



Health is a priority for the Sahel

November 2017

The think tank Santé mondiale 2030 has been in existence since October 2016. It brings together personalities 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, 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.

This document is the fruit of a collective work within the group. It does not commit in any way, nor does it reflect the individual opinion of each member.

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"We need to develop a strategic partnership between the Unions (European and African) which completely renews the existing policies, to get away from the logic of charity or clientelism, and build a truly partnership-based political and economic relationship" Emmanuel Macron, Jeune Afrique, 14 April 2017.

The French government's willingness to renew the partnership with Africa is excellent news. It provides an opportunity for in-depth reflection on the new cooperation and exchange strategies that France must prioritize in order to contribute to the continent's development. This ambition must be based on clear objectives, targeting the sectors most likely to generate equitable and sustainable growth and the security of populations. It cannot leave health aside in the face of the stated priorities of French aid (education, climate, gender equality, vocational training, etc.).

Health issues have particularly important implications for the countries of the Sahel¹, a vast region that is among the poorest in the world². The health challenges in this area go far beyond the national borders of the countries concerned. Although significant progress has been made in recent years on infectious diseases, many challenges remain, particularly in decentralized areas: inequalities in access to health care, structural food crises³, shortage of administration and human resources, a feeling of abandonment on the part of local populations⁴, leading to an increase in tensions. The table presented in the appendix compares the health statistics of the Sahelian countries with those of Africa / the world. It clearly shows the discrepancy to the detriment of this geographic area for all major health or health system indicators.

Health is a foreign policy issue. The crisis in the Sahel⁵ is aggravating the health situation of the populations, which is already very deteriorated. It is essential for France to speak out on this issue with a strong and meaningful voice on the international scene, in particular to influence multilateral health strategies (especially those of the Global Fund, UNITAID, GAVI, which benefit from major financial commitments) and to decide as quickly as possible on specific actions and investments that will have a real impact on the populations of the Sahel.

Health is a tool for economic growth. It must be considered as an investment and not as a cost. It is estimated that nearly a quarter of the economic growth recorded between 2000 and 2011 in low- and middle-income countries came from the value created by the number of years of life gained through improved health. The return on investment in this sector is

¹ We consider in this note that the countries of the Sahel are Mauritania, Mali, Burkina Faso, Niger and Chad.

² Niger is ranked 187th out of 187 countries in the UNDP "Human Development Index" (HDI) 2014 ranking. Chad is ranked 184th, Burkina Faso 181st, Mali 176th and Mauritania 161st

³ Access to nutritional care is a priority for the millions of acutely malnourished children in the area.

⁴ Support to communities is essential for a real ownership of health issues. In the Sahelian context of mistrust towards central administrations, new approaches must be thought out to strengthen the place of the user within the health system and develop financial coverage mechanisms.

⁵ Presence of terrorist groups, attacks on villages, attacks on armed forces, religious extremism, refugee movements. See in particular "Le Sahel central : au cœur de la tempête » Crisis Group Africa Report N°227, June 25, 2015.

estimated at 9 in 16, and, according to WHO⁷, an additional year of life expectancy increases the GDP per capita.

Health is central and has direct and indirect impacts on the other goals of development. The Sustainable Development Goals (SDGs), through objective 3⁸, clearly state that health is a key determinant of well-being and has a major impact on the level of human development. Healthy populations play a decisive role in the economic development of the region (labour productivity, access to employment, training of the young people) and access to education (reduced absenteeism, improved school performance⁹). It also contributes to the fight against inequalities (particularly between men and women) and indirectly reinforces social cohesion and thus the political stability and security of the region¹⁰. ¹⁰ In fact, lack of access to health services exacerbates the tensions and frustration of the populations in the decentralized zones of the Sahel, who see it as the manifestation of a two-tier State.

Our recommendations

At the international level:

Further defend the interests of the Sahel countries within international organizations such as the Global Fund to Fight AIDS, Tuberculosis and Malaria, acknowledge the constraints and the specific difficulties encountered by these countries as a result of their geographical, economic and social situation, but also their limited capacity to make their voices heard (due to language barriers, in particular)¹¹.

In Paris:

While there are relatively many relays in the field, it is essential to bring together all the French actors involved in the Sahel (AFD, Expertise France, researchers, businesses, NGOs, etc.) within of a common platform to coordinate French involvement in the area and improve its visibility.

In the countries of the Sahel:

The French government should consider health as a priority within the Alliance for the Sahel. We note with concern that health is not explicitly identified as one of the five areas targeted by this initiative¹², even though this sector is essential for the development and the long-term stabilization of the Sahel.

⁶ Jamison DT, Summers LH, Alleyne G, Arrow KJ, Berkley S, Binagwaho A, et al., Global health 2035: a world converging within a generation. *Lancet*. 7 December 2013; 382(9908):1898-1955.

⁷ Report of the High-Level Commission on Healthy Employment and Economic Growth, WHO, 2016.

⁸ SDG 3 sets out the goal of "enabling all people to live in good health and promoting the well-being of all people at all ages" by 2030.

⁹ Report of the Commission on Healthy Employment and Economic Growth, WHO, 2015.

¹⁰ Stiglitz JE. *The price of inequality: how today's divided society endangers our future*. New York: WW Norton & Company; 2012.

¹¹ The 5% Initiative, a technical assistance mechanism managed by Expertise France, could, for example, devote a larger share of its financing to the most fragile Sahelian countries.

¹² These five key sectors are (1) youth employability/education and training; (2) agriculture/rural development; and (3) education and training, food security; (3) energy and climate; (4) governance; and (5) decentralization and support for the deployment of base.

Two specific aspects could benefit from French support:

- **Sexual and reproductive health**

Access to sexual and reproductive health services, especially for young women, is a fundamental right. France should support this fundamental principle in a context where the rise of religious fundamentalisms tends to restrict this right. Moreover, in the Sahelian countries, economic growth depends on controlling demographic growth¹³.

- **Human Resources in Health**

The health workforce is the cornerstone of a health system that can respond to the basic needs of the population. The High-Level Commission co-chaired by France in 2016¹⁴ highlighted the importance of healthcare activities in the growth of the French economy and job creation. The Commission has also drawn attention to the growing inequalities in access to healthcare professionals worldwide, between countries, but also within countries. France should (1) support the training of new health workers, (from community health actors to doctors and researchers), and their loyalty to the Sahel region, including in the most remote areas, and (2) committing to develop mechanisms at the international level that will maximise the impact of the benefits of health worker migration for countries that offer training, countries of destination, and migrant workers themselves¹⁵.

¹³ "UNDP support framework for the implementation of the integrated United Nations strategy for the Sahel: Towards a development sustainable and inclusive human development", UNDP, 13 May 2014.

¹⁴ France, together with South Africa, had supported the work of the High-Level Commission on Healthy Employment and Economic Growth, devoted to the challenges of human resources in health, in Lyon in March 2016.

¹⁵ See Recommendation 9 of the Report of the High-Level Commission on Health Employment and Economic Growth, "Commitment to Health and Growth: Investing in the Health Workforce, WHO, 2016.

Table – Health Statistics¹⁶

	World	Europe	Africa¹⁷	Countries targeted by the Sahel Alliance¹⁸
Percentage of population under 15 years of age	26%	18%	42%	46%
Life expectancy at birth (in years)	71	76	58	58
Mortality rate of children under 5 years (per 1000 births)	43	11	81	105
Maternal mortality ratio (for 100 000 live births)	216	16	542	594
Births assisted by qualified health personnel (in %)	74%	98%	51%	46.2%
Amount of total health expenditure per capita at parity of purchasing power (UMN per USD)	1339	2214	222	86
Physician-to-population ratio (for 10,000 inhabitants)	13.9	32.1	2.7	0.7
Staff ratio Nurses/midwives (per 10,000 inhabitants)	28.9	80.2	12.4	4.5

¹⁶ All data are from the WHO Atlas of Health Statistics for the African Region 2016.

¹⁷ These are the countries in the WHO African Region: <http://www.who.int/about/regions/afro/fr/>

¹⁸ Average of the countries targeted by the Sahel Alliance: Burkina Faso, Chad, Mali, Mauritania and Niger.

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](#)

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, Lelio 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.

