

Health is the most important value for the individual person and for society

- G20 must embrace a new health agenda -
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World Health Summit (WHS)

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In the spirit of the G20 Berlin Declaration of May 2017

"Together today for a healthy tomorrow"

we have to bring the health agenda forward and ensure it continues to be part of the G20 agenda in Argentina in 2018 and in Japan in 2019.

Health is an investment

The health industry plays an ever increasing role for the economy. For all members of the G20 countries health constitutes a major sector of the economy, in many countries it is the most important economy. In Germany, e.g. more than 6 million people are employed in the health economy versus less than 1 million in the automobile industry and the contribution of the health sector to the economy constitutes

about 315 billion Euro – about 11,2 of GDP, annual growth is roughly 3.5%. Turkey will experience a rise in healthcare spending per capita at a CAGR of 5 to 6%. Healthcare spending in China is rising 20% annually and is estimated to reach \$705 billion; the Indian health care industry is expected to reach USD \$280 billion by 2020. These are just some examples. New relationships emerge between the G20 countries as their industries seek to profit from the expanding global health industry both in emerging economies and in newly developing African markets. This must be part of the deliberations of the G20 as they consider investments, innovation, growth and the creation of jobs. Global health is the foundation of economic success.

New development models for health are necessary.

Much of this growth is uneven - it does not reach the poorest with reliable and affordable health care coverage. Significant effort is required on behalf of countries to both address the still rampant infectious diseases or maternal health challenges while beginning to fight non-communicable diseases. There are many economic arguments why the G20 should launch major joint health initiatives. But other arguments hold just as strong: health systems oriented towards universal health coverage are immensely valuable in their own right and produce many other benefits. In general health systems combined with other systems of social protection foster more cohesive societies, a critical issue for many emerging economies. And in times of crisis - for

example increasing emergencies due to the impact of climate change - health systems mitigate the impact of shocks on communities. The G20 meetings should underline the importance of health for G20 economies by putting health on the agenda of the heads of state and the finance ministers meetings and aim for strong statements that outline ways forward to invest in health.

The majority of the world's poorest people live in middle income countries - according to the World Bank classification - yet donors and agencies such as the GFATM and GAVI are refocusing policy away from MICs regardless of the distribution of poverty or disease burden. This can have unexpected impact on global public health. Indeed, the MSF has recently warned: becoming a middle income country can seriously damage your health because it closes avenues to financial support to help the poorest. This is why G20 countries need to jointly address the new development models for health in the 21st century so as to both support the poorest and ensure social protection for all in MICs. The meetings of the heads of state and additional meetings by the G7 health ministers and the G7 science ministers in previous years underlined the need and the benefit of investing in health systems and health research and in addressing the health needs of the poorest. This needs to be continued in the next G7 and G20 meetings.

Support the SDGs - in particular universal health coverage

The G20 - representing about two-thirds of the world's population - must address the financing challenge for health in the context of the Sustainable Development Goals (SDGs), only then does the world stand a chance of meeting the ambitious goals and targets set for health. The heads of state can make a major difference in health. Indeed the "health Millenium Devolopment Goals" received a significant boost through the creation of focused initiatives and organisations with new governance and financing models, strongly supported by G8 countries. But the focus chosen at that time is no longer sufficient. The SDGs now provide a new and holistic view on the necessity to preserve our planet as a liveable place for mankind.

The innovative forms of global health governance, built on the involvement of donors and recipient countries, NGOs, the private sector and private foundations as well as partner organisations, have realized the strain of the changing political and economic environment. Today many middle income members of the G20 group are moving to be "donors" in the context of South-South cooperation and have either opened or announced plans to establish their own international development agencies as a major component of their foreign policies. In this vein they have made major announcements at the SDG Summit. For example China has

pledged to invest 12 billion U.S. dollars in the least developed countries (LDCs) by 2030.

The *Economists Declaration on Universal Health Coverage* calls on global policymakers to prioritize a pro-poor pathway to universal health coverage as an essential pillar of sustainable development. They make several critical points which G20 leaders need to consider. Most important is the calculation that the economic benefits of investment in universal health coverage are estimated to be more than 10 times greater than costs. Health is essential to eradicating extreme poverty and promoting growth of well-being and the analysis shows that over the past decade, health improvements – measured by the value of life-years gained – constituted 24% of full income growth in low- and middle-income countries. Health would provide an excellent arena for both a convergence of G7 and G20 agendas as well as a continuity of issues tackled at various summits.

The SDGs cover a broad range of social and economic development issues and social justice. All goals also relate directly or indirectly to SDG 3: ensure healthy lives and promote wellbeing for all at all ages. This goal replaces several disease specific goals that were part of the Millennium Development Goals (MDGs) which ended in 2015. Unlike the MDGs, the SDG framework does not distinguish

between "developed" and "developing" nations, instead, the goals apply to all countries.

Three sectors need to come together in order to achieve sustainable development. These are the economic, social and environmental sectors in their broadest sense. This requires the promotion of multidisciplinary and transdisciplinary research and health in all policies across different sectors. Some of the SDGs might be contradictory. For example, seeking high levels of global GDP growth might undermine ecological objectives. Yet, more than the MDGs, the SDGs deal with the causes of the problems and try to overcome a silo approach to problems since they are largely interconnected. They also reach out to a plethora of stakeholders including the business community as underlined through Goal 17 on partnerships. SDG 12 e.g. calls for sustainable production and consumption but the negative health impact of products such as processed foods, sugar sweetened beverages and alcohol is spreading rapidly across the globe. Consumer products are some of the most profitable investments in the global financial sector and research shows relationships between obesity rates and trade

agreements which allow for the rapid spread in developing countries. This raises important issues of taxation and regulation within countries and beyond borders as well as strategies for divestment in such products following the example of divestment in fossil fuels. This is another example that health is a political choice. In such critical issues and times the key political message has to be one of a clear commitment to health, multilateralism and strengthening of the United Nations and WHO to implement the SDGs. *Also scientific monitoring of the developments is essential and political actions and regulations have to be based on facts.*

21st century health challenges: AMR, health security and climate change

In the 21st century G20 must be concerned with the provision of global public goods for health in science and technology and the tackling of major common challenges such as anti-microbial resistance and preparedness for pandemics and other health emergencies. Resistant infections already claim more than 700,000 lives a year and this threat is growing. Resistant infections by 2050 will kill 10 million people a year if no determined action is taken. Both China and India but also other countries are particularly vulnerable. The report

indicates that by 2050, antimicrobial resistance could impose a cumulative economic cost of \$20 trillion on China. The G20 urgently needs to address immediate short term and also long-term actions. These would need to be developed in close conjunction with WHO's global action plan on antimicrobial resistance.

In a similar vein G20 leaders will need to move forward with strong commitment to ensuring global health security. They need to be leaders on implementing the International Health Regulations and ensuring that the funds needed to support LMIC to strengthen IHR capacities are made available. They must also be in the forefront of ensuring WHO's contingency fund for health emergencies and support the creation of a new pandemic financing facility, as proposed by the World Bank and the WHO. They will need to ensure the implementation of recommendations that will come forward from the High Level Panel on Global Response to Health Crisis , established by the Secretary General on request of Germany, Norway and Ghana. The health implications of the large population movements of migrants and refugees will need to be part of this concern.

G20 leaders will need to ensure the interface of the health and the climate change agenda. 7 million people die every year as a consequence of environmental degradation, this does not include the many victims of disasters due to climate change. New humanitarian challenges emerge as crisis

becomes the new normal. Public health advocates have called for a commitment to planetary health - an approach which takes the interface of systems of human health and of ecosystems into account. The G7 and the G20 should become the leaders in moving such an agenda forward.

Health is a political choice – Health in all policies is a necessity

Meeting health needs requires input from many disciplines including the social and environmental sciences, humanities and engineering, all of which are essential for the implementation of health research and improve health of entire populations. This need for interdisciplinary action extends to health policy: “Health in All Policies” is an approach to public policies across sectors that systematically takes into account the health implications of decisions, seeks synergies, and avoids harmful health impacts in order to improve population health and health equity. In practice, this implies a strong programmatic and financial coordination of very different actors.

Climate change is a powerful example of how global trends (and actions to deal with them) affect health and need a Health in All Policies approach to be addressed effectively. Extreme heat causes heat stress and heat stroke, exacerbations of pre-existing heart failure, and kidney disease. Natural disasters and changing rainfall patterns caused by climate change have severe implications on agriculture and nutrition, and progress made so far in tackling infectious diseases could be undermined by the effects of climate change. At the same time, many policies to reduce greenhouse-gas emissions can also have positive effects on health, e.g. reduction of air pollution, increased energy security, more sustainable mobility and transport systems. Emphasizing the positive side effects of climate mitigation measures on health may make the associated cost more acceptable to policy-makers. Likewise, policies to mitigate environmental change may have unintended adverse consequences (co-harms): Some types of biofuels, such as corn alcohol, compete directly with important food crops. Diesel engines were promoted in some countries because of their reduced greenhouse gas emissions but have higher

emissions of fine particulates and nitrogen oxides. Health should thus become an important part of all policies, international development, security, foreign policy, environment, economy, in addition to social welfare, labour, health and research.

Health is now the concern of world leaders and heads of government - it must remain a permanent feature of their engagement. The G20, the G7, the BRICS and others - will increasingly be called upon to support the United Nations to address the key health challenges at hand. This includes supporting the provision of global public goods such as health research and development, dealing with cross-border externalities such as pandemics and antimicrobial resistance, and supporting leadership and stewardship of global institutions. It includes aiming to reach the "great convergence" in health by investing in universal health coverage and promoting strategies that build on the interface of human and environmental health. The economists' statements highlights: adequate finance of these global functions is likely to prove the most efficient path to improving conditions of the poor in middle-income countries. Who else to spearhead such a way forward - not alone but in close cooperation with other key actors in the global arena. 21st century health needs determined political leadership.

<http://www.thelancet.com/commissions/global-health-2035>

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