

# What are the Roles of Civic Organizations in Public Health Development? Attempting to Make Politics A Social Medicine in the Horn of Africa

Begna Fufa Dugassa \*

Health Team, Oromo Studies Association, Laurel, U.S. A

\*Corresponding author: [begna.dugassa@gmail.com](mailto:begna.dugassa@gmail.com)

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**Abstract** Background: The Horn of Africa (HA) deals with complex social problems worsened by climate change. Many of these issues have roots in the imperial ideology used in state formation and governance. These challenges necessitate moving away from relying solely on the state and market to solve society's welfare issues. Involving civic organizations (COs) is crucial in understanding and tackling societal problems. Methods: This paper employs historical research methods to synthesize knowledge using primary and secondary data while examining the role of community organizations in public health development and services. Findings: COs have significantly contributed to understanding the root causes of societal problems and have played pivotal roles in social reforms and public health development. They have influenced researchers, policymakers, and shaped discourses, and strived to make politics a form of social medicine. This influence is manifested in their advocacy for policies that address the root causes of societal problems and promote public health, thereby demonstrating the power and influence of these organizations. Conclusions: The prevailing evidence suggests that COs wield considerable influence over researchers and policymakers, molding societal discourse and transforming politics into social medicine. Their advocacy primarily centers on formulating policies that target societal issues' underlying root causes and fostering a robust social policy conducive to public health development. Moreover, COs have effectively provided essential services that the state and the market neglected. Flourishing COs is essential to empower individuals and groups, augmenting their ability to comprehend and effectively tackle prevalent social challenges.

**Keywords:** Civic Organizations, Public Health, Social Medicine, Horn of Africa

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## 1. Introduction

To gain a deeper insight into the intricate challenges prevalent in the HA and cultivate innovative ideas, the Oromo Studies Association (OSA) centred its 2024 midyear conference theme on evaluating the impact of Oromo Civic Organizations in nation-building. This paper originated from my delivery at this conference. My presentation emphasized the importance of systemic thinking and understanding the underlying causes of social issues in the HA as vital foundations for envisioning comprehensive solutions. The proposed solutions involve fostering the development of COs, institutions that play a crucial role in providing essential services that the state and the market neglected, producing evidence that they strive to make politics a social medicine.

In the HA, the leading causes of social problems in the region are related to the political system, economy, education, and the rule of law, which do not enable the people. Furthermore, climate change is exacerbating these

problems and fostering violence. In countries such as Ethiopia, Eritrea, Sudan, South Sudan, and Somalia, the leaders prioritize maintaining their power and using violence rather than focusing on the welfare of their people. Violence is contagious, predictable, and preventable and has an incubation period [1]. Violence in those countries contributes to violence in the rest of the region. This perpetuates the problem, making it necessary to seek alternative solutions. In the short term, it is both unrealistic and counterproductive to expect these states to address the needs of their people. However, we can instill a sense of empowerment in people by emphasizing the significant roles that civic organizations (COs) have played in developing public health elsewhere and advocating for it. COs provide optimism, offering solutions to some social problems and aiding in making "politics a social medicine."

The societies in the HA are still dealing with the long-lasting effects of direct and indirect colonialism [2,3]. These policies disrupted the Indigenous social order and hindered the development of defence forces, economy, and culture [4]. As a result, people became susceptible to

various cultural and ideological impositions, leading to morally wrong acts being normalized and rights being disregarded. For instance, due to these impositions, societies that had never practiced slavery were conditioned to participate in it. The imposition of taxes in the form of enslaved people by colonizers caused these communities to target vulnerable groups [5]. Although the slave trade has been outlawed and the European colonizers have physically departed, the region still bears the scars in the form of fragmented families and communities that have not fully recovered. Stories of ethnic/national violence are passed down through generations but are not openly publicly discussed or condemned. It is crucial to openly discuss and condemn these past wrongs, as the omission of discussion and naming the crime angers the victimized groups and emboldens the perpetrators, contributing to instability and environmental degradation in the HA.

In the HAn countries, the imperial agenda has heavily influenced state formation and policy-making processes [4,6]. Unfortunately, this has resulted in a system where the constitution, state structure, and judiciary system are copied or founded on colonial models and ideologies. The imperial system promotes structural inequality and is inflexible [6]. Instead of allowing for a critical examination of the imperial system and fostering progressive social policies, the colonial framework restricts and prevents the correction of past wrongs and inhibits imaginative thinking. This situation has led to a need for a new way of thinking that goes beyond the state structure to promote the development of COs. By encouraging the growth of COs, the people in the region can establish a system of thinking, understanding, and addressing their challenges. Fostering COs would foster progressive social policies and inspire and motivate the community to build a more equitable and sustainable future consistent with indigenous knowledge, empowering them with a sense of responsibility.

Notably, in the Ethiopian state formation, the Abyssinian king Menelik II conquered the Oromo people and other independent states. The European empire builders actively participated in the conquest of Oromia and the formation of the Ethiopian state [2]. Therefore, the Ethiopian state's formation resulted from an indirect colonialism's social experiment. For those reasons, the Ethiopian government's social policies aimed at controlling and exploiting the Oromo people. These policies have had a detrimental impact on the political, economic, cultural, social, and environmental conditions of the Oromo people, leading to the creation of pathological social conditions. Climate change further exacerbates these issues [1], making addressing them through multifaceted and sustained efforts necessary. These efforts cannot be handled by the state institutions alone. Instead, we need to encourage the development of COs and foster collective efforts to tackle these problems. By working together and fostering COs, we can better understand the root causes of these issues and create a better future for all.

Social determinants of health, a collective complex social factor, significantly impact health and diseases [7]. These factors, including education level, income, social status, food security, adequate housing, workplace safety, social and environmental hygiene, and access to

healthcare, are more crucial than biological, chemical, and physical ones. Social conditions mediate these interactions, making the social causes of health and diseases the key to reducing health disparities, fostering healthy social relations, and improving the population's overall health [7]. Improving social determinants of health requires protracted efforts. Leaving this complex responsibility to the state alone is counterproductive, and public health must encourage other stakeholders, such as COs, to actively participate in addressing them.

The intent to improve quality of life and life expectancy is as old as human history. Long before organized movements, many forms of political contestation shaped human history [8,38]. The emergence of COs is the result of sustained collective efforts. COs influence researchers and policymakers and contribute to public health development. By bringing together diverse groups of people with a shared commitment to public health, COs have been at the forefront of introducing new ideas and approaches to understand and address social issues, inspiring innovation in the field. They have disseminated new knowledge and best practices in the workplace to healthcare providers and policymakers and contributed to creating a solid theoretical and practical foundation for modern social hygiene and social medicine. If the COs advance social justice and equity and significantly contribute to public health development, we can refer to them as societies for social medicine.

COs provide non-commercial services not provided by the state or the market. These organizations offer political and policy options as alternatives to market and state-based transactions and address the needs of those not served by these two institutions. The role of COs in developing public health and social medicine is critical [9]. However, in countries like Ethiopia, dictatorial leaders are intolerant of the development of COs and hinder people from developing the capacity needed to advance and care for the most vulnerable populations. Suppressing the development of COs can have severe consequences for public health. COs play a critical role in the growth and development of public health and in providing services to communities. They often work closely with the community and can identify and address gaps in services that the market and public institutional actors miss. As such, they can effectively shape policymaking, implementation, and evaluations. For those reasons, it is crucial for states to foster the development of COs and create fruitful partnerships with them to enhance public health conditions.

Climate change is leading us into unfamiliar territory. Because our understanding is limited, it is more important than ever to work at the grassroots level to observe the changes and impacts and, accordingly, to develop effective policies. The policies developed in conjunction with the grassroots organization have the potential to bring about positive change and a more sustainable future. This paper aims to synthesize knowledge about the significant and impactful direct and indirect contributions of COs to social medicine and public health development. It offers practical and actionable lessons for social transformation, empowering people and policymakers with the means to effect change. The paper is divided into five major parts. The introduction sets out the research objectives and

methodologies. The second part defines key terms used throughout the paper. The third part examines the history of COs regarding health, both in general and with a specific focus on public health development. The fourth part explores the crucial and often underappreciated role of Oromo COs and their key figures. Finally, the paper concludes with discussions and conclusions.

## 2. Research Questions

This research paper seeks to answer the following two key questions. What are the places of COs in detecting social problems in an early stage and empowering people, advancing social medicine and public health development? Is it possible to advance social medicine and public health development in the HA by promoting the development of the COs?

## 3. Objectives

Considering the limitations of state and individual efforts in comprehensively addressing social and ecological threats, this paper aims to explore the potential of COs in enhancing healthy societal conditions, safeguarding communities and fostering public health development. It seeks to inspire collective and individual action by highlighting the transformative impact of COs and advocating for their involvement in fostering social healing, akin to social medicine, and contributing to public health advancement. Furthermore, the paper aims to promote the crucial task of establishing COs in the HA and other regions, focusing on nurturing resilient social connections and advocating for social and environmental justice. At the end of the reading the paper, the reader better understands the relationships between COs and public health development and envisions the need to enlarge such social institutions and foster collective problem-solving.

### Box – 1 Knowledge Synthesis

Synthesis is about combining many different components to produce something new. For example, in photosynthesis, plants use sunlight energy, carbon dioxide and water to produce carbohydrates. Researchers also use the term synthesis to mean understanding the whole and the parts at the same time, along with the relationships and connections that make up the whole. Synthesis differs from analysis, which is the dissection of complexity into manageable individual components.

According to the Canadian Institute of Health Research (CIHR)(10), knowledge synthesis contextualizes and integrates different research findings within the larger body of knowledge. Knowledge synthesis is crucial in understanding complex systems and enables us to think and act at a systemic level. Knowledge synthesis is a widely used research method in clinical medicine and public health. It is synonymous with literature reviews that employ transparent and reproducible methods to gather evidence. The primary goal of knowledge synthesis is to answer the outstanding research question by contextualizing and summarizing all pertinent studies on a specific topic. This type of research is instrumental in helping us more effectively utilize the data available to us and identify evidence gaps. Importantly, it significantly enhances our understanding of inconsistencies in diverse evidence, thereby contributing to scientific rigour. In developing regions, knowledge synthesis research makes knowledge production culturally acceptable and financially viable, offering a promising outlook for the future.

This paper, using knowledge synthesis methods, investigates the proactive roles of various COs and activists in the development of public health. It examines how the COs' observations and experiences have influenced policymakers and researchers, fostered the integration of politics into social medicine, and nurtured healthy social relationships. Moreover, it closely examines how COs took the initiative to organize volunteers, assumed responsibility for societal issues, and addressed problems that the state and market failed to address.

## 4. Conceptual Method of Capturing the Associations

Social theory helps us visualise the complexities of social world and tells us why things happen or did not. Throughout human history, there have been changes in the types and the nature of pathogens and social problems [11,13,38]. These changes were a result of transformation in the natural and social environments. Some pathogens mutate, behave differently, and cause new diseases or

become more lethal. Many other pathogens have been isolated for millions of years. However, due to human activities, when humans reached the ecology of those pathogens, the contact created favourable social conditions for spreading those pathogens [11]. Additionally, the erosion of people's protective social conditions has also contributed to the spread of diseases. Public health development has evolved, and progress has resulted from society's protracted efforts [13]. To better understand public health and envision a better future, it is essential to learn from the history of public health development, examine how societies have conceptualized and dealt with diseases

and understand society's protracted efforts to improve their sanitary conditions and social hygiene.

The evolution of public health is a tale of efforts societies make to prevent disease and promote health. [11,13,38] In the Western world, several forces directly and indirectly influenced the development of public health. Learning about those social forces can be instrumental in fostering the development of public health in the HA. Historical methods are practical tools for systematically capturing critical social events that have shaped the development of public health. It helps to describe the chronological journeys of social change, different sanitary movements, and social contexts that have contributed to the evolution of public health. Analyzing the social forces that have impacted this development can provide a more profound comprehension of the past, and we can provide theoretical and practical tools needed to adopt or avoid creating a better future in the HA.

This paper delves into the social history of public health by analyzing its contents and engaging in textual and discourse analysis. Understanding the past and the social forces that have led to the present is crucial in addressing current challenges in public health. The role of COs in developing social medicine and public health services is vital. The paper aims to provide evidence-based answers to research questions by synthesizing information from various sources, including peer-reviewed articles and grey literature. By synthesizing and contextualizing historical data, this paper seeks to shed light on the complex relationships between COs, social medicine, and public health services and offer insights into how these relationships can be leveraged to improve health outcomes.

## 5. Definitions

In academic writing, it is critical to maintain clarity and minimize ambiguity to ensure the reader understands the ideas presented in the paper. One effective way to achieve this is by defining the most used terms in the paper. Clear and concise definitions prevent misunderstandings and enhance the reader's comprehension of the arguments and ideas presented. As such, to improve the overall effectiveness of the message, this paper carefully defines key terms, i.e. Civic Organisation, Social medicine, and Public Health.

What are civic organizations? In this paper, COs are groups of people who come together voluntarily to work for the betterment of their community. These COs are usually non-profit, community-focused, and use a collaborative approach to decision-making. They provide services that the state and market failed to solve society's welfare needs. They foster social cohesion, promote civic engagement, and work to address community issues. Plus, they provide services and support, advocate for changes of public importance, empower the community with their influence, and undertake community outreach programs, voluntary projects, advocacy and awareness campaigns for community development initiatives and partnerships to pursue their collective interests. COs are born and flourished from social movements and their roles and functions are often overlap and, in this paper, those terms are referred interchangeably.

In the Western world the COs have a rich and fascinating history that spans over a century, with exemplary groups such as the 1787, the Society for the Abolition of the Slave Trade, the 1792, Vindication of the Rights of Women, Labour Union, the American Temperance Society, the Anti-Slavery Society, and the International Committee of the Red Cross playing pivotal roles in shaping our society's moral and ethical standards and significantly impacting social policies. The COs work towards advancing collective interests, solving everyday problems, standing in solidarity with social groups, building public institutions, and safeguarding human dignity. They are instrumental in understanding and addressing the underlying social determinants of health, advocating for policies that promote health equity and social justice, and advancing research and innovation to create a healthier, more equitable world. [32]

In this paper, public health refers to "the science and art of preventing disease, prolonging life, and promoting health through the organized efforts and informed choices of society, organizations, public and private communities, and individuals" [12]. The primary goal of public health is to improve health outcomes through community interventions, policy, and education, often utilizing epidemiological studies and data analysis. Public health is paradoxically political. Public health is the place where social and health sciences, politicians and policy makers, and social action. It is where the need for population health and the exercise of public authority and interest interacts.

Social medicine is an academic field primarily researching the socio-economic factors affecting health and disease. It studies how socially constructed conditions cause diseases and produce better health outcomes. It approaches health issues by diving deeper into the relationship between society and individual health and accordingly offering solutions. Those issues include the impacts of discrimination, inequality, poverty, and other social determinants. The origin of social medicine is directly linked to the Industrial Revolution, which started in response to the health challenges the working class faced. The subsequent increase in poverty and disease among workers and social movements raised concerns about the effect of social processes on the health of poor factory workers. The goal is to understand socio-economic factors that influence health and healthcare practices and inform policymakers to bring about a healthier society. This includes strengthening community actions, developing personal skills and reorienting health services. **Brief History of Public Health**

The history of public health is the protracted search for effective means of preventing disease, and it is part of the history of humankind [13,38]. With no exceptions, all societies strived to understand the cause of diseases and improve their social conditions. Religious institutions have played significant roles in the efforts to understand and address public health problems. In those efforts, the role of Temples, Churches and Mosques is significant. In the Oromo people's case, Qaalu leaders played fascinating roles. From the 1850s to the present, in the Western world, the role of religious institutions in generating knowledge about public health is diminishing. This is largely due to the emergence of three social forces: COs, which advocate for healthy social policies; scientific progress, which has

led to significant advancements in medical knowledge; and social activists, who raise awareness about public health issues and advocate for change.

The widely used, the three core functions of public health are assessment, policy development and assurance [14]. Assessment includes systematically collecting, analyzing, and synthesising the information on the health condition of the community. This includes analyzing the determinants of the health of a population and the threats. Policy development follows the assessment and is tailored to address the identified gaps. It entails promoting the use of evidence-based social policies and decision-making. Assurance is closely looking at the implementation of the policy, the provision of services to those in need and monitoring whether the policy works. Public health focuses on the general population's health, aiming to prevent disease and promote health at a community or population level. Public health approaches encompass broader tools and strategies, ranging from disease surveillance, health education, policy recommendations, and health promotion initiatives. The history of public health goes back to controlling infectious diseases and ensuring clean water, food, and sanitation. It later grew into controlling chemical and physical contaminants and other community issues [13,38].

Presenting COs as a society for social medicine comes from progress in scientific understanding of health and diseases. Human health and diseases involve complex social and biological factors and interactions. Influenced by the 1848 French Revolution, the founders of social medicine, French medical doctor Jules Guerin and German doctor Rudolf Virchow, recognized those facts and introduced the term "social medicine." The founders of social medicine appealed to their consecutive medical professionals to think and act for the public good and strive to create societies where the principle of social justice guides all social policies. They emphasized that the population's health is a direct social/political concern, and that social and economic conditions affect health and diseases in complex ways. They also stressed the importance of promoting health and preventing diseases through social and biomedical actions [15,16].

The practice of social medicine involves investigating the relationships between social factors, medical issues, and public affairs to develop solutions that benefit society. It requires medical professionals to think and act for the public good and strive for social justice. Social science provides the tools to analyze the social causes of health and diseases, and it is essential to integrate this knowledge systematically into social medicine. Understanding the social causes of health and diseases is crucial for developing practical solutions to promote health and prevent diseases. Social medicine combines the knowledge and skills of medicine and social science to achieve this goal.

#### **Examples of influential Civic Organizations**

##### **Temperance movements**

The Temperance movement was primarily based in the Protestant church [17]. The group is organized around the belief that alcohol consumption is harmful to personal, physical, and mental health, family, and community. Overindulgence in alcohol negatively affects the economy and health [18]. The group advocates for the restriction of

liquor sales. The movement influenced scientists to study the health effects of alcohol and fostered evidence-based policies towards alcohol consumption. The movement also influenced the church, conditioning leaders not only to abstain from alcohol consumption but also to propagate the idea that alcohol consumption moves people away from a righteous life. They conditioned church leaders to link the biblical teaching that human beings are created in God's image to protecting the human body from alcohol intoxication. They taught that the human body represents the temple of God and should be kept alcohol-free. They also influenced politicians by advocating that politicians who disagreed with developing policies restricting alcohol sales should not be elected. One of the Temperance movement's advertisements used to influence the election's outcome says, "Help me to keep him [the child] pure. Please vote against the Sale of Liquors".

##### **Labour Union**

The labour unions have had a multiple influence on public health. As the labour movement leaders are themselves frontline workers, they are intimately aware of the challenges workers face and can articulate their needs. Understanding that fate and chance are powerfully shaped by the cultures and social conditions in which they exist, in their advertisement, the labour union said, "Safety by choice, not by chance." They advocate for workplace safety, work hours, working age, minimum wage/income, health insurance and unemployment insurance. The more the labour movement pushed for workplace safety, the more scientists began to explore the definition of safe workplaces. The labour union's efforts aided the scientific investigation and establishment of safe workplace conditions such as humidity, noise, light, and pollution. The labour movement's efforts made evidence-based policies possible and influenced politicians and policymakers through their collective bargaining power and voting [19].

##### **Civil Rights Movement**

The Civil Rights Movement in the United States is a powerful example of civic engagement in action. The movement was a collective effort to fight against racial discrimination and racial segregation. Through nonviolent protests, including civil disobedience, the movement was able to bring attention to the injustices faced by Blacks and demand social change. The movement successfully brought significant legal and social changes. Some of the prominent social changes include the passage of the Civil Rights Act of 1964 and the Voting Rights Act of 1965. The movement demonstrates the power of civic engagement to effect social change and empower and enable people. The movement has significantly impacted public health. The movement widens people's choices and makes them more likely to have access to resources and social support. Social and economic factors such as poverty, discrimination, and lack of access to resources limit people's choices and prevent individuals from healthy social conditions. These barriers can contribute to health disparities and reduced life expectancy for marginalized communities [20]. The movement effectively made poverty reduction and prevention of discrimination a social agenda [21].

In the USA, the civil rights movement not only forced policymakers to introduce reform but also changed the

language of the scientists and policymakers. For example, scientific literature refers to pica – the clinical symptom when pregnant women are craving for dirt/soil that affects many black mothers as their inferior culture. Evidence shows that pica is mainly caused by iron deficiency - malnutrition. Scientific literature of the time, instead of recognizing pica as the problem created by pathological social policies and conditioned many black women to suffer and rightfully name the problem, victimized the victim. In addition, the social conditions in which the blacks were kept by design were referred to as the culture of poverty. The health behaviour that racist social structure created and propagated is referred to as defective health habits, inherited problems, ignorance about health and poor work habits. During the slave trade, enslavers feared the unity of black families. For that reason, they continuously broke families and, sold them to different slaveholders and prevented contact between family members and fragmented them. As a result of the racist system and social policies, when the researchers noted a higher divorce rate and single mothers, they named the problem as dysfunctional family and community. Also, the civil rights movement has changed the language used in this case. The terms used to describe dysfunctional families and communities are now recognized as social problems created by design [22].

In the fear that education would empower and make it difficult to rule over the enslaved people in the USA, for many years, blacks were denied educational opportunities. Also, when blacks were allowed to have access to education, they were conditioned to attend schools with the curriculum designed by whites geared to control their social forces. In a society built by exploiting and subjugating others, the dominant group's educational policies are geared toward maintaining structural inequality. After the 1960s, the civil rights movement forced the federal and regional states to pass legislation giving blacks equal opportunity. The blacks who have been denied schooling at the workplace were expected to think and act as the dominant groups. When they were hired to work in unfamiliar work conditions and noticed they were not quickly adapting to workplace safety and productivity, they referred to the problem as poor work habits, a term used to describe the perceived lack of discipline or diligence. The civil rights movement challenged the language and referred to it as poor work conditions, a term used to describe the unsafe or unfair working conditions that disproportionately affect black workers [20].

Knowledge is empowering. Education is a powerful tool that empowers and prepares learners to understand their social and natural world better and effectively navigate the competitive world [23,24]. When the renowned civil rights movement leader Frederick Douglass remarked, "Knowledge makes a man unfit to be a slave," he succinctly captured the transformative potential of education in dismantling barriers and improving the lives of learners. Douglass ardently advocated for the rights of blacks to receive education, emphasizing its pivotal role in fostering determination and motivation and thus enhancing the overall quality of life. In a world of fierce competition, education has become a tool and a necessity.

COs are instrumental in fostering public health

development. They champion the cause of groups and individual emancipation, workplace safety, human rights and dignity, poverty reduction, food security, adequate housing, premature death prevention, and health insurance. A striking example of their impact is in workplace safety, where labour unions have advocated legislating and influencing work hours, working age, minimum wage/income, health insurance, maternity and paternity leave, and unemployment insurance [19]. Other civic Organizations advocate for adequate housing, safe neighbourhood, food security, access to clean water and highway safety [25].

The Ethiopian government has been intolerant of the Oromo COs, but the few that have continued to function despite harassment have played a crucial role. These COs have advocated for healthy public policies and created supportive environments for the health of the Oromo people. For instance, the Metcha and Tulama Self-Help Association (MTA), formed in the 1960s and banned in 1968, promoted Oromo self-identity and self-esteem and provided essential social structures such as schools, health facilities, roads, and clean water. The founders of these COs also worked to promote harmony between different religious sects and advocated for diversity, equity, and unity. Unfortunately, the Ethiopian government saw Oromo unity as a threat, leading to the killing and imprisonment of Metcha and Tulema leaders in 1968. The principles established by these leaders continue to be essential in shaping Oromo's collective identity, self-esteem, and ongoing efforts to address the needs of the Oromo people [26].

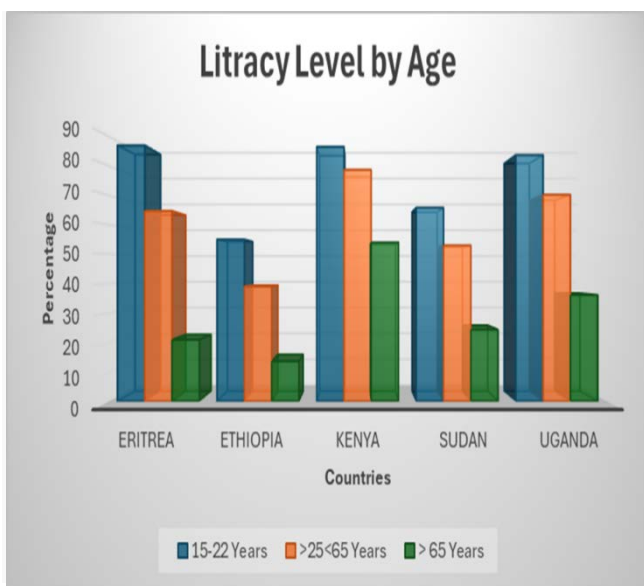
The Oromo Relief Association (ORA) was another significant CO formed in the 1980s in the diaspora. ORA focused on relief and rehabilitation programs to promote food security, sustainability, and access to clean water. One of ORA's notable contributions was its emphasis on fostering self-reliance and empowering individuals and communities to be self-sufficient. Understanding that control is restrictive, and constraining equates to exploitation and subjugation; hence, it is regarded as a disease or disease-causing agent. However, attempting to remove the control and restrain and make a proactive effort to understand the root causes of the problem and offer solutions is creating healthy social conditions. ORA fostered the need to organize efforts and remove conditions hindering social change [26].

Knowledge is socially constructed [23,27]. Given that it is socially constructed, it is not universally valid. For example, research and knowledge synthesis are part and parcel of knowledge construction. Those activities are widely conducted to understand the causes of our social problems and offer solutions. The root causes of our problems are different, and our efforts to solve them should be unique to each problem. Very often, powerful groups try to find solutions to their problems at the cost of the marginalized. In the pre-civil rights movement, black bodies were used to solve the health problems of the white population. The scientists presented that blacks do not perceive pain like real humans. For that reason, to address the difficulty of birthing, scientists conducted cesarian section experiments on black women. Although the efforts to safely conduct cesarian section have been going on for centuries, the experiments the white medical doctors conducted on black women have improved the science and

standardized the procedure. Another racist science conducted on blacks was the famous Tuskegee experiment - where, for experimental reasons, the blacks were denied medication that would have cured them of syphilis [22].

COs have been recognized as significant contributors to educational attainment in countries worldwide. Access to education is a crucial determinant of the development of any community, and COs have played a critical role in enhancing literacy levels in several African countries. In Kenya and Uganda, primary, secondary, and tertiary education involved fees until recently, which made it challenging for low-income families to afford education for their children. However, various COs stepped in to sponsor these children and help them attain education. Additionally, in those countries, COs have established schools in hard-to-reach areas and covered the school fees of underprivileged children, resulting in higher rates of educational achievement.

In Ethiopia, access to schooling is limited, but all levels of education are publicly funded, theoretically making education accessible to everyone. However, as you can see in the graph below, when the HAn countries are compared in terms of literacy level, Kenya and Uganda are leading, with Eritrea quickly narrowing the gap after gaining independence from Ethiopia in 1992 [28]. It is worth mentioning that the role of COs in achieving higher literacy achievement in Kenya and Uganda has been enormous. Therefore, it is essential to recognize the contributions of COs in enhancing educational attainment and promoting community development in Africa.



### Knowledge Construction of Social Medicine

Like many others, social medicine and public health knowledge are socially constructed, have evolved over time, and have been shaped by various social events [29]. The social movement and social activism influenced data collection and interpretation [23]. The pioneers of social medicine, Jules Guerin and Rudolph Virchow, were consequently informed by their critical observations of the reality of the poor factory workers in France and the typhus epidemic in the Upper Silesia region, where most of the residents were Polish, ruled by Prussia- now Germany. The separate observations of those medical doctors were also influenced by the social movement of

the time. The social movements of the time played a significant role in shaping the understanding of public health issues [16]. People experiencing poverty and social injustice revolted against their governments and revealed their grievances, pains, and dissatisfactions caused by the state's ill-designed social policies. These movements influenced the collection and interpretation of data, leading to the foundation of understanding the social determinants of health. Consistent interventions have gradually shaped public health in the Western world, with COs playing a pivotal role. Capturing significant events that have influenced public health development can help to adopt some of those experiences.

The ability to collect and analyze data is becoming increasingly crucial for the success and well-being of societies. [10,30] In today's world, societies must understand their complex social realities, identify potential risks, and seize emerging opportunities to thrive. However, these complex activities cannot be achieved by individuals alone. It requires community members to organize and build the capacity to understand their problems and find workable solutions. This collaborative approach fosters dialogues, exchange of ideas, improvement ideas, and knowledge building. This necessitates healthy civic engagement, which includes actively engaging in politics, voting, and volunteering. Engagement is essential to ultimately shape and guide government policies about social and health issues and better understand and address conditions that influence the well-being of people. Focusing on understanding community needs and highlighting the need to invest in the community and increased civic engagement improves community and population health. COs are incubators for social changes. It creates a fertile environment for researchers and policy makers to study the real societal needs and offer workable solutions. By collaborating for a common goal, societies can create a better future for themselves and future generations.

According to Scardamalia and Bereiter [29], knowledge building requires individuals to master what is already known, master component skills such as critical thinking and scientific methods, assembling data, and associate with learning communities. COs are an excellent example of how communities can come together to foster learning and problem-solving. These organizations provide a platform for community members to share their knowledge, expertise, and experience and collaborate towards a common goal. By working together, communities can build capacity, identify the root causes of problems, and develop sustainable solutions that address their unique needs.

COs play a vital role in society by providing essential services at low cost. These organizations are usually run and financed by volunteers committed to making a difference in the lives of those in need. They are particularly attractive to low-income countries and societies with constrained budgets, as they offer more flexibility, adaptability, and sustainability in their service deliveries. Besides providing essential services, COs also advocate new ideas and frame and shape political agendas that the dominant groups often omit. By doing so, they promote community resiliency, autonomy, and democracy. They also provide opportunities for community members

to participate and empower them to contribute their parts in advocating their interest, fermenting social change, or creating pressure on political system, shape policy direction enhancing the public good and as such shift the power center in health policy making.

History of COs have a fascinating and rich history that spans over a century. The earliest recorded COs include the Labour Union in England, the American Temperance Society (founded in the 1820s), the Anti-Slavery Society (established in 1839), and the International Committee of the Red Cross (founded in 1863). These organizations have played a pivotal role in shaping our society's moral and ethical standards and have significantly impacted government policies. These movements have laid the foundations for creating both theoretical and practical reasons for contemporary social hygiene and social medicine. Civic societies advance collective interests, solve common problems, stand in solidarity with marginalized groups, build public institutions, and safeguard human dignity and the public good. [31]

The Industrial Revolution, which took place from 1760 to 1830, is widely considered the turning point in the history of labour relations. The Industrial Revolution brought significant changes to the workforce, replacing agricultural and cottage industry jobs with factory work. This resulted in an influx of low-skilled labour forces from the countryside to cities and towns, where they experienced a decline in real wages and living standards. In addition, workplaces were not standardized, and the safety of factory workers was not considered in the designs of the factory. The labourers were forced to work long hours in unsafe conditions for little pay. The relationships between the employer and labourer were not standardised and regulated. Individually labourers tried to settle their concerns with employer. When the efforts individuals made failed, they formed union and through the union pursued for collective good [18,31]. This led to the birth of the Labour Union and Chartism movement, which started in England during that time.

The towns and cities where the labourers moved in were not designed to accommodate the influx of people. This, coupled with the state's protection of the owners' interests, who predominantly worked with profit in mind, led to increasingly unequal social relationships between the labourers and factory owners. As a result, the labourers got organized to demand better wage rates and work conditions. The labourers realized they could bargain for better wages and work conditions instead of making individual efforts. Such group effort has created the foundation of today's modern labour movement and democratisation of the society [18].

The British industrial labour movement evolved into the Chartist movement. The Chartist movement demanded democracy and social reform and galvanized the working class. The Chartist movement got its name from the word charter, representing the charter they drafted and sent to the Parliament for approval. The charter demands six critical points: voting rights for all men, confidential ballots, payment for members of Parliament, annual elections, equal size constituencies and removal of property qualifications for candidates. Although in 1848, the British Parliament rejected those demands, the idea inspired more social movement, and eventually, in 1918,

the Parliament adopted five of the six demands. This denotes the impact of the chartist movement in democratizing society and empowering people significantly [32]. To echo Rudolph Virchow's language, the role of the Chartist social movement significantly contributed to the democratization of society and created the theoretical and practical reasons to make "politics a social medicine" [15].

Did the labour movement influence the development of public health? The emergence of the labour movement played a crucial role in shaping the field of public health theories and practices. As labour unions communicated the concerns of their members to factory owners, the government began to take a more proactive approach toward ensuring safe working conditions, reasonable work hours and improving productivity. To settle the disputes between the labourers and the owners, scientists investigated and closely examined what constitutes health hazards, safe work conditions and reasonable work hours. The intent to establish ideal working conditions and fair wages and provide adequate living conditions led to the development of public health sciences. As a result, universities and colleges started training students who can investigate problems, offer advice, plan safe workplaces, and manage workplace safety. These understandings helped improve workplace safety, wages, work hours, and living conditions, laying the groundwork for advancing public health.

The Temperance movement was one of the most significant civic movements in the USA that profoundly impacted public health and social norms. It was founded on the belief that alcohol consumption was responsible for various social issues, including poverty, violence, addiction, and premature death. The movement advocated for moderation and abstinence from alcohol, and it began with followers of the Protestant Church. Many activists who were influenced by the social gospel teachings became part of the Temperance movement and spread the idea.

The Temperance movement had a far-reaching influence that went beyond the USA, and the movement's teachings have become the social norm. Protestant missionaries have spread the idea worldwide, and many countries have adopted alcohol control policies based on the Temperance movement's principles. The Women's Christian Temperance Union played a crucial role in the Temperance movement's efforts. It provided a platform for women to participate in politics, and women played a significant role in spreading the Temperance movement's message. They organized rallies, wrote articles, and spoke at public events, creating awareness about the social and health issues associated with alcohol consumption.

The Temperance movement played a significant role in driving biomedical research into the health implications of alcoholism. Activists within the movement argued that alcoholism should be regarded as a disease necessitating medical intervention. They promoted evidence-based strategies aimed at tackling the underlying factors contributing to alcoholism, including issues such as poverty and social disparity. Sylvester Graham, a prominent figure in this movement, advocated for a comprehensive reform agenda encompassing physical exercise, fresh air intake, fresh fruits and vegetables, whole grain products, and avoiding additives, including

alcohol and stimulants. Graham emphasized the importance of nutrition and discouraged unhealthy sexual behaviour. He strongly supported the adoption of a healthy lifestyle, which he believed could facilitate recovery from alcoholism [33].

The Anti-Slavery Society provided theoretical and practical reasons for the emancipation of enslaved people. It helped to emancipate millions of people from slavery, restore their dignity and ease exploitation. The movement implicated not only legal and social aspects but also health sciences. For example, when the slave trade was legal, when pregnant black women suffered from Iron deficiency and craved dirt and soil, the clinical manifestation was understood as "savage culture." The racist policies kept black people in slavery, bondage and subhuman social conditions and subjected them to malnutrition and then victimized the enslaved people and distanced themselves from the problem it created and aggravated [22].

The Red Cross Society was formed following the 1859 war when Swiss citizen Dunant closely witnessed the aftermath of the Battle of Solferino in Italy, where there was no medical support for injured soldiers. Inspired by Dunant's compassion for the people involved in fighting on both sides of a war and the observation of the death of children and women who were never involved in the battle, officially, the Red Cross Movement started in 1863. Since then, the Red Cross has been instrumental in providing humanitarian relief, saving countless lives, and rescuing people in times of crisis. Many other COs have followed in their footsteps, contributing to various causes, including public health [34].

What are the relationships between COs, social medicine and Public Health development? The relationship between COs and public health is not a straightforward one; instead, it is complex. Early COs have played a vital role in promoting public health development. For instance, a research study funded by the Robert Wood Johnson Foundation closely examined the role of COs in public health and found that they significantly contribute to enhancing the health of individuals and entire communities by advancing civic engagement. Civic engagement includes voting, volunteering, and participating in COs. Civic engagement is one of the ways people can influence policy directions, ensure accountability, and enforce the state structure to work for them in democratic systems. Civic engagement can also involve passing laws that enhance their choices in life, removing laws that hinder their quality of life, or taking other actions that promote a healthy community.

Many researchers studied how COs fostered social medicine. They believe COs foster civic engagement and make through voting people involved in social design and social engineering practices. It fosters healthy democracy and gives people the chance to improve public health. People can make the ballot box to improve their physical and mental health. Those authors substantiated evidence that increased civic engagement improves the health of individuals and whole communities. A high level of civic engagement fosters creating community conditions that promote health through safe and healthy housing, clean air, safe and walkable streets, and others. Indeed, the early advancements in public health, such as the development of

community sanitation systems, were propelled by combined efforts of civic organizations and scientific progress.

#### **Social activists influencing public health development**

A social reformist, Edwin Chadwick is noted for his leadership in reforming the Poor Laws and instituting significant reforms in urban sanitation and public health. The typhus outbreak in 1838 convinced Chadwick to conduct an inquiry to establish the causes. The inquiry looked at the conditions that might contribute to typhus outbreaks. The report covered the sanitary condition of the working class. While Chadwick advocated for reform for the law of people experiencing poverty, he did not directly link exploitation, poverty, and diseases. Instead, he believed that poverty leads to unsanitary conditions, which, in turn, cause moral decline and disease. He rejected the idea that wages, food insecurity, and work conditions are linked to diseases. This belief led him to advocate for the 1842 water sanitary movement report [15].

Two years after Edwin Chadwick's report, in 1844, Frederic Engels gave a far-reaching report. Engels revealed the fundamental causes of premature mortality among the working classes for the first time. He revealed that through exploitation, the bourgeoisie created harmful working and living conditions for the working classes. The unsanitary social conditions are sickening the poor and killing the workers. In other words, he explored how the bourgeoisie, and the state social order eroded the social determinants of health and exposed the poor and working class to diseases. Later, Frederick Engels and Karl Marx used those findings to propagate the communist revolution and introduced the communist manifesto [15].

A medical officer who significantly influenced public health development is Rudolph Virchow. Virchow investigated the causes of the outbreak of the typhus epidemic in Upper Silesia, ruled by Prussia, now Germany. Most of the residents of Upper Silesia were Polish. After his scientific investigation, he generated a far-reaching report. He clarified that the social conditions in which the people in upper Silesia lived contributed to the epidemic. Virchow was knowledgeable of the work of Chadwick and Eglinton. He further expanded the idea and provided the foundation for social medicine. He advocated making politics a social medicine and underlined that fostering democracy and social justice. The Virchow idea of fostering democracy and social justice is consistent with building healthy public policy, creating supportive environments and developing civic organization [16].

Louis-Rene Villerme (1782-1863) was a trailblazer in social epidemiology. He was the first person to analyze data on mortality rates in various parts of Paris, and he demonstrated a clear link between poverty and mortality. Villerme used correlation analyses to establish a connection between income and mortality, and he emphasized the crucial role of the social environment in determining health outcomes. He also advocated for the importance of investing in social hygiene. Villerme devoted his career to addressing the health problems faced by the labour force and was a champion of workers' rights. He spoke out against child labour and gender inequality, and he opposed inhumane conditions for prisoners. His work provided a reference model for socio-medical research and helped to establish the new academic discipline of Occupational Medicine [15].

In the Horn of Africa- Ethiopia, Baro Tumsa is one of the pioneers of social movements whose works significantly impact public health. By effectively utilizing social epidemiology, Tumsa has demonstrated the link between colonial social structure, social injustice and public health problems, substantially contributing to public health development. His unique background in pharmacy and law has enabled him to understand how injustice leads to unhealthy social conditions and actively advocate for social change [35]. Tumsa's vision was to transform Ethiopian politics from a control, exploit, and disempower model, which is socially pathogenic, into an empowering one focused on 'social medicine.' He championed de-colonialism, self-rule, self-management, autonomy, and the empowerment of people. The changes Tumsa advocated align with the principles of Rudolph Virchow, the founder of social medicine, who stressed self-rule, democracy, and the separation of church and state [16], thereby fostering the continuity of social medicine principles.

## 6. Scientific Progress

COs have a profound historical significance in public health development. In their efforts, they have fostered building solidarities, elaborated ideologies, socialized and mobilized groups, and facilitated the self-development of groups. Those efforts have laid the foundation for scientific progress and evidence-based social policies. Historical documents reveal the direct connection between civic engagement and public health. In this context, COs have not just acted, but excelled as guiding pillars, providing direction like a compass and catalyzing social change. Understanding the history of public health, as it is a protracted effort and search for effective means of preventing disease and promoting health, makes it clear that it is an integral part of the history of humankind.

The mission of public health has always been and will always be to ensure that people can live healthy and fulfilling lives. Through rigorous scientific investigations, epidemiological studies, and clinical trials, such as vaccination, public health professionals strive to prevent diseases in the population. Public health can protect the health of millions by identifying the root causes of diseases, understanding the nature of disease-causing agents and conditions, measuring their occurrences, and seeking effective interventions. The ongoing scientific studies and policy analyses on the causes of diseases and what constitutes health are vital in guiding public health policy. Population health science has emerged as an academic field that offers evidence-based policy directions to address these fundamental questions. The early development of public health, which focused on controlling infectious diseases, paved the way for today's complex and evolving field of microbiology and epidemiology. In summary, public health ideas are derived from lived experiences, trial and error, and evidence-based scientific investigations and are constantly evolving to meet the changing needs of society.

### **History of civic organisation and its significance in society**

Since the work of Virchow and Villerme, public health professionals have been at the forefront, understanding the relationship between poor housing, lack of sanitary conditions, work conditions and health. Their work has clarified that the social conditions in which people live, and work can create health or produce illness. As key players in fostering healthy social change, public health professionals are instrumental in promoting civic participation [15,19]. To address these challenges, fostering civic engagement is essential in developing strategies that encourage participation and remove obstacles to engagement. For example, community organizations can work to increase access to resources and services, provide support for individuals who face barriers to participation, and create inclusive environments that welcome participation of people. By promoting civic engagement and addressing barriers to participation, we, as public health professionals, can better define the problems and answer questions (what, how, who and when?), identify risk and protective factors and answer questions (where and what?), develop and test preventive strategies and assure widespread usage of preventative strategies. Our protracted efforts to improve public health outcomes and increase life expectancy for all members of our communities, civic engagement, and the development of COs are essential.

Social problems are socially constructed. They include poverty, inequality, and discrimination, which negatively impact individuals' and communities' health. These problems are complex and often challenging to address, as various social, economic, cultural, and political factors influence them. Defining and addressing social problems requires a collective effort from individuals, organizations, and policymakers. One way to find solutions to social problems is to define them and identify their root causes and underlying structures. For example, poverty is a social problem that is often caused by systemic issues such as lack of access to education, healthcare, job opportunities and underpayment. By understanding the underlying causes of social problems, we can work to develop practical solutions that address the root causes of these issues [36].

Understanding and addressing social problems, such as poverty, inequality, and discrimination, often requires a multifaceted approach involving various stakeholders. Social problems such as poverty, inequality, and discrimination are complex issues that require a multifaceted approach with the involvement of various stakeholders [36]. Community organizations can identify such problems and work towards providing support and resources to individuals affected by them. At the same time, policymakers can develop policies and legislation to tackle the root causes of these issues. COs like labour unions have also played a crucial role in identifying social problems such as workplace safety and providing resources and support to those affected. Additionally, individuals have engaged in civic engagement activities to address social issues and promote positive change.

Our social problems are multiple and complex. As such, defining social problems such as health and offering uniform solutions are theoretically and practically challenged (37). It requires collaborative efforts from individuals, organizations, and policymakers. By working

together, societies better understand and address these issues, create positive change, and promote social justice. Historically, COs have played a significant role in redefining social problems and raising issues that policymakers may have overlooked. In their role of redefining social problems, raising awareness, and advocating for policy changes, COs have been particularly influential. They have developed innovative solutions and provided platforms for marginalized communities, ensuring that marginalized voices are heard. Their efforts have led to positive change and the promotion of social justice and equality for all their members. These COs are often formed by individuals directly impacted by social problems and motivated to bring about change. By organizing and mobilizing people around specific issues, COs can raise awareness and advocate for policy changes that address the root causes of social problems.

COs have redefined social problems to reflect the lived experiences of those most impacted. They have also been successful in developing innovative solutions to social problems. For example, community-based organizations have developed programs that provide job training and placement services, affordable housing, and healthcare services to low-income individuals and families. These programs help to address the root causes of social problems such as poverty and lack of access to healthcare. COs challenged dominant narratives by providing a space for these communities to share their experiences and perspectives.

#### **Civic Organizations, aka Societies for Social Medicine**

The 19th century was a period of tremendous transformation in the Western world, marked by the advent of industrialization, urbanization, and the growth of capitalism. This period witnessed the emergence of new social problems and political movements that aimed to address the challenges posed by these rapid changes. Among the most significant developments of this era was the birth of several COs that sought to define and redefine social problems, elaborate ideologies, fostered self-development of groups and create negotiated social relations. These organizations were instrumental in driving scientific inquiry into specific issues, generating evidence, and contributing to the development of occupational health sciences. They also exerted considerable influence on policymakers, encouraging evidence-based and morally right approaches to policymaking. Meaning construction is the primary function of COs [8].

What is remarkable was COs are non-governmental entities widely recognized for their contributions to improving social justice and social welfare. Their primary objective is to enhance the health and well-being of communities, particularly those underserved. Over the years, these COs have played an instrumental role in shaping public policy and advancing communities' social and economic interests. Their efforts have significantly improved sanitation, working and living conditions, food security, and family planning. As such, they remain an indispensable component of the social fabric of modern society.

COs play a significant role in promoting social change, better work conditions, higher wages, and health through education, research, and advocacy. They collaborate with other healthcare providers, government agencies, and policymakers to define social problems, sets and design

and implement policies and programs to tackle public health issues. COs actively participate in knowledge construction, such as community-based research, to identify the community's health needs and develop effective interventions. They provide health education and training to community members and healthcare professionals to improve health literacy and build capacity. Furthermore, they work with vulnerable populations, including refugees, migrants, and homeless individuals, to address their specific health requirements. COs also advocate for policies that promote social justice and healthcare equity, particularly for marginalized communities. Their efforts have contributed significantly to the advancement of public health worldwide.

COs have long advocated for measures that address the social factors contributing to health disparities and improve community health. They have argued that the social model fostering structural inequality is detrimental to public health and have called for establishing equitable social structures and healthy social conditions. These organizations have emphasized the importance of considering social determinants of health beyond clinical medicine and biotechnology and urged policymakers to take a more comprehensive approach to public health.

COs have demonstrated a deep understanding of the ecology of early childhood development and the significant impact of poor social circumstances on a child's health and development. For instance, they have advocated for the prohibition of child labour, recognizing that early childhood trauma can have a lasting impact on the growth and development of a child's brain. Scientific evidence has since confirmed that early trauma can lead to reduced brain gray areas, which can have a significant impact on a child's health and development.

Given their focus on social justice and empowerment, COs that promote equitable health outcomes can be considered societies for social medicine. These organizations play a critical role in addressing the social determinants of health and advocating for equitable health outcomes. By prioritizing the social factors contributing to health, these organizations promote healthier communities, workplaces, and social relations and foster reduced health inequities.

## **7. Conclusions**

COs are established through social movements. They play a significant role in empowering individuals and groups to make decisions concerning their affairs and actively participating in setting social policies relevant to their community. For instance, emergency preparedness, tackling discriminatory social policies such as unequal access to education and healthcare and destitution that denies opportunities in life are areas where COs can make a difference. They provide a platform for individuals to come together, share experiences and work towards common goals. Empowerment of people is a catalyst for change, and it inspires people to live the kind of lives they value. When individuals and groups deeply internalize these values, they are often driven to go the extra mile to get what they value. For those reasons, the work COs do is more efficient, accurate, and timely. This underscores the

importance of COs in fostering a sense of responsibility and self-reliance and promoting social change and group capabilities. COs are crucial in catalyzing social change. They prove the power of collective action and the importance of community involvement in social policymaking and advance social medicine.

COs are formed and led by volunteers passionate about serving their communities, making their service deliveries more credible, trustworthy, cost-effective, sustainable, and just. When they provide services that the state and market do not offer, they help advance community resiliency, autonomy, and democracy. COs are one of the examples where the exercise of freedom of association makes a difference in the well-being of people. The exercise of freedom of association is the key for COs to improve data collection and decision-making, enhance health system performance, foster active participation of community members, and engage a public-spirited citizenry. Active participation improves the quality of information, which is necessary to synthesize knowledge and develop evidence-based social policies. It encourages members to debate and exchange ideas over the directions of social policies and public health. Improved data collection and public debate ensure accountability for the process and protect public interest. In summary, COs are essential to thriving and progressive societies, and their contributions should be appreciated and supported.

COs are essential in promoting and advancing social welfare and other public services in their communities. With few exceptions, most of COs are proponents of social justice. These groups work towards improving access to essential services such as reasonable housing, safe workplaces, wages, and healthcare and advocate for policies that benefit their members and the public. They are a crucial part of democratic societies and play a critical role in the emancipation of people, ensuring that the needs of marginalized communities are adequately addressed. If we apply Rudolph Virchow's language, we can refer to them as "societies for social medicine."

The role of COs and social movements in shaping public health policy and practice is paramount. I have conducted a comprehensive analysis of how they have exerted their influence on public health policies and practices. The successful advocacy efforts of COs have contributed to the positive development of the community and public health. It is important to note that the objectives of COs are not uniform. While this paper has focused on reviewing the role of COs dedicated to social justice and the empowerment of groups and individuals, others have contrary objectives. Hence, the people in HA must promote the growth of COs that foster social justice and capacity building. These organizations help to enhance people's capacity to understand their problems and find practical solutions.

Additionally, COs play a crucial role in exploring the challenges and opportunities of addressing the social needs of individuals and shaping public health. It is imperative that the state should not regard COs as a threat but instead sees them as supportive. Grassroots organizations bring to the forefront issues that politicians may overlook. Establishing social institutions that can aid in emergency preparedness, policy synthesis, development, and problem-solving is crucial. These institutions play a

vital role in ensuring that we are ready to deal with any emergencies that may arise and are also valuable resources for policymaking and problem-solving. It is crucial to focus on fostering such institutions to ensure that we are better equipped to handle any situation that comes our way. Therefore, the government should welcome COs and view them as a valuable partner in pursuing the development of public health. The roles of COs deserve appreciation and recognition. Any state policies that hinder the development of such vital institutions need to be challenged.

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