

## **Session 4 - Conclusions of sessions 1-3**

In the fourth session the chairs Zeynep Cemalcilar (chair session 1), Gorik Ooms (chair session 2) and Lisa Forman (chair session 3) concluded what in their opinion were the most important points raised in their sessions.

Zeynep Cemalcilar pointed to the interdependency of the four major challenges that global health networks face - problem definition, position, governance and coalition - and that this makes UHC very complex. She mentioned the need for more research for global health networks to be useful. If you understand UHC as an international human right the work on medical treatment and maybe more importantly prevention should have a non-discriminative base. Last she stressed that even with good preparedness and enough money such projects will fail if the culture of the groups, these projects are trying to access, with their possibilities, education and abilities, are not taken into consideration.

Gorik Ooms highlighted three central questions that emerged. The first question is how policy makers of so many sovereign states could be convinced to adopt frameworks (such as the framework convention on global health), because things right now are not moving fast enough. Second he pointed out that social security systems as countries in Europe have them now started from health - and questioned if we are going to get from health to redistribution, as the global economy makes that difficult on national and especially international level. Third he contributed the question if it should be aimed for small issues or started on a big design.

Lisa Forman summarized the third session. She criticized the current Global Health Agenda as insufficient, because it doesn't reflect parties that would improve health and it defines UHC without taking Public Health into consideration. She pointed out the need for having redistribution written into instruments and policies and mechanism of achieving accountability on the national, international and constitutional level. She added that in her opinion there is redistribution towards the wealthy, which is not the right direction. The focus should be vulnerable populations. Last she talked about why frames matter, what seems to be a diverse issue. She summarized that they matter, because one needs them to arrange the work and with them, everybody has a place to be taken into consideration. International constitutions should be used more strategically!

Till Bärnighausen was closing the symposium with his speech about interdisciplinary work as the key to achieve UHC. This was learned from the past as the concept of primary health care (Alma Ata) failed to be implemented on a universal and comprehensive scale, while selective and mostly vertical approaches such as the MDGs were implemented with limited success, but failing to address the wider issue of equity.