

**Global Health Experts' Meeting**  
**“Agenda Shaping for Rome and La Maddalena”**  
November 29-30, 2008, Bellagio

**Purpose**

On November 30, Health Policy Institute, Japan and the Rockefeller Foundation organized a Global Health Expert Meeting at Bellagio as a preparatory meeting for the Global Health Forum in Rome in February. It brought together global health experts from Italy, Japan and the wider global health community to discuss and set the current key priorities for global health, and build strategies for promoting global health as a key agenda during Italy's leadership of the G8 in 2009. The meeting addressed 4 issues:

- a. Future of G8 and global health as a key agenda in 2009
- b. Sharing experience from the Japanese G8 process for global health
- c. Global health agenda for 2009
- d. Italian leadership in global health and role of stakeholders

**Organizers**

The Rockefeller Foundation, Health Policy Institute Japan

**Selected Discussion Points**

**1) Future of G8 and global health as a key agenda in 2009**

- Positioning of the G8 vis-à-vis G20 and G14 closely scrutinized. G20 engaged in economic and fiscal debates, while G8 faces credibility issue as MDG commitments not delivered.
- Economic slowdown will constrain spending for global issues, and thus improvement of spending efficiency a critical issue. Need to focus on key metrics such as infant mortality and maternal survival rates.
- Infectious diseases still a shared risk that needs global response.

**2) Sharing experience from the Japanese G8 process for global health**

- Multi-stakeholder engagement was critical to raise awareness and enhance political engagement.
- Linkage to past G8 (e.g., in Global Fund), values espoused (e.g., human security), Japanese technologies (e.g., malaria bed nets), and desire for international leadership played important roles in addressing global health.
- Davos presentation by the Prime Minister a milestone for agenda setting.

**3) Global health agenda for 2009**

- Success stories exist and need to be shared to combat aid fatigue – e.g., Egypt.
- Coordination across donor countries and integration by country possible with the will of G8 donors.
- Rising health care cost could be the world’s biggest economic challenge, a shared risk which needs to be addressed.

**4) Italian leadership in global health and role of stakeholders**

- Health as a fundamental individual right and interest of the community, and commitment to National Health Systems key Italian legacy.
- Maternal health provides potential for broad public support in Italy.
- Strength in promoting new financial mechanisms such as Advance Market Commitment and International Financing Facility for Immunization.
- Need to ensure continuity (e.g., health system strengthening) and adherence to past commitments. These should be the focus, as opposed to adding initiatives in time of limited resources.

**Follow-up Conversation with the Italian Government in Rome**

A delegation of the Bellagio meeting had a follow-up meeting with the Italian government’s G8 sherpa team in Rome on the following day, with the memo “Toyako Transition to La Maddalena”.

## Toyako Transition to La Maddalena

Due to the G20 mechanism on global finances, coupled with the need of the G8 to fulfill publicly announced commitments to global health and development, *the credibility of the G8 is on the line*. We therefore urge the G8 to consider:

- As was agreed by the G8 eight years ago in Okinawa, globalization has made infectious diseases a shared global risk, challenge and obligation to confront;
- As was agreed at the Gleneagles G8, the enormous economic, health and development disparities between sub-Saharan African nations and those countries comprising the wealthy world represent a special case, requiring debt forgiveness, large scale investment and targeted health initiatives;
- As was agreed at the Heiligendamm 2007 and Toyako 2008 summits, the weaknesses of health systems and shortage of millions of healthcare workers imperil achievement of all essential health aspirations. In particular, the Toyako meeting agreed that maternal and infant survival rates must be targets for dramatic improvements, and that the G8 would “work toward sustainable and equitable health systems;”
- All nations, rich and poor, now face severe economic challenges, due to the financial and credit crises. Lurking in the near future is an additional economic challenge threatening all nations: Healthcare costs. Consistently rising at rates exceeding general inflation in most countries, healthcare costs threaten to overwhelm the budgetary capacities of all countries.
- And, amid the current global financial crisis, the World Bank estimates that hundreds of millions of people have been pushed into sustenance-level poverty, and decades of donor support for health and development in developing and emerging market countries face possible reversal.

Therefore, we recommend that the G8 resolve in La Maddalena to:

- 1) Fulfill all *prior commitments* to global health and development initiatives in an immediate and transparent manner.
- 2) Insist that all available resources are used in close compliance with recipient nation needs and policies, and are focused on strengthening health systems. Further, resources must be used in *demonstrably efficient ways*, with outcomes measured accordingly: child survival rates as indicators of basic public health achievement and maternal survival rates as the key demonstration of healthcare delivery.
- 3) The G8 nations commit to untying all forms of assistance to developing nations, especially *food support*.
- 4) The G8 nations commit to reinvigorate efforts to achieve the health-related MDGs by 2015, not only through fulfilling financial obligations, but also through coherent, bilateral and multilateral efforts, planned in collaboration with host governments, specifically targeting MDGs numbers 4 and 5.
- 5) The G8 nations commit to increasing the training and use of their own healthcare work forces, obviating the need to recruit professionals from poorer countries. And, in light of the critical deficit of 4.3 million healthcare workers worldwide\*, the G8 commits to underwriting the in-country training of *at least* 500,000 doctors, nurses, health management personnel, pharmacists, dentists and community-level para-professional health providers by 2020.

\*Source: WHO, 2007.



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