WELCOMING REMARKS BY DR. CARISSA F. ETIENNE
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WORLD HEALTH ORGANIZATION
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56th Directing Council of PAHO  
70th Session of the WHO Regional Committee for the Americas

Outgoing President of the 55th Directing Council, Honorable Dr. Octavio Sanchez Midence,  
Minister of Health of Honduras,  
Secretary of Health and Human Services of the United States of America,  
Honorable Dr. Alex Azar II,  
Honorable Ministers and Secretaries of Health of PAHO/WHO Member States,  
Assistant Secretary General of the Organization of American States,  
Honorable Ambassador Néstor Méndez,  
Deputy Director General for Programs of the World Health Organization,  
Dr. Soumya Swaminathan,  
Distinguished Member State Delegates,  
Eminent Members of the Diplomatic Corps,  
Representatives of Non-Governmental Organizations in Formal relations with the  
Pan American Health Organization,  
Representatives of the United Nations and Other Specialized Agencies,  
Fellow PAHO and WHO Colleagues,  
Honored Guests,  
Esteemed Ladies and Gentlemen,

A very Good Morning to you all.

It is indeed both an honor and a privilege for me to welcome you today to this  
the Fifty-sixth annual meeting of the Directing Council of the Pan American Health  
Organization.

On behalf of all PAHO staff—both here at our Headquarters and at our Country  
Offices and Centers—I wish to sincerely thank you for your presence and participation at  
this Governing Bodies meeting. Your presence here means so much more as I am  
acutely aware that this Directing Council is competing with two other important health-  
related events, namely, the High-Level Meetings of the United Nations on Tuberculosis  
and the Non-Communicable Diseases.
I do hope that the outcomes of those two meetings in New York will provide the much-needed impetus, leadership, advocacy and action from Heads of States that will be required for advancing progress towards the achievement of the 2030 Sustainable Development Goals.

Political leadership at the highest level of government is critical for reaching the global targets that have been defined for Tuberculosis and the Non-Communicable Diseases as well as, the work at the national level to increase universal access to health and universal health coverage. This is fundamental to ensuring that no one is left behind. An actively engaged political directorate together with appropriate financing of health programs will be essential for building the resilient health systems needed to manage the next epidemic or disaster and to protect the health gains that we have achieved.

Ladies and Gentlemen...

I think that this is an opportune moment to ask ourselves a few questions- Are we still maintaining strong and effective prevention and control programs for vectors, such as the ubiquitous *Aedes aegypti* mosquito, now that the Zika outbreak has subsided?

Are we maintaining vaccination coverage rates for measles and other vaccine preventable diseases at over 95 percent in every neighborhood, village, municipality, town, department, state and country.

Are we maintaining strong surveillance systems to detect the re-introduction of malaria and other diseases in areas, where these diseases had been previously eliminated?

Today, we are all too aware that despite the remarkable successes and historic milestones achieved in public health over these past decades, our Region faces numerous challenges, putting at risk our hard won gains and potentially diminishing our ability to address new and emerging challenges.

The quest for economic growth in recent decades has led to substantial increases in wealth for large numbers of people across the globe as well as in our Region. For the first time in Latin America, the number of people in the middle class has surpassed those living in poverty. The International Monetary Fund [IMF] now estimates that regional growth activity will accelerate to 1.9 percent in 2018 and 2.6 percent in 2019.

However, despite these improvements, there is evidence that in Latin America inequality persist. It has been estimated that around 241 million persons still have no access to social protection.
According to the World Economic Forum even though global inequality is declining, within-country inequality is an increasingly corrosive problem in many countries. From their analyses, Rising Income and Wealth Disparity is ranked third as a driver of global risks over the next 10 years.

Factors such as extreme weather events and natural disasters; failure of climate change mitigation and adaptation; large scale migration; low social cohesion; societal violence; weak governance capacities; profound social instability and the spread of infectious diseases are negatively impacting conditions of health and well-being in our Region.

This means that delivering on the Sustainable Development Goals, including the health-related SDG-3, will require targeted and ambitious support for individuals in fragile circumstances and environments in order to ensure they are not left behind.

Many populations and countries affected by the monster hurricanes of 2017 are still grappling with recovery, struggling to find appropriate solutions for the long-term effects and impacts of those disasters, while simultaneously preparing for the current threats being posed by the many storms and hurricanes in both the Atlantic Ocean and the Gulf of Mexico.

This prompts me to ask, are we collectively working to reduce our contributions to the carbon foot-print and are we attempting to adapt and mitigate the impact of climate change on health? Are we striving to build resilient and sustainable health systems? **Climate change exacerbates fragility** as extreme weather, agricultural uncertainty, and food and water insecurity all present additional risks that can be particularly challenging for communities, which are already vulnerable.

Today, our Region, is also facing a monumental migration crisis in which unprecedented flows of migrants are fleeing their home countries in pursuit of greener economic pastures or escaping conditions of social conflict, societal violence and political instability. Whatever the reason, we are all too aware that the health and well-being of migrants is at risk and that migration can be a significant contributor to the spread of some communicable diseases as evidenced by the recent spread of measles and malaria in countries of this Region over the past 12 months.

I wish to highlight one potentially disastrous health challenge of our times, namely antimicrobial resistance [AMR], this constitutes a global threat that can reverse the gains made over many centuries. While we note that there have been some encouraging early signs of action to counter this threat, our responses have been muted and insufficient. We all recognize that the two major underlying drivers of AMR include the overuse and misuse of antibiotics, in both human health systems and livestock management; and the absolute lack of new drugs in the development pipeline. It is
important to note that no new classes of antibiotics have been developed since the 1980s.

The environment in which the Pan American Sanitary Bureau functions is also changing as we witness the extensive reforms being undertaken by the United Nations. We fully recognize and embrace the critical need for vital reforms to promote synergy and increase effectiveness. The PAHO Secretariat fully cognizant of the dual nature of PAHO, both as an independent institution within the Inter-American System, and as WHO Office for the Americas will endeavor to collaborate at the country and regional level with UN Reform.

Finally, in addition to all of the issues that I have just identified, it must be noted that Latin America is in a super-cycle of elections as 15 of the 18 countries will be holding presidential elections between 2017 and 2019.

It is against this tapestry of complex challenges that we are convening here today. We have a full and interesting agenda to consider over the next few days and I do hope that this forum will provide an avenue for sharing valuable lessons learned and best practices; for generating innovative thinking; for developing creative solutions for some of our most pressing problems. The outcomes of your deliberations will contribute to strengthening our collaboration and technical cooperation with you—our Member States—and in improving the health and well-being of the peoples of the Americas. Indeed, the latter is the cause that unites us all. We need to look no further for the foundation of that unity than the five collective values of equity, excellence, solidarity, respect and integrity espoused by the Organization.

This Directing Council is taking place during the year that marks the fortieth anniversary of the 1978 Alma-Ata Declaration on Primary Health Care (PHC), a public health milestone of the twentieth century. Its vision was well captured in its rallying call of Health for All. The values and principles of the PHC approach have formed the basis of many PAHO mandates and have guided health system strengthening initiatives and health reform processes. As we reflect on this Declaration and ponder the lessons learned from its implementation, it is increasingly clear that these values and principles continue to be relevant for our time. As I have said repeatedly Universal Health is the expression of the Alma-Ata Declaration in the twenty-first century. It is, therefore, fitting that we reaffirm our commitment to the primary health care approach, which strives for culturally appropriate, accessible, affordable, adaptable, acceptable and quality services for everyone.

In October of this year in Astana, Kazakhstan, the world will revisit and recommit to universal health based on primary health care. I would hope that many of you ministers gathered here today will attend this historic meeting and showcase the experience and commitment of this Region.
I would like to share with you some examples from our region that demonstrate our collective ability to achieve success when we are united on a specific course of action for improving the public’s health.

In June 2018, we celebrated the malaria–free certification of Paraguay by the World Health Organization. No case of this mosquito-borne disease has been recorded in that country since 2012. Furthermore, it is the first nation in the Americas in 45 years to have reached this milestone. In announcing this accomplishment, the Health Minister—Carlos Ignacio Morínigo—acknowledged the more than five decades of hard work, both on the part of public sector workers, as well as the community itself.”

Fourteen years ago, health leaders in Mexico recommitted that nation to eliminating trachoma, a debilitating cause of blindness. As many of you know, their persistent efforts were rewarded last year, when WHO certified Mexico free of trachoma – the first country in the Americas and the third in the world after Oman and Morocco to do so. It was an extraordinary feat, of which we can all be proud.

I am quite sure thousands of people worked diligently to make this goal a reality. One of those was Fidencio López, a public health worker in the state of Chiapas. He served in the Chiapas Trachoma Brigade, a group of health workers who went from house to house and from village to village in rural parts of that state to identify and treat trachoma cases, as well as to follow up with those who had undergone surgery to prevent blindness. Fidencio and his colleagues also established programs in schools to demonstrate cleanliness and eye health, so that children representing the next generation would not suffer from blindness.

Fidencio personifies tenacity, determination and perseverance. I have no doubt that there are many like Fidencio in our Region. Disease elimination requires persistence, dedicated commitment, all-of-society engagement together with political support, leadership and appropriate financing. The Secretariat is leading efforts to build an elimination agenda for the Region which will be presented to the Governing Bodies in 2019.

Esteemed Ladies and Gentlemen....

As I close, I call upon each and everyone, not only in the leadership of Ministries of Health, but across all government sectors, the private sector, civil society, the municipalities and communities to make extra and meaningful efforts to actively involve persons living in conditions of vulnerability and fragility when formulating policies and programs in health, trade, agriculture, education and other sectors. This is the only way in which we can truly ensure that no one is left behind.
I am not by any means suggesting that this would be an easy task, but rather an absolutely necessary task, if we believe in equity; if we believe that each individual must be given the means and access to attain the highest possible standards of health; if we believe that health is a fundamental human right; and if we truly believe in the principle of Health For All.

We must strengthen solidarity within and between countries, in order to reduce uncertainty, instability and fragility. We must rebuild solidarity if we are to achieve the 2030 Sustainable Development Agenda and leave no one behind.

Once again, a very warm welcome to you all.

Thank you very much.