

Global Health in the international literature is not only a modern conception of health as defined by Jeffrey Koplan¹, insisting on the need (1) to apprehend health problems beyond the borders of the countries where they originate, (2) to take into account all the environmental and social determinants of health (beyond the health care system alone) and (3) to provide a global, multilateral response to these problems. Born in the 1990s, **Global Health has become a major player on the international scene and has gradually developed into a real disciplinary field**², with its community of specialists, its reference systems, its concepts (the "One Health" approach³, health as a global public good, universal health coverage, etc.), its own objects (international public health policies, the health consequences of demographic and epidemiological transitions, governance, global health financing, infectious pandemics or the global spread of chronic diseases, for example) and its specificities, particularly its multidisciplinary (epidemiology, bio-statistics, human, economic, social, political and environmental sciences) and multi-sectorality (considering that health issues are deeply linked to education, agriculture, climate, the environment, etc.).

There is currently no teaching and research program dedicated to global health in France. The players in the academic world, universities and public scientific and technological institutions (EPST⁴) are not optimally organized to be fully involved in this particular issue. The science of sustainability⁵ is not developed and the integration of life sciences, ethics, social sciences and earth sciences remains unsatisfactory in the field of global health, even though it seems imperative to articulate the biological, ethical, human and environmental dimensions of health. It is difficult to explain France's systemic backwardness, given the international influence of French research in the field of health⁶ and the specific role it has played in the advent of global health over the last 20 years⁷ (through its support for the creation and operation of the Global Fund or Unitaïd or its strong involvement in health crises). It must be noted that the French players have not been able to organise themselves until now.

This absence is detrimental to the promotion of health diplomacy and the French contribution to global health. It is particularly damaging in the current context of the **establishment of the WHO Academies**⁸. The decision to place the Academy in Lyon is a magnificent opportunity. Beyond the financial and organizational aspects, France must bring its expertise in pedagogical reflection, the definition of contents and curricula, and the selection of teachers.

It seems essential to us today to identify, mobilize and federate all the French forces likely to be involved in the WHO Academy project. More broadly, this dynamic could eventually lead to the definition of an academic field of global health in France, in perfect harmony with our country's international action in the field of health.

Our findings and proposals are as follows:

1. French expertise in health training and research is particularly advanced and recognized. The influence of French health research is both significant (let us recall the 13 Nobel Prize winners in physiology or medicine), and internationally oriented thanks to the networks created by the IRD, the Pasteur Institute, the ANRS or the CIRAD. Beyond research, high-level medical expertise and the quality of French health education are assets on which France can rely on.

2. There is currently no diploma course specifically dedicated to global health in France. Some institutions offer specializations or seminars on global health as part of a broader training program, but there is no master's degree entirely dedicated to global health or at least with this designation. Examples include the Masters in Political Science at the School of Public Affairs and the Paris School of International Affairs (PSIA) at Sciences Po Paris, Masters in Public Health (EHESP⁹, ISPED¹⁰, INSEEC¹¹), or the Global Health specialization certificate offered by the CNAM in collaboration with the Pasteur Institute in Paris. A significant number of students or professionals seeking training with the "Global Health" label go abroad, generally to English-speaking countries where the diplomas attached to this label are numerous and renowned. France thus deprives itself of the formation of a global health community of practice that can bring its values and expertise to bear and generate structuring ideas or new concepts that can inform the debate in national and international arenas.

3. France should set up a doctoral program labelled "global health". Doctoral students who want to do a thesis in this field go abroad or choose a broader doctoral school, in public health, economics or political science, for example. Some are attached to the University of Bordeaux¹², the Cermes¹³, or the Pierre Louis Institute¹⁴. High-level academic expertise and research in global health do in fact exist in France, but they are not recognised as such. It would be important to define the contours of a comprehensive and multidisciplinary training program, offering a curriculum for future global health researchers and professionals.

4. France remains very little present in international academic networks on global health, compared to the United States or other European countries, although its research output and its role in international debates should potentially ensure it a place of prime importance¹⁵. The French academic system as it is currently organized is not very conducive to the production of new knowledge in global health: research teams dispersed in different EPSTs; French universities and *grandes écoles* with little internal mobilization and little demand from public authorities; insufficient links between researchers, educators and policy makers¹⁶, fragmented training and the virtual absence of think tanks dedicated to global health issues. Conversely, several academic global health institutes are promoting the influence of American universities (Harvard, the University of California San Francisco, Emory or Columbia). In Europe, the Institute for Global Health and Development in Amsterdam (AIGHD), the Department of Global health innovation at the Imperial College London, the Department of Global Health at the London School of Economics, the London School of Business, the London School of Economics and the London School of

Hygiene and Tropical Medicine, the Geneva Institute for Global Health, the New Global Health Centre in Milan or the Global Health Center of the Graduate Institute in Geneva are central locations for health research and education worldwide.

Federating all the academic institutions involved in global health in France seems to us particularly important, especially in the context of the implementation of the WHO Academy in Lyon.

5. The creation by the French academic world of a young generation of French experts in global health is essential to implement the agenda of the Sustainable Development Goals (SDGs). The creation of a structured academic field of global health in France would also make it possible to train future French and Francophone decision-makers, to stimulate the emergence of a young generation of global health professionals, capable both of taking over from the French presence within international organizations and of playing a role in global health action financed by France's official development assistance.

In conclusion, we believe that this is an opportune time to mobilize the French active forces in global health.

It would be particularly interesting: (1) to precisely map all the teaching and research laboratories involved or that can be mobilized in France on health / global health issues; (2) to situate their contribution in the European, French-speaking and international field of health / global health and to launch a dynamic around the WHO Academy and (3) to accompany more broadly the definition of the new academic space of global health in France.

APPENDIX 1: Presentation of Santé mondiale 2030

Santé mondiale 2030 is an independent think tank that has been bringing together personalities with a long history of involvement in global health issues since 2016. It places its reflections within the framework of the Sustainable Development Goals.

OUR COMMITMENT

France is one of the largest providers of international health funding, but its influence in international bodies and health partnership platforms remains limited.

We are convinced that France can only be heard and listened to in the international arenas of global health when its actors succeed in conveying a strong and coherent message, structured around clear and stable objectives, supported by values that are attached to the history of health in France.

Our objective is to **formulate recommendations on France's global health policy and to mobilize all stakeholders** so that health issues become a strategic focus of French international aid.

OUR PREVIOUS NOTES

- 1- [White Paper on Global Health](#)
- 2- [Our vision of Global Health](#)
- 3- [Health is a priority for the Sahel](#)
- 4- [Breathing new life into the fight against tuberculosis](#)
- 5- [Malaria Business](#)
- 6- [Contribution to the preparation of the next Global Fund Replenishment conference](#)
- 7- [The existence of a European Commissioner for Health is essential for the health of Europeans](#)
- 8- [The French institutional framework for Global Health](#)
- 9- [UNAIDS: what stakes, what future?](#)

OUR MEMBERS

Santé mondiale 2030 brings together personalities who have long been involved in global health, such as Françoise Barré-Sinoussi, Paul Benkimoun, Michel Cot, Sana de Courcelles, François Dabis, Annabel Desgrées du Lou, Jean-François Delfraissy, Éric Fleutelot, Frédéric Goyet, Mathieu Lamiaux, Michel Kazatchkine, Marie-Paule Kieny, Lélío Marmora, Benoît Miribel, Olivier Nay, Louis Pizarro, Anna-Laura Ross, Benoît Vallet. Stéphanie Tchiombiano is the coordinator.

Our vision of Global health

Global health is a fundamental human right. It is **also a global common good**. **Universal access to health** and the construction of sustainable health systems are central to **human development**, the **economy and the fight against poverty**, as well as **security**. They therefore make a decisive contribution to the **inclusive development of societies and to peace**.

Health issues are complex and require **long-term strategic visions** to address the challenges posed by globalization, increased human trade, demographic transitions or climate change.



APPENDIX 2: Notes and references

¹ Koplan JP, Bond TC, Merson MH, Reddy KS, Rodriguez MH, Sewankambo NK, et al. Towards a common definition of global health. *The Lancet*. June 2009;373(9679):1993-5. Global health is generally defined as "an area of study, research, and practice dedicated to improving health status and achieving health equity for all people, worldwide," according to the definition of American researcher Koplan. More specifically, this conception of health is linked to the globalization of exchanges and practices. It emphasizes (1) the global nature of health problems beyond the borders of the countries that have seen them emerge, (2) the transnational nature of health determinants and risk factors for these health problems, and (3) the inability of states to regulate these health problems alone. Global health therefore calls for collective and international solutions.

² This new disciplinary field is in some ways the successor to international public health, itself a product of what was then called "tropical medicine".

³ The "One Health" approach emphasizes the continuum of plant, animal and human health.

⁴ Here we refer to CNRS, INED, INSERM and IRD.

⁵ "Sustainability science" strives to promote interdisciplinary and intersectoral approaches aimed at better understanding the complex causal chains that affect global eco-socio-systems and to propose innovative solutions that facilitate sustainable development trajectories. See Furman E et al. Expansion of sustainability science needed for the SDGs. *Nature Sustainability* | Vol 2 | October 2019, 892-894.

⁶ 13 Nobel Prizes in Physiology or Medicine, open to the international thanks to an excellent field network (IRD, Pasteur Institutes, ANRS, CIRAD).

⁷ Atlani Duault A, Dozon JP, Wilson A, Delfraissy JF, Moatti JP. State humanitarian verticalism versus universal health coverage: a century of French international health assistance revisited, *Lancet*, June 2016, Flight 387, 2250-2262.

⁸ In partnership with France, the WHO Academy aims to provide training to millions of people through a state-of-the-art digital platform on a campus in Lyon and through branches in the six WHO Regions. The Lyon hub will feature high-tech learning environments, a world-class health emergency simulation centre and collaborative spaces for co-design, research and innovation. <https://www.who.int/fr/news-room/detail/11-06-2019-collaboration-between-france-and-whoto-realize-the-vision-of-the-who-academy>

⁹ The École de Hautes Études en Santé Publique (EHESP), based in Rennes, is accredited by the ASPHEA (Agency for Public Health Education Accreditation) and offers 14 courses within its Master's degree in Public Health. It also offers a Master of Public Health (PMH), an international, multidisciplinary training program taught in English.

¹⁰ The School of Public Health of the University of Bordeaux (ISPED) offers 9 training courses within the Master in Public Health, both face-to-face and distance learning.

¹¹ INSEEC Business School offers a Master's degree in "Management of Healthcare Institutions".

¹² The University of Bordeaux doctoral school, "Societies, Politics and Public Health", covers 10 specialities, including the Public Health speciality with 3 options : Biostatistics, Epidemiology, Computer Science and Health.

¹³ Cermes3, Centre de recherche médecine, sciences, santé, santé mentale, société, is a multidisciplinary laboratory dedicated to the social analysis of contemporary transformations in the worlds of science, medicine and health and their relationship to society. Cermes3 is a laboratory of the CNRS (UMR 8211), Inserm (U 988) of the EHESP and the University Paris Descartes. It is attached to two Labexes: Sites and Tepsis.

¹⁴ The Pierre Louis Institute of Epidemiology and Public Health, created in 2014, is a laboratory that brings together all the research forces in epidemiology and public health of Sorbonne University.

¹⁵ French research and diplomacy, for example, played a leading role with the WHO and the ILO (as part of the P4Health initiative) in introducing the goal of universal health coverage in MDG 3 at the United Nations General Assembly in September 2019, but this role remains little recognized and valued. See <https://www.un.org/pga/73/event/universal-health-coverage/>

¹⁶ There are many more opportunities for American or English universities and grandes écoles, which are regularly mobilized by the national agencies in charge of global health issues.