



WORLD  
HEALTH  
SUMMIT

SCIENCE · INNOVATION · POLICIES

WORLD HEALTH SUMMIT  
BERLIN, GERMANY  
OCTOBER 27-29, 2019

# VENUE

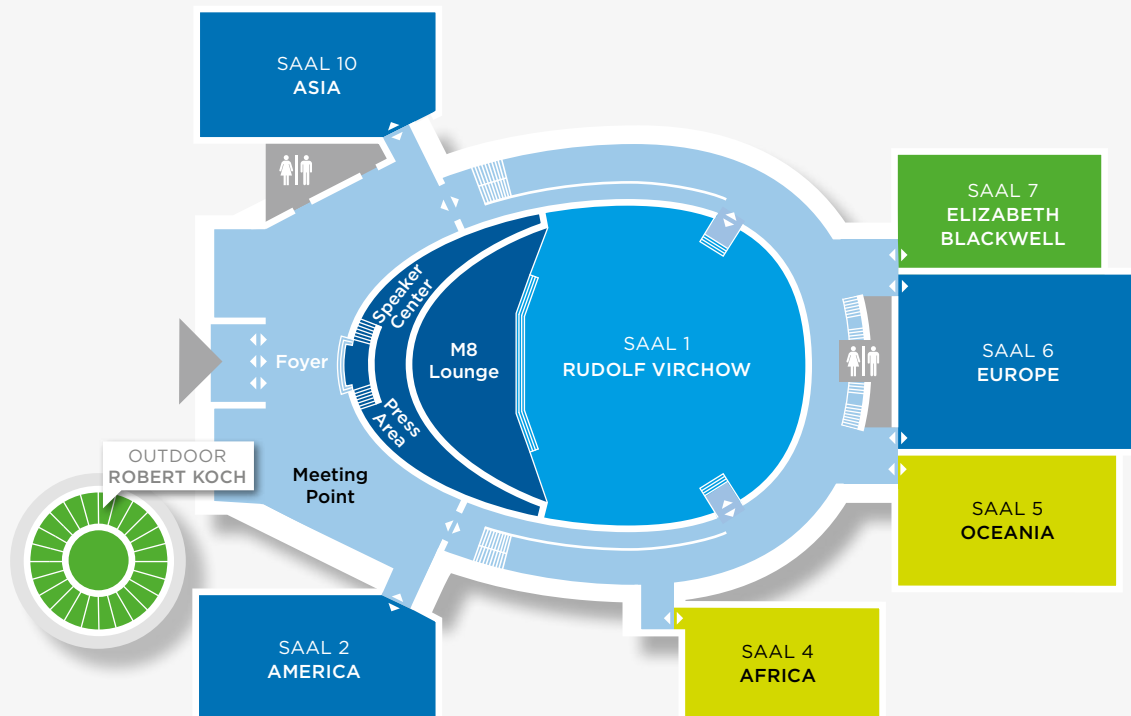
## Kosmos

Karl-Marx-Allee 131a  
10243 Berlin, Germany

## WiFi

Network: WorldHealthSummit  
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WORLD HEALTH SUMMIT  
BERLIN, GERMANY  
OCTOBER 27-29, 2019

## SUNDAY | OCTOBER 27, 2019

	SAAL 1 RUDOLF VIRCHOW	SAAL 6 EUROPE	SAAL 10 ASIA	SAAL 2 AMERICA	SAAL 4 AFRICA	SAAL 5 OCEANIA
		<b>PD 01   Page 22</b>	<b>PD 02   Page 24</b>	<b>PD 03   Page 26</b>	<b>WS 01   Page 28</b>	<b>WS 02   Page 30</b>
11:00 – 12:30		<b>Gender Equality within the Global Health Workforce</b> Women in Global Health	<b>Polio Eradication</b> <b>M8</b> Alliance The Graduate Institute Geneva – Global Health Center	<b>Antimicrobial Resistance</b> World Health Organization (WHO)	<b>Nutrition and Non-Communicable, Metabolic Diseases in Sub-Saharan Africa</b> German Institute of Human Nutrition Potsdam-Rehbrücke (DIfE) Leibniz Institute for Prevention Research and Epidemiology (BIPS) Bremen	<b>European Initiatives for Health Research and Development</b> BioMed Alliance Charité – Universitätsmedizin Berlin <b>M8</b> Alliance
12:30 – 14:00 Lunch Break						
		<b>PD 04   Page 32</b>	<b>PD 05   Page 34</b>	<b>PD 06   Page 36</b>	<b>WS 03   Page 38</b>	<b>WS 04   Page 40</b>
14:00 – 15:30		<b>The Role of AI in Healthcare Innovation</b> EIT Health (European Institute for Innovation and Technology)	<b>Securing Political Leadership for Global Health to Accelerate the Elimination of Communicable Diseases</b> UNITE	<b>Protecting the Mental Health of Refugees and Migrants</b> Istanbul University <b>M8</b> Alliance Sapienza University Tehran University of Medical Sciences (TUMS) University of Geneva	<b>Evolutionary Medicine</b> University of Zurich	<b>Traditional Medical Practices and Global Health</b> Kiel University <b>M8</b> Alliance
15:30 – 16:00 Coffee Break						
		<b>PD 07   Page 42</b>	<b>PD 08   Page 44</b>	<b>PD 09   Page 46</b>	<b>WS 05   Page 48</b>	<b>WS 06   Page 50</b>
16:00 – 17:30		<b>Sustainability of Healthcare Systems</b> Sanofi	<b>Accelerating Innovation for Impact</b> German Health Alliance (GHA) UNAIDS	<b>Respect and Dialogue</b> InterAcademy Partnership (IAP) <b>M8</b> Alliance Tehran University of Medical Sciences (TUMS)	<b>Falsified and Sub-Standard Medicines</b> Association of Research-based Pharmaceutical Companies (vfa)	<b>How Microbiomedical Research is Changing Medicine</b> Max Delbrück Center for Molecular Medicine (MDC)
		<b>KEY 01   Page 52</b>				
18:00 – 19:30	<b>Opening Ceremony</b> <b>M8</b> Alliance World Health Summit					
19:30 – 22:30	<b>Welcome Reception</b>					

MONDAY | OCTOBER 28, 2019

	SAAL 1 RUDOLF VIRCHOW	SAAL 6 EUROPE	SAAL 10 ASIA	SAAL 2 AMERICA	SAAL 4 AFRICA	SAAL 5 OCEANIA
		<b>PD 10   Page 56</b>	<b>PD 11   Page 58</b>	<b>PD 12   Page 60</b>	<b>WS 07   Page 62</b>	<b>WS 08   Page 64</b>
9:00 – 10:30		<b>Universal Health Coverage</b> Global Solutions Initiative M3 Alliance The Graduate Institute Geneva – Global Health Center UHC2030	<b>From Words to Action: Transforming Mental Health Globally</b> Harvard Medical School	<b>Bridging R&amp;D and Sustainable Access to Antibiotics</b> Global Antibiotic Research & Development Partnership (GARDP)	<b>Neglected Tropical Diseases and Inclusion under the Umbrella of Universal Health Coverage</b> Association of Research-based Pharmaceutical Companies (vfa) Eberhard-Karls-University Tuebingen German Network against Neglected Tropical Diseases (DNTDs) German Society for Tropical Medicine and International Health (DTG) Universitätsklinikum Tuebingen	<b>Climate Change and Public Health</b> Charité – Universitätsmedizin Berlin M3 Alliance Potsdam Institute for Climate Impact Research Stiftung Mercator
10:30 – 11:00 Coffee Break						
		<b>KEY 02   Page 66</b>	<b>PD 13   Page 68</b>		<b>WS 09   Page 70</b>	<b>WS 10   Page 72</b>
11:00 – 12:30	<b>Transforming Human Capital</b> M3 Alliance National University of Singapore (NUS)	<b>A Comprehensive Approach to Global Health and Security</b> German Federal Foreign Office German Federal Ministry of Defense			<b>How to Ensure Sustainable Elimination of NTDs</b> Drugs for Neglected Diseases initiative (DNDi) Sanofi	<b>The SDG3 Global Action Plan for Health and Wellbeing</b> German Federal Ministry of Education and Research (BMBF) Lancet Commission on One Health
12:30 – 14:00 Lunch Break						
		<b>PD 13a   Page 74</b>				<b>WS 10a   Page 76</b>
		12:45 – 13:45	<b>Entrepreneurs in Global Health Presentation</b>		12:30 – 14:00	<b>The One Health Concept</b>
	<b>KEY 03   Page 78</b>	<b>PD 14   Page 80</b>			<b>WS 11   Page 82</b>	<b>WS 12   Page 84</b>
14:00 – 15:30	<b>Focus Africa</b> M3 Alliance Makerere University	<b>Artificial Intelligence for Health</b> Berlin Institute of Health (BIH) Fraunhofer Heinrich-Hertz-Institut			<b>How can Health Insurance Schemes Help to Develop Sustainable Health Systems in the BRICS countries?</b> Manipal Academy of Higher Education	<b>Prioritizing Infectious Diseases for Surveillance in Africa</b> Helmholtz Centre for Infection Research (HZI)
15:30 – 16:00 Coffee Break						
		<b>PD 15   Page 86</b>	<b>PD 16   Page 88</b>	<b>PD 17   Page 90</b>	<b>WS 13   Page 92</b>	<b>WS 14   Page 94</b>
16:00 – 18:30		<b>Access to Medicines</b> International Federation of Pharmaceutical Manufacturers & Associations (IFPMA)	<b>Smart Investment in Equitable Health Systems</b> ATscale – Global Partnership for Assistive Technology Ottobock SE & Co. KgaA The George Washington University, Milken Institute School of Public Health	<b>The Life-Saving Power of Mobile Technology</b> Heidelberg Institute of Global Health (HIGH) Charité Global Health	<b>Capacity Building in Health Research in Low-Resource Settings</b> European & Developing Countries Clinical Trials Partnership (EDCTP) German Federal Ministry of Education and Research (BMBF) Institut Pasteur	<b>Reforming Health Systems</b> Hertie School Robert Bosch Stiftung
18:00 – 23:00	<b>World Health Summit Night   Page 96</b>					

## TUESDAY | OCTOBER 29, 2019

	SAAL 1 RUDOLF VIRCHOW	SAAL 6 EUROPE	SAAL 10 ASIA	SAAL 2 AMERICA	SAAL 4 AFRICA	SAAL 5 OCEANIA
		<b>PD 18   Page 98</b>	<b>PD 19   Page 100</b>	<b>PD 20   Page 102</b>	<b>WS 15   Page 104</b>	<b>WS 16   Page 106</b>
9:00–10:30		<b>The Commercial Determinants of Health</b> Tobacco Free Portfolios	<b>Climate Change and Health</b> German National Academy of Sciences Leopoldina e.V. InterAcademy Partnership (IAP)	<b>Access to Quality Health Care for Women in Low Resource Settings</b> Charité – Universitätsmedizin Berlin <b>M8</b> Alliance	<b>How Can We Create Sustainable Value for Patients and Society</b> European University Hospital Alliance	<b>Co-Creation and Co-Ownership of the UHC and SDG Agendas</b> Drugs for Neglected Diseases initiative (DNDi)
10:30–11:00 Coffee Break						
		<b>PD 21   Page 108</b>	<b>PD 22   Page 110</b>	<b>PD 23   Page 112</b>	<b>WS 17   Page 114</b>	<b>WS 18   Page 116</b>
11:00–12:30		<b>Tackling Unmet Medical Needs of Vulnerable and Neglected Populations</b> Charité – Universitätsmedizin Berlin European & Developing Countries Clinical Trials Partnership (EDCTP) <b>M8</b> Alliance Max Planck Institute for Infection Biology	<b>Global Public Health Security</b> Centre on Global Health Security, Chatham House International Association of National Public Health Institutes (IANPHI) Robert Koch Institute	<b>Health Data as a Global Public Good</b> Fondation Botnar The Lancet & Financial Times Commission: Governing Health Futures 2030: Growing Up in a Digital World	<b>Access to Sustainable NCD Treatment and Care</b> Boehringer Ingelheim Pharma GmbH & Co.KG The Defeat-NCD Partnership	<b>The SDG3 Global Action Plan for Health and Wellbeing</b> Wellcome Trust
12:30–14:00 Lunch Break						
					<b>WS 19   Page 118</b>	<b>WS 20   Page 120</b>
12:30–14:00					<b>Better Leadership: Improved Health</b> ESMT European School of Management and Technology GmbH InterAcademy Partnership (IAP)	<b>New Voices in Global Health</b> Global Young Academy World Health Summit/ WHS Foundation GmbH
	<b>KEY 04   Page 122</b>	<b>PD 24   Page 124</b>				
14:00–15:30	<b>Health is a Political Choice</b> German Federal Ministry of Health (BMG) World Health Organization (WHO)	<b>Digital Health</b> Global He@lth 2030 Innovation Task Force				
15:30–16:00 Coffee Break						
	<b>KEY 05   Page 126</b>					
16:00–17:30	<b>The SDG3 Global Action Plan for Health and Wellbeing</b> German Federal Ministry of Health (BMG) World Health Organization (WHO)					

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## **Welcome Messages 6**

- High Patrons of the World Health Summit 6
- World Health Summit Presidents 11
- Charité - Universitätsmedizin Berlin 12

## **About the World Health Summit 14**

## **About the M8 Alliance 15**

## **Central Topics 2019 16**

## **Initiatives 18**

## **Program 21**

- Program Sunday, October 27, 2019 21
- Opening Ceremony and Reception 54
- Program Monday, October 28, 2019 55
- World Health Summit Night 96
- Program Tuesday, October 29, 2019 97

## **General Information 129**

- Useful Information 130
- City of Berlin 134
- World Health Summit 136
- M8 Alliance 140
- Speaker Index 143
- Supporting Institutions 146
- Partners 148
- World Health Summit Office 153
- Imprint 156

## WELCOME MESSAGE

### HIGH PATRONS OF THE WORLD HEALTH SUMMIT



Health and well-being is a key goal of the 2030 Agenda for Sustainable Development, to which the international community has pledged its support. At the UN Sustainable Development Summit in late September, the Heads of State and Government spelt out that the Agenda is not being implemented fast enough. In order to achieve the Sustainable Development Goals by around 2030, we must significantly strengthen our endeavours worldwide. Above all, this requires developing a common understanding on how to proceed and pooling our strengths, including on global health issues.

To this end, Norwegian Prime Minister Erna Solberg, Ghanaian President Nana Addo Akufo-Addo and I asked WHO in April

2018 to guide the elaboration of a Global Action Plan to implement the 2030 Agenda's health goals. Twelve international organisations were involved in drafting this Action Plan, which WHO presented during UN Week. The outcome is very gratifying. The plan provides us with a solid basis for improving support services in specific countries and making achievements more measurable through intermediate goals, thus enabling rapid adjustments where necessary. I am confident that with the help of this Action Plan, it will be possible to further improve the coordination of the countless activities in the health sector and thus use funds more efficiently.

The current outbreak of Ebola in the Democratic Republic of the Congo once again highlights the importance and urgency of coordinated action. However, we are in a better position than during the epidemic of 2014-2015 in West Africa. Experimental vaccines and treatments are being used successfully. Despite great concern about the current outbreak, there are thus good

reasons to hope that Ebola can be curbed effectively. In order to achieve this in the case of other dangerous infections, too, such as lassa fever, Germany is supporting the Coalition for Epidemic Preparedness Innovations (CEPI), which will invest up to a billion dollars in developing new vaccines.

In view of the possible dangers that pandemics pose to human life, but also to entire regions' economies, security and development, it is and will remain important that we support the countries of the Global South in developing resilient education, research and health systems. The Research Network for Health Innovations in sub-Saharan Africa, which is funded by the Federal Government, is one example of how this can be achieved in the field of health research. Our German-African partnerships aim to identify solutions to current health problems that can be put into practice on the ground.

Diseases and epidemics do not stop at national borders. Responsibility for healthcare thus



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does not end there either. The World Health Summit plays a key role in living up to this responsibility. As patron of the Summit, I am profoundly grateful to all those who play a part in its success, as the event focuses on new and better prospects for the lives of people all over the world. On that note, I hope your exchange of thoughts and experiences at the Summit will prove both interesting and productive.



**Angela Merkel**  
Chancellor of the  
Federal Republic of Germany



I am very pleased to offer my patronage to the World Health Summit, as I did on two previous occasions along with the German Chancellor and the President of the European Commission. This 2019 Summit provides once more a stimulating opportunity for dialogue, exchange, and learning. It comes at a challenging and inspiring time for global health, calling for reinforced multilateral action, an approach strongly supported by both Germany and France.

During the last months, France played an active part in this respect as Chair of the G7 focusing on the fight against inequalities. The fourth G7 Health ministerial meeting which took place in Paris in May brought forward access to primary health care as a shared priority. At the G7

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Summit in Biarritz on August 26, we reiterated that universal access to social protection and affordable quality health services with primary health care are crucial. We called for further investments to strengthen health systems and eliminate the three most lethal infectious diseases— AIDS, tuberculosis and malaria. We adopted a Sahel Partnership Action Plan to enhance development in the Sahel region. This plan has a specific focus on gender equality and women's empowerment and aims at reaching the most affected communities.

This year, the United Nations General Assembly bolstered the achievement of the Universal Health Coverage. France has always been a strong advocate of universal health coverage as a fundamental right: access to health and well-being must be guaranteed, regardless of one's wealth. France implemented universal health coverage decades ago and, ever since, this has proven to be a fundamental basis for our national cohesion and prosperity. We

must remain committed to this global challenge. We have to make health systems more resilient in order to provide equal access to care and to make high quality medicines available at a fair price. We have to ensure that we take on board vulnerable populations, and achieve gender equality.

A few weeks ago, France hosted the Global Fund to Fight AIDS, Tuberculosis and Malaria's Sixth Replenishment Conference in Lyon. The international community gathered to step up the fight against these three pandemics, putting us back on track to achieving the Sustainable Development Goal on health and well-being for all. Working closely with partners, at international and local level, the Fund has achieved great results, opening up access to new prevention, protection and screening methods, as well as medication and healthcare, and saving 32 million lives. Hundreds of millions of people are now living better lives. With joined forces, we helped the Global Fund to continue its mission to eradicate

malaria, AIDS and new drug-resistant forms of tuberculosis.

This has been a truly collective effort, with civil society, private sector stakeholders, foundations, activists and communities, pushing for more commitments, offering solutions and taking action, alongside donor and recipient countries. SDGs for health are not concerns for States alone. They are common goals and the World Health Summit is an opportunity to share this energy for action. Let us be actively optimistic for a healthier future.

I would like to thank the organizers for the wise choice of topics for the Summit and especially the focus on Africa. I wish all participants constructive discussions.



**Emmanuel Macron**  
President of the Republic of France



Europeans share a number of common goods with the rest of the world. We have the desire to be safeguarded, to feel secure and protected. We have similar political aspirations, like democracy and freedom. But one good is the premise of all: health. It is one we protected and cherished, so that today we live and age healthily, and more people have access to healthcare than ever before.

But we cannot afford to lapse into complacency, as the mere topic of vaccination reminds us. Each year, vaccination saves up to three million human lives around the world. Some diseases like smallpox, once considered a death sentence, belong to the past. Yet, the recent surge in measles and other diseases close to eradication is a worry-

ing sign that we are losing ground. Without adequate immunisation coverage, we are putting people's lives at risk.

Our response should be global, and Europe has already taken a step forward. At the World Vaccination Summit it hosted less than a month ago, the Commission presented priority measures to address increasing disinformation about vaccination, and tackle the lack of access, vaccine shortages and disinvestment, which are all causing vaccination to stagnate across the world.

As we strive to hold on to the progress we have already made, it is paramount that we continue investing in the vital research that will lead to medical breakthroughs and better health. From EU-funded research on breast cancer treatment to EU-funded researchers making X-rays safer for patients, it is when we pool national and European resources that we can deliver results. This is no zero-sum trade-off.

At the recent meeting of the G7 in Biarritz, the EU announced a record €550 million contribution to the Global Fund to fight AIDS, malaria and tuberculosis. For many African countries, the Global Fund is the single most important external financier of the health sector and the EU and its Member States have been the main contributors since its creation. When our common good is at risk, we invest in building quality health care systems in more than 80 countries around the world; we deploy our European Medical Corps with on-call medical assistance and public health expertise when disaster strikes; and we broaden and deepen our work with the World Health Organization.

There are few clearer examples today of a truly global threat than antimicrobial resistance. The World Bank estimates severe economic damage as a result, the likes of which we have not seen since the 2008 financial crisis. Worse, by 2050 it could cause 10 million deaths worldwide. The European Union has long been engaged on this

issue, including most recently with legislation addressing the public and animal health risks caused by resistance to antibiotics in the EU.

We, as institutions and politicians, call for growth, jobs and opportunities. But we shall be judged by how we treat our people. Because it is the health of all our citizens that is the true mark of our progress as a society.

It has been an honour during my mandate as President of the European Commission to offer my patronage to the World Health Summit, a distinguished forum that acts for the greater good. I wish you all the best for another inspiring summit this year.



**Jean-Claude Juncker**  
President of the  
European Commission



At the United Nations General Assembly this year, world leaders endorsed the political declaration on universal health coverage (UHC), the most comprehensive international health commitment in history.

Building on the Sustainable Development Goals and the Declaration of Astana on primary health care, the political declaration on UHC represents unprecedented commitment from all 193 UN Member States to a world in which no one misses out on essential health services simply because they cannot access or afford them.

Realising this vision, of course, will be no easy task. The latest edition of the Global Monitoring Report on UHC shows that on current trends, up to 5 billion

people will lack access to essential health services by 2030. And every year, about 930 million people are exposed to catastrophic health spending.

Reversing these trends will require a relentless focus on people-centred primary health care, with an emphasis on promoting health and preventing disease. It will also require robust partnership. There are now many more international actors in global health than there were when the World Health Organization was founded in 1948. This creates complexities and challenges, but it also represents a unique opportunity to leverage our collective strength to accelerate progress towards the health-related SDG targets.

At the invitation of Chancellor Angela Merkel of Germany, Prime Minister Erna Solberg of Germany and President Nana Akufo-Addo of Ghana, 12 multi-lateral health agencies have come together to launch the Global Action Plan for Healthy Lives and Well-Being for All, to

enhance our collaboration and turbocharge our impact. The initial commitment towards the Global Action Plan was launched at the World Health Summit in 2018 and the plan itself at the UN General Assembly in September 2019.

Together, we have committed to engage with countries to identify priorities, to accelerate progress through joint action in seven programmatic areas, to align our operational and financial strategies and policies, and to account for the results we deliver.

The 12 organizations that are signatories to the Action Plan are deeply aware that we cannot achieve its ambitions by ourselves. We need countries, communities and civil society, the private sector, academia, and other stakeholders and development partners to accelerate progress and increase the impact of our joint work through the next “decade of delivery” on the SDGs.

Now our focus must be on working together to implement the

plan in countries. Accordingly, the 12 agencies are focusing on identifying what countries want and how the agencies can work even more closely together to support countries, leading to accelerated impact on the health-related SDGs.

WHO also recognizes that we need to change to ensure we deliver the results the world expects of us. As part of our current transformation project, we have developed a new strategy, new operating model, new business processes, new culture and a new approach to partnership.

WHO is delighted to strengthen its collaboration with the World Health Summit, which is now one of the foremost gatherings in global health. It brings together heads of state, ministers from different sectors, Nobel prize winners, leading CEOs, academics, foundations and civil society. It recognizes the voices of youth and women and aims to increase the diversity that successful global health action requires.

I am proud to be a founding member of the World Health Summit steering committee, and am delighted to see the way it has grown in size and stature since 2009. I am equally proud, together with Chancellor Merkel, President Macron and President Juncker, to be its patron.



**Tedros Adhanom Ghebreyesus**

Director-General of the  
World Health Organization (WHO)

## WELCOME MESSAGE

### WORLD HEALTH SUMMIT PRESIDENTS



Ali Jafarian



Detlev Ganten

## WELCOME TO THE WORLD HEALTH SUMMIT 2019

When it comes to global health, each of us must act, but we can do very little alone. From climate change to noncommunicable diseases, basic research to universal health coverage, some of the biggest health challenges of our time affect people everywhere and require collaboration across borders. At the World Health Summit, voices from all over the world come together to do just that.

Improving health is something we can all agree on, and the World Health Summit is a platform where everyone pursuing this goal can exchange ideas freely. After a successful Regional Meeting in Iran, we look forward to carrying this momentum and spirit of international cooperation forward.

It's not just geographic borders we need to reach across. Every sector of society must be involved in creating a healthier future. Scientists, policymakers,

healthcare workers, businesses, and civil society must combine their expertise and coordinate resources. Together, we can expedite progress. We can ensure more people benefit from new and existing therapies, improved healthcare systems, and insights about social and environmental determinants of health.

Health is a human right, and is critical not only for SDG3, but central to all the Sustainable Development Goals. We welcome the prominent position that health topics have assumed on the the G7 and G20 agendas, and we are glad to see the World Health Organization receiving more support and other key organizations playing an increasingly coordinated role in supporting the United Nations in achieving these goals.

From ministers and international organizations to local actors and students, we are all here to take responsibility for shaping the future of the global health agenda. On behalf of the World Health Summit and our wonderful academic backbone, the M8 Alliance, we wish everyone fruitful discussions, meaningful insights, and strengthened collaborations for global health at the World Health Summit 2019 in Berlin.

**Ali Jafarian**

International President 2019  
World Health Summit

Former Chancellor Tehran  
University of Medical Sciences

**Detlev Ganten**

Founding President  
World Health Summit



Heyo Kroemer



Axel Radlach Pries

## DEAR WORLD HEALTH SUMMIT PARTICIPANTS,

We are delighted to welcome excellent minds from around the world to Berlin for the World Health Summit. One of Europe's largest university hospitals, Charité – Universitätsmedizin Berlin is dedicated to forward-looking science, quality education, and innovation in healthcare. Since it was founded at Charité in 2009, the World Health Summit has been a shining example of this ethos. Strengthening partnerships and working together—among institutions, across sectors, and across borders—is key to maximizing the impact of innovations in medicine and science.

As Berlin continues to grow as a global health hub, Charité can and must take on a pivotal role. The dedicated center Charité Global Health is part of that effort, expanding Charité's global health portfolio and fostering increased collaborations with national and international stakeholders.

Charité is proud to be part of the M8 Alliance, which serves as a foundation of academic excellence for the World Health Summit and provides a platform for year-round collaboration. Local partnerships too can be powerful tools for global health. This year, the Berlin University Alliance was awarded Germany's competitive "excellence" designation. Bringing together four Berlin universities, the alliance was created to overcome institutional and disciplinary boundaries and take on global challenges, including global health.

Charité has a responsibility to ensure world-class treatment through cutting-edge research, innovative therapies, and effective collaborations. The World Health Summit is not just an annual event—it is a forum that brings actors together from all over the world, making new and powerful partnerships like these possible.

On behalf of Charité, it is with great pleasure that we welcome you to the World Health Summit 2019. Enjoy the city of Berlin, productive discussions among colleagues from all over the world, diverse contributions, and new collaborations towards our noble goal: improving global health.

A handwritten signature in black ink, appearing to read 'Heyo Kroemer'.

**Heyo Kroemer**  
Chief Executive Officer  
Charité - Universitätsmedizin  
Berlin

A handwritten signature in black ink, appearing to read 'Axel Radlach Pries'.

**Axel Radlach Pries**  
Dean  
Charité - Universitätsmedizin  
Berlin

## ABOUT THE WORLD HEALTH SUMMIT



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### SCIENCE - INNOVATION - POLICIES

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The World Health Summit is one of the world's leading strategic forums for global health. Held annually in Berlin, it brings together leaders from politics, science and medicine, the private sector, and civil society to set the agenda for a healthier future. 300 speakers and 2,500 participants from 100 countries take part, including:

- Leading scientists and medical professionals
- Ministers and civil servants
- High-ranking officials at international organizations
- CEOs from industry and civil society
- Young professionals and students

#### Goals

The summit's mission is to improve health worldwide by:

- Bringing together all stakeholders
- Facilitating constructive exchange in an environment of academic freedom
- Finding answers to major health challenges
- Making global recommendations and setting health agendas

The World Health Summit was founded in 2009, on the occasion of the 300th anniversary of Charité.

[www.worldhealthsummit.org](http://www.worldhealthsummit.org)







The M8 Alliance is the academic foundation of the World Health Summit. A unique network of 25 leading international academic health centers, universities, and research institutions from 18 countries, it includes the InterAcademy partnership, which represents all national academies of medicine and science.

All M8 Alliance members are committed to improving global health and working with political and economic

decision-makers to develop science-based solutions to health challenges worldwide.

In addition to the annual World Health Summit in October, the M8 Alliance organizes a Regional Meeting each spring and various expert meetings in different parts of the world. The World Health Summit Regional Meeting 2020 will take place April 27–28 in Kampala, Uganda.



**Climate Change and Health**

Climate change poses an unquestionable threat to human health, affecting everyone on the planet and children in particular. There is an urgent need to translate existing evidence into policy actions and to produce new research to fill gaps in the knowledge base. This requires a One Health approach, considering climate change in all areas of policy development, and ensuring that health systems are prepared to face the challenges rising temperatures bring.

**Transforming Human Capital:  
Investing in Health and Education**

The UN high-level political declaration on UHC, adopted in September 2019, sets out a clear agenda on the attainment of SDG3. One of the major challenges identified in the declaration is how to accelerate investments in the health workforce to overcome the global shortages predicted by 2030, especially in countries with the weakest PHC systems and the furthest from UHC. This requires building the necessary foundations for PHC: investments in core infrastructure, both health facilities and preservice education institutions, and in health worker employment, retention and productivity. There is an emerging opportunity to link investments in education, skills and jobs in the health sector with the broader work of human capital and social spending, engaging the international financing institutions and all relevant partners as necessary.

**Universal Health Coverage:****Expanding Rights and Access**

SDG 3.8 envisions that by 2030, all people will be able to use health services of sufficient quality without facing financial hardship. Despite strong international support for universal health coverage (UHC), country-level financing and implementation remains challenging. Multi-sectoral approaches are key to generating political will for investment in UHC and driving appropriate reforms. Stronger accountability and advocacy are key to accelerating progress towards universal health coverage.

**Health is a Political Choice:  
The Future of Health Policy in the G7/G20  
and other Political Venues**

Healthcare has developed into a key national and international policy issue. The 2019 G20 in Osaka, Japan includes a meeting of health ministers on topics like health security and antimicrobial resistance, as well as a joint meeting of finance and health ministers. The health governance issues inherent in the Sustainable Development Goals have underlined how increasing financial and political commitments are central to solving global health challenges. The G7 will focus on issues of inequality, including access to health. Health also featured strongly at the 2019 UNGA and is part of the BRICS deliberations, and there is an opportunity to give health a higher profile in upcoming EU presidencies. These complementary agendas can support the SDG-approach to address current and future social, economic, and environmental challenges.

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**SDG3:****The Global Action Plan for Healthy Lives and Well-Being for All**

The success of the SDGs will be measured by their impact on the prosperity and well-being of people and the planet, particularly the extent to which they “leave no one behind.” Initiatives such as the Global Action Plan for Healthy Lives and Well-Being for All endeavor to build a foundation of greater cohesion among global health actors to support countries in their achievement of the SDGs. The action plan was launched at the World Health Summit 2018. The World Health Summit 2019 will include a report on its progress and the implementation challenges at hand.

**Focus Africa:****Building Capacities and Strong Institutions**

United Nations Member States have a shared commitment and a common interest in achieving the SDGs by 2030. This will require significant investment, innovation, and partnerships in Africa. Integrated approaches to health, development and security, consensus building, information sharing, and knowledge exchange will all be key. The African Union has made health one of its priorities, and there is increasing political commitment to investing in health in a number of African countries.

**Digital Health:****Shaping Society and the Modern Economy**

A growing, ageing global population will have a profound impact across the world. Health spending is predicted to rise to \$9.3 trillion by 2018. New technological developments are responding and increasingly blurring the boundaries between the physical, biological, and digital worlds. Technology aims to personalize medicine and tailor treatments to individual patients based on their genetic makeup. The digital revolution has the potential improve health and empower patients, but it could also increase health inequities and lead to new ethical challenges.

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## ENTREPRENEURS IN GLOBAL HEALTH

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**MONDAY, OCTOBER 28**  
**12:45 – 13:45**  
**SAAL 6 | EUROPE**

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A cooperation between the World Health Summit and the Charité BIH Entrepreneurship Summit, Entrepreneurs in Global Health brings local and international startups to the global health stage. See page 74 for session details.

In partnership with:

**STIFTUNG**  **CHARITÉ**

**BIH** Berlin Institute  
of Health  
Charité & MDC

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## NEW VOICES IN GLOBAL HEALTH

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**TUESDAY, OCTOBER 29**  
**12:30 – 14:00**  
**SAAL 5 | OCEANIA**

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The initiative New Voices in Global Health promotes the active participation of talented young researchers at the World Health Summit. Selected by the Global Young Academy, early-career scientists will present their work at the World Health Summit. See page 120 for session details.

In partnership with:







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PROGRAM

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**SUNDAY, OCTOBER 27**

PD 01

SAAL 6 | EUROPE  
11:00 – 12:30



PANEL DISCUSSION

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## GENDER EQUALITY WITHIN THE GLOBAL HEALTH WORKFORCE

Addressing Gender Equity to Strengthen Health for All

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HOST

**Women in Global Health**

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The health sector is a major employer of women globally. But although women comprise around 70% of the global health workforce they are largely clustered into lower status, lower paid sectors and jobs, with men holding the majority of senior roles. A large percentage of female health workers in low and middle-income countries particularly, work on insecure terms and conditions, without a supportive legal and social protection framework. Against the background of a global shortage of 18 million health workers needed to reach universal health coverage (UHC), addressing gender inequality in the health workforce will enable better use of talent and deployment of health workers, reduce attrition and generally strengthen health systems.

Significant political discussions are taking place in 2019 on the global health workforce at the September UN High Level Meeting on Universal Health Coverage, June G20 Meeting and August G7 Meet-

ing with opportunities to address the weaknesses in health systems identified in the WHO report “Global Health: Delivered by Women, Led by Men.”

The workshop will start with a plenary scene setting presentation by the WHO Goodwill Ambassador for the Health Workforce. This will be followed by a panel discussion answering the following questions:

- How strong are political commitments to address gender and equity in the health workforce?
- What will it take to get gender transformative policy change in the health workforce?

Following the panel, the audience will ask questions for discussion by the panel on how to address gender inequity within the health system, focusing on leveraging political commitments, practical solutions and actions.



**CHAIRS****Hélène Boisjoly**

Université de Montréal |  
Dean of Medicine |  
Canada

**Roopa Dhatt**

Women in Global Health |  
Executive Director |  
United States of America

**SPEAKERS****Epsy Campbell Barr**

Vice President |  
Costa Rica

**Mwenya Kasonde**

Women in Global Health |  
Gender Equality Hub Co-Chair |  
Zambia

**Caline Mattar**

Global Health Workforce Network |  
Youth Hub Chair |  
United States of America

**Charlotte Refsum**

KPMG International |  
Global Healthcare Executive |  
United Kingdom

**Christina Schrade**

SEEK Development |  
Managing Director |  
Germany

**Christiane Wiskow**

International Labour Office (ILO) |  
Senior Health Services Specialist |  
Switzerland



Epsy  
Campbell Barr



Caline  
Mattar



Hélène  
Boisjoly



Charlotte  
Refsum



Roopa  
Dhatt



Christina  
Schrade



Mwenya  
Kasonde



Christiane  
Wiskow

## PD 02

SAAL 10 | ASIA  
11:00 – 12:30

**M8Alliance**  
Academic Health Centers, Universities and National Academies

**THE GRADUATE  
INSTITUTE  
GENEVA**  
—  
INSTITUT DE HAUTES  
ETUDES INTERNATIONALES  
ET DU DEVELOPPEMENT  
GRADUATE INSTITUTE  
OF INTERNATIONAL AND  
DEVELOPMENT STUDIES

### PANEL DISCUSSION

## POLIO ERADICATION

Lessons for Global Health

### HOSTS

**M8 Alliance**

**The Graduate Institute Geneva – Global Health Center**

Beginning in 1988, the global effort to eradicate polio is the largest, longest and most expensive public health program in history. The current wind-down and eventual closure of the eradication effort has programmatic, financial and human impacts, particularly for the World Health Organization (WHO) and other countries where major 'polio assets', such as laboratories, skilled human resources, managerial and technical systems, have been established.

These assets have massive potential for supporting both the development and strengthening of national health systems. However, with polio eradication not yet achieved and diverging opinions concerning the timing and specific details of polio transition planning, a number of challenges remain to be addressed.

The Global Health Centre (GHC) at the Graduate Institute, Geneva, has undertaken a two-year study of the global polio eradication effort with a focus on political and governance dimensions and the roles of European actors. This session will present the results of the GHC study; provide the opportunity to reflect and debate on the lessons drawn; explore how these lessons can be best used for the benefit of national health systems and global health; and assess the wider implications for health governance.

**CHAIR****Stephen Matlin**

The Graduate Institute Geneva | Global Health Center | Senior Fellow | Switzerland

**SPEAKERS****Judith Diment**

Rotary International | Polio Eradication  
Advocacy Task Force | Member  
International Polio Plus Committee |  
United Kingdom

**Ilona Kickbusch**

The Graduate Institute of  
International and Development Studies |  
Global Health Center | Chair of the  
International Advisory Board |  
Switzerland

**Bernhard Schwartländer**

World Health Organization (WHO) |  
Chef de Cabinet |  
Switzerland

**Stephen Sosler**

Gavi, The Vaccine Alliance | Technical  
Advisor, Vaccine Implementation |  
Switzerland

**Darren Welch**

Department for International  
Development | Director of Policy |  
United Kingdom



Judith  
Diment



Bernhard  
Schwartländer



Ilona  
Kickbusch



Stephen  
Sosler



Stephen  
Matlin

## PD 03

SAAL 2 | AMERICA  
11:00 – 12:30



### PANEL DISCUSSION

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## ANTIMICROBIAL RESISTANCE

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### HOST

#### World Health Organization (WHO)

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The objective of this session is to review the progress made internationally in combatting antimicrobial resistance (AMR) and identify remaining challenges. The session will review the state-of-play of combatting AMR four years after the adoption of the Global Action Plan on AMR and following the report of the Interagency Coordination Group on Antimicrobial Resistance (IACG).

It will present and discuss

- the new international governance for AMR after the finalization of the IACG report,
- how to reinforce the one-health approach and effectively environmental aspects
- new initiatives in fostering the development of new antibacterial treatments and diagnostics

**CHAIR****Peter Beyer**

World Health Organization (WHO) | Senior Advisor | Switzerland

**SPEAKERS****Elmar Nimmegern**

Global AMR R&D Hub | Secretariat Lead |  
Germany

**Felicitas Riedl**

European Investment Bank |  
Life Sciences | Head of Division |  
Luxembourg

**Julia Spencer**

Merck Sharp & Dohme Corp. |  
Associate Vice President,  
Global Vaccines Public Policy |  
United States of America

**Lothar H. Wieler**

Robert Koch Institute | President |  
Germany



Peter  
Beyer

Julia  
Spencer



Elmar  
Nimmegern

Lothar H.  
Wieler



Felicitas  
Riedl

## WS 01

SAAL 4 | AFRICA  
11:00 – 12:30



### WORKSHOP

## NUTRITION AND NON-COMMUNICABLE, METABOLIC DISEASES IN SUB-SAHARAN AFRICA

### HOSTS

**German Institute of Human Nutrition Potsdam-Rehbrücke (DIfE)**

**Leibniz Institute for Prevention Research and Epidemiology (BIPS) Bremen**

Overnutrition and obesity are strongly increasing in low- and middle-income countries (LMICs), while undernutrition and infectious diseases continue to prevail in these regions. This development translates into the so-called double burden of malnutrition, fueling the worrying emergence of non-communicable diseases (NCDs) in LMICs. More specifically, cardio-metabolic diseases, including type 2 diabetes, hypertension, and cardio-vascular conditions are on the rise in LMICs. Rapid economic growth, urbanization and associated lifestyle changes are among the major causes for this development.

Particularly, the nutrition transition from plant-based, fiber-rich and low-fat diets towards manufactured foods with high contents of simple sugars and animal-

based products play a role. Cardio-metabolic diseases reduce life quality and increase mortality posing heavy burdens on the national health care systems. Therefore, primary prevention of obesity and its associated cardio-metabolic conditions considering cultural peculiarities is essential.

Due to the competing challenges of under- and overnutrition, only few countries in Sub-Saharan Africa have already implemented their own prevention programs. By using examples from Ghana and Zanzibar, the panel discussion will address how changes in eating behavior and lifestyle due to external economic and ecologic pressure challenge respective national health care systems.

**CHAIR****Wolfgang Ahrens**

Leibniz Institute for Prevention Research and Epidemiology (BIPS) Bremen |  
Deputy Scientific Director | Germany

**SPEAKERS****Ina Danquah**

German Institute of Human Nutrition  
Potsdam-Rehbrücke (DIfE) |  
Germany

**Antje Hebestreit**

Leibniz Institute for Prevention Research  
and Epidemiology (BIPS) Bremen |  
Head of Unit Lifestyle-Related Disorders |  
Germany

**Mansura M. Kassim**

Ministry of Agriculture of Natural  
Resources, Livestock and Fisheries |  
Deputy Principal Secretary |  
Zanzibar

**Ronald Miah**

Health Services Asante Akim North  
District | District Director |  
Ghana

**Kremlin Wickramasinghe**

World Health Organization |  
WHO European Office for the Prevention  
and Control of Noncommunicable  
Diseases | Technical Officer |  
Russia



Wolfgang  
Ahrens

Mansura M.  
Kassim



Ina  
Danquah

Ronald  
Miah



Antje  
Hebestreit

Kremlin  
Wickramasinghe

## WS 02

SAAL 5 | OCEANIA  
11:00 – 12:30



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### WORKSHOP

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## EUROPEAN INITIATIVES FOR HEALTH RESEARCH AND DEVELOPMENT

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### HOSTS

**BioMed Alliance**

**Charité – Universitätsmedizin Berlin**

**M8 Alliance**

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Europe leads in many areas of research and has developed powerful models of cross-border, cross-sectoral research cooperation. These have helped to increase the EU's attractiveness as a place for research and innovation, produced high-quality patents and created jobs and growth. The Scientific Panel for Health, one of the expert groups tasked by the Commission, has proposed the creation of a European Council for Health Research to provide a comprehensive policy for health research in Europe, and facilitate cross-border collaboration.

Global partnerships in health research create opportunities for enhanced learning, innovation and better health. Different models for participation, for data sharing and leadership co-exist. Through examples and stakeholders' debate, the session aims to explore needs and opportunities for future design of European health research and global partnerships.



**CHAIRS****Axel Pries**

BioMed Alliance | President |  
Belgium

Berlin Institute of Health (BIH) |  
Chairman of the Executive Board |  
Germany

**Karin R. Sipido**

KU Leuven | Professor of Medicine  
and Head of Experimental Cardiology |  
Belgium

**SPEAKERS****Gilles Bloch**

INSERM | Chairman and CEO |  
France

**Anne Bucher**

European Commission | Director-General  
for Health and Food Safety |  
France

**Alberto De Negri**

KPMG Italy | Head of Healthcare |  
Italy

**John P.A. Ioannidis**

Stanford Prevention Research Center |  
Director, Meta-Research Innovation  
Center at Stanford |  
United States of America

Einstein BIH Visiting Professor |  
Germany

**Britta Siegmund**

German Research Foundation (DFG) |  
Vice-President |  
Germany

**Päivi Sillanaukee**

Ministry of Social Affairs and Health |  
Permanent Secretary |  
Finland



Gilles  
Bloch

Axel  
Pries



Anne  
Bucher

Britta  
Siegmund



Alberto  
De Negri

Päivi  
Sillanaukee




John P. A.  
Ioannidis

Karin R.  
Sipido

## PD 04

SAAL 6 | EUROPE  
14:00 – 15:30



 EIT Health is supported by the EIT,  
a body of the European Union

### PANEL DISCUSSION

## THE ROLE OF AI IN HEALTHCARE INNOVATION

Ethical Challenges of AI Innovation

### HOST

**EIT Health (European Institute for Innovation and Technology)**

Numerous innovations that build on Artificial Intelligence and other technologies such as the internet of things and nanotechnologies are developing and already getting adopted in the health and care sectors. At the same time policy-makers internationally are under pressure to address ethical challenges raised by these technologies. Currently there is much focus on artificial intelligence. The European Commission's High-Level Group on Ethics and AI recently published their guidance. The incoming European Commission President Ursula von der Leyen intends to put forward AI legislation in the first 100 days of her mandate.

EIT Health has volunteered to put the EU's AI and ethics guidelines to the test. Utilising AI-related health innovation

projects as test cases and interrogating the potential practical utilization of these guidelines aims to identify how they can be implemented and where shortcomings exist. This is a first in examining the concrete application of these guidelines in a highly relevant sector. The world is closely following Europe's path into ethics and AI, in terms of guidance and law. Many are wondering whether this guidance will become as relevant internationally as Europe's General Data Protection Regulation for privacy.

Immediately after the panel session, EIT Health will host a media session with the participation of Jan-Philipp, Paul Timmers and Roberto Viola. We are expecting between 20 to 30 journalists to attend the session.

**CHAIR****Paul Timmers**

University of Oxford | Chief Advisor EIT Health | United Kingdom

European Policy Centre | Senior Advisor | United Kingdom

**SPEAKERS****Hila Azadzoy**

Ada Health GmbH |  
Managing Director,  
Global Health Initiatives |  
Germany

**Jan-Philipp Beck**

EIT Health | Chief Executive Officer |  
Germany

**Peter Dabrock**

German Ethics Council |  
Chair German Ethics Council |  
Germany

**Susanne Dehmel**

BITKOM |  
Managing Director Law and Security |  
Germany

**Hans Hofstraat**

Philips Research |  
Vice President Research |  
The Netherlands

**Roberto Viola**

European Commission |  
Director General of DG CONNECT  
(Directorate General of Communication,  
Networks, Content and Technology) |  
Belgium



Hila  
Azadzoy

Hans  
Hofstraat



Jan-Philipp  
Beck

Paul  
Timmers



Peter  
Dabrock

Roberto  
Viola



Susanne  
Dehmel

PD 05

SAAL 10 | ASIA  
14:00 – 15:30



PANEL DISCUSSION

SECURING POLITICAL LEADERSHIP  
FOR GLOBAL HEALTH TO  
ACCELERATE THE ELIMINATION  
OF COMMUNICABLE DISEASES

HOST  
UNITE

We are living a moment in history when we have most of the necessary tools and technologies needed to achieve these ambitious goals, along with the knowledge on where to continuously invest. Moreover, we have access to the intel provided by civil society and community-based organizations, mapping out the concrete needs of people living with communicable diseases across the globe and pointing the direction on how to end stigma and discrimination.

In this context, parliamentarians are called on to show their willingness to act and ensure the translation of global and regional political commitments and declarations into life-changing policies that can potentially lead to the elimination of these diseases as global health threats.

Within this globalized frame of political action, a continuous process of evidence-based training for and by parliamentarians is needed and this should be done at the global level. It is extremely important that parliamentarians around the globe, in a peer-to-peer approach, raise awareness, share information, good practices, lessons learned and sustainable policies.

Finally, it is equally important that this debate is aligned with the UN 2030 Sustainable Development Goals Agenda to assure that concrete actions to scale-up a human rights-based approach are followed.

**CHAIR**

**Ricardo Baptista Leite**

UNITE | Founder & President | Portugal

**KEYNOTE SPEAKER**

**Gunilla Carlsson**

UNAIDS | Executive Director a.i. | Switzerland

**SPEAKERS**

**Alan Donnelly**

The G20 Health and Development Partnership | Convener

Former UK MP & MEP | United Kingdom

**Christine Goffinet**

Berlin Institute of Health | BIH Professor for Virology | Germany

**Esther Passaris**

Kenya National Assembly | Member of Parliament, Nairobi City County | Kenya

UNITE | Member & Chapter Chair | Eastern and Southern Africa

**Jaak Peeters**

Johnson & Johnson | Head of Global Public Health (GPH) | United States of America



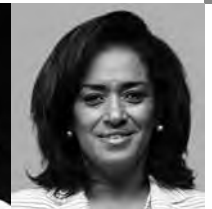
Ricardo Baptista Leite



Christine Goffinet



Gunilla Carlsson



Esther Passaris



Alan Donnelly



Jaak Peeters

**PD 06**

SAAL 2 | AMERICA  
14:00 – 15:30

PANEL DISCUSSION

**PROTECTING THE MENTAL HEALTH  
OF REFUGEES AND MIGRANTS**

Challenges and Possible Solutions

**HOSTS**

**Istanbul University**

**M8 Alliance**

**Sapienza University**

**Tehran University of Medical Sciences  
(TUMS)**

**University of Geneva**



More people are on the move now than ever before. There are an estimated 1 billion migrants in the world today of whom 258 million are international migrants and 763 million internal migrants—one in seven of the world's population. 65 million of the world's internal and international migrants are forcibly displaced today. This rapid increase of population movement has important public health implications, and therefore requires an adequate response from the health sector. Challenges to migrant health can be attributed to many factors, including lack of access to health services, absence of financial protection, and discrimination.

Mental health is a key and highly complex facet of migrant health challenges with multiple drivers and associated psycho-

logical conditions emerging at each phase of displacement and migration. In the first instance there may be traumatic events that occur in the country of origin and may have even led to the migration itself. Then the migrant may endure extreme environments, conditions or hardships throughout the migration journey itself, including extended stays in improvised camps with poor living conditions. Finally, there can be a whole host of challenges to face in the country of settling, a stage which perhaps least considered but most complex. Meanwhile, other challenges can be experienced at any and all stages, including stigma surrounding mental illness, access to good mental health care, continuity of appropriate psychological care, loss of loved ones, and the disconnect between

legal settlement status and care providers, which can result in an incomplete course of treatment.

Within this session the panel will discuss these challenges and the measures we can work towards to protect the mental health of migrants and refugees.

## CHAIRS

### Antoine Flahault

University of Geneva |  
Institute of Global Health | Director |  
Switzerland

### Luciano Saso

Sapienza University of Rome |  
Faculty of Pharmacy and Medicine |  
Vice-Rector for European  
University Networks |  
Italy

## SPEAKERS

### Selma Karabey

Istanbul University | Faculty of Medicine |  
Professor of Public Health |  
Turkey

### Miriam Orcutt

University College London |  
Senior Research Fellow |  
Lancet Migration | Executive Director |  
United Kingdom

### Santino Severoni

WHO Regional Office for Europe,  
Public Health and Migration |  
Division of Policy and Governance  
for Health and Well-being | Regional  
Coordinator Migration Health |  
Italy

### Joachim Seybold

Charité - Universitätsmedizin Berlin |  
Deputy Medical Director |  
Germany

### Amirhossein Takian

Tehran University of Medical Sciences |  
Department of Global Health &  
Public Policy | Chair and Professor |  
Iran



Antoine  
Flahault

Santino  
Severoni



Selma  
Karabey

Joachim  
Seybold



Miriam  
Orcutt

Amirhossein  
Takian



Luciano  
Saso

**WS 03**

SAAL 4 | AFRICA

14:00 – 15:30

**University of  
Zurich**<sup>UZH</sup>**PANEL DISCUSSION****EVOLUTIONARY MEDICINE**

Holistic Perspectives for the Future of Global Health

**HOST****University of Zurich**

Based on pioneering scientific concepts e.g., by Alexander von Humboldt (1769–1859) and Charles Darwin (1809–1882), the emerging field of evolutionary medicine promotes a holistic view on the etiology and ultimate causalities of human health and disease. Only by considering evolutionary and historic perspectives, is one able to design effective and sustainable global health policies for the future.

No single problem in biomedicine can be profoundly addressed without taking the most fundamental system of nature—evolution—into account. Technological breakthroughs such as next-generation sequencing allow us finally to generate the needed big data of the human past. Complex issues such as antibiotic resist-

ance, epidemiological transitions in disease and diet or the One Health initiative are in the core of this new field of research. Future challenges such as pandemics, climate change or socio-economic misery call for the translation of these holistic science into real interventions.

The aim of this workshop is to highlight and discuss the wide range of scientific and policy insights which can be gained by looking at our common past. Global health strategies without any knowledge on past and current evolutionary trends are doomed to fail; thus insights from the panel experts shall contribute specifically to novel factor analysis, to potential practical interventions and defining globally-relevant guidelines.



**CHAIR****Frank Rühli**

University of Zurich | Institute of Evolutionary Medicine, Faculty of Medicine |  
 Founding Director and Chair | Switzerland

**SPEAKERS****Patriciu Achimas-Cadariu**

The Oncology Institute |  
 “Prof. Dr. Ion Chiricuta” Cluj-Napoca |  
 Primary Physician in the Surgery  
 Department

Former Minister of Health |  
 Romania

**Maria S. Guevara**

Doctors Without Borders |  
 Senior Operational Positioning  
 and Advocacy Advisor |  
 Switzerland

**Martin Hirsch**

Ada Health GmbH | Co-Founder &  
 Chief Scientific Officer |  
 Germany

**Denise Kühnert**

Max Planck Institute for the  
 Science of Human History |  
 Transmission, Infection, Diversification &  
 Evolution Group (tide) | Group Leader |  
 Germany

**Barbara Natterson-Horowitz**

Harvard University | Department of  
 Human Evolutionary Biology |  
 Visiting Professor

UCLA Division of Cardiology |  
 Professor of Medicine at David Geffen  
 School of Medicine & Co-Director of  
 UCLA Evolutionary Medicine Program |  
 United States of America

**Randolph Nesse**

Arizona State University |  
 Center for Evolution and Medicine |  
 Founding Director |  
 United States of America



Patriciu  
 Achimas-Cadariu



Barbara  
 Natterson-Horowitz



Maria S.  
 Guevara



Randolph  
 Nesse



Martin  
 Hirsch



Frank  
 Rühli



Denise  
 Kühnert

## WS 04

SAAL 5 | OCEANIA  
14:00 – 15:30



Kiel University  
Christian-Albrechts-Universität zu Kiel



### WORKSHOP

## TRADITIONAL MEDICAL PRACTICES AND GLOBAL HEALTH

### HOSTS

**Kiel University**

**M8 Alliance**

The WHO lists a high number of conditions treated by acupuncture and related “traditional medical practices” that implicitly refer to three deadliest threats to global health today:

1. Currently, non-communicable diseases (NCDs, such as heart disease, stroke, cancer, chronic respiratory diseases and diabetes) are among the leading cause of mortality in the world.
2. At the same time, a growing number of infections—such as pneumonia, tuberculosis, gonorrhoea and salmonellosis—are becoming harder to treat as the antibiotics used to treat them become less effective. Antibiotic resistance leads to longer hospital stays, higher medical

costs and increased mortality is one of the biggest threats to global health, food security, and development today.

3. Due to the increasing misuse of prescription opioids and heroin, the prevalence of opioid addiction is rapidly increasing, physicians currently all over the world understandably have questions about whether, when, and how to prescribe opioid analgesics for chronic and acute pain without increasing public health risks.

This workshop will address the active role of culture in health care and the impact of traditional medicines in diagnosis, prevention and treatment of these three major threats in a very concrete sense.

**CHAIRS****Angelika Messner**

Kiel University | Head of China Centre |  
Germany

**Reinhard Schäfers**

World Health Summit | Ambassador |  
Germany

**SPEAKERS****Simon Barquera**

National Institute of Public Health (INSP) |  
Director, Nutrition Policy Research |  
Mexico

**Ama de-Graft Aikins**

University of Ghana |  
Dean of International Programmes |  
Ghana

**Depei Liu**

Chinese Academy of Medical Sciences  
(CAMS) & Peking Union Medical College  
(PUMC) | Former President |  
China

**David Napier**

University College London |  
Professor of Medical Anthropology |  
United Kingdom

**Yi-Chang Su**

Chinese Medical Advancement  
Foundation | President |  
Taiwan



Simon  
Barquera

David  
Napier



Ama  
de-Graft Aikins

Reinhard  
Schäfers



Depei  
Liu

Yi-Chang  
Su



Angelika  
Messner

PD 07

SAAL 6 | EUROPE  
16:00 – 17:30



PANEL DISCUSSION

## SUSTAINABILITY OF HEALTHCARE SYSTEMS

Closing the Gap of Immunization

HOST

**Sanofi**

The Sustainable Development Goals recognize the importance of vaccination as a key health and development factor. The immunization target: “Proportion of the target population covered by all vaccines included in their national Programme (3.b.1)” reflects the ability of a country to ensure access to vaccines and also to deliver them with high and equitable coverage. The UN High Level Meeting on Universal Health Coverage will restate that vaccination is an essential health service and that there is no sustainable healthcare system without full child immunization and life course immunization.

Still, coverage gaps are observed around the world, linked to the complexity of the implementation of vaccination strategies, to lack of investment as well as to vaccination hesitancy. The vaccination ecosystem is fragile: it involves multiple stakeholders who have to efficiently interact. Successful vaccination program at national levels

offer the opportunity to understand what works and potentially to adapt and replicate evidence-based practices, including on the adoption of innovative vaccines, technologies and digital solutions.

The event aims to:

- Discuss the outcomes of the 2019 UN High-Level Meeting on Universal Health Coverage (UHC) for greater action on immunization
- Discuss the investment case for vaccination and the broad benefit of life course immunization, in light of its contribution to sustainability of healthcare systems
- Highlight the fundamentals of boosting research & development and innovation in the vaccines field to tackle global health challenges
- Call to action to closing the immunization gap through multi-stakeholders' joined commitment

**CHAIR****Mark Chataway**

Hyderus | Managing Director | United Kingdom

**SPEAKERS****Anne Bucher**European Commission | Director-General  
for Health and Food Safety |  
Belgium**David Loew**Sanofi Pasteur | Executive Vice President |  
France**Julio Daniel Mazzoleni Insfrán**Minister of Health |  
Paraguay**JP Sevilla**Harvard T.H.Chan School of  
Public Health | Research Associate |  
United States of America**Soumya Swaminathan**World Health Organization (WHO) |  
Chief Scientist |  
Switzerland**Lothar H. Wieler**Robert Koch Institute | President |  
GermanyAnne  
BucherJP  
SevillaMark  
ChatawaySoumya  
SwaminathanDavid  
LoewLothar H.  
WielerJulio Daniel  
Mazzoleni Insfrán

**PD 08**

SAAL 10 | ASIA  
16:00 – 17:30

PANEL DISCUSSION

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## ACCELERATING INNOVATION FOR IMPACT

Linking Innovations, Implementers and Investments to Drive Progress Towards SDG3

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HOSTS

**German Health Alliance (GHA)**

**UNAIDS**



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Progress on the Sustainable Development Goals (SDGs) are uneven, and we are not moving fast enough to reach the ambitious 2030 goals. New technologies, service delivery models and financing solutions are essential to reach universal health coverage and other health related SDG-targets. Innovations can play a key role for leaving no one behind.

While innovations are already transforming the health, these do not always get adopted on scale to deliver impact. There is a disconnect between innovators and implementers that needs to be bridged. Leveraging innovations need the creation of linkages between innovations, technologies, country needs and investments. The AIDS response has demonstrated that a multisectoral response that puts communities at the center is critical for success. Closing the gap to Health for All

needs sustained partnership of communities, governments, innovators and the private sector that develop a shared commitment to leave no one behind.

This high-level panel will serve as a forum to explore what it takes to meaningfully create such linkages; how to build an environment where health innovations can flourish and be linked to the needs of countries. Panelists will highlight the importance of facilitating new cooperation models across countries and sectors. They will identify ways to break down common barriers to accelerate uptake of innovations and how to nurture sustainability of national ecosystems.

**CHAIR****Roland Göhde**

German Health Alliance (GHA) | Chairman of the Board | Germany

**SPEAKERS****Gunilla Carlsson**

UNAIDS | Executive Director a.i. |  
Switzerland

**Tanya Herfurth**

Young Leaders for Health &  
Global Health Hub Germany |  
Founding Board Member & Co-Chair  
of the Steering Committee |  
Germany

**Sonal Mehta**

India HIV/AIDS Alliance |  
Chief Executive |  
India

**Michael Oberreiter**

Roche | Head of Global Access |  
Switzerland

**Lia Tadesse**

State Minister of Health |  
Ethiopia



Gunilla  
Carlsson



Sonal  
Mehta



Roland  
Göhde



Michael  
Oberreiter



Tanya  
Herfurth



Lia  
Tadesse

## PD 09

SAAL 2 | AMERICA  
16:00 – 17:30



### PANEL DISCUSSION

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## RESPECT AND DIALOGUE

Overcoming Barriers Between Sectors, Disciplines, and Cultures

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### HOSTS

**InterAcademy Partnership (IAP)**

**M8 Alliance**

**Tehran University of Medical Sciences (TUMS)**

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Sustaining peace is the central aim of the Sustainable Development Goals (SDGs) and a necessary basis for all other SDGs, including “Good Health and Well-being.” The initiative “Respect and Dialogue” by the InterAcademy Partnership (IAP) intends to give science a stronger voice and take more responsibility in this regard.

Many global crises are born or grow deeper due to the lack of comprehension or limited interest and courage to reach out across borders. Using health as an entry point, the session will explore barriers—between sectors, disciplines and cultures—and how they can be overcome to achieve progress towards the SDGs.



**CHAIRS****Edelgard Bulmahn**

German Bundestag |  
Former Federal Minister and  
Former Vice President  
of the German Bundestag |  
Germany

**Roberto Francesco Monti**

Respect and Dialogue |  
Managing Director |  
Italy

**SPEAKERS****Rana A. Hajjeh**

World Health Organization (WHO) |  
WHO Regional Office for  
the Eastern Mediterranean |  
Director of Programme Management |  
Egypt

**Ali Jafarian**

Tehran University of Medical Sciences  
(TUMS) | Former Chancellor |  
Iran

World Health Summit |  
International President 2019

**Mohammad Hossein Nicknam**

Iranian Academy of Medical Sciences |  
Permanent Member |  
Iran

**Tolullah Oni**

University of Cambridge |  
MRC Epidemiology Unit |  
Clinical Senior Research Associate |  
United Kingdom

University of Cape Town |  
Honorary Associate Professor |  
South Africa



Edelgard  
Bulmahn

Roberto Francesco  
Monti



Rana A.  
Hajjeh

Mohammad Hossein  
Nicknam



Ali  
Jafarian

Tolullah  
Oni

## WS 05

SAAL 4 | AFRICA  
16:00 – 17:30

**vfa.** Die forschenden  
Pharma-Unternehmen

### WORKSHOP

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## FALSIFIED AND SUB-STANDARD MEDICINES

Detection, Prevention, and Response

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### HOST

**Association of Research-Based Pharmaceutical Companies (vfa)**

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Falsified and substandard medicines are a global problem that endangers the health and lives of patients. The WHO estimates that about ten percent of all medicines in low- and middle-income countries are falsified or substandard, and in some regions the situation is even much worse. High-quality medicines are essential to protect patients and prevent treatment failure. Risk reduction measures focus on identifying and eliminating falsified and substandard medicines in pharmaceutical markets.

The purpose of this session is to first give an overview and to analyse the scope of the global problem. Practical and locally appropriate options to reduce the risk of falsified and substandard medicines entering the market will then be identified and discussed between different stakeholder groups. Another focus is on measures to identify such medicines and ways to eliminate them.

**CHAIR****Lutz Heide**

University of Tübingen | Professor of Pharmaceutical Biology | Germany

**SPEAKERS****Peter Beyer**

World Health Organization (WHO) |  
Senior Advisor |  
Switzerland

**Alexandra Forster**

Bayer Healthcare |  
Head of Crime Defense |  
Germany

**Lutz Heide**

University of Tübingen |  
Professor of Pharmaceutical Biology |  
Germany

**Mirfin Mpundu**

Ecumenical Pharmaceutical  
Network (EPN) | Executive Director |  
Kenya

**Shushan Tedla**

action medeor |  
Quality Assurance and  
Pharmaceutical Consultancy |  
Germany



Peter  
Beyer



Mirfin  
Mpundu



Alexandra  
Forster



Shushan  
Tedla



Lutz  
Heide

## WS 06

SAAL 5 | OCEANIA  
16:00 – 17:30

**MDC** MAX DELBRÜCK CENTER  
FOR MOLECULAR MEDICINE  
BERLIN-BUCH  
MEMBER OF THE HELMHOLTZ ASSOCIATION

### WORKSHOP

## HOW MICROBIOMEDICAL RESEARCH IS CHANGING MEDICINE

### HOST

#### Max Delbrück Center for Molecular Medicine (MDC)

As we interact with our external environment, so do we with our internal environment. All mucosal surfaces, including intestines, mouth, airways, and urogenital tract, host complex microbial ecosystems. These microbiomes differ between but persist within individuals, establish early in life, and play crucial roles in processing nutrients, protecting from pathogens and priming the development of the immune system. Shared evolutionary history taught us to influence our microbiota, and our microbiota to influence us, including through immune and metabolite signaling.

Diet, stress, antibiotic exposure, infection, and other factors all can perturb the microbiota from a helpful eubiotic to harmful dysbiotic state. Dysbiosis contributes to complex diseases of the host, including metabolic, renal, cardiovascular, inflammatory, autoimmune, neurological, and psychiatric states, also along a “gut-brain axis.” Significant comorbidity between different progressive diseases, especially

with immune components and/or dietary risk factors, involve shared pathways impacted by the microbiota. Microbiomes act as asymptomatic reservoirs for opportunistic or antibiotic-resistant pathogens, causing symptomatic infectious disease when the right conditions (e.g. immunosuppression or antibiotic exposure) are met.

Thus, microbiome analysis offers tools for disease diagnosis and prognosis, personalizing nutrition and drug treatment, epidemiological monitoring, and risk assessment. Additionally, emerging therapeutics inspired by ancient practices draw on microbiota through prebiotic, probiotic and microbiome transplant techniques. As diet and lifestyle shift, “Western” diseases are quickly becoming global, threatening an enormous loss of healthy lifetime. This calls for better understanding of the microbiota and translating this understanding into healthcare and lifestyle advances in East and West, North, and South alike.

**CHAIRS****Peer Bork**

The European Molecular Biology Laboratory (EMBL) Heidelberg | Head of Unit, Senior Scientist and Strategic Head of Bioinformatics | Germany

**Sofia Forslund**

Max Delbrück Center for Molecular Medicine (MDC) | Forslund Lab | Group Leader | Germany

**SPEAKERS****Peer Bork**

The European Molecular Biology Laboratory (EMBL) Heidelberg | Head of Unit, Senior Scientist and Strategic Head of Bioinformatics | Germany

**Eran Elinav**

Weizmann Institute of Science | Department of Immunology | ElinavLab | Principal Investigator | Israel

**Stanley Hazen**

Cleveland Clinic | Department of Cardiovascular & Metabolic Sciences | Chair | United States of America

**Mayaan Levy**

University of Pennsylvania | UPENN Department of Microbiology | LevyLab | Principal Investigator | United States of America

**Stephan Patrick Rosshart**

University Medical Center Freiburg | Translational Microbiome Research and Gnotobiotic Mouse Facility | Principle Investigator and Group Leader | Germany

**Julie Segre**

National Human Genome Research Institute | Translational and Functional Genomics Branch | Chief and Senior Investigator National Human Genome Research Institute | Microbial Genomics Section | Head | United States of America



Peer Bork



Mayaan Levy



Sofia Forslund



Stephan Patrick Rosshart



Eran Elinav



Julie Segre



Stanley Hazen

## KEY 01

SAAL 1  
RUDOLF VIRCHOW  
18:00 - 19:30

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**M8 Alliance**  
Academic Health Centers, Universities and National Academies



### KEYNOTE

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## OPENING CEREMONY

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### HOSTS

**M8 Alliance**  
**World Health Summit**

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### CHAIR

**Detlev Ganten**  
World Health Summit | President | Germany

---

## SPEAKERS

**Jens Spahn**

Federal Minister of Health |  
Germany

**Christian Luft**

Federal Ministry  
of Education and Research |  
State Secretary |  
Germany

**Charles Ibingira**

Makerere University |  
University College of Health  
Sciences | Principal |  
Uganda

**Ali Jafarian**

Tehran University  
of Medical Sciences (TUMS) |  
Member Board of Trustees |  
Iran

**Heyo Kroemer**

Charité – Universitätsmedizin  
Berlin | CEO |  
Germany

**David Loew**

Sanofi Pasteur |  
Executive Vice President |  
France

**Bernd Montag**

Siemens Healthineers AG |  
President and CEO |  
Germany

**Sania Nishtar**

Benazir Income Support  
Programme (BISP) | Chairperson |  
Pakistan

**Tolullah Oni**

University of Cambridge |  
Senior Research Medical Officer |  
United Kingdom

University of Cape Town |  
Honorary Associate Professor |  
South Africa

**Andrea Wulf**

Author and Historian |  
Biographer of  
Alexander von Humboldt |  
United Kingdom



Detlev  
Ganten

Ali  
Jafarian

Sania  
Nishtar



Jens  
Spahn

Heyo  
Kroemer

Tolullah  
Oni



Christian  
Luft

David  
Loew

Andrea  
Wulf



Charles  
Ibingira

Bernd  
Montag

## OPENING CEREMONY AND RECEPTION

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SUNDAY, OCTOBER 27  
18:00

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PROGRAM

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**MONDAY, OCTOBER 28**

## PD 10

SAAL 6 | EUROPE  
9:00 – 10:30

## PANEL DISCUSSION

## UNIVERSAL HEALTH COVERAGE

Expanding Rights and Access

## HOSTS

Global Solutions Initiative

M8 Alliance

The Graduate Institute Geneva -  
Global Health Center

UHC2030

SDG 3.8 on universal health coverage (UHC) envisions that by 2030 all people can use the health services they need, of sufficient quality to be effective, and without facing financial hardship. Despite strong international support for UHC, country level financing and implementation remains challenging. Multi-sectoral approaches involving the whole of government and society are key to generate political will for investment in UHC and drive appropriate reforms.

Ensuring equitable access to universal health coverage has many dimensions. New models are emerging around the world which ensure inclusiveness by strengthening social participation. These include new mechanisms like people's health assemblies and other forms of participation that ensure citizens and patients voices in the setting of priorities.

The recognition of social participation is also reflected in the strong engagement of civil society in the UHC 2030 multi-stakeholder platform. Strengthening accountability and advocacy are central to accelerate progress towards universal health coverage.

The role for the private sector in achieving UHC remains subject to much debate. One reason stems from the multiple and complex processes implicated in achieving UHC. While the overarching aim of UHC is to ensure that everyone has access to affordable and quality health products and services regardless of background, in practice this requires strengthening health financing for and service provision of, an agreed package of basic health services across a broad population. Yet there remains no blueprint for how this might be accomplished.

**CHAIR****Ilona Kickbusch**

The Graduate Institute of International and Development Studies |  
Global Health Center | Chair of the International Advisory Board | Switzerland

UHC 2030 | Co-Chair

**SPEAKERS****Margaret Chan**

Boao Forum For Asia | President |  
Hong Kong

World Health Organization |  
Emeritus Director-General

**Carissa F. Etienne**

Pan American  
Health Organization (PAHO) |  
Director |  
United States of America

**Githinji Gitahi**

AMREF Health Africa Group |  
Global CEO & Director General |  
Kenya

UHC 2030 | Co-Chair

**Frederik Kristensen**

Coalition for Epidemic Preparedness  
Innovations (CEPI) | Deputy CEO |  
Norway

**Harald Nusser**

Novartis |  
Head of Novartis Social Business |  
Germany

**Dennis J. Snower**

Global Solutions Initiative |  
President |  
Germany



Margaret  
Chan



Frederik  
Kristensen



Carissa F.  
Etienne



Harald  
Nusser



Githinji  
Gitahi



Dennis J.  
Snower



Ilona  
Kickbusch

**PD 11**SAAL 10 | ASIA  
9:00 – 10:30

## PANEL DISCUSSION

**FROM WORDS TO ACTION:  
TRANSFORMING MENTAL HEALTH  
GLOBALLY**

## HOST

**Harvard Medical School**

Mental health problems affect us all. The massive unmet need for care, the abuses of fundamental rights of people with mental health problems, and the very low investment in mental health care nationally and through development assistance, are unacceptable. Quite simply, mental health is the orphan child of the health care system and all countries are developing when it comes to mental health. No country will achieve the aspirations of universal health coverage without addressing mental health, for health care cannot be universal without mental health.

Even as there is growing global and national political will to invest in mental health, several structural barriers impede

the likely impact of this historic opportunity to transform mental health globally, such as the limited leadership capacity; the lack of a workforce equipped with skills to deliver psychosocial interventions; the lack of accountability and metrics to evaluate the impact of mental health care systems; the rising burden of mental health problems in young people; and the limited agency and voice of persons with mental health problems.

This panel will engage stakeholders representing diverse sectors of society who need to act in concert to address these barriers and invite them to respond to how these barriers, and others which impede progress, need to be addressed to transform words into action.

**CHAIR**

**Vikram Patel**

Harvard Medical School | The Pershing Square Professor of Global Health |  
United States of America

**SPEAKERS**

**Devora Kestel**

World Health Organization (WHO) |  
Director of Mental Health and  
Substance Abuse |  
Switzerland

**Glen Moriarty**

7 Cups |  
Founder & Chief Executive Officer |  
United States of America

**Antonella Santucciono Chadha**

Roche Diagnostics | Global Medical  
Manager for Alzheimer’s Disease |  
Switzerland

Co-Founder and the CEO |  
Women’s Brain Project

**Charlene Sunkel**

Global Mental Health Peer Network |  
Chief Executive Officer |  
South Africa

**Miranda Wolpert**

Wellcome Trust |  
Head of Mental Health Priority Area |  
United Kingdom



Devora  
Kestel



Antonella  
Santucciono Chadha



Glen  
Moriarty



Charlene  
Sunkel



Vikram  
Patel



Miranda  
Wolpert

## PD 12

SAAL 2 | AMERICA  
9:00 – 10:30



### PANEL DISCUSSION

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## BRIDGING R&D AND SUSTAINABLE ACCESS TO ANTIBIOTICS

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### HOST

#### Global Antibiotic Research & Development Partnership (GARDP)

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Antimicrobial resistance (AMR) is a major global health and development issue and a threat to achieving the SDGs. One of the challenges is to ensure that patients across the world can benefit from new and existing antibiotics that are developed, made accessible and used appropriately. Tackling this challenge requires a holistic approach involving many players.

Access and stewardship considerations have to be an integral part of the R&D process from the beginning. The starting point should be public health driven target product profiles taking into account public health and patient needs. A major challenge is how to ensure that new treatments are accessible, affordable and appropriately used on a global level. While huge progress has been made in the R&D process, the access challenge remains largely unsolved.

Earlier this year, the Global Antibiotic Research and Development Partnership (GARDP) in collaboration with the World Health organization (WHO) and the Medicines Patent Pool (MPP) organized a technical meeting on bridging R&D and sustainable access of antibiotics. The meeting sought to understand the roles and responsibilities of different players including developers, regulators, governments and civil society. Building on the outcomes of the technical meeting this high level panel will explore practical solutions to questions such as:

1. What does sustainable access mean, who is responsible for which elements?
2. What are the fundamental elements R&D needs to consider to ensure access?
3. To bridge R&D and access, what interventions are needed at global and national levels, and who pays for it?

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**CHAIR**
**Imogen Foulkes**

BBC | Journalist | Switzerland

**SPEAKERS****Manica Balasegaram**

Global Antibiotic Research and Development Partnership (GARDP) | Executive Director | United Kingdom

**Peter Beyer**

World Health Organization (WHO) | Senior Advisor | Switzerland

**Thomas Cueni**

International Federation of Pharmaceutical Manufacturers &amp; Associations (IFPMA) | Director-General | Switzerland

**Mirfin Mpundu**

Ecumenical Pharmaceutical Network (EPN) &amp; ReAct Africa | Executive Director &amp; Head | Sweden

Manica  
BalasegaramImogen  
FoulkesPeter  
BeyerMirfin  
MpunduThomas  
Cueni

## WS 07

SAAL 4 | AFRICA  
9:00 – 10:30

**vfa.** Die forschenden  
Pharma-Unternehmen

EBERHARD KARLS  
UNIVERSITÄT  
TÜBINGEN

**DEUTSCHES  
NETZWERK**  
gegen vernachlässigte  
Tropenkrankheiten  
(DNTDs)

**DTG**

Universitätsklinikum  
Tübingen

### WORKSHOP

## NEGLECTED TROPICAL DISEASES AND INCLUSION UNDER THE UMBRELLA OF UNIVERSAL HEALTH COVERAGE

### HOSTS

**Association of Research-based Pharmaceutical Companies (vfa)**

**Eberhard-Karls-University Tuebingen**

**German Network against Neglected Tropical Diseases (DNTDs)**

**German Society for Tropical Medicine and International Health (DTG)**

**Universitätsklinikum Tuebingen**

Untreated, many neglected tropical diseases can lead to impairment and disability. 80 percent of people with disabilities are living in developing countries, they are among the poorest and most marginalized people. The Global Goals for Sustainable Development put a strong focus on equity and universal health coverage. Often health systems are not able to deal with diseases hitting the poorest layers in societies and for which cheap medication is available.

A key question is to ask how can UHC be utilized for the fight of NTDs and the benefit for people with disabilities. Important contributions could be the expansion of laboratory capacities and the support of health-related supply chains. The workshop would like to focus on multisectoral interventions.



**CHAIRS****Achim Hörauf**

Bonn University Medical Center |  
Institute of Medical Microbiology,  
Immunology and Parasitology | Director |  
Germany

**Carsten Köhler**

Institute for Tropical Medicine,  
Travel Medicine and Human Parasitology  
at the University and  
University Hospital of Tübingen |  
Center of Competence | Director |  
Germany

**SPEAKERS****Sahayarani Antony**

DAHW German Leprosy and  
Tuberculosis Relief Association |  
Department of Social Affairs |  
Inclusion Advisor |  
Germany

**Louise Kelly-Hope**

Liverpool School of Tropical Medicine |  
Centre for Neglected Tropical Diseases |  
Head of Monitoring and Evaluation  
Operational Research |  
United Kingdom

**Mwelecele Ntuli Malecela**

World Health Organization (WHO) |  
WHO Regional Office for Africa |  
Director of Department of Control  
of Neglected Tropical Diseases |  
Republic of the Congo

**Grace Mwasuka**

DAHW German Leprosy and  
Tuberculosis Relief Association |  
Tanzania

**Yao Sodahlon**

Mectizan Donation Program | Director |  
United States of America

**Kirsty Thompson**

CBM Australia | Strategic Advisor |  
Australia



Sahayarani  
Antony

Mwelecele Ntuli  
Malecela



Achim  
Hörauf

Grace  
Mwasuka



Louise  
Kelly-Hope

Yao  
Sodahlon



Carsten  
Köhler

Kirsty  
Thompson

## WS 08

SAAL 5 | OCEANIA  
9:00 – 10:30



### WORKSHOP

## CLIMATE CHANGE AND PUBLIC HEALTH

Environmental Threats, Challenges, and Solutions for the Next Generation

### HOSTS

**Charité - Universitätsmedizin Berlin**

**M8 Alliance**

**Potsdam Institute for  
Climate Impact Research**

**Stiftung Mercator**

Rising global temperatures are causing major physical, chemical, and ecological changes to the planet. Knowledge of these broad effects, known as “climate change,” has been present in academic circles for many years, and there is wide consensus among scientific organizations and climatologists that they are the result of human activity. The threats which climate change poses to human health, for current and future generations, has also been thoroughly analyzed and the necessity to act in the name of public health has been emphasized by medical associations and institutions.

Today, an unprecedented wave of global activism among the young population provides a new window of opportunity to move from science to action—but the question of how to get there is currently a matter of intense discussion. This work-

shop will take a look at the challenges which climate change poses to public health, and analyze what lessons can be learned from existing political initiatives in the area of environmental health. Considering the threats climate change poses to human health, safety, and security, children are a vulnerable group at particularly high risk. The WHO Initiative “Pollution Free Environment for Healthy Generations” has been working to preserve the social foundations of children’s mental and physical health, which are further threatened by the specter of far-reaching effects of unchecked climate change, including community and global instability, mass migrations, and increased conflict. Furthermore, non-communicable diseases have been reported to increase among children, and according to the Developmental Origins of Health and Disease (DOHaD) hypothesis, early life

environmental exposures are one of the possible causes.

Considering these threats of climate change and pollution to public health and looking for possible opportunities and solutions, transportation is a central issue. A move towards sustainable transport would not only help stop climate change, it would produce immediately noticeable effects such cleaner air, less noise, and

more physical activity. The public support generated by these short-term changes can become a driving force of long-term sustainability goals and have immediate impact upon our shared environment. Therefore, the workshop will take a look at the issue of transportation to further discuss possible ways to move from knowledge to solutions to political action.

## CHAIR

### Eckart von Hirschhausen

Physician, Comedian, and Scientist for Future | World Health Summit Ambassador | Germany

## SPEAKERS

### Sabine Gabrysch

Charité – Universitätsmedizin Berlin and Potsdam Institute for Climate Impact Research (PIK) | Professor for Climate Change and Health | Germany

### Andrew Haines

London School of Hygiene & Tropical Medicine (LSHTM) | Professor of Environmental Change and Public Health | United Kingdom

### Christian Hochfeld

Agora Verkehrswende | Executive Director | Germany

### Chisato Mori

Chiba University | Center for Preventive Medical Sciences | Director | Japan

### Maria Neira

World Health Organization (WHO) | Public Health, Environmental and Social Determinants of Health | Director | Switzerland



Sabine  
Gabrysch

Chisato  
Mori



Andrew  
Haines

Maria  
Neira



Christian  
Hochfeld

Eckart  
von Hirschhausen

## KEY 02

SAAL 1  
RUDOLF VIRCHOW  
11:00 – 12:30

**M8Alliance**  
Academic Health Centers, Universities and National Academies



### KEYNOTE

## TRANSFORMING HUMAN CAPITAL

Investing in Health and Education

### HOSTS

**M8 Alliance**

**National University of Singapore (NUS)**

The UN high-level political declaration on UHC, adopted in September 2019, sets out a clear agenda on the attainment of SDG3. One of the major challenges identified in the declaration is how to accelerate investments in the health workforce to overcome the global shortages predicted by 2030, especially in countries with the weakest PHC systems and the furthest from UHC. This requires building the necessary foundations for PHC: investments in core infrastructure, both health facilities and preservice education institutions, and in health worker employment, retention and productivity.

There is an emerging opportunity to link investments in education, skills, and jobs in the health sector with the broader work of human capital and social spending, engaging the international financing institutions and all relevant partners as necessary. Investing in jobs in the health sector will positively impact generations to come: contributing to improved population health and creating opportunities for millions of women and youth to be active participants in the labor market.

By linking health employment, human capital and social spending the world can accelerate more and better investments in people for greater health equity and economic growth.

**CHAIR**

**John Eu-Li Wong**

The National University Health System | Chief Executive | Singapore

**SPEAKERS**

**Mark Britnell**

KPMG |  
Global Chairman & Senior Partner |  
United Kingdom

**Jim Campbell**

World Health Organization (WHO) |  
Director, Health Workforce Department |  
Switzerland

**Tom Catena**

Aurora Humanitarian Initiative | Chair |  
Armenia

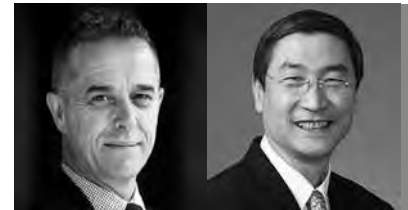
**Julie Lyn Hall**

International Federation of Red Cross  
and Red Crescent Societies (IFRC) |  
Chief of Staff | Director of the  
Office of the Secretary General |  
Special Advisor for Health |  
Switzerland



Mark  
Britnell

Julie Lyn  
Hall



Jim  
Campbell

John Eu-Li  
Wong



Tom  
Catena

## PD 13

SAAL 6 | EUROPE  
11:00 – 12:30



Federal Foreign Office



Federal Ministry  
of Defence



### PANEL DISCUSSION

## A COMPREHENSIVE APPROACH TO GLOBAL HEALTH AND SECURITY

The Example of the Current Ebola Outbreak, Health Crises in Armed Conflicts

### HOSTS

**German Federal Foreign Office**

**German Federal Ministry of Defense**

West Africa's Ebola pandemic five years ago taught the international community an important lesson in dos and don'ts of comprehensive health crisis management. It became clear that health crises encompass a security dimension—especially in fragile contexts, an upcoming health crisis can destabilize a country or a whole region. Assuming its responsibility in preventing and resolving health crises, Germany has been revising and adapting its health crises management ever since.

The Ebola outbreak in Eastern Congo is an example of the new challenges we are facing—a complex set of actors in a conflict situation, a variety of militias and armed groups with very different interests.

In the light of the current Ebola outbreak the panelists will discuss German health crises management from their different

perspectives. How are the humanitarian aid response and the security sector intertwined? What are the challenges NGOs are facing on the ground? What is the role and interest of different actors?

Nowadays it is with no doubt, that such complex emergencies demand comprehensive crises management—in assessment, evaluation, and implementation. But when it comes to concrete action, what are the limits of a comprehensive approach towards health crises? How to interact with different actors?

The panel aims at raising awareness for the security dimension of health crises/disease outbreaks in fragile contexts and seeks to improve the understanding for different perspectives on comprehensive health crises response and preparedness.

**CHAIR****Carlo Masala**

Bundeswehr University Munich | Director of the Pilot Project Metis | Germany

**SPEAKERS****Jane Ruth Aceng**

Minister of Health |  
Uganda

**Susanne Baumann**

Federal Foreign Office |  
Federal Government Commissioner  
for Disarmament and Arms Control |  
Director-General for International Order,  
the United Nations and Arms Control |  
Germany

**Ruxandra Draghia**

Merck Sharp & Dohme Corp. |  
Vice President Public Health &  
Scientific Affairs, Global Vaccines |  
United States of America

**Hans-Ulrich Holtherm**

Medical Academy of the German Armed  
Forces | Director of Military Medicine  
Science and Capability Development |  
Germany

**Michael Ryan**

World Health Organization (WHO) |  
Health Emergencies Programme |  
Executive Director |  
Switzerland

**Mercedes Tatay**

Doctors Without Borders |  
International Medical Secretary |  
Switzerland



Jane Ruth  
Aceng



Carlo  
Masala



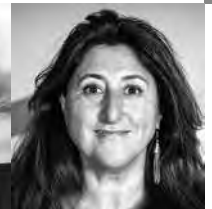
Susanne  
Baumann



Michael  
Ryan



Ruxandra  
Draghia



Mercedes  
Tatay



Hans-Ulrich  
Holtherm

## WS 09

SAAL 4 | AFRICA  
11:00 – 12:30



### WORKSHOP

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## HOW TO ENSURE SUSTAINABLE ELIMINATION OF NTDs

A Focus on Sleeping Sickness

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### HOSTS

**Drugs for Neglected Diseases initiative (DNDi)**

**Sanofi**

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Neglected Tropical Diseases (NTDs) affect more than one billion people and cost developing economies billions of dollars every year. Bold and concerted action is needed to alleviate the burden of these diseases of poverty. In 2011, the WHO Strategic and Technical Advisory Group for Neglected Tropical Diseases and partners adopted a roadmap for control, elimination, and eradication.

No one organization, government, or company can do it alone. To realize the vision of this roadmap, 13 bio-pharmaceutical companies, under the leadership of WHO, joined their efforts with the Bill and Melinda Gates Foundation and numerous partners. Together they signed the London Declaration, the largest coordinated effort to date for stronger commitment, better coordination and strengthened collaboration.

Effective control can be achieved when selected public health approaches are combined and delivered locally. Implementation of appropriate measures with high coverage contribute to achieving the targets of the WHO NTD roadmap on neglected tropical diseases, resulting in the elimination of many and the eradication of at least two by 2020. This might be the case for sleeping sickness.

However, we must be vigilant: a lower number of cases poses a challenge to the way the disease has to be tackled. Last cases are the most difficult to reach; priority shifts to other diseases; donors' "fatigue" can be observed. To avoid risk of rebound and reach sustainable elimination, it is essential to further invest while ensuring optimal use of resources, to explore and implement innovative strategies, including for sentinel case management, to shift towards stronger local accountability.



**CHAIR****Samantha Bolton**

Communication and Advocacy Advisor | Switzerland

**SPEAKERS****Luc Kuykens**

Sanofi | Senior Vice President  
Global Health Programs |  
United States of America

**Estrella Lasry**

Doctors Without Borders |  
Tropical Disease Advisor |  
Spain

**Veerle Lejon**

Research Institute  
for Development (IRD) |  
Research Director |  
France

**Mwelecele Ntuli Malecela**

World Health Organization (WHO) |  
WHO Regional Office for Africa |  
Director of Department of Control  
of Neglected Tropical Diseases |  
Republic of the Congo

**Erick Mwamba Miaka**

Ministry of Health | Program Director |  
Democratic Republic of the Congo

**Nathalie Strub-Wourgaft**

Drugs for Neglected Diseases  
initiative (DNDi) |  
Director of Neglected Tropical Diseases |  
Switzerland



Luc  
Kuykens

Mwelecele Ntuli  
Malecela



Estrella  
Lasry

Nathalie  
Strub-Wourgaft



Veerle  
Lejon

## WS 10

SAAL 5 | OCEANIA  
11:00 – 12:30



Federal Ministry  
of Education  
and Research



UiO : Faculty of Medicine  
University of Oslo

UiO : Global Health

### WORKSHOP

## THE SDG3 GLOBAL ACTION PLAN FOR HEALTH AND WELLBEING

Are We Ready for a Change in Mindset—One Health as an Accelerator

### HOSTS

**German Federal Ministry of Education and Research (BMBWF)**

**Lancet Commission on One Health**

In 2018, the heads of three governments, Germany, Norway, and Ghana, got together to launch the Global Action Plan for SDG3, which included an appeal to the Director-General of the World Health Organization (WHO), Dr. Tedros Adhanom Ghebreyesus and other key stakeholders to rally behind it. In Berlin, at the World Health Summit 2018, ten United Nations' organizations active in global health, with WHO as the lead, took up the challenge and expressed assurance of their full commitment to the Global Action Plan for SDG3. In the same session at the World Health Summit 2018, a framework for this Action Plan was presented by Dr. Tedros identifying accelerators, e.g. sustainable financing, primary health care, R&D, innovation and access. The Director-General of WHO stated the following: "Global coordination is good, but we also need coordination at the country level: unity amongst partners to support

countries according to their priorities." He called upon stakeholders to stop thinking in silos, and he continued by saying; "The letter I received asks for more than a new strategy. It demands a change in mindset."

Along the lines of Dr. Tedros, the Lancet One Health Commission would like to continue with tangible action on the call for a change in mindset by harnessing the long-standing and continued collaboration in global health between Germany, Norway, and Ghana. We ask for the involvement and leadership of these three countries and beyond in the current Lancet One Health Commission, which, at its core, calls for multi-disciplinarity; a radical change in mindset. We will explore at various levels from grassroot to ministerial whether One Health has the potential of becoming an accelerator to the Global Action Plan.

## CHAIRS

**John Amuasi**

Lancet Commission  
on One Health | Co-Chair |  
Ghana

**Andrea Winkler**

Lancet Commission  
on One Health | Co-Chair |  
Germany

## SPEAKERS

**Kwaku Agyeman-Manu**

Minister of Health |  
Ghana

**Hélène Carabin**

Université de Montréal |  
Canada Research Chair in  
Epidemiology and One Health |  
Canada

**Wendy Harrison**

Schistosomiasis Control  
Initiative - SCI Foundation |  
Chief Executive Officer |  
United Kingdom

**Maria Jahrmann Bjerke**

Ministry of Health and Care  
Services | State Secretary |  
Norway

**Anthony Nsiah Asare**

Ghana Health Service |  
Director General |  
Ghana

**Bernhard Schwartländer**

World Health Organization  
(WHO) | Chief of Staff |  
Switzerland

**Camilla Stoltenberg**

Norwegian Institute of  
Public Health | Director General |  
Norway

**Lothar H. Wieler**

Robert Koch Institute |  
President |  
Germany



Kwaku  
Agyeman-Manu

Maria  
Jahrmann Bjerke

Lothar H.  
Wieler



John  
Amuasi

Anthony  
Nsiah Asare

Andrea  
Winkler



Hélène  
Carabin

Bernhard  
Schwartländer



Wendy  
Harrison

Camilla  
Stoltenberg

**PD 13a**

SAAL 6 | EUROPE  
12:45 – 13:45

**PANEL DISCUSSION**

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**ENTREPRENEURS IN  
GLOBAL HEALTH PRESENTATION**

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From **12:45 – 13:45**, startups will showcase innovative ideas, with short presentations followed by audience Q&A.

In partnership with Stiftung Charité and the Charité BIH Entrepreneurship Summit.

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STIFTUNG CHARITÉ

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**CHAIR**

**Daniel Trattler**

Eobiont GmbH | Creative Director | Germany

**SPEAKERS**

**Massimo Bocchi**

Cellply s.r.l. |  
CEO and Co-Founder at CellPly |  
Italy

**Janna Hachmann**

Captain T Cell |  
Business Development Manager |  
Germany

**Maria Levin**

Neteera | Director of Business  
Development & Marketing |  
Israel

**Falk Schwendicke**

DentalXr.ai |  
Chief Medical Officer  
  
Charité University Hospital |  
Operative and Preventive Dentistry |  
Deputy Director of Department |  
Germany

**Verena Schöwel**

MyoPax |  
Research Fellow and Physician |  
Germany



Massimo  
Bocchi

Falk  
Schwendicke



Janna  
Hachmann

Verena  
Schöwel



Maria  
Levin

Daniel  
Trattler

## WS 10a

SAAL 5 | OCEANIA  
12:30 – 14:00



UiO : **Faculty of Medicine**  
University of Oslo

UiO : **Global Health**

### WORKSHOP

## THE ONE HEALTH CONCEPT

On a Consensus Seeking Mission

### HOST

**Lancet Commission on One Health**

The One Health approach aims at demonstrating the synergistic benefit and added value of an integrated approach to human and animal health as well as environmental science, thereby dismantling the disciplinary silos which continue to persist, for the benefit of the ecosystems that support human, animal, and plant life. One Health is closely aligned with the Sustainable Development Goals and is intrinsically inter- and trans-disciplinary. In an inter-dependent world, health sector actors are less likely to achieve their goals without efficient multi-disciplinary collaboration.

Global health threats such as climate change, emerging infectious disease epidemics, neglected diseases of poverty, antimicrobial resistance, non-communicable diseases, in addition to food security and nutrition, require coordinated action across multiple disciplines. One Health policies and programs involve both public

and private sectors, research institutions and governments, to implement effective solutions to complex issues of global concern. A One Health approach is necessary to inform a coordinated response to the aforementioned health threats.

The two chairs for the session are on a consensus seeking mission by exploring a) the prevailing views on One Health, b) the notion of paradigm shift in One Health and c) the approach towards translating the One Health concept into politics and society. They will invite panelists from the various components of One Health to engage in a thought-provoking discussion. Output from the panel discussion will feed into the current Lancet One Health Commission.

## CHAIRS

**John Amuasi**

Lancet Commission  
on One Health | Co-Chair |  
Ghana

**Andrea Winkler**

Lancet Commission  
on One Health | Co-Chair |  
Germany

## SPEAKERS

**Timo Falkenberg**

Center for Development Research |  
Coordinator One Health Graduate School |  
Germany

**Kim Grützmacher**

Wildlife Conservation Society |  
Wildlife Health Program |  
Program Manager |  
United States of America

**Jürgen May**

Bernhard Nocht Institute  
for Tropical Medicine |  
Head of the Department of  
Infection Epidemiology |  
Germany

**Barbara Natterson-Horowitz**

Harvard University |  
Department of Human Evolutionary  
Biology | Visiting Professor

UCLA Division of Cardiology |  
Professor of Medicine at David Geffen  
School of Medicine & Co-Director of  
UCLA Evolutionary Medicine Program |  
United States of America

**Chris Walzer**

Wildlife Conservation Society |  
Wildlife Health Program |  
Executive Director |  
United States of America

**Jakob Zinsstag-Klopfenstein**

Swiss Tropical and  
Public Health Institute (TPH) |  
Deputy Head of the Department  
of Epidemiology and Public Health |  
Switzerland



John  
Amuasi

Barbara  
Natterson-Horowitz



Timo  
Falkenberg

Chris  
Walzer



Kim  
Grützmacher

Andrea  
Winkler



Jürgen  
May

Jakob Zinsstag-  
Klopfenstein

**KEY 03**

SAAL 1  
RUDOLF VIRCHOW  
14:00 – 15:30

**M8 Alliance**  
Academic Health Centers, Universities and National Academies



**MAKERERE UNIVERSITY**

**KEYNOTE****FOCUS AFRICA**

Building Capacities and Strong Institutions

**HOSTS**

**M8 Alliance**

**Makerere University**

United Nations Member States have a shared commitment and a common interest in achieving the Sustainable Development Goals by 2030. Achieving this will require significant investment, innovation and partnerships in Africa. It will benefit from integrated approaches to health, development and security, as well as consensus-building, information sharing and knowledge exchange.

The African Union has made health one of its priorities and we see increasing

political commitment to invest in health in a number of African countries. New institutions have been built—such as the African Centers for Disease Control—and primary health care is in the focus. There are new initiatives to support African-led innovation coalitions and innovative funding platforms and to strengthen research institutions. This requires additional investments in science, technology, and innovation in Africa to improve health, spur economic growth, and reduce poverty across the continent.



**CHAIR****Charles Ibingira**

Makerere University | University College of Health Sciences | Principal | Uganda

**SPEAKERS****Jane Ruth Aceng**

Minister of Health |  
Uganda

**Kwaku Agyeman-Manu**

Minister of Health |  
Ghana

**Thomas Cueni**

International Federation of Pharma-  
ceutical Manufacturers & Associations  
(IFPMA) | Director-General |  
Switzerland

**Maria Flachsbarth**

Federal Ministry for Economic  
Cooperation and Development (BMZ) |  
Parliamentary State Secretary |  
Germany

**Jayasree K. Iyer**

Access to Medicine Foundation |  
Executive Director |  
The Netherlands



Jane Ruth  
Aceng



Maria  
Flachsbarth



Kwaku  
Agyeman-Manu



Charles  
Ibingira



Thomas  
Cueni



Jayasree K.  
Iyer

## PD 14

SAAL 6 | EUROPE  
14:00 – 15:30



### PANEL DISCUSSION

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## ARTIFICIAL INTELLIGENCE FOR HEALTH

How to Ensure Quality?

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### HOSTS

**Berlin Institute of Health (BIH)**

**Fraunhofer Heinrich-Hertz-Institut**

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This session includes representatives of universities, research institutes, multinational corporations, federal agencies, non-profit organizations, and intergovernmental bodies (ITU/WHO FG-AI4H),

which are based on several continents. Despite these differences, all participants in the session share a common goal: ensuring that AI solutions for health are safe for patient use.

**CHAIR**

**Thomas Wiegand**

Fraunhofer Heinrich-Hertz-Institute | Executive Director | Germany

ITU/WHO Focus Group on “AI for Health” (FG-AI4H) | Chair

**SPEAKERS**

**Khair ElZarrad**

FDA’s Center for Drug Evaluation and Research (CDER) | Deputy Director of the Office of Medical Policy (OMP) | United States of America

**Stefan Germann**

Fondation Botnar | Chief Executive Officer | Switzerland

**Naomi Lee**

The Lancet | Executive Editor (Digital) | United Kingdom

**Bernd Montag**

Siemens Healthineers | President and CEO | Germany

**Soumya Swaminathan**

World Health Organization (WHO) | Chief Scientist | Switzerland

**Christof von Kalle**

Berlin Institute of Health (BIH) | Chair for Clinical Translational Sciences | Germany



Khair ElZarrad

Soumya Swaminathan



Stefan Germann

Christof von Kalle



Naomi Lee

Thomas Wiegand



Bernd Montag

## WS 11

SAAL 4 | AFRICA  
14:00 – 15:30



### WORKSHOP

## HOW CAN HEALTH INSURANCE SCHEMES HELP TO DEVELOP SUSTAINABLE HEALTH SYSTEMS IN THE BRICS COUNTRIES?

Looking for Sustainable Health Systems

### HOST

**Manipal Academy of Higher Education**

The (BRICS) countries Brazil, Russia, India, China, and South Africa share similar problems regarding the foundation of sustainable health (care) systems even if their economic and political systems often do not develop in parallel. The BRICS countries already work together in different health organizations like the World Health Organization (WHO). The start of an own development bank (The new Development Bank) now offers new ways in cooperation. Recent political developments like the start of the world biggest health insurance schema in India—often called Modi-Care—and South Africa being under new management open new windows of opportunities.

The session has two aims: First, to inform about the concept of BRICS, the health status and the recent health care reforms in those countries. Second, to foster a discussion about the different possibilities and approaches to move to sustainable health systems in the BRICS countries by means of health insurance schemes. A point of discussion will also be how this can contribute to reach the Sustainable Development Goals (SDGs) in these countries.

**CHAIR****Helmut Brand**

Prasanna School of Public Health, Manipal | Founding Director | India

**SPEAKERS****Harsh Bhardwaj**

Public Policy Research Centre (PPRC) |  
Research Associate Research Associate |  
India

**Theuns Botha**

MediCoop CFI | Managing Director  
Former Health Minister of Western Cape |  
South Africa

**Qiao Jianrong**

World Health Organization |  
China Representative Office |  
Coordinator, Health Systems and  
Health Security |  
China

**Alicia Matijasevich Manitto**

University of São Paulo |  
Department of Preventive Medicine,  
Faculty of Medicine | Associate Professor |  
Brazil

**Alexey Morozov**

Voronezh State Medical University  
N.N. Burdenko |  
Head of the Department for Education,  
International Affairs, and Public Relations |  
Russia

**Hélène Rossouw**

Spear Health Foundation | CEO |  
South Africa



Theuns  
Botha



Alicia  
Matijasevich Manitto



Qiao  
Jianrong



Alexey  
Morozov



Helmut  
Brand



Hélène  
Rossouw

## WS 12

SAAL 5 | OCEANIA  
14:00 – 15:30

**HZI** HELMHOLTZ  
Centre for Infection Research

### WORKSHOP

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## PRIORITIZING INFECTIOUS DISEASES FOR SURVEILLANCE IN AFRICA

Revisiting Integrated Disease Surveillance and Response (IDSR)

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### HOST

**Helmholtz Centre for Infection Research (HZI)**

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In 1998, the World Health Organization Regional Office for Africa (WHO/AFRO) adopted the Integrated Disease Surveillance and Response (IDSR). Currently, this strategy is under revision in order to adjust for new developments, including advancements in infectious disease research, changes in the burden of specific diseases, recent experience with Ebola epidemics as well as the increasing availability of new digital technologies.

The objective of this workshop is to revisit the criteria and procedures applied to assign a specific surveillance method to a specific disease with a strong focus on the African setting and recent advances of eHealth applications for surveillance.

Such a revision facilitates the process of updating the list of diseases under surveillance in the African context of the IDSR and contributes to the advancement of the topic of surveillance tool allocation to a certain disease.

The findings of this workshop shall set the basis for the development of a generic concept that will allow countries and regions on any continent to prioritize diseases for surveillance and also to identify the most appropriate surveillance system for each of them, thereby providing an evidence-based, reproducible and localizable process that also supports and complements the current revision of the IDSR.

## CHAIRS

**Olúṣọlá Aruna**

Public Health England |  
Senior Public Health Advisor |  
United Kingdom

**Gérard Krause**

Helmholtz Centre for Infection  
Research (HZI) | Head of  
Department for Epidemiology |  
Germany

## SPEAKERS

**Olawunmi Adeoye**

Nigeria Centre for Disease Control |  
Nigeria

**Justus Benzler**

Robert Koch Institute |  
Epidemiological Advisor to the  
German Electronic Notification,  
Reporting and Information System  
for Infectious Disease Control |  
Germany

**Natalia Margarita Cediel Becerra**

De La Salle University |  
Lecturer and Researcher |  
Colombia

**Maria da Luz de Lima Mendonça**

National Institute of Public Health  
of Cape Verde | President |  
Cape Verde

**Mazala Kapina**

Zambia National Public Health  
Institute | Head Surveillance  
and Disease Intelligence |  
Zambia

**Peter Nsubuga**

Global Public Health Solutions |  
Medical Epidemiologist |  
United States of America

**Michael Ryan**

World Health Organization  
(WHO) | Health Emergencies  
Programme | Executive Director |  
Switzerland

**Ambrose Otau Talisuna**

World Health Organization  
(WHO) | Regional Office  
for Africa | Advisor, IHR &  
Global Health Security |  
Republic of the Congo

**Anders Wallensten**

Public Health Agency of Sweden |  
Deputy State Epidemiologist |  
Sweden



Olawunmi  
Adeoye



Maria da Luz  
de Lima Mendonça



Ambrose Otau  
Talisuna



Olúṣọlá  
Aruna



Mazala  
Kapina



Anders  
Wallensten



Justus  
Benzler



Peter  
Nsubuga



Natalia Margarita  
Cediel Becerra



Michael  
Ryan

## PD 15

SAAL 6 | EUROPE  
16:00 – 17:30



### PANEL DISCUSSION

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## ACCESS TO MEDICINES

The Role of Partnerships in Finding Solutions

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### HOST

**International Federation of Pharmaceutical Manufacturers & Associations (IFPMA)**

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SDG 3 seeks to ensure healthy lives and promote well-being for all, and SDG 17 seeks strengthening global partnerships between public, private, and government agencies as an essential ingredient in ensuring a brighter and healthier future.

So how are public-private partnerships meeting these goals both for innovation and access? What are the key features of “innovative business models” and how do these models and the cooperation with the private sector and other stakeholders meet expectations? What can we

do to ensure both innovation and access especially for essential and neglected treatments? How do communities see these partnerships?

A panel of leaders of public health partnerships from differing treatment fields and with different business models have been brought together to discuss these challenges and seek to explain how their partnerships are making real impact in achieving SDGs especially in developing countries.



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**CHAIR****Greg Perry**

International Federation of Pharmaceutical Manufacturers & Associations (IFPMA) |  
Assistant Director General | Switzerland

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**KEYNOTE SPEAKER****Eva Njenga**

NCD Alliance of Kenya | Chair | Kenya

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**SPEAKERS****Cary Adams**

Union for International Cancer Control  
(UICC) | Chief Executive Officer |  
Switzerland

**Manica Balasegaram**

Global Antibiotic Research and  
Development Partnership (GARDP) |  
Executive Director |  
United Kingdom

**Martin Bernhardt**

Sanofi |  
General Medicines & Emerging Markets |  
Head of Global Public Affairs |  
Switzerland

**Catharina Boehme**

Foundation for Innovative  
New Diagnostics (FIND) | CEO |  
Switzerland

**Thoko Elphick-Pooley**

Uniting to Combat NTDs | Director |  
United Kingdom



Cary  
Adams

Thoko  
Elphick-Pooley



Manica  
Balasegaram

Eva  
Njenga



Martin  
Bernhardt

Greg  
Perry



Catharina  
Boehme

**PD 16**

SAAL 10 | ASIA  
16:00 – 17:30



**ottobock.**

**Milken Institute School  
of Public Health**  
THE GEORGE WASHINGTON UNIVERSITY

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**PANEL DISCUSSION**


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## SMART INVESTMENT IN EQUITABLE HEALTH SYSTEMS

At the Intersection of Science and Policy

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**HOSTS**

**ATscale – Global Partnership for Assistive Technology**

**Ottobock SE & Co. KgaA**

**The George Washington University, Milken Institute School of Public Health**

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The world has never possessed such a sophisticated arsenal of interventions and technologies for curing disease and prolonging life. Yet the gaps in health outcomes continue to widen. For much of the ill health, disease, premature death, and suffering we see on such a large scale effective and affordable interventions are available for prevention and treatment. The power of existing interventions is not matched by the capacity of health systems to deliver them to those in greatest need, in a comprehensive way, and on an adequate scale.

Smart investments and efficient health system development must be the center piece of health policies and financing. It is time to evaluate both the performance of health systems to serve those most in need, especially in low and middle income countries, but also explore how best to support them in the future. This panel will discuss these issues in a frank and provocative way.

**CHAIR**

**Adnan A. Hyder**

The George Washington University | Milken Institute School of Public Health | Senior Associate Dean for Research and Professor of Global Health | United States of America

**SPEAKERS**

**Jane Ruth Aceng**

Minister of Health | Uganda

**Reinhard Busse**

Technische Universität Berlin (TU) | Department of Health Care Management | Director | Germany

**Alison End Fineberg**

ATscale - Global Partnership for Assistive Technology | Director | Switzerland

**Abdul Ghaffar**

Alliance for Health Policy and Systems Research | Executive Director | Switzerland

**Berit Hamer**

Ottobock SE & Co. KGaA | Director International Cooperation | Germany



Jane Ruth Aceng



Abdul Ghaffar



Reinhard Busse



Berit Hamer



Alison End Fineberg



Adnan A. Hyder

## PD 17

SAAL 2 | AMERICA  
16:00 – 17:30



Heidelberg University Hospital



### PANEL DISCUSSION

## THE LIFE-SAVING POWER OF MOBILE TECHNOLOGY

Achieving Universal Health Coverage and Financial Risk Protection through Mobile Money

### HOSTS

Heidelberg Institute of Global Health (HIGH)

Charité Global Health

Despite widespread introduction of user fee exemption policies, out-of-pocket payments remain the predominant mode for households in sub-Saharan Africa to cater for the costs of healthcare. However, healthcare expenditures often exceed the available assets and savings of a low-income household. In addition, poor households have no assured regular income or collateral to secure a loan, thus preventing insurance companies and financial institutions from providing their services to these potentially high-risk customers.

Within less than a generation, mobile communication has become ubiquitous. During the last 10 years, mobile phone ownership more than doubled in low- and middle-income countries and quadrupled in sub-Saharan Africa. Alongside

this revolution followed mobile payment services, also known as mobile money (MM), acting as an alternative to cash.

Owing to its potential to provide users with rapid access to cash and remittances, electronic savings accounts, and insurance schemes, MM is increasingly being used in the health sector and multiple services using MM have been launched in several countries, however with mixed results.

This session aims to highlight best practice examples from the field and to determine potential benefits and implications of using MM and related services to achieve financial risk protection as a key component of universal health coverage (UHC).

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**CHAIR**
**Till Bärnighausen**

Heidelberg Faculty of Medicine of the University Heidelberg |  
 Director of Heidelberg Institute of Global Health (HIGH) | Germany

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**SPEAKERS****Ann Aerts**

Novartis Foundation |  
 Head of the Novartis Foundation |  
 Switzerland

**Christoph Benn**

Joep Lange Institute |  
 Director for Global Health Diplomacy |  
 The Netherlands

**Roland Göhde**

German Health Alliance (GHA) |  
 Chairman of the Board |  
 Germany

**Natalia Pshenichnaya**

GSMA | Head of AgriTech Programme |  
 Madagascar

**Diana Ratsiambakaina**

Ministry of Public Health | Regional  
 Director of Public Health Department |  
 Madagascar



Ann  
Aerts

Roland  
Göhde



Till  
Bärnighausen

Natalia  
Pshenichnaya



Christoph  
Benn

Diana  
Ratsiambakaina

## WS 13

SAAL 4 | AFRICA  
16:00 – 17:30



### WORKSHOP

## CAPACITY BUILDING IN HEALTH RESEARCH IN LOW-RESOURCE SETTINGS

How Can Funders and Implementers Better Coordinate Capacity Building Efforts in Sub-Saharan Africa

### HOSTS

**European & Developing Countries Clinical Trials Partnership (EDCTP)**

**German Federal Ministry of Education and Research (BMBF)**

**Institut Pasteur**

There is a wide range of initiatives, national as well as multi-lateral, aiming at strengthening health research capacity in resource limited countries, in particular on the African continent. Many of these initiatives generate important and noticeable results, but often in isolation and with little planning for long-term sustainability.

Coordination between different funders is mostly lacking, or modest at best, and the different programs are often developed and implemented without consideration of mutual reinforcement, leading inadvertently to competition, duplication or repetition. There is currently no easy way to access, deposit, and share information about existing or upcoming programs and events, which would allow individual organizations to design a new initiative that is compatible with existing initiatives. The end result is too often

overcrowding of projects and funder-driven initiatives in a few institutions, countries and activity areas, while other locations and capacity gaps are completely forgotten.

This session will explore how the current myriad of capacity building initiatives can be better coordinated among funders, and between funders and recipient countries. The session will bring together a diverse group of organizations involved in different aspects of capacity strengthening, on both the demand and supply side. We will discuss whether an improved or de novo platform, such as an on-line Open Capacity Strengthening Platform, can be established that would allow funders and implementers to share information and coordinate their efforts towards a more balanced and cost-efficient use of resources.

**CHAIRS****Ole Olesen**

European & Developing Countries  
Clinical Trials Partnership (EDCTP) |  
Director of International Cooperation |  
The Netherlands

**Leonardo Simão**

Former Minister of Health and  
Former Minister of Foreign Affairs  
and Cooperation |  
Mozambique

**SPEAKERS****Hannah Akuffo**

Swedish International Development  
Cooperation Agency - Sida |  
Senior Specialist,  
Unit for Research Cooperation,  
Dept for Partnerships & Innovation |  
Sweden

**Imelda Bates**

Liverpool School of Tropical Medicine |  
Clinical Haematologist |  
United Kingdom

**Kundai Chinyenze**

International AIDS Vaccine Initiative  
(IAVI) | Executive Medical Director |  
Kenya

**Hans Hagen**

Institut Pasteur Center for Global Health |  
Deputy Director of the  
Centre for Global Health |  
France

**Dermot Maher**

World Health Organization (WHO) |  
Coordinator |  
Switzerland

**Marcel Tanner**

Swiss Academy of Sciences (SCNAT) |  
President |  
Switzerland



Hannah  
Akuffo

Dermot  
Maher



Imelda  
Bates

Ole  
Olesen



Kundai  
Chinyenze

Leonardo  
Simão



Hans  
Hagen

Marcel  
Tanner

## WS 14

SAAL 5 | OCEANIA  
16:00 – 17:30

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 **Hertie School**

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 **Robert Bosch  
Stiftung**

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### WORKSHOP

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## REFORMING HEALTH SYSTEMS

Health Policy as Social Policy

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### HOSTS

**Hertie School**

**Robert Bosch Stiftung**

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Health promotion and protection for all citizens and healthcare for patients represent some of the most important policy challenges worldwide. Virtually every single area of life—professional productivity, cultural creativity, political and social participation, and citizens' quality of life—is influenced by the state of health at the individual and at the population level. But are current forms of health governance and healthcare services sufficient to overcome inequalities, ensure health security, harness technological developments, and cover future needs?

The session focuses on health governance and the models and strategies

used to make health policy an integral part of modern social policy and meet growing challenges. Health governance involves state, market, non-governmental, professional, and individual actors often working across sectors and depends on interactions at multiple levels—from local clinics to global forums. The session traces the development of health governance institutions and actors, examines factors influencing the health-related decisions of individuals and policy-makers alike, highlights innovations both at international level and at the intersection between individuals and professionals, and offers recommendations to ensure that health care and health policy are governed to meet future challenges.



**CHAIR****Mujaheed Shaikh**

Hertie School | Professor of Health Governance | Germany

**SPEAKERS****Kalipso Chalkidou**

Center for Global Development |  
Director of Global Health Policy &  
Senior Fellow |  
United Kingdom

**Francesca Colombo**

Organization for Economic Cooperation  
and Development (OECD) |  
Head of the Health Division,  
Directorate for Employment, Labour  
and Social Affairs |  
France

**Bernadette Klapper**

Robert Bosch Stiftung |  
Senior Vice President Health |  
Germany

**Julio Daniel Mazzoleni Insfrán**

Minister of Health |  
Paraguay

**Claus Wendt**

University of Siegen |  
Chair of Sociology of Health and  
Healthcare Systems | Professor |  
Germany



Kalipso  
Chalkidou

Julio Daniel  
Mazzoleni Insfrán



Francesca  
Colombo

Mujaheed  
Shaikh



Bernadette  
Klapper

Claus  
Wendt

## WORLD HEALTH SUMMIT NIGHT

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MONDAY, OCTOBER 28

18:00

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PROGRAM

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**TUESDAY, OCTOBER 29**

## PD 18

SAAL 6 | EUROPE  
9:00 - 10:30



### PANEL DISCUSSION

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## THE COMMERCIAL DETERMINANTS OF HEALTH

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### HOST

#### **Tobacco Free Portfolios**

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The human right to health cannot be protected by doctors and the healthcare sector alone. The biggest threats to human health, the diseases and illnesses that take too many lives are intertwined with commerce. Noble intentions to lift the health of all must address the commercial realities of business interests that see millions affected by widely available and legal products.

As the power of the corporate sector continues to rise, now is the time to forge partnerships for change, to better human health globally. In the spirit of the 17th Sustainable Development Goal—Partnerships for the Goals—this session profiles the new and necessary relationships that are developing between health and commerce, it gives hope of what can be achieved when different sectors start speaking the same language and work together with a clear vision.

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**CHAIR**
**Bronwyn King**

Tobacco Free Portfolios | CEO | Australia

**SPEAKERS****Don Gerritsen**

Principles for Responsible Investment (PRI) | Head of Benelux | The Netherlands

**Mark Saunders**

AIA Group Limited | Group Chief Strategy and Corporate Development Officer | Hong Kong

**Pavan Sukhdev**

WWF International | President | India

**Ulana Suprun**

Former Acting Minister of Health | Ukraine

**Ruben Zandvliet**

ABN AMRO Bank N.V. | Advisor for Environmental, Social, and Ethical Risk and Policies | The Netherlands

Don  
GerritsenPavan  
SukhdevBronwyn  
KingUlana  
SuprunMark  
SaundersRuben  
Zandvliet

## PD 19

SAAL 10 | ASIA  
9:00 – 10:30



Leopoldina  
Nationale Akademie  
der Wissenschaften



the interacademy partnership



### PANEL DISCUSSION

## CLIMATE CHANGE AND HEALTH

Science Guiding Policy and Practice

### HOSTS

**German National Academy of Sciences Leopoldina e.V.**

**InterAcademy Partnership (IAP)**

Impacts of climate change on human health have begun to attract greater attention. However, there is much still to be done to use the current evidence base to inform policy development broadly across sectors, and to fill gaps in the knowledge base by new research. Pathways of health effects are complex with many factors interacting, and climate change will intersect with other major trajectories e.g. in urbanization, population ageing and human behavioral change.

Academies of science worldwide have significant interest in the issues for understanding and addressing the impacts of climate change. Recently, the European Academies Science Advisory Council

(EASAC) completed a report analyzing evidence on climate change and health in Europe: covering both direct and indirect risks in terms of hazards, exposure and vulnerabilities. Project work clarifying options for adaptation and mitigation and the implications for overcoming barriers to implementation led to a range of recommendations for generating and using science to guide policy and practice.

This World Health Summit session will discuss key points relating to the impacts of climate change for health, stimulated by this recent work with particular regard to identifying policy needs and actions and to extending academies' analysis worldwide.

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**CHAIR****Volker ter Meulen**InterAcademy Partnership (IAP) | President | Germany

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**SPEAKERS****Robin Fears**European Academies Science  
Advisory Council |  
Bioscience Programme Secretary |  
United Kingdom**Andrew Haines**London School of Hygiene &  
Tropical Medicine (LSHTM) |  
Professor of Environmental Change  
and Public Health |  
United Kingdom**Johannes Klumpers**European Commission |  
Directorate-General for Research  
and Innovation | Head of Unit -  
Chief Scientific Adviser - SAM, EGE |  
Belgium**Maria Nilsson**Umeå University |  
Department of Epidemiology and  
Global Health | Researcher |  
SwedenRobin  
FearsMaria  
NilssonAndrew  
HainesVolker  
ter MeulenJohannes  
Klumpers

PD 20

SAAL 2 | AMERICA  
9:00 – 10:30



PANEL DISCUSSION

## ACCESS TO QUALITY HEALTH CARE FOR WOMEN IN LOW RESOURCE SETTINGS

Global Strategies to Overcome Gaps and to Identify Solutions

HOSTS

**Charité - Universitätsmedizin Berlin**

**M8 Alliance**

By 2030 85% of NCD-related deaths among women will occur in low- to middle-income settings. Reasons are the failure of health systems to offer adequate and equal access to health care. Gaps in access to up to date knowledge and continuous education for health professionals and the lack of tools for quality control are the main underlying causes.

The panel will provide insight into the problems health care professionals are facing in low- and middle-income settings in their struggle to provide quality care for women. An overview will be provided about the global strategies of WHO and

its partners to develop well trained health workforce at all levels of care so that women get access to quality care.

A way forward will be given by taking the example of the emerging North-South and South-South network of academia which is supporting the “End cervical Cancer” strategy of WHO in the African Region. This network will establish close to client training centers for health care providers in several North- and Sub-Saharan African countries. These platforms of knowledge exchange for cervical cancer will be best positioned to be expanded for the dissemination of knowledge for all key areas of women health.



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**CHAIR**
**Jalid Sehouli**

Charité – Universitätsmedizin Berlin | Department of Gynecology |  
Medical Director | Germany

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**SPEAKERS****Maria Flachsbarth**

Federal Ministry for Economic  
Cooperation and Development (BMZ) |  
Parliamentary State Secretary |  
Germany

**Sean Kehoe**

University of Birmingham | Lawson Tait  
Professor of Gynaecological Cancer |  
United Kingdom

**Frank Kornely**

Boehringer Ingelheim International |  
Senior International Product Manager |  
Germany

**Princess Nothemba Simelela**

World Health Organization (WHO) |  
Special Adviser to the Director-General,  
Strategic Programmatic Priorities |  
South Africa

**Ibrahima Teguete**

Centre Hospitalo-Universitaire  
Gabriel Touré |  
Obstetrician and Gynecologist |  
Mali

**Andreas Ullrich**

Charité – Universitätsmedizin Berlin |  
Department of Gynecology |  
Visiting Scientist |  
Germany



Maria  
Flachsbarth

Princess Nothemba  
Simelela



Sean  
Kehoe

Ibrahima  
Teguete



Frank  
Kornely

Andreas  
Ullrich



Jalid  
Sehouli

## WS 15

SAAL 4 | AFRICA  
9:00 – 10:30



### WORKSHOP

## HOW CAN WE CREATE SUSTAINABLE VALUE FOR PATIENTS AND SOCIETY?

Healthcare Sustainability From Theory to Practice

### HOST

European University Hospital Alliance

The European University Hospital Alliance invites you to explore how adding value to individuals and society is possible in a sustainable way. Over the past few years it has become clear that sustainability is not just a buzzword but a dire necessity.

How does healthcare approach this challenge? Healthcare creates a lot of value; our health is one of our most important assets. Health innovation brings us increasingly advanced knowledge and technological solutions.

But we are also a resource intense sector, e.g. the NHS is the UK's largest employer and our university hospitals are often big organizations with large environmental footprints.

So far we have mainly analyzed our short term results, but what is the effect of our

treatments 5 or 10 years later? How sustainable is the added value? What does it mean not only for the individual, but also for society? How do we feedback these long term results back to decision making at the start of treatment?

Doing more with less can only be part of the answer. At the World Health Summit, our panel looks forward to discuss with you how we can achieve a balanced approach that aligns the social, economic and environmental resources and improve health outcomes.

The European University Hospital Alliance (EUHA) brings together nine of Europe's leading University Hospitals. They envision to be a network of sustainable healthcare eco-systems that achieve the best outcomes for our patients within the resources available, also in the long run!

**CHAIR****Heyo Kroemer**

Charité – Universitätsmedizin Berlin | CEO | Germany

**SPEAKERS****Jan Hazelzet**

Erasmus University Medical Center |  
Professor Healthcare Quality  
and Outcomes |  
The Netherlands

**Maria Margarete Karsten**

Charité – Universitätsmedizin Berlin |  
Specialist in Gynaecology and Obstetrics |  
Germany

**Sir Robert Lechler**

King's Health Partners |  
Executive Director  
  
King's College London |  
Provost and Senior Vice President (Health) |  
United Kingdom

**César Velasco Muñoz**

Agency for Health Quality and Assessment  
of Catalonia (AQuAS) | Director |  
Spain



Jan  
Hazelzet

Sir Robert  
Lechler



Maria Margarete  
Karsten

César  
Velasco Muñoz



Heyo  
Kroemer

## WS 16

SAAL 5 | OCEANIA  
9:00 – 10:30



### WORKSHOP

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## CO-CREATION AND CO-OWNERSHIP OF THE UHC AND SDG AGENDAS

NTDs as a Litmus Test

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### HOST

#### Drugs for Neglected Diseases initiative (DNDi)

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The proof of quality universal health coverage will be the extent to which it is able to reach all people, where they live, and deliver the best possible care with optimal existing and new tools, which are affordable and accessible, and do not place undue burden on the health system or upon primary caregivers. In many countries, the test will be the extent to which quality UHC can be delivered to neglected and vulnerable populations, including those living with NTDs.

A presupposition that their needs can be responded to is that their needs are known. A test of that is their involvement in the creation and implementation of

policies and services. The global community has just launched its Global Action Plan to achieve SDG3, which includes plans to accelerate research and innovation.

This workshop will brainstorm how to ensure neglected populations at the center of the implementation of the UHC and SDG agendas, so that areas of critical importance to assure needs driven innovation and access are designed with and around them. The workshop will scrutinizing existing efforts—including platforms, partnerships and coalitions—for the extent to which they involve and co-create policies with affected populations, and draw on lessons these can share for the implementation of UHC and contribute to achieving the SDGs.

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**CHAIR****Nathalie Strub-Wourgaft**

Drugs for Neglected Diseases initiative (DNDi) |  
Director of Neglected Tropical Diseases | Switzerland

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**SPEAKERS****Michael Devoy**

Bayer AG | Executive Vice President  
for Medical Affairs & Pharmacovigilance  
and Bayer Chief Medical Officer |  
Germany

**Michael Makanga**

European & Developing Countries  
Clinical Trials Partnership (EDCTP) |  
Executive Director |  
The Netherlands

**Javier Sancho Mas**

Barcelona Institute for Global Health  
(ISGlobal) | Coordinator of the Global  
Chagas Disease Coalition |  
Spain

**Monique Wasunna**

Drugs for Neglected Diseases initiative  
(DNDi) Africa | Director of the DNDi  
Africa regional Office |  
Kenya



Michael  
Devoy

Nathalie  
Strub-Wourgaft



Michael  
Makanga

Monique  
Wasunna



Javier  
Sancho Mas

PD 21

SAAL 6 | EUROPE  
11:00 – 12:30



PANEL DISCUSSION

## TACKLING UNMET MEDICAL NEEDS OF VULNERABLE AND NEGLECTED POPULATIONS

Accelerating R&D of Innovative and Effective Medical Interventions  
Through Partnerships and Strategic Alliances

HOSTS

Charité - Universitätsmedizin Berlin

European & Developing Countries Clinical Trials Partnership (EDCTP)

M8 Alliance

Max Planck Institute for Infection Biology

Despite much progress, poverty related infectious diseases (PRDs) are still responsible for a huge burden in Africa. As well as their impact on individuals, these diseases—in particular, tuberculosis, HIV/AIDS and malaria—and the neglected and emerging diseases, impose a high economic burden on countries, acting as a drag on national development. Achieving most if not all Sustainable Development Goals (SDGs) will depend on effective control of infectious diseases through enhanced detection, treatment, prevention and tracking of infection. The development of fast, reliable, user-friendly and cost-effective medical technologies is needed to streamline diagnostic process-

es in resource-limited settings, to support preventive measures as well as reducing unnecessary referrals and ensuring early initiation of treatment when needed.

To optimally contribute to clinical decision-making and working practices in existing healthcare systems, it is important to evaluate the effectiveness of promising new generations of medical technologies in real life situations. Moreover, antimicrobial resistance (AMR) is already having a major impact in developing countries especially in Africa, compromising the use of multiple antibiotics against target pathogens, as well as antimalarial, antiviral and antifungal

therapeutics. Key to reducing the threat of AMR is the development of better diagnostic and prognostic tools, ideally for use at point-of-care.

This session will discuss general strategies and provide practical examples of the clinical development of novel medical technologies for PRDs through partnerships and strategic alliances.

## CHAIRS

### Stefan Kaufmann

Max Planck Institute  
for Infection Biology | Director |  
Germany

### Michael Makanga

European & Developing Countries  
Clinical Trials Partnership (EDCTP) |  
Executive Director |  
The Netherlands

## SPEAKERS

### Angela Loyse

St George's University of London |  
Institute of Infection and Immunity |  
Honorary Infectious Diseases Consultant |  
United Kingdom

### Catherine K. Ohura

GHIT Fund | CEO and Executive Director |  
Japan

### Peter Sands

The Global Fund to Fight AIDS, Tuberculosis and Malaria | Executive Director |  
Switzerland

### Soumya Swaminathan

World Health Organization (WHO) |  
Chief Scientist |  
Switzerland

### Veronika von Messling

Federal Ministry of Education  
and Research (BMBF) |  
Life Sciences Division | Director General |  
Germany

### Gerhard Walzl

Stellenbosch University |  
Immunology Research Group | Head |  
South Africa



Stefan  
Kaufmann

Peter  
Sands



Angela  
Loyse

Soumya  
Swaminathan



Michael  
Makanga

Veronika  
von Messling



Catherine K.  
Ohura

Gerhard  
Walzl

## PD 22

SAAL 10 | ASIA  
11:00 – 12:30

**CHATHAM  
HOUSE**  
The Royal Institute of  
International Affairs

Public Health Institutes of the World  
**IANPHI**

ROBERT KOCH INSTITUT



### PANEL DISCUSSION

## GLOBAL PUBLIC HEALTH SECURITY

The Role of National Public Health Institutes in Monitoring Threats

### HOSTS

**Centre on Global Health Security, Chatham House**

**International Association of National Public Health Institutes (IANPHI)**

**Robert Koch Institute**

There is a wealth of data being collected at the national level across a range of indicators, monitoring and evaluation tools, and programs, however mechanisms are not always in place to allow effective use of this data in decision-making for national health security and preparedness. Further, the barriers to accessing data from within the health sector, as well as data that is relevant to the health sector but collected by non-health actors, are poorly characterized at a national and subnational level.

Director of the Africa Centers for Disease Control, Dr. John Nkengasong, urged Member States to establish and strengthen their National Public Health Institutes (NPHIs) as a matter of health security. To optimally use information to strengthen health security and preparedness at both

the national and global levels, it is imperative that NPHIs are able to first access available and relevant existing data. This session has a dual focus on the evolving role of NPHIs in mandating and advocating for better preparedness and on the governance of data for health, reflecting on the value of existing data across the health and non-health sectors and the challenges to more effective use of data to empower the NPHIs.

The Centre on Global Health Security, in collaboration with three NPHIs in Nigeria, Ethiopia and Pakistan, is leading a project to Strengthen National Accountability and Preparedness for Global Health Security (SNAP-GHS). This project provides a springboard for the proposed panel discussion, inviting the Directors of the Nigeria Centre for Disease Control and



the Ethiopian Public Health Institute to engage in the topic and session focus (along with key project partners, the

Robert Koch Institute and the International Association of NPHIs).

## CHAIR

### Lothar H. Wieler

Robert Koch Institute | President | Germany

## SPEAKERS

### Emmanuel Agogo

Nigeria Centre for Disease Control (NCDC) | Deputy Director, Prevention and Programs | Nigeria

### Ngozi Erondu

Castlepines Medical Foundation | CEO, Project Zambezi | United Kingdom

### Meerjady Sabrina Flora

The International Association of National Public Health Institutes (IANPHI) | Vice-President of IANPHI | France

### Rüdiger Krech

World Health Organization (WHO) | Universal Health Coverage and Health Systems | Director | Switzerland

### Beyene Moges

Ethiopian Public Health Institute (EPHI) | Deputy Director General | Ethiopia

### Ebere Okereke

Public Health England | Consultant in Global Public Health  
Public Health England | Lead, PHE IHR Strengthening Programme | United Kingdom

### Elhadj As Sy

International Federation of Red Cross and Red Crescent Societies (IFRC) | Secretary General | Switzerland



Emmanuel  
Agogo



Beyene  
Moges



Ngozi  
Erondu



Ebere  
Okereke



Meerjady Sabrina  
Flora



Lothar H.  
Wieler



Rüdiger  
Krech



Elhadj As  
Sy

PD 23

SAAL 2 | AMERICA

11:00 – 12:30

*foundation*  
**BOTNAR**



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PANEL DISCUSSION

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## HEALTH DATA AS A GLOBAL PUBLIC GOOD

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HOSTS

**Fondation Botnar**

**The Lancet & Financial Times Commission:  
Growing Up in a Digital World: Governing Health Futures 2030**

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New technologies are emerging and converging to create a new infrastructure that acts as a central nervous system of the global community, allowing data to be shared instantly across regions, borders, and oceans. The current and future convergence of big health data—from personal, clinical, and environmental—combined with artificial intelligence (AI) offers unprecedented opportunities for public health. Pooling and sharing this data have the potential to reduce the barriers to accessing diagnostics and care, making it available to all. If we act now, we can create a whole new health data ecosystem as part of the digital revolution, enabling it to become a global public good. If we don't, we risk that self-interested groups take advantage and use this data for commercial gain, and in the worst case, for malicious purposes.

Ultimately, while there is a significant opportunity to leverage AI and health data for global health, especially in low- and middle-income countries, nothing is guaranteed unless we create the needed global regulatory environment for health data to become a global public good. This session will explore the opportunities as well as critical challenges donors, governments and development partners currently face when implementing initiatives where they are collecting valuable data, and to begin thinking how we can find solutions at different levels to urgently coordinate action in the move toward health data becoming a global public good and consider if it is time to put in place an international health data regulation through the World Health Assembly?

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**CHAIR**
**Stefan Germann**

Fondation Botnar | Chief Executive Officer | Switzerland

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**SPEAKERS****Anurag Agrawal**

CSIR Institute of Genomics & Integrative Biology | Director | India

**Marelize Gorgens**

World Bank Group | Health, Nutrition and Population Global Practice | Senior Monitoring and Evaluation Specialist | United States of America

**Nanjira Sambuli**

World Wide Web Foundation | Senior Policy Manager | United States of America

**Joanne Waldstreicher**

Johnson & Johnson | Chief Medical Officer | United States of America

**Thomas Wiegand**

Fraunhofer Heinrich Hertz Institute | Executive Director | Germany



Anurag  
Agrawal

Nanjira  
Sambuli



Stefan  
Germann

Joanne  
Waldstreicher



Marelize  
Gorgens

Thomas  
Wiegand

## WS 17

SAAL 4 | AFRICA  
11:00 – 12:30



### WORKSHOP

## ACCESS TO SUSTAINABLE NCD TREATMENT AND CARE

Finding Solutions Through Public-Private Partnerships in Low-Resource Settings

### HOSTS

**Boehringer Ingelheim Pharma GmbH & Co.KG**

**The Defeat-NCD Partnership**

The rising tide of non-communicable diseases (NCDs) represents one of the greatest public and global health challenges of our times. We have arrived at a tipping point with NCDs and it is time to tip the scales in our favour.

Enormous effort has been directed by many concerned actors into advocacy, sensitising policy makers, and creating public awareness. But impact is too slow. We must scale up concrete action and provide the NCD prevention and management services that people with NCDs need right now.

This panel discussion, an official side event of the World Health Summit 2019, will explore:

- How can public-private partnerships lead to improved access to medicines and technologies?
- How can public-private partnerships help scale up services for NCD treatment and care?

**CHAIR**

**Juliette Foster**

Journalist | United Kingdom

**SPEAKERS**

**Mukul Bhola**

The Defeat-NCD Partnership |  
Chief Executive |  
Switzerland

**Maria Flachsbarth**

Federal Ministry for Economic  
Cooperation and Development (BMZ) |  
Parliamentary State Secretary |  
Germany

**Diane Gashumba**

Minister of Health |  
Rwanda

**Myint Htwe**

Minister for Health and Sports |  
Myanmar

**Devora Kestel**

World Health Organization (WHO) |  
Director of Mental Health and Substance  
Abuse | Switzerland

**Antonio Ruffolo**

Boehringer Ingelheim  
Corporate Center GmbH |  
Head of Access to Healthcare  
and Global Health Policy |  
Germany

**Nikhil Seth**

United Nations Institute for  
Training and Research (UNITAR) |  
Executive Director |  
Switzerland



Mukul  
Bhola

Myint  
Htwe



Maria  
Flachsbarth

Devora  
Kestel



Juliette  
Foster

Antonio  
Ruffolo



Diane  
Gashumba

Nikhil  
Seth

## WS 18

SAAL 5 | OCEANIA  
11:00 – 12:30



### WORKSHOP

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## THE SDG3 GLOBAL ACTION PLAN FOR HEALTH AND WELLBEING

Local Solutions—How International Funders Can Support National Health Priorities

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### HOST

#### Wellcome Trust

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The goal of the workshop will be to discuss how international funders can support domestic health priorities and ensure that receiving governments see development assistance for health (DAH) as a tool to complement their own agendas.

The Global Action Plan for Healthy Lives and Well-Being for All, launched at UNGA in September 2019, highlights some common issues in the global health landscape. One of the key problems that hinder sustainable and equitable progress is the lack of involvement of countries that receive DAH in shaping international programs and funding mechanisms. This has meant that in some cases, international funded programs were not seen as a way to meet the health priorities of the receiving country and that external flows have had a substitution effect for domestic resources.

There is a need to understand why this occurs and shed light on alternative aid challenging that provide sustainable, demand-driven and long term-financing. The workshop will explore different perspectives and lessons learned on funding innovation mechanisms that put countries decision making at the heart of the process, including by exploring opportunities for co-funding models. Hearing from country representatives, multilateral agencies, bi-lateral donors and research funders, participants will discuss the barriers to identify the essential features of these models and how to overcome them.

**CHAIR****Mark Chataway**

Hyderus | Managing Director | United Kingdom

**SPEAKERS****Alex Harris**Wellcome Trust |  
Head of Global Policy & Advocacy |  
United Kingdom**John Markels**Merck Sharp & Dohme Corp. |  
President, Global Vaccines |  
United States of America**Rosemary Mburu**Waci Health | Executive Director |  
Kenya**Chinwe Lucia Ochu**Nigeria Centre for Disease Control |  
Deputy Director Prevention &  
Programmes CoordinationNigeria Centre for Disease Control |  
Head, Research, Training &  
Knowledge Management |  
Nigeria**Toomas Palu**World Bank Group |  
Advisor for Global Coordination |  
SwitzerlandMark  
ChatawayChinwe Lucia  
OchuJohn  
MarkelsToomas  
PaluRosemary  
Mburu

## WS 19

SAAL 4 | AFRICA  
12:30 – 14:00



### WORKSHOP

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## BETTER LEADERSHIP: IMPROVED HEALTH

Young Physician Leaders: “The Leadership We Want”

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### HOSTS

**ESMT European School of Management and Technology GmbH**

**InterAcademy Partnership (IAP)**

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Successful institutions need good leaders. And whether they are in high income countries or poorer countries, institutions providing healthcare, educating future physicians or promoting the public's health are no different. Yet decision-makers in such institutions are often appointed from among people trained in medicine, with little formal training in leadership to prepare them for these roles.

The InterAcademy Partnership (IAP) Young Physician Leaders (YPL) program aims to bridge this gap. Launched in 2011, to date some 213 young physicians from some 45 countries have participated in eight international and two regional editions of this personalized leadership training program (a dedicated IAP for Health YPL Directory is available here: <http://www.interacademies.org/37944/YPL-Directory>).



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**CHAIRS****Jo Ivey Boufford**

International Society for  
Urban Health (ISUH) | President |  
United States of America

**Nora Ilona Grasselli**

ESMT European School of  
Management and Technology GmbH |  
Program Director |  
Germany

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**SPEAKERS**

Selected from among the 2019 cohort  
of Young Physician Leaders

**Peter McGrath**

InterAcademy Partnership (IAP) |  
Program Officer |  
Italy



Jo Ivey  
Boufford

Peter  
McGrath



Nora Ilona  
Grasselli

## WS 20

SAAL 5 | OCEANIA  
12:30 – 14:00



### WORKSHOP

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## NEW VOICES IN GLOBAL HEALTH

The (Dis)connection between Science and Global Health

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### HOSTS

**Global Young Academy**

**World Health Summit**

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This New Voices in Global Health session is organized by Global Young Academy. It aims to explore the (dis)connection of various sciences with global health research, policy, or advocacy. Scientists' from diverse disciplines discuss how their work relates to global health and share how their field relates to broader global

challenges, which usually require interdisciplinary expertise and collaboration. The speakers and hosts of the session are members and alumni of the Global Young Academy, with backgrounds in chemistry, biomedical sciences, nano-chemistry, food engineering, health sciences, and the history and philosophy of science.

## CHAIRS

**Stefan Kohler**

Global Young Academy |  
Co-lead, Global Health Working Group |  
Germany

**Koen Vermeir**

Global Young Academy |  
Co-chair, Executive Committee |  
Germany

## SPEAKERS

**Muhammad Akhyar Farrukh**

Forman Christian College |  
Associate Professor |  
Pakistan

**Almas Taj Awan**

Federal University of Sao Carlos |  
Visiting Professor |  
Brazil

**Mohamed Elhadidy**

Zewail City of Science and Technology |  
Associate Professor  
of Biomedical Sciences |  
Egypt

**Guru Madhavan**

U.S. National Academy of Engineering |  
Norman R. Augustine Senior Scholar  
and Director of Programs |  
United States of America

**Wibool Piyawattanametha**

King Mongkut's Institute of Technology  
Ladkrabang (KMITL) | Director of  
Advanced Imaging Research Center |  
Thailand

**Arya Shalini Subash**

Engineering School of Lorena (EEL), USP |  
Post Doctoral Fellow |  
Brazil



Muhammad Akhyar  
Farrukh

Guru  
Madhavan



Almas Taj  
Awan

Wibool  
Piyawattanametha



Mohamed  
Elhadidy

Arya  
Shalini Subash



Stefan  
Kohler

Koen  
Vermeir

## KEY 04

SAAL 1  
RUDOLF VIRCHOW  
14:00 – 15:30



Federal Ministry  
of Health



World Health  
Organization

### KEYNOTE

## HEALTH IS A POLITICAL CHOICE

The Future of Health Policy in the G7/G20 and Other Political Venues

### HOSTS

**German Federal Ministry of Health (BMG)**

**World Health Organization (WHO)**

Healthcare has developed into a key policy issue that is discussed at both national and international levels. In 2019, the G20 in Osaka, Japan, will include a meeting of health ministers in a forum set to cover topics like health security and antimicrobial resistance as well as a joint meeting of finance and health ministers. The health governance issues inherent in the Sustainable Development Goals have underlined how increasing financial and political commitments—at global and at domestic level—are central to solving global health challenges which must be dealt with at the highest political level. The G7 will focus on issues of inequality including access to health. Health featured

strongly at the 2019 UNGA—it is also part of the BRICS deliberations. There is also an opportunity to give health a higher profile in upcoming EU presidencies.

This complementarity of agendas can support the SDG approach to address current and future social, economic and environmental challenges through an integrated approach. The social, economic and environmental factors play an undeniable role in human health; only through integration of the three dimensions will it be possible to achieve the transformative change required to secure long-term environmental and human well-being.

**CHAIR****Ilona Kickbusch**

The Graduate Institute of International and Development Studies |  
Global Health Center | Chair of the International Advisory Board | Switzerland

**SPEAKERS****Jens Spahn**

Federal Minister of Health |  
Germany

**Tedros Adhanom Ghebreyesus**

World Health Organization (WHO) |  
Director-General |  
United Nations

**Stefania Giannini**

UNESCO |  
Assistant Director-General for Education |  
France

**Jewel Howard Taylor**

Vice President | Liberia

**Luiz Henrique Mandetta**

Minister of Health |  
Brazil

**Keizo Takemi**

Japan Center for International Exchange |  
WHO Goodwill Ambassador for  
UHC and Member of the House of  
Councillors Japan |  
Japan



Jens  
Spahn

Jewel  
Howard Taylor



Tedros  
Adhanom  
Ghebreyesus

Luiz Henrique  
Mandetta



Stefania  
Giannini

Keizo  
Takemi



Ilona  
Kickbusch

## PD 24

SAAL 6 | EUROPE  
14:00 – 15:30



### PANEL DISCUSSION

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## DIGITAL HEALTH

Shaping Society and the Modern Economy

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### HOST

**Global He@lth 2030 Innovation Task Force**

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The pressures of growing youth and ageing population will have a profound impact on global health spending, predicted to rise to some \$10 trillion in 2020. New technological developments are responding by increasingly blurring the boundaries between the physical, biological, and digital worlds. Technology aims to personalize precision medicine in order to tailor prevention and treatment to individual patients based on their genetic makeup. This revolution can lead to radically reduced costs and benefit the health of all while increase patient empowerment but may result in new ethical challenges and health inequities.

Following the first meeting of world leaders on universal health coverage (UHC) and launch of the Global Action Plan for Healthy Lives and Well-Being for All at the UN General Assembly in September 2019, as well as the anticipated WHO Director General's "Global Strategy on Digital Health" in May 2020, the stakes for advancing a truly global market in digital health for next generation UHC and the SDGs by 2030 have taken on a new dimension. The next step is ensuring a transformative and multi-stakeholder ecosystem for the sustainability of innovations and growth of digital public goods, their economic viability, scale-up and inclusivity.

---

**CHAIR**
**Denis Gilhooly**

Global He@lth 2030 Innovation Task Force | CEO | United States of America

---

**SPEAKERS****Peter Albiez**

Pfizer Germany GmbH |  
Chief Executive Officer |  
Germany

**Francesca Colombo**

Organization for Economic Cooperation  
and Development (OECD) |  
Head of the Health Division |  
France

**Diane Gashumba**

Minister of Health |  
Rwanda

**Bernard Hamelin**

Sanofi | Global Head of Medical  
Evidence Generation |  
France

**Marie-Josée Hébert**

Université de Montréal |  
Vice-Rector of Research, Discovery,  
Creation and Innovation |  
Canada

**Soumya Swaminathan**

World Health Organization (WHO) |  
Chief Scientist |  
India



Peter  
Albiez

Bernard  
Hamelin



Francesca  
Colombo

Marie-Josée  
Hébert



Diane  
Gashumba

Soumya  
Swaminathan



Denis  
Gilhooly

## KEY 05

SAAL 1  
RUDOLF VIRCHOW  
16:00 – 17:30



### KEYNOTE

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## THE SDG3 GLOBAL ACTION PLAN FOR HEALTH AND WELLBEING

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### HOSTS

**German Federal Ministry of Health (BMG)**

**World Health Organization (WHO)**

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The ultimate success of the SDGs will be measured by their impact on the prosperity and well-being of people and the planet, particularly the extent to which the SDGs “leave no one behind.” Initiatives such as the SDG3 Global Action Plan for Health and Well-Being endeavor to build a foundation of greater cohesion among global health actors in support of countries’ achievement of the health-related SDGs. But accelerating the pace of progress will require increased govern-

ment cooperation at country level as well as enhanced stakeholder engagement across sectors—at global, regional, national and sub-national levels.

The Action Plan was launched at the World Health Summit 2018—the actors involved in the action plan will report on its progress and the implementation challenges at hand. They will focus in particular on the seven accelerators that have been identified.



---

**CHAIR**
**Ilona Kickbusch**

The Graduate Institute of International and Development Studies |  
Global Health Center | Chair of the International Advisory Board | Switzerland

---

**SPEAKERS****Jane Ruth Aceng**

Minister of Health |  
Uganda

**Seth Berkley**

Gavi, The Vaccine Alliance | CEO |  
Switzerland

**Jeremy Farrar**

Wellcome Trust | Director |  
United Kingdom

**Magda Robalo Correia e Silva**

Minister of Public Health |  
Guinea-Bissau

**Peter Sands**

The Global Fund to Fight AIDS,  
Tuberculosis and Malaria |  
Executive Director |  
Switzerland

**Bernhard Schwartländer**

World Health Organization (WHO) |  
Chief of Staff |  
Switzerland



Jane Ruth  
Aceng



Magda  
Robalo Correia e Silva



Seth  
Berkley



Peter  
Sands



Jeremy  
Farrar



Bernhard  
Schwartländer



Ilona  
Kickbusch



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## GENERAL INFORMATION

## USEFUL INFORMATION

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### ACCESS TO THE VENUE AND SECURITY

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Participants and speakers must present a valid photo ID to pick up their badges. Please be advised that bags may be inspected for security reasons. We ask that you refrain from bringing luggage to the venue, as this will slow down security procedures.

Badges should be worn at all times, and are required to enter all sessions and related events.

### CAPACITY LIMITS

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Please note that the capacity of session rooms and the venue as a whole is limited. The organizers reserve the right to refuse access if the maximum capacity has been reached.

### CLOAKROOM

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The cloakroom is located to the left of the entrance, and will be open for the duration of the event.

### EMERGENCY NUMBERS

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Ambulance/Fire: 112  
Police: 110

### INTERNET

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Wifi is available throughout the venue.

Network: WorldHealthSummit  
Password: #WHS2019

### MEDIA

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The World Health Summit is fully open to the press. Photography and filming are permitted. Journalists may request press badges in advance online, or present a valid press ID at the venue entrance. Media information packets are available at the registration counter. A media center with workspace for journalists is available on the upper level.

### LOST AND FOUND

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Lost items can be collected at the registration counter during the World Health Summit. After the summit, unclaimed items will be held by the venue for a limited time only.

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## PARKING

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Parking is available at the venue in an underground lot.

## PEOPLE WITH DISABILITIES

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The venue is accessible to participants with disabilities. If you require specific accommodations, please inform summit staff at [contact@worldhealthsummit.org](mailto:contact@worldhealthsummit.org)

## PROGRAM CHANGES

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The program is subject to changes due to unforeseen circumstances. Please check the interactive online program planner on our website for regular updates.

## REGISTRATION

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The registration desk is open during the following times:

Sunday, October 27 8:00 - 23:00  
Monday, October 28 7:00 - 23:00  
Tuesday, October 29 7:00 - 18:00

## SMOKING POLICY

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Smoking is prohibited inside the venue.

## SPEAKER CENTER

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The speaker center is located on the upper level. Speakers must bring any audio-visual materials they require to the speaker center prior to their session. Presentations cannot be run from personal laptops in the session rooms. The speaker center is open during the following times:

Sunday, October 27 10:00 - 18:00  
Monday, October 28 8:00 - 18:00  
Tuesday, October 29 8:00 - 17:00

## TAXIS

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Taxi Berlin +49 30 202020  
Taxi Würfelfunk +49 30 210101  
Taxi Funk +49 30 443322

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**CME CREDITS FOR PHYSICIANS**


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**Continuing Medical Education and Professional Development**
**Berlin Chamber of Physicians -  
Landesärztekammer Berlin**

Physicians attending the World Health Summit can receive six credits per day from the Berlin Chamber of Physicians.

Each participant should claim only those hours of credit that he/she actually spent in the educational activity.

	Maximum Credits
Sunday, October 27, 2019	6
Monday, October 28, 2019	6
Tuesday, October 29, 2019	6
	<b>18</b>

**American Medical Association (AMA)**

Through an agreement between the European Union of Medical Specialists and the American Medical Association, physicians may convert EACCME credits to an equivalent number of AMA PRA Category 1 Credits™. Information on the process to convert EACCME credit to AMA credit can be found at [www.ama-assn.org/education/cme/uemseaccme-cme-credit-recognition](http://www.ama-assn.org/education/cme/uemseaccme-cme-credit-recognition).

**European Accreditation Council for  
Continuing Medical Education (UEMS/EACCME)**

The World Health Summit 2019, Berlin, Germany, 27/10/2019-29/10/2019 has been accredited by the European Accreditation Council for Continuing Medical Education (EACCME®) with 16 European CME credits (ECMEC®s). Each medical specialist should claim only those hours of credit that he/she actually spent in the educational activity.

	Maximum Credits
Sunday, October 27, 2019	4
Monday, October 28, 2019	6
Tuesday, October 29, 2019	6
	<b>16</b>

**Royal College of Physicians and Surgeons of Canada**

Live educational activities, occurring outside of Canada, recognized by the UEMS-EACCME for ECMEC credits are deemed to be Accredited Group Learning Activities (Section 1) as defined by the Maintenance of Certification Program of The Royal College of Physicians and Surgeons of Canada.



## BERLIN HEALTH EXCELLENCE – EXPERTISE AND CUTTING-EDGE MEDICINE MADE IN BERLIN

Berlin's success as a health capital reflects a 300-year tradition as a healthcare and scientific centre. More than a dozen Nobel Prize winners worked here, including researchers such as Rudolf Virchow and Robert Koch. More than 90 hospitals with about 22,000 beds and with 9,900 doctors on duty, respectively an additional number of 9,200 doctors performing outpatient care make Berlin one of the cities with the highest numbers of doctors in Germany. Patients can thus find medical specialists for every disease. About 17,000 to 21,000 international patients are travelling to Berlin annually in order to undergo medical treatment.

One of Berlin's most famous medical institutions is the renowned Charité, Europe's largest university hospital and one of Germany's leading hospitals. World-renowned scientists of the Charité cooperate closely with recognised research organisations such as the Massachusetts Institute of Technology in Boston. Since 2019, the Berlin Institute of Health (BIH) has been integrated into the Charité, making research an important third pillar alongside health care and the medical faculty. The aim is to

**For more information about Berlin as a meeting destination, go to [convention.visitBerlin.com](http://convention.visitBerlin.com).**

**Detailed information about diagnostics, treatment and rehabilitation options in Berlin can be found at [berlin-health-excellence.com](http://berlin-health-excellence.com).**



transfer the research results from the laboratory to clinical care as quickly as possible and thus to provide patients in Berlin with the best possible care. This year Charité was ranked fifth best hospital worldwide by the US weekly Newsweek.

Other outstanding hospitals are the German Heart Centre (DHZB)—a top-level hospital for heart and vascular diseases under the leadership of world famous heart surgeon Professor Dr. med. Volkmar Falk—or Vivantes—with its nine clinics and several rehabilitation centres being Germany's largest hospital group. Many more hospitals and doctor's surgeries could be mentioned as all of them are offering top-class medical treatment and provide medical experts of all disciplines.

Medical care at the highest level requires a strong collaboration between scientists and practitioners. Berlin is a leading centre of science and research in Europe, especially focusing on medicine. Four universities, the Charité teaching hospital, seven universities of applied sciences and over 30 private universities offer teaching and research facilities for people from all over the world. Germany's most important research organizations such as the Fraunhofer-Gesellschaft or the Max Planck Society are based in Berlin and successful technology parks like the tech-hub Adlershof or biotech park Campus Berlin-Buch are established here.

This environment also makes Berlin a popular destination for international congresses in science and medicine: 22 per cent of the approximately 143,000 meetings, conventions and events held in 2018 were in the fields of medicine, pharmaceuticals and health management. International conferences such as the World Health Summit show that the German capital has been able to consolidate its strong position as a destination for medical events.



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## BERLIN—CAPITAL OF CULTURE

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Apart from the excellent quality of medicine, the capital of Germany with its green character, several parks and leisure facilities offers many ways to relax or support the patients' recovery. Guests from abroad are increasingly investing in their health during their stay. It is only in Berlin that visitors can so perfectly combine health consciousness, culture and lifestyle.

Cultural experiences in Berlin are of great variety. From ancient art by the Old Masters to avant-garde design, from classical opera to musicals to pop concerts, Berlin's cultural calendar leaves nothing to be desired. For all seasons, at all hours and for every taste, Berlin has something to offer.

Culture and art enthusiasts can also admire new styles and prominent works from all eras every day in Berlin's over 180 museums and approximately 440 galleries. The city's best known museums include the five buildings at Museumsinsel, which is in the historic centre. All buildings display valuable artistic treasures from 3,000 years of human history, e.g. the famous bust of Nefertiti in the Neues Museum, while the Martin-Gropius-Bau presents contemporary art.



For more information,  
go to [visitBerlin.com](https://www.visitberlin.com)

Berlin is the world's only city to have three opera houses: the Berliner Staatsoper, the Deutsche Oper and the Komische Oper. Classical music lovers can choose from a repertoire of famous works, such as Mozart's Don Giovanni, or new and experimental operas. Apart from these opera houses, the city's eight large orchestras, including the world famous Berlin Philharmonic conducted by Kirill Petrenko, also make for high-class musical enjoyment.

This year Berlin will be celebrating a special event. The November 9 marks the 30th anniversary of the fall of the Berlin Wall. In the anniversary week from 4 to 10 November, Berlin will become a huge open-air area for exhibitions, film screenings and concerts. visitBerlin participates in the festivities with a unique art project: "Berlin Handshape". Since 9 November 1989, 10,957 days will have passed since the fall of the Berlin Wall. For every day without the border in the heart of the city, visitBerlin collects "Berlin Handshapes", the handprints of two people. From Tuesdays to Sundays in the visitor centre at the Berlin Wall Memorial, people from different backgrounds can talk to each other and get involved in each other's history. A piece of clay, held by both together and shaped by their handshake, symbolizes the moment of their exchange and remains as a witness to their encounter.

# WORLD HEALTH SUMMIT

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WORLD  
HEALTH  
SUMMIT

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Iran



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World Health Summit,  
Charité – Universitäts-  
medizin Berlin  
Germany



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Former Rector  
University of Coimbra  
Portugal



**2015**  
**SHUNICHI FUKUHARA**  
Former Dean  
School of Public Health,  
Kyoto University,  
Japan



**2011**  
**STEVE WESSELINGH**  
Dean  
Monash University,  
Melbourne,  
Australia



**2018**  
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University of São Paulo,  
Brazil



**2010**  
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Imperial College London,  
United Kingdom



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**2013**  
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The World Health Summit Scientific Committee consists of the M8 Alliance Executive Committee (see page 140) and selected members of the World Health Summit Council.

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Director

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Harvard T.H. Chan School of Public Health,  
USA



**A**

Aceng, Jane Ruth 69,79,89,127  
 Achimas-Cadariu, Patriciu 39  
 Adams, Cary 87  
 Adeoye, Olawunmi 85  
 Adhanom Ghebreyesus,  
 Tedros 123  
 Aerts, Ann 91  
 Agogo, Emmanuel 111  
 Agrawal, Anurag 113  
 Agyeman-Manu, Kwaku 73,79  
 Ahrens, Wolfgang 29  
 Akuffo, Hannah 93  
 Albiez, Peter 125  
 Amuasi, John 73,77  
 Antony, Sahayarani 63  
 Aruna, Olúṣplá 85  
 Awan, Almas Taj 121  
 Azadzoy, Hila 33

**B**

Balasegaram, Manica 61,87  
 Baptista Leite, Ricardo 35  
 Bärnighausen, Till 91  
 Barquera, Simon 41  
 Barr, Epsy Campbell 23  
 Bates, Imelda 93  
 Baumann, Susanne 69  
 Beck, Jan-Philipp 33  
 Benn, Christoph 91  
 Benzler, Justus 85  
 Berkley, Seth 127  
 Bernhardt, Martin 87  
 Beyer, Peter 27,49,61  
 Bhardwaj, Harsh 83

Bhola, Mukul 115  
 Bloch, Gilles 31  
 Bocchi, Massimo 75  
 Boehme, Catharina 87  
 Boisjoly, Hélène 23  
 Bolton, Samantha 71  
 Bork, Peer 51  
 Botha, Theuns 83  
 Boufford, Jo Ivey 119  
 Brand, Helmut 83  
 Britnell, Mark 67  
 Bucher, Anne 31,43  
 Bulmahn, Edelgard 47  
 Busse, Reinhard 89

**C**

Campbell, Jim 67  
 Carabin, Hélène 73  
 Carlsson, Gunilla 35,45  
 Catena, Tom 67  
 Cediel Becerra, Natalia  
 Margarita 85  
 Chalkidou, Kalipso 95  
 Chan, Margaret 57  
 Chataway, Mark 43,117  
 Chinyenze, Kundai 93  
 Colombo, Francesca 95,125  
 Cueni, Thomas 61,79

**D**

Dabrock, Peter 33  
 Danquah, Ina 29  
 de-Graft Aikins, Ama 41  
 Dehmel, Susanne 33

De Negri, Alberto 31  
 Devoy, Michael 107  
 Dhatt, Roopa 23  
 Diment, Judith 25  
 Donnelly, Alan 35  
 Draghia, Ruxandra 69

**E**

Elhadidy, Mohamed 121  
 Elinav, Eran 51  
 Elphick-Pooley, Thoko 87  
 ElZarrad, Khair 81  
 End Fineberg, Alison 89  
 Erondu, Ngozi 111  
 Etienne, Carissa F. 57

**F**

Falkenberg, Timo 77  
 Farrar, Jeremy 127  
 Farrukh, Muhammad  
 Akhyar 121  
 Fears, Robin 101  
 Flachsbarth, Maria 79,103,115  
 Flahault, Antoine 37  
 Flora, Meerjady Sabrina 111  
 Forslund, Sofia 51  
 Forster, Alexandra 49  
 Foster, Juliette 115  
 Foulkes, Imogen 61

**G**

Gabrysch, Sabine 65  
 Ganten, Detlev 52  
 Gashumba, Diane 115,125

Germann, Stefan 81,113  
 Gerritsen, Don 99  
 Ghaffar, Abdul 89  
 Giannini, Stefania 123  
 Gilhooly, Denis 125  
 Gitahi, Githinji 57  
 Goffinet, Christine 35  
 Göhde, Roland 45,91  
 Gorgens, Marelize 113  
 Grasselli, Nora Ilona 119  
 Grützmacher, Kim 77  
 Guevara, Maria S. 39

**H**

Hachmann, Janna 75  
 Hagen, Hans 93  
 Haines, Andrew 65,101  
 Hajjeh, Rana A. 47  
 Hall, Julie Lyn 67  
 Hamelin, Bernard 125  
 Hamer, Berit 89  
 Harris, Alex 117  
 Harrison, Wendy 73  
 Hazelzet, Jan 105  
 Hazen, Stanley 51  
 Hébert, Marie-Josée 125  
 Hebestreit, Antje 29  
 Heide, Lutz 49  
 Herfurth, Tanya 45  
 Hirsch, Martin 39  
 Hochfeld, Christian 65  
 Hofstraat, Hans 33  
 Holtherm, Hans-Ulrich 69  
 Hörauf, Achim 63

Htwe, Myint 115  
Hyder, Adnan A. 89

**I**

Ibingira, Charles 53,79  
Ioannidis, John P.A. 31  
Iyer, Jayasree K. 79

**J**

Jafarian, Ali 47,53  
Jahrmann Bjerke, Maria 73  
Jianrong, Qiao 83

**K**

Kapina, Mazala 85  
Karabey, Selma 37  
Karsten, Maria Margarete 105  
Kasonde, Mwenya 23  
Kassim, Mansura M. 29  
Kaufmann, Stefan 109  
Kehoe, Sean 103  
Kelly-Hope, Louise 63  
Kestel, Devora 59,115  
Kickbusch, Ilona 25,57,123,127  
King, Bronwyn 99  
Klapper, Bernadette 95  
Klumpers, Johannes 101  
Köhler, Carsten 63  
Kohler, Stefan 121  
Kornely, Frank 103  
Krause, Gérard 85  
Krech, Rüdiger 111  
Kristensen, Frederik 57  
Kroemer, Heyo 53,105

Kühnert, Denise 39  
Kuykens, Luc 71

**L**

Lasry, Estrella 71  
Lechler, Sir Robert 105  
Lee, Naomi 81  
Lejon, Veerle 71  
Levin, Maria 75  
Levy, Mayaan 51  
Liu, Depei 41  
Loew, David 43,53  
Loyse, Angela 109  
Luft, Christian 53  
Luz Lima, Maria 85

**M**

Madhavan, Guru 121  
Maher, Dermot 93  
Makanga, Michael 107,109  
Malecela, Mwelecele  
Ntuli 63,71  
Mandetta, Luiz Henrique 123  
Markels, John 117  
Masala, Carlo 69  
Matijasevich Manitto, Alicia 83  
Matlin, Stephen 25  
Mattar, Caline 23  
May, Jürgen 77  
Mazzoleni Insfrán, Julio  
Daniel 43,95  
Mburu, Rosemary 117  
McGrath, Peter 119  
Mehta, Sonal 45

Messner, Angelika 41  
Miah, Ronald 29  
Moges, Beyene 111  
Montag, Bernd 53,81  
Monti, Roberto Francesco 47  
Moriarty, Glen 59  
Mori, Chisato 65  
Morozov, Alexey 83  
Mpundu, Mirfin 49,61  
Mwamba Miaka, Erick 71  
Mwasuka, Grace 63

**N**

Napier, David 41  
Natterson-Horowitz,  
Barbara 39,77  
Neira, Maria 65  
Nesse, Randolph 39  
Nicknam, Mohammad  
Hosseini 47  
Nilsson, Maria 101  
Nimmesgern, Elmar 27  
Nishtar, Sania 53  
Njenga, Eva 87  
Nsiah Asare, Anthony 73  
Nsubuga, Peter 85  
Nusser, Harald 57

**O**

Oberreiter, Michael 45  
Ochu, Chinwe Lucia 117  
Ohura, Catherine K. 109  
Okereke, Ebere 111  
Olesen, Ole 93

Oni, Tolullah 47,53  
Orcutt, Miriam 37

**P**

Palu, Toomas 117  
Passaris, Esther 35  
Patel, Vikram 59  
Peeters, Jaak 35  
Perry, Greg 87  
Piyawattanametha,  
Wibool 121  
Pries, Axel 31  
Pshenichnaya, Natalia 91

**R**

Ratsiambakaina, Diana 91  
Refsum, Charlotte 23  
Riedl, Felicitas 27  
Robalo, Magda 127  
Rosshart, Stephan Patrick 51  
Rossouw, Hélène 83  
Ruffolo, Antonio 115  
Rühli, Frank 39  
Ryan, Michael 69,85

**S**

Sambuli, Nanjira 113  
Sancho Mas, Javier 107  
Sands, Peter 109,127  
Santuccione Chadha,  
Antonella 59  
Saso, Luciano 37  
Saunders, Mark 99  
Schäfers, Reinhard 41

- 
- Schöwel, Verena 75  
Schrade, Christina 23  
Schwartländer,  
  Bernhard 25,73,127  
Schwendicke, Falk 75  
Segre, Julie 51  
Sehouli, Jalid 103  
Seth, Nikhil 115  
Severoni, Santino 37  
Sevilla, JP 43  
Seybold, Joachim 37  
Shaikh, Mujahed 95  
Shalini Subash, Arya 121  
Siegmond, Britta 31  
Sillanaukee, Päivi 31  
Simão, Leonardo 93  
Simelela, Princess  
  Nothemba 103  
Sipido, Karin R. 31  
Snower, Dennis J. 57  
Sodahlon, Yao 63  
Sosler, Stephen 25  
Spahn, Jens 53,123  
Spencer, Julia 27  
Stoltenberg, Camilla 73  
Strub-Wourgaft,  
  Nathalie 71,107  
Sukhdev, Pavan 99  
Sunkel, Charlene 59  
Suprun, Ulana 99  
Su, Yi-Chang 41  
Swaminathan,  
  Soumya 43,81,109,125  
Sy, Elhadj As 111
- T**  
Tadesse, Lia 45  
Takemi, Keizo 123  
Takian, Amirhossein 37  
Talisuna, Ambrose Otau 85  
Tanner, Marcel 93  
Tatay, Mercedes 69  
Taylor, Jewel Howard 123  
Tedla, Shushan 49  
Teguete, Ibrahima 103  
ter Meulen, Volker 101  
Thompson, Kirsty 63  
Timmers, Paul 33  
Trattler, Daniel 75
- U**  
Ullrich, Andreas 103
- V**  
Velasco Muñoz, César 105  
Vermeir, Koen 121  
Viola, Roberto 33  
von Hirschhausen, Eckart 65  
von Kalle, Christof 81  
von Messling, Veronika 109
- W**  
Waldstreicher, Joanne 113  
Wallensten, Anders 85  
Walzer, Chris 77  
Walzl, Gerhard 109  
Wasunna, Monique 107  
Welch, Darren 25  
Wendt, Claus 95
- Wickramasinghe, Kremlin 29  
Wiegand, Thomas 81,113  
Wieler, Lothar H. 27,43,73,111  
Winkler, Andrea 73,77  
Wiskow, Christiane 23  
Wolpert, Miranda 59  
Wong, John Eu-Li 67  
Wulf, Andrea 53
- Z**  
Zandvliet, Ruben 99  
Zinsstag-Klopfenstein, Jakob 77

**A**

Association of Research-based Pharmaceutical Companies (vfa) [48,62](#)  
ATscale – Global Partnership for Assistive Technology [88](#)

**B**

Berlin Institute of Health (BIH) [80](#)  
BioMed Alliance [30](#)  
Boehringer Ingelheim Pharma GmbH & Co.KG [114](#)

**C**

Centre on Global Health Security [110](#)  
Charité – Universitätsmedizin Berlin [30,64,102,108](#)  
Charité Global Health [90](#)

**D**

Drugs for Neglected Diseases initiative (DNDi) [70,106](#)

**E**

Eberhard-Karls-University Tuebingen [62](#)  
EIT Health (European Institute for Innovation and Technology) [32](#)  
ESMT European School of Management and Technology GmbH [118](#)  
European & Developing Countries Clinical Trials Partnership (EDCTP) [92,108](#)  
European University Hospital Alliance [104](#)

**F**

Fondation Botnar [112](#)  
Fraunhofer Heinrich-Hertz-Institut [80](#)

**G**

German Federal Foreign Office [68](#)  
German Federal Ministry of Defense [68](#)  
German Federal Ministry of Education and Research (BMBF) [72,92](#)  
German Federal Ministry of Health (BMG) [122,126](#)  
German Health Alliance (GHA) [44](#)  
German Institute of Human Nutrition Potsdam-Rehbrücke (DIfE) [28](#)  
German National Academy of Sciences Leopoldina e.V. [100](#)  
German Network against Neglected Tropical Diseases (DNTDs) [62](#)  
German Society for Tropical Medicine and International Health (DTG) [62](#)  
Global Antibiotic Research & Development Partnership (GARDP) [60](#)  
Global He@lth 2030 Innovation Task Force [124](#)  
Global Solutions Initiative [56](#)  
Global Young Academy [120](#)

**H**

Harvard Medical School [58](#)  
Heidelberg Institute of Global Health (HIGH) [90](#)  
Helmholtz Centre for Infection Research (HZI) [84](#)  
Hertie School [94](#)

**I**

Institut Pasteur [92](#)  
InterAcademy Partnership (IAP) [46,100,118](#)  
International Association of National Public Health Institutes (IANPHI) [110](#)  
International Federation of Pharmaceutical Manufacturers & Associations (IFPMA) [86](#)  
Istanbul University [36](#)

**K**

Kiel University 40

**L**

Lancet Commission on One Health 72,76

Leibniz Institute for Prevention Research and Epidemiology (BIPS) Bremen 28

**M**

M8 Alliance 24,30,36,40,46,52,56,64,66,78,102,108

Makerere University 78

Manipal Academy of Higher Education 82

Max Delbrück Center for Molecular Medicine (MDC) 50

Max Planck Institute for Infection Biology 108

**N**

National University of Singapore (NUS) 66

**O**

Ottobock SE & CoKgaA 88

**P**

Potsdam Institute for Climate Impact Research 64

**R**

Robert Bosch Stiftung 94

Robert Koch Institute 110

**S**

Sanofi 42,70

Sapienza University 36

Stiftung Mercator 64

**T**

Tehran University of Medical Sciences (TUMS) 36,46

The Defeat-NCD Partnership 114

The George Washington University,  
Milken Institute School of Public Health 88

The Graduate Institute Geneva – Global Health Center 24,56

The Lancet & Financial Times Commission 112

Tobacco Free Portfolios 98

**U**

UHC2030 56

UNAIDS 44

UNITE 34

Universitätsklinikum Tuebingen 62

University of Geneva 36

University of Zurich 38

**W**

Wellcome Trust 116

Women in Global Health 22

World Health Organization (WHO) 26,122,126

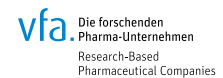
World Health Summit 52,120

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