

Towards a global agenda on health security



On Oct 6, 2015, France commemorated the 70th anniversary of the Social Security Acts, one of the founding keystones of the social model inspired by the National Council of the Resistance.

Over 70 years later, the duty to guarantee for all the universal right to health remains, more than ever, a priority, as exemplified by the adoption of the United Nations 2030 Agenda for Sustainable Development.

This right to health is a matter of urgency. The epidemics of Ebola virus disease and Zika virus show the breadth and intensity of the challenges. The interdependencies on a global scale amplify the unpredictability and the volatility of the threat, while these epidemics accentuate poverty and inequalities.

Every day, 16 000 children are the victims of preventable diseases, such as measles and tuberculosis. Hundreds of women die from pregnancy or childbirth-related complications each day, while in poor countries in epidemiological transition, chronic diseases, such as cancer, cardiovascular diseases, chronic respiratory diseases, and diabetes, are now responsible for more than half of all deaths.

A long-standing political willingness is necessary to reverse the global burden of disease. It is possible. Since 1990, preventable deaths among children younger than 5 years have fallen by more than 50% worldwide. New HIV infections worldwide decreased by about 30% between 2000 and 2013.

France, on behalf of its core values, will continue to be at the forefront of the fight. In 2015, France committed over €1 billion in development aid for health. Since 2007, France has invested more than €1.1 billion in UNITAID, representing its primary contributor and it also gave €4.4 billion to the Global Fund to Fight AIDS, Tuberculosis and Malaria.

France also acts in situations of acute crises, yesterday against Ebola in Guinea and today against Zika. We need to learn the lessons from these crises, in a spirit of responsibility and collective solidarity. During the closing of the High Level Conference on Global Health Security, on March 23, 2016, in Lyon, France, I fixed the following priorities:

1 Improve global mechanisms for surveillance, alert, diagnostics, and plans for crises response

With its new Public Health Agency, France has

strengthened these measures. The international dissemination of this expertise will be one of its priorities.

2 Manage crises by reinforcing the role of civil society, local experts, and affected populations

The funding dedicated to health projects led by non-governmental organisations will be increased, while France will strengthen the deployment of personnel through the European Medical Corps and WHO.

3 Support research in life, human, and social sciences

As the foresight in research is crucial, France has released €8 million for the REACTing consortium, under the auspices of INSERM, with the mission to coordinate research on emerging health threats, such as Zika and Ebola.

4 Apply the International Health Regulations with a strong and transparent global governance

France supports the creation of a global platform for the preparedness and response to health emergencies, for which the pivotal hub could be the WHO Lyon Office.

Nevertheless, the preparation for health emergencies and the response to crises need to coincide with long-term action to strengthen health systems and to build genuine universal health coverage, where needed.

France is determined to fight against the prohibitive price of certain new drugs, all while promoting

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innovation. France has therefore taken the initiative to mobilise the G7: for the first time this year, a meeting of the Health Ministers of the seven richest countries of the world should initiate a dialogue and coordination among the regulatory authorities, the pharmaceutical industry, and patients.

This action will be accompanied by a resolution to ensure effective access to care for patients. France already contributes by supporting, for example, the policies for free treatment for children under 5 years in four countries of the Sahel.

I now call for the international community to take on its responsibilities. Our capacity to fund quality care infrastructure and implement substantive prevention

and education policies for chronic diseases will depend on our determination to forge solid health coverage. This is also the prerequisite to correctly train and remunerate health workers, sorely lacking in resource-limited countries.

Our commitment to eradicate extreme poverty by 2030 is at stake; as is the cohesion of the international community at a time when health risks represent one of the major threats to peace and security.

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