The burden of disease among the poor

Neglected Tropical Diseases and Emerging Infectious Diseases – Focus on Populations Underserved
19.09.2017

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Outline

• Health and poverty

• The burden of disease among the poor
  – Poor countries
  – Poor people
  – Neglected tropical diseases and emerging infectious diseases

• Improving health of the poor
  – An investment case for poverty diseases
Health and poverty
Improved health

World life expectancy
1960: 52.6
2015: 71.9
Less poor people

Total population living in extreme poverty (>1,900 int $/day)

Source: World Poverty Absolute Number by Region - PovcalNet (World Bank)
Note: Consumption per capita is the preferred welfare indicator for the World Bank's analysis of global poverty. However, for about 25% of the countries, estimates correspond to income, rather than consumption.
Poor people now live in less poor countries

Sources: Moss and Leo (2011); World Bank (2011) Top line indicates number of MICs, bottom line indicates number of LICs.

Figure from Glassman et al., 2013
Health, poverty and equity

• **Good news**
  – Health is improving
  – Poverty is declining

• **Bad (or challenging) news**
  – The poor - and poor people’s health - are still marginalized
    • Unacceptable and unfair
  – The «new bottom billion»
    • Fewer poor countries, but still poor people
      – 11% still live on less $1.90 a day (2011 PPP)

The burden of disease among the poor
Burden of disease: Poor countries and poor people

• Burden of disease = Life years lost due to morbidity and mortality

• Higher and different burden of disease in poor countries
  – Life expectancy at birth
    • High income countries: 80.8 years
    • Middle income countries: 70.9 years
    • Low income countries: 61.7 years

• Burden of disease among poor people
  – Being poor relate to poorer health outcomes and lower availability of services

The global burden of disease: Differences between countries

IHME, 2016
The burden of disease: differences **within** countries

% of births assisted by skilled assistance by household wealth in Ethiopia

Ethiopian Demographic and Health Survey 2016
The health of the poorest: Other diseases, or other impacts?

• Different health risks
  – E.g. water, sanitation

• Different burden of disease
  – Lack of diagnostics and drugs

• Different impacts of disease
  – Lower access to health care services
  – Poorer health outcomes
  – More exposed to catastrophic expenditure

The burden of NTDs: diseases of poor people, not poor countries

- **The paradoxical NTD burden**
  - Highest overall burden affect poor people in large emerging-market economies in the G20
    - Brazil, China, India, Indonesia (+ Nigeria)

Improving health of the poor
Investing in the health of the poor, NTDs, and EIDs

Intrinsic arguments
• The poor are worse-off
• Human rights and equity

Instrumental arguments
• Emerging diseases can affect everyone
• When there are market failures…
  – Shared interest and need for global coordination
• Investing in (poor) people’s health is investing in economic development

How to improve health among the poor and marginalized?

• Priority to **poor people or poor countries**

• Priority to **health**

• Priority to the **diseases of the poor**
  – Efforts against NTDs and EIDs
    • DNDi, MSF, CEPI, WHO R&D Blueprint for Action to Prevent Epidemics

• Priority to **universal health coverage**
  – WHO and country level leadership
How to improve health among the poor and marginalized?

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An investment case on NTDs and poverty diseases

- Good value for money
  - Cost of investment to prevent NTD burden: <US$1 billion per year, potentially as low as US$300-US$400 million

- Sustainable progress <-> co-benefits NTDs and EIDs
  - Universal Health Coverage and public health initiatives
  - Global financing mechanisms
    - De-risk investments and incentivize R&D
    - Address neglected areas and marked failures
    - Secure global public goods and global health security

Conclusions

• Diseases of poverty affect poor people in low, and increasingly, middle-income countries

• The burden of disease, including the NTD burden, is higher among the poor

• Poor people and underfunded health systems may be at particular risk facing epidemics and emerging infectious diseases

• Investment in the health of the poor, poverty diseases and universal health coverage is a necessity to reach the SDGs on health and poverty
Thank you!

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