In the Name of God, the Compassionate, the Merciful

Address by

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to the

REGIONAL CONFERENCE ON HEALTH IN THE COUNTRIES OF
THE HORN OF AFRICA

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Mr President, Honourable Ministers,
Excellencies, Distinguished Ladies and Gentlemen,

I am greatly pleased and honoured to be invited to the Regional Conference on Health in the countries of the Horn of Africa.

I would like to start by thanking HE Mr Ismail Omar Guelleh for his leadership in placing health at the heart of the development in Djibouti and in this region.

Mr President, we all also appreciate your commitment and support to a peaceful resolution of the political situation in neighbouring Somalia.
I was impressed as I arrived in Djibouti, by the heightened sense of optimism, the growing potential of this young nation and the visible progress you have instituted. Your clear engagement to build a healthier future through investing in health, education and women’s development is an enormous asset. Your advocacy and support to health in Djibouti have already made a significant difference to major infectious diseases such as poliomyelitis and AIDS, as well as to vital health services, including those addressing women’s health and children’s survival. I have no doubt that this commitment will help us achieve together major advances on public health priorities for this region.

Djibouti has committed itself to improving immunization coverage and meeting basic development needs, both key objectives. HE Mr Abdallah Miguil, Minister of Health, Djibouti has firmly supported development of a national strategy and plan of action for expansion of the basic development needs programme in the country, launching the national strategy in the presence of four other Ministers on 24 June, 2006. The government of Djibouti has demonstrated its commitment to making the basic development needs programme a tool for reducing poverty, integrating it within the national poverty reduction strategy. Community-based initiatives such as this empower poor communities to improve their quality of life, and have positive socioeconomic and health impact.

Distinguished Ladies and Gentlemen,

With a population exceeding 150 million, conflict, intense population movements across borders and an average annual per capita income of less than US$ 220, the Horn of Africa presents a compelling case for attention. The recent outbreaks of H5N1 influenza among poultry and humans have reconfirmed the value of public health and its economic significance. Sustainable development requires community participation and empowerment.

Three diseases – HIV/AIDS, tuberculosis and malaria – are overwhelmingly important in the Horn of Africa. Maternal and child survival, reproductive health, malnutrition and the health consequences of qat and tobacco, are also health priorities. It is disheartening that children in this region are still being paralysed by polio and dying from vaccine-preventable diseases like measles and meningitis. The risk of importation of wild poliovirus will remain high and we need to protect our achievements. I am sure that this meeting will provide an excellent opportunity to work together on a common vision in order to regain polio-free status in the Horn in the very near future.
We have had to respond this year in this region to drought and flood emergencies while, at the same time, countries are recovering from past crises and facing instability and recurring conflicts. The current food crisis is a severe blow to the millions of people affected and to the efforts to develop and strengthen the countries of the Horn of Africa.

Despite substantial progress made by countries, we still have much to do to achieve the targets set for the United Nations Millennium Development Goals. The national health systems and programmes are beset by insufficient financial resources and weak capacity at all levels. Lack of intersectoral collaboration and community participation persist. Building a sustainable and skilled health workforce is vital and remains an outstanding issue for many countries, including those of the Horn of Africa. Hence a key question for all present here today is: how to find long lasting solutions for the Horn of Africa within the great resource limitations and in an environment prone to disasters and epidemics?

Excellencies,

Health has to be placed in a broader perspective. Health has an impact on national development. It is closely linked to security and overall socioeconomic development. The huge economic and psychological impact of the limited outbreak experiences of SARS and avian flu are a good example of that link. Ill health markedly reduces the productivity of individuals and poor people are the ones who suffer most. The priority and the investment given to health will be a significant determinant of the success of a nation’s wider development effort, especially in Africa.

Our world is interdependent in many ways. Many of the challenges we now face in public health have a regional if not a global impact, requiring joint solutions and united response. In public health, we know what to do and how to face threatening outbreaks and other health challenges. However, what we still have to learn is how to optimize working together, drawing on our strengths and synergies.

Last week, here in Djibouti, the member states of COMESA agreed to break the customs barriers and work together towards a free trade zone. In the same way, you can change the landscape for health in this region, through exchange, collaboration and coordination.

I appreciate the lead taken by H.E Mr Abdallah Miguil, Minister of Health of Djibouti. He has shown the way with this initiative. I would like to applaud his dedication and tireless
efforts not only in convening this conference, but also for actively and effectively representing the Eastern Mediterranean Region countries in the board of the Global Fund for AIDS, Tuberculosis and Malaria. I have witnessed the birth and the unfolding of His Excellency’s idea for this meeting, and now I see its successful fulfilment. WHO has supported without hesitation this initiative, through its country offices, the Regional Office for the Eastern Mediterranean and Regional Office for Africa as well as Headquarters. I can confidently say Your Excellency, that your regional initiative created a real landmark in WHO’s collaborative work for better health in the Eastern Mediterranean and African regions.

Honourable ministers from the African and Eastern Mediterranean regions and international partners,

I also salute your commitment to this initiative which will ensure its viability and the achievement of practical and effective impact on the health situation in the Horn of Africa. It has often been said that politics does not always go hand in hand with science and public health. However, it is becoming clear that improving people’s lives cannot be achieved through the action of one party or one country alone but through alliances and cooperation. The Global Alliance for Vaccines and Immunization and the Global Fund to Fight AIDS, Tuberculosis and Malaria are clear examples of the world understanding of this necessity. The world has also agreed on key poverty reduction and development targets such as the Millennium Development Goals. WHO could not have developed strong instruments for health, such as the new International Health Regulations and the Framework Convention for Tobacco Control, without the collaboration and involvement of its Member States and partners.

It is important to improve systems for preparedness and response to such emergencies. The elimination of food insecurity and conflicts and the crises that arise from these must be our long-term development goal. That is challenging, yet attainable. Surveillance and effective response is an important expression of solidarity in public health. It saves lives, protects economies and is an essential pillar of both national and international security.

It would not be possible to achieve the required response to these health challenges and ensure adequate collaboration without relevant human resources for health. I am sure that your agenda will address this issue and explore ways to support each other for health personnel development and exchange, notably for maternal and child health, emergencies, vaccination and epidemic responses.
Ladies and Gentlemen,

Over the past two days, the delegations have debated on key elements in securing the common future of the countries of the Horn of Africa. Goals and commitments are being proposed. Let us listen to these needs, nurture this collaborative spirit and start working hard now to build up the abilities to act together and maintain this effort.

There are many good examples of partnerships within this Region and from other regions. The Great Lakes Initiative on HIV/AIDS (GLIA), the sub-regional task force on HIV vulnerability and cross-border mobility, the tuberculosis control initiative (HATCI) and the established Horn of Africa Network for Monitoring Antimalarial Treatment (HANMAT) are all examples that show that partnership is possible and should be encouraged. In the recent Horn of Africa drought crisis, the Regional Office for the Eastern Mediterranean and Regional Office for Africa and other UN agencies successfully demonstrated the synergy that can be brought about by working together in mounting emergency response.

Of course, money is also vital. I therefore hope that the commitment of the countries we witness today for making a difference to people’s lives will generate interest from our partners in bilateral and multilateral organizations. I invite all to help achieve the vibrant agenda proposed and move real action forward.

Mr President, Honourable Ladies and gentlemen,

We have a very full agenda ahead of us. I look forward to the final outcome of this meeting, but even more so to the joint work in the future, to which I can confidently reiterate the commitment of WHO at all levels, and in particular that of all the colleagues present with us today.

I wish you all success in your endeavours and thank you for your attention.