

## To save millions, G-8 must invest in proven tools to fight disease

Michel Camdessus and Gro Harlem Brundtland, London

As the leaders of the world's eight richest countries prepare for a meeting this July in Scotland, they will find the pieces finally are in place to do something that just a decade ago might have been dismissed as a well-intentioned but naive endeavor: To put an end to the crushing poverty that is at the root of the continent's economic and political instability.

The G8 helped set the stage for success five years ago by endorsing a series of Millennium Development Goals that pledged to substantially reduce poverty in the developing world by 2015, with Africa as a key focus on the effort. African leaders have responded with an impressive commitment to pursue economic and political reforms.

There have been bold statements on all sides. But the clock is ticking. When the G8 meets next month, the world is right to expect bold action.

A critical test for the G8 is whether it takes advantage of what many view as an opportunity for a quick win: Providing the resources to expand proven solutions for reducing the crushing burden of disease that is a major contributor to Africa's perpetual political and economic frailty, and so much of its deep poverty.

Every year millions of Africans suffer and die of diseases that don't kill many people in rich countries. Among children under the age of five, death comes at a rate of one every three seconds, as they succumb to diseases such as rotavirus, pneumococcal disease and malaria, which in developed countries are prevented with routine vaccines, treated with easily available medicines, or kept under control.

These diseases do more than inflict human misery in Africa. They cause such a drain on resources and productivity that they damage the entire economy. For example, there are estimates that if rich countries had done in Africa what they did for themselves -- eliminate malaria -- annual GDP would be \$100 billion more than it is today. Even a mere 10 percent drop in malaria infections could provide a .3 percent increase in GDP.

Imagine what a greater reduction in malaria and other debilitating afflictions could bring?

The good news is that much of the hard work to fight these diseases in Africa already has been done. Over the last few years, thanks to the diligent efforts of a number of public and private players, solutions are in place or in the pipeline that could give Africans the same health security now taken for granted in rich countries.

For example, efforts by the Global Alliance for Vaccines and Immunization and its partner, the Vaccine Fund, have saved more than 670,000 lives by helping countries immunize children against Hib disease, pertussis and hepatitis B. The Global Fund to Fight AIDS, Tuberculosis and Malaria has put 1.6 million people on AIDS treatment in three years and provided enough insecticide treated bednets to protect half the families in Africa from mosquitoes that carry malaria.

Meanwhile, programs to develop new drugs and vaccines for diseases that now mainly affect Africans, such as malaria, rotavirus and pneumococcal disease have recently produced promising results.

The bottom line the international community is that we have an opportunity to make a big difference in Africa by providing the resources to expand programs we know are successful, and to accelerate research that is already very close to providing powerful new interventions.

No one is saying that any of these solutions will be cheap. But here again, new mechanisms are in place and require urgent donors support. At their July meeting, G8 leaders will have the opportunity to create what is being called the International Finance Facility for Immunization (IFFIm). It would help donor countries provide immediate

financing for health assistance to African nations by selling bonds on international capital markets that are backed by donor commitments.

Leading voices in Africa say Africans are ready to do their part. For example, Nelson Mandela, both as an individual and through his Nelson Mandela Foundation, has pointed to fighting disease as an area where aid can have the greatest impact. Mandela and others have made it clear that Africans are prepared to develop their own solutions and to be held accountable that the funds supporting them produce results.

Five years ago the world leaders said it was time to break the cycle of poverty in Africa and the world embraced the cause with enthusiasm. In the last five years we have seen the Millennium Development Goals become a mainstream phenomenon. In many countries, children study them in schools. Rock stars campaign for them at concerts.

Today, we have an exciting convergence of proven solutions and the popular support that add a new dimension to our partnership suffering people of Africa. This is a rare moment in history. The G8 and all advanced countries have now an unprecedented opportunity to commit the resources required to fight the global health crisis and other debilitating problems that affect Africa. With progress so close at hand, we are right to expect that the leaders of our most prosperous countries will seize this opportunity and emerge from their summit ready to invest aggressively in Africa. In our increasingly interdependent world, we will all profit from the returns on this vital investment.

*Gro Harlem Brundtland is former Director General of the World Health Organization and former Prime Minister of Norway and Michel Camdessus is French President Jacques Chirac's Personal Representative on Africa and the former Managing Director and Chairman of the Executive Board of the International Monetary Fund (IMF).*