

## Yolse Statement to the Lancet Commission report on Essential Medicines for Universal Health Coverage

Yolse, Santé Publique & Innovation, an NGO working on Public Health in French-speaking sub-Saharan African countries welcomes the Lancet Commission report on Essential Medicines for Universal Health Coverage, “Better life through medicine—let’s leave no one behind”. The Commission put access to essential medicines for all at the centre of global health because it affects lives and people's dignity worldwide.

Yolse applauds « practical recommendations that will enable a new era of equity, strengthened institutions, and accountability to ensure that essential medicines policies support UHC and sustainable development in the 21st century ».

The recommendations of the report are fundamental because they analyze the issue of access to medicines in all its complexity, including the need for strengthening of institutions, the role of national governments, pricing policies, improved regulatory measures, promotion of quality medicines use, and stimulation of innovation, as well as making a call for greater transparency and proposing a mechanism for effective accountability framework.

Equity of access, efficiency, affordability and quality-assured essential medicines are relevant for all diseases, regardless of your origin, whether you live in a rich or a poor country, or living in a big city or in a small village. In sub-Saharan Africa, people are dying every day because of diseases that cannot be treated with appropriate and affordable drugs, or even just because of the bad quality of certain of the medicines which are available.

Yolse welcomes the Commission recognition that « Donations are also used to finance medicines and other commodities, but represent short-term strategies to address resource gaps locally and are typically used as temporary support in emergencies or in low-resource settings » The Commission did not mention why LDCs are not implementing the transition period flowing from the TRIPS Council Decision of November 2015 - one could conclude that political pressure from some developed countries also poses a problem for LDCs as regards implementing the transition period.

The strengthening of institutions is crucial to offering good health care services. The lack of good infrastructure and limited supply of qualified human resources in the medical sector in sub-Saharan Africa are problematic in terms of ensuring the provision of adequate health services.

We agree with the Commission's view that « in developing countries the patent-based model fails in making much needed essential medicines available. Companies do not invest in medicines for so-called neglected diseases, for which there is no reliable market ». The price of innovative medicines also remains a huge problem for national governments and the public at large, who most of the time have to pay for medicines from their own pockets. The incidence of NCDs is now very high in sub-Saharan Africa. Cancer treatment is unaffordable.

We believe governments need to be at the centre of the action to achieve access to medicines. We expect serious commitment from them in order to achieve access to medicines, universal health coverage and sustainable development goals.

We welcome the Commission's proposal to « facilitate an expert meeting to explore concrete actions by which WTO members can protect the legitimate rights of individual members to adopt and implement safeguards in the TRIPS agreement ».

Finally, Yulse calls upon Sub-Saharan African governments, in particular, to follow the recommendations of this report, as well as the recent recommendations of the United Nations Secretary General's High Level Panel Report on Access to Medicines, which guide countries towards progressively positioning essential medicines as an integral part of UHC and a major contribution to sustainable development.