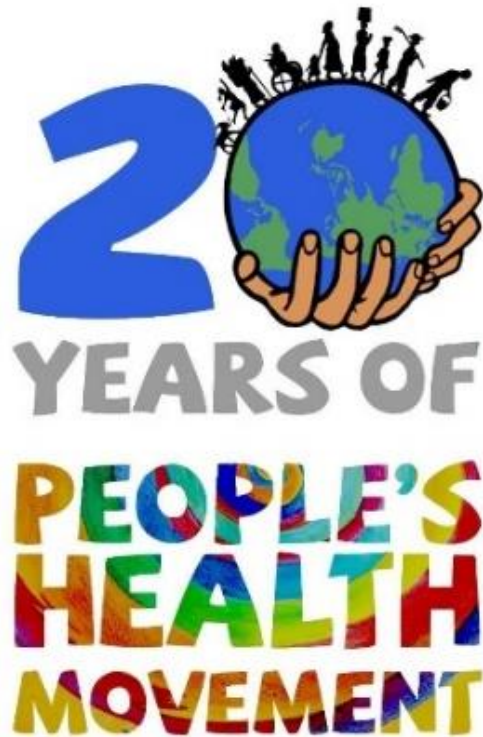


Charting a social determinants of health and human rights approach to COVID-19 responses



Fran Baum

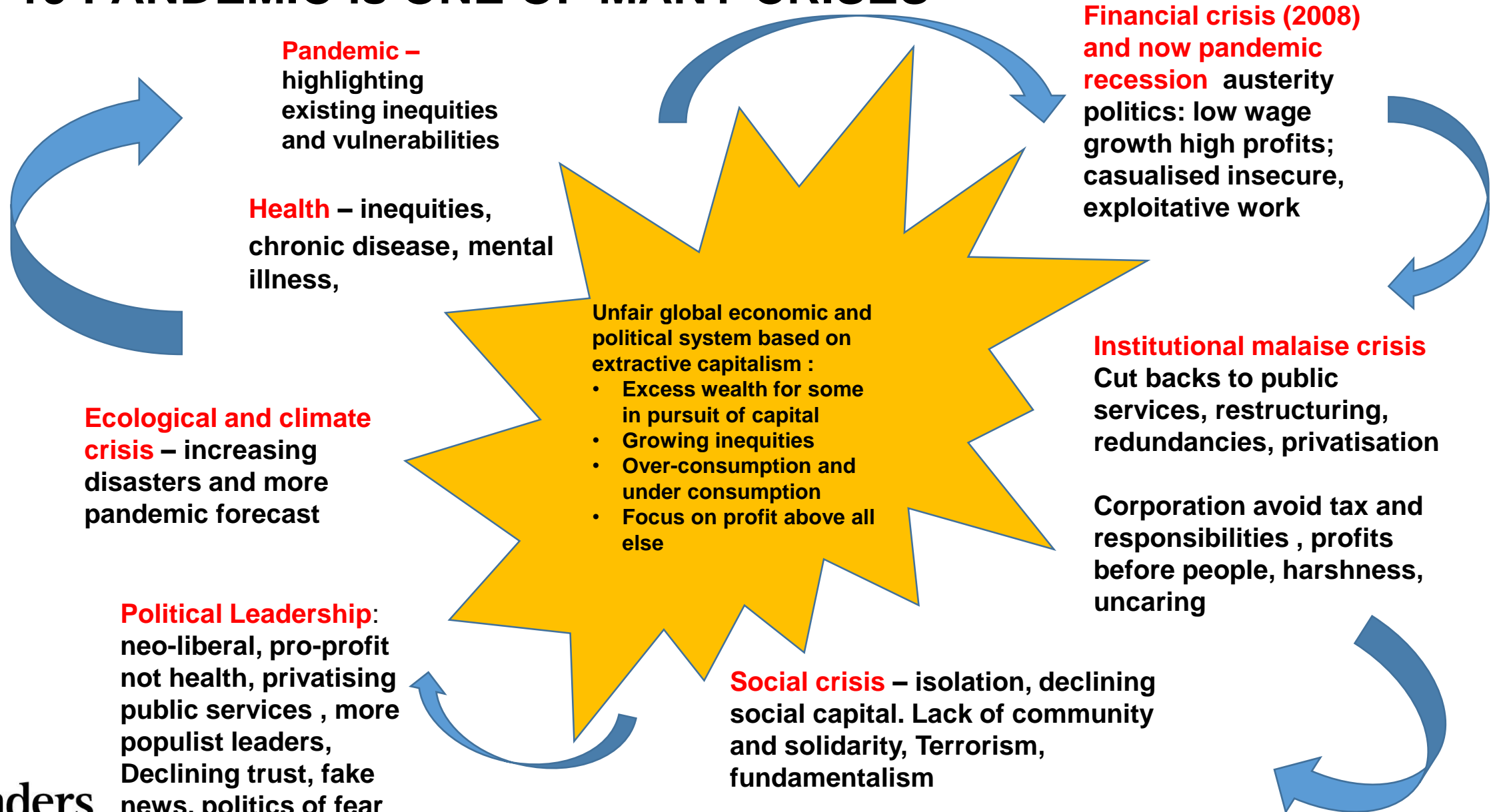
People's Health Movement & Southgate Institute for Health, Society and Equity

PMAC Plenary 2: How are we dealing with COVID-19?

31st Jan 2021

@baumfran

Covid-19 PANDEMIC is ONE OF MANY CRISES



Groups whose vulnerable circumstances were exposed by COVID

- People living in poverty
- Black people
- Ethnic minorities
- Indigenous peoples

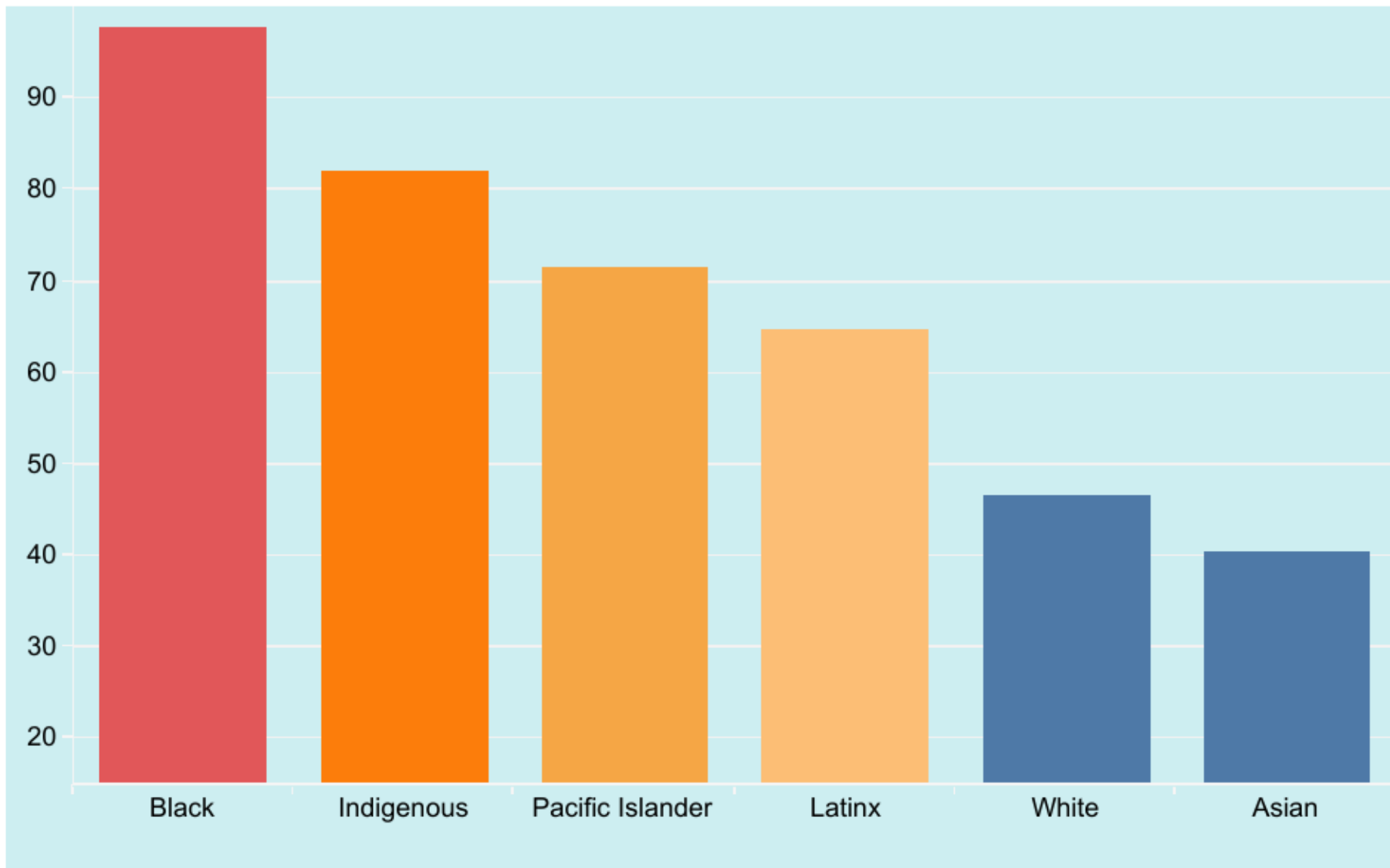


Paremoer, L., et al. (2021). "Covid-19 pandemic and the social determinants of health." BMJ **372**: n129.



Covid-19 Death Rates are Higher for Black and Indigenous People

U.S. deaths of Covid-19 per 100,000 people by race, through September 15, 2020



Source: APM Research Lab

Covid-19 highlighted existing inequities

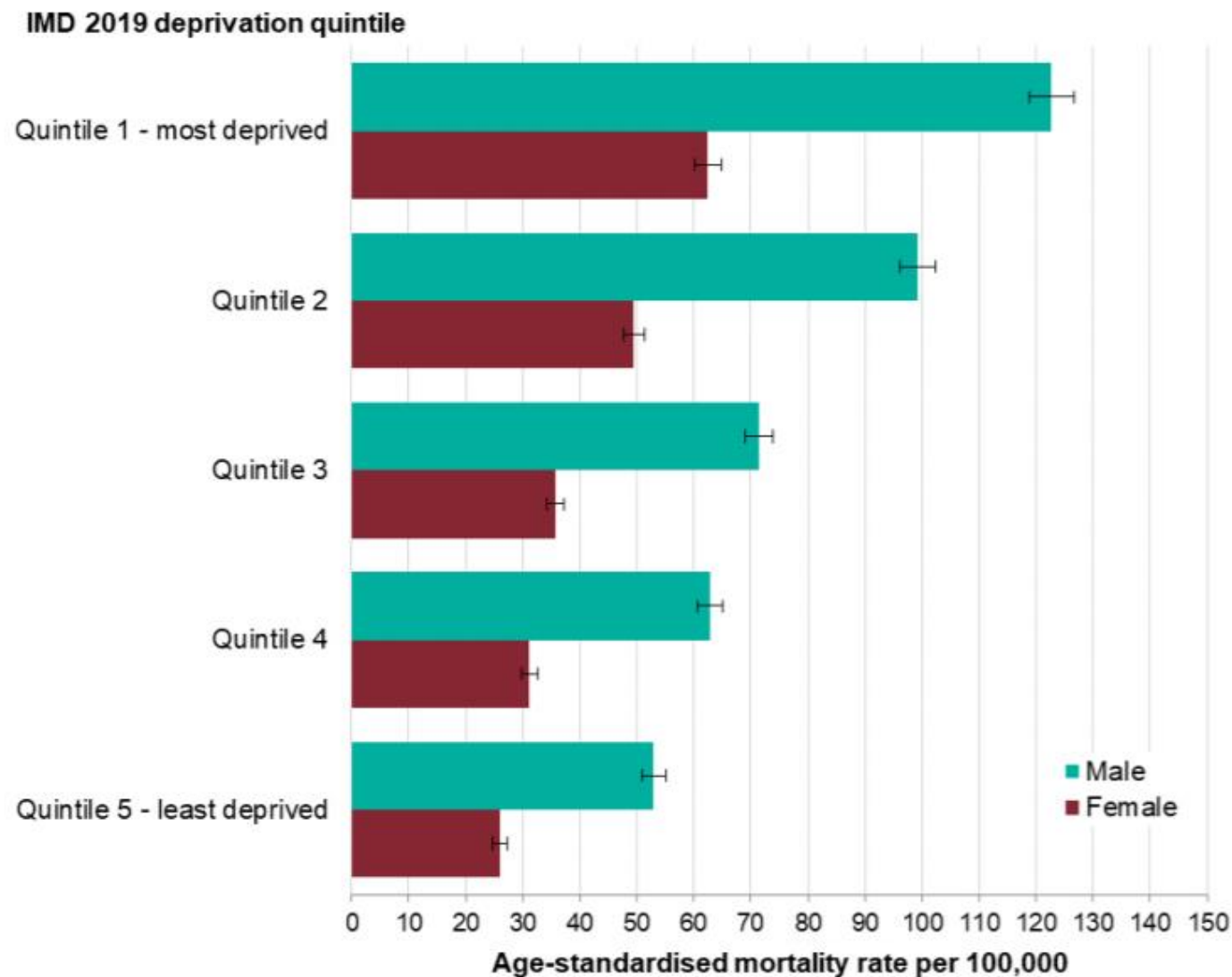


Figure 3.4. Age standardised death rates in laboratory confirmed COVID-19 cases by deprivation quintile and sex, as of 13 May 2020, England. Source: Public Health England COVID-19 Specific Mortality Surveillance System.

Exploitative working and living conditions

- Casual work, multiple jobs, lose income if isolate, low income
- Precarious workers often have other vulnerabilities e.g. migrants (Indian migrants)
- Women especially exposed as majority of care workers (formal and informal) e.g. CHWs
- Loss of income – no protection

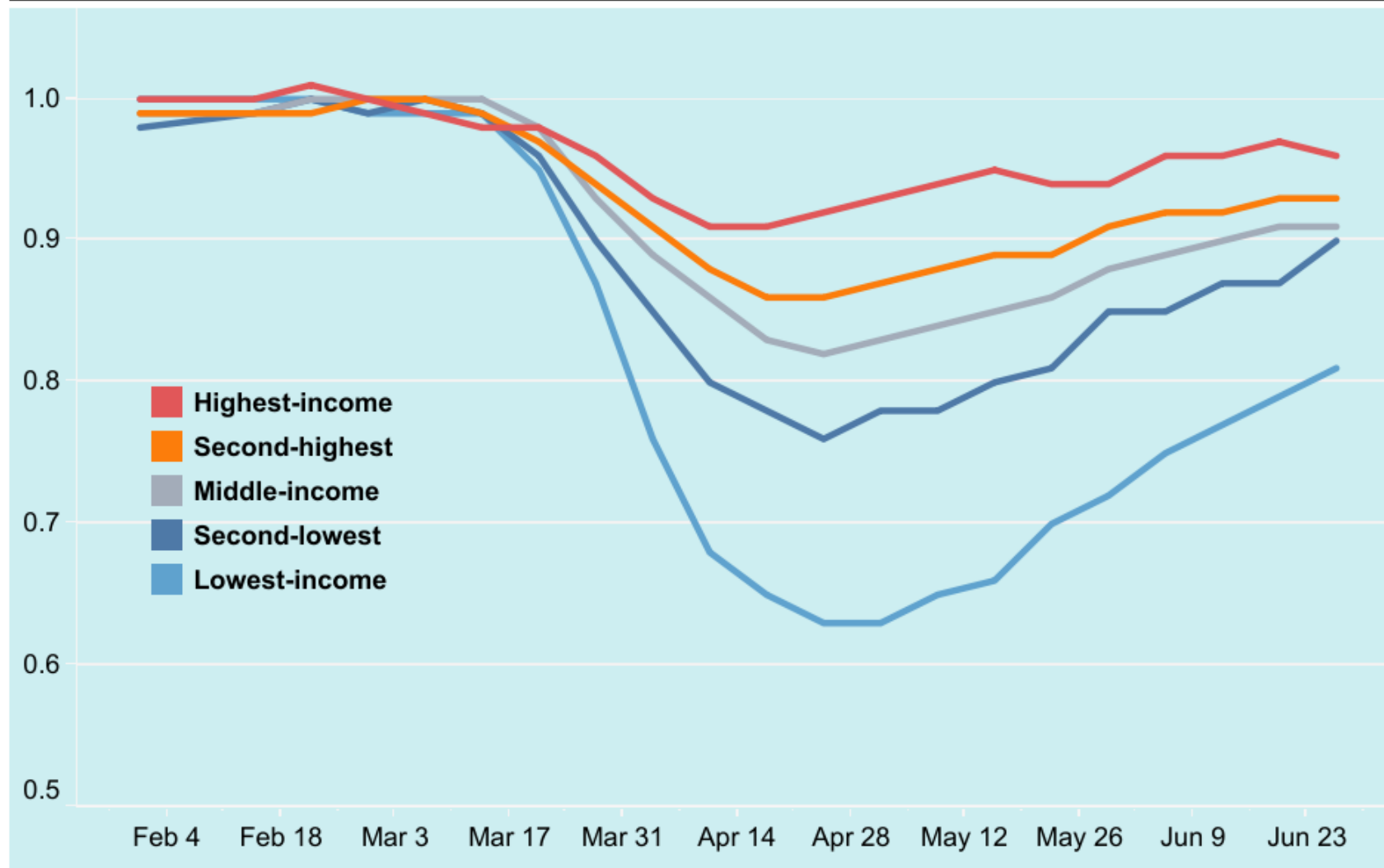
• Example of Meatworkers

- Many clusters globally
- Often migrants
- Poor air quality
- Low wages
- Casual – no sick leave
- Communal transport and housing common



Low-Wage Workers Have Higher Pandemic Job Losses

Change in U.S. employment levels by income group, relative to February 1, 2020



Source: Becker Friedman Institute for Economics, University of Chicago, July 2020

Oxfam report says rich getting richer and poor getting poorer amid coronavirus pandemic

By business reporter [Nassim Khadem](#)

Posted 5d ago, updated 5d ago

26th Jan 2021



Billions of people were already living on the edge when the pandemic hit.

Key points:

- Worldwide, the wealth of billionaires increased by \$US3.9 trillion between March 18 and December 31
- But it could take more than a decade for the world's poorest people to recover from the economic impacts of the pandemic, Oxfam says

The world's 10 richest men have seen their combined wealth increase by half a trillion dollars since the pandemic began — more than enough to pay for a COVID-19 vaccine for everyone and to ensure no-one is pushed into poverty by the pandemic.

PHM response: Equal Access to COVID Technologies (EACT)

- Monitor people's access to health technologies
- Mobilise community and civil society networks
- Advocate at institutional and governmental levels for both institutional and structural reform,
- Prepare and distribute educational and informational resources

Global project co-ordinator

Prasanna S Saligram

prasanna@phmovement.org



phmovement.org/eact/

Apps Adelaide Forecast BankSA Internet Ba... Flinders University -... Google Internet Starturl Microsoft Fran Bookmarks oain

Health for All Now!
People's Health Movement

About Us ▾ What we do ▾ Get Involved ▾

Project EACT: Equitable Access to Essential Health Technologies in the context of COVID 19

Updated 18 August 2020

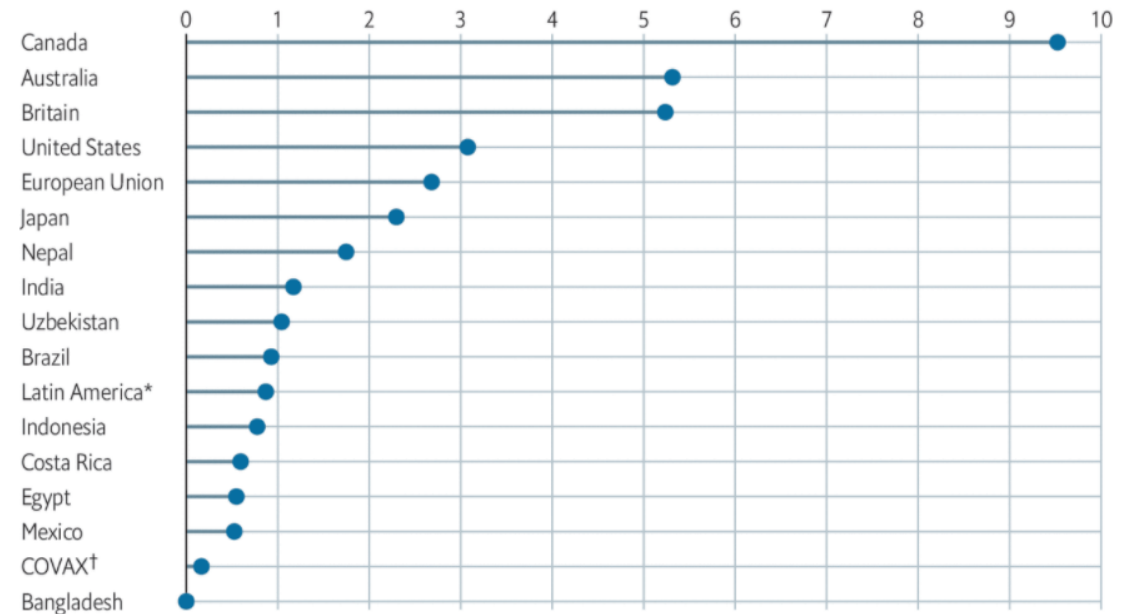
Announcement:

PHM Web Briefing: Proposed TRIPS waiver and the scaling up of production of vaccines and other health products in the pandemic context

Zoom, Friday 6 November, from 1100 UCT

Calling the shots

Covid-19, confirmed orders of vaccine doses per person, 2020



Sources: Duke Global Health Innovation Centre; GAVI; World Bank *Excluding Brazil †An organisation working for equitable access to vaccines

The Economist

We need social as well as biological vaccine

- a life with security
- opportunities that are fair
- a planet that is habitable and supports biodiversity
- governance that is just.

More details in:








Paremoer, L., et al. (2021). "Covid-19 pandemic and the social determinants of health." BMJ **372**: n129.

Baum & Friel (2020) MJA <https://insightplus.mja.com.au/2020/36/covid-19-the-need-for-a-social-vaccine/>









Country rankings

This table provides a ranked comparison of the average performance over time of countries in managing the COVID-19 pandemic in the 36 weeks following their hundredth confirmed case of the virus. In total, 98 countries were evaluated, based on the availability of data across the six indicators used to construct this Index. *

Results can be sorted by rank or alphabetically.

RANK ▾	COUNTRY/TERRITORY ▾	AVERAGE
1	 New Zealand	94.4
2	 Vietnam	90.8
3	 Taiwan	86.4
4	 Thailand	84.2
5	 Cyprus	83.3
6	 Rwanda	80.8
7	 Iceland	80.1

Wealth not essential
for good pandemic
response – good
health at low cost

RANK ▾	COUNTRY/TERRITORY ▾	AVERAGE
91	 Oman	20.0
92	 Panama	19.7
93	 Bolivia	18.9
94	 United States	17.3
95	 Iran	15.9
96	 Colombia	7.7
97	 Mexico	6.5
98	 Brazil	4.3

Life with security

- Universal system to guarantee health services, income, employment housing and energy for all;
- Progressive taxation system including national and international agreements to prevent individual and corporate taxation avoidance;
- Binding and enforced treaties to avoid war, occupation and conflicts and encourage international co-operation
- Dealing with legacy of extractive capitalism (see Bump et al BMJ, 2021)

Fair opportunities

- Universal free or affordable education from early childhood to tertiary level
- Racial, sex and disability discrimination legislation and enforcement
- Fair and decent employment
- Urban, rural, food environments that support healthy living choices for all

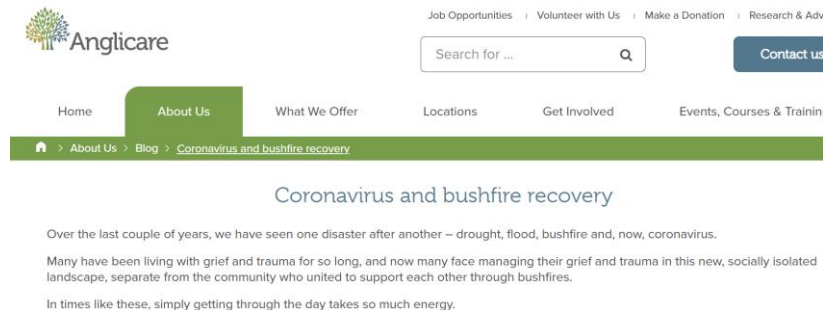
Funded by reducing wealth inequities (e.g. taxation, death taxes, regulate illicit financial flows)

a planet that is habitable and supports biodiversity

“COVID-19 is the latest dangerous infectious disease facilitated by human behaviours that provide transmission opportunities from animals into humans, other examples include Zika, Hendra, Ebola virus disease, SARS, Middle East respiratory syndrome, and avian influenza” Jenkins et al The Lancet

DOI: [https://doi.org/10.1016/S2542-5196\(20\)30165-0](https://doi.org/10.1016/S2542-5196(20)30165-0)

Cumulative trauma



Poor mental health got worse^{7,8} – for example in the State of Victoria approximately one in five reported an increase in psychological distress.

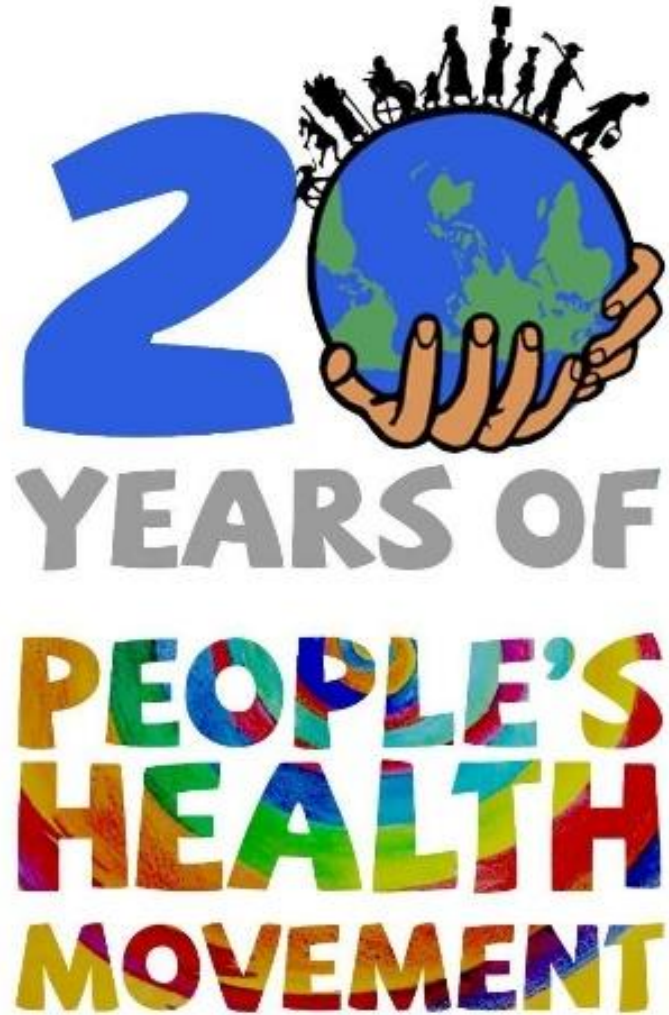
Whilst the overall rate of high psychological distress was 16%, rates were far higher among people who were unemployed (27%), people with a disability (29%), Aboriginal and Torres Strait Islander Australians (28%), and people from bushfire affected communities (41%).⁹

Governance that is just

- Global governance for health rather than profit e.g. trade agreement IP rights
- Binding treaty on business (TNCs) and human rights that is endorsed
- Democratisation of governance of all institutions (universities, health and social services, banks)
- Worker empowerment – trade unions, co-operatives, labour protection laws
- Support and protection for civil society

All these measures involve tackling unfair distribution of power and resources – so how will we do this peacefully?

Coivd has given us a chance to pause, reflect, considerwill we take that opportunity and create a sustainable, healthy and equitable world?



Fran.baum@flinders.edu.au
@baumfran