Honorable President of this 54th Directing Council
Your Excellency, Don Juan Orlando Hernández, President of Honduras
Honorable Ministers and Secretaries of Health
Distinguished Delegates
Distinguished Members of the Diplomatic Corps
Esteemed colleagues and guests

A very Good Morning to you all

Today, it is my very distinct pleasure to welcome you all to this the fifty fourth annual meeting of the PAHO Directing Council. You have journeyed from every corner of our region, and beyond in some instances, to be here, and I sincerely thank all of you for securing this time on your very busy schedules to engage in what will surely be a rich and productive discourse about the health of our Region.

This morning, I am particularly delighted to welcome you all to this PAHO house. Yesterday marked fifty years since this building was first opened in 1965 and the fiftieth consecutive occasion on which the PAHO Directing Council has been convened in this specific building at 525 Twenty-Third
Street, NW, Washington, DC. It is, therefore, an auspicious day in our history.... Happy Anniversary to us all!

On a more solemn note, I would like us to remember the many persons in our Member States who have suffered loss of life, property, income and health due to disasters and disease outbreaks over the past twelve months. We specifically remember the residents of Chile and those in my homeland of Dominica who more recently have had to endure the assaults of nature. Given the fact that we live in a global village, we must also remember those in other WHO regions who lost their lives in the extensive Ebola outbreak as well as in the Nepal earthquake.

While PAHO is the oldest international technical public health agency in the world, having been founded in 1902, our uninterrupted growth and successful functioning have been due in no small measure to the valued and insightful guidance that the Secretariat has received from the Member States for more than a century. However, now more than ever, in this complex, ever-evolving global health arena we continue to seek your input, your fresh ideas and your wisdom as we navigate new waters to achieve the goals of the post-2015 sustainable development agenda as well as those of our Strategic Plan, 2014-2019.

As we have journeyed over these many decades under your watchful guidance, I believe that we have collectively achieved much- ranging in the early years from intense capacity building of national human resources for
health to the eradication of small pox, the elimination of poliomyelitis and more recently rubella and congenital rubella syndrome, to the application of low cost technologies for the prevention and control of cervical cancer in underserved populations to a 2014 commitment to universal access to health and universal health coverage, building further and more explicitly on the 1978 Alma Atta goal of Health For All.

Our cumulative achievements have been realized despite the numerous challenges that we have encountered along the way and in the face of the new and emerging challenges that we face daily as the world evolves. I am ever more convinced and excited that together we are creating living policy reforms that extend from the corridors of government to the cities, towns, and villages, and into the very homes of the populations we serve. These reforms do truly transform and enhance the quality of people’s lives.

Whenever I visit Member States, in addition to my advocacy engagements with Presidents, Prime Ministers, Ministers of Health, Foreign Affairs and others, I embrace every opportunity to observe our programs in action, and to understand from those involved, what works well, what is still of concern and what lessons we have learned. I am greatly encouraged by the innovation and progress that I have observed during the 17 visits that I made to Member States during this year.

In Ecuador, for example, I noted with great interest that the Government, as part of a continuing process, was actively establishing measures to
improve quality in its health system and in this regard, it had created the Agencia de Aseguramiento de la Calidad de los Servicios de Salud y Medicina [ACCESS] that will work to assure the quality of pre-paid health and medical services in that country. Developments such as these will potentially lead to enhanced quality in Ecuador’s health services and systems.

In Chile, I have observed significant progress regarding the labeling of foods that are high in calories, sugar, salt and fat as new regulations were approved by the Government. This innovative development will assist Chileans in making better decisions re nutritious food choices and in long term reduce the potential development of risk factors for the Non-Communicable Chronic Diseases. Similar progressive initiatives related to food labelling have also been noted in Ecuador, Mexico and the USA.

In the Commonwealth of the Bahamas, an archipelago of 700 islands and cays spread over 100,000 square miles of ocean, the Government has committed itself to the introduction of a national health insurance [NHI] initiative in order to extend universal health coverage and access to health for all of its inhabitants. They have been working assiduously with different sectors and stakeholders to determine optimal benefit packages and NHI structures in the face of challenges from some, whose primary goal is the protection of their financial interests.

On another front, Nicaragua and Uruguay became the first two countries in
the world to ratify the World Health Organization’s new Protocol to Eliminate Illicit Trade in Tobacco Products. I applaud these Member States for taking this fearless step towards reducing tobacco consumption and for setting a sterling example that others can follow.

Every day, I see the ingenuity, courage and fortitude of Member States as they valiantly attempt to improve the health of their peoples even when they must struggle against obstacles erected by those whose fundamental interests may be at variance with protection of the public’s health. In some instances, Ministries of Health have been forced to struggle even with their national medical associations and councils.

Clearly, the Americas region is a trailblazer, largely thanks to your collective leadership and your tireless work in improving the social conditions and health systems within your countries. However, I do recognize that in some areas, we feel some frustration, as the required transformations and positive long-term impacts are not occurring as speedily as we would wish.

Reducing maternal mortality in the Region [MDG Goal 5] is one example of a goal that has been plagued by slow pace and insufficient progress. While maternal mortality has declined nearly 40 percent in Latin America and the Caribbean between 1990 and 2013, this was far below the 75-percent target called for in the Millennium Development Goals. According to the most recent data, in 2013 more than 9,000 women in our region died from maternal causes such as obstetric hemorrhage. This is indeed an
unacceptable occurrence. It continues to be an indictment on the access to health and the quality of care in our Region.

Another area requiring additional Member State dialogue and closure relates to our engagement with non-state actors. Communication with this sector is essential in order to foster an improved understanding of critical health issues, and to ensure access to the best quality and most affordable public health interventions for the Region. Sadly, just last week the press here in the United States reported that the price of an older drug [Daraprim] used to treat malaria as well as toxoplasmosis had jettisoned from around US $13.50 to $750.00 per tablet overnight!

Looking ahead, therefore, we must simultaneously protect the gains that we have already realized, address our unfinished agenda items, and build a bridge to address the broader and even more ambitious Sustainable Development Goals. Adequate funding is, of course, critical to our success, along with effective coordination among and between the various sectors and stakeholders in order to make the best possible use of all of our resources- human, financial, technological, and intellectual.

On Friday last at the United Nations, 193 countries adopted the 2030 Sustainable Development Agenda, which aims to eradicate poverty, fight inequality and tackle climate change over the next fifteen years. This agenda, which consists of 17 goals and 169 targets, seeks to boldly address the indignity of poverty and inequity that plague human development and
proposes development that is people-centered, holistic, comprehensive and integrated. I am happy to report that the PAHO Strategic Plan, 2014-2019, is fully aligned with the objectives and approaches of the Sustainable Development Goals.

Last week the Pontiff-Pope Francis, who hails from our Region, repeatedly reminded us of the all-important need to ensure that the poor, the disadvantaged and the vulnerable are afforded the opportunities to develop and to live with the highest dignity, and that we work to preserve nature and life. He considered this our moral obligation.

It is my hope and plea that these sentiments and global commitments will provide a fitting context for our deliberations during this week. These joint deliberations will help us better to define our agenda, sharpen our focus and set the tone for the coming months. I do look forward to these discussions with great enthusiasm. We have a full and interesting agenda before us. We will address a wide variety of topics, public health as well as critical programmatic and policy issues, in addition to being updated on technical, administrative, and financial matters.

Finally, from my personal perspective, it is immensely gratifying to be a part of this distinguished assembly, defined and unified by our wholehearted dedication to the health and well-being of those who live in the Americas. Inspired by your dedication and leadership, I am as confident as ever that we will have a successful journey together.
Thank you very much.

28 September 2015