# L20 COMMUNIQUÉ ON GLOBAL HEALTH

*2.1 Strategic Support for WHO's Global Outbreak Alert and Response Network*

WHO's Global Outbreak Alert and Response Network (GOARN) has repeatedly demonstrated its utility by facilitating early and rapid responses to infectious disease outbreaks. This global health security asset remains, however, undervalued, limiting the full potential of this global public good. We have agreed to instruct our foreign and health ministers to develop national action plans that will enhance each country's political, economic, and technological commitments to GOARN. Advice and consultation from WHO shall inform the action plans to ensure that they respond to existing and projected GOARN needs.

*2.2 Assessment of Country-Level Implementation of Global Health Security Measures*

WHO leadership has developed multiple components of the global health security strategy, including the new International Health Regulations and guidance on building adequate domestic capacities for handling severe public health threats. Implementation at country level remains a critical need. Therefore, we have agreed to create a L20 process through which our countries undergo periodic country-level assessments of the implementation of the core elements of the global health security strategy. This process shall utilize expertise drawn from governments, WHO, and non-governmental experts and organizations. These assessments shall produce non-binding, confidential recommendations to governments on needed country-level improvements in implementation of global health security measures.

*2.3 Resource Mobilization for Global Health Security*

L20 stewardship of global health security requires mobilization of new financial resources to fund country-level improvements and international-level needs. We have agreed to ask our finance ministers to work with their respective national legislatures, the World Bank, multinational corporations, and non-governmental organizations to mobilize fresh resources for strengthening GOARN and country-level implementation of global health security measures.

## 3. The HIV/AIDS Pandemic

No problem haunts global health like the HIV/AIDS pandemic. The L20 process has a responsibility to contribute to efforts already launched to address this great plague. We reaffirm the commitments our countries have made to increasing access to, and the efficacy of, HIV prevention and AIDS treatment through mechanisms such as the Global Fund to Fight AIDS, Tuberculosis, and Malaria and WHO's "3 by 5" Initiative. In addition, we have identified additional ways the L20 process can contribute to the global fight against HIV/AIDS.

### 3.1 Globalizing the Global HIV Vaccine Enterprise

In 2004, the G-8 endorsed the establishment of a Global HIV Vaccine Enterprise. We applaud the G-8's initiative to

create trade incentives that accrue to those developing countries that significantly and verifiably improve child and maternal health.

### 4.3 Trade Barrier Reduction Initiative

Efforts to reduce tariffs and other trade barriers that adversely affect access to life-saving and health-promoting products, such as mosquito bed-netting, indicate that systematically identifying and reducing such barriers could produce global health benefits. We have agreed to instruct our trade and health ministries to assess the effect of existing trade barriers on health-related products, technologies, or services in order to identify barriers that countries can reduce or eliminate without compromising health protection.

### 4.4 Vanguard Pledge on Non-Communicable Diseases

Evidence is mounting that non-communicable diseases (NCDs) are growing as a worldwide threat. WHO has called attention to these trends and taken aggressive action against tobacco-related diseases; but we share WHO's concern that neither national nor international NCD preparedness and response capabilities are adequate. To help remedy this situation, we pledge our countries to form the vanguard of global health action on NCDs. This vanguard pledge includes the commitment to (1) craft country-level strategies to reduce the burden of NCDs; (2) put NCD prevention and control on the agendas of regional political organizations, including the G-8, ASEAN, African Union, League of Arab States, and the Organization of American States; and (3) facilitate WHO efforts to increase regional and international NCD preparedness and response capabilities.

### 4.5 Global Health Workforce Summit

Current trends in the migration of health care workers from developing to developed countries are creating serious problems that require a multilateral response. To turn concern into action, we have agreed to instruct our health ministers to organize, with the participation and input of WHO and the

### *5.1 Fast Tracking Low-Cost and Low-Tech Health Solutions*

Scientific progress offers tantalizing possibilities for new health technologies, but we also recognize that much remains to be accomplished by increasing the global use of existing low-cost or low-tech health interventions. We have agreed to instruct our health ministers to work with WHO, private industry, and non-governmental organizations to identify feasible options to fast track broader and deeper implementation of existing inexpensive or low-tech health interventions in L20 countries for both infectious and non-communicable diseases.

### *5.2 Accelerating Influenza Vaccine Development and Supply*

Influenza poses a public health problem for all L20 countries, and we recognize the importance of increasing the use of influenza vaccine to address seasonal epidemics and the possibility of pandemic influenza. High-level political attention is, however, required to shore up the stability of influenza vaccine supplies and propel development of new vaccine development technologies. We have agreed to establish at the foreign minister level the L20 Influenza Task Force to accelerate the global agenda on influenza vaccine development and supply challenges. The Task Force shall endeavor to obtain support and commitment for its objectives from regional political organizations, including the G-8, ASEAN, African Union, League of Arab States, and the Organization of American States.

### *5.3 Global Health e-Library*

The amount of health information now available is unprecedented, but access to this wealth of knowledge is globally uneven. Efforts to increase the availability of health information in developing countries have proved valuable; but a more coordinated project to foster the flow of, and access to, globally relevant scientific and public health information would facilitate more effective utilization of existing and future know-how. We have agreed to create the blueprint for a Global Health e-Library, which would become the portal of choice for accessing cutting-edge scientific and public health information.

### *5.4 e-Health Equity Project*

Experts expect information and communications technologies increasingly to affect the practice of public health and the provision of health care. The capability of many developing countries to benefit from the

*5.5 Action Against Antimicrobial Resistance*

As documented by WHO, antimicrobial resistance has become a disturbing threat to global health. The development of antimicrobial resistance through misuse of antimicrobial drugs destroys life-saving health technologies and renders individuals and populations more vulnerable to microbial-related morbidity and mortality. Country-level implementation of WHO's global strategy on antimicrobial resistance has, to date, been inadequate. This situation is particularly alarming given the efforts underway to scale up antiretroviral treatments in many developing countries. We have agreed to instruct our health ministers to complete comprehensive country-level assessments of antimicrobial resistance policies and practices and to develop and implement action plans to correct identified problems. In L20 countries involved in scaling up antiretroviral treatments, such country-level assessments shall pay particular attention to the adequacy of antiretroviral resistance monitoring and response systems and capabilities.

## 6. Global Health Horizons Enterprise

The existing challenges to global health are many and require urgent attention, but we believe that we have a responsibility to future generations to facilitate visionary thinking about future global health threats and opportunities. We have agreed to create and fund a Global Health Horizons Enterprise, through which leading thinkers on the sciences, health, information technologies, social activism, and globalization are periodically brought together to discuss and debate probable and possible horizons for global health. The Enterprise thinkers will be tasked to provide actionable policy recommendations for L20 countries to pursue nationally and internationally.

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