



G20

SOUTH AFRICA 2025



Solidarity

Equality

Sustainability

Sherpa Track
ISSUE NOTE

Health Working Group

December 2024



Health Working Group (HWG)

Table of Contents

1.	Introduction	2
2.	Health Priorities, Questions and Expected Outcomes	3
2.1	Accelerating Universal Health Coverage (UHC) through a Primary Health Care (PHC) Approach	3
2.2	Stemming the Tide of Non-Communicable Diseases (NCDs)	9
2.3	Pandemic Prevention, Preparedness and Response (PPPR)	12
2.4	Science and Innovation for Health and Economic Growth	13

1. INTRODUCTION

Building on the progress of previous G20 presidencies, particularly those of Indonesia (2022), India (2023), and Brazil (2024), and leveraging the potential of the G20, South Africa's G20 Presidency will focus on the theme Solidarity, Equality, Sustainability. This will complement the African Union's Agenda 2063, the development agenda of Africa as the world's fastest-growing continent, and the Lusaka Agenda. It will also focus on rebuilding momentum to reach the 2030 Sustainable Development Goals (SDGs).

Global Health was first included in the G20 agenda in 2017, during Germany's Presidency, to underscore the political support needed for health initiatives and the economic dimensions of health issues. The 2017 G20 Health Ministers' Declaration reiterated the World Health Organisation's (WHO) central role in global health.

South Africa's G20 health agenda will highlight the need for equitable multilateral solutions to address the health challenges of the 21st century. At the centre of this approach will be universal health coverage (UHC), with a focus on primary health care (PHC) as an inclusive, equitable, cost-effective, and efficient approach to enhancing physical and mental health and to responding to health emergencies. It is estimated that over 4.5 billion people lack access to essential health services, and two billion people face catastrophic or impoverishing health spending due to out-of-pocket health spending. Prioritising resilient and equitable health systems is key to overcoming a pattern of stagnation, accelerating progress towards the health-related 2030 SDGs, and laying the foundation for a fairer, equitable, and safer world.

UHC through a PHC approach is fundamental not only to improved health and well-being but also to the most effective and efficient approach to reforming and building health systems that are more resilient to shocks, crises, and climate change and thus better able to promote, serve, and protect the health and well-being of societies and enable economic resilience and more rapid recovery from shocks. Strengthening the health and care workforce is not only essential to delivering on UHC but also to concretely expanding and integrating action to stem the tide of non-communicable diseases (NCDs) and ensuring a fit-for-purpose workforce that can deliver on Patient-Practitioner-Remedy (PPR) and the right skills to drive science and innovation. In G20 countries, the health sector is a leading

employer and the most rapidly growing sector for job growth. With the anticipated economic, demographic, and epidemiological shifts, as well as transitions at a time of faster, more urgent, and consequential scientific and innovation breakthroughs, investments in health and care workforce education, employment and development today have wide-ranging repercussions for the equity and pace of progress on health, well-being, and the economy.

Science is the core to the improvements in clinical and public health witnessed over the last few decades and is increasingly crucial to a country's economic growth, resilience, and national security. Scientific advancements not only contribute to healthier populations but also drive economic growth by fostering innovation, creating high-value jobs, and boosting productivity. We live in a remarkable "Golden Age of Science", when rapid scientific and technical advances can and are helping to address the great challenges of the 21st century. When science is not distributed or equally available to everyone, there is a grave risk that this scientific golden age will drive greater inequality in health and economic growth if it is increasingly focused in a small number of countries. Domestic scientific ecosystems, supported with domestic resources, with the local ownership and power that come with that, are crucial if we are to ensure science works for everyone to improve health and provide jobs and economic opportunity.

Under the theme Accelerate Health Equity, Solidarity, and Universal Access, South Africa's G20 Health Working Group will focus on the following priorities:

- Accelerating UHC through a PHC approach
- Strengthening human resources for health
- Stemming the tide of NCDs
- Pandemic Prevention Preparedness and Response (PPPR)
- Science and innovation for health and economic growth.

2. HEALTH PRIORITIES, QUESTIONS AND EXPECTED OUTCOMES

2.1 ACCELERATING UHC THROUGH A PHC APPROACH

UHC is at the centre of the G20 collective action, with a focus on reorienting health systems to a PHC approach. The PHC approach is the most inclusive, equitable, cost-effective, and efficient path to building health systems resilience, enhancing

people's health and well-being, and preparing and responding to health emergencies.

PHC is a whole-of-society approach to health that aims to maximise the level and equitable distribution of health and well-being from promotion, prevention, treatment, rehabilitation, and palliation to emergency preparedness and response that:

- Efficiently meets people's health needs through integrated health services with an emphasis on primary care and essential public health functions
- Systematically addresses the broader determinants of health
- Empowers individuals, families, and communities, including vulnerable populations such as rural communities and undocumented migrants.

Accelerating UHC progress will require investments and actions in all countries to ensure universal access to an essential package of quality health services through reorienting health systems to a PHC approach that is cost-effective, efficient and operationalised through context-specific models of care; financed with public resources to ensure financial protection from catastrophic and impoverishing out-of-pocket health costs; and delivered by a fit-for-purpose and well-supported health and care workforce.

Models of care: While the call for reorientation of health systems towards a PHC approach is strong, many questions remain on how best to operationalise this reorientation. Countries have developed diverse models of care to efficiently and equitably deliver an essential package of health services designed for their unique contexts. The G20 Health Working Group will facilitate the sharing among G20 countries and advance high-impact and resilient models of care that support evolving population health needs and are tailored to the unique context of each country, drawing upon existing operational tools such as the WHO- United Nations International Children's Emergency Fund (UNICEF) Operational Framework for Primary Health Care.

Financial protection: The main aim of UHC is to guarantee access without financial hardship to a package of affordable essential health services that is always universally accessible by the full population, including during health emergencies. Evidence shows that pre-paid mandatory pooled financial protection mechanisms are critical to ensuring financial protection. Given that financial hardship has progressively worsened over the past two decades and may be an even greater risk due to growing poverty vulnerability, the G20 Health

Working Group will elevate the issue of financial protection. The G20 Health Working Group will facilitate high-level dialogue and consensus to accelerate the adoption and implementation of benchmarks, policies, laws, and regulations to support financial protection from catastrophic and impoverishing out-of-pocket health spending and eliminate poverty induced by health costs, alongside improvements to expand access to essential health services. Dialogue and deliverables will also facilitate national, regional, and international efforts, including WHO, the World Bank, and other partners, to intensify monitoring of financial hardship and financing flows to track progress, identify gaps, and ensure no one is left behind.

Health financing: More money for health and more health for the money. Advancing UHC will require more money for health, with large, affordable, predictable, and flexible financing, including greater domestic and concessional financing. Given the scarcity of resources, there is a need for health systems to deliver more health for the money and focus on efficiencies, maximising the impact and distributional implications of the finite resources invested in health. Such a focus on efficiencies includes the design and update of affordable health benefit packages, the introduction of cost-effective healthcare technologies, and the strengthening of the ability of systems to strategically purchase services from providers, as well as the strengthening of Public Financial Management systems for ensuring the timely and effective execution of budgets allocated to health. Underpinning all of this, especially in settings where there is significant aid dependency at disease, population, or technology level, efficiencies ought to be driven by the intentional and gradual integration of vertically funded interventions into national health benefit packages through countries' own Public Financial Management systems. Such integration will release additional efficiencies and mitigate against the risk of unpredictable aid fluctuations and is at the heart of the Lusaka Agenda.

Sustainable financing during a time when many countries face slow economic growth poses an ongoing challenge, as does securing the resources for investment in the education, employment, and retention of an adequate health workforce. Health financing is thus a fundamental cross-cutting issue that South Africa's G20 Presidency will tackle through the G20 Joint Finance and Health Taskforce and other Working Groups. This cross-cutting and synergistic effort will also serve to urge action to tackle debt that constrains domestic health spending, increase concessional financing for health, and operationalise the shifts of the Lusaka Agenda towards de-fragmenting financing for health, greater aid

effectiveness, enhancing efficiencies and increased alignment behind “one plan, one budget and one M&E”.

Questions for discussion:

- How does the G20 support the reorientation of health systems towards a PHC approach based on the unique context of each country?
- How does the G20 support accelerated operationalisation of solutions identified by G20 countries to advance PHC-oriented models of care, financial protection, financing for UHC and maximising efficiencies?
- How does the G20 support the operationalisation of the Lusaka Agenda shifts towards accelerating UHC progress and strengthening health financing for UHC?
- How does the G20 secure better coordination between financing institutions, resulting in stronger leverage and more money for health and social programmes?

Expected outcomes and key deliverables

- Convene a high-level dialogue in March 2025 on developing and operationalising strong PHC-orientated models of care, financial protection, and efficiency gains to accelerate progress towards UHC.
- Consensus and high-level political commitment across G20 countries to accelerate PHC-orientated models of care and financial protection for UHC.
- Dashboard tracking global progress on the reorientation towards a PHC approach, financial protection, and financing flows for UHC through WHO, regional economic communities and partners, embedding evidence-based benchmarks informed by the Lusaka Agenda.

STRENGTHENING THE HEALTH AND CARE WORKFORCE

The health and care workforces are the foundation for health systems resilience and are fundamental for the achievement of UHC, health security, equity, and inclusive growth. Reorientating health systems towards a PHC approach would require sufficient and competent health and care workforces with the optimal skill mix, decent work and equitably distributed at facility, outreach, and community levels. In 2016, the UN Secretary-General established the High-Level Commission on Health Employment and Economic Growth. Co-chaired by the Presidents of France and South Africa, the Commission made recommendations to expand and

transform the health and care workforce as a driver for inclusive economic growth. They emphasised stimulating investments in creating decent health jobs, particularly for youth and women. The COVID-19 pandemic has underscored the critical roles of the health and care workforces, while exposing and exacerbating the fault lines of the global challenges affecting the health and care workforce and emphasised the need to address the persisting workforce challenges and build national workforce capacities to implement the essential public health functions for resilient health systems. These global workforce challenges persist despite the call made by Member States with the adoption of the WHO Global Strategy on Human Resources for Health: Workforce 2030 and the Working for Health Action Plans (2017-2021 and 2022-2030) to prioritise health and care investment to protect population health, achieve UHC, and stimulate economic growth.

Inequities remain in the distribution of health workers, both between and within G20 countries, driven by insufficient investments in education, employment, and retention of health workers to advance the PHC approach. Low and lower- and middle-income countries (LMICs) struggle with shortages, unemployment, underemployment of graduates, poor worker distribution and performance. High-income countries face a growing imbalance in health and care workforce supply and demand due to demographic and epidemiological changes, an ageing workforce with high attrition and low replacement rates and underinvestment in workforce sustainability. International recruitment partially addresses this challenge yet has tipped into an over-reliance on foreign health and care workers in some contexts.

The G20 Health Working Group will bring the emphasis back to examining the education, job creation and retention of health and care workers as being central to addressing these challenges. South Africa's G20 Presidency will facilitate consensus on the accelerated actions and investment required to correct market failures in the production, employment, remuneration, and retention of the health and care workforce to better position G20 countries to more sustainably deliver on current and future health goals. G20 countries must strive for self-sustainability through domestic action and investments into reorientating health systems towards a PHC approach, including meeting the growing demands from ageing populations, long-term care, and reallocating resources to promote healthy ageing and well-being, preventing NCDs and expensive hospitalisation costs. The G20 HWG will explore solutions and options for expanding education supply to reach an 8–12% of the active workforce and raising investment in job creation. Efforts should also target rural populations and vulnerable groups to

improve equitable access, ideally prioritising PHC and public health. In fragile, conflict-affected and low-income countries, international solidarity by G20 countries, aligned with national strategies and mechanisms, remains necessary. In addition, contemporary consensus is needed on the opportunities and challenges arising from the international migration of health personnel and how to build a sustainable and equitable global health workforce.

Questions for discussion:

- How can G20 countries drive health and care workforce action and investments to more self-sustainably meet present and future demands for UHC based on a PHC approach?
- How can G20 countries increase domestic investments in health and care worker education, decent job creation, and retention to deliver essential health services and the essential public health functions?
- How can G20 countries facilitate mutually beneficial co-investments in the health workforce education and employment with LMICs?

Expected outcomes and key deliverables

- The South African G20 Presidency aims to elevate these issues and build consensus among G20 countries, partners, and international financial institutions on strategies to stimulate action and investment into health and care workforce education, decent job creation, and workforce retention. The focus will be to create sustainable workforce solutions that advance the PHC approach for UHC, health emergency preparedness, and response and science-based innovation.
- Hosting a health and labour high-level dialogue on health and care workforce at the third HWG meeting in May 2025.
 - Building on the recommendations of the United Nations High-Level Commission on Health Employment and Economic Growth, the dialogue will bring together ministers of health and labour to reach consensus on accelerated actions and investments in education, job creation in health, and retention of the workforce to deliver on the ambitions of UHC, health security and the SDGs.
 - The dialogue will also explore domestic and international financing options to deal decisively with the workforce crisis. Such options could facilitate finding sustainable, innovative, and equitable solutions to the health and care workforce shortages and

maldistribution, focusing on those that have the most impact in addressing fundamental under-investment in education and jobs, and that leverage as relevant the power of digital health technologies.

- G20 Member States to consider aligning their efforts towards the African Health Workforce Investment Charter.

2.2 STEMMING THE TIDE OF NON-COMMUNICABLE DISEASES (NCDs)

NCDs are the leading cause of death globally, accounting for 75% of non-pandemic-related deaths in 2021. Of the ten leading causes of deaths globally, the top seven are NCDs. Premature deaths due to NCDs occur among economically active individuals with a severe impact on economic growth and development. The world is currently off track to achieve SDG 3.4 which is to reduce premature mortality from NCDs by 1/3 by 2030. As the UN High-Level Meeting on NCDs is scheduled for 2025, it is crucial for G20 countries to reach consensus on strategies to enhance access to NCDs medicines and health products, particularly considering evolving epidemiological profiles, demographic shifts and the necessity for long-term therapies and increasing multi-morbidity. People with NCDs need uninterrupted, reliable access to quality-assured and affordable medicines and health products without financial hardship through a PHC approach.

Evidence demonstrates that addressing NCDs is an attractive and essential investment. Cost-effective, high-impact interventions already exist (WHO ‘best buys’) but are not being implemented and scaled up in countries. The gains are tangible and realisable in the short term: investing just US\$ 0.84 per person, per year in NCDs could prevent seven million premature deaths in low- and lower-middle-income countries (LMICs) by the end of this decade. Despite being the world’s largest cause of death, NCDs receive only 1–2% of all official development assistance (ODA) for health. There is an urgent need for government spending on NCDs and mental health to match the needs and demands for services and preventive strategies by identifying and implementing established policy options and strategic approaches that enable and enhance the integration of high-value NCD and mental health interventions into national health and financing systems.

Reorientating health systems to primary health care as a resilient foundation for universal health coverage and health security requires contextualised and

sustained investments in NCD and mental health services with appropriate metrics to monitor progress in both stable and humanitarian contexts.

A particular focus will include the world's first-ever effort to eliminate a cancer: cervical cancer. This priority for women's health is relevant to all G20 members: 10 of the 20 members are co-sponsors of World Health Assembly resolution 73.2: "Accelerating the Elimination of Cervical Cancer", while other members have supported global, regional, and domestic efforts to combat this preventable and curable cancer. South Africa also recognises its relevance for women's health in the African region, which is home to 18 of the 20 countries with the heaviest burden. Inequities are further pronounced for communities with a high HIV prevalence, as women living with HIV have a sixfold increased risk of dying from cervical cancer. By addressing this issue, public health programs will develop essential services at the PHC level; expand systems that also prepare countries for a pandemic response when needed in the future—extending platforms for molecular diagnostics and vaccine delivery; strengthen the health workforce to deliver dignified services for the general population; and leverage innovation to eventually bring about the world's first-ever elimination of a cancer.

Finally, the heavy emphasis on marketing unhealthy foods to children contributes to childhood obesity, undermines efforts to promote healthy eating habits, while infringing on the rights of children to access accurate health information.

Questions for discussion:

- How will the G20 tackle the social, economic, and commercial determinants of health in the context of NCDs?
- How will the G20 collaborative strategies that G20 nations pursue to reduce the cost and increase the availability of NCD medicines and health products, promoting access and affordability?
- What role can G20 collaboration play in fostering public-private partnerships that enhance regional/local production and distribution of essential NCD medicines and health products?
- How will the G20 elevate cervical cancer as a key global health and equity issue to improve women's health by combatting cervical cancer and thereby achieve the first-ever global elimination of a cancer?

- How will the G20 advocate and support approaches to decentralised, comprehensive integrated person-centred prevention and management of NCDs by leveraging the WHO AFRO PEN Plus Regional strategy and the WHO PEN?

Expected outcomes and key deliverables

- Establish a strong public and private collaboration network with regional and international organisations led by WHO to address key challenges, common barriers, and improve equitable access to NCD medicines and health products for diabetes, cancer, cardiovascular, and respiratory diseases.
 - Hosted high-level webinar to emphasise the need for a roadmap on access to NCD interventions to be endorsed at a satellite meeting in 2025 after the G20.
 - Strategic document to improve NCD access to medicines and other health products.
- Use policy interventions to limit the marketing of unhealthy foods to children, which is a critical public health priority, noting the growing burden of obesity.
- Hosting a high-level seminar to discuss Member States experiences on limiting marketing of unhealthy foods to children.

By encouraging member states to share their experiences and foster collective action, South Africa seeks to drive progress on both fronts. Both priorities are essential for achieving meaningful health outcomes, and South Africa is committed to advancing these goals through international collaboration and policy reform.

- Enhanced partnerships among the G20 membership to combat cervical cancer, as a concrete illustration of how cooperation can advance women's health, close a key gap in the HIV response, and realise a shared goal to bring about the first-ever elimination of a cancer.

2.3 PANDEMIC PREVENTION PREPAREDNESS AND RESPONSE

Pandemic Prevention, Preparedness and Response (PPPR) has been discussed at each G20 HWG meeting since its inception in Germany in 2017, with discussions evolving during the COVID-19 pandemic.

The COVID-19 pandemic exposed significant gaps in regional health product manufacturing capabilities, particularly vaccine production in Lower Middle-Income Countries (LMICs). Most manufacturers are in or owned by companies in high-income nations that were able to swiftly ramp up production and secure essential medical countermeasures (MCM) for high-income countries. Low- and middle-income countries, especially in Africa, struggled due to a lack of local manufacturing infrastructure, supply chain disruptions, and reliance on imports for critical supplies. This disparity not only hindered timely access to vaccines, diagnostics, and treatments but also highlighted the need for more resilient, decentralised production networks.

To address this, WHO Member States established the Interim Medical Countermeasures Network (i-MCM-Net) in May 2023 to improve global collaboration across the MCM value chain. The network has already proven effective in responding to the Mpox outbreak in Africa, ensuring equitable distribution and streamlined supply chains while serving as a temporary solution as negotiations continue on a Pandemic Treaty or similar instrument. Previously, the G20 summits have sought to address these challenges by advocating for enhanced global cooperation, encouraging investment in regional manufacturing hubs, and supporting initiatives aimed at bolstering local capacity and reducing dependency on external sources.

Most recently, G20 Ministers of Health welcomed Brazil's establishment of the Coalition for Local and Regional Production, Innovation and Equitable Access to Vaccines, Therapeutics and Diagnostics and other Health Technologies for Neglected Diseases and Persons in Vulnerable situations. The aim of the coalition is to foster partnerships between governments, international organisations, international financing institutions, research centres, private sector companies and state-owned companies.

Questions for discussion:

- How does the G20 establish a mechanism to monitor progress across the various initiatives for Pandemic Preparedness, Prevention and Response?
- How does the G20 leverage resources from various financial institutions to support pandemic prevention, preparedness, and response?

Expected outcomes and key deliverables

- To remain updated and contribute to progress towards global PPPR, South Africa will convene a global meeting to take stock of progress towards PPPR planning. This meeting will build on the G20 meeting convened by Brazil to advance the establishment of an Alliance for Regional Production and Innovation.

2.4 SCIENCE AND INNOVATION FOR HEALTH AND ECONOMIC GROWTH

Science has been central to the improvements in clinical and public health witnessed over the last few decades and is increasingly crucial to a country's economic growth, economic resilience, and national security. Scientific advancements not only contribute to healthier populations but also help drive economic growth by fostering innovation, creating high-value jobs, and boosting productivity. National investment in domestic science ecosystems is crucial to improving health as well as to sustainable economic growth, providing high-value job opportunities, and securing long-term health, economic resilience, and national security. The 2023 World Economic Forum emphasised the importance of science-based innovation, stating that "Investing in scientific innovation and resilient, net-zero health systems can secure a healthy, prosperous future for all". Yet most health science, research and development funding and capacity remain concentrated in the global North.

Robust and sustained national and regional science ecosystems and the structures that ensure the best available science advice is available to government are critical to inform policy and for equitable, faster access to products and facilitate local innovation.

Sustained national scientific ecosystems can better leverage and support equitable technology transfer and promote North-South and South-South collaborations that can augment local science and innovation and facilitate faster

development and deployment of novel solutions. Such local scientific infrastructure and ownership are likely to also increase local trust in science and innovation.

To this end, South Africa wishes to work with G20 Member States and affiliated countries to review, strengthen, and leverage their science, research, and innovation ecosystems. This includes sharing experience on the principles, systems, and structures that support sustained and efficient public and private backing for science, research, development, and innovation, and supports careers, scaling of innovations, manufacturing and pathways for adoption, and creation of high-value employment. It will explore options for financial investment and incentives for science from both the public and private sectors and approaches to optimising the integration of scientific advice into government decision-making processes. This initiative will focus on what models have been used and what lessons can be learnt for how best to use national resources for science in the most efficient and productive way to improve health, promote economic growth, and facilitate equitable international scientific partnerships.

Focus areas may include:

- Digital Health Technologies
- Public Health and Prevention, Implementation and Social Sciences, Genomics and Precision Medicine
- Artificial Intelligence, Vaccines, and Immunisation (especially for under-funded diseases such as TB and NTDs)
- Clinical Trials and Data Analytics and Health Intelligence
- Advanced and Sustained Manufacturing with consideration of how best to leverage science and innovation to address identified regional context specific health priorities. This will include work on:
 - Principles, systems, and structures that underpin sustained, efficient, and successful public and private support for science, including research, careers, innovation, research and development, manufacturing, regulation, and employment.
 - The use of government investment and incentives for science from the public and private sector
 - Approaches to structuring integrated scientific advice into government.

Questions for discussion

- How do we leverage the G20 platform to enhance and sustain national and regional science and innovation ecosystems to improve health, support economic growth and enhance national resilience?
- How can public and private sectors work together to enhance national and regional scientific ecosystems?
- How can we ensure that this scientific golden age increases global equity and works for everyone?
- How can the G20 support equitable international scientific cooperation based on strong domestic science systems and mutual respect?

Expected outcomes and key deliverables

- Working with all interested countries on the “Commission/Initiative on Science and Innovation for Health and Economic Growth” in 2024/2025. This initiative will review, strengthen, and leverage member states’ science, research, and innovation ecosystems to improve integrated approaches to health and contribute to economic opportunity and growth.
- Evidence map of the current approach and funding of national and regional scientific ecosystems with interested countries in G20 and beyond.
- Lessons learnt across countries of what has been tried, what works, and what does not when using limited domestic resources to support science and to structure science advice into government.
- Use this work to establish a strategic and practical framework for principles, options, and possible best practices for how countries may structure, fund, and sustain their domestic science ecosystems for health and economic growth.
- South Africa to host an in-person high-level seminar on Science and Innovation for Health and Economic Growth.