Chapter 22
Social Innovation to Achieve Global Health

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ABSTRACT

The use of information and communication technologies for health (eHealth) has great potential to provide global impact. It increases the involvement of healthcare consumers and improves knowledge dissemination to and from the health workforce. Additionally, it may contribute to incorporating evidence-based results to promote more efficient, safer, and more accessible healthcare, improving outcomes while reducing costs. Considering this background, the present chapter emphasizes contemporary initiatives such as D.Efficiency and Ask Dr. Giggles, which are focused on global health initiatives that employ communication and information technologies and social innovation, in addition to prioritizing the well-being of individuals in society. Therefore, it is hoped that this chapter provides further understanding of the phenomenon of social innovation in health, which has the potential to be used by large numbers of people, enhance equity in access to qualified information, and provide opportunities to address other social determinants of health.

INTRODUCTION

Starting from the perspective of global health and social innovation, this Chapter proposes a description of the definitions and use of eHealth tools. It is especially focused on how social media contribute to overcoming barriers, solving problems, and supporting collaborative efforts to promote and extend the reach of eHealth tools to poor and marginalized populations. Moreover, the insights can provide further
understanding of the phenomenon of social innovation in health, which has the potential to be used by large numbers of people, enhance equity in access to qualified information, and allow opportunities to address other social determinants of health.

BACKGROUND

Global health is more than just a definition of objectives. It is a combination of scholarship, research, and practice, an opportunity to create a healthy environment so that all humans can realize their potential with dignity and equality (Koplan et al., 2009; United Nations [UN], 2015).

First, the approach puts people at the centre of health care across the entire planet. Second, global health refers to problems, not their locations. It includes the biggest health threats, which disregard national borders, having multiple determinants, and require complex solutions (Koplan et al., 2009; Beaglehole & Bonita, 2010).

From this perspective, it is indispensable to recognize both the overlap and distinctions among global health, international health, and public health (Table 1), in order to propose global strategies to solve health problems, as agreed by a multidisciplinary and international panel (Koplan et al., 2009).

Poorer, vulnerable, and underserved populations are the priority. The worst consequences of social and economic disadvantages are health inequalities. Additionally, inequalities and inequities in health often include global problems, both within and among countries, regardless of their level of development (Jakab & Marmot, 2012; Koplan et al., 2009).

Health inequities are evident in terms of differences in access to health services, treatment, and outcomes in relation to the possibility of benefiting from scientific and technological advances in this area (Barreto, 2017).

Table 1. Comparison of global, international, and public health

<table>
<thead>
<tr>
<th></th>
<th>Global Health</th>
<th>International Health</th>
<th>Public Health</th>
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<tbody>
<tr>
<td>Geographical reach</td>
<td>Focuses on issues that directly or indirectly affect health but that can transcend national boundaries</td>
<td>Focuses on health issues of countries other than one’s own, especially those of low-income and middle-income</td>
<td>Focuses on issues that affect the health of the population of a particular community or country</td>
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<tr>
<td>Level of cooperation</td>
<td>Development and implementation of solutions often requires global cooperation</td>
<td>Development and implementation of solutions usually requires binational cooperation</td>
<td>Development and implementation of solutions does not usually require global cooperation</td>
</tr>
<tr>
<td>Individuals or populations</td>
<td>Embraces both prevention in populations and clinical care of individuals</td>
<td>Embraces both prevention in populations and clinical care of individuals</td>
<td>Mainly focused on prevention programmes for populations</td>
</tr>
<tr>
<td>Access to health</td>
<td>Health equity among nations and for all people is a major objective</td>
<td>Seeks to help people of other nations</td>
<td>Health equity within a nation or community is a major objective</td>
</tr>
<tr>
<td>Range of disciplines</td>
<td>Highly interdisciplinary and multidisciplinary within and beyond health sciences</td>
<td>Embraces a few disciplines but does not emphasise multidisciplinarity</td>
<td>Encourages multidisciplinary approaches, particularly within health sciences and with social sciences</td>
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</tbody>
</table>

Source: (Koplan et al., 2009)
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