



## **"IN DIFFICULT FINANCIAL TIMES, HEALTH IS AN INVESTMENT."**

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The subject of this year's High Level ECOSOC "Implementing the internationally agreed goals and commitments in regard to global public health" could not be more timely.

We are at the start of what some experts have described as the most severe global economic downturn since the Great Depression of 1929.

We are also in the midst of the most ambitious drive in history to reduce poverty and reduce the gap in health outcomes.

The gaps in health outcomes both within and between countries are greater than ever before in recent history. Differences in life expectancy between the richest and poorest countries exceed 40 years. A child in Lesotho can expect to live 42 years less than a child in Japan. Annual government expenditures on health range globally from as little as US \$ 20 per person to more than US\$ 6,000.

WHO estimates that, each year, the costs associated with health push around 100 million people below the poverty line. And this comes at a time when the global community is committed to poverty reduction.

A recent World Bank report has said that the financial conditions facing developing countries have sharply deteriorated, and that the delivery of essential services is in danger. The prospect of achieving the Millennium Development Goals is in jeopardy.

It is useful to look back to 2000. Following the Millennium Declaration and the goals it set, we saw a rise in commitments of official development assistance for health from US\$ 6.5 billion in 2000 to more than US \$ 14 billion in 2006. We saw initiatives like the Global Fund to Fight AIDS, Tuberculosis and Malaria, the

GAVI Alliance, money from philanthropists, and the selling of bonds to finance immunization.

We saw results as well. For the first time, childhood deaths from vaccine preventable diseases dropped below the 10 million mark, down to an estimated 9.2 million deaths in 2008. Access to anti-retroviral therapy for HIV/AIDS was extended to more than 3 million people in low and middle income countries.

The question we need to ask ourselves is whether we can ethically and morally cut back on health spending on these and other areas? Can we afford it from a global public health perspective?

Consider the consequences of interruptions in the supply of drugs, especially for diseases like HIV/AIDS, TB and malaria. Besides causing preventable deaths, interruptions in drug supplies can accelerate the development of drug resistance.

We need to strengthen health systems as well while combating high mortality diseases in order to ensure lasting results.

In these difficult financial times, the international community needs to stay focused on the simple message that health is an investment. Cutting back on this investment will have severe repercussions both in the short and the long term.

The price of failing to take action, especially at a time of crisis is high. A world that is greatly out of balance in matters of health is neither stable nor secure.