 Rs. 20. 00

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Published, Printed and Owned by

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Global Health Order!

Global outbreak of COVID-19 pandemic since early 2020 and its continued manifestation in varied forms of variants in different parts of the world, apart from wreaking havoc with the lives of the people and causing immense economic loss, has also unraveled chinks in the armoury of global healthcare system, especially in developing countries including India. Apart from its negative impacts, COVID-19 has been instrumental in enabling global healthcare system garner a political visibility and status that has been termed by some experts as a sort of political revolution. With health-related issues becoming a centre-piece of the global agenda in the pandemic period, there arises a dire need for allocating a major chunk of resources in development aid to address issues pertaining to healthcare.

Some health experts have attributed the international traction being garnered by global health to three agendas that complement one another in multiple ways. Firstly, it is a security agenda that is driven by the apprehension of global pandemic entailing spread of disease worldwide in an era where viruses are expected to entail the potential of spreading from one part of the globe to another without brooking any delay. Second is the economic agenda that pertains not only to the impacts of poor health on development or pandemic outbreaks in the international marketplace, rather brings into sharp focus the economic relevance of the health sector, specifically of certain industries like tobacco food and pharmaceuticals and the ever-expanding market of goods and services in relation to health worldwide. The third agenda, as postulated by these experts, is a social justice agenda and espouses the cause of healthcare as a social value and human right, embracing within its fold action on the social determinants of health, access to medicine and healthcare related services and sustainable development goals (SDG) 3 dealing with good health and well-being. These three agendas in tandem with SDG-3 emphasize on the urgency for a New Global Health Order warranting active involvement of UN agencies, active engagement of philanthropies along with other donor agencies and civil society at a wider scale.

Global Health Order (GHO) brings into focus two crucial action areas. Firstly, it emphasizes sound management of interdependence and globalization while addressing increasing inequalities within and between nations via sustainable development strategies. It also lies at the intersection of numerous policy arenas and is subject to a particular dynamic. Concurrently, poor health is primarily attributable to many other global crises like finance, food insecurity, global warming and climate change etc. The resultant outcome is that any mismanagement or neglect in addressing health challenges renders the entire humankind to bear the brunt. Apart from COVID-19, even epidemics of recent past years such as HIV/AIDS or diseases outbreak like severe acute respiratory syndrome (SARS) or H1N1 influenza etc., have proved devastating economic consequences of governance failure in health, be they national, or global. Poor or unsound health management not only hinders the current growth trajectory, but also destroys the development gains that were attained through great efforts in the past. A study entitled *The Global Economic Burden of Non-communicable Diseases (NCDs)*, jointly prepared by World Economic Forum and the Harvard School of Public Health, in 2011, had calculated that over the ensuing two decades, NCDs would cost more than \$ 30 trillion, almost representing about half of the global GDP at 2010 level, thereby pushing millions of people below the poverty line, and it could result in a dramatic negative impact on the productivity and quality of life in many countries and regions worldwide.

Undoubtedly, no exact estimates of economic impacts of the COVID-19 are available at this stage when different variants of the pandemic are affecting different countries; nevertheless, most of the calculations of the 2011 report are proving true rather on a vaster scale. This is an opportune occasion to focus on a NGHO that accords priority to health, especially in developing and least-developed countries, with developed countries making liber fiscal, medical and other technological resources available for developing countries through the concerned Un agencies like WHO, and other international civil society organization (ICOs).

Time is also ripe to declare Right to Health as a legitimate fundamental right of every person to be enforceable through a court of law.

— BK