

Global Commission for 21st Century Healthcare

*Reimagining the Global
Healthcare Architecture*



Global Health System Redesign Lab:
From proliferation to purposeful
progress of AI

*19th May 2026,
John Knox Center
Geneva*



19th September
2025

Bigger Broken HEALTH SYSTEM



A Broken Health System –
Can Digital Health Fix it?



COMMISSIONERS

Leaders Behind Innovating Healthcare System
of 21st Century



Prof. (Dr.) Thomas Zeltner
Chairman, WHO Foundation; Co-chair,
Global Commission for 21st Century
Healthcare



Mr. Paul Sinclair AM
President, International
Pharmaceutical Federation (FIP)



Dr. Rajendra Pratap Gupta
Chairman, Health Parliament;
Co-chair, Global Commission for
21st Century Healthcare



Ms. Francesca Colombo
Head, Health Division, Directorate for
Employment, Labour and Social Affairs,
OECD



Dr. Joseph C. Kvedar
Professor, Harvard Medical School



Dr. K. Srinath Reddy
Founding President, Public Health
Foundation of India

Global Commission for
21st Century Healthcare



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Dr. José Luis Cobos-Serrano

President, International Council of Nurses



Dr. Lars Lindsköld

President, European Federation for Medical Informatics (EFMI); Board Member, SFMI



Dr. Viviana Martínez-Bianchi, MD

President, World Organization of Family Doctors (WONCA)



Dr. Clarice D. Aiello

Founder, Quantum Biology Ecosystem (CSO of the Quantum Biology Institute)



Dr. T. Dileep Kumar

President, Indian Nursing Council (INC); Board Member, ICN (SEARO); Ex-Nursing Adviser, Govt. of India



Dr. Dean Ho, Ph.D.

Director, The Institute for Digital Medicine, Yong Loo Lin School of Medicine, National University of Singapore



GLOBAL
COMMISSION
FOR
21ST CENTURY
HEALTHCARE

WSIS+20 UN General Assembly High-Level Meeting Side Event

(Inaugural Global Meeting)

15 December 2025, New York



Global Leaders Shaping the Future of Healthcare



Prof. (Dr.) Thomas Zeltner

Co-chair, Global Commission
for 21st Century Healthcare;
Chairman, WHO Foundation



Dr. Rajendra Pratap Gupta, Ph.D.

Chairman, Health
Parliament



Dr. Alain Labrique

Director, Department of
Digital Health &
Innovation, WHO HQs



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Global Health System Redesign Lab



Pfarrkirchen, Germany

12th November 2025

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The Trillion-Dollar Failure

— *A system too costly, too complex, and too exclusive.* —



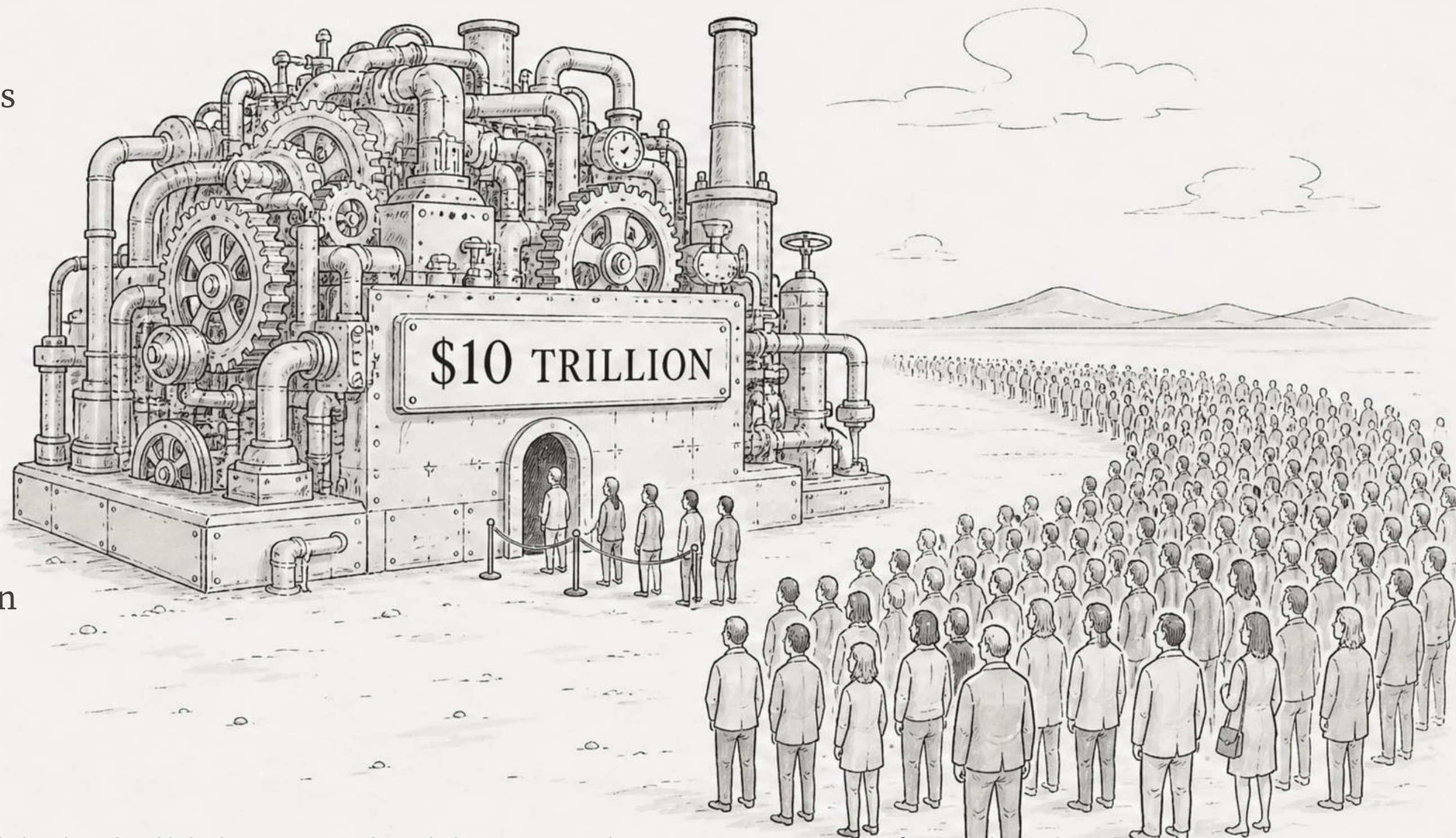
Healthcare consumes
10% of global GDP
(\$9.8 trillion).



4.5 billion people
(half the world) lack
essential services.



A scale of dysfunction
intolerable in any
other sector.



Civilizational DNA

— Healthcare is a mirror of civilization —

I

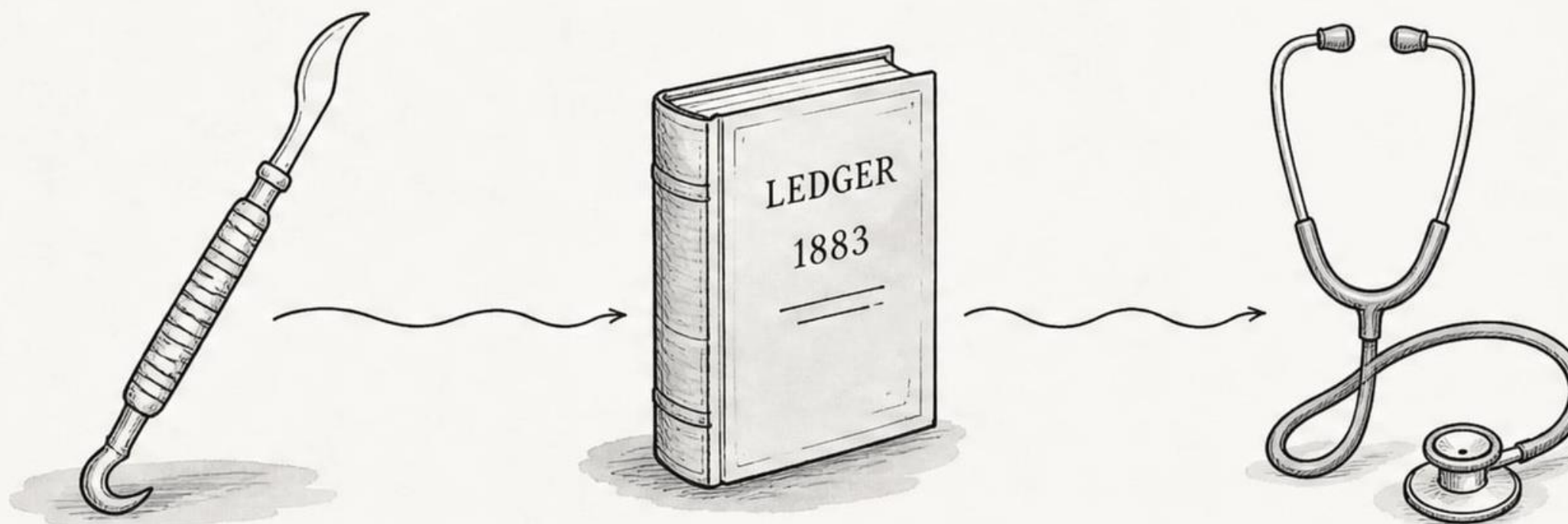
Ancient India
Sushruta's Surgery

II

Germany's Social Insurance
(1883)

III

UK's National Health
Service (1948)



The Global Care Model

— Reimagining the Global Healthcare Architecture. —



1. THREE ARCHETYPES

Public - NHS



2. USA

17.6% GDP

Private – USA

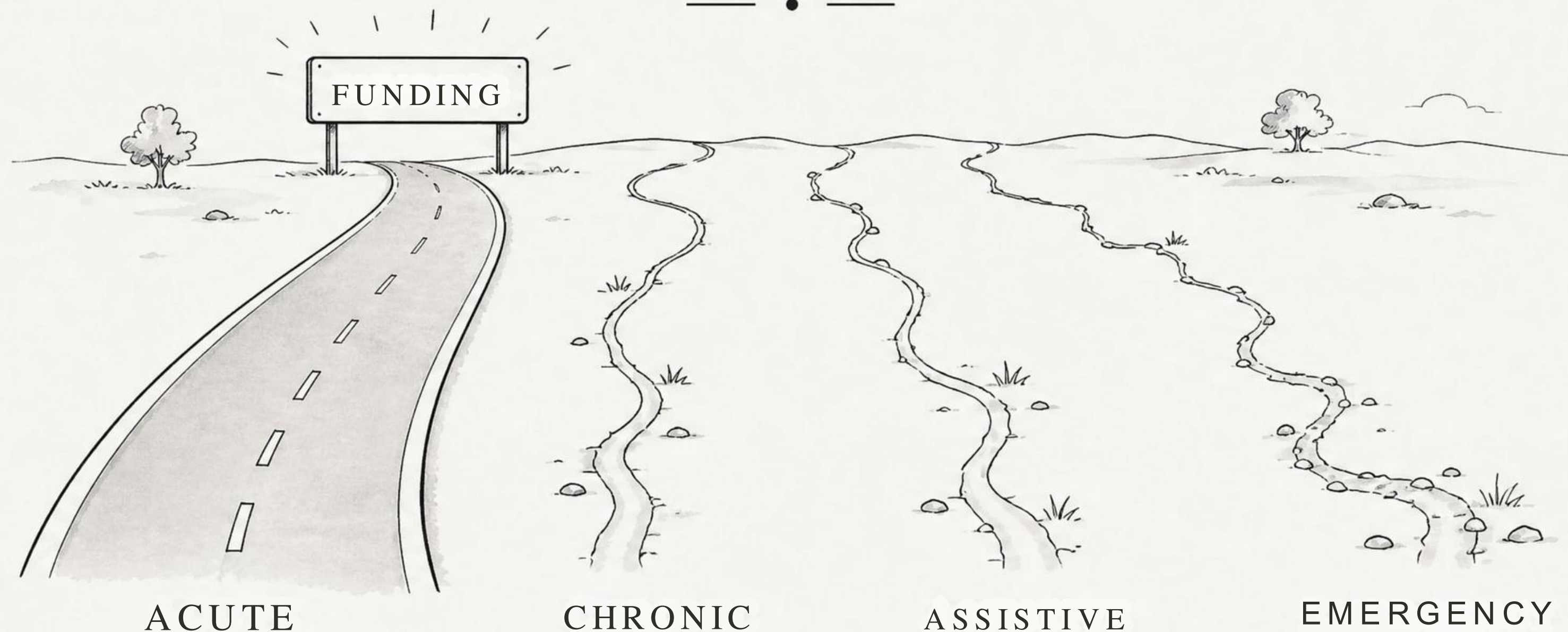


3. LOW-INCOME NATIONS

0.24% global health spend.

Mixed - India

The Four Care Journeys



*Patients live four lives:
Acute, Chronic, Assistive,
and Emergency.*

*The system funds
Acute care*

*Chronic disease causes
75%
of deaths but remains
under-resourced*

The Workforce Crisis

— A growing gap. A global challenge. —



WHO projects a shortfall
of 11 million health workers by 2030.



Africa carries 25% of global
disease burden but only 3%
of health workers.



Physician burnout
exceeds 40%
globally.



Sick Care vs. Healthcare

— *A smarter investment. A healthier future.* —



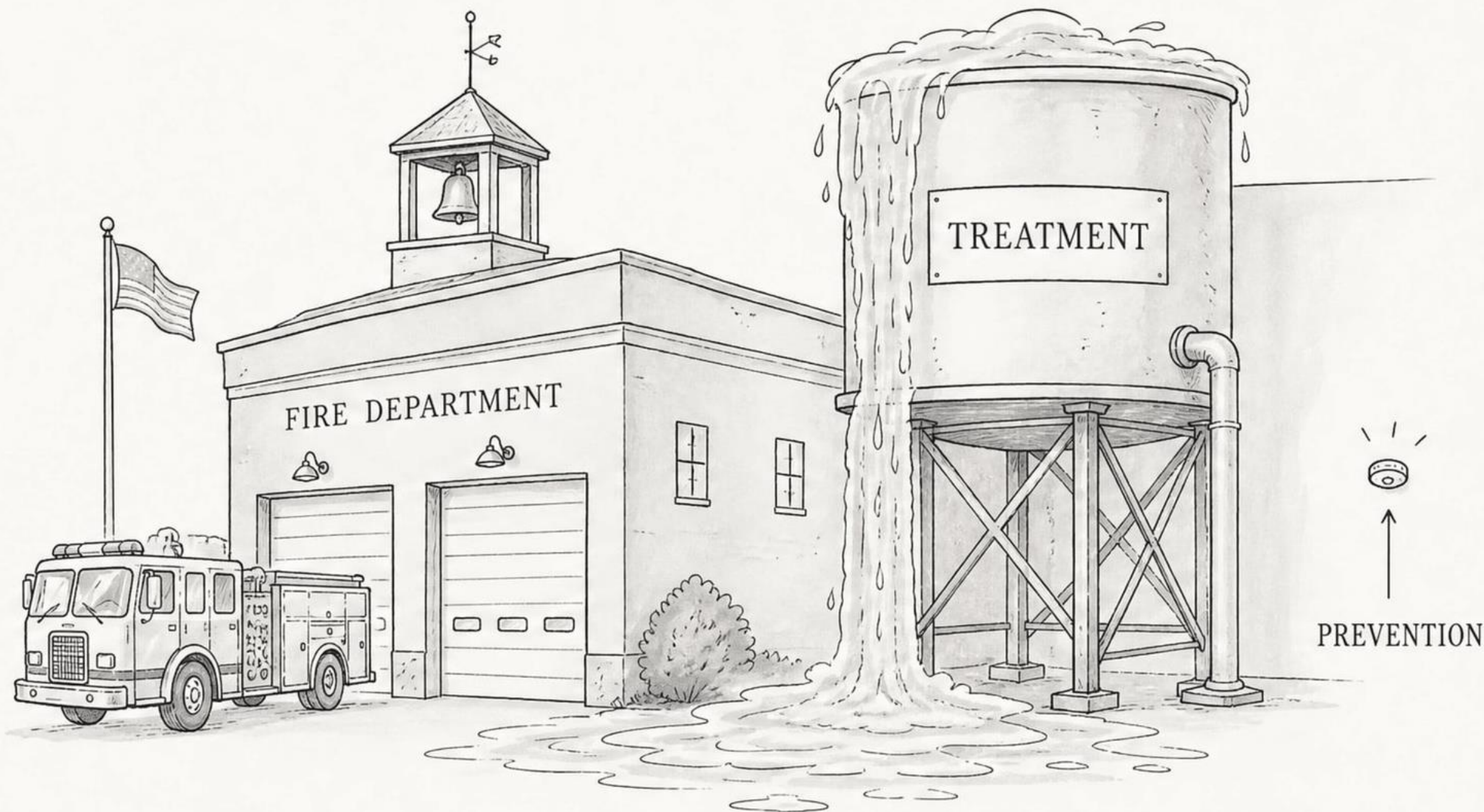
97% of spending
goes to treatment.



Only 3%
goes to prevention.

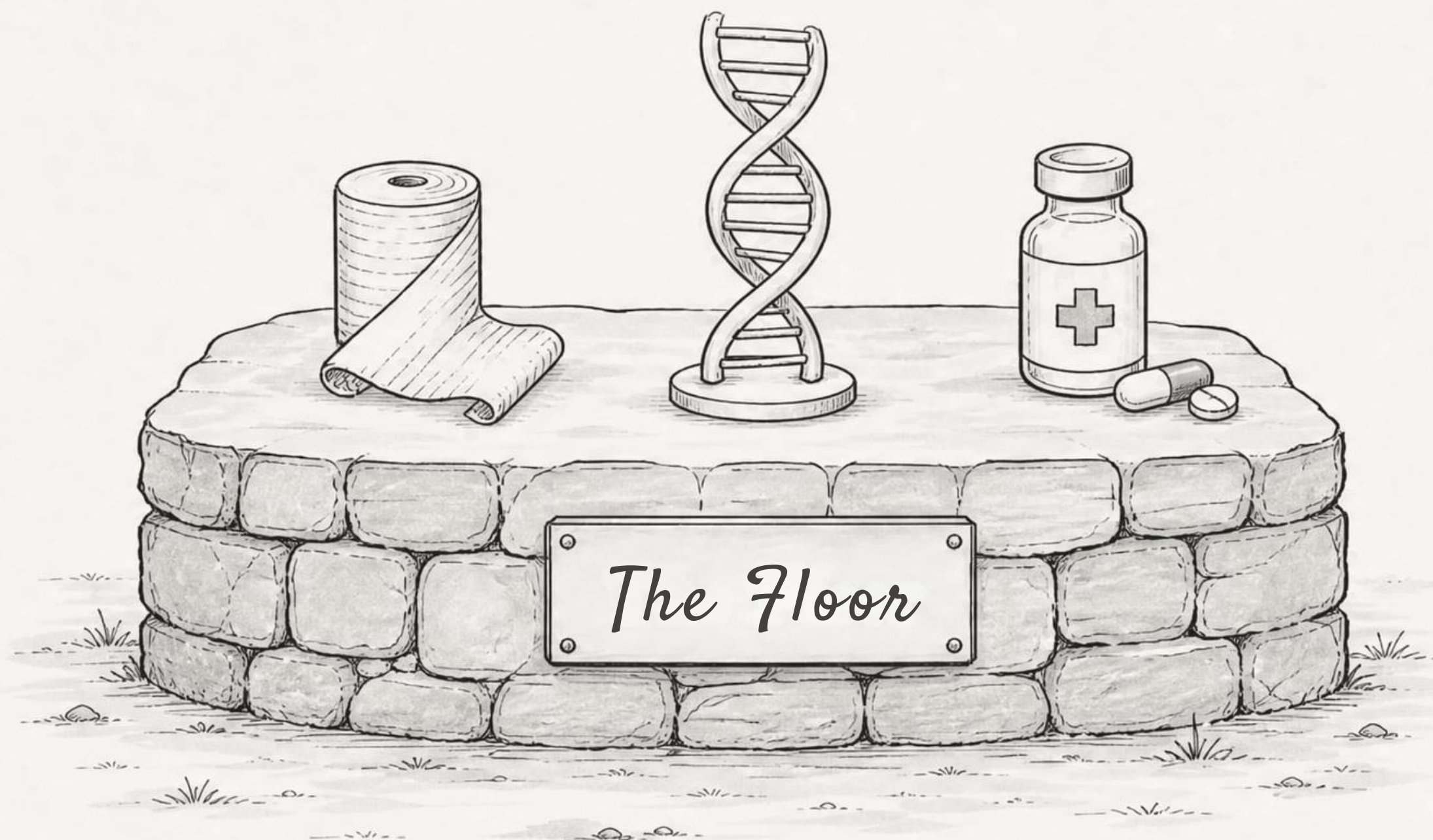


We spend 33x
more
on water than on
smoke detectors.



The Irreducible Burden

Even with perfect prevention, some care is unavoidable.



Trauma and accidents
(1.19M annual road deaths)



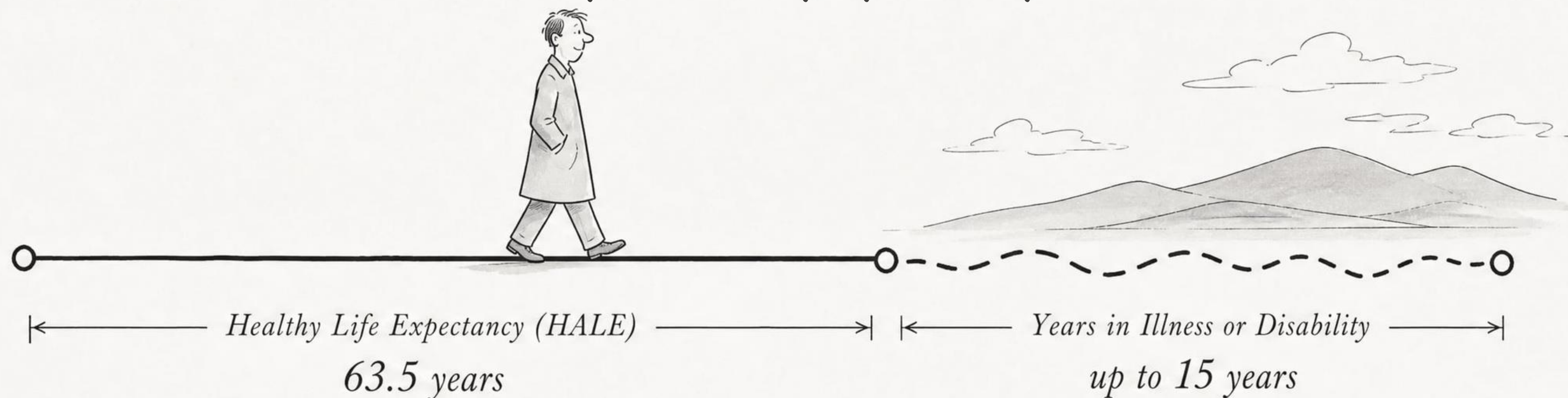
Genetic and hereditary
conditions
(6% of births)



Geriatric and
end-of-life care

Longevity vs. HALE

— A clear gap between living longer and living well. —



Global life
expectancy:

73.1 years

The average length of life
worldwide.



Healthy Life
Expectancy
(HALE):

63.5 years

The average number of years lived in good
health.



The Illusion of
Progress:
People spend up to
15 years

in illness or disability.

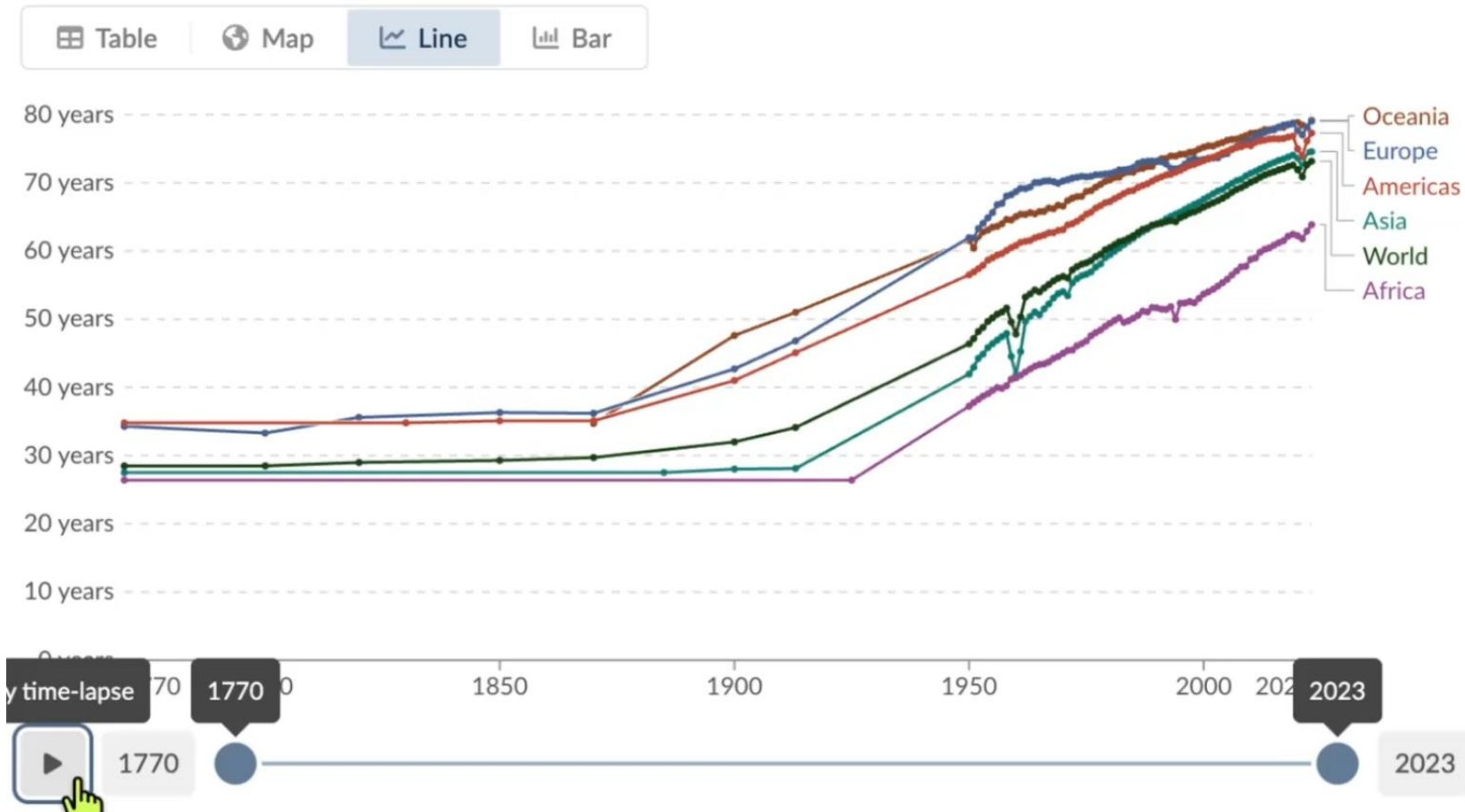
More life, but not always more health.

Life Expectancy Vs HALE

Life expectancy

Our World
in Data

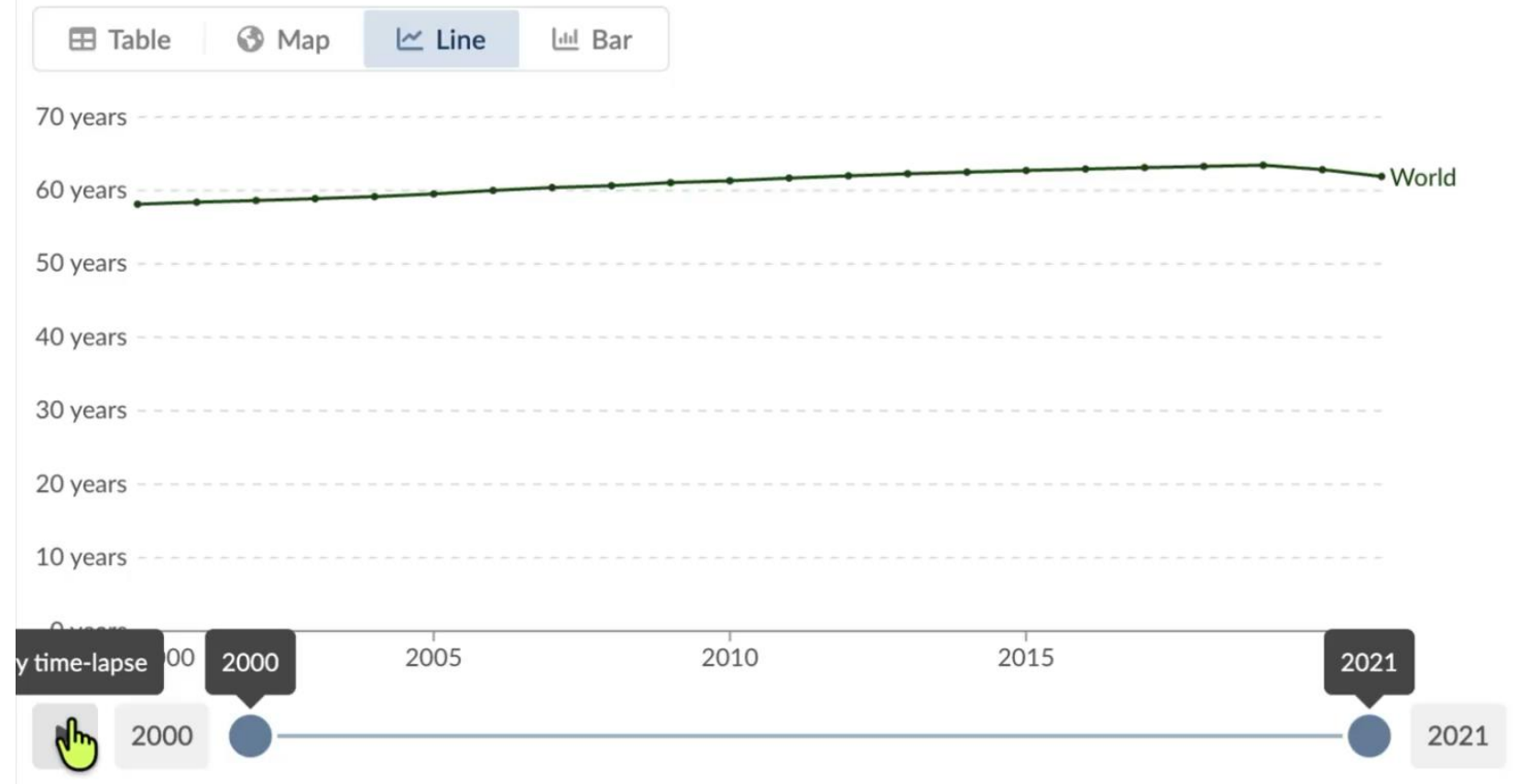
Period life expectancy is the number of years the average person born in a certain year would live if they experienced the same chances of dying at each age as people did that year.



Healthy life expectancy, 2000 to 2021

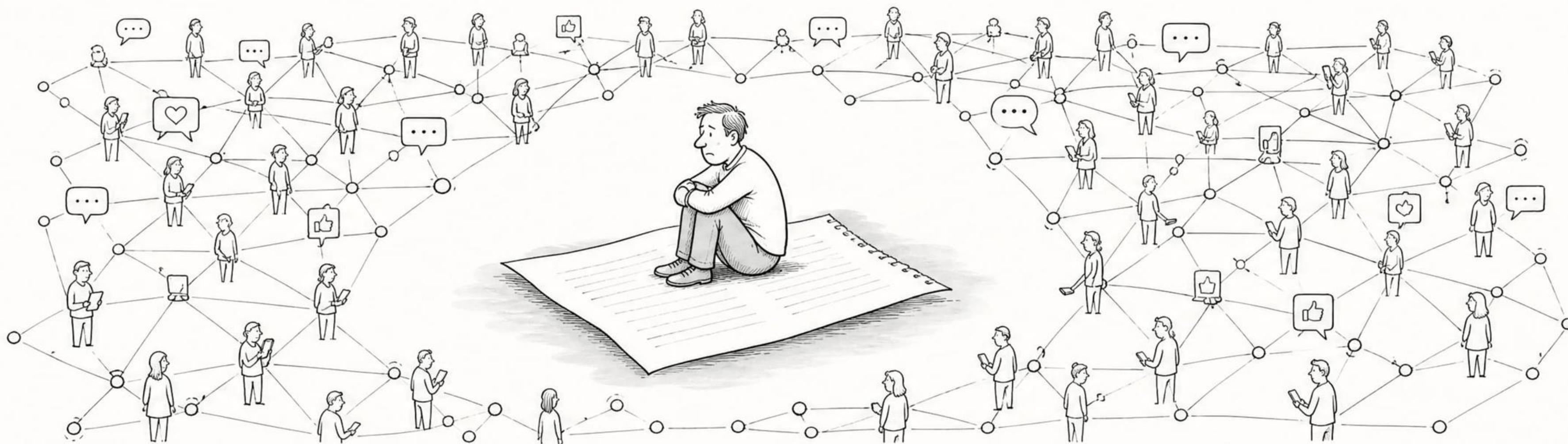
Our World
in Data

The estimated average number of years lived free from disability or disease burden. This is based on period life expectancy, after adjusting for the number of years lived in less than "full health" due to disease and/or injury.



Are we living longer, or dying slower?

The Loneliness Epidemic: A Silent Public Health Crisis.



1 in 6 people globally experience loneliness;

associated with ~871,000 deaths per year—
about 100 every hour.

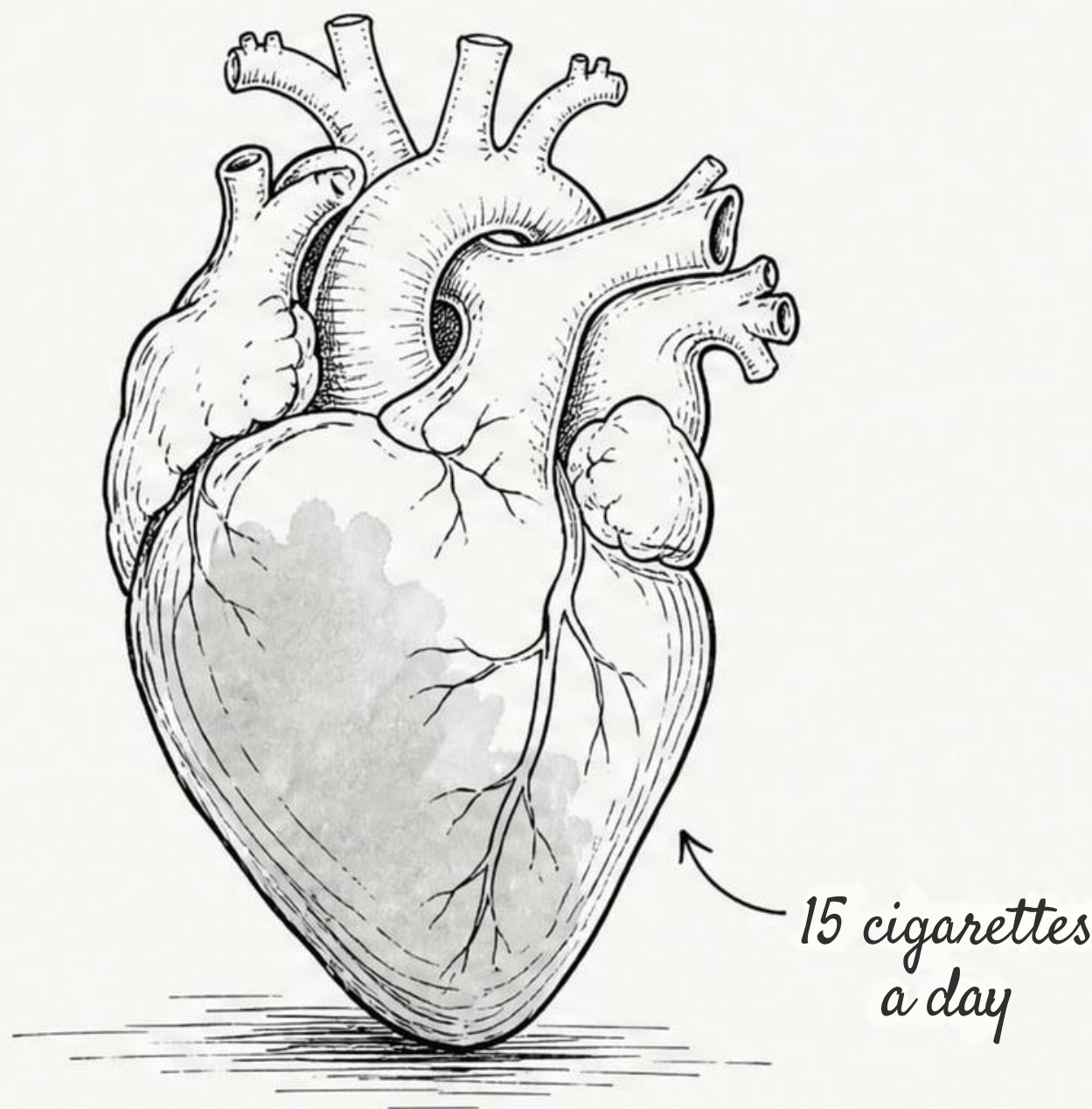
The Biological Toll of Social Disconnection

— *Loneliness Costs More Than We Think.* —

— KEY POINT 1 —

Loneliness is as
damaging to health as
smoking 15 cigarettes
a day.

— *compare the invisible.* —



— KEY POINT 2 —

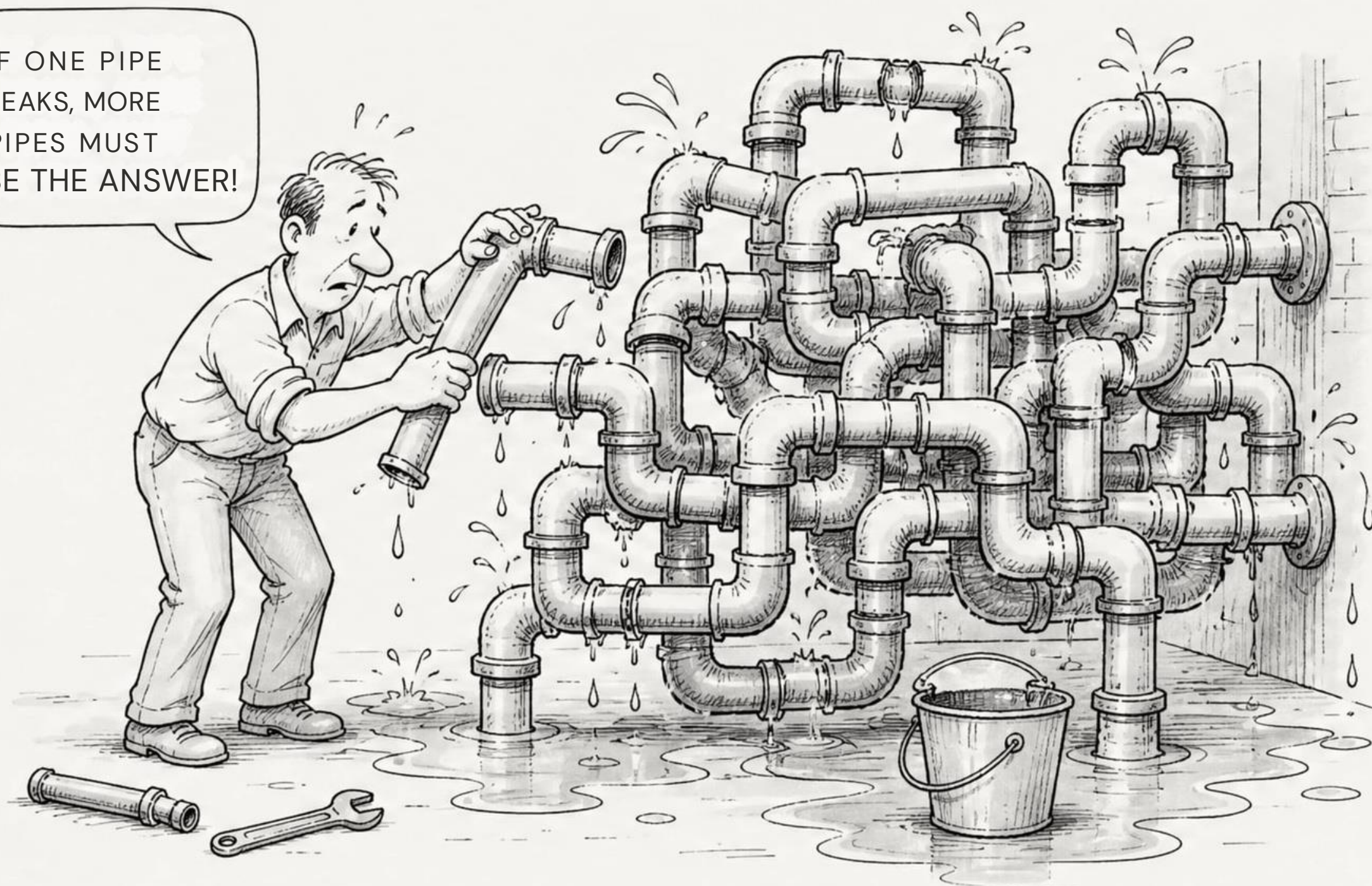
It significantly raises
the risk of cardiovascular
disease, type 2 diabetes,
dementia, and
early mortality.

— *the impact runs deep.* —

Why Patching Fails: The 25% Waste Problem

Key Insight: Investing more into a broken system simply produces a bigger broken system.

IF ONE PIPE
LEAKS, MORE
PIPES MUST
BE THE ANSWER!



25%

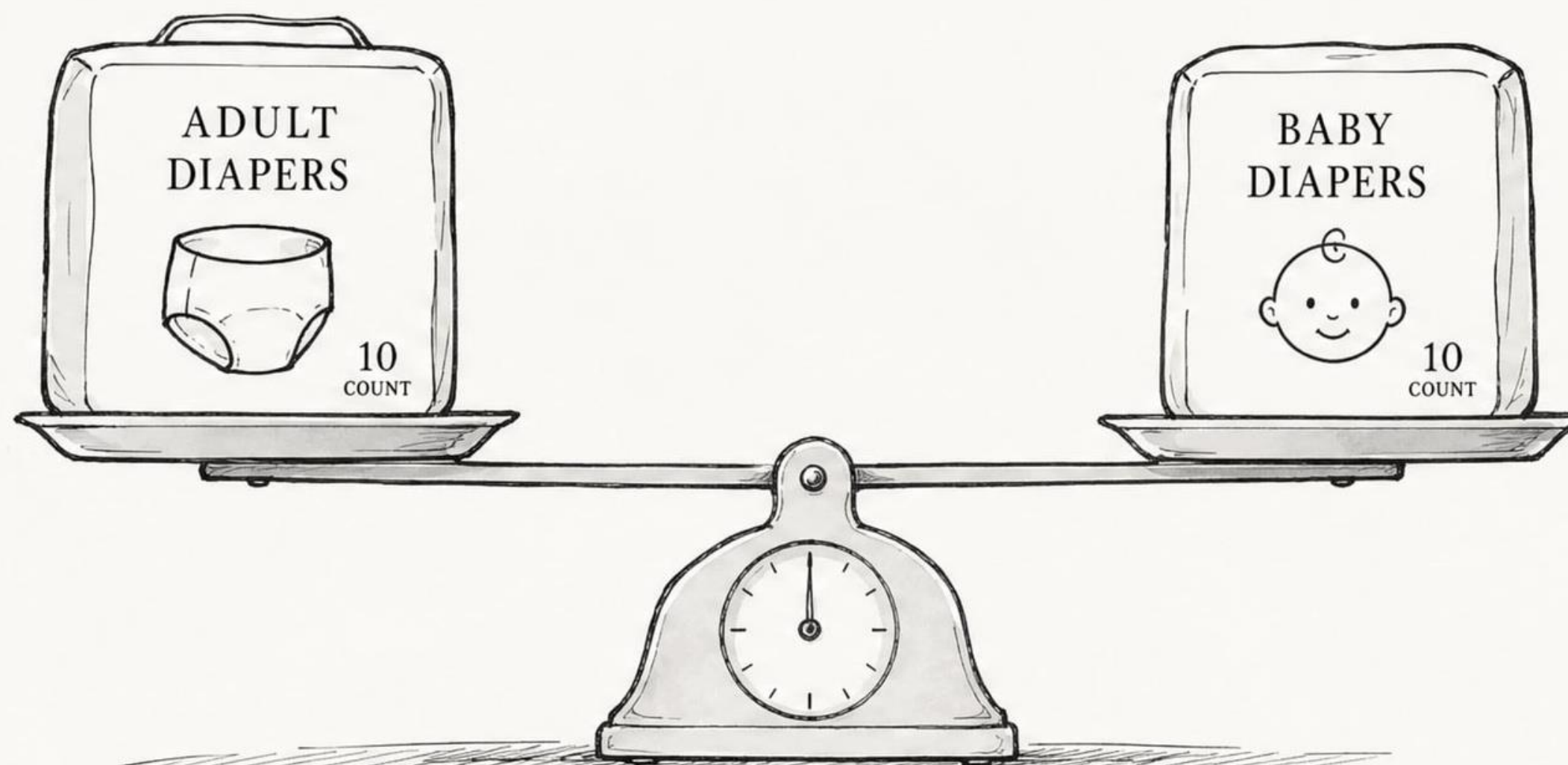
of US healthcare
spending is waste
embedded in the
existing architecture,
resistant to
incremental reform.

Demographic Tipping Points

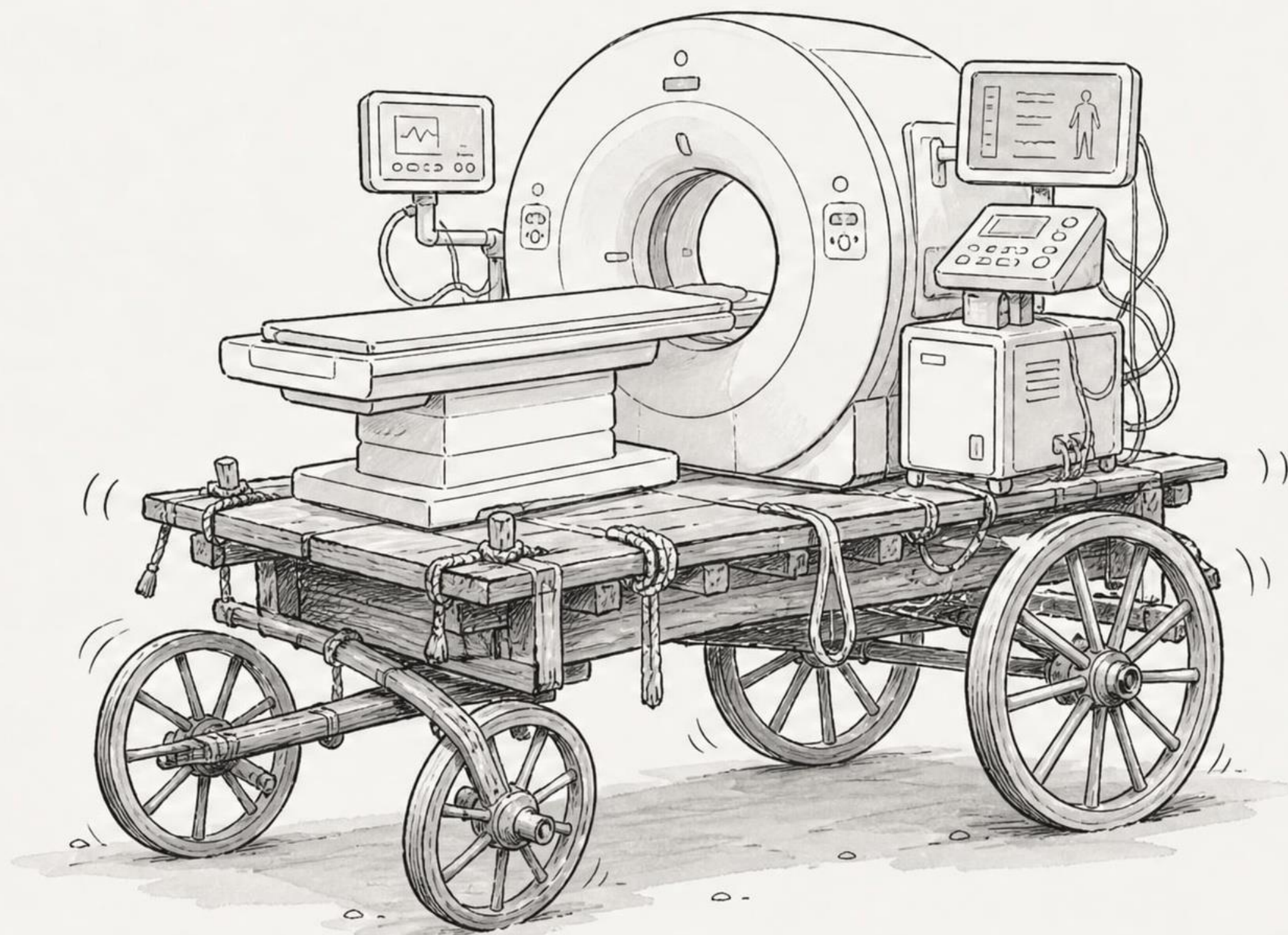
Ageing and the Payer Crisis.

— KEY INSIGHT —

The 21st century's most under-rated economic indicator is the tipping point where adult diapers outsell baby diapers.



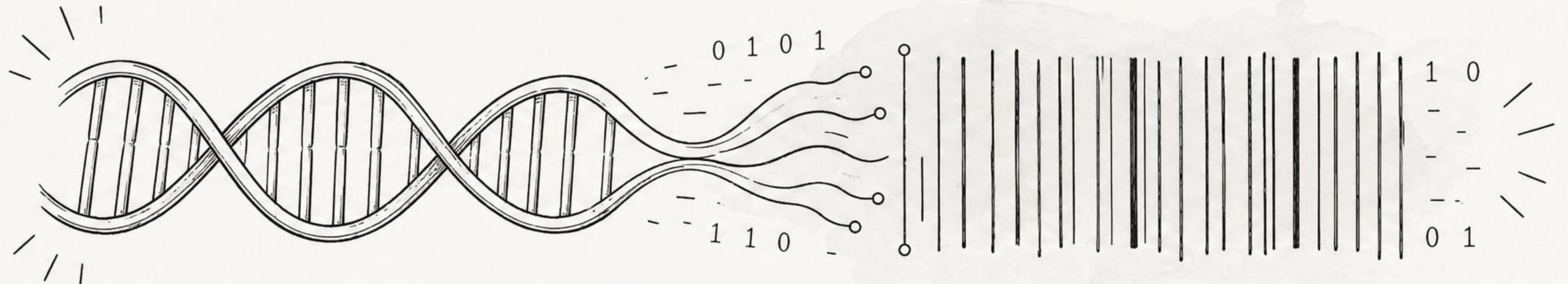
The Design Problem



Inherited Systems
in a Modern World

Systems designed for
the 18th and 19th centuries

New Lines of Treatment: Beyond the 1950s Model



DATA

WHOLE-GENOME
SEQUENCING COST

\$100M
(2001)



UNDER \$200
(2024)

A 500,000x
REDUCTION.

New Specialties: The Workforce of 2050.

— *Key Insight: The medical specialties of 1950 cannot solve the disease burden of 2050.* —



— CONCEPT —

We need
behavioral cardiologists,
planetary-health
pulmonologists, and
longevity geriatricians.



Asset-Light Healthcare: Medicine Without the Building

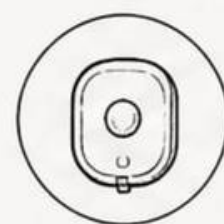
KEY INSIGHT

*Medicine Without the
Building.*

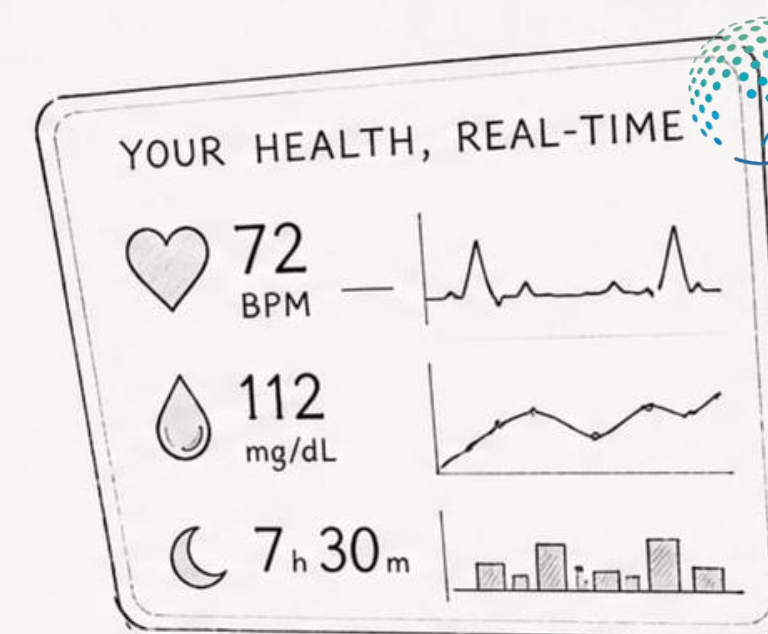
DATA



Global smartwatch
shipments crossed
150 million in 2024.



Continuous glucose
monitor usage
grew 400%.



The Parallel Build: Lessons from Telecom & Energy.



KEY INSIGHT



Mobile telecoms didn't fix copper wires; they built around them. Healthcare must do the same

CONCEPT



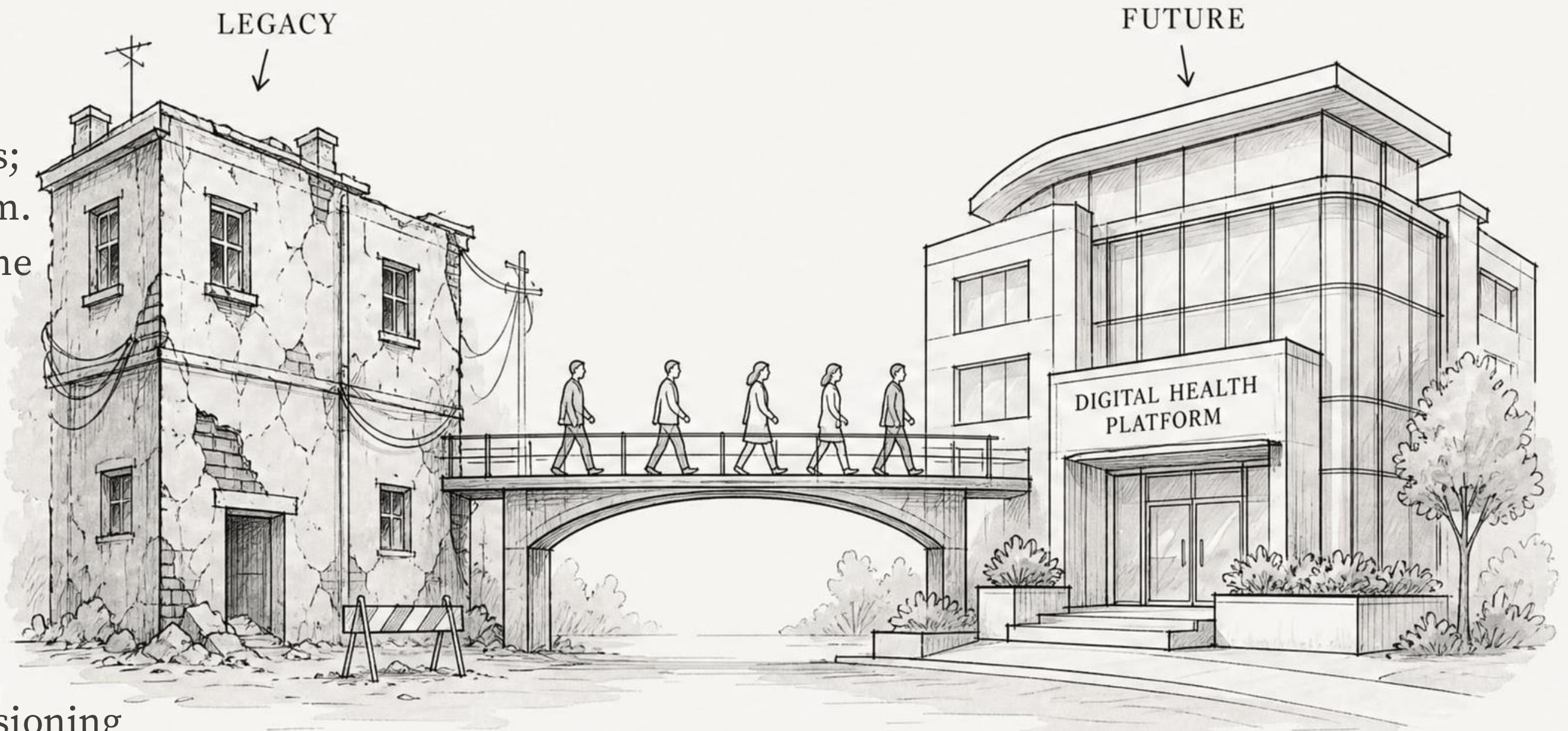
Parallel Build



Migration



Graceful Decommissioning of Legacy Systems



Constructing Purposeful Progress

KEY INSIGHT



The transition to a 21st-century system is a policy decision, not just a technological one.

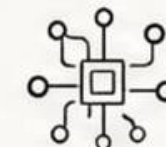
CALL TO ACTION



Redesign healthcare to be equitable, digitally enabled, and truly human-centered.



EQUITABLE



DIGITALLY
ENABLED



HUMAN-
CENTERED



*Let's build a health system
that works for everyone.*

Global Commission for 21st Century Healthcare

Reimagining the 21st Century Healthcare System



Let us Redesign a Healthcare System for the 21st Century

- **Vision for the Healthcare System in the 21st Century** particularly the **key elements** that will define future healthcare systems
- **Applications of AI** transforming healthcare delivery, access, patient engagement, and clinical outcomes
- **Emerging new medical specialties** and interdisciplinary roles shaped by AI
- **Longevity and increasing life expectancy as an emerging challenge** for healthcare systems and society, and how health systems should prepare for this transition
- **Re-examining the three-tiered healthcare structure & healthcare workforce** in light of technology-driven barrier reduction

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Deliver a comprehensive
annual report on “**The
Healthcare System We
Need**”

Write to us at
founder@parliament.health

With **UHC.org** as its
platform, Health Parliament
is taking bold steps toward a
world where everyone has
access to healthcare.