

Global Health 2050: the path to halving premature death by mid-century

Key Messages

Marco Schäferhoff, PhD

Open Consultants, Berlin

Lancet Commission on Investing in Health

Member of the Commission writing team

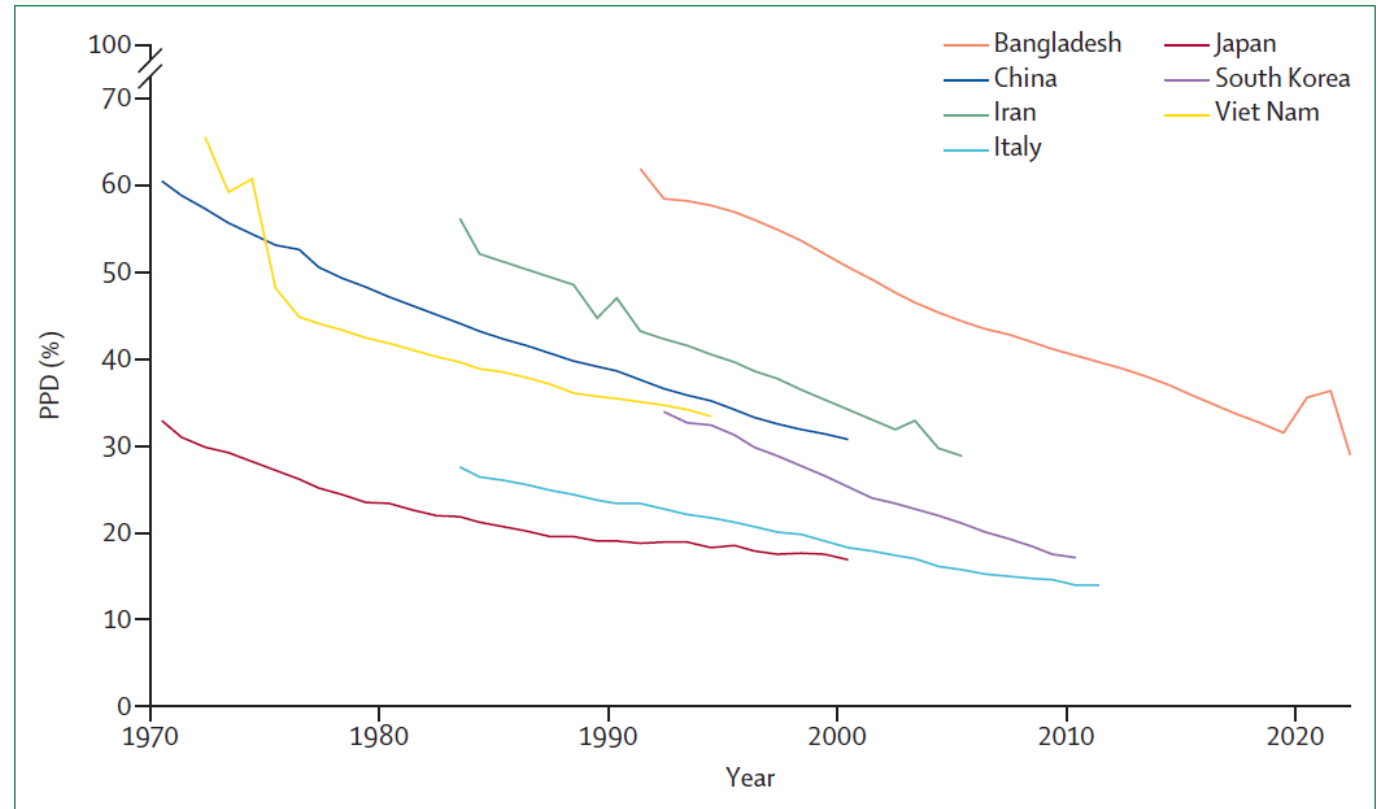
High-Level Dialogue: The Case for Investing in Health – NOW!
Federal Ministry for Economic Cooperation and Development (BMZ)
Berlin, 11 February 2025

Message 1: Countries that choose to do so can achieve “50 by 50”

“Dramatic improvements in human welfare are achievable by mid-century with focused health investments. **By 2050**, countries that choose to do so could **reduce by 50% the probability of premature death** in their populations—the probability of dying before age 70 years—from the levels in 2019. We call this goal 50 by 50.”

Feasibility is based on historical experience...

37 countries halved their probability of premature death in 31 years or less since 1970.

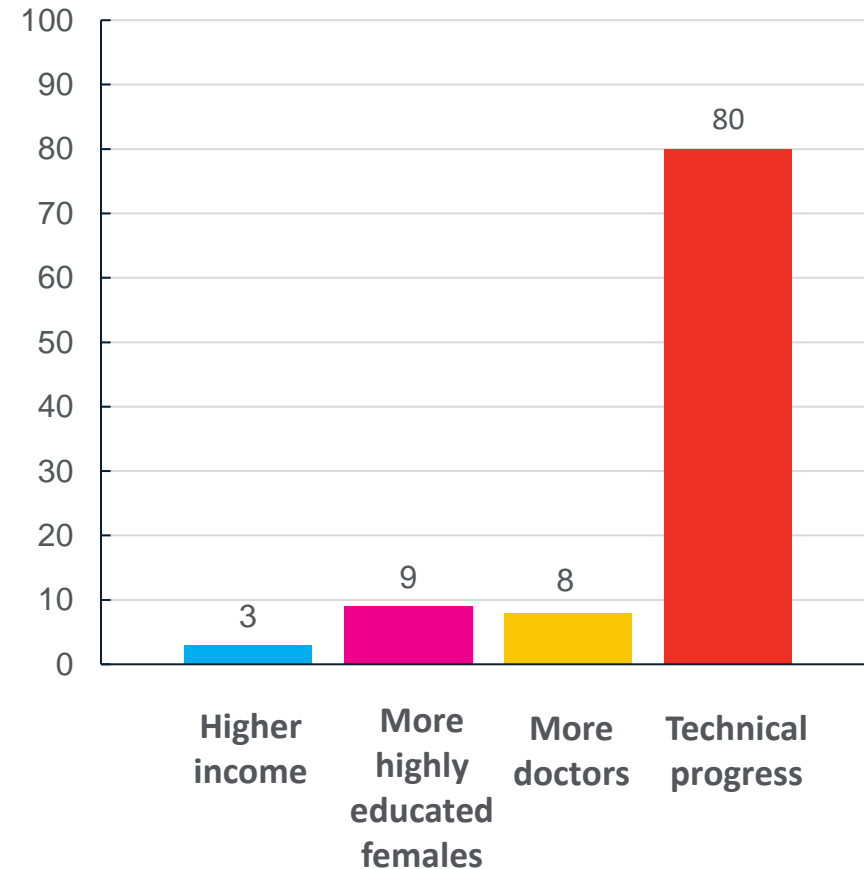


High-population countries that halved the probability of premature death (PPD) in 31 years or less, 1970–2019

... and continued scientific advance

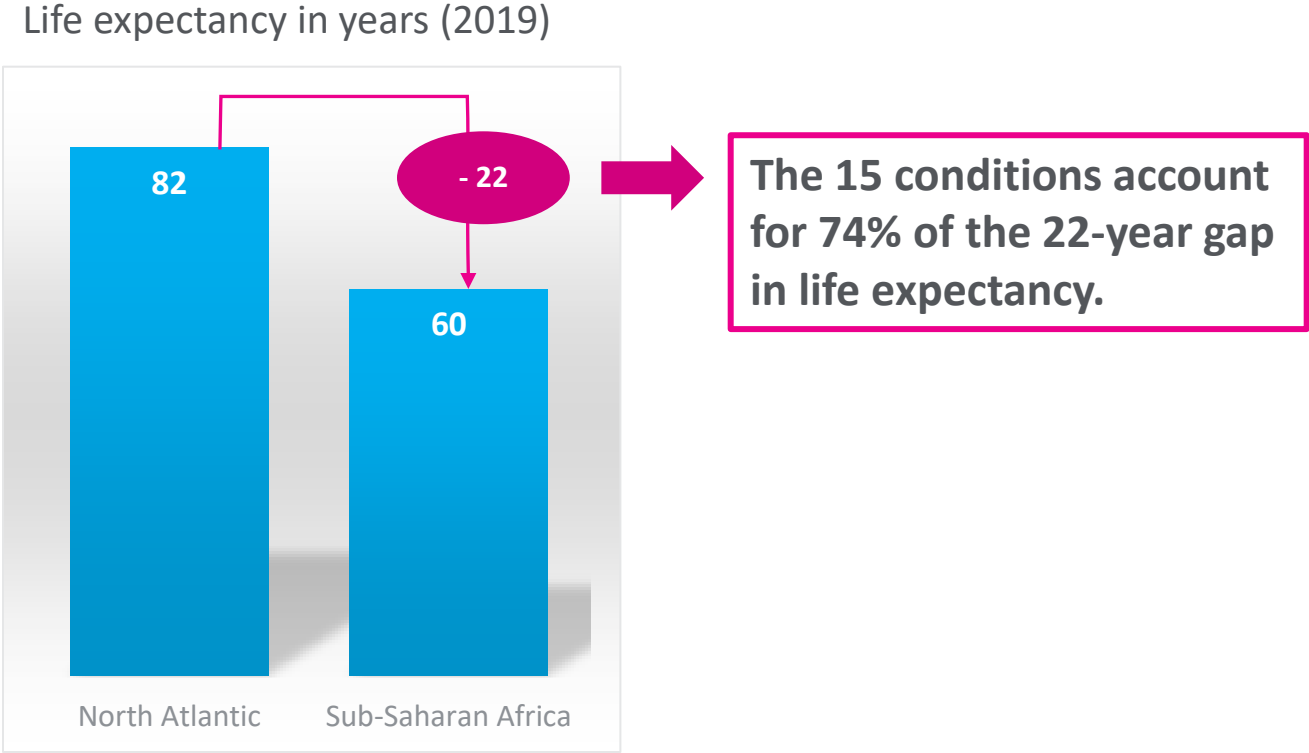
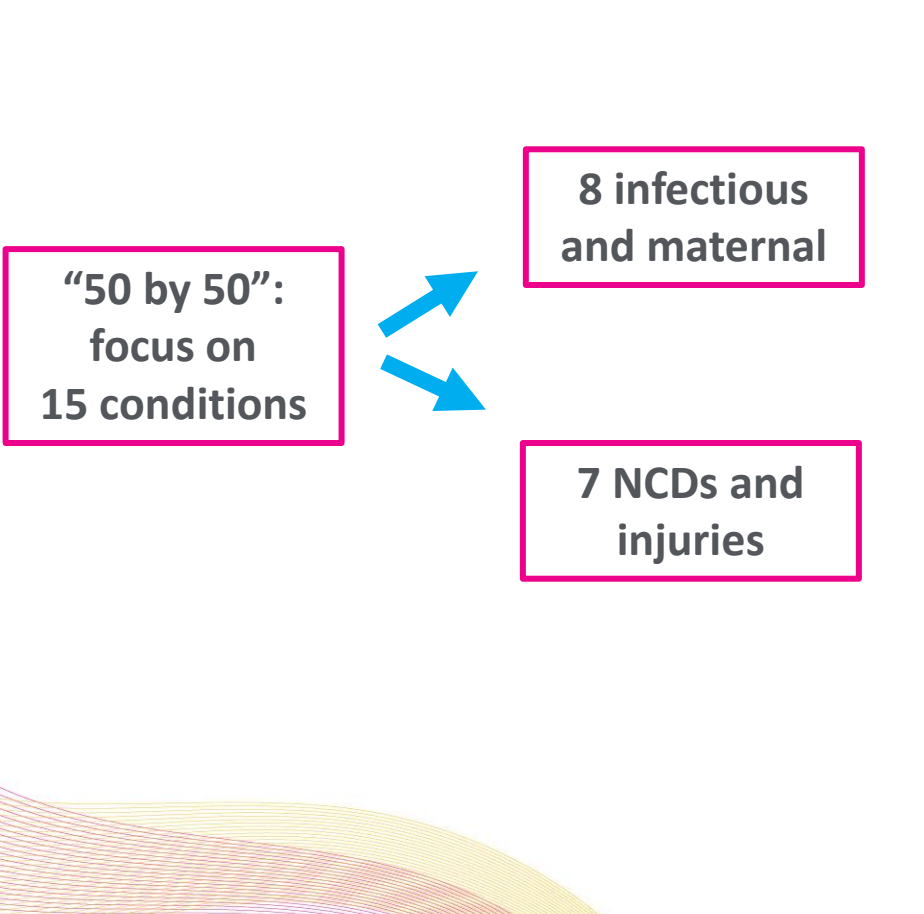
80% of the decline in child mortality (1970-2000) can be attributed to the dissemination of new health technologies.

Factors accounting for decline in under-5 mortality in 95 low- and middle-income countries, 1970–2000



Source: *J Health Econ* 2016; 48: 16–25.

Message 2: Sharp reductions in mortality & morbidity can be achieved by focusing on 15 priority conditions



Message 3: A modular approach can help to achieve “50 by 50”

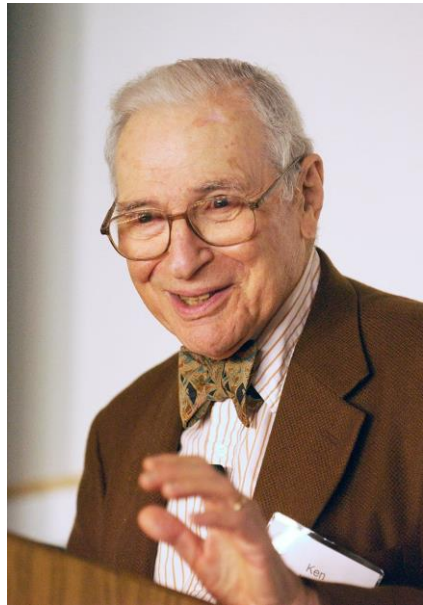
Focused investment

- Public funding for a core set of **highly cost-effective** interventions
- **Fully prepaid & available to everyone**, feasible to implement anywhere
- Delivered through **primary health-care** systems

Modular approach

- **19 modules:** starting point for local deliberation
- **Step 1:** Identify modules appropriate to the local health sector & allocation of budget across modules
- **Step 2:** Optimize the intervention mix & value for money within each module

Message 4: Countries should publicly finance a shortlist of key medicines for 15 priority conditions



Kenneth Arrow (1921-2017)
Nobel Laureate in Economics

Arrow mechanism

- 1 Public subsidies to purchase priority medicines
- 2 Centralized pooled procurement by government or internationally
- 3 Procurement of large volumes to ensure availability
- 4 Use of public & private supply chains

Message 5: “Tobacco is the new tobacco”

Tobacco taxation: the single most important inter-sectoral policy to help achieve 50 by 50

“Raising taxes on tobacco can do more to reduce premature mortality than any other single health policy”

Taskforce on Fiscal Health Policy



Message 6: There is a high risk of another pandemic of Covid-like magnitude

	1-year probability	5-year probability	10-year probability	25-year probability
≥1 million deaths	6%	28%	48%	80%
≥10 million deaths	4%	19%	35%	66%
≥25 million deaths	3%	12%	23%	48%
≥100 million deaths	1%	3%	6%	14%

During the emergency phase of the COVID-19 pandemic (ie, Jan 30, 2020, to May 4, 2023), an estimated 23 million excess deaths occurred globally that were almost entirely attributable (directly or indirectly) to COVID-19. Probabilities were estimated by Madhov et al (2023).³⁷

Huge variation in COVID-19 excess deaths across countries, especially pre-vaccine
→ public health fundamentals are key to averting massive mortality

Message 7: There is a critical role for development assistance for health in supporting “50 by 50”

Two broad purposes

Direct country support

- Target countries with the least resources
- Financial support
- Technical support
- Disease control and health system strengthening

Global public goods for health

- Product development
- Manufacturing
- Pandemic prevention/response
- Norm & standard setting
- Responses to antimicrobial resistance

Focus both on the 15 priority conditions

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Global health 2050: the path to halving premature death by mid-century

"Today, the case is better than ever for the value of investing in health for reducing mortality and morbidity, alleviating poverty, and improving human welfare."

<https://globalhealth2050.org/>

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