

Commission on Macroeconomics and Health



Activity Report

January 2000 to October 2001

Activity Report *of the Commission on Macroeconomics and Health (CMH)*



“The Commission on Macroeconomics and Health (CMH), launched today in Geneva by WHO Director-General Dr. Gro Harlem Brundtland, will over a two-year period produce a series of studies on how concrete health interventions can lead to economic growth and reduce inequity in developing countries. It will recommend a set of measures designed to maximize the poverty reduction and economic development benefits of health sector investment.”

***-Press Release WHO/2,
January 18, 2000***

WHAT IS THE CMH?

The Commission on Macroeconomics and Health is a collaborative effort led by eighteen of the world's leading economists and policymakers from academia, governments, and international agencies to assess the place of health in global economic development and offer a new strategy for investing in health for economic development, especially in the world's poorest countries.

The Commission is a crucial part of the World Health Organization's (WHO) strategy to meet the challenge of assembling and analyzing the evidence linking health status and poverty reduction. In this regard the Commission is a source of advice and analysis for WHO and the broader development community on the relationship between health, economics, and poverty reduction and will communicate its findings to policy makers in national governments and in development agencies.

This document provides an overview of the CMH purpose, composition, and activities during the period January 2000 to October 2001.

PURPOSE OF THE COMMISSION

The Terms of Reference for the Commission gave it the responsibility to analyze the impact of health on development and to produce reports and scholarly studies on health-related interventions and their impact on economic growth and equity in developing countries. The expected output of the Commission included recommendations to minimize poverty and maximize economic development in these countries.

HISTORY

Thirteen years after the Brundtland Commission established the indisputable link between environment and development, a new expert Commission was launched to clarify the link between health and poverty reduction. Dr. Gro Harlem Brundtland, Director-General of WHO, established the Commission on Macroeconomics and Health in January 2000, in response to the need to place health at the center of the development agenda.



Professor Jeffrey Sachs, Chair of the CMH

COMPOSITION

Chaired by Professor Jeffrey Sachs, Professor of Economics at Harvard University and Director of the Center for International Development (CID), the CMH is a time-limited body, comprising:

- **18 Commission members**, who include development economists, macroeconomists, health economists, and internationally recognized health and economic policymakers (see list of Commissioners);
- **Chairman's team** (Senior Economist and researchers);
- **Six Working Groups (WG)** - with six distinct mandates - entrusted with the main work of the CMH. The six Working Groups carried out their studies based in institutions and organizations in developed parts of the world (see Figure 1). Each Working Group is chaired by two or three co-chairs, and consists of CMH members, staff of various international agencies (WHO, World Bank, IMF, UNDP, etc.), and experts from various governments, academic institutions, NGOs, and the private sector (see list of Working Groups). The Working Groups took stock of the existing knowledge base in order to identify implications for policy rather than to generate new knowledge. The groups consulted widely with developing country policy makers and professionals as part of their work.
- **Executive Secretariat**, based at WHO headquarters.

LIST OF COMMISSIONERS

Professor Jeffrey Sachs (Chair)

Professor, Harvard University, and Director, Center for International Development at Harvard University, Boston, USA
Nationality: US

Dr. Isher Judge Ahluwalia

Director, Indian Center for Research in International Economic Relations, New Delhi, India
Nationality: Indian

Mr. K.Y. Amoako

Executive Secretary, UN of the Economic Commission for Africa, Addis Ababa, Ethiopia
Nationality: Ghanaian

Dr. Eduardo Aninat

Former Minister of Finance, Chile, and Deputy Managing Director, International Monetary Fund, Washington, DC, USA
Nationality: Chilean

Professor Daniel Cohen

Professor of Economics, Ecole Normale Supérieure, Paris, France
Nationality: French

Mr. Zephirin Diabre

Associate Administrator, United Nations Development Program, New York, USA
Nationality: Burkinabe

Mr. Eduardo Doryan

Vice President, The World Bank, Washington, DC, USA
Nationality: Costa Rican

Professor Richard Feachem

Director, Institute of Global Health, UC San Francisco/UC Berkeley
San Francisco, USA
Nationality: British

Professor Robert W. Fogel

Professor of Economics, Center for Population Economics, University of Chicago, Chicago, USA
Nationality: US

Professor Dean Jamison

Director, Center for Pacific Rim Studies
University of California, Los Angeles, USA
Nationality: US

Mr. Takatoshi Kato

Advisor to the President
Bank of Tokyo-Mitsubishi Ltd.
Tokyo, Japan
Nationality: Japanese

Dr. Nora Lustig

Senior Advisor and Chief, Poverty and Inequality Unit of the Inter-American Development Bank (IADB), and Director, The World Development Report, The World Bank, Washington, DC, USA
Nationality: Argentine

Professor Anne Mills

Head, Health Economics and Financing Program, London School of Hygiene and Tropical Medicine, London, UK
Nationality: British

Mr. Thorvald Moe

Deputy Secretary General, Organization for Economic Co-operation and Development, Paris, France
Nationality: Norwegian

Dr. Supachai Panitchpakdi

Deputy Prime Minister & Minister of Commerce, Thailand, and incoming Director General, World Trade Organization
Bangkok, Thailand
Nationality: Thai

Dr. Manmohan Singh

Member of Rajya Sabha, and former Minister of Finance, Government of India, New Delhi, India
Nationality: Indian

Professor Laura Tyson

Dean, The Walter A. Haas School of Business, University of California at Berkeley
Berkeley, CA, USA
Nationality: US

Dr. Harold Varmus

President, Sloan-Kettering Memorial Cancer Center, New York and former Director, National Institutes of Health, New York, USA
Nationality: US

CHAIRMAN'S ASSISTANT AND SECRETARIAT

Dr. Dyna Arhin-Tenkorang

Senior Economist & Assistant to the Chairman of the CMH Center for International Development at Harvard University, Boston, USA/ London School of Hygiene and Tropical Medicine, London, UK

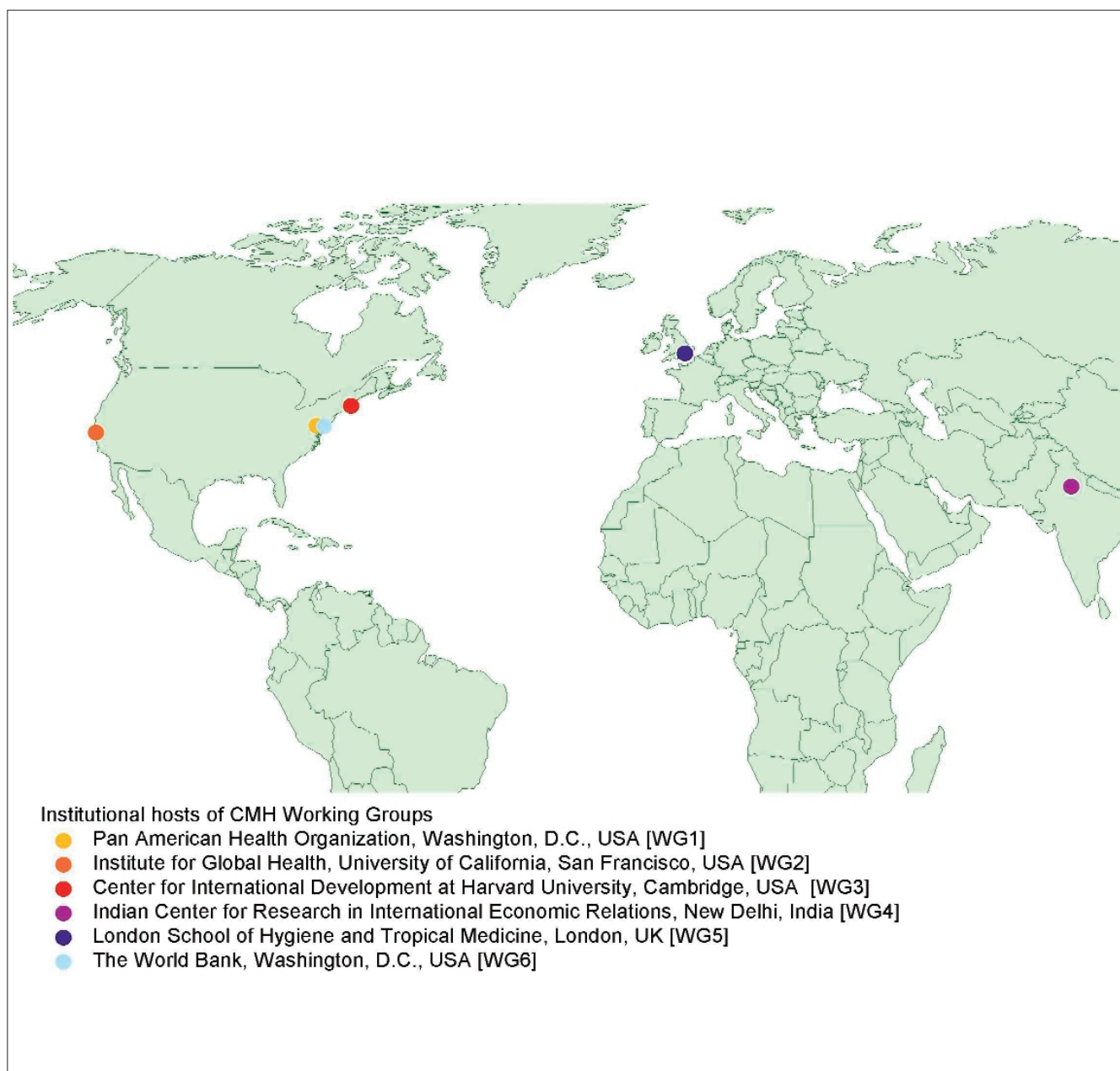
Dr. Sergio Spinaci

Executive Secretary of the CMH
World Health Organization,
Geneva, Switzerland

SPONSORS

The Commission has received financial support from governmental agencies and foundations. They have been observers at the CMH meetings and are following the progress of the Commission. As of September 2000, the following have contributed to the work of the CMH:

- **Bill and Melinda Gates Foundation**
- **United Kingdom Department for International Development**
- **Norwegian Government**
- **Rockefeller Foundation**
- **Swedish Government**
- **United Nations Foundation**



▲ Figure 1. *Institutions that hosted Working Groups for the Commission*

Administrative support to the Commission and its Working Groups was provided by:

Eveline Coveney (WHO, Geneva)

Elisa Pepe (CID, Cambridge)

Aquilina John Mutaboyerwa (WHO, Geneva)

WORKING GROUPS AND THEIR PRODUCTS

WORKING GROUP 1

- ***Health, economic growth and poverty reduction*** – charged with the responsibility of addressing the interrelations between health, economic growth and poverty reduction including: health effects on demographic structure, fertility and other aggregate dynamics of the health-growth linkage; adult health and labour productivity; human capital formation and health in the life cycle; inequalities in health and income; and a collation of available data sets, indicators and literature on the topic. This WG's papers are on the above topics. Co-chairs: Sir George Alleyne (PAHO) and Prof. Daniel Cohen (Ecole Normale Supérieure, Paris).

WORKING GROUP 2

- ***International public goods for health*** – charged with the responsibility of developing a study that will focus on global public goods for health in the areas of research, information and networks, and communicable diseases and on how important international public goods for health can be financed. This is a joint effort with the Institute for Global Health, various WHO units, and IAVI (International AIDS Vaccine Initiative). Co-Chairs: Prof. Richard Feachem (Institute for Global Health, University of California-San Francisco, USA) and Prof. Jeffrey Sachs (Harvard University, USA).

WORKING GROUP 3

- ***Mobilization of domestic resources for health*** – charged with the responsibility of assessing economic consequences of alternative approaches to resource mobilisation for health systems and interventions from domestic resources and will be carried out in collaboration with the IMF and other institutions. The focus of the group is on how health systems can be best financed at the country level, including by reallocation of public sector budgets and by expanding the role of the private sector. Ongoing work in WHO is also an important input into this working group. Co-Chairs: Dr. Alan Tait (former senior IMF official) and Prof. Kwesi Botchwey (Harvard University, USA and former Minister of Finance, Ghana).

WORKING GROUP 4

- ***Health and the international economy*** - charged with the responsibility of examining trade in health services, health commodities and health insurance; patents for medicines and Trade-Related Intellectual Property Rights (TRIPs); international movements of risk factors; international migration of health workers; health conditions and health finance policies as rationales for protection; and other ways that trade may be impacting on the health sector. Chair: Dr. Isher Judge Ahluwalia (Indian Center for Research in International Economic Relations, New Delhi).

WORKING GROUP 5

- ***Improving health outcomes of the poor*** - charged with the responsibility of elaborating technical options and costs for mounting a major global effort to dramatically improve the health of the poor by 2015. It examines interventions within and outside the health sector, and draws extensively on ongoing work within WHO and at the World Bank. Teams based at the London School of Hygiene and Tropical Medicine, WHO and outside expert consultants are assigned different topics according to their area of expertise. Subjects addressed in papers include intervention cost, coverage levels and scaling up coverage for interventions such as HIV-AIDS, tuberculosis, malaria, prevention of under 5 mortality and maternal mortality, and tobacco-related interventions. WG 5 papers document the evidence-based knowledge pertaining to the above topics and reporting gaps still in existence. Co-chairs: Prof. Anne Mills (London School of Hygiene and Tropical Medicine, UK) and Dr. Prabhat Jha (WHO).

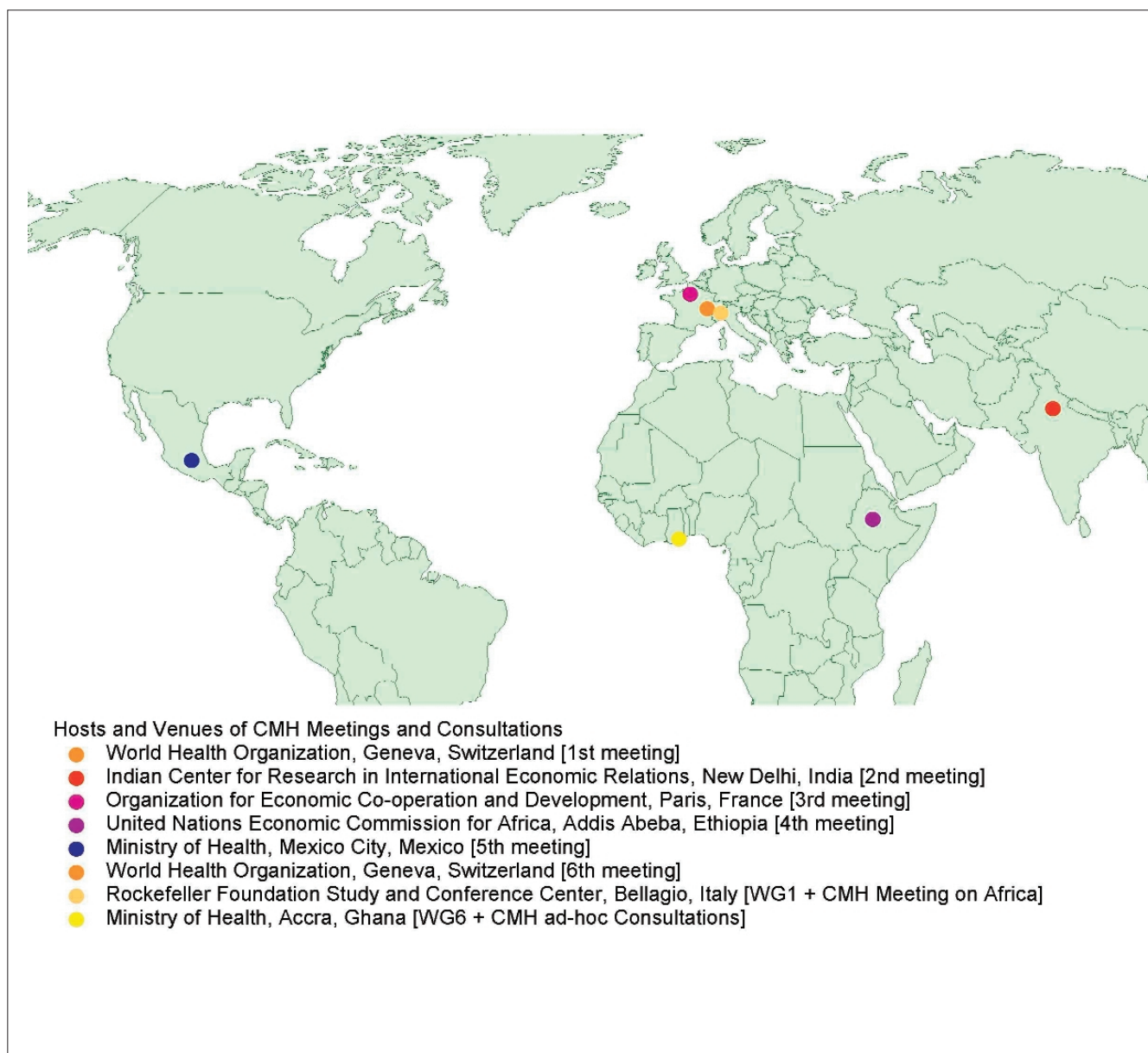
WORKING GROUP 6

- ***Development assistance and health*** is co-sponsored by the World Bank. It is charged with the responsibility of reviewing health implications of development assistance policies including modalities relating to economic crisis and to debt relief and focus on the policies and approaches of international developmental agencies. Emphasis is on the appropriate balance between country specific work and support for activities that address international externalities or provision of international public goods. The assessment includes interventions outside the health sector, such as water supply, sanitation, population, nutrition and environment. Co-chairs: Mr. Christopher Lovelace (World Bank), Mr. Zephirin Diabre (UNDP) and Ms. Carin Norberg, Asst. Director-General, SIDA.

ACTIVITIES

Commissioners met with members of the working groups and specialists in health and development during a series of 6 CMH meetings held between January 2000 and October 2001. In addition, two consultation meetings were held that focused on African health and economics issues. Discussions

between commissioners, working group and WHO directors also took place during videoconferences and/or teleconferences linking several international venues.



▲ Figure 2: *Venues of CMH meetings and consultations*

First Meeting of the Commission on Macroeconomics and Health

Geneva, Switzerland, January 16-18 2000

The Commission on Macroeconomics and Health met for the first time January 16 to 18, 2000. Dr. Brundtland, WHO Director-General, opened the meeting and participated in the first day's discussion. Professor Jeffrey Sachs chaired the meeting. Discussions of the terms-of-reference provided a useful platform for discussing CMH's vision and purpose. It resulted in several changes in the composition and mandate of the proposed work and

in starting points for more detailed terms-of-references for Working Groups. To provide greater emphasis on the selection and costs of health intervention for the poor, the decision was taken to establish an additional Working Group to address these issues.

Following the Geneva meeting, the Senior Economist, with staff of WHO's Economics Advisory Service (which was serving as the WHO liaison to the CMH), elaborated the detailed provisional terms-of-reference (TOR) for each of the Working Groups. The Working Group provisional TORs were completed in March

2000. Several Working Groups held planning meetings between March and April 2000 to study their TORs, make suggestions for modifications, and draw up budgeted work-plans.



▲ *Participants at the 2nd Meeting of the CMH, New Delhi, April 14-17 2000*

Second Meeting Of The Commission on Macroeconomics and Health

New Delhi, April 14-17 2000

The second meeting of the CMH was hosted by the Indian Center for Research in International Economic Relations. On April 15, the members of the CMH and other attendees participated in a day of intensive interaction and discussion with senior Indian policy makers, academics, and members of the pharmaceutical sector. On April 16-17, the CMH members, together with participants from the Working Groups and the donor agencies, dis-

cussed in detail the agenda of the CMH and the specific Working Groups. This was the occasion to debate various aspects of the broader agenda, such as the relative weights to be accorded systemic reform versus greater health-care funding to promote effective public health systems, or the relative weights to be accorded to categorical programs (such as immunization and HIV/AIDS control) versus broad systemic reforms (such as improved management and oversight of primary health facilities). Despite differences of opinions within the group, in several of these topics significant progress was made towards a consensus.

On April 18, the group visited two health sites in New Delhi, a major tertiary care centre and a community-based NGO, in a “resettlement colony”. The NGO, Swaasthya, was dedicated mainly to the reproductive health, and mother and child needs of the local community. One or two days each week the NGO helped to provide a health clinic within the community (with a doctor visiting the community).

Third Meeting of the Commission on Macroeconomics and Health *Paris, France November 8-10, 2000*

The third meeting of the Commission on Macroeconomics and Health was hosted by the Organization for Economic Co-operation and Development (OECD). The WHO Director-General’s welcoming speech outlined the purpose of the Commission and elaborated the various challenges facing the Commission. Presentations on OECD’s work on health provided an overview of the budget allocation to, and the responsibility for health issues within, the OECD. Participants were informed of future OECD work on health includes a proposed three-year “horizontal program” that would focus on the measurement of performance, the causes of variations in performance, more work on ageing and ameliorative care, enhanced project on private insurance, and more advice on emerging technologies.

Each of the Working Groups made presentations on their activities, outlining progress to date, outstanding issues, and challenges ahead. Key issues arising from Working Group presentations were deliberated and the consensus obtained included

the necessity of balancing focus on specific health interventions and on improving health systems. There was also agreement on the need to quantify, in per capita terms, the funds required to have a positive impact on health in low-income countries. On a procedural level, it was deemed essential to target priorities and to propose indicators to monitor progress.

Fourth Meeting of the Commission on Macroeconomics and Health *Addis Ababa, Ethiopia, March 6-8, 2001*

The fourth meeting of the Commission on Macroeconomics And Health was hosted by the UN Economic Commission for Africa (UNECA). The welcoming address was given by Mr. K.Y. Amoako, Executive Secretary, UNECA. He highlighted that the timing and venue of the fourth meeting of the CMH were particularly appropriate in the context of Africa’s recent proactive efforts in giving health prominence in the development agenda. The UNECA health-focused Forum “Leadership to overcome HIV/AIDS” (December 2000), and scheduled conferences including the HIV/AIDS Summit (April 24 2001) and meeting of African Ministers of Finance (May 2000), were examples he gave of the high visibility given to health in the broader macroeconomic scenario. He also stressed that African Heads of State are treating health as the key to economic growth and in this context are assessing what they can do for themselves and what can best be done in partnership with others.

Presentations were given on the health in Ethiopia and the national twenty-year health sector development strategy. The Ethiopian experience provided evidence that substantial increases in donor support were needed to permit progress in the coverage and the quality of health care delivery. A presentation by the Global Health Team, Cabinet Office, UK provided information about a project entitled “Health in Developing countries”. Key aspects of the project will focus on policy measures to achieve large health improvements, arrangements for a global health fund, identification of capacity constraints to be addressed for scaling-up, and of ways to involve, to a greater extent, developing countries in the process and outcome.

Panel discussions of issues that arose from the presentations by the Working Groups permitted unresolved issues to be highlighted, drew attention to key areas requiring a firm stance, and referred to concrete evidence of the macroeconomic policy changes needed to ensure that health systems promote healthy outcomes amongst the most vulnerable segments of society.

Fifth Meeting of The Commission on Macroeconomics and Health

Mexico City, Mexico June 11-14, 2001

The Ministry of Health of Mexico hosted the fifth meeting of the Commission on Macroeconomics and Health. Dr. Julio Frenk, Minister of Health of Mexico, gave the welcoming address. The first day of the meeting was devoted to health issues of Latin America and the Caribbean (LAC), focusing on the “International Public Goods For Health” dimension of information, Health Data Information Platforms and Networks, and the Latin American Health Reform Debates. Speakers from these countries provided in-depth analyses of the health issues of Chile, Colombia, Brazil and Mexico in presentations.

The outputs of the Working Groups as of the time of the meeting (draft synthesis reports and commissioned papers) were discussed. The Working Group findings were debated in relation to the proposed framework for the CMH report.



▲ *Participants at the 5th meeting of the CMH, Mexico City June 11-14, 2001*

Sixth Meeting of the Commission on Macroeconomics and Health

Geneva, Switzerland, August 21-23, 2001

The World Health Organization hosted the sixth meeting of the Commission on Macroeconomics and Health. Unlike the earlier meetings presentations from countries or regions were not given. Commissioners and working group chairs and Co-Chairs attended this meeting. The meeting enabled a review of the draft report of the commission, and discussions were held about the launch and dissemination of the final report.

CONSULTATION MEETINGS

Special Meeting of Working Group 1 and the CMH on "Priorities for Health Investments in Africa in the Context of Alternative Strategies for Poverty Reduction"

Bellagio, Italy, February 12-16, 2001

The special meeting of Working group 1 and the CMH was hosted by the Rockefeller Foundation and was convened to provide a forum for dialogue with African policy makers and practitioners on the current status and potential for investments in health (including family planning and nutrition), education, and other sectors to accelerate eco-



▲ *Participants of the Special Meeting of the CMH, Bellagio February 12-16 2001*

nomic growth and poverty reduction in Africa.

Participants at the meeting included academics, practitioners, and policy makers from health and finance ministries of African countries (Ghana, Nigeria, Rwanda, Senegal, and South Africa) as well as representatives of donor agencies and international agencies. The chair of CMH, Professor Jeffrey Sachs, presided over the meeting. The discussions provided insights into the political economy of health sector reforms in Africa and the many factors that affect the prioritization of investments in the sector. Many participants felt the Commission could make an invaluable contribution to the search for increased health sector financing and for more efficient policy instruments if its findings were informed by country and region-specific experiences.

Ad-hoc consultations between the CMH/WG6 and regional health sector representatives on "How to Make Development Assistance in Health (DAH) More Effective"

Accra, Ghana, April 25 –27, 2001

The meeting was hosted by the Ministry of Health, Ghana and supported financially by the United Kingdom Department for International Development and the Swedish International Development Agency. The participants were from African countries, including Ghana, Zambia, Uganda and Kenya. They included practitioners, and policy makers from the health sector, and academics from health and economic disciplines.

The meeting provided an analysis of the challenges facing development assistance to the health sectors of African countries, in terms of financing, systems development, human resources and institutional capacity. Participants discussed strategies to facilitate equal partnerships between donors and recipients, and the role of DAH in supporting capacities required to operate effective consumer-focused health sectors.

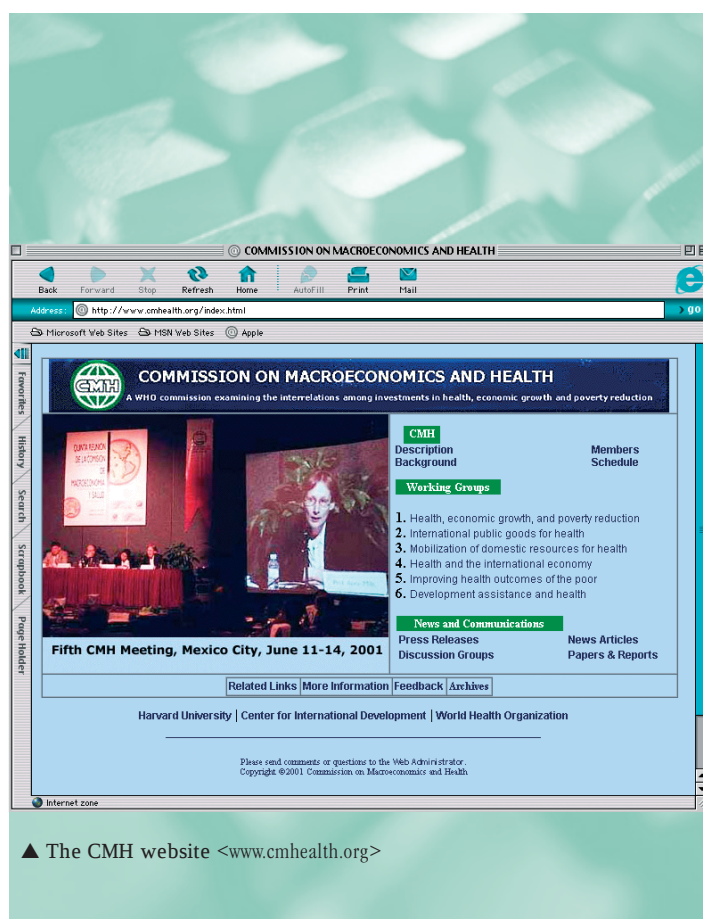
An economists Review Meeting of the CMH draft Report

London, England, September 5, 2001

The Department for International Development (DFID) hosted the meeting of economists to review the draft report of the Commission. The aim of the consultation was to provide an external perspective into the process of developing the final report. Developing country economists (from Ghana and India) participated in the meeting. Other participants were economist from national agencies and departments (from Germany, Japan Sweden and USA), and from the multilateral agencies (ADB, EU, IMF, OECD, WHO, and World Bank).

The key areas discussed were the links between health and economic development; the determinants of health; and aid resources and mechanisms for improving health. Participants acknowledged that the recommendations of the CMH offer the potential to "change the world for the better".

DISSEMINATION



WEBSITE

The CMH website (www.cmhealth.org) became functional in December 2000. It is a source of information about the Commission (background of the CMH, names of Commissioners, schedule of activities). The CMH website is interactive and therefore facilitates stock-taking of the existing knowledge about the interrelations between health and macroeconomics, a central part of the Commission's work, as specified in its terms-of-reference. Through the Working Group discussion boards on the site Commissioners and Working Group members may engage in public discussions and academic and policy debates about the issues addressed by the Commission. The commissioned papers of the Working Groups are posted on the site. The site also provides links to the websites of institutions participating in the CMH work.

SYNTHESIS REPORTS OF THE WORKING GROUPS

First drafts of the Working Group synthesis documents were submitted to members of the commission in August 2001. These drafts were discussed by Commissioners and other participants of the sixth CMH meeting.

CMH REPORT

The first draft of the CMH report was produced in August 2001 and the final draft of the report was completed in October 2001. It was the outcome of careful evaluation of the findings of the six Working Groups and extensive discussions by Commissioners and Co-Chairs and advisors during and following CMH meetings.

The published CMH Report will be launched and made widely available to the international development community at the end of December 2001. At the World Health Assembly 2002, the report will be presented for deliberation by the Ministers of Health.

WORKING PAPER SERIES

Papers submitted and available at
www.cmhealth.org. As of October 2001.

WORKING GROUP 1

Paper 1: HIV/AIDS in the Caribbean: Economic Issues-Impact and Investment Response (Theodore K)

Paper 2: Modelling the Effects of Health Status and the Educational Infrastructure on the Cognitive Development of Tanzanian School Children (Bhargava A)

Paper 3: Health, Inequality, and Economic Development (Deaton A)

Paper 4: Cross-Country Variation in Mortality Decline, 1962-87: The Role of country-Specific Technical Progress (Jamison DT, Sandbu M)

Paper 5: Poverty and Health (Wagstaff A)

Paper 6: Mental Illness and the Labour Market in Developing Nations (Frank RG)

Paper 7: Health, Nutrition and Economic Prosperity: A Microeconomic Perspective (Thomas D)

Paper 8: Health, Human Capital, and Economic Growth (Bloom DE, Canning D)

Paper 9: Health, Longevity and Life-Cycle Savings (Bloom DE, Canning D)

Paper 10: Impact of Malaria on Economic Growth (Harvard)

Paper 11: Health as Human Capital and Productivity (INCAP)

Paper 12: Responding to the Burden of Mental Illness (Whiteford H, Teeson M, Scheurer R, Jamison D)

Paper 13: Health Changes and a Compound of National Income: The Impact of AIDS in Five Countries of Eastern Africa (Wang)

WORKING GROUP 2

WORKING GROUP 3

Paper 1: Health Insurance for the Informal Sector in Africa: Design Features, Risk Protection, and Resource Mobilisation (Arhin-Tenkorang D)

Paper 2: Financing Health Systems through Efficiency Gains (Hensher M)

Paper 3: A Summary Description of Health Financing in WHO Member States (Musgrove P and Zeramardini R)

Paper 4: A Synthesis Report on the Role of Community in Resource Mobilization and Risk Sharing (Preker G, Carrin G, Dror D, Jakab M, Hsiao W, Arhin-Tenkorang D)

Paper 5: Debt Relief Initiative and Public Health Spending in Heavily Indebted Countries (HIPCS) (Gupta S, Clements B, Guin-Siu MT, Leruth L)

Paper 6: Mobilizing Resources for Health: the Case for User Fees Revisited (Arhin-Tenkorang D)

WORKING GROUP 4

Paper 1: Post-Trips Options for Access to Patented Medicines in Developing Countries (Scherer FM, Watal J)

Paper 2: Differentiated Pricing of Patented Products (Barton JH)

- Paper 3:** Consumption and Trade in Off-Patented Medicines (Bale H)
- Paper 4:** Protection of Traditional Medicine (Wilder R)
- Paper 5:** Trade in Health Services (Chanda R)
- Paper 6:** Trade Liberalization in Health Insurance: Opportunities and Challenges: The Potential Impact of Introducing or Expanding the Availability of Private Health Insurance within Middle and Low Income Countries (Sbarbaro J)
- Paper 7:** GATS and Trade in Health Insurance Services: Background Note (Lipson D)
- Paper 8:** Confronting the Tobacco Epidemic in an Era of Trade Liberalization (Bettcher D, Chitra Subramanian E, Guidon E, Perucic AM, Soll L, Grabman G, Joossens L, WTO secretariat, Taylor A)
- Paper 9:** Trade Barriers and Prices of Essential Health Sector Inputs (Woodward D)
- Paper 10:** Globalisation and Health: A Framework for Analysis and Action (Woodward D, Drager N, Beaglehole R, Lipson DJ)
- Paper 6:** The Evidence Base for Interventions to Reduce Malaria Mortality in Low and Middle Income Countries (Meek S)
- Paper 7:** The Evidence Base for Interventions to Reduce Smoking-Related Mortality in Low and Middle Income Countries (Chaloupka FJ, Jha P, Corrao M)
- Paper 8:** The Evidence Base for Interventions to Reduce TB Mortality in Low and Middle Income Countries (Borgdorff M)
- Paper 9:** The Evidence Base for Interventions to Reduce TB Mortality in Low and Middle Income Countries (Gelband H, Stansfield S)
- Paper 10:** The Evidence Base for Interventions to Reduce Under-Five Mortality from Vaccine-Preventable Diseases in Low and Middle Income Countries (England S, Melgaard B)
- Paper 11:** The Evidence Base for Interventions to Reduce Malnutrition Among Children in Low and Middle Income Countries (Nemer LE)
- Paper 12:** The Health Impact of Indoor Air Pollution (Vonschirnding Y)

WORKING GROUP 5

- Paper 1:** Avoidable Mortality in India (Jha P)
- Paper 2:** The Evidence Base for Interventions to Prevent HIV Infection in Low And Middle Income Countries (Jha P, Plummer FA)
- Paper 3:** The Evidence Base of Interventions for Care and Management of AIDS in Low and Middle Income Countries (Willbond B, Plummer FA)
- Paper 4:** Modelling the HIV/AIDS Epidemics in India and Botswana: The Effect of Intervention (Nafelkerke NJD)
- Paper 5:** Maternal and Neonatal Mortality in Low and Middle Income Countries (Gelband H)
- Paper 13:** (Cancelled)
- Paper 14:** Constraints to Improving Health Outcomes of the Poor: Conceptual Framework and Country Typology (Hanson K, Ranson MK)
- Paper 15:** Approaches to Improving the Performance of the Peripheral Health System: A Review of the Evidence (Olivera-Cruz V)
- Paper 16:** Constraints to Scaling Up Health Interventions: Country Case Study: India (Rao Seshadri S)
- Paper 17:** Constraints to Scaling Up Health Interventions: Country Case Study: Tanzania (Munishi G)
- Paper 18:** Constraints to Scaling Up Health Interventions: Country Case Study: Chad (Wyss K)

- Paper 19:** The Costs of Scaling Up Interventions: Methods and Estimates (Kumaranayake L)
- Paper 20:** The Costs of Scaling Up Interventions: Estimates for the Poor in Middle Income Countries (Bertozzi S)
- Paper 21:** Cancelled
- Paper 22:** Cancelled
- Paper 23:** Note on the Health Impact of Water and Sanitation Services (Vaz LME)
- Paper 24:** Constraints to the Scale-Up of Priority Interventions Factoring in Quality of Governance and Policy Framework (Vergin H)
- Paper 25:** HIV/AIDS Control in India – Lessons from Tamil Nadu (Ramasundaram S)
- Paper 26:** Preliminary Estimates of the Cost of Expanding TB, Malaria and HIV/AIDS Activities for Sub-Saharan Africa (Kumaranayake L)
- Paper 6:** Structural Adjustment and Health: A literature review of the debate, its role- players and presented empirical evidence (Bremar)
- Paper 7:** A Case Study on the European Commission's Contribution to Development Assistance and Health (DAH) (Daniels)
- Paper 8:** Review of Externally Aided Projects in the Context of their Integration into the Health Service Delivery in Karnataka (Narayan)
- Paper 9:** Notes on DAH and Its Effectiveness: The Interests of Recipient Countries (Tinorgah)
- Paper 10:** Recent Trends in Development Assistance in Health (OECD)
- Paper 11:** Quantitative Evidence on the Effectiveness of DAH (Svensson)

WORKING GROUP 6

- Paper 1:** Monitoring Financial Flows for Health Research (Michaud)
- Paper 2:** Perspectives on Improving Health in Poor Countries: Qualitative Assessment of Multilateral Agency Views and Behaviour (Nelson)
- Paper 3:** Ideas Work Better than Money in Generating Reform – But How? Assessing Efficiency of Swedish Development Assistance in Health to Vietnam (Jerve)
- Paper 4:** Qualitative Assessment of Bilateral Agency Views and Behaviour: Interviews With Non-Health Specialists (Ojemark)
- Paper 5:** Global Health Initiatives and National Level Health Programs: Assuring Compatibility and Mutual Re-Enforcement (Forsberg)



MEMBERS OF THE CMH WORKING GROUPS

WG1 HEALTH, ECONOMIC GROWTH, AND POVERTY REDUCTION

- **Sir George A.O. Alleyne** (Co-Chair), Director, Pan American Health Organization, USA
- **Professor Daniel Cohen** (Co-Chair), Professor of Economics, Ecole Normale Supérieure, France
- **Dr. Dyna Arhin-Tenkorang**, Senior Economist CMH, Center for International Development, Harvard University, USA/London School of Hygiene and Tropical Medicine UK
- **Dr. Alok Bhargava**, Department of Economics, University of Houston, USA
- **Dr. David E. Bloom**, Professor of Economics and Demography, Department of Population and International Health, Harvard University, USA
- **Dr. David Canning**, Professor of Economics, Queens University, Belfast, Northern Ireland
- **Dr. Juan A. Casas**, Director of the Division of Health and Human Development, Pan American Health Organization, USA
- **Dr. Angus Deaton**, Professor of Economics and Public Affairs, Princeton University, USA
- **Professor Dean T. Jamison**, Director, Program on International Health and Education, University of California, USA
- **Dr. Gerald Keusch**, Associate Director of National Institutes of Health for International Research, Director of the Fogarty International Center, Professor of Medicine, Tufts University of Medicine, USA
- **Dr. Felicia Knaul**, Director, Center for Social and Economic Analysis of the Mexican Health Foundation, Mexico
- **Dr. Juan Luis Londoño**, Engineer, Revista Dinero, Columbia
- **Dr. Nora Lustig**, Senior Advisor and Chief, Poverty and Inequality, Unit of the Inter-American Development Bank (IABD), and Director, The World Development Report, The World Bank, USA
- **Dr. Mead Over**, Senior Economist, Development Research Group, The World Bank, USA
- **Professor Jeffrey Sachs**, Director, Center for International Development at Harvard University, USA
- **Dr. William Savedoff**, Senior Economist, Financial Development Division, Stop W0502, Inter- American Development Bank, USA
- **Professor Paul Schultz**, Department of Economics, Yale University, USA
- **Professor Duncan Thomas**, Department of Economics, University of California, (UCLA), USA
- **Dr. Eva Wallstam**, Director, Health and Sustainable Development, World Health Organization, Switzerland

WG2 INTERNATIONAL PUBLIC GOODS FOR HEALTH

- **Professor Richard Feachem** (Co-Chair), Director, Institute for Global Health, University of California, USA



Professor Richard Feachem

- **Professor Jeffrey Sachs** (Co-Chair), Director, Center for International Development, Harvard University, USA
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