



2010 SUBSTANTIVE SESSION COORDINATION SEGMENT

Panel II

“Coordinating efforts for achieving the health-related Millennium Development Goals”

Tuesday, 6 July 2010, 3.30 p.m. to 5.30 p.m.

CONCEPT NOTE

The panel discussion on “Coordinating efforts for achieving the health-related Millennium Development Goals (MDGs)” will be held on 6 July 2010, from 3:30p.m. to 5:30 p.m., at the United Nations Headquarters in New York, during the Coordination segment of the Substantive session of the Economic and Social Council.

The panel will examine how efforts undertaken by stakeholders, including the United Nations system and health alliances, can be better coordinated to achieve the health-related MDGs by the 2015 target-year. The panel discussion will provide an opportunity for ECOSOC to sustain the momentum of health on the international development agenda and it will serve as an input to the upcoming High-level Plenary meeting of the General Assembly on the MDGs.

Background

Enhanced coordination of efforts is crucial in achieving the health-related MDGs by 2015, particularly MDG 4 on reducing child mortality and MDG 5 on improving maternal health. Since the adoption of the Millennium Declaration in 2000, development assistance for health (DAH) has more than doubled and has played a major role in the remarkable progress that has been achieved on the health goals. Specifically, there has been great progress in reducing child mortality, deaths from measles, malaria and tuberculosis, and in delivering antiretroviral therapy. Despite these efforts, the health-related MDGs remain far from our reach: every year, half a million women continue to die from preventable complications in pregnancy and millions of children are lost to causes that are, without question, preventable.

The additional cost of achieving the health MDGs is estimated to be 36-45 billion USD, amounting to 24–29 USD per capita, of which two-thirds or more should be devoted to general health system support¹. However, progress is currently delayed due to lack of resources, poor aid

¹ Report of the Task Force on Innovative International Financing for Health Systems (2009).

effectiveness and the unpredictability of aid flows. Low-income countries currently spend only 25 USD per capita on health, of which only 6 USD comes from DAH. Only 20 per cent of DAH is allocated to health-system improvement, nutrition and infrastructure - elements that are crucial in improving maternal and child health; while half of DAH is allocated to vertical programmes. Also, as stressed in the 2009 ECOSOC Ministerial Declaration, there is a clear need not only to increase resources for health but also to improve the coordination and effectiveness of the existing efforts and thus ensure predictability and sustainability.

Innovative financing mechanisms can both help to fill the financing gap for the health MDGs and improve aid effectiveness. Through joint public-private or private-only mechanisms, innovative finance mechanisms can tap new sources of financing, streamline the flow of resources and create new partnerships. An excellent example of these innovative mechanisms is the health systems funding platform established by the Global Fund, GAVI Alliance and the World Bank. Such innovations can drastically improve health outcomes by supporting more efficient and results-oriented use of resources and by increasing the overall resources for health.

Objectives

The panel discussion will:

- Provide an overview of the potential innovative financing strategies for health and the challenges and opportunities that they bring forth;
- Explore specific initiatives, such as a health systems funding platform for the Global Fund, GAVI Alliance, the World Bank and others; and expanding the Global Fund to Fight AIDS, Tuberculosis and Malaria into a Global Health Fund;
- Explore possibilities to mobilize additional financing and build political support for innovative health financing; and
- Build momentum for advancing health on the global agenda and advocate for a prominent position for health in the 2010 MDG Summit.

In this regard, panelists can address the following questions:

- How could international efforts for health be better coordinated and thus meet the health MDGs by 2015?
- What innovative financing strategies would be the most effective in raising additional financing and decreasing the current unpredictability of DAH flows?
- How could innovative financing be directed into areas that are the most neglected and thus best support the MDGs, with a particular focus on MDGs 4 and 5? How can the lack of support for overall health systems and maternal health be addressed?
-
- How can political momentum be sustained and built, in order to maintain health as a top priority for “the 2010 MDG Summit”?
- What role can ECOSOC play in strengthening the coordination of these efforts?

Panelists

- Dr. Julian Lob-Levyt, CEO of GAVI Alliance
- Dr. Michel Kazatchkine, Executive Director of the Global Fund to Fight AIDS, Tuberculosis and Malaria
- Mr. Keith Hansen, Director for Human Development, Latin America and the Caribbean Region, the World Bank
- Dr. Philippe Douste-Blazy, Special Adviser to the Secretary-General on Innovative Financing for Development
- Dr. Carissa Etienne, Assistant-Director General, Health Systems, WHO

Discussant

- H.E. Mr. Leonard J. Edwards, Personal Representative of the Prime Minister of Canada for the G-8 and G-20 Summits