Remarks for Dr Carissa Etienne at launch of joint PAHO/WHO and World Bank publication, *Toward Universal Health Coverage and Equity in Latin America and the Caribbean: Evidence from Selected Countries* - 22 June 2015

- Good afternoon, everyone. Thank you for coming.

- At my investiture as Director of PAHO, I said: “Of the many challenges this Organization and our Member States face, one goal stands atop all the others. It is providing universal access to health care across the Americas.”

- I meant that all people—all—should be able to obtain the health services they need without suffering financial hardship in accessing them.

- Two-and-a-half years later, I have not changed my mind. Universal access to health and universal health coverage in the Americas remains my highest priority.

- And I am convinced that the Member States feel every bit as strongly about it as I do.

- In October 2013, they unanimously adopted universal health as a key pillar of their new six-year Strategic Plan.


- We commit not only to succeed but to be the first of the six WHO regions to achieve universal health.
It makes no difference whether you specialize in communicable or noncommunicable diseases, or in health systems, or in emergency response, or in child and maternal health. If your job is saving lives then you should want universal health.

That’s because it is the linchpin. Everything that we do here depends on it. Everybody here has a stake in it. And, as I recently told my senior staff, I expect everyone here to be a champion for it.

The rising tide of universal health lifts all boats.

To get there, we must build the strong, flexible, innovative and resilient health systems that we need to achieve our disease-specific goals and to tackle future health challenges.

To get there, we must dismantle the generic barriers to health—the weak capacity, the inefficient models of care, the inadequate financing and governance—that inhibit us.

To get there, we must tackle the inequities in the social determinants of health that persist within countries and the region as a whole.

This is the context for today’s launch of the joint publication, *Toward Universal Health Coverage and Equity in Latin America and the Caribbean: Evidence from Selected Countries*.

The context is a region of the Americas striving to obtain universal health for all its people, and of two international institutions, the World Bank and the Pan American Health Organization, that have joined forces to help.

This outstanding publication advances the goal of universal health in the Americas.
The reasons are several.

First, it documents the good news that countries are making meaningful progress toward universal health.

- More people are being covered.
- Health services are expanding, and there are fewer barriers to them.
- Public spending is rising and out-of-pocket payments are falling.
- The gap between rich and poor is narrowing.

Strikingly, it points out that reforms enacted since the early 2000s have resulted in at least nominal guarantees of affordable health care for an additional 46 million people in nine of the region’s countries.

Second, it confirms that health outcomes are improving.

Third, it tells us what policies are working best in the region. Among these are:

- Health systems that focus on population coverage and that offer a guaranteed and extensive package of services
- Integrated health networks
- Pooled financing that opens doors for people lacking the capacity to pay

Fourth, it presents evidence to substantiate our claims about the importance of universal health.

Last, it reveals the sober truth that we have far to go. For example:

- Out-of-pocket spending is still too high and is still driving far too many people into poverty.
The gap between rich and poor, while narrower, remains vast.

Inadequate attention is being paid to the noncommunicable diseases—the cancers, strokes, heart attacks, diabetes and chronic respiratory ailments—that account for most of the region’s deaths.

Most countries maintain fragmented health systems, with discrepancies in benefits packages and in quality of care.

But I know, we will get there, thanks to publications like this one, which show us the way, and to the strong consensus for universal health in the region.

We must get there, because:

The most vulnerable people in the region need it, especially the 150 million who live in poverty.

The Member States have said in no uncertain terms that they want it.

It is inherently right and good to reduce the iniquities that perpetuate human suffering, offend human dignity and inhibit the fuller realization of human potential.

Ladies and gentlemen, I want to publicly thank our former WHO colleague, Dr Jim Kim, President of the World Bank, for the resources and energy that he and his organization are pouring into universal health.

The World Bank definitely gets it: Health is a powerful tool of economic development and poverty reduction.

This publication is just one manifestation of the World Bank’s support for health in the Americas. I am hugely grateful for this and look forward to more such fruitful cooperation and collaboration.
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- Congratulations to the editors and main authors, Dr Gisele Almeida of the Pan American Health Organization, and Dr Tania Dmytraczenko of the World Bank, and to the many other co-authors.

- Another job well done!

- And now I’d like to give the podium to Dr Tim Evans, senior director of the World Bank’s Health, Nutrition and Population Global Practice.

- Thank you.