

Comparison of the French and the German position in the Post-2015 development debate

Introduction

The formulation of the Post-2015 development agenda and the agreement on a key set of sustainable development goals is critical for the global health agenda in the years to come. The position of key European countries - such as Germany and France - on the SDGs, as well as their cooperation in the negotiations for the final set of goals will be very important.

That is why the Centre Virchow-Villermé for Public Health Paris-Berlin invited experts from ministries from France and Germany, from the WHO and other international organizations, from NGO's, from universities, as well as students, to discuss with about 50 participants a set of key questions in a round table discussion and to find answers to some of these questions:

- "How have Germany and France contributed to the "Millennium Development Goals?"
- "What position does each country have in the Post 2015/ Sustainable Development Goals (SDG)-debate?"
- "Who is involved on the national level?"
- "How is health anchored in the development policies of each country?"
- "How does each country supports the global move towards universal coverage / social protection?"

Marie-Paul Kiény, Assistant Director General at World Health Organization opened the discussions with a presentation of the ongoing SDG-debate, followed by a presentation of the French position in the post-2015 debate by **Christophe Paquet** from the French Development Agency. The German position was presented by **Christoph Schüürmann** from Kreditanstalt für Wiederaufbau (KfW), followed by **Martin Hirsch** from Assistance Publique – Hôpitaux de Paris, who highlighted the importance of universal health coverage for social, economic and political stability. An animated discussion followed which underlined the added value of German-French cooperation in global health.

Since the discussions in Berlin there have been further developments in relation to the SDGs- for example the Secretary General has provided a synthesis document in late 2014: "The road to dignity by 2030: ending poverty, transforming all lives and protecting the planet." There will still be considerable effort needed to give health a prominent position with respect to the final goals.

Health in the post-2015/SDG discussions

Marie-Paule Kiény (*Assistant Director-General, Health Systems and Innovation, World Health Organization, Switzerland*) provided a very helpful introduction to the state of negotiations in the post-2015/SDG discussions. For the past 15 years, the **Millennium Development Goals (MDGs)** have provided the conceptual framework of the global development agenda. Three of the ten MDGs were health-focussed, and it is commonly agreed that the health-related MDGs have been a success. There is no doubt that during the past 15 years, there have been more resources, and more progress in the field of global health than ever before.



Christophe Paquet (AFD), Michel Kazatchkine (United Nations), Marie-Paul Kiény (WHO)

Much of the progress in health was driven by the concrete goals and indicators established by the MDGs. When the set deadline of 2015 is reached, they will be replaced by the **Sustainable Development Goals (SDGs)**. It is not yet settled how prominently health will feature in the SDGs, which health topics and approaches will be taken up, and how far health will be integrated with other topics. The approach to health in the MDGs favored vertical programs, missing out on the health systems perspective and the health in all policies approach. In future, a broader approach will be necessary, focusing on health systems, health coverage and the social determinants of health.

The **SDG/post-2015 Process** is very complicated. The global debate on what should come after the MDGs was initially conducted in two parallel, intersecting political processes: on the MDG Summit in 2010, negotiations on the Post-2015 Development Agenda were initiated, while the Rio+20 Summit provided the starting point for negotiations on the Sustainable Development Goals (SDGs). Both processes were coordinated by a UN-staffed informal coordination group, and finally merged in November 2014. The Secretary General has provided the synthesis document: The road to dignity by 2030: ending poverty, transforming all lives and protecting the planet.

The emerging agenda and the way forward

While negotiations are ongoing, a broad agenda of health in the SDGs is emerging. A draft with 17 SDGs was presented to the UN General Assembly in July 2014, with goal three being the main health goal. Its **13 subgoals** can be grouped in three categories:

1. subgoals which address the unfinished MDG agenda of maternal, reproductive and child health, as well as infectious diseases
2. subgoals addressing the emerging agenda of non-communicable diseases (NCDs)
3. subgoals on cross-cutting issues relating to health systems strengthening, health coverage and the social determinants of health. This remains the case in the synthesis document.



Martin Hirsch (Assistance Public- Hôpitaux de Paris), Christoph Paquet (AFD), Joachim Schüürmann (KfW)

Remaining **controversies** in the ongoing negotiations relate to sexual and reproductive rights, and language around the Doha declaration, trade-related aspects of intellectual property rights and access to medicine. Besides these controversies, discussions focus on indicators and on how the overall number of goals could be reduced. Discussions are scheduled to conclude in August 2015 with a Working Group of the General Assembly leading into final discussions and the adoption of the SDGs in the September 2015 session of UN General Assembly.

The French position in the post-2015 development debate regarding health

Christophe Paquet (*Head of Division for Health and Social Affairs, French Development Agency, France*) described how over the past 15 years, health has been one of France's international development priorities, as testified by a threefold increase in French official development assistance (ODA) in health between 2002 and 2013.

Remarkably, 80% of French health ODA is channeled through multilateral organizations, highlighting France's commitment to multilateralism. In the field of development finance, France has pioneered **innovative financing mechanisms** such as the flight tickets tax and a financial transaction tax, generating funds for international cooperation in health.

Moreover, a new implementing agency has been created, the **Agence Française pour l'Expertise Internationale (AFEI)**, which is supposed to start its operations in 2015.

The French contribution to the post-2015/SDG-negotiations was led both by the Ministry of Foreign Affairs and International Development and by the French Development Agency (AFD). Both are highly satisfied by the outcome of the negotiations, and the current draft for the SDGs, which reflects France's priorities remarkably well.

These have been to address the unfinished agenda of the MDGs, in particular **reproductive and child health**, which remains a crucial issue in much of Sub-Saharan Africa, including the countries of the Sahel zone and Central Africa, which have been a focus of France's development assistance. Equally, the Ebola outbreak has highlighted the need to strengthen **health systems** in West Africa and elsewhere.

Meanwhile, growing middle classes in Asia and Latin America demand for better social protection, including **universal health coverage**.

Keeping the subgoals on the unfinished MDG agenda as well as the progressive language on universal health coverage in the SDGs will be the two main priorities of France in the upcoming year of negotiations.

The German position in the post-2015 development debate regarding health

Joachim Schüürmann (*Kreditanstalt für Wiederaufbau (KfW), Germany*) described how German development cooperation has for a long time been committed to health.

Firstly, and most importantly, health is considered by the German government as a basic human right. Moreover, investing in health brings great human and economic returns, e.g. by promoting economic growth through higher labor productivity. While the importance of health for development is generally acknowledged, great challenges remain. Poor governance, traditional disadvantages for women, the human resource crisis, weak social security systems and lacking infrastructure all pose important obstacles for better health.

Germany's focus in health ODA has been on the **strengthening of health systems**, and on achieving the MDGs. In this context it is key to remember that **infrastructure programs** such as those financed by German ODA are not just about bricks and mortar, but about providing building blocks for functioning health systems. Achieving **universal health coverage** is the final goal, with a large unfinished agenda: out of pocket-expenditure is in many low- and middle-income countries still the most important source of health funding.

Moreover, preparedness for emerging infectious diseases such as Ebola is not yet strong enough in many countries. The way forward will be marked by an integration of vertical programs into horizontal approaches, and an increasing use of multilateral funds, in order to make it easier for partner countries to handle donor relations.

The Role of Universal Health Coverage (UHC) in the post-2015 development debate

Martin Hirsch (*Director of Assistance Publique – Hôpitaux de Paris, France*) provided more detailed background on why universal health coverage and social protection- priorities of both France and Germany- are critical in the post-2015 debate.

In 2010, in the wake of the world financial crisis, the World Health Organization (WHO) and the International Labour Organization (ILO) decided to set up an **Advisory Group** on the Social Protection Floor. The advisory group was headed by former Chilean president Michelle Bachelet, and had a majority of members from low- and middle-income countries. The rationale behind this decision was the insight, highlighted by the financial crisis, that social protection is crucial to achieve many of the aims of the MDGs. **Social protection** is the most powerful means to affect change in a world marked by growing inequalities within countries. This was exemplified by Brazil, which was able to reduce its high Gini coefficient through ambitious social programs. Moreover, social protection is crucial for social, economic and political stability.

In the field of health, the idea of social protection is expressed by the concept of **universal health coverage (UHC)**. Within the international community a broad consensus on the desirability of universal health coverage is emerging, while a number of countries, including the US, UK and India, have remained skeptical.

For a long time, rapidly growing countries believed that they could achieve social progress through growth alone, but by now most emerging countries have been convinced that social protection is not inimical to growth, but necessary for social and economic stability. Discussions have moved on, now focusing not on the desirability, but on the financial feasibility of universal health coverage in low- and middle-income countries. In this context, the right mixture of private and public services, the right incentives for health professionals to stay in rural areas, the efficient use of information technology and the systematic integration of the informal sector into the health system are key to success.

Conclusion of the discussions

The discussions underlined the strong commitment of both Germany and France towards an approach to global health that goes beyond disease based vertical programmes. The recognition- based also on the history of social protection in both countries- that establishing universal health coverage with a broader system of social protection is necessary, is shared by both countries.

In the context of the post 2015 debate they have been strong proponents of an approach that prioritizes Universal Health Coverage, equity and health as a human right. This has also been reflected in the work the two countries did jointly with Switzerland in the constituency group France-Germany-Switzerland in the Open Working Group on Sustainable Develop-

ment Goals. France is also part of the Ministerial Group on Health and Foreign Policy (comprising Brazil, France, Indonesia, Norway, Senegal, South Africa, and Thailand) which (in support of the UHC agenda in the SDGs) prepared a major background paper on Universal Health Coverage for the 67th United Nations General Assembly, under the item “Global Health and Foreign Policy».

Over the last year German foreign policy has also become more engaged in global health matters, as was documented in the World Health Summit (WHS) which provided an overview of Germany’s Ebola response.

Both countries are strong advocates for an approach to global health financing which is based on other mechanisms than funding through charities and foundations- but neither of the countries have achieved the 0.7 goal of GNP for development. Their position will be critical as new financing mechanisms for the SDGs are discussed in summer 2015.

Both countries are also committed to a financial transaction tax and France has been a strong innovator in relation to new mechanisms of global health financing- as exemplified in organizations such as UNITAID.

Both countries have a strong commitment to multilateralism, the United Nations and to the World Health Organization. They recognize that in a global world smart sovereignty implies a commitment to global cooperation and to global public goods. France and Germany will play a critical role in shaping the EU positions on the SDGs as well as influencing the positions of major groups such as the G7/8 and the G20.

Prof. Ilona Kickbusch, Dr. Elke Schöffner

Mitarbeit: Peter von Philipsborn, Susanne Stöckemann

The Centre Virchow-Villermé for Public Health Paris-Berlin is a joint initiative of the M8-Alliance Members Charité – Universitätsmedizin Berlin and the University Sorbonne Paris-Cité. Initiated by the German-French council of ministers, it was founded in April 2013. The Centre Virchow-Villermé empowers the cooperation of German and French scientists and is open to structured international cooperation to achieve a sustainable improvement of health in Europe as well as to strengthen the contribution of both countries to Global Health.

During this year’s World Health Summit, the Centre Virchow-Villermé hosted two workshops with the focus on Global Health. Another two workshops will complete this series in 2015.

For more information: www.virchowvillermé.eu

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