Public health: Needed Good Policies Better Practises

The 14th World Congress on Public Health 2015 kick-started with a press conference on February 9 at the Press Club, Kolkata.

The theme of the 14th Congress is healthy environment makes healthy people.

Addressing the media, James Chauvin, Immediate Past President of World Federation of Public Health Association (WFPHA) and Co-chair of 14th WCPH International Organizing Committee (IOC), stressed the urgent need for change both in policy and public health response & services around the world. What we really need are "good policies, better practices," he said. The event is being jointly hosted by the World Federation of Public Health Associations (WFPHA) and the Indian Public Health Association (IPHA). It is held every three years.

Mr J. Ravi Kumar, President of IPHA called for the need to clean our environment because "Eighty per cent of common illnesses are preventable, with a cleaner environment," he said.

The President of WFPHA and Co-chair of WCPH Scientific Community emphasized the multi-pronged approach to public health, by looking at issues such as pollution, climate change and added "as public health professionals, we members of WFPHA, have an individual and collective responsibility in making our values a reality."

Dr Dipika Sur, WCPH, Scientific Committee, Co-chair reiterated that the environment was certainly responsible for communicable diseases, for which a conference like this, would extend support to research, capacity building and training to health professionals, who may not be only medical practitioners.

PUBLIC HEALTH CONGRESS RETURNS TO KOLKATA AFTER 34 YEARS!

The first public health world congress in Kolkata was held in 1981. The Congress returns to the city after 34 years and as Dr Madhumita Dobe, Organizing Secretary of 14th WCPH said at the press conference that the city has a rich legacy of public health as it was here that the Institute of Hygiene and Public Health was first set up. The Congress travels to Kolkata from Addis Ababa where it was held in 2012.

BRICS AT 14th WCPH

For the first time, BRICS countries - Brazil, Russia, India, China and South Africa - will be represented as a group in the global conference. Brazil is the partnering country.

"Those are major emerging economies of the world and it is very important to have them as part of the discussion and solutions. So that is why we need to have them," said James Chauvin, WFPHA immediate past-president and co-chair of the conference.

"We want to see countries like India, Ethiopia and South Africa able to define what they see as the solutions and that they are not dictated by other countries," said Chauvin.

According to Mengistu Asnake, WFPHA president and co-chair of the WCPH Scientific Committee, one of the latest concerns is to link the growing economy to the needs of health in these countries. “Earlier most of the problems were related to communicable diseases and with the growing economy there is change in the lifestyle status and non-communicable diseases (heart diseases, diabetes) are becoming more prevalent. The care given in these economies is not comparable to more developed countries,” said Asnake.

Source: Websites

ISMOPH 2015

The 3rd International Students’ Meet on Public Health (ISMOPH 2015), the satellite event of the 14th World Congress on Public Health (WCPH 2015), reflected a vibrant forum spread over Feb 9 and Feb 10, organized by the Student Assembly of Public Health, India (SAPHI) in association with International Federation of medical Students’ Association (IFMSA), African Public Health Students association (APHSA) and American Public Health Association-Students Assembly.

Spread over several sessions, ISMOPH 2015, this international event for students at different stages of their educational endeavours from different disciplines of public
health, including modern medicine, nursing, social sciences, veterinary sciences, environmental sciences, dentistry, alternative medicines and others, brought together students on a common platform to study, strengthen, and advocate with good communication skills "Healthy People - Healthy Environment".

In order to tap the vast reserve potential of young students all over the world, the focus this year was on an all round diaspora of public health topics ranging from workshops on social determinants of health, disaster management to the concerns of geriatric population, mental health care, nutritional highlights including satellite sessions on important public health challenges and career marts.

ISMOPH is an innovative global health initiative that is organized for students and young public health professionals and the people from medical or health sciences by their peers all over the world. It was held for the first time in Istanbul, Turkey, in 2009 in conjunction with the 12th World Congress on Public Health, which was focused on 'making a difference in global public health' through education, research, and practice. Participation was visible from students, health care workers and health trainers from all over Indian subcontinent and from UK, USA, Brazil, Switzerland, Australia, Austria, Canada, Denmark, Nigeria, Spain, Turkey, and SAARC countries and associated with WHO SEARO, UNFPA, ICMP, NNED, Public health Foundations of different countries, NIDM, Department of disaster management, Govt of India, among others.

**ISMOPH in pictures**

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**Congress Venue**

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Mental Health: Where do we stand?

Some of the most erudite authorities on psychiatry opened up in a seminar on the current state of community mental health in India and its semantics. Among the speakers present were Dr. Sujit Sarkhel, Prof. Om Prakash Singh, Dr. Arunujyoti Barua, Prof. Debasis Basu and Dr. Soumitra Ghosh.

Dr. Barua shed light on the concept of vulnerability—the susceptibility to be afflicted by mental and/or physical illnesses. She went on to divide our populace into the different age based vulnerability groups. According to the WHO, these age groups are children, adolescents, adults and the elderly. The type of vulnerability found may be categorized as biological/genetic, psychological and social, whereas the psychosomatic factors include migraine, disaster, trauma, physical disability, chronic illnesses etc.

WHO – SEARO WORKSHOP

Professor Davison Munodawafa, Programme Coordinator (Determinants and Risk Factors, WHO Regional Office for Africa, Congo) acted as one of the two main facilitators and started off the proceedings by establishing a brief overview of social determinants of health and their influence in setting up a public health program. These include risk factors found in one's living and working conditions, for e.g. distribution of wealth, influence and power, as opposed to more personal behavioural risk factors or genetics.

Dr. Suvejee Good, Programme Coordinator (Health Promotion and Social Determinants WHO SEARO) the other main facilitator, spoke at length about Health in All Policies. “One for all, and all for Health” was the general refrain in her talk as she skillfully spoke about incorporating health and healthcare considerations in the course of normal policy discussion, since all polices influence health in some way or the other.

Paul Rosenberg, Technical Officer, Urban Health WHO built his talk around the important issue of urbanization and health inequity. Armed with solid statistics, Mr. Rosenberg stressed upon the urgency of the alarming situation of declining health in urban areas. India would be 50% urban by 2050, and India, China and Nigeria, he said, would comprise over 37% growth in urban population of the world. He explained the migration of workers from rural background to urban cityscapes and how it lead to a proliferation of urban poverty. He also presented city wise analysis of ‘rich areas and poor areas’ and showed the direct correlation of life expectancy on the neighbourhood of habitat.

Dr. Chatri Charoensri, MOPH Thailand took his session post lunch and took the attendees through a journey of the Thailand experience on Community health governance as key mechanism to response to Social Determinants of Health. Basing his point on common bonds in community, he cited examples of how Thailand harnesses the power of social determinants to address the issues presently plaguing most health programs in South East Asia.

Public Health: A Kolkata perspective

Dr. Subrata Moitra, chairman of MDEG, Govt. of West Bengal addressed the issue of public health in Kolkata. Starting with the historical perspective of public health in Kolkata dating back to the outstanding works of sister Nivedita and Ronald Ross, he went on to focus on the importance of wetlands, their role in sustainable development and their capacity for waste management, paddy and fish cultivation, etc. among others. As a natural reference, the importance of green areas in Kolkata came up as Dr. Moitra compared Kolkata’s condition to 11sq.km Epping Forest in London. He also touched upon vital points like the preservation of water and natural resources, and advocated the use of solar, electric and other alternative sources of energy. Citywide underground parking and better management of the canal system were also suggested for a better state of public health in Kolkata.

Health Economics

Ever since a definitive article in 1963 published by Kenneth Arrow drew conceptual distinctions between health and other goods, Health Economics has become one of the most important aspects of healthcare dealing with issues relating to efficiency, effectiveness, value and behaviour in production and consumption of healthcare. Therefore, it was no surprise when Health Economics was one of the first workshops to be conducted at ISMOPH 2015 (International Student’s Meet on Public Health) under Prof. Achin Chakraborty, Professor of Economics and Director, Institute of Development Studies Kolkata.

His associate, Dr. Subrata Mukherjee, PhD, Assistant Professor, IDSK plunged straight into government intervention in healthcare and the methods it uses for better implementation of their healthcare programs at optimal cost. He compared Cost Benefit Analysis, which is measured by monetary units based on individual compensation, and the Cost Effective Analysis, which is measured by natural units such as life years gained, disability years saved etc., stating that CEA was the more accepted form of analysis as it comes with lesser monetary restrictions to be laid on the given healthcare program.

When Dr. Arijita Dutta, PhD, Associate Professor, Department of Economics, University of Calcutta, took over, she masterfully carried the baton forward explaining the measurement of impact of the intervention. She used examples of her own studies conducted in West Bengal, citing examples of the Jnani Suraksha Program, a public healthcare initiative taken by the Government to prevent childbirths at home without any medical assistance.

Dr. Simantini Mukhopadhyay, PhD Assistant Professor, IDSK quickly established a child’s health using the utility maximization principle in Economics. She emphatically stated that a child’s health and nutrition does not only depend on the family's budget constraint, but also its gender, the level of education of the mother and in certain cases, the economic power that the mother brings to the table.
Places of Interest in Kolkata

Calcutta Walks – Experience Calcutta in the most real and authentic way. Calcutta Walks is an organization that arranges for city walks and other journeys in and around the city. You can choose to walk, cycle or take local public transport. You can also choose the theme of your walk – photographic, historical, gastronomic and so on. Their website calcuttawalks.com has all the details.

Calcutta is a city known for various faiths. Well-known places of worship include Saint Paul’s Cathedral, Greek Orthodox Church, Jewish Synagogue, Chinese and Parsi temples. Tipu Sultan Mosque and the famous Kali temples of Kalighat and Dakshineshwar are worth a visit as well.

Culinary delights - No visit to the city is complete without sampling the local culinary delicacies. We suggest you try the Calcutta biryani (aromatic rice with meat and a whole potato), kathi roll – a paratha wrap stuffed with kebabs & onions. Or head over to Chinatown for a taste of authentic Calcutta Chinese meals. For desserts, the choices are jaggery flavoured sweets (known as nolen gurer mishti) and for some fusion, traditional sweets topped with milk chocolates!