

**PREPARATORY MEETING FOR THE
2005 ECOSOC HIGH-LEVEL SEGMENT**

16-17 March 2005

“Achieving the internationally agreed development goals, including those contained in the Millennium Declaration, as well as implementing the outcomes of the major United Nations conferences and summits: progress made, challenges and opportunities”

ROUNDTABLE 3: HEALTH AND MORTALITY

16 March, ECOSOC Chamber

- Chair:** H.E. Mr Ali Hachani (Tunisia), Vice-President of ECOSOC
- Moderators:** Dr Andrew Cassels, Director for Health and Development Policy, WHO
Dr France Donnay, Chief, Reproductive Health Branch, UNFPA
- Participants:** Dr Agnès Binagwaho, Executive Secretary of Rwanda's National AIDS Control Commission and Coordinator of the Millennium Project's task force on HIV/AIDS, Malaria, TB, other major diseases, and access to essential Medicines
- Dr Delanyo Dovlo, Member of the Africa working group of the Rockefeller Foundation/World Bank/WHO *Joint Learning Initiative on Human Resources for Health and Development*
- Ms Lynn P. Freedman, JD, MPH, Associate Professor, Mailman School of Public Health at Columbia University and a lead author of the Millennium Project task force report on Child Health and Maternal Health

Summary

The roundtable on “Health and Mortality” was attended by some 200 people with representatives of 50 Member States and a wide range of UN agencies and non-governmental organizations. Following their short presentations, the three panellists responded to several rounds of questions from the audience and engaged in a lively discussion over key issues in global health and development. The roundtable focused specifically on three areas as suggested by the Chair, namely:

- where are we on the MDGs and other international development goals, specifically those related to health, and what are the main challenges in global health;
- what needs to be done in order to make the necessary progress and to overcome bottlenecks and constraints to saving the lives of millions of people every year;
- how can the opportunities presented by the high-level events in 2005 be seized to move the health and development agenda forward and to generate the necessary political will.

Key elements and messages from the discussion included the following:

> Scaling up of well-known effective interventions is urgently needed

Health outcomes are unacceptably low across much of the developing world. Sub-Saharan Africa is worst affected, but there are extreme and acute pockets of ill-health in all poor countries. If current trends continue, few low-income countries will achieve the health MDGs. Many speakers pointed specifically to the urgency of addressing issues of equity and access for the poor, particularly women.

The MDGs continue to be very helpful in providing political focus on and momentum for development while serving as a common framework for both debate and action. But while the MDGs give us outcomes, they say little about the means required in order to achieve these outcomes.

While the situation in health, ten years away from the year 2015, is particularly serious there is a strong consensus on what actually needs to be done. Much of the burden of disease can be prevented or cured with known, affordable technologies. Key challenges are that these interventions reach the people who need them, in particular the poor, and that health services are scaled-up in an equitable way.

> Access to reproductive health services is critically important

As was pointed out by the panelists, reproductive health services are critically important for making progress on the maternal health goal and it was suggested to add a target on access to these services, as well as specific indicators to track coverage of basic health system functions. Tracking progress and monitoring impact continues to be important for informing policy and measuring performance. In most cases the necessary data, including for indicators on access to reproductive health services at country level, is already available.

> Strengthening health systems lies at the heart of the challenge

At the centre of the failure to provide these technologies is a crisis of health systems. In too many countries the health systems needed to do this either do not exist or have collapsed. As one panelist said in responding to a question from the floor: "Without health systems there is no scale up." Strong local health systems are needed to provide universal access to primary health care, including sexual and reproductive services. Furthermore, resources to tackle major diseases such as HIV/AIDS, TB, and malaria going to new global partnerships, such as the Global Fund, need to work as allies in strengthening broad-based health systems.

The task of scaling up services while transforming the way they operate and reach the poor is particularly difficult, but central to achieving real progress. Within this, the challenge of ensuring that the necessary health workers are available at all levels to do the actual work, is probably the single most important element.

> Making sure that the necessary health workers are available where they are needed

In many countries, especially in Africa, the shortage of human resources is reaching crisis proportions. This crisis has its roots in part in the process of globalization, particularly as it affects the migration of health workers between cities and rural areas, between countries and between continents. Stocks of health workers are being depleted as they themselves fall victim to the diseases they are attempting to treat, such as HIV/AIDS. More education and training is urgently needed.

Collective, international responsibility should be accepted but action must start at country level. Without well-trained staff in hospitals, clinics and communities there will be little chance of achieving the health MDGs or other goals, such as a massive roll-out of AIDS treatment. Urgency demands action now, but in ways that support the achievement of a longer-term development agenda. The issue of migration, however, is a complex matter that requires careful balancing of rights and responsibilities. While questions were raised about best practices for preventing further

'brain drain' from developing countries, it was agreed that simple regulatory measures alone would not lead to the intended results.

> HIV/AIDS is still far from being under control and threatens progress in other areas

The AIDS pandemic is the most immediate and biggest threat to global health and development itself. Affecting women disproportionately and Sub-Saharan Africa bearing the by far heaviest burden, substantial additional investments are critically needed but have not been forthcoming at the pace and volume necessary. Further, many countries don't have in place the financial and administrative capacity to ensure that resources are disbursed timely and that they go where they need to go. Building this capacity is essential not only in health but also in other areas and the UN is regarded as having to play a much stronger role in collaborating with countries on this.

> Strong health systems are central to development and security of countries

The link between health and security was underlined by several speakers. It was argued that, again, health systems capacities were essential not only in the early detection of disease outbreaks, but also in the effective response to them. More generally and equally important, it was agreed that being healthy and having access to better health is fundamental for people's feelings of security, with health systems fulfilling a core social function and contributing to the overall stability of societies.

> More needs to be done to address the challenges of fragile states

Special attention needs to be given to the situation of fragile states, in particular those coming out of conflict, and the contribution that can be made by humanitarian actors in providing health services while building the capacity for the longer term development of health systems. A lot can be learned from past experience in such difficult environments, including for example the value of repairing existing, however insufficient, health care provision rather than starting ambitious reform programmes in the middle of what still are mostly unstable and unsafe environments.

> Governments need to set the right priorities for development

Governments need to recognize that investment in their health systems is essential for their countries' development – not only for the individual sector but as key enabler for poverty reduction and economic development. Panelists also underlined, however, the importance of investments outside of the health sector, in particular in education and water and sanitation, as well as in general infrastructure like communications, transportation and other areas impacting on health outcomes. Success is possible, but we need to scale up our efforts now.

> More and better aid for health and development is needed

The role of both more and better aid for health was emphasized, as well as the need for external partners, including UN agencies, to provide consistent advice to partner countries on macroeconomic implications of increased aid. Equally important is more predictable aid and its harmonization. The UN has an important role to play to improve overall coherence and the challenge of ensuring that development impact is as positive as it can be.

> 2005: a window of opportunity

The global momentum around the MDGs provide important opportunities for development and health, especially in the run-up to the high level meetings in the summer of 2005 and the summit in September. These opportunities are primarily political, but also with regard to important questions around financing and the future of international development. Major breakthroughs are needed if the international goals and targets for health are to be met and the lives of millions of people are to be saved.