



POLICY BRIEF #5: OPPORTUNITIES FOR THE INTERNATIONAL COMMUNITY

Global Health 2035 provides a roadmap to achieving dramatic gains in global health through a grand convergence around infectious, maternal and child mortality; major reductions in the incidence and consequences of non-communicable diseases (NCDs) and injuries; and the promise of universal health coverage (UHC). The report—*Global Health 2035: A World Converging within a Generation*—identifies key opportunities for international collective action to support all three of these goals.

Global Health 2035: A Call to Action for the International Community

Achieving a grand convergence in global health

Global Health 2035 outlines a path for low- and lower-middle-income countries to rapidly reduce mortality rates to universally low levels within a generation. The 2035 convergence goals are summarised as “16-8-4”—reducing under-5 mortality to 16 per 1,000 livebirths, reducing annual AIDS deaths to 8 per 100,000 population and reducing annual tuberculosis (TB) deaths to 4 per 100,000 population. The international community can support national governments in meeting these targets through the following steps:

- Finance global public goods, particularly research and development (R&D).** A major portion of health aid should be directed toward discovery, development and delivery of new tools to tackle infections and child and maternal health conditions. Funding for R&D targeted at diseases that disproportionately affect low- and middle-income countries should be doubled from current levels (US \$3 billion/year; see Figure 1) to US \$6 billion/year by 2020, with half of new funding coming from middle-income countries.
- Tackle antibiotic resistance and support pandemic preparedness.** Efforts should be increased to mitigate the international spread of emerging infectious threats, such as pandemic influenza, which would be particularly devastating to poor populations. Strengthening of surveillance and response capacity is a key priority for international collective action given the very real possibility of a global pandemic in the coming decades. The international community should support the development of new pandemic control tools, such as a universal influenza vaccine. Other important aspects of pandemic preparation include ensuring that there is adequate production capacity for pandemic control tools (drugs, vaccines) and that the intellectual property regime allows all countries to access these tools.
- Provide transitional financing to select countries.** Direct financial support to the poorest countries with the greatest burdens of infections and maternal and child health conditions will continue to be crucial for achieving convergence. Many middle-income countries will require transitional financing, as well as assistance in contributing toward global strategies to eliminate malaria and combat drug-resistant TB.
- Support capacity building within international institutions.** To refocus on the core functions of the global health system, many international institutions will require additional financing and assistance in restructuring.

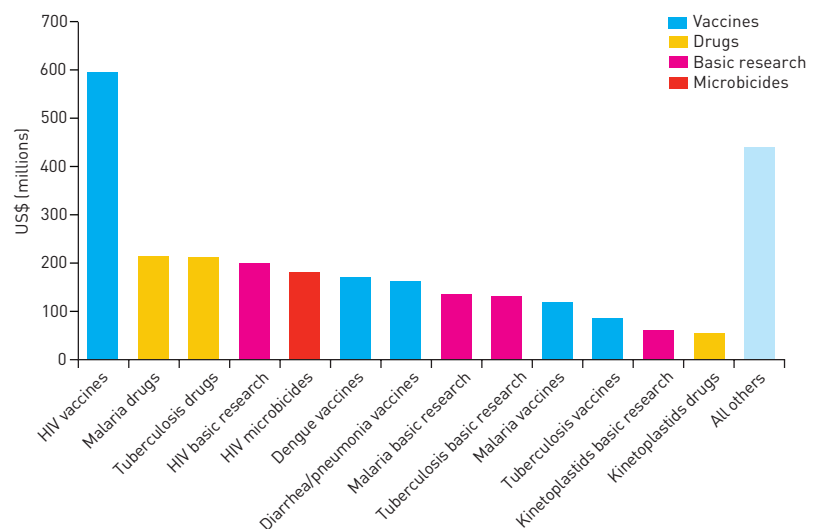


Figure 1: Research and development expenditures for infectious diseases of particular concern to low-income and middle-income countries in 2011

Curbing non-communicable diseases and injuries

As low- and middle-income countries reduce deaths from infections and maternal and child conditions, they then accelerate the shift in their disease burden to NCDs and injuries in adults and older people. Global Health 2035 lays out steps that low- and middle-income countries can take today to delay the onset of NCDs and thus reduce premature illness and deaths. To support national governments in curbing NCDs and injuries, Global Health 2035 recommends that the international community should:

- **Support population, policy and implementation research (“PPIR”).** Examining the population factors, policies and delivery systems that work best for scaling up NCD and injury interventions in low- and middle-income countries is one of the most important roles the international community can play in curbing NCDs and injuries. The capacity to learn from the experience of others, which is essential if a health system is to effectively deliver NCD interventions, can be strengthened—and the results can be more quickly disseminated—by a well-funded mix of South-South and South-North collaborations. This type of PPIR should also include research on how high-income countries can benefit from research in low-income countries through reverse innovation—that is, the flow of effective frugal innovation.
- **Provide technical assistance on taxation, trade and subsidy policies.** Such assistance is especially valuable for policies that cut across several sectors (e.g., alcohol, road injury deaths). Another important opportunity for international collective action is cooperation to tackle tobacco tax avoidance (through loopholes) and tax evasion (through smuggling and bootlegging).
- **Provide targeted financing to the poorest countries for scale-up of selected clinical tools.** There is an important role for the international community in helping to finance the introduction of selected NCD interventions, such as a hepatitis B vaccine (to prevent liver cancer) and an HPV vaccine (to prevent cervical cancer).

Achieving universal health coverage

Access to essential, life-saving health interventions can be enhanced—and progress towards Global Health 2035 can be accelerated—through UHC. Global Health 2035 endorses two progressive pathways toward UHC which commit to covering the poor from the outset (“progressive universalism”). In the first, publicly financed insurance would cover essential health-care interventions to achieve convergence and tackle NCDs and injuries. This pathway would directly benefit the poor, since they are disproportionately affected by these problems. The second pathway provides a larger benefit package, funded through a range of financing mechanisms (e.g. payroll taxes, insurance premiums, copayments), with poor people exempted from all payments. To support national governments in moving towards progressive UHC, Global Health 2035 recommends that the international community:

- **Support health systems research.** This includes policy research—such as on the financial protection value of specific interventions and platforms—and implementation research needed to inform national decision-making on UHC and ensure that today’s efforts yield sound empirical guidance for tomorrow’s decisions.
- **Provide development assistance for health.** The international community should help individual countries by financing the institutions for revenue mobilisation and pooling, the mechanics of designing and implementing specific pathways for evolution in the benefit package, and the policies for UHC implementation.

Global Health 2035: A World Converging within a Generation was written by *The Lancet* Commission on Investing in Health – an international multi-disciplinary group of 25 commissioners, chaired by Lawrence H. Summers and co-chaired by Dean Jamison.

The full report was published in *The Lancet* on 3 December 2013 and can be found at www.globalhealth2035.org.