

EE461 Development Microeconomics

Allie Palmer (6104930398) & Pratipa Kanokkantapong (5904641213)

Summary of Poor Economics—Low-Hanging Fruit for Better (Global) Health?

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In the chapter entitled, *Low Hanging Fruit for Better (Global) Health?* from the book, Poor Economics the issues of public and global health are explained and analyzed. The title references to the seemingly simple and attainable solutions to the world's biggest health problems, the "low hanging fruit". The health problems associated with poor sanitation, poor water quality, mosquitoes, etc have known, easy, and affordable ways to fix the problem yet they are not being utilized. Currently, instead of the accessible, easy preventive measures, we are researching and developing ways to cure the problems, which are typically expensive and more work.

So, the big question is why is this happening? Why are we investing in curing problems that do not need to be occurring in the first place. Turns out, there are many cultural, social, and psychological factors that affect the implementation of public health policies and programs. Many specific cases were laid out throughout the chapter and explained the key factors hindering their success. A key factor that follows most of the preventive measure is that it is too easy for it to be working which stems from a distrust of the health community. Instead of taking and using the free bednets given out for protection against malaria, money is spent for fighting malaria once diagnosed. Instead of using chlorine, bleach, and salt to cure diarrhea at the start, that seems to simple to work so many wait to cure a much more complicated case of diarrhea. Lastly, social

structures in a community can affect the access of water. The linkage of the water system for a whole community with no separation of class can bring some backlash. This is why it is very important to understand and smooth out some cultural practices and beliefs when bringing in public health practices.

It may seem arbitrary of the poor to overlook such simple but effective solutions, but health and specifically, preventative health, is difficult to understand and work towards. We see this in developed, largely educated populations as well. It is difficult for those with the means and education to make the right decisions when it comes to their health (obesity, diabetes, vaccines) so, how can it be expected of the poor? This describes the issue of tunneling we have learned about in class. The poor are so focused on their scarce money source that focusing on non-urgent health matters are not even on their radar. Lack of education and earnings along with other factors described above trap the poor in poverty and poor health.

The direction of poverty and health conditions is still up for debate. However, this chapter argues the eradication of disease first is necessary for the eradication of poverty. With the economics perspective in mind, it makes sense to first ensure a healthy population and then growing the economy. When people are healthy, they can be more productive which makes them more employable and produce more. This all boosts the economy which continues the cycle of employment opportunities that pull people out of poverty. This will help alleviate the inequality gap. Moreover, the investment in public health will be made a top priority since it gives huge gains for everyone. The best policies will be simple and accessible to those who are affected by the problem the most and therefore have the biggest benefit.

A few things can get in the way of preventive care policies being effective. As discussed previously, not assessing and understanding of the environment will not lead to successful policy. Also, corruption governments, like many developing countries struggle with, get in the way of creating health policy. Lastly, government involvement in people's health generates concern on the control of government or the level of paternalism. However, those voicing concerns about paternalism have benefitted from the paternalism in their own country. Also, in the field of public health there are two different types of paternalism. One is soft paternalism and the other is hard paternalism. If there is harm to others avoided or benefit to others than the policy is considered soft paternalism and acceptable to promote. In this case, as it was presented, policies relating to public health matters of sanitation, water, and widespread infectious disease, soft paternalism is reasonable and necessary as it benefits the entire economy.

The responsibility of people's health in the country may not have to fall on the government, especially if it is corrupt. It can be allocated to and by NGOs, firms wanting a more productive workforce, and/or the people themselves. The fact of the matter is that someone needs to take responsibility for health to see improvements in everything else. As it stands, health is an industry profiting from the ineffective preventive policies; drugs are being overprescribed and therefore ineffective leading to more expensive R&D. If we are serious about poverty and its economic consequences not only for the individual, but for the country and the country's network, then it is time to look back at the basics. The basics need to be met to promote a healthy life and a base for economic growth.