

Commissioner for development Andris Piebalgs
European Commission
Rue de la Loi 200
B-1049, Brussels, Belgium

Brussels, 04 April 2012

Re: Making global health a priority in European Union development policy and funding proposals for 2012 and beyond

Dear Commissioner Piebalgs,

This Saturday, we will be celebrating World Health Day. However, the right to health is still not a reality for many people, notably in developing countries. In fact:

- Nearly 21 000 children died each day in 2010 (almost 900 every hour) - this amounts to 7.6 million children under five per year;
- In 2008, about 1000 women died per day due to complications of pregnancy and child birth. Over 55% of these deaths occurred in sub-Saharan Africa, 30% in South Asia, compared to only 0,5% in high-income countries;
- 34 million people lived with HIV/AIDS worldwide in 2010 and 1.8 million people died of AIDS-related illnesses during the same year. Increased efforts are needed to achieve, by 2015, universal access to HIV prevention, treatment, care and support, notably by reaching 15 million people living with HIV with antiretroviral treatment;
- Global health progress has been made in recent decades, but it is unequally distributed, not only across regions and countries, but also within countries¹.

In 2010, the European Commission (EC) adopted a Communication on “The EU Role in Global Health”². The objective of this Communication was to make Europe's contribution to global health more effective, in order to better support developing countries in getting back on track towards achieving the health-related Millennium Development Goals (MDGs).

The Council Conclusions that followed the Communication further confirmed the central role of the EU in accelerating the progress on global health challenges. However, apart from ad hoc measures such as the MDGs Initiative, this Communication has to date not been translated into a strategy to turn the EU's vision on global health into concrete action.

Therefore, we urge the European Commission to adopt by mid-2013 a time-bound action plan to implement the EU Commitments on global health, through a participatory and inclusive process, in consultation with civil society.

We welcome the blueprint's emphasis on health and education in the Agenda for Change³ – as these sectors lie at the heart of poverty reduction. However, **we regret to see that the proposed benchmark of 20% of EU aid is being extended** to a broad range of social inclusion and human development topics, instead of focusing on health and education as committed in the past. **This would clearly constitute a step backwards** from the initial 35%

¹All figures are taken out from the WHO website:<http://www.who.int/en/>

² EC Communication on the EU Role in Global Health – 31 March 2010 - COM(2010)128 final

³ Increasing the impact of EU Development Policy: an Agenda for Change – 13 October 2011 - COM(2011) 637 final

EU benchmark for social infrastructure and services and, more recently, the 20% benchmark for basic health and education in the 2006 Development Cooperation Instrument (DCI)⁴.

Moreover, the Commission's proposal, as laid down in its Communication on the Agenda for Change and in its proposal establishing a financing instrument for development cooperation⁵, does not offer a clear definition of 'social inclusion and human development'. In the absence of an EU Action Plan on Global Health, this could potentially lead to a diversion of social sectors spending to activities that have little to do with health and basic education.

Since the Millennium Declaration was signed in 2000, external and domestic resources allocated to health remain insufficient in most developing countries to ensure that all people have access at least a basic set of health services. **In order to fulfil the EU commitments stated in the EC Communication and the Council Conclusions on the EU Role in Global Health, it is fundamental to keep the policy emphasis on health. For this, and given the strong link between education and health, the 20% benchmark for health and basic education, needs to be applied to both thematic and geographic programmes of the DCI in the next EU external budget (2014-2020).** Besides, the 20% benchmark should also apply to the 11th European Development Fund (EDF). **This will contribute to ensure adequate financing to support free, public and quality health care in developing countries.**

Yours sincerely,

List of signatories:

- Action for Global Health
- CONCORD – Olivier Consolo, Director - Brussels
- Cordaid (Action for global Health) - Monique Lagro, Sector Manager health and well-being – The Netherlands
- Equilibres & Populations - Serge Rabier, Directeur Exécutif - France
- Fundación Intervida - Marcelo Abad, General Director - Spain
- German Foundation for World Population - Karen Hoehn, Vice Executive Director, Director of International Affairs – Brussels
- Global Health Advocates (Action for Global Health) – Patrick Bertrand, Executive Director - France
- Interact Worldwide (Action for Global Health) – Alan Smith, Chief Operating Officer – United Kingdom
- International Centre for Reproductive Health (ICRH) - Prof. Marleen Temmerman, Director - Belgium
- International Centre for Reproductive Health, Kenya (ICRHK) - Lou Dierick, Deputy Country Director - Kenya
- International Planned Parenthood Federation European Network - Eef Wuyts, Manager International Advocacy - Brussels
- Marie Stopes International - Thilde Knudsen - Head of Europe Office - Brussels
- Medicos del Mundo (Action for Global Health) - Álvaro González - President of MDM Spain - Spain

⁴ See European Commission's 2006 declaration on the DCI geographic programmes, committing to the 20% benchmark for basic health and education

⁵ COMM(2001) 840 Final

- Medicus Mundi International Network - Thomas Schwarz - Executive Secretary - Switzerland
- NGO DIA+LOGS - Ruta Kaupe, Board Chair - Latvia
- ONE - Alexander Woollcombe, Acting Brussels Director
- Oxfam International, representing Oxfam confederation - Jeremy Hobbs, Executive Director
- Plan EU Office (Action for Global Health) - Karen Schroh, Head of Office - Brussels
- Salud por Derecho - Vanessa López, Executive Director – Spain
- Save the Children EU Office - Olivia Lind Haldorsson, Director - Brussels
- Sensoa, Centre for Expertise on Sexual Health - Chris Lambrechts, Executive Director – Belgium
- Sidaction – Eric Fleutelot , Deputy CEO, International – France
- Solthis – Louis Pizarro, Director - France
- Spanish Federation of Family Planning (Action for Global Health) - Isabel Serrano, President – Spain
- Stop Aids Alliance (Action for Global Health) – Marielle Hart, Policy Manager - Brussels
- Stop Aids Now – Jael van der Heijden – Program Manager – The Netherlands
- The International HIV/AIDS Alliance - Anton Ofield-Kerr, Head of Policy – United Kingdom
- UK Consortium on Aids and International Development - Ben Simms, Director – United Kingdom
- Väestöliitto, the Family Federation of Finland - Marina Wetzer-Karlsson, Project Coordinator/Advocacy Officer - Finland