

SEA-HSD-261
Distribution: General

Parliamentarians' Call for Action

*Report of Regional Conference of Parliamentarians on the
report of the Commission on Macroeconomics and Health,
Bangkok, Thailand, 15-17 December 2002*



World Health Organization
Regional Office for South-East Asia
New Delhi
February 2003

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The Regional Conference of the Parliamentarians on the Report of the Commission on Macroeconomics and Health was held in Bangkok, Thailand from 15-17 December 2002. The objective of the Conference was to strengthen partnership with parliamentarians on health development. The objective was sought to be furthered during the Conference through an enhanced appreciation of the linkages between health development, recognition of the main conditions that are responsible for ill health, and appreciation of the action agenda proposed by the Commission on Macroeconomics and Health.

The Conference was inaugurated by Her Excellency Mrs Sudarat Keyuraphan, Minister of Public Health of the Royal Thai Government. It was chaired by Hon'ble Dr Malinee Sukavejworakit, Chairperson, Parliamentarian Committee on Public Health: Senate, Thailand, and co-chaired by His Excellency Lyonpo Sangay Ngedup, Hon'ble Minister of Health and Education, Bhutan. The Conference was attended by 58 persons including four Ministers.

Previous Conferences of Parliamentarians were:

- Conference of Parliamentarians on Health and Development, Bangkok, Thailand, 24-28 July 1996.
- Conference of Parliamentarians on Women, Health and Environment, Bangkok, Thailand, 4-6 August 1997.
- Regional Meeting of Parliamentarians on Economic Crisis and its impact on Health, Jakarta, Indonesia, 7-9 December, 1998.
- Regional Conference of Parliamentarians on Health of the Vulnerable Populations, Kathmandu, 1-3 November 1999.
- Regional Conference of Parliamentarians on Impact of Tuberculosis and Malaria on Poverty, Dhaka, Bangladesh, 27-29 November 2000.
- Regional Conference of Parliamentarians on HIV/AIDS and Mental Health, New Delhi, India, 19-21 December 2001.

CALL FOR ACTION

WE, the Parliamentarians from the countries of WHO South-East Asia Region,

EXPRESS our deep appreciation to the Ministry of Public Health of the Royal Thai Government for hosting the Regional Conference of Parliamentarians on the Report of the Commission on Macroeconomics and Health (CMH Report) from 15-17 December 2002 in Bangkok.

AFFIRM our faith in WHO's leadership in health development, and place on record our deep admiration for the vision of Dr Gro Harlem Brundtland, Director-General, WHO, in establishing the Commission on Macroeconomics and Health for exploring the links of health and socioeconomic development. We also place on record our sincere appreciation for Dr Uton Muchtar Rafei, Regional Director of the South-East Asia Regional Office (SEARO) of WHO, for organizing this Conference on the CMH Report,

NOTE THAT:

- This Conference provided an excellent forum to bring together health professionals and legislators to discuss the most important issues pertaining to the health and wellbeing of the people;
- The inaugural addresses of H E Mrs Sudarat Keyuraphan, the Minister of Public Health of Thailand, and addresses by H E Mr Uthai Pimchaichon, President of the National Assembly of Thailand, Prof Dr Prasop Ratanakorn, Secretary-General of the International Medical Parliamentarians Organization, and Dr Uton Muchtar Rafei, the Regional Director of WHO-SEARO provided the backdrop and broad directions to the deliberations of the Conference, which focused on:

- Health and Development: Regional Initiatives
- Selecting Interventions for Better Health Outcomes
- What needs to be done: Resources required to do the needful
- Responding to the challenges of the CMH Report

RECOGNIZE AND REALIZE

Health and development

Health is a desired goal in its own right. It is an important input into economic development and poverty reduction. Thus, health is central to sustainable development.

Notwithstanding the regression due to widespread poverty and illiteracy; emerging and re-emerging diseases, such as cardiovascular diseases and cancer, on the one hand, and malaria, TB and other health conditions caused by tobacco consumption and nutrient deficiencies on the other; new diseases, particularly HIV/AIDS; environmental degradation and population explosion, demographic and epidemiological transitions; and vulnerability and societal discrimination affecting large population groups, particularly women.

Opportunities for health development, particularly of the poor and the vulnerable, are now emerging, inter alia, owing to:

- (1) Increasing political commitment for poverty reduction
- (2) Growing recognition of and political commitment for the importance of good health in reducing poverty in the context of the millennium development goals.
- (3) Ever increasing use of science and appropriate technology.
- (4) Health sector reform aiming at improving equity, efficiency, responsiveness and quality of health care.
- (5) The evidence-based report of the Commission on Macroeconomics and Health

The Commission on Macroeconomics and Health has, inter alia, conclusively demonstrated that:

- Improving the health of the poor is also a means of achieving the other development goals relating to faster economic growth and social justice, including poverty reduction,
- The linkages of health to long-term economic growth and poverty reduction are much stronger than generally recognized,
- Poor disproportionately suffer from diseases and ill-health and a single serious episode of ill-health, forcing the sale/mortgage of meagre assets and/or incurring debts, pushes people deep into poverty which may spill over to next generation(s).
- Focusing on cost-effective essential health interventions and reform in health care financing will bring about considerable improvement in the health of the poor by protecting their only asset, namely, their health, and stimulate economic growth and reduce poverty.

Therefore, the CMH report has served as a wake-up call, whose findings and recommendations should be translated into an action plan to be implemented in partnership by all concerned.

Interventions for better health outcomes

- A few diseases and health conditions – HIV/AIDS, malaria, TB, childhood infectious diseases, maternal and perinatal conditions, micronutrient deficiencies and tobacco and alcohol-related illnesses are primarily responsible for the disease burden globally and in South-East Asia Region.
- Noncommunicable diseases, such as cardiovascular diseases, cancer, diabetes and tobacco-related illnesses, are also assuming serious public health dimensions in most countries of the Region.
- Cost-effective interventions that can be mostly delivered at primary health care level are available to tackle most of the communicable diseases and other health conditions. Noncommunicable diseases can also be effectively addressed through appropriate changes in lifestyle and behaviour, especially physical activity and food habits and avoidance of substance abuse and smoking. Emphasis should be on prevention of diseases and health promotion through the media and school health programmes etc.

Resources required

- The present levels of health spending, from both public and private sources, in the countries of the Region is inadequate to properly provide essential health interventions to the population, particularly the poor, let alone comprehensive health care.
- Having regard to the macroeconomic benefits of scaling up essential health interventions, there is a need to mobilize significantly greater domestic resources for health.
- However, conditions of poverty prevent poor countries from mobilizing adequate resources for health from domestic sources. Hence, the need for a quantum leap in external assistance for health, without undermining similar assistance for literacy and education, water supply and sanitation, food and nutrition etc. There is also a need to coordinate donors assistance in line with national priorities.
- Mobilization of resources for health, both from domestic and external sources, would need to go hand-in-hand with removal of non-financial barriers to health services, so that health resources are efficiently and equitably utilized, as accountability will ensure the sustainability of resource mobilization.

Future actions

- The emphasis placed by the CMH Report on a new health pact between the world's developing countries and high income countries and development partners is most opportune.
- The stress laid by the CMH Report on the establishment of a temporary National Commission on Macroeconomics and Health (NCMH), or its equivalent national mechanism, as required, is critical for suitably implementing its framework in the countries.
- The vision of the CMH in mobilizing larger domestic and external resources for health should guide macroeconomic development policy framework of developing countries in accordance with their socioeconomic conditions and international environment.

- The importance of establishing new global funding mechanisms, such as the Global Fund to fight AIDS, Tuberculosis and Malaria (GFATM), and the Global Health Research Fund (GHRF) and international initiatives such as Global Alliance on Vaccine Initiative (GAVI) cannot be overstressed.
- The partnership with private sector, including pharmaceutical industry, needs strengthening.
- The significance of a collective voice of the developing countries in WTO deliberations for ensuring that the prices of essential and lifesaving drugs remain within the reach of the masses can hardly be overemphasized.

RECOMMEND:

- (1) Wide dissemination and effective advocacy of the key findings and recommendations of the CMH Report so that the circle around the concept of centrality of health for human welfare and sustainable development goes on widening.
- (2) Establishment of a suitable national mechanism to carry forward and develop the CMH strategic framework at country level as per national priorities and conditions to make a strong and justified case for scaling up investment in health;
- (3) Developing national consensus for realizing larger and increasing public allocations for health and strengthening international partnership for securing significantly enhanced external assistance for health, without cutting into other sectors;
- (4) Strengthening the health systems and mechanisms for ensuring that health resources are efficiently and equitably utilized in a transparent and accountable manner so that external assistance could be on the basis of 'accountability' rather than 'conditionality'. WHO should provide technical assistance as required in this behalf.
- (5) Balanced production and appropriate deployment of human resources for health (HRH) warrants priority as HRH constitute the backbone of health systems.

- (6) Development partners should provide the requisite technical and financial support for the national efforts on a long-term basis: WHO should provide leadership in this regard.

Suggest the following actions to ourselves and our colleagues:

- Seek balance between short-term economic growth and social development for sustainable development.
- Ensure good governance for social support to people in greatest need.
- Ensure that legislations and national policies do not allow economic and political interests to over-ride the basic minimum needs of the people at national and local levels.
- Promote the ethical and equity content of health services and programmes: in particular, encourage the governments to commit to a level of health care encompassing essential health interventions and follow up on that commitment.
- Work towards maximum possible allocation of public resources, both internal and external, for health and health-related sectors, and advocating for increased levels of external assistance for essential health interventions.
- Encourage partnership between public, private and the civil society, including universities, NGOs, foundations and media for health development, particularly of the poor.
- Be ever vigilant that public health services are accessible to the poor in terms of proximity, affordability and dignity.
- Foster regional solidarity, in the wake of globalization, for health development, inter alia, through sharing of knowledge and best practices particularly in the area of systems of traditional medicine for optimizing collective self-reliance.
- Establish practical mechanisms for reversing environmental degradation and pollution so that not only environmental risks to health are reduced, but an environment conducive to health protection and promotion is fostered.
- Remain optimistic that the challenge of scaling up essential health interventions can be squarely met.

Annex 1

LIST OF PARTICIPANTS

Bangladesh

Dr Ziaul Haque Mollah
Member of Parliament

Dr Dewan Md. Salahuddin
Member of Parliament

Mr Miah Golam Parwar
Member of Parliament

Mr Dildar Hossain Salim
Member of Parliament

Mr Md Abdul Gafur Bhuiyan
Member of Parliament

Bhutan

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Minister of Health & Education

Mr Daw Tenzin
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Mr Thinlay Dorji
Planning Officer, Health Department

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Member of Parliament

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Maldives

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Member of Parliament

Mr Ahmed Nizam
Member of Parliament

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Daw Than New
Director General
Department of Planning

Dr Tin Min
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Deputy Director
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Mr Surendra Prasad Pandey
Member of Parliament

Mr Bijul Kumar Boshwakarma
Member of Parliament

Mr Ramjiban Singh
Member of Parliament

Dr Ram Man Shrestha
Member of Parliament

Ms Chanda Shah
Member of Parliament

Mrs Yangkila Sherpa
Member of Parliament

Mr Devi Prasad Prasai
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Sri Lanka

H.E. Mr P. Dayaratna
Minister of Health, Nutrition and Welfare

Dr A.L.M. Hafrath
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Mrs Pavithra Wanniarachchi
Member of Parliament

Mr Ravi Raj
Member of Parliament

Mr Bimal Ratnayake
Member of Parliament

Mr Ananda Abeywickrama
Member of Parliament

Dr Reggie Perera
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Member of delegation

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Member of Parliament

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Member of Parliament

Dr Chit Charoenprasert
Member of Parliament

Mrs Pornpich Paranakullert
Member of Parliament

Mr Torphong Chaiyasan
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WHO SECRETARIAT

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WHO-SEARO

Annex 2

TEXT OF OPENING ADDRESS BY H.E. MRS. SUDARAT KEYURAPHAN, MINISTER OF PUBLIC HEALTH OF THAILAND

It is my great pleasure to be here at the Opening Ceremony of the Regional Conference of Parliamentarians on the Report of the Commission on Macroeconomics and Health: Investing in Health for Economic Development.

It is evident that for enhancing healthy life and human well-being, greater investment in health is crucial. Scaled up investment in health, as highlighted by the Report of the Commission will stimulate economic growth and alleviate poverty. In sum, investing suitably in health is vital for sustainable development.

However, without the support from political leaders, it will be difficult to succeed. Therefore, this Conference of Parliamentarians will go a long way in mobilizing the required political commitment. I am pleased that the World Health Organization has chosen our region to be the prime mover in this important issue of investment in health. This conference will enhance regional cooperation and serve as the prime advocacy forum for investing in health for economic development.

Here, I may recall that Thailand's initiative on the Asian Cooperation Dialogue has become the prime mover to foster closer Asia-wide cooperation in many areas, including poverty alleviation which is directly related to health development. We can build on this initiative to translate the vision of the Commission on Macroeconomics and Health into reality. This will represent another milestone in the efforts of the member countries of WHO South-East Asia Region towards sustainable development.

I now declare this Conference open and wish it great success in achieving its goals and objectives.

Annex 3

TEXT OF STATEMENT BY HIS EXCELLENCY MR. UTHAI PIMCHAICHON, PRESIDENT OF THE NATIONAL ASSEMBLY

It is my great pleasure an honor to join with the Royal Thai Government and Thai people to welcome all of you to the opening of the Regional Conference of Parliamentarians on the Report of the Commission on Macro Economics and Health. With this convenient venue and valuable period, I do hope that the initiative to link economics and social dimensions with health development will be accomplished.

Thailand is very proud to host this forum which will be the auspicious and historical event as the meeting place for high level executive on health development, which will lead to the economic development and poverty solution. These challenges will be the special opportunities for us to strengthen the role of partnership and supports as well as political commitment in health development. Since promoting the well-being of the people is our main duty, I do believe that making forum as the beginning of political movement to realistically carry out activities is the task that we have to accomplish.

Even though the investment in health area has been acknowledged in general as the important issue, but in fact, very little is seriously done on the issue. The happiness and good health of people is the final goal of the social and economic development, while good health also brings about the economic growth and poverty reduction. There is the circle connection on these issues. Therefore this approach is very important for sustainable development. The happiness and good health of the people is the destination of the development. I am very confident that your intention to get together here to contribute to this forum will be beneficial to this goal.

On this occasion, I wish all of you all the success and I hope that this forum will have common conclusion to eradicate any obstacle which effect to the health and happiness of people in every regions of the world at large.

Thank you.

Annex 4

TEXT OF ADDRESS BY DR UTON MUCHTAR RAFEI, REGIONAL DIRECTOR, WHO, SEARO

It gives me great pleasure to welcome you to this Regional Conference of Parliamentarians on the report of the Commission on Macroeconomics and Health. Your Excellency, Minister of Public Health, we are deeply appreciative of your august presence here with us today. It demonstrates your abiding interest in the health and welfare of the people.

I would also like to express my appreciation to the Hon'ble Ministers and MPs who have made it convenient to attend this Conference despite their busy schedules.

Before proceeding further, may I, on behalf of all of us, place on record our grateful thanks to the Royal Thai Government, especially to Her Excellency, the Minister of Public Health, for so graciously hosting this Conference.

Humanity has benefited significantly from the unprecedented health gains over the last 50 years. Globally, life expectancy has increased from less than 47 years during 1950-1955 to over 65 years in 2000. Our Region too has gained much from this revolution. However, the fact remains that these gains have bypassed millions of poor and disadvantaged sections of our societies. At the same time, health concerns in the Region are beset by the re-emergence of tuberculosis, malaria and rising incidence of noncommunicable diseases. HIV/AIDS is threatening to offset our hard-won health and socioeconomic gains. In addition, we have to address the unfinished agenda in the face of widespread poverty and illiteracy, environmental degradation and population explosion, and gender bias against women.

We now have a rare opportunity to transform the health scenario and in the process stimulate economic growth and alleviate poverty.

Fifteen years ago, the UN Commission on Environment and Development broke new ground by placing people at the heart of the development process. Now, the Commission on Macroeconomics and Health provides a new global blueprint for poverty reduction and for stimulating growth in developing countries by scaling up investment in health.

I firmly believe that the ultimate objective of growth is sustainable human development. Economic growth is only a means towards this end. Unfortunately, economic growth can happen without expanding employment opportunities. When its fruits benefit only the rich at the expense of the poor, the impact of economic growth can be devastating. Moreover, economic growth that concentrates only upon the present generation without any consideration for future generations cannot be sustainable. Therefore, growth needs to be equitable and sustainable. A suitable macroeconomic framework is capable of generating such growth.

At the Copenhagen World Summit on Social Development, there was clear recognition that investment in people's health is an essential element of sustainable development and social cohesion. This was reinforced at the recent World Summit for Sustainable Development in Johannesburg.

Ten years on from Rio, the world is beginning to accept that health is central to the whole concept of sustainable development. It is a key element in securing our common future.

Two years ago, world leaders agreed on a set of development goals for the Millennium. The Millennium Development Goals focus on poverty reduction in general and several health goals in particular. Thus, the Millennium Development Goals rightly underscore the linkages between overall poverty alleviation and investment in health.

The report of the Commission on Macroeconomics and Health provides the strategic framework for achieving the Millennium Development Goals pertaining to health. It will also contribute to the attainment of other international initiatives such as Roll Back Malaria and Stop TB. The Millennium Development Goals are an expression of humanitarian concern. They are also an investment in the well-being of rich countries as well as the poor. Our world can no longer remain divided between the rich and healthy on the one side, and the poor and diseased on the other.

The need to drastically increase resources to improve health, is a critical element in taking this agenda forward. Fortunately, we have witnessed an increasing commitment on the part of a number of key industrialized nations and funding institutions to increase the development assistance dedicated to health. The results can be seen in the new spending for health by the European Union. It can be seen in the pledges by the United States and other countries at the Financing for Development Conference in Monterrey, in March.

At the same time, great efforts have been made to find new innovative ways to channel the increased health spending. GAVI and the Global Fund to fight AIDS, Tuberculosis and Malaria are key funding mechanisms, which are proving very effective.

Along with increased investments in health, there is an urgent need to develop and strengthen health systems that are effective, fair and responsive. The strategic framework of the Commission on Macroeconomics and Health stands on the twin pillars of increased funding and appropriate reforms for scaling up essential health interventions.

The agenda of your Conference will take you through the exciting story of the linkages between health and development. You will be apprised of the need to tackle a handful of diseases and conditions responsible for the present health deficit. But, increased resources and their efficient and effective management shall be required. Political commitment is a must. The need of the hour is for a new partnership between the developing countries and the rich nations and development partners. Luckily for us, such a partnership is steadily, but surely, emerging. Let us accelerate the process, for we cannot afford to miss the window of opportunity now presented by the Commission on Macroeconomics and Health.

Health is multisectoral. By themselves, the ministries of health or the health sector cannot achieve this new paradigm. It requires energy and commitment on the part of all sectors and the entire ambit of civic society. Parliaments are truly multisectoral: parliamentarians are the custodians of people's security, well-being and prosperity. Therefore, WHO and parliamentarians are natural partners.

I have no doubt that this Conference would greatly contribute to widen the concept of the centrality of health in sustainable development. I would urge the Hon'ble participants to convey the message of this Conference to their colleagues, the media, NGOs and others. Hon'ble Ministers and MPs are the best placed to convince their Presidents and Prime Ministers. We look forward to working with you to set in motion the road map for growth and poverty reduction by scaling up essential health interventions.

I would, once again, like to thank the Hon'ble Ministers and Parliamentarians for attending this Conference. I am confident that your deliberations would be productive and hope that your stay in Bangkok will be comfortable. In conclusion, let me reiterate our grateful thanks to Her Excellency the Minister of Public Health for inaugurating this Conference.

I thank you for your attention.

Annex 5

TEXT OF ADDRESS BY PROF DR PRASOP RATANAKORN SECRETARY GENERAL OF INTERNATIONAL MEDICAL PARLIAMENTARIANS ORGANIZATION (IMPO)

Every Sunday morning, since 1950, you might remember the enjoyment of listening to Radio Thailand on the program **"Happy Mind – Happy Man"** which has been on air for 52 years apart from TV talk on same for 48 years. Moreover, it had also been published in TIME-LIFE Book Series on Stress – How to solve your problem? – It said, people in Thailand were waiting for Happy talk to relieve their grief and stress. All I already mentioned is a part of my life for HEALTH.

Friends, all of us are shocked by the sudden 1997 financial crisis and some of us might experience paupers or beggars' life in just overnight. IMPO then joined hands with SEARO to organize an International IMPO meeting on Economic Crisis and Health Matters in Jakarta.

Similarly in 1998 there was an earthquake in Kobe. In few months time, IMPO has organized a meeting on "Disaster and Humanitarians Action" followed by establishment of "WHO Disaster Centre" which is at present very well organized. Moreover, WHO-WKC Health Development Centre in Kobe had also been set up aimed to exchange views on Macroeconomics and Health. Ever since, WHO and IMPO have been closely working together in Nepal on AIDS, Manila on Tuberculosis, Cairo on Family Health, London on Medical Ethics, Paris on HIV & AIDS and so on – Tokyo, Lapas, 3 times in Bangkok, etc.

As you can see, IMPO and WHO had been working together for 12 years since 1990. All 4,000 IMPO MP. Members around the World are looking forward to not only further collaboration with WHO but also being her official affiliated Agency.

Referring to the conference programs, it happens to me to think of my remarks on health development to benefit economic growth of the nation.

Believe me "Life without Health is Lifeless". Of course, Body and Mind are together, please do not ignore the fact.

"Mental Health is the Pillar of the Society – the Nation."

It is indeed a privilege for me to be thoughtfully asked by Ministry of Health and the Organizing Committee to be a part of this distinguished gathering and talk about "People's Health".

Once again, believe me

"Life without health is Lifeless." As we say:
"Just wealth enough to give and spare.
Just health enough to banish care.
Just friends enough sincere and true.
What more want I,
What more want you."

Here we go back to basics. Family comes first. Our father, mother and the elderly in our surroundings normally keep telling you what is good and what is not. You sometimes get reprimanded for not listening to them and get hurt when we still make risky behaviour. As we say:

Life is never measured by the years you live,
But by the kind deeds you do and all the cheers you give.
Kindness in words – Creates Confidence,
Kindness in thinking – Creates Profoundness,
Kindness in feeling – Creates Love.

Now in modern time, all the things which we were advised "Not to do", are parts of risk and this is now known as a risk management, especially for health investment. It is not only young people are at risk even an old man like me, 17 years to 100, if do not behave properly, is at risk.

SIA = Senior Inactive; SSA = Senior Semi-active; SAA – Senior and Active; SOA = Senior Overactive; SOS = Senior Out of Service; SAS = Senior Active Service "Active Aging".

All those who are visiting Thailand's so called "entertainment area" are not young people but some of them quite old, may be because of the impact of "Viagra". They are at the worst risk, for example, HIV/AIDS. Young people

are at a similar risk because either they lack proper information or information does not motivate them enough to equip them with prevention and behave properly. This is a part of parliamentarians role on social development and public education.

In Asia, young people, middle aged and older people, all are at risk of drugs, HIV/AIDS, tobacco, stress and accidents.

Drugs are one of the worst risks that young and middle age men are taking. Poverty may be the root cause of drug peddling so we need to have multi-dimension approach. Education and motivation is, of course, there but alternatives work and job schemes also could be effective. Use of drug money to fund terrorism is a new phenomena and needs to be faced.

Tobacco use and smoking and related policies need to be evaluated including taxation and pricing, clean indoor air policies, restriction on marketing, advertisement and promotion, restriction on young people's access to tobacco. We must also have more behavioral research to find out why and when men or women start smoking.

Here if you allow my old fashioned view that families needs to be put in center for any action programmes. Most women who smoke are the ones who live single and have peer pressure to smoke. Overall, I feel smoking looks to be going down. One of my barometer to judge, is the airport smoking halls. There, you will see a small number of people smoking. People are not protesting on large number of long haul flight becoming non-smoking.

In the area of health Risk management, we need to be more propaganda minded, need to make more noise from parliamentarians, so that people know what is at risk and how they can avoid it. The message is **"you and I can avoid this if you so wish"** or you are at risk and you must change your behaviour. Otherwise results could be fatal. It is a matter of will power.

"If you think you will lose – you have lost.
For out of this world we found,
Success, begins with a fellow will,
It's all in the state of mind."

In 1987 I was recognized and entitled as "MR. AIPO" a lifetime honorary member at ASEAN Interparliamentary Organization General Assembly for meritorious contributions to solutions on Narcotics, Health Care

of Elderly, Human Resources Development and establishment of Parliamentarians, NGO-IMPO International Medical Parliamentarians, AFPPD Parliamentarians on Population and Development – Promotion of Quality of Life, and Reform of Health and Welfare Systems and WHO-WKC Adviser the active involvement of Members of Parliament and Senators who always try to resolve problems as we say:

“To be tender – with the young,
Compassionate – with aged,
Sympathetic – with the striving,
And tolerate – with the weak and the wrong.
Sometime in life – you will have been all of those.”

It is then led to Training Programs of Young Political Leaders – especially to follow the way of life of one of the great men of the Century, “Sir Winston Churchill” who has been known for these characters.

- (1) Humble and Tender – the bravest – the tenderest.
- (2) Intellectual – never old to learn
- (3) Initiative – such as the motto “Blood, Tears, Sweat & Bread” to win the War by extreme encouragement for survival.
- (4) Patience – “Patience is bitter, but its fruits are sweet”.

If we follow their saying most problem will become “No problem”

It is indeed a great privilege and honour to be among younger friends who are devoting themselves for academic advancement resulting in health for all Healthy human being – our goal of this gathering.

We all are in academe circle, one may have different opinions, but believe me: Goodness is the only investment that never fails.

“Don't walk in front of me,
I may not follow.
Don't walk behind me,
I may not lead.
Walk beside me
And just be my friend.”
This is my firm belief

Not parliamentarians only, not officials only, not SEARO only – We still have one more friend “IMPO”. This is genuine health for all – all of us, health mind.

I must thank you for listening to me so patiently, and listen – Don't come to Bangkok, you will be sorry – Sorry to leave Bangkok. Stay with us, we are offering you package promotion of “Long Stay”.

There is only one way to happiness and that is to cease worrying about things which are beyond the power of our will.

“We live and work and dream.
Each one has little scheme,
Sometimes we laugh, sometime we cry.
There is no star that we could trust.
There is no guiding light.
And all we know is that we must.
Be good, be right, and be just.”

That will lead you to success, good health. Prosperous, long life and Happiness.

Don't forget – Goodness is the only investment that never fails.

Friends, Louis Pastuer's famous last words was “Work never cease to work – for mankind”

This is my belief and my aim for IMPO and WHO, and you all.

I thank you all.

Annex 6

AGENDA

1. Inauguration
2. Introductory Session
3. Health and Development: Regional Initiatives
4. Selecting Interventions for Better Health Outcomes
5. What needs to be done: Resources required to do the needful
6. Responding to the Challenges of the CMH: Future Actions
7. Call for Action and its adoption
8. Closing Session