Dr Margaret Chan Director-General Imagine what the current crisis of soaring food prices means in developing countries, where the average household spends as much as 80% of disposable income on food. Again, there is no surplus, no coping capacity to absorb the shocks.

And there are other consequences. Food choices are highly sensitive to price increases.

The first things to drop out of the diet are the healthy foods, which are nearly always the most expensive – like fruits and vegetables, and high quality sources of protein.

The result: processed foods, full of fat and sugar and low in essential nutrients, become the cheapest way to fill a hungry stomach.

When people have to pay for care, they tend to wait until a condition is so far advanced that treatment is difficult, if not impossible, and the costs are much higher.

With the costs of health care rising and systems for financial protection in disarray, personal expenditures on health now push more than 100 million people below the poverty line each year.

This is a very bitter irony. At a time when the international community supports health as a key driver of economic progress and a route to poverty reduction, the costs of health care are themselves a cause of poverty for many millions of people.

Like the global crises we are experiencing, this reality flies in the face of steady progress and promising trends experienced since the start of this century. These trends and realities show us the two sides of globalization, a bright side and a very dark one.

Ladies and gentlemen,

As I have mentioned, globalization has its bright and its dark sides. It brings benefits. It can increase wealth. And it inspires a sense of solidarity and shared responsibility for health.

But here is the problem: globalization has no rules that guarantee the fair or balanced distribution of benefits.

As the Commission noted, the economic benefits of globalization tend to go to countries and populations that are already well off, leaving others further and further behind.

Ladies and gentlemen,

I believe that our world is out of balance in matters of health as never before. This should not be the case.

Health is the very foundation of economic productivity and prosperity. Balanced health status within a population contributes to social cohesion and stability. A prosperous and stable population is an asset in every country.

This world will not become a fair place for health all by itself. Economic developments within a country will not automatically protect the poor or guarantee universal access to health care.

Health systems will not automatically gravitate towards greater fairness and efficiency. International trade and economic agreements will not automatically consider the impact on health.

Nor will globalization self-regulate in ways that favour fairness in the distribution of benefits. Deliberate policy decisions are needed in all these areas.

I believe there is no sector better placed than health to insist on equity and social justice. Let me use just one example.

The AIDS epidemic demonstrated the relevance of equity and universal access in a very clear way. With the advent of antiretroviral therapy, an ability to access medicines and services became equivalent to an ability to survive for many millions of people.

AIDS helped make one point crystal clear : equity in health really is a matter of life or death.

Equity in access to health care comes to the fore as a way of holding globalization accountable, of channelling globalization in ways that ensure a more fair distribution of benefits, a more balanced and healthy world.

Ladies and gentlemen,

Some things need to be said. The policies governing the international systems that link us all so closely together need to be more foresighted.

They need to look beyond financial gains, benefits for trade, and economic growth for its own sake.

They need to be put to the true test. What impact do they have on poverty, misery, and ill health – in other words, the progress of a civilized world?

Do they contribute to greater fairness in the distribution of benefits? Or are they leaving this world more and more out of balance, especially in matters of health? Thirty years ago, the Declaration of Alma-Ata launched primary health care as the route to greater fairness in health. This year's World Health Report calls for a renewal of primary health care.

The visionary thinkers in 1978 could not have foreseen subsequent world events: an oil crisis, a global recession, and the emergence of a world-transforming disease like HIV/AIDS.

In the recession that followed, huge mistakes were made in the restructuring of national budgets. Health throughout sub-Saharan Africa and in large parts of Latin America and Asia has still not recovered from these mistakes.

If history tends to repeat itself, can we not at least learn from the past and avoid repeating mistakes?

There is too much at stake, right now, in our turbulent and tottering world, to make the same mistakes yet again.

Thank you.