Mr President, Director-General, Ministers of Health, delegates, ladies and gentlemen,

May I congratulate the President of the Assembly for his election to this office and thank Dr Chan for inviting me to participate in this prestigious annual gathering of the world’s Ministers of Health and the delegates of WHO’s Member States.

This is my second participation in the work of the World Health Assembly. The first was two years ago when I addressed Committee A in my capacity as WHO Patron of Nursing and, midwifery. I am therefore honoured to be here again to address this distinguished audience.

This year marks the 60th anniversary of the World Health Organization and I would like to congratulate WHO’s Member States and the Secretariat on this occasion. This Organization has made immense strides in serving its Member States over the last six decades and its accomplishments are manifold. Indeed, I am proud to work closely with the World Health Organization and privileged to continue to witness the excellent contribution WHO provides to the health sector, not only in my own country but in others. I am sure I convey the sentiments shared by all of you in confirming how crucial the work of the Organization is to world health and in expressing our appreciation of the dedication of its staff. This Organization belongs to you all and is governed by you all. As such, it is our collective responsibility to ensure that it is supported and enabled to work effectively in addressing the serious health challenges of the 21st century.

Ladies and gentlemen,

Today’s world is facing very serious health problems despite the great advances in health and medical science, the remarkable achievements made in combating major diseases and health problems, and the overall rise in life expectancy.

Millions continue to die from preventable diseases like HIV/AIDS, tuberculosis, malaria and respiratory infection. Undernutrition is responsible for one third of all child deaths and contributes substantially to the global burden of disease. Morbidity, disability, and death from cardiovascular diseases, diabetes and cancer are also rapidly and persistently increasing across the globe.

What is also worrying and unacceptable is that the progress towards the health-related Millennium Development Goals is hampered in many countries. While some nations are on track,
others are progressing too slowly, and some are even regressing. Resources allocated for health continue to remain limited, with 20% of the world’s population suffering from poverty. The serious impact of climate change and the effects of increasing food prices are resulting in hunger and becoming even more serious as a global problem, with grave consequences on health. Conflicts and other crises continue to disrupt and strain health systems and have an enormously negative impact on health in many parts of the world including my own region.

The two natural disasters that recently hit both Myanmar and China have shocked the world. Only international solidarity and cooperation will help the two nations cope efficiently with the health consequences.

These are some examples of the complex challenges that countries, WHO and other health partners have to face at the turn of WHO’s 60th anniversary. These challenges require a comprehensive approach to health, rather than emphasis on health care alone. They require solid commitment in addressing the socioeconomic determinants of health, stronger collaboration with nonhealth sectors, more effective and new alliances, closer coordination between global health partners, and considerably more effective health systems.

Mr President, ladies and gentlemen,

My work with WHO has been focusing primarily on strengthening the health workforce, particularly in the area of nursing and midwifery. The challenges we face in the area of human resources for health are enormous. Based on WHO estimates there is a global deficit of 2.4 million doctors, nurses and midwives. This problem is compounded by the fact that almost all countries suffer from maldistribution characterized by urban concentrations and rural shortage.

Training is inadequate and clinical skills are often insufficient. As a result, health care is characterized in many parts of the world by uneven coverage and quality of services, inaccessibility of services particularly to the poor and underprivileged, inefficient use of scarce human resources with public funds often directed to services of limited cost-effectiveness, and with disproportionate financing of tertiary care interventions at the cost of care at the primary health care level.

In the public sector, people frequently face unmotivated and inadequately trained staff with long waiting times, insufficient supplies and medicines, and lack of confidentiality or privacy. At the same time, there is frequently no effective coordination with the private sector, which is growing rapidly in many countries, and often no adequate monitoring to prevent inappropriate interventions and financial exploitation.

These and other constraints are challenges that need to be addressed through strong political commitment, effective strategies and wide-ranging alliances. There is a pressing and vital need to scale up. WHO is now renewing its strategy on primary health care where a great deal of work is needed to strengthen human resources.

In Jordan, we have made important strides in preparing health professionals, particularly in nursing and midwifery, and in strengthening their role in national health development. New medical and nursing colleges have been established offering advanced medical and nursing education. We are implementing several initiatives to address people’s health needs and we are supporting and collaborating closely with other countries in the Region in the areas of strategy development, training and capacity building. Undeniably, the achievements made in human resources development have
significantly contributed to the remarkable improvement in health indicators that Jordan has been enjoying over the last three decades.

I have come here today to share with you my conviction that the health workforce should be promoted to a much higher place on the agendas of ministers of health, leaders of the health professions, and other policy makers. Time has repeatedly shown that the key determining factor for human resources development in many countries has been the level of commitment among those in the highest level of leadership in governments and in ministries of health and education.

It has been made clear that when there is political commitment, the whole process of development is facilitated and targets are met. Strengthened human resources for health is the basis of improved health care and is a prerequisite for a more effective primary health care.

In my address to Committee A two years ago, I highlighted the urgent need for a critical review of the human resources situation with respect to planning, development and management. Planning should take into account monitoring of supply and demand, improving recruitment, retention, deployment, and examining working patterns.

How can we attempt to strengthen health systems without addressing the human resources crisis? Indeed, failure to develop and implement effective strategies and plans will seriously impair any initiative to reinforce primary health care and the achievement of national health goals. In many countries, a start can and must be made by making a rigorous appraisal of the current state of human resource development in terms of personnel policies, capacity, training, and management of performance.

I very much look forward to the follow up of *The world health report 2006* and to more progress made in strengthening the health workforce. No investment is better than investing in health and education. This is true for all countries without any exception, and I am confident that investing in the health workforce will yield the highest return.

Your Excellencies, distinguished delegates,

You have a very important agenda this year addressing many serious health challenges like pandemic influenza, international health regulations, noncommunicable diseases, climate change and health, immunization, Millennium Development Goals, and human resources. I would like to share with you my thoughts on some of the agenda items.

The current trends on nutrition, and child and maternal health are simply unacceptable. The lack of adequate progress in attaining the health-related Millennium Development Goals is disappointing, particularly in the presence of cost-effective interventions. However, let us consider the current situation as an *opportunity for change* and an occasion to scale up such interventions.

Low-income countries should receive much stronger support to address these serious trends that undermine global development and pose a severe threat to global and regional security. There are clear examples, including in my own region, where worsening health trends and lack of basic services, combined with poverty and unemployment, form the roots for conflicts and civil unrest. The responsibility *heavily rests* upon governments which must dramatically and conscientiously increase their efforts to provide better health and education services, and to empower women in efforts to save the lives of children and prevent maternal deaths during, or as a result of, childbirth. The Millennium Development Goals, particularly those related to health, will remain beyond reach unless greater
attention is given to nutrition, child and maternal health. Addressing the double burden of malnutrition will also impact on the control of chronic diseases like cardiovascular diseases and diabetes. Current science provides evidence that poor nutrition during pregnancy and early life predisposes to the development of diabetes, high blood pressure, and cardiovascular disease later in life.

These major health problems have become the leading causes of morbidity and mortality in my country and cardiovascular diseases and cancer alone account for about 50% of all deaths. They are key priorities in our national health development plans. Studies conducted in Jordan over the last decade show that obesity is rapidly rising, physical activity is declining and that high blood pressure, diabetes and related disorders now affect up to 25% of the adult population. I am therefore pleased to see that this session of the World Health Assembly will discuss a plan to assist Member States in the prevention and control of noncommunicable diseases.

Your Excellencies, distinguished delegates,

You have great opportunities to further increase investment in health development. Together with the World Health Organization, other UN agencies and main stakeholders in global health, you can play a major part in joined efforts to make this world a better place – a place where populations can enjoy their fundamental rights to better health and live in harmony and security.

Thank you.