

FRANCE

3.1 HEALTH FINANCING AND STRENGTHENING HEALTH SYSTEMS

3.1.1 We will continue our efforts towards the goal of providing at least a projected US\$ 60 billion to fight infectious diseases and improve health systems. (Reiterated in 2008 and 2009: We reaffirm our existing commitments, including the US\$60 billion investment to fight infectious diseases and strengthen health systems by 2012).

As part of its revised strategy for development and global health, France considers health as a key pillar of its cooperation policy, both multilaterally and bilaterally.

For the time period 2011-2015 France intends to continue its efforts made in the fight against the 3 major pandemics (HIV/AIDS, tuberculosis and malaria), that are still the 3 major killers worldwide. In this area, France is increasing its financial contribution to the Global Fund (+20% for 2011-2013) and has committed to sustaining its support to UNITAID over the next three years. In addition the ESTHER network will also be reinforced to develop new activities and projects (i.e ESTHERAID).

The second major pillar of the French strategy is the significant importance given to maternal and child health. Following the presidential commitment taken in Muskoka, France strengthened its support to several international organizations working in this field (PMNCH, WHO, UNICEF, UNFPA, GAVI), and developed many new bilateral projects in its priority area of intervention. France now has a seat on the PMNCH Board.

Third, France believes it is instrumental that health systems are strengthened for more efficient and sustainable aid for health. On this aspect, we are focusing, through both multilateral and bilateral projects, on 3 major topics: strengthening human resources for health, access to quality drugs, and the development of risk protection mechanisms. In the HR field, France is a member of the HR Global Alliance in Health. In the field of health products, France is developing new projects with national partners aimed at improving delivery and use of health products (drugs and vaccines) in priority countries. France is also actively raising partners' awareness so that they better take into account issues related to falsified health products. France supports the Providing for Health Initiative (P4H) that helps countries develop and implement national policies for healthcare financing. The AFD (French Agency for Development) is also working on many projects in this field (introduction of a lump sum for obstetrics, support to national policies for health risk coverage, institutional support to the WAEMU).

France has been mobilizing its expertise around 3 related thematic platforms since 2010 (risk protection mechanisms, drugs and human resources for health). France will pursue the efforts made regarding neglected diseases (DNDI support) and will develop, through its vision of 'One Health', new actions concerning 'emerging diseases', in relation with the Pasteur Institute and the WHO office in Lyon. France is planning greater involvement in the new global challenges, including non-communicable diseases.

3.1.2. Mobilizing support for the Global Fund to Fight AIDS, Tuberculosis, and Malaria

France believes that universal access to prevention and treatment services is still a crucial goal to be reached beyond 2010 and is continuing its efforts in this regard.

France consider the October 2010 replenishment meeting of the Global Fund a success, since US\$ 11.7 billion were pledged for the period 2011-2013 (compared with US\$ 9.7 billion for the previous period). The 2011 challenge is now to transform pledges into effective contributions so that the Global Fund continues to be an effective and efficient instrument of collective mobilization for the three diseases. For 2011-2013 France pledged US\$ 1.4 billion to the Global Fund, which makes us its second largest international contributor and the foremost contributor at European level. This contribution will be allocated as followed:

- 95% of the amount will be transferred to the Global Fund as a classic direct contribution;
- up to 5% of the amount will be reserved for technical expertise for the development, implementation and evaluation of the Global Fund programmes in poorly performing countries. This measure aims to improve grant efficiency attached to the 3 diseases.

France is also fully committed in the reform process of the Global Fund, which aims to ensure that the Fund is even more effective and efficient in the fight against the three diseases.

3.1.3 Building on the valuable G8 Global HIV/AIDS vaccine enterprise, increasing direct investment and taking forward work on market incentives, as a complement to basic research, through such mechanisms as public-private partnerships and advance purchase commitments to encourage the development of vaccines, microbicides and drugs for AIDS, malaria, tuberculosis and other neglected diseases.

France considers public-private partnerships and innovative financing mechanisms to be two types of responses that are particularly suited for today's global health challenges

The requirements of an inclusive and sustainable growth path in developing countries, international solidarity imperatives (reducing/eradicating poverty and meeting the MDGs) and the necessity to preserve global public goods (in particular health segments) call for increased levels of more stable, predictable and sustained financial flows. Innovative financing mechanisms can then play an important role in providing additional resources to health for developing countries and may address some of the shortcomings of the globalized market economy and traditional ODA.

France considers that innovative financing mechanisms are particularly appropriate for enhancing the development and the scale-up of vaccines (IFFIm and AMC mechanisms) and drugs (air tax levy that benefits UNITAID or Red that benefits the GFATM). They can be used to stimulate R&D for new products related to neglected markets or diseases (pneumococcal vaccines, paediatrics ART, TB vaccine, etc.). As a consequence, France is the second contributor to the IFFIm and has committed €1.3 billion over 20 years (2007-2026). France also fully supports the concept of AMC as particularly appropriate for a sustainable approach for vaccine access in resource-limited countries.

UNITAID's success so far is remarkable and is mainly due to support from various (developed, emerging and developing) countries (including France: 60%): US\$ 560 million committed to HIV/AIDS, US\$ 315 million committed to malaria and US\$ 191 million committed to tuberculosis.

France, as head of the Leading Group on Innovative Financing for Development, proposed the launching, with other partners, of a new taskforce that will consider innovative financing methods adapted to the health sector.

Innovative financing mechanisms are often the source of innovative initiatives to address health issues. For example, in 2010 UNITAID launched a patent pool foundation – which France supports – which negotiates with patent holders to share their intellectual property with the pool, and then license it to other producers to facilitate the production of affordable generic medicines that are well adapted for use in resource-poor settings.

Since 2006, **seven countries** (France, Chile, Madagascar, Mali, Niger, Mauritius and South Korea) have decided to implement a solidarity air tax levy, the revenues of which are dedicated to the fight against AIDS, malaria and tuberculosis through the UNITAID initiative. Norway allocates part of its tax on CO2 emissions from aviation fuel to UNITAID. Around US\$ 900 million were raised and given to UNITAID between 2006 and 2010 through this innovative mechanism, while US\$ 400 millions have been raised through budgetary contributions. Since UNITAID's implementation, contributions from the United Kingdom represent 21% of overall funding, and France's contribution represents 60%. UNITAID's mission is to contribute to scaling up access to treatment for HIV/AIDS, malaria and tuberculosis, primarily for people in low-income countries, by leveraging price reductions for quality diagnosis and medicines and accelerating the pace at which these are made available.

3.1.4 Supporting capacity building in the most vulnerable countries in disease surveillance and early warning systems, including enhancement of diagnosis capacity and virus research.

In terms of disease surveillance and early warning systems, the implementation of the International Health Regulation is crucial. The WHO's Lyon office plays an important role in this regard. The mission of the office is to assist countries in strengthening their national surveillance and response systems to better detect, assess and warn of events and respond to public health risk emergencies of international concern under the HRI. France has allocated €2.6 million for international health

security and for the HRI. This concerns various activities such as training in relation to global health security, including for laboratory specialists, quality management for public health laboratories and epidemiological surveillance. Such activities have been focused on African countries.

France focuses its support on five sub-regions through the development of surveillance institutes (CIRMF in Central Africa, CRVOI in South East Asia, CARIBVET in the French West Indies, REMESA and EPISOUTH in the Mediterranean region). These institutes and networks contribute to surveillance and detection mechanisms for emerging diseases in close collaboration with national entities. France promotes a regional, multi-disciplinary and pluri-sectoral approach for disease detection.

Epidemiological surveillance in South East Asia - To cope with the emergence of new infectious diseases in Asia and the global threat of this phenomenon, the Pasteur Institute designed, in 2006, the project entitled 'Monitoring and Investigation of Outbreaks in South East Asia', or SISEA. These institutes are located in China, Vietnam, Laos and Cambodia, where they are recognized as centres of reference by health authorities. The project financed by AFD in 2006 (€ 5.9 million) helps to improve the capacity of reference laboratories and their networking, the epidemic alert on emerging viruses, and the response to epidemics in each country and regional level..

Epidemiological surveillance and regional integration: the example of the Indian Ocean - The countries of the South East Indian Ocean were hit in 2005 by an outbreak of chikungunya, which has had devastating consequences, not only in human terms but also economically. In this context, Comoros, Madagascar, Mauritius, Seychelles and Reunion, and France decided to establish a regional network for epidemiological surveillance, set up within the Indian Ocean Commission and funded by a grant of €5.6 million from the French Development Agency in 2007. These networks enable the exchange of health information, training in intervention epidemiology, rehabilitation and equipping of medical reference laboratories, as well as development of cooperation between human health and animal health alert systems. Since 2009, these networks have demonstrated the added value of this device, during the Rift Valley fever episode in 2008 or influenza A (H1 N1) .

3.1.5 The G8 members will work towards increasing health workforce coverage towards the WHO threshold of 2.3 health workers per 1000 people, initially in partnership with the African countries where we are currently engaged and that are experiencing a critical shortage of health workers.

France is a member of the Global Alliance on Human Resources for Health and supports it financially. France also supported the organization of the 2nd World Conference on Human Resources held in Bangkok in February 2011. Throughout 2011 France will be contributing to the writing process of the World Report on midwives. France provides the WHO with technical expertise in this field.

Congo Brazzaville: support for human resources policy - Health indicators of the Congo show a failure of the quality of care directly related to the availability of quality health personnel. The AFD financing (€6m grant) supports the Government in the development, adoption and implementation of a national strategy for proactive management of human resources for health and the design and implementation of paramedical training reform. Under the coordination of partners, given the coherence and consistency of strategies, the EU has entrusted management to AFD's funding dedicated to the training of health workers (€4.5m).

3.2 MATERNAL HEALTH AND CHILD HEALTH

We will scale up efforts to reduce the gaps in the area of maternal and child health care and voluntary family planning with an estimated US\$ 1.5 billion.

France has a long history of commitment to maternal and child health in developing countries. We provide support through diversified channels so as to benefit the largest number of recipients in the neediest countries:

- Support to various funds that have an impact on maternal and child health (Global Fund, GAVI, and UNITAID).

- Financial and technical support to United Nations agencies mandated to intervene on this topic (UNFPA, UNICEF, WHO: training, capacity building, access to family planning).
- Bilateral projects developed with the support of the AFD and in collaboration with non-governmental partners.
- Operational research projects (ANRS, IRD)
- Active advocacy for the reduction of mother-to-child transmission of HIV/AIDS (financial and technical support to UNAIDS, Born HIV Free campaign launched by the First Lady, support to the launch of the Mother/Baby Pack by UNAIDS/UNICEF)

France also organized, in collaboration with other partners, a regional conference about family planning, in Ouagadougou in February 2011.

Under the Muskoka initiative, the French President committed €500 million for the time period 2011-2015 that will be allocated as follows:

- Development of new projects in partnership with four multilateral organizations (WHO, UNFPA, UNICEF and GAVI) and with non-governmental organizations.
- Implementing new projects in priority countries, with the financial support of the AFD.
- Increasing the French contribution to the Global Fund to strengthen actions towards maternal/child health in the existing programmes supported by the Fund (ex: PMTCT).

France is promoting gender equality in the projects it supports in developing countries, such as income-generating activities through micro-credit programmes intended for women only. France is now mobilizing its expertise around a thematic platform on maternal and child health.

France- Mauritania. Since 2002, the lump sum for obstetrics allows women to benefit from insurance of €17 covering all costs related to pregnancy. Based on the principle of risk pooling, the lump sum for obstetrics ensures the quality of care and the sustainability of the intervention. In areas where it has already been established – which represent 40% of the target population – the lump sum for obstetrics helped to reduce maternal mortality by half. The project has also improved (i) the affordability of care, (ii) the availability of health workforce and drugs, and (iii) health statistics. Buoyed by the success encountered by the lump sum for obstetrics in pilot areas where it was set up through French Cooperation (2.1 million since 2002), the Mauritanian Ministry of Health has decided to enlarge the scale of this successful project as a public health policy. By extending the system to the whole territory, the aim is to achieve 80% of births attended by 2015.

3.3 FIGHTING INFECTIOUS DISEASES (NEGLECTED DISEASES)

We must also increase our efforts in the fight against other preventable diseases, particularly by increasing the volume and quality of medical research on neglected diseases in developing countries.

In addition to its actions against malaria (regarded as a neglected disease), France has been a constant supporter of DNDi (Drugs for Neglected Diseases Initiative) since its creation in 2003. DNDi aims to develop new treatments for visceral leishmaniasis, sleeping sickness (HAT), Chagas disease and malaria. France has contributed more than €8.8 million to DNDi through various channels. We will be investing an additional €2 million per year from now on.

Likewise, vaccine research has been constantly supported through various academic and private partners (ANRS, Pasteur Institute, etc.).

3.4 HIV/AIDS

Develop and implement a package for HIV prevention, treatment and care, with the aim of as close as possible to universal access to HIV/AIDS treatment for all who need it by 2010.

We commit to countering any form of stigma, discrimination and human rights violation and to promote the rights of persons with disabilities and the elimination of travel restrictions on people living with HIV/AIDS.

According to France, universal access to prevention and treatment services for HIV/AIDS remains a crucial goal to be reached beyond 2010. France will continue to make every effort to ensure that this objective can be achieved as quickly as possible for the benefit of patients.

Accordingly, France decided to increase its contribution to the Global Fund by 20%, a three-year commitment of €1.08 billion (13% of the total amount of contributions). With this funding 390 000 patients received ARV treatment in 2010.

During the same time period (2011-2013) France will dedicate a minimum of €330 million to UNITAID. France's contribution to UNAIDS was €1.3 million in 2010, and it is adding to the technical expertise allocated to the headquarters and regional offices of the organization.

To better assist countries, we believe that technical expertise should be provided in addition to financial support. France has developed a network of regional health advisors, and placed experts within inter-country teams of the WHO, whose role is to monitor the design and implementation of national policies to fight HIV/AIDS.

The ESTHER network (hospital partnerships) participates in this effort by developing support for health facilities in developing countries, especially in West and Central Africa and South East Asia.

For us, fighting against HIV/AIDS also passes through financial support to actions and activities developed by our non-governmental partners (mainly AIDES, Sidaction, ELSA, Act-Up, Solidarités Sida Info Service, etc.). Strengthening the South's civil society and promoting human rights are important aspects of the French strategy. France continues to actively promote free movement of HIV+ persons and condemns criminalization of homosexuality.

The launching in Paris in May 2010 of the Born HIV Free campaign by the French First Lady, the Global Fund's ambassador, was a milestone in the fight against HIV/AIDS. This campaign supports UNAIDS' goal to reverse the trend of 400 000 children being born with the infection each year.

On the research side, the French Research Institute on HIV/AIDS (ANRS) is still considered the second research institute worldwide on this topic, with a multi-disciplinary approach and various research projects on vaccines, access to care and treatment, and prevention.

3.5 POLIO

Supporting the Polio Eradication Initiative for the post-eradication period 2006-2008 through continuing or increasing our own contributions toward the \$829 million target and mobilizing the support of others.

The French Agency for Development is considering the opportunity to include a polio component in its support to the health sector in three countries in Africa (Mali, RDC and Chad) in partnership with other financial contributors.

In Afghanistan, the AFD is supporting a programme to control polio, malaria and leishmaniasis in the southern region, through the WHO (€3m)

3.6 MALARIA

Working with African countries to scale up action against malaria to reach 85% of the vulnerable populations with the key interventions that will save 600,000 children's lives a year by 2015 and reduce the drag on African economies.

As part of fulfilling our past commitments on malaria, we will continue to expand access to long-lasting insecticide-treated nets, with a view to providing 100 million nets through bilateral and multilateral assistance, in partnership with other stakeholders by the end of 2010.

France's commitment to the fight against malaria passes primarily through its investment in multilateral organizations such as the Global Fund and UNITAID.

The Global Fund spent 33% of its 2010 budget on the fight against malaria, and UNITAID has dedicated 30% of its global budget since its creation to the same cause.

Both organizations were instrumental in the scaling-up of ACTs and the distribution of insecticide-treated nets.

So far, the Global Fund has distributed 163 million nets, and UNITAID has provided financial support for the distribution of 20 million nets. Actions developed by these organizations have significantly reduced incidence and mortality rates of malaria, especially among children, in several endemic African countries.

2010 was also the year of acceleration of the AMFm initiative, which helps increase access to ACTs in countries with limited resources. This mechanism, based at the Global Fund, is co-financed by UNITAID.

France also provides financial and technical support for the Roll Back Malaria Initiative. France launched, in partnership with RBM, the first report on impact and progress in March 2010 in Paris ('Fight against Malaria: Funding and Use of Resources').

France provides technical support to the WHO to strengthen countries' capacities in fighting malaria. Also, France has invested heavily in research into an anti-malaria vaccine through the Pasteur Institute.

On a wider scale, France contributes to actions concerning research and training on malaria through French partners (IRD, and other academic partners), and under European funding that mobilizes more than €15 million annually.

3.7 TUBERCULOSIS

Supporting the Global Plan to Stop TB, 2006-2015

The French commitment to the fight against tuberculosis passes through its investment in the Global Fund and UNITAID.

Until today, the Global Fund has placed more than 7.7 million patients under treatment for tuberculosis (DOTS). Since its creation, UNITAID has dedicated around 16% of its budget to tuberculosis.

In compliance with its market and public health impacts mandates, UNITAID financed projects on paediatric TB, 1st line TB, MDR TB diagnosis and MDR TB treatments resulting in a reduction in prices for these health products. Myanmar, Bangladesh and Nigeria were the first beneficiary countries of UNITAID TB programmes.

The problem of multi-drug-resistant tuberculosis is a major difficulty in the current management of this disease, especially in terms of costs. Accordingly, UNITAID has committed funding for drugs, stockpiling and diagnosis of multi-drug-resistant tuberculosis

Moreover, France supports the Paris-based IUATLD to help implement national plans in the fight against tuberculosis.

Fight against tuberculosis in 5 Francophone African countries - The International Union against Tuberculosis and Lung Disease (IUATLD) – French international NGO present in 80 countries – is a centre of technical excellence recognized internationally in the field of tuberculosis. Implemented by the IUATLD, the AFD's support aims to improve the effectiveness of the fight against tuberculosis in five African countries (Benin, Burkina Faso, Cote d'Ivoire, Democratic Republic of Congo and Togo), through capacity building and technical management of national programmes and the consolidation of a network of experts. The project capacity building complements and enhances the efficiency of funding from the Global Fund to Fight AIDS, Tuberculosis and Malaria.

3.8 MEASLES

Will work towards a steady decrease in the number of measles-related deaths, progress in halting the spread of measles, and its eventual elimination.

France's involvement in routine immunization occurs mainly through its financial investment in IFFIm/GAVI (€1.3 billion). It also supports key national partners involved in developing countries (mainly AMP which aims to reinforce national capacity in immunization plans, including measles).