

# Japan Should Demonstrate Leadership in Global Health

**KUROKAWA KIYOSHI**

**MASAAKIRA JAMES KONDŌ**

Japan is expected to play a leading role in development assistance in the area of global health. Japan has led the fight against infectious diseases in the world. Now Japan should focus on issues where progress is lagging, such as challenges in maternal and child health. In order to do so, it is crucial to incorporate the financial support and know-how of the private sector.

## **JAPAN CALLS FOR WORLDWIDE COMMITMENT TO GLOBAL HEALTH**

A major issue for the Group of Eight Hokkaidō Tōyako Summit that Japan will host this July—in addition to responding to the worldwide economic slowdown and addressing climate change—is the progress of developing nations, in particular the issue of global health. This issue will also be a focus of the Fourth Tokyo International Conference on African Development, which will convene in May in Yokohama.

The number of deaths from the three major infectious diseases, namely, HIV/AIDS, malaria, and tuberculosis, is estimated to be 6 million annually. This means someone dies every five seconds from one of these diseases. In the area of maternal and child health, a half million women die annually from complications related to pregnancy and childbirth, and more than 11 million children die each year before reaching the age of five. Developing countries are hardest hit, especially the poorest countries in sub-Saharan Africa, where the most severe conditions exist. There is a striking disparity between developed and developing countries: The child mortality rate of the poorest countries is more than 50 times greater than that of Japan, while the maternal mortality rate of the poorest countries is more than 200 times greater (see the table).

The goals of global health are to halt these continuing deaths from treatable diseases concentrated in the developing world, to fight world poverty through such efforts, and ultimately to contribute to human security and peace building.

It is Japan that cast this issue of global health as a worldwide challenge. At the G8 Kyūshū-Okinawa Summit in 2000, Japan called for a global commitment to fight infectious diseases including HIV/AIDS, tuberculosis, and malaria and took the initiative in creating two frameworks that have shaped the subsequent efforts of the international community.

One of the frameworks is the Millennium Development Goals, which 189 nations adopted at the United Nations two months after the G8 summit in 2000. This sets eight goals for the international community to achieve by the year 2015, four of which are related to global health. Specifically, these goals are eradicating hunger, reducing child mortality, reducing maternal mortality, and combating HIV/AIDS, tuberculosis, and malaria. The MDGs establish a drastic reduction target for each goal.

The other framework is the Global Fund, which was established in 2002 after two years of discussion. The Global Fund was established to fight HIV/AIDS, tuberculosis, and malaria. It is estimated that this fund has helped save the lives of 2.5 million people over the last five years.

## **TWO KEY ISSUES IN THE CONTEXT OF DIMINISHING OFFICIAL DEVELOPMENT ASSISTANCE**

The two frameworks drew significant international attention to the issue of global health. As a result, funds devoted to the efforts in this area have ballooned from \$6 billion in 2000 to \$14 billion in 2007.

Having provided strong leadership in the area of global health at the G8 Kyūshū-Okinawa Summit in 2000, Japan attracts high expectations from the

**KUROKAWA Kiyoshi**

Received his doctorate in medical science from the University of Tokyo. Has been a professor of medicine in the Departments of Medicine at the University of California, Los Angeles, University of Tokyo, and Tōkai University. Is now a commissioner of the World Health Organization, a professor at the National Graduate Institute for Policy Studies, chairman of the Health Policy Institute, Japan, and special advisor to the cabinet of Japan.

**Masaakira James KONDŌ**

Received his master's degree in business administration from Harvard University. Joined McKinsey and Company and has been a consultant at the McKinsey Global Institute. Is now an associate professor at the University of Tokyo and vice chairman of the Health Policy Institute, Japan.

international community. The upcoming G8 Hokkaidō-Tōyako Summit is a good opportunity to review the efforts made in global health since the 2000 G8 summit and to bring about a new international trend in this area. The major achievement of the 2000 summit was that it focused on fighting the three major infectious diseases and significantly expanded the resources directed at this issue. This year's summit is expected to shed light on other areas lagging behind these efforts and to establish a system for delivering comprehensive healthcare. It is a mission of Japan as the chair of the summit to steer the meeting towards this trend.

At the World Economic Forum Annual Meeting in Davos this January, Prime Minister Fukuda Yasuo announced the global agenda to be addressed at this year's G8

summit. Included in the agenda was global health. He specifically talked about the improvement of maternal and child health and the enhancement of human resources in the health field in developing countries. This direction is in line with the new trend of international efforts sought in the area of global health. By focusing on these challenges in the context of this new international trend in global health, Japan can present a clear vision to the international community.

Among the health-related Millennium Development Goals, the child and maternal mortality rates in particular still remain serious. If malnutrition—which accounts for 35% of the total deaths under five years of age—could be reduced, it would also contribute to eradicating hunger as is stipulated in the MDGs. Given that Britain and Germany are also focusing their attention on maternal and child health, forming an international alliance is a possibility to tackle this issue.

Cultivating health professionals in developing nations is also an urgent issue. As many educated health professionals are headhunted by healthcare institutions in Europe and the United States, healthcare delivery in developing countries is at stake. Under such circumstances, it is crucial to develop a system for delivering comprehensive healthcare in order to complement the disease-specific measures such as those in the MDGs.

The question is how do we get the funds to do all of this? The budget of the Japanese government for official development assistance has been dramatically reduced in recent years. Though the ODA extended to Africa is increasing slightly, the total amount the government can spend on a short-term basis is limited. In addition, there are also unavoidable uses of funds, such as continued contributions to the Global Fund, which was established through Japan's leadership. In such circumstances, it is impossible for Japan to exercise leadership without incorporating the resources and wisdom of the private sector at home and abroad, including private foundations and companies and non-governmental organizations. To this end, there are two urgent tasks to be addressed.

**MORE SUPPORT NEEDED FOR THE EFFORTS OF PRIVATE COMPANIES**

Firstly, governments should, from the beginning, include private foundations as governmental partners in formu-

**GLOBAL DISPARITY IN MATERNAL AND CHILD MORTALITY****Maternal mortality rate, 2000** (per 100,000 live births)

	Country	number of persons
1	Iceland	0
2	Ireland	4
3	Austria	5
3	Canada	5
3	Finland	5
3	Italy	5
3	Spain	5
.....		
18	Japan	10
.....		
165	Nigeria	1,600
166	Angola	1,700
167	Malawi	1,800
168	Afghanistan	1,900
169	Sierra Leone	2,000

**Child (under 5) mortality rate, 2004** (per 1,000 live births)

	Country	number of persons
1	Iceland	3
1	Singapore	3
3	Finland	4
3	Japan	4
3	Monaco	4
.....		
188	Liberia	235
189	Afghanistan	257
190	Niger	259
191	Angola	260
192	Sierra Leone	283

Source: World Health Organization, *World Health Report 2006*.



Japan hosted the Third Tokyo International Conference on African Development in 2003; TICAD-IV convenes in Yokohama this May.

lating measures and programs regarding development issues. In the area of global health, there are many private foundations in the world with monetary resources comparable to those of governments. Examples include the Bill and Melinda Gates Foundation (United States) and the Wellcome Trust (Britain). Although it is more often the case in Japan that the government establishes a framework and then invites actors from the private sector, this process tends to hinder large-scale cooperation between the government and the private sector.

Secondly, a new funding mechanism should be established in collaboration with the World Bank, Asian Development Bank, and African Development Bank. Something to be noted in this respect is a funding mechanism called “outcome-based debt buy-down.” It has been piloted in several projects, including polio eradication activities in Pakistan. If a target for polio reduction is reached, donor governments and foundations “buy down” a certain amount of the loan or credit needed for the project implementation. Because it is outcome-based, it lowers the barrier for extending assistance, at the same time creating incentives for borrowing countries to achieve specific targets. It is an effective mechanism to involve outcome-conscious private organizations in development assistance and to promote efficient use of donor governments’ funds.

Furthermore, there are two measures to be taken over the medium to long term that should be initiated immediately.

The first is to support the efforts of private companies. Companies from Europe, the United States, and China have been rushing into African markets, which have been enjoying high economic growth rates in recent years. While Japanese companies as a whole are somewhat behind in this trend, there are some exceptions. One example is Sumitomo Chemical, which has developed mosquito nets for preventing malaria and greatly contributed to creating local employment by building its factories in Africa. The problem is that most Japanese people and companies do not know about these outstanding efforts.

Starting with this year’s Tokyo International Conference on African Development, the Hideyo Noguchi Prize for Africa will be awarded every five years. This prize was established by former Prime Minister Koizumi Jun’ichirō to reward outstanding achievements in the fields of basic medical research and medical services contributing to the health and welfare of the people of Africa. The Japanese government’s enthusiasm for raising the prize to a level that rivals the Nobel prizes is attracting attention in the international community. It is critical to provide strong support for the efforts of private companies so that there will be more outstanding achievements made by companies in new fields.

The second measure to be taken is to support non-governmental organizations in enhancing their public relations activities. The Japanese government, out of fear of criticism, tends not to build close cooperative ties with NGOs beyond a certain level. However, NGOs can help to shape public opinion in favor of extending international assistance through their public relations efforts. This in turn can guarantee political support for providing assistance under severe fiscal circumstances. Without the efforts of civil society to shape favorable public opinion, it is hard to establish a stable foundation for providing international aid.

The G8 summit is a forum where the agenda-setting ability of the host country is tested. Among many challenges, such as climate change and the world economic slowdown, global health is the area where Japan can exert strong leadership. Japan is expected to follow the G8 Kyūshū-Okinawa Summit tradition to appropriately set agendas, create a new trend in which the private sector can participate widely, and lead the world on the issue of global health.

*Translated from “Kokusai hoken de shudōken hakki o,” Nihon Keizai Shimbun, March 11, 2008, p. 29. This is a slightly edited version of the translation prepared by the Health Policy Institute, Japan. (Courtesy of Nikkei Inc. and the Health Policy Institute, Japan)*