

# Public Health and Universal Health Coverage

A century ago Winslow defined Public Health “as a science and art of preventing disease, prolonging life and promoting physical health and efficiency through organized community efforts for the sanitation of the environment, the control of communicable infections, the education of the individual in personal hygiene, the organization of medical and nursing services for the early diagnosis and preventive treatment of disease, and the development of social machinery which will ensure every individual in the community a standard of living adequate for the maintenance of health; so organizing these benefits in such a fashion as to enable every citizen to realize his birthright and longevity.”[\[1\]](#)

In 1978, the Declaration of Alma-Ata was ground-breaking in uniting health leaders behind the importance of Primary Health Care as key to delivering better health for all, and to the value of social justice, health equity, and the social determinants of health. The vision of the Alma-Ata declaration was to change how we think about health and move away from hospitals, professionals, and disease, and towards a recognition that health is not only about illness and services but also about the social, economic, and developmental factors that affect the health of individuals and populations.[\[2\]](#) After more than forty years PHC is considered in crisis, and at Astana Declaration the future of primary health care was questioned, reiterating that Alma-Ata vision continues to be valid to this day.[\[3\]](#)

And now we have the fundamental global public health objective, the Universal Health Coverage (UHC), which is a part of the Sustainable Development Goals.[\[4\]](#) UHC is a priority of the World Bank and WHO. This is all a part of Global Health which is fashionable and has become a major philanthropic target.

Decision making based on data and evidence; focus on populations rather than individuals; goal of social justice and equity; and an emphasis on prevention rather than curative care are all embedded in the most definitions of public health[\[5\]](#), yet these components are grossly missing in the delivery of Primary Health Care, blocking the prospects of UHC. To mention just one example, whilst thirty percent of all children in LMICs are underweight or stunted, which is going to affect their physical growth and mental development and health for the rest of their lives; growth monitoring is not available to all Under-fives at primary care level, more so to those who are in greater need. With the double burden of malnutrition in LMICs, simultaneous effort needs to be extended on undernutrition and overnutrition. Emphasis at primary health care level is on curative care rather than prevention. Health education and empowering communities to manage their own health takes a back seat.

The US Institute of Medicine defined the mission of public health as, “fulfilling society’s interest in assuring conditions in which people can be healthy”[\[6\]](#). Public health has been defined as “one of the efforts to protect, promote and restore the people’s health. It is the combination of sciences, skills and beliefs that is directed to the maintenance and improvement of the health of all the people through collective or social action”.[\[7\]](#)

In spite of repeated visits by international health organizations and governments, the implementation of Primary Health Care (PHC) is still illness care oriented. Medication is considered as the answer to all health problems and self-help and prevention is ignored. Strengthening primary health care is the only way forward for better health for all, hence UHC. Considering bulk of the population seeking care at any primary health center are women and children, improving their health will ensure health of the future populations. A comprehensive maternal and child health service at all health centers will go a long way to address the health needs of the people. Provision of balanced preventive and curative services to all mothers and children is critical, especially growth monitoring of Under-fives, and care during pregnancy, child birth and postnatal care for both, the mother and the newborn. Health education and awareness is the key to address prevention of preventable diseases. Local use of data, which is rarely used at health center level, is essential in decision making and surveillance, and is the best educational material for both PHC staff and the public.

Major diseases like malaria, HIV/AIDS and tuberculosis are generally covered under national programs, but need to be integrated with primary health care to be effective. Most health initiatives in LMICs to deal with their health problems have come about through the assistance of wealthier countries, organizations and foundations. These are often vertical programs and are not linked to primary health care. Any stoppage of this assistance is bound to open flood gates to health problems, creating local devastation and increased threats to the rest of the world. Consider the spread of immunizable diseases (polio, measles, diphtheria and whooping cough) or HIV/AIDS. Most of these efforts are not sustainable without foreign aid and LMICs are trapped in this debt burden, increasing the dependency on rich nations and hence being told what and how to do. Local participation in decision making is rare. Interestingly, King and Koski define Global Health as public health *somewhere else*. Experts, from wealthy countries tend to have superior understanding about how best to identify, prioritize and solve pressing health problems somewhere else.[\[8\]](#)

There is an urgency to make PHC services to every individual, especially in LMICs, to achieve the goal of UHC.

Previous posting under *Home > Old Articles* on this website related to this theme:

October 6, 2018: Primary Health Care, the answer to Sustainable Health

October 27, 2018: PHC, UHC and Sustainable Health Goals

November 17, 2018: Using available data in Primary Health Care

December 22, 2018: Defining Universal Health Coverage

## References

[\[1\]](#) Winslow C. The untitled field of public health. *Mod Med* 1920; 2: 183-91.

[\[2\]](#) Ghebreyesus TA et al. Primary health care for 21st century, universal health coverage, and the Sustainable Development Goals. *Lancet* Vol 392, 2018.

[\[3\]](#) Editorial. The Astana Declaration: the future of primary health care? *Lancet*. Vol 392: 20 Oct 2018.

[\[4\]](#) United Nations. Sustainable development goal 3.

[\[5\]](#) Koplan JP et al. Towards a common definition of global health. *Lancet* 2009;373:1993-5.

[6] Institute of Medicine. The future of public health. Washington, DC: National Academy press. 1988.

[7] Last J. A dictionary of epidemiology. New York: Oxford, 2001.

[8] King NB & Koski A. Defining global health as public health somewhere else. BMJ Global Health. BMJ 2020:5.