

## Canada 2010: what should global health expect?



For South Africa in 2010, it is the World Cup. For Canada, it is the G8—on Jan 1, 2010, Canada takes over the G8 presidency. As the predicaments facing the world's leading economies grow ever more complex, Canada's global leadership has never been more keenly needed. Over the next 15 months, Canada has an opportunity to make a decisive impact on global health.

Canada could learn a great deal from Japan's example. Japan occupied the G8 presidency in 2008. The country's foreign policy team, together with national health leaders, prepared early. In 2007, Japan's foreign minister signalled his commitment to international health through human security.<sup>1</sup> The government proceeded to create an academic collaboration to propose action on health systems.<sup>2</sup> That proposal fed directly into the G8 meeting itself<sup>3</sup> and led to a post-G8 process that identified key policy areas for priority action: the health workforce, financing, and information.<sup>4</sup> An attempt was made at a collaborative handover with Italy in 2009,<sup>5</sup> but internal Italian political distractions—the personal life of Silvio Berlusconi—made 2009 something of a dead year in G8 history.<sup>6</sup>

It is now time for Canada to restart the G8 engine. Prime Minister Stephen Harper has already signalled four priorities: the global economy, climate change, development, and democratic governance. But Canada's health community has so far been silent publicly on what Canada's priorities should be. Canada has many natural advantages to shape its international policy—world-class universities with global ambitions, a history of international policy influence (eg, the 1974 Lalonde report, which redrew the boundaries of health), front-rank scientists and intellectuals who have redefined what is possible in health,<sup>7-9</sup> and increasing overseas development assistance.

The most prominent anomaly Canada has to address is the failure of the international institutional and donor architecture to address in any comprehensive and coherent way the catastrophic failure in progress towards the Millennium Development Goals (MDGs).<sup>10</sup> Integrating funding for maternal, newborn, and child health into the Global Fund for AIDS, Tuberculosis and Malaria and the US President's Emergency Plan for AIDS Relief is urgently needed if MDG targets are to be met in 2015. But beyond rebalancing existing programmes,

Canada's unique experience as a nation could lead it to make important contributions in five further dimensions of global health.

First, health systems. Canada's health service benefits from relatively low health disparities, high levels of public solidarity, and a strong commitment to equity. Universal coverage is now top of the global health agenda.<sup>11,12</sup> Canada must deepen and broaden G8 commitments to health-systems strengthening.

Second, climate change. This issue is already a Canadian priority. But the health aspects of global warming are largely invisible. The *Lancet-UCL Commission on the health effects of climate change*<sup>13</sup> argued that global warming is the biggest threat to health in the 21st century. This view has been backed by doctors' leaders.<sup>14,15</sup> Health advocates in Canada need to press this point on their politicians as additional evidence for concerted action.

Third, peace through health. Canada has been the leading nation bar none to develop the concept of peace dividends through policies on health.<sup>16-18</sup> This idea has catalysed governments to embrace health as a vital force in foreign policy.<sup>19</sup> As suffering escalates in zones of conflict such as Afghanistan,<sup>20</sup> embedding health in political thinking is critical to promote peace and reconstruction.

Fourth, indigenous health. Some Canadian writers, such as John Ralston Saul, argue that Canada is more

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First nations of British Columbia paddlers in traditional cedar dugout canoes, Vancouver, British Columbia, Canada

Aboriginal than European.<sup>21</sup> In *A Fair Country*, Saul suggests that Canada's inclusiveness and egalitarianism stem from these indigenous roots and that if Canada is to free the full creative energy of future generations, it must embrace its indigenous past. With 400 million indigenous people living in disrupted, exploited, and marginalised circumstances today, Canada's voice—as a country with an important indigenous population—has the potential to command respect and influence.<sup>22,23</sup> The recent Commission on Social Determinants of Health emphasised the importance of inclusion and empowerment for indigenous peoples in governmental policy making.<sup>24</sup>

And finally, global evidence and ethics. As the birthplace of evidence-based medicine, Canada's health community should have a strong voice about the way health metrics are used to shape global health policies. To be fair, Canada's health community has called for increased Canadian awareness, involvement, and funding in international health.<sup>25–27</sup> These calls need to be channelled into a more coherent response. Perhaps it is time for a CHANGE—A Canadian Health Action Network for Global Equity. The creation of such a coalition of Canadian academic and institutional health interests could contribute significantly to Canada's G8 agenda. A CHANGE could also offer a mechanism for sustained follow-up and continuity—between different political parties and as the G8 chair rotates between nations.

Canada's evolution as a nation through the lens of health reveals a deepening commitment to global affairs. In the 19th century Canadian doctors and public health officials reached out beyond Canada's borders to attract health workers to help build a national health system. The country's planners broadened the reach of Canada's health system westwards. Health leaders identified the crucial importance of reliable information to shape the progress of Canada's development. Severe acute respiratory syndrome illustrated the powerful fact that no nation can be immune from the global forces of disease. And Canada's political leadership now recognises that the institutions that govern the world today need to become more democratic and representative.

A long-forgotten but exemplary Canadian public health leader, Charles Hodgetts, once wrote about "health as a foundation of Government".<sup>28</sup> This is as true

today in a global context as it was in Canada a century ago. It is up to the Canadian health community to seize the opportunity that 2010 now offers.

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