

BRICS Health Ministers' Meeting
Beijing Declaration
July 11, 2011

1. Consistent with the mandate of the Sanya Declaration of the BRICS Leaders Meeting, we, the Health Ministers of the Federative Republic of Brazil, the Russian Federation, the Republic of India, the People's Republic of China and the Republic of South Africa, met in Beijing, China, for the First BRICS Health Ministers' Meeting on 11 July 2011, to discuss and coordinate positions on issues of common interest as well as to identify areas for cooperation in public health. The BRICS Ministers of Health issued the following Declaration:

2. Public health is an essential element for social and economic development and should be reflected accordingly in national and international policies. The impact of foreign policy on health outcomes is being recognized. We call upon the United Nations General Assembly as well as other major international conferences and fora, to integrate public health into their respective agendas, in order to further promote awareness and contribute to build political consensus and generate broad, sustained and concerted action for public health.

3. The international health architecture comprises an increasing number of international agencies and organizations, each of them playing a significant role, in their respective areas, to promote public health. In this increasingly complex environment, we are determined to strengthen public health at the global level and to improve the leading and coordinating role of the World Health Organization (WHO) in international health cooperation. We acknowledge that challenges related to food security, climate change, environment, trade and other global issues have an impact on public health. We are committed to support and undertake inclusive global public health cooperation projects, including through South-South and triangular cooperation. We support greater coordination and cooperation among international health and development agencies and organizations, so as to optimize the use of resources and to integrate, in a coherent manner, global health policies.

4. In view of the financial challenges and growing demands faced by WHO in the aftermath of the economic crisis, we urge Member States, in particular developed countries, to continue to support the Organization with the required resources for the fulfillment of its mandate. In this context, we support innovative financing mechanisms for health as possible means to mobilize additional resources.

5. We also stress the need and importance of the reform of WHO. We are confident that proposed reform measures which include, among others, focusing on core business, strengthening financing, resource mobilization and strategic communication, strengthening the Organization's role in global health governance, will lead to the improvement of the Organization's transparency, efficiency and accountability. We welcome the decision taken by the WHO Executive Board to establish a transparent, Member State driven and inclusive reform process.

6. The strengthening of health systems and health financing in developing countries in all regions must be the central goal of the global health community. In our view, WHO has a major role to play in the promotion of access to medication, technology transfer and capacity-

building with a view to bring more equity to the health sector worldwide. Success in health outcomes in one country represents success to many others.

7. Despite our diversity, the BRICS nations face a number of similar public health challenges, including inequitable access to health services and medicines, growing health costs, infectious diseases such as HIV and tuberculosis (TB), while also facing growing rates of non-communicable diseases. The major challenge facing us is how to provide health care to millions of people, in particular among the most vulnerable segments of our populations.

8. We are committed to continue to collaborate in order to advance access to public health services and goods in our own countries and deliver more cost-effective, equitable and sustainable solutions for common health challenges. We are also committed to support other countries in their efforts to promote health for all.

9. With those aims in mind, we reaffirm our commitment to promote BRICS as a forum of coordination, cooperation and consultation on relevant matters related to global public health. Therefore, we agree to institutionalize, on a permanent basis, the dialogue among Ministers of Health, as well as among Permanent Representatives in Geneva, to follow-up and implement the health related outcome of the BRICS summit.

10. In light of the theme of the meeting “Global Health- Access to Medicine”, which aims to promote innovation and access to affordable medicines, vaccines and other health technologies of assured quality, in support of reaching MDGs 4, 5, 6 and 8 and other public health challenges, we have identified the following priority areas:

I. Collaboration to strengthen health systems and overcome barriers to access to affordable, quality, efficacious, safe medical products, vaccines and other health technologies for HIV/AIDS, tuberculosis, viral hepatitis, malaria and other infectious diseases and non-communicable diseases.

II. Collaboration to explore and promote, where feasible, effective transfer of technology to strengthen innovation capacity to benefit public health in developing countries.

III. Collaboration with and support of international organizations, including WHO and UNAIDS, the Global Fund to Fight AIDS, Tuberculosis and Malaria and the GAVI alliance, to increase access to affordable, quality, efficacious and safe medicines, vaccines and other medical products that serve public health needs.

11. We agree to establish and encourage a global health agenda for universal access to affordable medicines and health commodities.

12. To accelerate progress towards universal access to HIV prevention, treatment, care and support, we encourage increased access to new and innovative antiretroviral therapies (ART). We are determined to make efforts to simplify treatment regimens, including for second and third line therapy as the incidence of resistance increases. As far as TB and malaria are concerned, we encourage increased innovation, notably in the development of additional diagnostic tools and treatment for the resistant strains of the diseases. We encourage the access

to diagnosis and treatment for viral hepatitis.

13. With the increasing need for the WHO Prequalification of Medicines Programme to ensure quality of HIV, TB and malaria medicines as well as vaccines produced by BRICS countries, we call upon the WHO to facilitate prequalification process, the strengthening of national regulatory authorities and the enhancement of exportability of medical products produced in BRICS countries, especially priority vaccines and medicines for HIV/AIDS, TB and malaria.

14. We commend the Moscow Declaration of the First Global Ministerial Meeting on Healthy Lifestyle and Non-communicable Diseases, support the High-level Meeting of the UN General Assembly on Non-communicable Diseases and commit to collectively explore ways to implement the agreements to be reached by September 2011. We welcome the holding, in Rio de Janeiro, next October, of the World Conference on the Social Determinants of Health.

15. We are committed to the full implementation of agreements reached at the High Level Meeting on HIV/AIDS of the United Nations General Assembly (8-10 June, 2011).

16. We emphasize the importance and the need of technology transfer as a means to empower developing countries and enable them to establish efficient health systems. In this context, we underlined the important role of generic medicines in the realization of the right to health.

17. We acknowledge the need to establish priorities in research and development as well as cooperation among BRICS countries, including between stakeholders from the public and private sector, in order to support the transfer of technologies and innovation in a sustainable way.

18. We recall the important role the BRICS countries have played in the development of the Global Strategy and Plan of Action on Public Health, Innovation and Intellectual Property and reiterate our commitment to support the full implementation of its provisions.

19. We welcome the establishment of innovative mechanisms to promote transfer of and access to key health-related technologies where feasible to enhance the availability of affordable medicines in developing countries.

20. Aiming to ensure access to affordable, safe and effective technologies and to expand health benefits, we will foster cooperation among our countries to make available and improve health technology.

21. We are exploring new opportunities for BRICS countries to support the work of health-related international organizations and to benefit from such collaboration. We reiterate our support to UN agencies and programs in this regard, as well as our commitment to further explore bilateral technical cooperation initiatives with developing countries in partnership with WHO, UNAIDS and other UN agencies, as well as global health programs such as the Global Fund to Fight AIDS, Tuberculosis and Malaria, GAVI alliance and the UNITAID.

22. We are determined to ensure that bilateral and regional trade agreements do not undermine TRIPS flexibilities. We support the TRIPS safeguards and are committed to work together with

other developing countries to preserve and promote, to the full, the provisions contained in the Doha Declaration on TRIPS and Public Health and of the Global Strategy and Plan of Action on Public Health, Innovation and Intellectual Property. We also support the full implementation of Human Rights Council Resolution 12/24 on access to medicine in the context of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health. In addition, we support the development of innovative mechanisms of transfer of intellectual property rights for priority technologies, to open avenues for BRICS countries to supply these medicines to low and middle income countries.

23. We agree to establish a technical working group to discuss specific proposals, including the idea of setting up a BRICS network of technological cooperation, taking into account of a possible BRICS Health Ministers' Meeting in September, 2011, in conjunction with the UN High Level Meeting on Non-communicable Diseases.