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Health and the MDGs: add a measure of politics

Bringing politics into epidemiology is necessary but fraught with difficulties, say experts



Source: SXC/g-point

Epidemiological research should examine the “political elements” getting in the way of social changes that hold back progress towards the Millennium Development Goals (MDGs), according to Diana Gil-González and colleagues. Writing in the April issue of *Journal of Epidemiology and Community Health*, they suggest it isn't enough to study the health impact of social factors like poverty.

“From a political epidemiology perspective, the intention is to go even further,” explain the authors, from the University of Alicante in Spain. “This can be achieved simply by applying epidemiological methodology to the study of the effect that decisions (or lack of decisions) made by the institutions representing political power have on a population's health.”

The United Nations set eight MDGs as targets for improving health and well-being globally by 2015. But despite some progress, prospects of achieving them are bleak. Gil-González and colleagues argue that efforts to pinpoint political reasons behind this can help.

“The aim would be to identify how state and international organisation policies... influence population health,” say the authors. This might include “policy levers” that trigger a cascade of events that can affect health, they explain, or barriers to taking positive action. They suggest specifically the potential impact of economic reform and other policies promoted by international financial institutions and adopted by many developing countries.

Non-mainstream epidemiology

Their proposed research agenda goes beyond mainstream epidemiology. As currently practised, the study of disease patterns within populations takes a view of health that excludes politics. It also focuses on illness in individual people, the authors point out, rather than “society health problems”. But individuals are often not aware of influences on health outside their immediate environment — democratic freedom, for example, government policies, or the management and structure of institutions.

The “possible cause-effect relationships” between politics and health should be examined against the delays in achieving MDGs, argue Gil-González and colleagues. “Although each country's social and political history reflects unique and specific contexts in which political factors may not have had the same effect, this type of research is nevertheless an appropriate approach to the MDG, given that the research population is the totality of countries in the world order.”

Colin Butler, from the National Centre for Epidemiology and Population Health at The Australian National University in Canberra, says epidemiological studies rarely analyse the role of political factors in health. “Our funding bodies (at least in Australia) discourage overtly political analysis,” he points out.

Nevertheless, more and more scientists accept that this should be done, suggests Francoise Barten, from Radboud University Nijmegen Medical Centre in Nijmegen, The Netherlands. “There is increasing recognition of the need to examine the health impact of politics, policy-making processes, power.”

Obstacles in practice

Barten says the barriers have to do with having access to all the information required to make such assessments, but also with the acceptance of political epidemiology within the research community. Getting the results published without jeopardising one's career can be a challenge, she explains. “I think this knowledge gap exists as the issues are too sensitive and would expose some actors.”

When it comes to the MDGs, the conflicts or political obstacles involved in pursuing this kind of research are even steeper, says Butler. But more fundamentally, he sees problems with measuring the effect of political factors on health.

David Kriebel, from the School of Health and Environment at the University of Massachusetts Lowell in the USA, shares this limited optimism, and questions whether epidemiological studies can produce clear evidence of how macro-economic or social policies can affect people's health.

“My concern is that epidemiology does not (yet) know how to accurately measure health impacts that operate at many levels removed from the individual humans who suffer the illnesses and premature deaths which we seek to prevent,” he says. “I would argue that the ‘research agenda’ that the authors advocate should include a substantial effort in improving epidemiologic methodology.”

The confounding effect of a 'third factor' in the relationship between an exposure and a health effect is one of the methodological problems identified by Kriebel. The known limitations of so-called 'ecological' study designs used in epidemiology, which Gil-González and colleagues put forward in the paper, is another obstacle, he notes.

Kriebel agrees with the authors' view that it's vital to assess the health impact of social policies beyond health care. "Many epidemiologists focus too narrowly on proximal causes of disease... than on the social determinants because they feel uncomfortable with 'soft' risk factors and with the messy reality of social and political factors," he points out.

This type of bias towards non-controversial studies is one of the reasons why methods have not advanced, Kriebel suggests. But he remains cautious about the value of this type of study without advancing epidemiological methods — suggesting a catch-22. "There is nothing fundamentally wrong about moving out several levels of social organization to identify national policies for example which are determinants of disease... but many difficult challenges to confront."

Reference and links

1. Gil-González D, Ruiz-Cantero MT, Álvarez-Dardet C. How political epidemiology research can address why the millennium development goals have not been achieved: developing a research agenda. *J Epidemiol Community Health* 2009, **63**:278–80. doi: [10.1136/jech.2008.082347](https://doi.org/10.1136/jech.2008.082347)

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