



Letter from participants of the G7 Civil Society Taskforce which met in Rome (1-2 February 2016) to members of the G7 Health Experts Working Group meeting in Tokyo (18-19 February 2016).

Dear Members of the G7 Health Experts Working Group

We need a commitment at Ise-Shima to a truly transformative agenda for health and sustainable development

The G7 has a long tradition of supporting health. The 2016 Summit under Japan's leadership, the first following the adoption of the 2030 Agenda for Sustainable Development, has the potential to be a transformative G7, starting a new commitment to Universal Health Coverage (UHC) whilst increasing momentum on existing priorities such as the Global Fund.

We and the undersigned organisations support three priority areas:

Universal Health Coverage for 2030 Sustainable Development

The era of the MDGs has reached an end. There is finally an historic commitment under the SDG Framework to Universal Health Coverage. As an ambitious target for health system strengthening, a G7 endorsement of the principles of UHC will be powerful catalyst for ensuring equity and the right to health for all. Stopping the daily scandal of unnecessary mortality and poor health, coping with infectious disease outbreaks and reducing antimicrobial resistance all require universal health services which are accessible to all, adequately funded and staffed.

We call on the G7 to:

1. Endorse the principles of UHC: that everyone has the right to health without facing financial hardship.
2. Assert that UHC must not discriminate against any social groups or leave anyone behind, bringing the poorest and marginalised into coverage urgently. Closing equity gaps is imperative to the success of the SDGs.
3. Confirm that UHC requires a move from the injustice of out-of-pocket payments to increased domestic resources. The G7 should endorse greater fiscal space for countries to raise fair taxes and increase public spending, including through the IMF and World Bank.
4. Even with increased domestic resources, there is a \$27 billion annual gap for the poorest countries for UHC. G7 countries should contribute 0.1% of GNI to health, as part of 0.7% to ODA and ensure that their aid is aligned to support national health plans, coordinated through the International Health Partnership+ and the Roadmap for Health System Strengthening.
5. Support a new Global Partnership or Alliance for UHC which can drive global momentum and ensure all actors are playing their part. Governments, the UN, civil society and the private sector need to refocus, harmonise and align their policies and contributions towards UHC.

6. Support greater UHC accountability to ensure sufficient monitoring and commitment.

Prevention and Responses to Global Health Threats

Building UHC is the priority so that health systems will be far better equipped to stop outbreaks before they become national disasters. However, countries which cannot cope with infectious disease outbreaks need fast and effective international help. While we support better and more coordinated responses, we also raise the following concerns about the Pandemic Emergency Financing Facility:

1. Prevention is better than response. Helping countries build strong systems for UHC must not be a lower priority than responding. Defining “health security” narrowly as pandemic preparedness undermines the importance of a health system that saves lives and protects livelihoods every single day. Health security means ensuring no one goes bankrupt when they get sick.
2. Any global funding mechanism must not present private sector insurance as a magic solution. Companies will make an overall profit from insurance which can only come from public money that should be funding public services.
3. Qualifying for payouts will be complicated and companies will always seek to avoid payouts. There may also be a perverse incentive to declare outbreaks, impacting on fragile economies.
4. Countries with weaker health systems may be expected to pay higher premiums and receive lower payouts; those countries most in need may benefit least from the PEF.
5. All multilateral institutions on global health crisis, including PEF, should ensure full involvement of civil society in its governance, implementation and evaluation.
6. The reform of WHO and supporting its role in coordinating global health responses should not be undermined by other actors.

Increased aid for health to end ongoing global health crises

G7 actions have helped to save lives and to start to turn around global health problems including major epidemics through the Global Fund to Fight AIDS, TB & Malaria, child and maternal mortality through the Muskoka Initiative, nutrition and polio. The 2030 Agenda for Sustainable Development is ambitious about ending health threats. To achieve this, greater investment is necessary, always supporting comprehensive health systems.

1. The G7 should lead the process of the fifth replenishment of the Global Fund to ensure it is fully-funded Global Fund, whilst making sure its new strategy (2017-2022) for resilient health systems supports UHC
2. G7 countries should extend their political and financial commitments to accelerate progress towards eradication of polio and planning of the transfer of polio assets towards health systems to contribute to UHC.
3. Continue and increase investments in Research and Development for poverty-related and neglected conditions and infectious diseases and support manufacturing of treatments, vaccines and diagnostics in low and middle-income countries.
4. Ensure a strong commitment for the coming Nutrition for Growth Summit in Rio: the World Health Assembly nutrition targets and the SDG health targets can only be reached through increased focus and new financial commitments to nutrition.
5. Support the Global Strategy for Women, Children and Adolescents’ Health and ensure that essential SRMNCAH services at primary care level are the first priority of UHC, including Sexual & Reproductive Health & Rights.
6. Recognise and reinforce the importance of the social and gender determinants of health by also mainstreaming gender into national health strategies.

We are happy to share more information on the any of the points above or discuss possible outcomes of the Ise-Shima Summit on health, please contact G7@stateofchange.co. In the meantime, we wish you a successful meeting and will work with you for a transformative G7 commitment to health.

Signed by the 176 organisations named below:

- 1,000 Days
- Abha Light Foundation
- Abibiman Foundation
- Academics Against Poverty
- Action Contre la Faim (ACF)
- Action for Development (AfD), Suisse
- ACTION Global Health Advocacy Partnership
- action medeor - German Medical Aid Organization
- Action Santé Mondiale/Global Health Advocates France
- Africa Health Budget Network (AHBN)
- Africa Japan Forum
- Africaid Zvandiri
- AIDOS - Italian Association for Women in development
- ALEJO Community Support Project
- Alliance of Young Nurse Leaders and Advocates International, Inc. (AYNLA)
- Alternative Santé Cameroon
- Anesvad
- Association Burkinabé pour la Survie de l'Enfance (ABSE)
- Association d'Entraide Médico-Sociale AEMS-ASBL
- Association for Improvement the Food of the Mothers and children in south kivu/AMEKI/ Republic Democratic of the Congo.
- Association Tunisienne de Prévention Positive
- Azad India Foundation
- Bethel Viva Foundation
- Bhakti Asih Purwakarta, Midwife Academy
- Bhartiya Mahila Evam Gramin Utthan Sansthan
- BHOJPUR MAHILA KALA KENDRA
- BHOPE
- Blood Patients'Proection Council, Kerala,India
- Bond (UK membership body of NGOs working in international development)
- BRAC
- C-NET+ (Collaborative Network for Persons with HIV)
- Canadian HIV/AIDS Legal Network
- CCM Comitato Collaborazione Medica
- Center for Health and Gender Equity (CHANGE)
- CENTER FOR PUBLIC HEALTH
- Center for Social Group Development - CSGD
- Centre for Girls and Interaction (CEGI Malawi)
- Centre for Healthworks, Development and Research Initiative (CHEDRES)
- Centre for Sustainable Development and Education in Africa
- Cherangany community Aids programme organization (CCAPO CBO)
- CICODEV Africa
- CIDEP Non Governmental Organisation
- COMMUNITY AND FAMILY AID FOUNDATION-GHANA
- Community Development Fund (CDF)
- Community Working Group on Health (CWGH)
- Concern Worldwide
- Confederation of Meningitis Organisations
- CSGD- Center for Social Group Development
- Djantoli
- DSW (Deutsche Stiftung Weltbevoelkerung)
- Eastern Africa national Networks of AIDS Service Organizations (EANNASO)
- Equilibres & Populations
- Espolea A.C.
- Evidence for Action
- Faculty of Public Health, Albanian Public Health Forum
- Fast Rural Development Program
- Federal Medical Center, Yenagoa, Bayelsa State, Nigeria
- Federal University of Minas Gerais
- Forum for Human Rights and Public Health -Nepal (Friendship-Nepal)
- Friends of the Global Fund Europe
- Fundación Mexicana para la Salud
- Fundacion para Estudio e Investigacion de la Mujer -FEIM-
- FUTURE FOR MARGINALISED COMMUNITY
- Future Generations International (FUGI), Ghana.
- Gateway Health Institute
- General Trade Union of Workers of health services and pharmaceutical industries
- GLAPD_Africa, asbl-DRC.
- Global Health Council
- Global Health International Advisors GHIA
- GLOBAL VOLUNTARY DEVELOPMENT ASSOCIATION
- Grameen Development Society [GDS]
- Grandmothers Advocacy Network
- Greek Pediatric Society
- Greek Union of General Practitioners
- Health Access and Integrated Development Initiative
- Health Reform Foundation of Nigeria
- Health Systems and Development Initiative
- Helen Keller International
- HORIZON YOUTH DEVELOPMENT
- INA (Māori, Indigenous & South Pacific)

HIV/AIDS Foundation

- Incentives for Global Health
- Inis Communication
- INITIATIVE FOR COMMUNITY DEVELOPMENT NIGERIA
- Insaf Doctors Forum Pakistan
- International Diabetes Federation
- International Pharmaceutical Students' Federation
- International Planned Parenthood Federation (IPPF)
- International Society for Social Pediatrics and Child Health
- International Women's Year Liaison Group
- Japan Anti-Tuberculosis Association
- Japanese Organization for International Cooperation in Family Planning (JOICFP)
- Johanniter International Assistance
- John Snow, Inc. (JSI)
- KENYA AIDS NGOS CONSORTIUM - KANCO
- Kenya Association for Maternal & Neonatal Health - KAMANEH
- Kenya NGO Alliance Against Malaria
- Kidney Foundation of Bangladesh
- Krityanand UNESCO Club Jamshedpur, India
- KTRI
- Lean on Me Foundation - Kenya
- Len Deacon - LDA South Africa and LDA Namibia
- Malaria No More Japan
- Management Sciences for Health
- Marie Stopes International
- Medical Mission Institute Würzburg
- Medici con l'Africa CUAMM
- Medicines for Malaria Venture - MMV
- Medicus Mundi - Spain
- MEERA FOUNDATION, India
- Michael Adedotun Oke Foundation
- MUB - Home Foundation
- Muso
- Nations Capacity Building Programme NCBP
- NCD Alliance
- Nigerian Health Economics Association
- No More Epidemics campaign
- NPO2050
- One Million Community Health Workers Campaign
- ONG ASDAP
- Open-Ended Response
- Operation ASHA
- Operation Hope Community Based Organization
- Osservatorio Italiano sull'Azione Globale contro l'AIDS
- Oxfam International
- Oxfam Italia
- Pathfinder International
- PILS (Prevention Information et Lutte contre le Sida)
- PLENITUD Foundation, Dominican Republic
- PO "The Association of parents of disabled-children" (APDC) "ARDI"
- POSITIVE-GENERATION/CAMEROUN
- Princess of Africa Foundation
- RESULTS Australia
- RESULTS Canada
- Results for Development Institute
- RESULTS UK
- Right to Care: SA(Treating Health Seriously)
- Rotarian Action Group for Population & Development (RFPD)
- Rozaria Memorial Trust
- S. SAMRAJ Christian AIDS/HIV National Alliance (CANA), India
- SanIgest internacional
- Save the Children
- SMILE AFRICA DEVELOPMENT ORGANIZATION.
- SOLTHIS (Therapeutic Solidarity & Initiatives for Health)
- SOS MATERNAL HEALTH
- TAW CAMEROON
- The Association for Rehabilitation and Re-orientation of Women for Development (TERREWODE)
- The Children's Project International
- The Global Poverty Project
- The Leprosy Mission International
- The Mother and Child Health and Education Trust
- THE SOCIETY for DEVELOPMENT of EDUCATION & HEALTH of COASTAL AREA POPULATION (UPAKUL)
- Treasureland Health Builders Initiative
- Tribhuvan University
- Ugoku/Ugokasu (GCAP Japan)
- Union des ONG du Togo (UONGTO)
- Universal Versatile Societ
- Universidad Isalud
- Universidade do Algarve, Faro, Portugal
- University of Leeds
- WAFA
- Wellbeing Of Humanity (Formerly Wellbeing World Wide)
- Women Deliver
- World Foundation for Medical Research and Prevention
- World Heart Federation
- World Vision Japan
- World Young Women Christian Association
- WOTE Youth Development Projects
- Young Professionals Chronic Disease Network
- Youth Advocates for Change -Zambia
- Youth Engage (Zimbabwe)
- Youth Initiatives For Youth Action (YIYA) Foundation
- YOUTH JOINT ONLINE BROADCASTING KENYA (YJOB-KENYA)
- Youth LEAD Cambodia
- Zambia Asthma Association
- ZAMBIA HEART AND STROKE FOUNDATION

