

Informal Summary of the Round Table  
**"Partnerships in health- *lessons from multi-stakeholder initiatives*"**

Substantive Session of ECOSOC  
High-level Segment  
6 July 2009

**PANEL MEMBERS**

- Michel Sidibé, Executive Director, UNAIDS
- Philippe Douste-Blazy, Special Advisor on Innovative Financing for Development and Chairman of the Board of UNITAID
- Michel Kazatchkine, Executive Director, Global Fund to Fight Aids, Tuberculosis and Malaria
- Awa Marie Coll-Seck, Executive Director, Roll Back Malaria Partnership
- Marcos Espinal, Executive Secretary of the Stop TB Partnership
- Natalia Imbruglia, Spokesperson for the Campaign to End Fistula

**ISSUES AND DISCUSSION**

Global health partnerships have become in the last ten years, a new approach to help scale up priority health interventions and investments around the world. Panelists presented successful examples of partnerships in addressing diseases, in particular HIV/AIDS, tuberculosis, malaria, and the fight to eradicate obstetric fistula. They also called on the international community to develop new sources of financing to help countries battle these diseases, and to strengthen national health systems.

**KEY MESSAGES AND RECOMMENDATIONS**

- The Millennium Development Goals continue to provide an excellent framework for partnership in health and between health and the broader development field. With only six years to go to the 2015 deadline for the Millennium Development Goals, it is important to make partnerships work in global health.
- All speakers expressed a strong intention to further develop partnerships and to encourage organizations, governments and private actors to use partnerships as a platform for successful eradication of diseases in their joint efforts to strengthen global health systems.
- In the time of global economic and financial crises, there is a strong need to consider the economic value of partnerships in the health sector.

- Speakers also addressed the importance of partnerships for health delivery financing. Through innovative partnerships, appropriate prices can be set and more people can access high quality health care.

### **AIDS and partnerships**

It was noted that partnerships were crucial in the fight against AIDS. Worldwide solidarity has been developed and mobilized effectively, and important resources have been allocated to fight AIDS. For example, today, there are more than three million people who are treated in Africa. This demonstrates how global solidarity can produce concrete results.

However, there is some concern about the medication used for the treatment of AIDS, since 94 per cent of the people treated in Africa are treated with outdated medication. The lack of access to appropriate medication for vulnerable populations is also a human rights issue. Moreover, some 19 million of people are still untreated in Africa. A nationalized response, along with a long-term investment is needed, engaging all partners and donors to align priorities and actions against AIDS.

The response and coordination in the fight against AIDS shape the way UNAIDS and the Global Fund function. The AIDS movement has shown that public health requires the engagement and cooperation of all sectors of society. Responses to virtually any major health challenge are most effective and durable if based on collaboration rather than coercion, and it has contributed strongly to the idea that health products are not ordinary commodities but global public goods.

### **TB and partnerships**

Participants stressed the need to strengthen partnership for mainstreaming TB control within national health planning and primary health care systems. The tuberculosis vaccine is almost 100 years old, and partners are working hard to move forward. Today, a new diagnostic test has been introduced in endemic countries, which can tell whether a person has drug resistant TB in two days instead of three months previously.

To conquer TB, there are several bottlenecks that must be addressed, among them, the financial difficulties for people who cannot afford to cover the charges for the drugs, and the social determinants factored into TB.

### **Malaria and partnerships**

The value of partnerships in the eradication of Malaria was also stressed. The Roll Back Malaria partnership (RBM) has provided a coordinated global approach to fighting the disease. The RBM Partnership has agreed on a single road map for global malaria control and elimination around which all partners are aligning their work to achieve coordination and harmonization. The RBM has directly helped countries leverage unprecedented

international funding to fight malaria. The malaria community has joined with others to develop integrated models for delivery of health services.

In partnership with the Global Fund and UNITAID, RBM has taken forward an idea to make malaria medicines more effective. RBM supported a joint venture enabling technology transfer from Japan to Tanzania for the manufacture of state-of-the-art long lasting insecticide-treated bed nets. Partner support to deliver large-scale interventions has helped slash malaria rates by more than sixty percent in countries such as Eritrea, Ethiopia, Rwanda, Swaziland, Zambia and Zanzibar. Other countries are also making important progress.

### **The battle against fistula and partnerships**

The partnerships to eradicate obstetric fistula still need support at the national level. Fistula and maternal health must be addressed and integrated in the national public health care systems. A successful partnership between Virgin Unite, the United Nations Population Fund (UNFPA) and the Campaign to End Fistula has increased funding for the prevention and treatment of obstetric fistula. It has contributed to the health, economic and social well being of thousands of women in northern Nigeria. It has helped to ensure that fistula is no longer something that is hidden, forgotten, and unspoken.

### **The financial crisis and innovative sources of funding**

Participants agreed that the worldwide financial stalemate is affecting international aid. Most countries are decreasing their level of international aid, which are falling short of the \$50 billion urgently required to meet current needs.

In this context, there is an urgent need, together with national budgets, to develop new innovative sources of funding for health interventions that are effective and sustainable. Panelists stressed that one source of funding could be from tax payers. For example, some governments have introduced a small tax on airline tickets which is now financing projects around the globe. In deciding the price of vaccines, it is also important to develop partnerships with citizens. Partnerships with pharmaceutical companies, which could lower the cost of medication, and investors are also important.