

ECOSOC High - Level Segment

6 July 2009, Geneva

Address by Mr. Urmas Paet, Minister of Foreign Affairs of Estonia

Dear Director General, Ladies and Gentlemen

I am deeply honoured to address the distinguished audience here today. I would like to touch upon some very urgent and challenging questions regarding global public health focusing on the progress of achieving the health-related Millennium Development Goals (MDGs).

As declared in the WHO Constitution, adopted in 1948, “health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.” It is also stated that the “highest attainable standard of health is a fundamental right of every human being.” This universal right seems very straightforward and simple, but for millions of people, it is yet an unreachable privilege. As the Director General of WHO, Margaret Chan has rightfully stated: “people should not be denied access to life-saving interventions for unfair reasons, including an inability to pay”. One has to admit, that to ensure this right equally for everyone, a lot remains to be done.

Ensured access to the best attainable health care has to go hand in hand with the **improvement of the global health standard** as the situation in this field is far from satisfying. There are major and often growing health inequalities also within countries. I would like to thank the WHO and other

parts of UN system for the enormous job they have done in promoting global health around the world.

There are some encouraging signs of progress made over the last years. **Child mortality** has been reduced, as well as under-nutrition. However, in several developing countries, particularly in Sub-Saharan Africa, the death of children under five still remains unacceptably high. The keys to reducing it are clearly social and need to be urgently addressed. Also the analyses affirm that the progress towards health-related goals continues to be slowest in countries with severe social problems: with high HIV prevalence or those affected by conflict.

Step forward has been made in relation to **HIV/AIDS, tuberculosis** and **malaria**. This testifies that our concerted efforts can lead to results. The progress needs to be sustained and carried further in current challenging environment.

The lagging progress in **maternal and newborn health** is still worrying, causing great suffering around the world. Each year some half a million young women die of complications during pregnancy or childbirth, 99% of them in developing countries and most of them for preventable causes for which there is effective treatment.

Millions of young women on our planet unfortunately live in conditions with limited access to maternal or reproductive health services, which are essential for improving maternal health and reducing maternal mortality. Access to family planning, skilled attendance at birth and emergency

obstetric care are critical for making progress towards this goal. The persisting lag in this field calls for more increased political leadership as well as for more resources to protect both the health and the rights of women.

Dr Brock Chisholm, the first WHO Director General proposed already in the 1950s that the medical education has to be based on all the needs of the human organism from the start of his or her existence, including a healthy mother who knows what she is doing. Undeniably, the whole society has a role to play in this regard as it is estimated that the economic crisis will increase the number of unemployed women by up to 22 million this year alone.

Ladies and Gentlemen,

Coming to the current global challenge - the **economic crisis** - that affects all of us, it has to be stressed that for the developing countries the implications are particularly strong. Therefore we may now face an even more urgent challenge. Economic recession has put the entire social sphere, including health systems, under a lot of pressure. It has to be kept in mind that **good health systems** should not be a luxury, but a fundamental part of the social and physical infrastructure.

It is also essential to realize that the health systems are more than health care, but also include disease prevention, health promotion and efforts to influence other policies to address health concerns. Improved health contributes to social wellbeing through its impact on economic development,

competitiveness and productivity. The high-performing health system is a key contributor to this process. Despite the recent vital health results, due to increased funding by foundations and global funds (f.e Global Fund to Fight AIDS, Tuberculosis and Malaria), the large funding gap in global public health, especially in health care systems, remains.

Well-built health systems can provide the base for the dramatic scale-up of interventions that is needed to meet the health-related MDGs. In this regard, the experience from disease-specific programs can be a valuable contribution to our efforts in ensuring well-managed, adequately staffed and well equipped health systems. Many lessons can be learned from the work of **global health initiatives**. Our challenge is to scale up and strengthen services for health in a coherent manner beyond all initiatives. But the improved co-ordination is vital even more broadly as the economical crisis has made the need to provide **better aid for health** even more evident. Hereby it is important to focus on the interlinkages between health-related goals and the overall development agenda.

It has to be admitted that the economic recession might also have a serious impact on the effectiveness of the international co-operation, including health-related activities. As the history has taught us, the economic difficulties have a global tendency to bring about worrying signs of protectionism. **Protectionism** not only encourages the unhealthy trade measures, but is also a threat to the public health system. Moreover, it also hampers the international co-operation that is conclusive in struggle against pandemics and other diseases.

Secondly, at the times of economic downturn, the governments might be tempted to **economize on the public health expenditures** and this is the most alarming sign as it will affect the needs of the poorest and most vulnerable. It is an imperative to safeguard social spending in order to preserve the gains made in many social areas, including the achievement of MDGs.

However, the economical disadvantages bring about the creativity and new thinking. **Our goal has to be set on turning the downturn into our advantage.** At the WHO European ministerial meeting in Estonia a year ago, Tallinn charter was adopted by the health ministers of 53 countries. They commonly underlined the importance of making smart investments into the health system and called other sectors to make health enhancing investments. At the same time, the ministers took upon themselves the accountability for measuring the performance of health system. The above-mentioned is even more relevant today as the situation is more alarming than before the global economic crisis.

Thereby I would argue that both the insufficient international co-operation and failure to see health and health system as an contributor to economic growth are the two biggest threats on the global health system today. But how to tackle these challenges?

Firstly, we need to **promote the international co-operation** in coordinating the efforts of the United Nations, governments, NGOs and the business community, and to foster the building of public-private partnerships. The importance of the co-operation and commitment of all

actors has become very obvious to me during my several visits to Afghanistan, including to the hospitals of the southern region. Estonian experience in coordinating the health care-related activities in Helmand province in Afghanistan is encouraging and shows that we can make a real difference, even though it might be very difficult under extreme circumstances. Among other things, assignments like distributing mosquito nets have been carried out, thereby saving hundreds of lives. It goes without saying that in order to ensure the efficiency of our actions; we have to coordinate our activities with other actors involved in the health sector.

Secondly, the efficiency of the existing health systems has to be improved and demonstrated. When health systems are run and financed more effectively, thousands of lives can be saved. Here it is also essential to build effective partnerships with other sectors to deliver more affordable health services. By combining smart investments and smart economizing, not only health sector, but also other spheres, for example technology and science will benefit as well.

Thirdly, our focus should be set on research and innovation in the medical field as well as on the development of new technologies. The accelerated technological innovation will multiply the potential to improve global health and helps to mediate the health literacy in more advanced and modern global society.

Hereby I am calling to support the ECOSOC' M-health initiative, aiming to develop health care knowledge and health information access through mobile phones. In Estonia electronic health initiatives have gained speed

since 2002, including digital health records, electronic medical history and the health bank. By now we are seeing fantastic benefits from the use of innovative technologies and we strongly believe that ICT is essential in health care systems.

In conclusion, it has to be emphasized again that the global financial crisis may have a serious impact on the efforts to meet the health related Millennium Development Goals. In an increasingly globalised world, our response must be effective, coordinated, flexible and global.

Thank you!