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# World health solidarity at crossroads

**DON'T PLAY WAITING GAME:** Infectious diseases don't respect national borders

**A** DECADE ago, the global community stood together to declare that where people live should not determine whether they live or die when confronted by the scourge of AIDS, tuberculosis, or malaria.

This act of solidarity — unprecedented in human experience — led to revolutionary advances in promoting healthcare as a human right. The Global Fund to Fight AIDS, Tuberculosis and Malaria, along with the United States President's Emergency Plan for AIDS Relief, quite literally changed the course of history. Programmes directly supported by the Global Fund have saved nearly eight million lives since 2002 — an average of more than 4,400 lives a day.

While much has been accomplished, much more remains to be done — and the Global Fund needs at least US\$2 billion (RM6.3 billion)

to reverse a funding freeze that is in place through 2014. So, the world now plays a waiting game to see whether governments will step up and fill the gap.

To be blunt, many of the world's largest economies are not fulfilling their financial pledges to the Fund. Their politicians cite budget constraints and the need to prioritise domestic programmes over fighting diseases that disproportionately kill the world's poorest.

My country, Rwanda, has been a recipient of Global Fund grants since 2002. Just 18 years ago, our society was torn apart by a brutal genocide that killed more than one million people. Today, Rwanda is a

peaceful country full of promise and hope, with one of the world's fastest-growing economies.

With Global Fund support for our national institutions, we have achieved universal access to lifesaving anti-retroviral therapy for people living with HIV, and we have stabilised HIV prevalence at around three per cent of the population.

Similarly, Rwanda's tuberculosis programme has become a model for Africa, and all Rwandan families now have access to insecticide-treated bed nets to prevent malaria, contributing to an 87 per cent drop in cases during the last seven years.



Rwandan President **Paul Kagame** speaking at the London Summit on Family Planning. Rwanda recently made its first donation of US\$1 million to the Global Fund to Fight AIDS, Tuberculosis and Malaria. **AP pic**

Integration of services for infectious diseases and primary care has contributed to some of the steepest declines in child and maternal mortality ever observed. And, as life expectancy in Rwanda continues to climb (from below 30 in 1995 to 55 in 2010), we are now taking action against non-communicable diseases such as heart disease, cancer, and diabetes. The flexible, country-owned support provided by the Global Fund has been crucial to our success.

My country is living proof that investing in health is not only the right thing to do, but that it can also create virtuous cycles that promote security and development. In fact, after receiving Global Fund support for years, Rwanda recently

made its first donation of US\$1 million to the Fund.

Unfortunately, infectious diseases are far from under control around the world. Less than a quarter of the world's children living with HIV have access to treatment, and up to a million people still die of malaria each year. And, alarmingly, only one in six patients with drug-resistant tuberculosis currently receives proper treatment. Moreover, reports of "totally drug-resistant tuberculosis" have recently emerged from India.

Policymakers would do well to remember that it only takes one airplane flight for such a pathogen to go global. Infectious diseases neither respect national borders nor conveniently follow economies

into recession.

History has shown that retreating from the fight against an epidemic can lead to a renewed plague that is immune to our best drugs, requiring far more expensive measures to control.

Our choice could not be clearer: either we resolve to answer the call of history and provide the Global Fund with the resources that it needs, or we allow political lassitude to undermine a decade of progress and consign untold thousands to preventable deaths.

Investing now, on the other hand, would pay off in the long term: just US\$6 billion more per year for the AIDS response today would save more than US\$40 billion in averted treatment costs alone over the next decade.

Today, the Global Fund stands at a crossroads. The international community's regard for the health of the world's poorest in the face of financial uncertainty will be a standard by which history measures not only our ability to stand together in weathering economic upheaval, but also our capacity for justice.

Now is the time for donor countries, including middle- and low-income countries, to rise to the challenge and ensure that the Global Fund has the resources needed to accept new grant applications as soon as possible.

The costs of inaction are morally — and economically — untenable. **Project Syndicate**