Change in Health, Health for Change

Inaugural Address of Dr. Carissa F. Etienne as Director of the Pan American Health Organization
January 31, 2013
Washington

Honorable Mr. Roosevelt Skerrit, Prime Minister of Dominica

Honorable Senator Ann Peters, Minister of Health of Grenada and President of the 28th Pan American Sanitary Conference

Honorable Kathleen Sebelius, Secretary of Health & Human Services of the United States of America

Mr. Albert Ramdin, Assistant Secretary-General of the Organization of American States

Dr. Jacob Kumaresan, Representative of the Director-General of the World Health Organization

Dr. Mirta Roses Periago, Outgoing Director of the Pan American Sanitary Bureau

Distinguished Ministers of Health from Costa Rica, Haiti, Jamaica and Trinidad and Tobago

Distinguished Ministers of Health participating via Internet

Honorable Esther D. Brimmer, Assistant Secretary of State for International Organization Affairs

Distinguished Rodney Bent, Representative of the Secretary-General of the United Nations

Distinguished Members of the Diplomatic Corps
I am truly humbled, yet honored, with the oath of office I have just taken and with the trust which has been bestowed upon me. Let me begin by thanking the Member States of PAHO and the WHO Executive Board for granting me this opportunity to move forward the mandate of this great Organization. This mandate is proclaimed in the first chapter of our Constitution, to “promote and coordinate efforts of the countries of the Western Hemisphere to combat disease, lengthen life, and promote the physical and mental health of the people.”

That mission remains as important and relevant today as when it was first conceived. It has been advanced by the Directors who have preceded me, including Sir George Alleyne and Dr. Mirta Roses. I join many others in thanking her for her fine stewardship as Director and her nearly three decades of service to this Organization.

We face both challenges and opportunities today across the Americas. Ours is a region experiencing sustained economic growth and improved governance. Incomes are rising and middle class populations are growing.
Member States are making progress toward realizing the Millennium Development Goals.

Our hemispheric institutions, such as the Organization of American States, and regional alliances – such as Mercosur, Unasur, SICA and CARICOM – are enabling us to better coordinate policies and share best practices. We are more integrated in the global economy and with multilateral institutions.

Progress has been realized across a broad range of important health indicators. Infant mortality rates have declined. More children are protected through immunization. Life expectancy continues to rise. Investments have been made in development areas that directly impact human health – such as food security, nutrition, and access to safe water and sanitation. Our Member States have made bolder commitments and allocated greater resources to providing access to health services for all of their populations.

In addition, more people have access to information about their health and healthy living – to new technologies that can educate them as well as to those that can treat and cure them. And beyond just preventing and treating health conditions, we are also beginning to address important social and environmental determinants that directly impact human health.

These conditions converge to create a unique moment for health in the Americas. We have a powerful potential for health to be a driving force for change.
Nevertheless, our progress has not been experienced equally. And new challenges are emerging. For example, our demographics are changing. Even as we work to provide care so that every child and young adult can have the chance for a healthy, productive life, we also need to care for a larger population of older adults.

We must address the large and growing burden of non-communicable disease. This includes cancer, diabetes, heart disease and chronic respiratory illnesses. These are no longer just “diseases of the rich.” They constitute the leading causes of premature death and disability across our region. They also cause disproportionate suffering among lower-income groups and contribute to rising health costs.

We also cannot ignore the quiet killers, such as obesity, physical inactivity, tobacco consumption, and the harmful use of alcohol. These can be effectively reduced, and treatment improved, through utilizing the WHO “best buy” interventions.

Public policies can help shape the way we live, work and play, creating environments for healthier life choices. Investing in these interventions and mobilizing political support for their implementation, will help people live longer and healthier. In addition, certain social and environmental determinants – factors such as where people are born, and how they live, work and age – also lead to health inequities.
Many across the Americas have benefited from the region’s sustained economic growth and rising incomes, not all individuals, communities and countries have progressed evenly. Poverty levels have declined over the past three decades. But today there are still more than 150 million people in our region living in poverty. At least half of those live in extreme poverty. And this is the reality of our region.

We must continue working to extend the benefits and possibilities of health throughout the Americas and in each of our countries. This means focusing special attention on the most vulnerable and marginalized groups, especially the poor. While their needs are greatest, their voices often go unheard.

We must also overcome the barriers of health access for indigenous communities, ethnic minorities, people with disabilities, women and children, and older adults, among others. Investing in their health and well-being is critical to alleviating poverty and empowering all people to realize their fullest potential – contributing to their families, communities and societies, and indeed to our region’s collective future.

In our technical cooperation efforts we will continue to prioritize action in the countries with greatest needs. We recently marked the third anniversary of the tragic earthquake that devastated the Haitian nation and people. We will renew our commitment to working with the Haitian government and people, building capacity and working with other partners to rebuild the country’s health infrastructure.
For me, 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. Good health is rooted in equity, universality, solidarity and inclusiveness. No other single achievement would contribute more to ensuring a long, dignified and productive life.

In my professional career, I am most proud of assisting my home country of Dominica achieve universal access to health. This experience has shaped much of my thinking and it drives much of the passion and energy I have for public service.

There is no single or sure path toward such an achievement. Our Member States are diverse in size, resources and levels of development. But I do believe there is common ground among us in at least three fundamental tenets of universal health coverage.

First, it means that every individual and community has access to health services for prevention, promotion, treatment and rehabilitation.

Second, it means putting in place the financial mechanisms and policies to ensure that people are protected from falling into poverty because of sickness.

And third, universal health care means universal access to well-trained and motivated health care professionals, to safe and effective medical products and technologies, and to well-organized delivery networks. It means
building and maintaining strong health systems based on primary health care. Our work in this must be guided by innovation, evidence-based information, and appropriate research.

As we today reaffirm the ongoing mandate of this Organization, I know from a long career in clinical and public health that health systems must continually evolve to meet the needs of a changing world – to both tackle emerging challenges and threats as well as to embrace new opportunities for reform and progress.

Every one of you here today and in the Hemisphere, each of us has a stake in our success – governments, civil societies, district and local authorities, communities, the private sector, academia. So, I wish today to exhort all of us to contribute the political will and the resources necessary to achieve universal health coverage.

As Director, I will champion this goal. I will work to enhance this Organization’s ability to work side-by-side with our Member States to develop health systems and services, and promote models of care, which advance universal access.

The Americas has a long history of success in addressing communicable diseases. We have successfully taken on smallpox, polio, measles and rubella. Our work continues today in global priority diseases such as HIV/AIDS, tuberculosis and malaria. We are also scaling up the fight against Chagas, dengue, onchocerciasis and other neglected infectious diseases.
We cannot choose between or among these diseases. Instead, we must make space in the regional agenda to combat all diseases that can impact mortality and reduce our quality of life. We will need to develop and implement multi-sectoral approaches to address the complex determinants of these diseases.

We must also work to improve alert and response mechanisms for extreme environmental events, natural disasters and disease threats and epidemics. In this regard, I want to appeal to the Member States to accelerate action to ensure they meet the core capacities as required under the International Health Regulations.

I believe in promoting change in health, cambio en salud. It defines this Organization’s primary role and its core value. But I also believe in health for change, salud para el cambio. Improved health will, no doubt, translate into stronger economies, more cohesive societies, and in nations better able to integrate and compete in the global world.

If this Organization is to respond to the mandate given us by the Ministers of Health of our Member States, then we, the Secretariat, must become a healthier body. This begins with my working immediately to celebrate and empower everyone in this organization to become more effective technical experts and better global health diplomats. We will explore innovative strategies and flexible cooperation models to improve regional and
national health capacities, and ensure that all countries benefit from each other’s advances and expertise.

No individual, no institution, and no Member State has all the knowledge, resources or capability to do this alone. We need to seek and develop new partnerships to leverage the best ideas, share the most important knowledge, and adopt the most innovative approaches and practices. This may include our working with multilateral agencies, development banks, civil society, think tanks, academia, faith-based organizations, professional associations and the private sector.

Ours must be an inclusive, shared agenda, with collaborative partnerships that promote the development of national, regional and cross-regional health architectures.

I believe strongly in the concept of “country ownership.” But this must be more than just a popular theme that is discussed at international fora. If we are to make it a reality in the Americas, then all stakeholders must have a seat at the tables where local and national health decisions are made and all stakeholders must commit to the behavioral change that will allow them to align and harmonize around national leadership.

I invite everyone to participate in expanding this Organization’s global health diplomacy. We should also search for solutions beyond our hemisphere, to learn from Europe, Asia and Africa as well as to offer them our own experiences.
Our relationship with the World Health Organization will enable us to share knowledge and resources, and align our goals and accountability. As WHO undergoes its reform process, we must ensure a strong connection with our headquarters through commonality of goals, and the sharing of global public health goods and resources. Even as we advance our own agenda for the Americas, we can also help shape global health diplomacy.

We are also blessed with new tools and technologies to help us listen, share and communicate. Let’s together explore new partnerships to use these evolving technologies such as social media and e-health to engage with all our stakeholders and constituents and to advance health care.

Finally, I would like to say a few words to the men and women of the Secretariat of the Pan American Health Organization. As we embark on this journey together, you should be proud of this Organization’s long-standing commitment to improving health. You are heroes and heroines advancing health reform and health progress.

I look forward to hearing from each of you how – together – we can work farther, faster, and smarter. Your commitment, your energy, your passion and your determination will prove to be decisive.

To our Member States, I pledge that we will be a responsible steward of the resources you entrust to us. We will be accountable and transparent. We
will be fiscally responsible. We will be results driven. And every day we will
demonstrate our value in meeting the health priorities of our people.

The Americas are united by a shared history and geography. We are
blessed with great natural resources and a wealth of human capital, and we
have a Health Agenda for the Americas that is ambitious yet achievable.

With the transformational changes underway across our region, this is
a moment for unity of vision and a recommitment to our mission. I ask this of
all of you. And I ask for your prayers as I undertake my responsibility today as
Director.

Let me close with a remembrance from my childhood that is an example
of what motivates me to this day. When I was a little child of five or six, a
mother in our neighborhood was going away to give birth. She had four
children already. As she left with her suitcase in hand, my great aunt wished
her “safe passage.” I was confused. I asked what she meant, where was she
going? My mother told me that many times when women give birth to
children, they do not come back. I was saddened and concerned that this
mother might not return to her other children.

Giving birth can be one of the most joyous events in a woman’s life, but
it can also be one of the most dangerous. Every day, women around the world
die from preventable causes related to pregnancy and childbirth. We cannot
tolerate maternal mortality in our modern world. Every mother, every child,
and every family must be cared for.
I believe that we have the power to effect change: in maternal and child health, in non-communicable diseases, in infectious diseases, in strengthening health systems, and achieving universal access to care. This is why we must all work together to meet the aspirations of our citizens for health equity, human dignity and economic and social opportunity.

Thank you.