

**Conference on "Global Health beyond the Millennium Development Goals:
Visions for public health priorities and the corresponding health research
agenda up to 2030". University of Copenhagen 28 April 2011**

Speech by

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Ladies and gentlemen,

First of all let me thank you for the opportunity to address this conference on Global health beyond the Millennium Development Goals.

The creation of the Millennium Development Goals – MDG's – has indeed been a great success. Since 2000 the eight specific goals have constituted the framework for international development cooperation. The MDG's have been vital in setting ambitious targets for the world in the fight against poverty. The MDG's have resulted in clearer priorities, including for the social sectors where we have seen significant improvements in relation to access to education and the fight against HIV/AIDS. Denmark has been at the forefront in advancing

especially the three MDG's related to gender equality, women's health and the fight against HIV/AIDS. We will continue to do so.

In May last year, I launched the Danish Government's new strategy for development cooperation: "Freedom from Poverty - Freedom to Change". The concept of the strategy is quite straightforward: Without political and economic freedom, people are kept in poverty. Governments should work to create the conditions under which economic and political freedom is attainable.

Freedom from disease is one of the most fundamental determinants of health. It is important for economic and social progress for families as well as for societies. Only by ensuring the opportunities to participate in economic growth can we help people to cross the barriers of poverty.

Better health is a global public good. In a globalized world it is not only problems of ill health, risk and vulnerability that cross borders. So do solutions. Thanks to inventions in HIV medicines and to solid strengthening of health systems we can now - 30 years into the epidemic - offer free of charge, life saving treatment to many AIDS patients in low income countries. We are

slowly beginning to see some of the same progress in terms of diabetes where access to diagnostics and treatment is also becoming more widespread.

But global health is not only about providing solutions to existing challenges. It is also about preventing and mitigating the serious implications poor health has for the people living in the poorest parts of the world. We need to assist the developing countries in tackling the determinants of poor health. And we need to address the issue of health and development in a comprehensive manner:

How does violent conflicts, migration, urbanization, gender inequality and climate change affect global health challenges?

One of the challenges in global health in the future will - without doubt - be what we call the “double burden of diseases” in the poorest countries, namely the twin burden of both chronic and infectious diseases. For a long time, chronic diseases have been treated as a symptom of high standards of living. As donor countries we have been worried about the increase of chronic diseases in our own countries, but we have not paid much attention to chronic diseases in developing countries. Today we know, unfortunately, that chronic diseases are

a global challenge. Demographic ageing, rapid urbanization and the globalization of unhealthy lifestyles are universal trends.

We also know that developing countries and their people are much more vulnerable to the consequences. They still struggle with the fight against HIV/AIDS, malaria and other infectious diseases. This will remain the major challenge for a number of years. On top of this, they also struggle with weak health systems that are overburdened and with a lack of health staff.

Denmark is a strong advocate for an integrated approach to health and development. We want to stress the need for broad health system strengthening rather than focus on specific diseases and vertical interventions. To this end we support the health sector in 5 African countries and a range of key international organizations and partnerships working with capacity building and health systems strengthening at country level.

We are approaching 2015 and the process of preparing for post-2015 has already begun. When we look beyond 2015 and debate future development cooperation the picture is indeed complex. The agenda will be influenced – not only by new and emerging health burdens - but also by other major global

trends such as energy and food security and changing aid architecture. In addition to this we must not forget that achievement of the current MDG's is lacking behind. We need continued strong focus on gender equality and women's empowerment and on children's and women's health.

Ladies and gentlemen,

The Millenium Development Goals have had an enormous impact on world politics in the fight against poverty. We now need to take it to the next level, and look beyond 2015. Research on future health challenges is an invaluable contribution to the coming debates. We need help from researchers in order to respond to future challenges and to update our picture of global health burdens.

The focus on noncommunicable diseases such as diabetes is one example where Denmark has something special to offer – be it by research into insulin or in nutrition.

Health researchers have a lot to offer to the advancement of the MDG agenda. I encourage all of you here today to communicate your results in all phases of research so that we can maximize the use of evidence in policy making.

Looking beyond 2015, I welcome this conference as an important input to our

common discussions on the main challenges that will shape the post-MDG agenda.

Thank you and I wish you a fruitful conference.