



## Ensuring equal access to innovative healthcare



SPC2

**Elin van Oosten**  
Deputy President

**Forum:** Second Special Conference

**Issue:** Ensuring equal access to innovative healthcare

**Name:** Elin van Oosten

**Position:** Deputy President

## Introduction

Everywhere in the world are places that still don't have access to healthcare and more importantly innovative healthcare. Every day approximately 6400 newborns die. The main causes of those deaths are illnesses, therefore, this number could go down if there was equal access to healthcare. (World Health Organization, z.d.) Every year nearly 8 million people die because of the lack of healthcare. Heart diseases are the most common cause of death in the world, which is nearly a third of the amount of people that die yearly. (Dattani, 2023) This is a serious problem that could be solved by access to innovative and high-quality healthcare, not just in More Economically Developed Countries (MEDC's) but also in Less Economically Developed Countries (LEDC's).



Figure 1: Innovative Healthcare

Innovative healthcare is defined by the World Health Organization as a new or better solution that has the potential to transform the impact of healthcare in a positive way. By ensuring that there is equal access all around the world, these numbers will drastically change in a good manner. (World Health Organization, z.d.)

There already is a Sustainable Development Goal (SDG) that is similar to this topic. The third SDG states: 'Ensure healthy lives and promote well-being for all at all ages.' (United Nations, z.d.) This means that the United Nations is already taking action to ensure that healthcare becomes more available and also is continuously improving and developing.



Figure 2: Sustainable Development Goal No. 3

To make an impact on the world and to come up with the best possible solutions and actions to ensure that there will be equal access to innovative healthcare, all nations should work together and learn about others' perspective on this topic through debate.

## Definition of Key Terms

As there are some key terms used in this research report, this is where some of the most important terms are explained so that it is easier to understand the information.

### Less Economically Developed Countries (LEDC's)

Less Economically Developed Countries (LEDC's) is a term that is designated by the United Nations for countries that exhibit the lowest indicators of socioeconomic development, including low income, weak human assets, and economic vulnerability. The classification is based on criteria such as income, human assets (health and education), and economic vulnerability. (UNCTAD, 2021)

### More Economically Developed Countries (MEDC's)

More Economically Developed Countries (MEDC's) are countries that have higher levels of development in economic departments, in technological departments, in political departments and in industrialization. (Revision World, z.d.) This term is often used to differentiate the countries from Less Economically Developed Countries (LEDC's).

## General Overview

### Historical background

Ensuring that everyone has access, to healthcare has been a long-standing challenge that stems from historical disparities and the evolution of healthcare systems. This exploration delves into the origins of healthcare inequality, milestones in the pursuit of fair access to groundbreaking treatments and ongoing efforts to address these disparities.

Throughout history, access to healthcare has been influenced by factors such as status, geographical location and social hierarchies. In civilizations, medical knowledge and treatments were often primarily available to privileged classes. This inequality in healthcare persisted during the Middle Ages when standardized medical care was lacking. There were options for treating common ailments.

The Medical Renaissance of the 17th century brought advancements in medical knowledge; however, access to healthcare remained a privilege reserved for the wealthy. Institutions like hospitals often catered exclusively to classes reinforcing disparities in accessing care. The rise of societies and professionalization further perpetuated inequality within the healthcare system. As medical science progressed during the 19th century effective treatments were developed. However, these innovations were not equally accessible to all individuals. Urbanization and industrialization led to living conditions in cities which contributed to disease prevalence, among the urban poor.

There were major changes in healthcare systems around the world after World War II. Some countries attempted to set up universal healthcare systems, designed to offer complete medical care for all citizens regardless of financial status. This represented the change in direction from healthcare as a privilege to that of right.

In the latter half of this century, medical science and technology made big strides. Innovations in pharmaceuticals, diagnostics and medical devices promised breakthroughs for many ailments. Yet the price of these innovations left opportunities for unequal access. Precision treatments could be pricey, so they were only available to the well-to-do.

The 1980s and '90s were decades of awakening us to disparities in healthcare and the need for fair access even to innovative forms of treatment. The HIV/AIDS epidemic brought to the fore that everyone should have equal access to life-saving medications. This activism and advocacy helped the pharmaceutical companies overcome their reluctance to make antiretroviral drugs more accessible.

In the early 2000s, there was a particular focus on global initiatives and partnerships aimed at addressing infectious diseases. These kinds of endeavors, such as the Global Fund to Fight AIDS, Tuberculosis and Malaria or Médecins Sans Frontières (MSF), were intended to reduce barriers blocking access in developing countries. But obstacles remained, and innovative healthcare is still unevenly distributed.

Global Debates on Health Equity In the 2010s, the recent inclusion of health-related sustainable targets in the international development agendas (for example, the Sustainable Development Goals or SDGs) has spotlighted access to universal healthcare. Guided by both the challenge of non-communicable diseases and that posed by mental health, comprehensive and equitable healthcare systems were also put forward.

In the late 20th and early 21st century gene therapies and precision medicine came into prominence. Before their promise of revolutionary treatments could even be realized, questions were raised as to whether they would ever appear in an affordable or accessible way. But such still-experimental treatments put substantial burdens on our healthcare resources, so they threatened to aggravate existing disparities.

Globalizing healthcare, the COVID-19 pandemic of 2019 has revealed and aggravated inadequacies everywhere. How to ensure the fair distribution of vaccines became a serious problem. Poor nations continued to lag severely behind and fell on deaf ears when they called for help as richer countries managed early success in mass immunization. Here, the tide finally turned: The pandemic once again showed us how global health is not an insular issue and that everyone's access to life-giving inventions must be equal.

Today this difficult challenge is still to ensure equal access to innovative healthcare. Among such endeavors to resolve healthcare disparities are work on changing legislation, efforts at crossing borders and holding vernissages for introducing cutting-edge treatments. Non-governmental organizations, government agencies and global health institutions are still laboring to level the playing field for society's healthy environment.

From equal access to innovative healthcare-with the changing nature of healthcare systems, values in society and changes that have occurred over time in global priorities on public health--the historical trend is apparent. Yet, though there have been successes aplenty and headway made, difficulties remain. The search for health equity is as much of an ongoing process today as it ever was in the past. Lessons from the events of history, both mistakes and successes, provide a framework for shaping policies & practices in order to create innovative healthcare available to all, no matter one's socioeconomic status or geographical location.

### Causes of the issue

How do we ensure equal access to innovative healthcare? Equal is not an easy word with which to negotiate. All kinds of variables factor into the complexity, among them region, country and community--there's simply no such thing as even on safe ground here. There are many social elements--whether economic, political or structural. They contribute to the differences which exist between particular groups of patients in having access to advanced medical treatments at all levels. It is imperative, therefore, to comprehend the reasons for unequal accessibility in innovative healthcare so that sustainable strategies can be developed specifically aimed at remedying each disparity. This will promote health equity for all people--including migrants.

That both sides share minds well-intended, and that one major source of unequal access to advanced healthcare is economic inequality. The expensive process of developing, manufacturing and distributing novel medical treatments on the other hand, makes it difficult for many people and communities to afford. Also, as a consequence of high costs, affordability becomes an increasingly great obstacle. This is especially true in low-income countries and even within higher-income nations for the most disadvantaged groups that may face economic stresses. In the process of privatizing healthcare and taking into account market forces, pricing structures can so encircle large parts of a population with costs to exclude them from enjoying breakthrough treatments.

Current patent systems and intellectual property rights have made it difficult for the general public to enjoy innovative healthcare. Since pharmaceutical companies can secure exclusive rights to produce and distribute new medications, this means that some drugs are effectively monopolized by these firms. While patent protection gives companies a chance to recover research and development costs, it doesn't arrive soon for the poor in countries that can't enforce patents. That means Medicines will take longer to get into LIPs--and also puts off more affordable generic drugs. In situations like life-saving medicines, this problem is very serious. The high cost of patented drugs means they are becoming increasingly inaccessible to those who cannot or will not spend a fortune on their health.

Many diseases, though these are in fact rather prevalent among low-income regions, have been declared to be "neglected" when it comes to investment in research and development. The focus of the pharmaceutical industry is marketable pain. Its main concern lies in where returns are highest on investment, in diseases that affect populations with money: less wealthy? Who cares! You deserve what you get for letting yourself become ill. The lack of interest in developing innovative medicines for these diseases can be seen from the neglect given to neglected tropical diseases. As a result, those who need this kind of medicine most desperately are often denied it entirely. In part because of this lack of funding, health inequalities exist and prevent some groups from benefiting from the most advanced forms of medical treatment.

Healthcare resources are spread unevenly throughout the world. In many low-income countries, setting up and maintaining strong healthcare infrastructures are both problematic. From the lack of healthcare facilities, trained personnel and necessary medical equipment to poor transport systems, many barriers prevent innovative treatments getting where they are needed. The case painfully reminds us that even in a wealthy country, the unequal distribution of healthcare

infrastructure and resources may lead to differentials in access. In turn these groups encounter greater obstacles when seeking out creative applications of advanced methods for human life support capable of breaking reality's shackles

However, unequal access also involves differences in health literacy and awareness. People with low health literacy, however, may not fully understand the advantages of reflected in innovative healthcare solutions; or they might be unaware that treatments exist for their condition; or even if aware They may not know why, there could still on offer holding them back from using it. Also, a lack of information that can lead to some innovative treatments being put in use delayed or too late, can widen the gap between access.

The global governing structures and trade agreements can all affect access to new healthcare. If agreements regulating intellectual property, trade or drug control can influence the availability and affordability of medical advances, then global health would be impacted. If trade policies that place a high premium on the protection of intellectual property rights prohibit access to some drugs made by multinational companies, then how can poor people in regions such as Latin America and China have cheaper alternatives?

Inequal access is also brought on by systemic racism and discrimination within healthcare systems. The minorities may have obstacles to good health including a lack of representative population in clinical trials, or biased medical practice. You can say that they do not even really want quality healthcare facilities. These factors account for inequalities across health outcomes and make it difficult to ensure equal access to the latest therapies; they perpetuate also historical wrongs within healthcare systems.

New healthcare innovations can often be hampered by the regulatory landscape and approval processes. A long, drawn-out approval process for new treatments on the market means those needing them may not get access to a newly approved product in time. Also, legislation which emphasizes strict safety measures can inadvertently prevent revolutionary treatments from reaching the market. This is especially true of emergency situations that require prompt results to save lives.

### **Situation as it is now**

It is quite complicated to provide equal access to the latest healthcare services to everyone. Despite the progress we have seen in certain aspects, there are still challenges that persist which prevent advanced medical treatments from being accessible to everyone around the world. Recently, there have been some good developments in giving people better access to new treatments in healthcare. Due to modern technology and medical research, we now have better treatments for a range of medical conditions, like gene therapies, immunotherapies, and precision medicine have given new hope to individuals. Moreover, there are particular health challenges that require global efforts, such as the ACT Accelerator, which aims to ensure that everyone has equal access to COVID-19 diagnostic, treatment, and vaccine options.

The pandemic has brought a lot of focus on how crucial it is to have the same level of healthcare opportunities, especially when it comes to vaccines. These initiatives try to provide vaccines to everyone around the world, but there are still many obstacles like production, distribution, and some countries being selfish about it which highlights the inequalities. The fact that some people still cannot get vaccines because of problems in their region or population shows how important it is to have global cooperation and mechanisms that give everyone equal access to the vaccines.

A considerable challenge to equal access to innovative healthcare is still the presence of economic barriers. People's access to research and development, clinical trials and the production of advanced medical treatments is limited due to their high costs. Patented medications are not accessible to those who do not have enough money. As a result, public health is affected negatively and the situation worsens in countries where people are already poor.

It's still a challenge to ensure equal access when it comes to intellectual property rights and patent systems. Even though patents motivate innovation, they result in monopolies, which leads to long-term exclusivity for drug companies, and in turn, people do not have access to the medicine for a longer duration. This is a tough issue, on the one hand, we don't want people to die and on the other hand, we need to protect the intellectual property of medication manufacturers.

The uneven distribution of healthcare facilities and resources among nations causes disparities in the availability and quality of healthcare services. Many poor countries have problems setting up good healthcare systems, which limits their ability to treat new and better ways of treating things. The lack of sufficient resources such as equipment and skilled doctors widens the divide in receiving modern healthcare options and services.



Health literacy and awareness are super important in figuring out if people can get access to new kinds of healthcare. People from such communities might find it hard to comprehend the benefits of new therapies, deal with the intricacies of healthcare systems, and make wise choices concerning their well-being. Ensuring that individuals have enough knowledge about healthcare is important so that people have proper interest and can contribute to their own betterment.

There are many attempts going on around the world to make healthcare more accessible to everyone. I think it is necessary for policy makers to work together with non-profit organizations and private sector companies to address the problems of neglected diseases. Additionally, I also believe that investment in research and development for those specific diseases will have a positive impact on communities that are affected.

## Timeline of Key Events

Throughout history, there have been multiple key events that are related to the development of innovative healthcare as well as to the distribution of that healthcare globally and making it equally accessible in every single country.

Date	Event
23 <sup>rd</sup> of February 1962	First successful trial of oral polio vaccine, created by Albert Sabin
6 <sup>th</sup> - 12 <sup>th</sup> of September 1973	Declaration of Alma-Ata created by the World Health Organization. It states that the key to global health is primary healthcare.
1 <sup>st</sup> of January 1994	The Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS) is created due to the establishment of the World Trade Organization (WTO). This impacted the shipping of medicine worldwide and medicine became more accessible globally.
29 <sup>th</sup> of January 1997	Access to vaccines in Less Economically Developed Countries (LEDC's) needed to be improved so the Global Alliance for Vaccines and Immunization (GAVI) was found.

<b>September 2000</b>	Adoption of the Millennium Development Goals by the United Nations. The 6 <sup>th</sup> Millennium Development Goal states to combat HIV/AIDS, malaria and other diseases.
<b>14<sup>th</sup> of November 2001</b>	Due to the adoption of the Doha Declaration on TRIPS and Public Health, prioritizing public health over patent rights in times of crisis in the healthcare sector became allowed in countries.
<b>28<sup>th</sup> of January 2002</b>	Financial recourses for the prevention and treatment of HIV/AIDS was needed do the Global Fund to Fight AIDS, Tuberculosis and Malaria was established.
<b>23<sup>rd</sup> of March 2010</b>	Access to healthcare was expanded for millions of Americans by signing the Affordable Care Act (ACA) into the law in the United States of America.
<b>24<sup>th</sup> of May 2012</b>	The decision-making body of the World Health Organization (WHO), the World Health Assembly, adopts a resolution that highlights the importance of making vaccines accessible globally and the need for development and research on developing countries being disproportionately affected by diseases.
<b>24<sup>th</sup> of April 2014</b>	To improve vaccination coverage and prevent outbreaks of diseases that can be prevented by vaccines, the World Health Organization (WHO) launched the Global Vaccine Action Plan.
<b>13-16<sup>th</sup> of July 2015</b>	The Action Agenda from the Third International Conference on Financing for Development in Addis Ababa highlights making resources available for health difficulties like global health coverage.
<b>September 2015</b>	The Sustainable Development Goals are adopted by the United Nations, including Goal 3: 'Ensure healthy lives and promote well-being for all at all ages.'. These goals are meant to be achieved by 2030.

**14<sup>th</sup> of September 2016**

The assembly of a High-Level Panel on Access to Medicines by the United Nations Secretary-General to talk about ways to explore the promotion of innovation and to ensure equal access to medicines. The panel also addresses the disorder between trade and public health.

**2020**

The United Nations prominently features how important access to treatment, vaccines and diagnostics is during the COVID-19 pandemic through different agencies like the World Health Organization (WHO), UNICEF and many more.

**24-31<sup>st</sup> of May 2021**

A resolution that urges global collaboration to ensure that access to COVID-19 vaccines, diagnostics and treatment are global. This resolution is adopted by the World Health Assembly and is called the World Health Assembly Resolution on COVID-19 Response.

## Major Parties Involved

As this topic is a global issue with a focus on Less Economically Developed Countries (LEDC's), lots of different countries and organizations are involved. A few of them are of more importance to others:

### World Health Organization (WHO)

The World Health Organization is a United Nations branch that is responsible for dealing with and finding solutions for any major international health problems. With the ultimate goal of people, everywhere in the world, having the highest level of health possible. The World Health Organization has written multiple guidelines on how to act and respond to health problems during natural disasters. It has also established Emergency Medical Teams that act during times of crisis and disaster. (World Health Organization, z.d.)

### United Nations International Children's Emergency Fund (UNICEF)

UNICEF is a non-governmental United Nations organization that looks out for children across the world. They work in the worst and roughest places in the world to enforce international laws and stand up for children's rights and well-being. In over 190 nations and regions children are helped by

UNICEF. (UNICEF, z.d.) By advocating for the well-being of children, they also try to support them with medical supplies and attention. This is also a part in trying to ensure equal access to innovative healthcare.

### World Health Assembly

The World Health Assembly is the body of the World Health Organization that can actually make decisions and focus on the problems regarding health in the world. They also make decisions on the policies of the World Health Organization. (World Health Organization, z.d.) The World Health Assembly has passed multiple policies and resolutions on different important goals in ensuring equal access to innovative healthcare.

### Less Economically Developed Countries (LEDC's) that have the highest deaths due to lack of

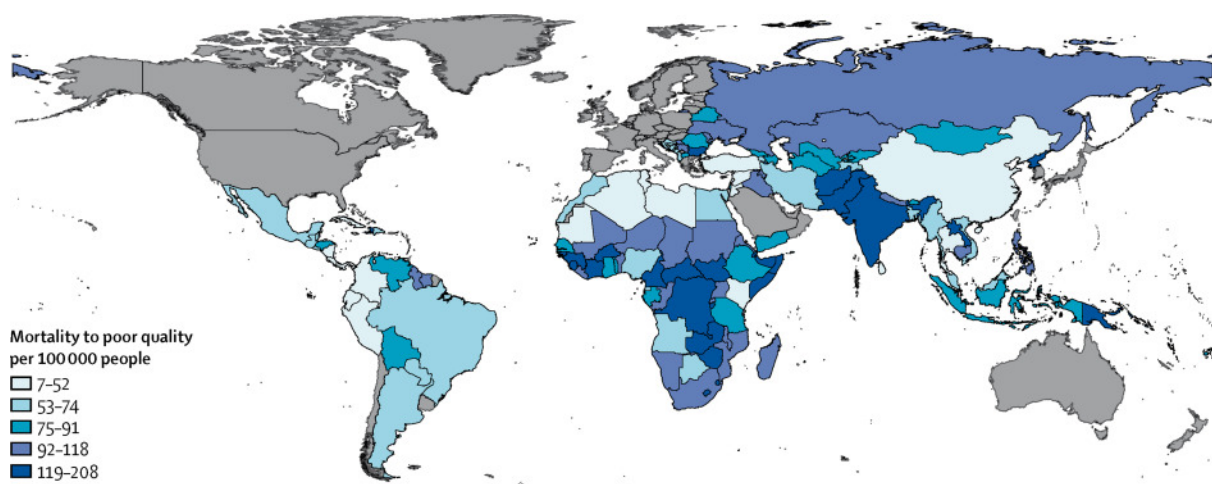


Figure 3: Mortality due to poor healthcare quality per country (Kruk et al., 2018)

### healthcare

- Countries in Central and West-Africa
- Countries in South and West-Asia

## Possible Solutions

As this is an incredibly difficult issue to find solutions to, the following possibilities for solutions to this problem are provided to have a starting point in researching the best possible solutions to the topic of ensuring equal access to innovative healthcare.

### Affordable and universal healthcare coverage

When wanting to ensure equal access to innovative healthcare, the price of healthcare often is a barrier to being able to get medical attention when needed. There are several different options in how to lower the price of medicines and other essential healthcare. Subsidies from the government in Less Economically Developed Countries (LEDC's) and the coverage of universal healthcare are only a few of the possibilities. By ensuring universal healthcare coverage, everyone, regardless of someone's status in society, has access to innovative healthcare.

### **Inclusivity in medical buildings and clinics**

In many countries and mostly religious countries, inequality in sexuality, race, gender and so much more is a very serious problem. Different religions have different norms and values, also in the area of healthcare. To ensure equal access, medical facilities should be inclusive to everyone. By promoting diversity and inclusivity, the effectiveness and safety of new innovative healthcare can be tested and approved on different groups of people from different genders, sexualities, races and religions.

### **Education programs and volunteer community workers**

Many people don't have knowledge about healthcare, are misinformed or don't understand how it works. To ensure that these people also get access, educational programs and volunteer workers that connect the community with healthcare services are necessary. Through education, people learn how to access their healthcare and to inform them about how innovative healthcare actually works. By using volunteer workers, even in very far away areas, the distance between the community and the healthcare services can be closed and those people also get the information they need.

### **Global partnerships and sharing of technology**

By creating collaborations between nations and agreements in partnerships to help nations that do not have the resources to be able to ensure equal access, or even just ensuring access, to innovative healthcare, the nations that need it will be able to provide and spread innovative healthcare among the population. One of these agreements could be sharing technology and knowledge to make sure that every country is on the same level in the development of medical innovation and technology. Mobile technology could also be a solution, by reminding people of appointments, providing information and online chats with professionals. This ensures access to innovative healthcare for people who live further away from cities or in underdeveloped countries and rural areas

## Access to medicines

Nowadays, for a lot of medicines need a receipt from a doctor for people to be provided with the medicines that they need. By making more generic medicines more available at a lower price point, the chances that people can afford the medicine and therefore get better get bigger. This ensures equal access to innovative medicines and other healthcare.

## Further Reading

- The following source is a document written by the World Health Organization that talks about innovative healthcare that is truly useful.  
World Health Organization. (2022, 18 mei). *Health Innovation for impact*. Geraadpleegd op 24 december 2023, van <https://www.who.int/teams/digital-health-and-innovation/health-innovation-for-impact#:~:text=WHO%20defines%20health%20innovation%20as,to%20accelerate%20positive%20health%20impact.>

## Bibliography

- Dattani, S. (2023, 6 November). *Causes of death*. Our World in Data.  
<https://ourworldindata.org/causes-of-death#:~:text=Heart%20diseases%20were%20the%20most,1%2Din%2D7%20deaths.>
- Kruk, M. E., Gage, A. D., Joseph, N. T., Danaei, G., García-Saisó, S., & Salomon, J. S. (2018, 5 september). *Mortality due to low-quality health systems in the universal health coverage era: a systematic analysis of amenable deaths in 137 countries*. *The Lancet*. Geraadpleegd op 28 december 2023, van <https://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2818%2931668-4/fulltext>
- Revision World. (z.d.). *MEDCs and LEDCs - Geography Revision*. Geraadpleegd op 28 december 2023, van <https://revisionworld.com/gcse-revision/geography/development/medcs-and-ledcs>
- UNCTAD. (2021, 27 september). *The Least Developed Countries Report 2021*. Geraadpleegd op 28 december 2023, van <https://unctad.org/publication/least-developed-countries-report-2021>
- UNICEF. (z.d.). *About UNICEF*. Geraadpleegd op 28 december 2023, van <https://www.unicef.org/about-unicef>

United Nations. (z.d.). *Ensure healthy lives and promote well-being for all at all ages*. Sustainable Development Goals United Nations. Geraadpleegd op 24 december 2023, van <https://sdgs.un.org/goals/goal3>

United Nations. (z.d.). *United Nations Millennium Development goals*. United Nations Millennium Development Goals. Geraadpleegd op 24 december 2023, van <https://www.un.org/millenniumgoals/bkgd.shtml#:~:text=The%20Millennium%20Development%20Goals%20set,environmental%20sustainability%20%E2%80%94%20can%20be%20measured.>

World Health Organization. (z.d.). *Child mortality and causes of death*. Geraadpleegd op 24 december 2023, van <https://www.who.int/data/gho/data/themes/topics/topic-details/GHO/child-mortality-and-causes-of-death>

World Health Organization. (2022, 18 mei). *Health Innovation for impact*. Geraadpleegd op 24 december 2023, van <https://www.who.int/teams/digital-health-and-innovation/health-innovation-for-impact#:~:text=WHO%20defines%20health%20innovation%20as,to%20accelerate%20positive%20health%20impact.>

World Health Organization. (z.d.). *About WHO*. Geraadpleegd op 28 december 2023, van <https://www.who.int/about>

World Health Organization. (z.d.). *World Health Assembly*. Geraadpleegd op 28 december 2023, van <https://www.who.int/about/accountability/governance/world-health-assembly>