Access to health inputs: challenges for the Third World

Social exclusion in the health area is alarming. In Latin America, with a population of some 560 million, half of the inhabitants are not covered by social protection mechanisms, and more than 100 million lack access to health services due to economic or geographic reasons, and even access to safe drinking water or basic sanitation. In this context, the challenges for our health systems and services (in the attempt to guarantee access to essential inputs) clash with the pattern of inequity that makes us a region of imbalance, extreme income concentration, and glaring injustices.

In the framework of ensuring access to inputs, we need to keep in mind that we are dealing with vulnerable products, services, and populations. We must thus strive to balance the guarantee of access with equity standards and quality products. Access to inputs should be considered within the framework of policies for health, science and technology, and industry. Within this triple focus, we interweave products representing innovation, therapeutic advances, and a market in which we take competition and prices into account and overcome barriers to access. We contend that access to such inputs, especially essential medicines, should be considered within the framework of health policies and incorporated into health systems and services as a fundamental human right.

The main objective of the Pan American Health Organization/World Health Organization strategy for cooperation with the Americas is to strengthen national health systems by means of a triple focus: resolve the unfinished agenda, especially ensuring the extension of access to quality products and services; protect existing achievements, emphasizing the sustainability of social policies; and tackle the new challenges, including how to guarantee access to new products and regulate the pharmaceutical market in relation to new Biotechnology, Genomics, and Proteomics. We also feel that the new regulatory frameworks that are being imposed on Latin American countries during the negotiation of free trade agreements are more restrictive than the global agreements underwritten within the sphere of the World Trade Organization, especially the TRIPS Agreement.

The main barriers to access to new products and technologies include the so-called TRIPS-Plus free trade agreements, imposing restrictions beyond our national legislations and preventing the entry of competitive products at lower prices on the market, which becomes monopolistic based on patent protection. The terms approved in the free trade agreements override the legislative frameworks and substantially alter the policies for access to health inputs.

Latin America is not a homogenous region, and the solutions cannot be uniform. Wherever there is innovation and the long road between discovery and access, they deserve integrated policies. The lessons learned in Brazil, with its Science, Technology, and Health Innovation policy and the alignment of such policy with economic, social, and cultural development are reflections to ensure investment capable of generating knowledge based on social needs that influence the research agenda, guaranteeing innovations in products, processes/methods, policies, and strategies. Let us think collectively and dare to take the leap from isolated national policies to sub-regional and regional integration, thereby guaranteeing investment in the improvement of our health conditions.

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