



PAN AMERICAN HEALTH ORGANIZATION
WORLD HEALTH ORGANIZATION



49th DIRECTING COUNCIL
61st SESSION OF THE REGIONAL COMMITTEE

Washington, D.C., USA, 28 September - 2 October 2009

CD49/DIV/8
ORIGINAL: ENGLISH

**REMARKS BY THE WINNER OF THE PAHO AWARD
FOR ADMINISTRATION
DR. MERCELINE DAHL-REGIS**

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Madam Director, President of the Assembly, Members of the Executive Committee, Distinguished Delegates, family and friends.

It is indeed a great honor to stand in this august Assembly to express my gratitude and to sincerely thank you for this award in public administration. Public service and public health have been the most rewarding and fulfilling experiences of my medical career. It is said that success has many fathers and I owe a debt of gratitude to many persons, some of whom are present here with me and one very significant other person, who is present here with me in spirit.

Ladies and gentlemen, I am greatly indebted to the Prime Minister of the Commonwealth of The Bahamas, the Right Honorable Hubert Ingraham, for making it possible for me to serve my country as Chief Medical Officer. I am also grateful to my Caribbean Chief Medical Officer colleagues, who have shepherded me and are still teaching me how to be a good public servant.

I am pleased to accept this award on behalf of women in Public Health in general and female physicians in particular. The road has not been easy for me, but unwavering family support and good mentors made the difference in my career. In The Bahamas, the first female graduated from medical school in 1964, one hundred and twenty seven years after the first Bahamian-born male and more than a century, since Dr. Elizabeth Blackwell, the first female American, graduated from medical school, in 1849. I entered medical school in 1968, and had the good fortune to be taught by many great men including Professors Cruikshank, Stuart, Hoyte, Koop, Sir Harry Annamantudu, Fred Burke and one, who is present in this room today, Sir George Alleyne. I wish to publicly say thank you to each and all of you.

Ladies and Gentlemen, historically, Bahamian physicians and health workers have made significant contributions in public health, both internationally and at home. Indeed, the first Bahamian-born doctor, Dr. Thomas W. Johnson, 1837 – 1895, the son of a “Loyalist” who fled the American Revolution, practiced on the Island of Harbour Island until his death. It is recorded that Dr. Johnson survived a cholera epidemic by bathing naked in the sea after he had seen sick patients. It is noteworthy

that during this period, in another place around the world, Dr. Ignas Simmelweiss, in 1860, demonstrated that hand washing decreased mortality associated with puerperal fever. He showed empirically that there was a 35% greater mortality among postpartum women at the Doctor's Hospital, when compared to a midwives clinic, which practiced improved sanitation measures. This was also in the period during which Louis Pasteur developed the germ theory and validated Simmelweiss' work. It is unfortunate that Simmelweiss died from head injuries in an asylum. We are truly grateful that there were no asylums in The Bahamas, because it might have been Dr. Johnson's fate, in that time period, when a naked doctor bathing frequently in the sea, might well have been thought to be worthy of committal.

It was in 1987, at the 32nd Directing Council of PAHO, here in these very same chambers, that Dr. Norman Gay, the Minister of Health for the Commonwealth of The Bahamas, challenged his colleagues of the Region of the Americas to eradicate Poliomyelitis. The positive response to this challenge is today manifested in the health of our children. Much has been accomplished in medicine over the last twenty years.

Ladies and gentlemen, today, we live in an unprecedented period of fast moving and amazing medical discoveries, matched, however, by new and evolving medical challenges. There have been many exciting developments of new therapeutic agents, amazing medical devices/equipments/technologies, the broad based application of genomics, and the increasing use of robotics to name a few. Similarly, we offer more specialized services and utilize technologically advanced disease treatment. It is both fascinating and costly. However, the end result is that there are fewer people receiving treatment and not necessarily care. This is well described in the book "Money Driven Medicine" by Mahar and also by the tremendous research conducted by investigators at Dartmouth College, in the United States. As the health care debate continues in the USA and also in my country, we often refer to medical care for people, not in societal terms but rather in economic terms.

Colleagues, as we embrace these new technologies, we must recognize that primary health care not only provides quality care, but that it is a better investment of our health dollars. Indeed, the evidence confirms that primary care provides better outcomes for many of the world's populations. It is, therefore, imperative that **people** remember the focus of our work.

We know that simple hand washing with soap and water saves lives, as it did then in 1860 and as still does now in 2009, as we grapple with the global H1N1 pandemic. We know that immunizations provide an

inexpensive method, not only for saving children's lives but also for enriching the quality of life.

The administration of Measles Mumps and Rubella vaccine is probably the most cost effective public health intervention. The decision to immunize adults universally with the MMR vaccine was made by the simple deduction that if women who were immunized in the reproductive period, were nonetheless still having babies with congenital rubella syndrome, it necessarily meant that men were reservoirs for the virus. It was these observations that lead us to suggest a mass campaign to provide the vaccine to those who needed it.

I am grateful to the leadership of PAHO and its team for guiding the social communication required for the development of this MMR campaign as well as the logistics for the monitoring and evaluation of this new approach. The social mobilization provided lessons to be learnt in approaching males for immunization. We experienced no difficulties with the promotion of the vaccine. Having stated that the MMR vaccine prevents you from being sterile, men were lining up and asking for the vaccine, or in colloquial terms, for that "thing". Logistically, The Bahamas, enjoyed a strong public health infrastructure that allowed us to deliver vaccines to 98% of the childhood population, and the success of the campaign was due to the tremendous nursing staff, who managed the EPI programme. It should be noted that during this exercise, a number of pregnant women were inadvertently immunized with MMR and as we followed the developmental outcome of the children, we are indeed grateful that they did not demonstrate any ill effects. This effort to eliminate indigenous rubella virus transmission and Congenital Rubella Syndrome in the English-speaking Caribbean, through universal vaccination of adult males and females, was first implemented in the Bahamas and we are very happy to note that this approach was eventually adopted as a Regional strategy.

Ladies and Gentlemen, I come from the Caribbean, a region that is the known for its pristine beauty, but more than that, a region which has demonstrated the enhanced benefits of cooperation in health. Caribbean leaders came together as early as 1930 to collectively address the high infant mortality greater than 200 deaths per 1000 live births. The Pan American Sanitary Bureau [PAHO] is credited with convincing our governments to institute policies that emphasized water and sanitation, nutrition and the essentials of primary care. This led to the establishment of an infrastructure that gave attention to the development of a Maternal and Child Health system. The result was a reduction in the Infant Mortality Rate to less than 20 per thousand live births in a number of Caribbean countries. In 1993, the delivery of Maternal and Child Health Services in The Bahamas was greatly strengthened with support from Drs. Antonio Solis [Mexico], Richardo Swartz, Diallo Diaz and Frank Simini

from CLAP in Uruguay. Before there was distance technology, there was the telephone. The CLAP team was accessible, whenever we needed them and they were willing to modify the Simplified Perinatal Record to capture data on pregnant women with sickle cell disease as well as those with HIV.

This record keeping system has strengthened the health care both in the private and the public health system for expectant mothers and their offspring.

In The Bahamas, the Maternal and Child Health Services, which include maternal care, child care, the Male Initiative Program, Nutrition Unit, Adolescent Care and Services and the Scan unit, were off-shoots of a strengthened health care system, which supported the new direction in primary care services that focuses on system building rather than on treating diseases. Undoubtedly, this can be a good example for delivery of services for those persons with HIV disease, who require care treatment and support.

The constant support of the CARICOM COMMUNITY together with significant support from the Pan American Health Organization through the Office of Caribbean Program Coordination has been pivotal for the successful implementation of a number of sub-regional programs. The Caribbean Cooperation in Health, I II III, that identified regional health priorities for joint action; the Cricket World Cup that enhanced national capacities to implement the International Health Regulations; the Pan Caribbean Partnership [PANCAP] - a coordinating mechanism for HIV/AIDS response; and most recently, the promotion of Caribbean Wellness are all unique examples of Caribbean solidarity in health. Regional co-operation has also paid significant dividends in meeting the Millennium Development Goals.

Ladies and gentlemen, we still have challenges; the Caribbean is challenged to meet a number of indicators that require reductions in rates that are already very low, such as the maternal mortality rates. The Region is challenged to address the epidemic of obesity, often due to over nutrition, and although Researchers at the University of the West Indies and the Tropical Medical Research Unit have contributed significantly to the management of diseases related to under-nutrition, such as Protein Calorie Malnutrition, kwashiorkor and Marasmus. Research is, however, needed in the sub-region to address the lifestyle diseases.

The authors of the Report of the Caribbean Commission on Health and Development tell us that much work needs to be done. There is still unfinished business.

I am particularly fortunate to have had very good teachers and also great mentors and in my career, good students can become great teachers as well. I feel that I have learned as much from my students as I have given to them. The joy that teaching brings can not be described when you see your students develop meaningful connections with their patients, families and communities and become involved with population based medicine. Without an increase in a number of primary health care providers, we will neither have a healthy or a prosperous nation.

We have a new generation of medical practitioners, whose expectations are quite different from ours. Let us meet them where they are; let us help them to choose careers in public service and primary care. The formula for success in this endeavor is very simple- good public health mentorship and role modeling at the earliest possible exposure in medical training, while we embrace the advances in hospital medicine. We can also exact a balance in social and preventative medicine as some of my great teachers did, notably Professors Kenneth Standard of the UWI, Hidrus Poindexter of Howard University and Tim Baker of John Hopkins University. More specifically, I have learned from them and from my practice as a pediatrician and child development practitioner that the greatest satisfaction one can achieve is to improve the lives of children and young adults.

Once again, on behalf of my country, its government, the health workforce and women in medicine in particular, I accept this award and leave you with the words of J.F. Clarke:-

*“Give me within the work which calls to-day,
To see Thy finger gently beckoning on;
So struggle grows to freedom, work to play,
And toils begun from Thee to Thee are done.”*

Thank you and good evening.