WHS WORKING SESSION
"GLOBAL HEALTH GOVERNANCE – MULTIPLE PLAYERS, MULTIPLE
VISIONS: CHALLENGES AND OPPORTUNITIES"
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## SPEECH

Good morning everyone,

I would like to start by thanking you for inviting me to speak at this very important session of the World Health Summit and for giving me the opportunity to speak on what is for me the burning issue of global health.

I think we can all agree that Global health is a term for which no single definition exists. Everybody has an idea, a perspective, a vision. But they are all different and this makes it very difficult, but also very enriching, to discuss it. When we in SANCO, the public health services of the Commission started working together on this with other services in the Commission last year we had great difficulty understanding the perspectives and priorities of those other services. It wasn't easy but we worked very closely together, all of us, in both our determination to come together and in our commitment to be coherent and effective in improving global health. I think we have succeeded.

And I will bet that the representatives of those countries that have developed national global health strategies – the UK, Switzerland, the USA, Brazil – would fully agree with me on this.

So we as a global community don't have a single definition. Generally, we can say that "Global health refers to those health issues which transcend national boundaries and governments and calls for actions to influence the global forces that determine the health of people."

Global Health is about specific objectives. It is about worldwide improvement of health, reduction of disparities, and protection against global health threats that disregard national borders. Addressing global health requires coherence of all internal and external policies and actions based on agreed principles.

Global health can be thought of as:

a notion - the current state of global health,

an objective - a world of healthy people, a condition of global health,

or a mix of scholarship, research, and practice - with many questions, issues, skills, and competencies.

But does this matter? The important thing is to agree on the objectives and to achieve them we need to break down walls. We need to build bridges, to reduce the ever increasing fragmentation, to act together.

So what do we do in the Commission to achieve that or at least to go closer to the target? Among others, the Commission adopted a Communication on Global Health in March and the EU Member States adopted Council Conclusions on this in May 2010. For those of you not aware of EU jargon, this means we launched a policy paper for discussion by the Member States and they gave us feedback on where they wanted us to go with this.

Further to that we organized a Global Health Conference in June 2010 to present our policy ideas and to discuss key challenges, goals, policy instruments and partnerships with stakeholders and global partners to see how the EU can most effectively engage with all actors to improve health at global level. The motto of the Conference was "Together we can make it Happen".

We welcomed around 300 participants from Ministries of Health, Development and Research in EU Member States, Candidate and Neighbourhood countries as well as partners from Africa, the Americas and Asia. In addition to WHO and other UN organisations, the private sector – academia, industry, civil society, professional groups and other NGO's - also participated. The main areas for discussion during the conference were on the challenges around equity, coherence in responses to globalisation, access and innovation, health as a human right, governance, and research.

We welcomed the views, perspectives, and contributions of all participants. We wanted to hear the participants views on how we can work together so as to make progress on this very important area. And I think we have achieved that.

In our new policy framework, the Communication on Global Health, the proposed areas for action, are based on EU principles of solidarity, towards equitable and universal coverage of quality health services. We highlighted the main challenges that the EU needs to address. This new policy framework aims to be a turning point in promoting the right to health and better addressing global health challenges.

The Goal of the Communication and the Conference was to try and explore how the EU can improve health throughout the world. This is an ambitious but feasible project which will require:

- Better governance of health at global level with a stronger and a more visible role for the EU. This includes a recognition of the importance of multilateral approaches and a leadership role for the WHO and I am very pleased to say that on that we are on the right track
- More solidarity at global level (not just in development aid but also in policies relating to e.g. workforce and access to medicines), which could lead to advances in attaining the universal right to health,
- Enhanced coherence between relevant internal and external EU policies, which would reinforce the EU as a global actor and enable it through the potential of its social model, its strong safety norms, and its presence in the global economy to play a bigger role in improving global health.

The EU's leading role in international trade and in development aid, as well as its values and experience with the EU social model reflected in the principles of solidarity towards universal and equitable quality health care gives the EU strong legitimacy to act on global health.

The EU can and should exercise a stronger voice in close cooperation with other global leaders (such as the United States, China, Brazil), to the benefit of the health of all citizens of the world. Coherence between internal and external policies is of paramount importance for the impact on health both in the EU and in third countries. Allow me to give you a few examples of the role the EU could play in these policies:

- On food security, the EU could ensure that its policies work in coherence to increase access to adequate food and link with national health strategies that include nutrition services and monitoring of nutritional status in the population. The EU could contribute to the development of strong and effective one-UN global leadership on nutrition and in the development of a Global Multi-sectorial Nutrition Framework.
- In trade, the EU could work to improve the situation concerning the affordability and access to essential medicines. This could include an initiative to help least-developed countries address the challenges expected after 2016. The EU could try to ensure that EU bilateral trade agreements avoid clauses which may undermine access to medicines. The EU could also work at global and regional level to eliminate trade in falsified medicines e.g. through the IMPACT (International Medical Products Anti-Counterfeiting Taskforce) initiative and to strengthen capacities for quality control.

- On security, the EU could include in its Common Foreign and Security Policy, attention to the access to health services of the populations under stress in fragile contexts and in peace and stabilization processes. Plans should ensure from the start that emergency aid to health links to the future rehabilitation and development of stronger health systems. The EU could and should contribute to the global and third countries' national capacities of early prediction, detection and response to global health threats e.g. pandemics, as committed under the International Health Regulations.

However, there is a need to translate the good intentions, nice words, political statements and the flow of international funds into strengthened health systems which can effectively provide basic health services in reach for all. They could, complying with the national and international commitments to the health sector, enable a basic package of health services which "ad minimum" is in reach of every citizen in this world.

We have no time to lose. We need all international organisations, in a more bold and strong leadership towards improved global health for all. We are ready to commit to our levels of aid and our commitments to align them behind comprehensive health plans. We need national governments to prioritize the health and very lives of their citizens above all. We need communities to take part in a renewed process where we

all work together instead of competing for our project or our disease.

And we must be coherent to ensure we have a common ground in response to globalisation challenges. We must seek to the development of common guidelines for the early identification of new and emerging public health challenges whatever their origin or nature. We must ensure not just at local level but at a global level that our workforce is well equipped and well trained to promote public health.

As I already said, the EU has a new policy framework which commits us to work collectively and across all sectors. It aims at contributing to improved governance at global and national levels. It recognizes growing inequities and directs EU development aid to confront them. It defines key areas to increase our coherence in addressing global health from the main angles of the EU's links to the world through dialogue and actions on trade, financing, development aid, migration, security, food security and climate change. With its newly adopted policy framework, the EU is committed to change gear, adjust direction and increase the speed as much as it can to contribute to better health globally. We are convinced, that together we can make it happen and I can ensure you that the EU will spare no efforts in this quest.

Word Count: 1570