



The Kingdom of Tonga
79th Session of the World Health Assembly
Agenda Item 3 – Plenary Country Statement
19th May 2026
World Health Organization Headquarters, Geneva
Remarks by: Hon. Huákavameiliku

Mr. President, Director General, Honorable Ministers, Excellencies and Distinguished Delegates,

Malo-e-lelei and warm Pacific greetings to you all.

The Kingdom of Tonga is honored to join this 79th World Health Assembly under a theme that speaks directly to us and to our lived reality: reshaping global health is, and must be, a shared responsibility — not a distant promise, not a technical footnote, but a duty shared equally by the largest nation to the smallest island.

Digital health is one of the clearest examples of how shared responsibility can transform outcomes. For Tonga, digital health offers a bridge across our vast ocean — not of concrete and steel, but of data and dignity.

Telehealth connects outer island nurses to specialists. Interoperable records speed emergency response. Digital surveillance can link Tonga to regional and global early detection networks, so that a fever on a remote atoll is seen as part of a pattern, not dismissed as an isolated event.

But let me be clear: digital health should not widen the digital divide. Innovation too often flows to those who already have the most. Without care, the same technologies that promise inclusion will deepen exclusion — leaving remote islands, rural clinics, and vulnerable populations further behind. We must build digital health systems that reach the last mile first, not the capital city only.

To navigate the digital era equitably, we ask for shared investments in connectivity, capacity building, and data governance that respect our sovereignty and amplify our voice. Digitize access, not exclusion.

Yet digital innovation alone cannot shield us from the greatest threat to our health security: climate change.

Tonga, like its island neighbors, faces rising sea-levels, intensifying cyclones, volcanic shocks, and now a fuel crisis. These are not future scenarios — they are today's realities in Pacific, threatening health facilities, essential services, and deepening health inequities.

Yet no island can face the climate crisis alone. After the volcanic eruption and tsunami that tested our nation's resilience, we are rebuilding climate-resilient health facilities, integrating early warning systems, and strengthening emergency preparedness.

But we have learned this: we should build better now, not wait to be devastated by natural disasters only to rebuild better afterwards. The world has grown comfortable with "build back better." Tonga asks: why must we be destroyed first? Why must a hospital damaged or a clinic be flooded before we invest in resilience? Invest today — in elevated generators, solar-powered cold chains, cyclone-proof wards — before the next wave, not after.

Primary health care is the bedrock of that resilience. Tonga is investing in community-based primary services to ensure no one is left without access, especially in remote areas. When a cyclone cuts off a district clinic, a trained community health worker with a basic kit and a satellite phone becomes the entire health system. That is resilience. That is primary care. And it needs sustained support.

No island can face these challenges alone. Global health cannot be reshaped without sustainable climate financing, technology transfer, and meaningful commitment — not another page of unkept pledges.

At the heart of all progress is our health workforce. Tonga is training, trying to retain our nurses, and providing what support we can to our nurses, doctors, and community health workers

But the global workforce crisis demands global solutions: fairer migration pathways that do not strip small islands of their healers, and shared responsibility for building capacity where it is most fragile. We do not ask others to solve our problems — only to stop creating new ones through inaction.

Excellencies, we must also confront the rising burden of non-communicable diseases — NCDs — which claim far too many of our people. In Tonga and across the Pacific, heart disease, diabetes, and respiratory illnesses are not lifestyle choices; they are the products of global food systems, trade patterns, and environments over which small islands have little control. Addressing NCDs requires shared responsibility in regulation, affordable healthy foods, and health promotion that reaches every village and every outer island.

To reshape global health, we must reshape how we work together.

Tonga calls for four concrete actions:

First, deeper cooperation in digital health, including a Small Island States Digital Health Compact that explicitly closes — not widens — the digital divide.

Second, stronger global action on climate resilience, anchored in "build better now," with loss and damage funding reaching health systems before disaster strikes.

Third, sustained investment in health workers through scholarships, retention incentives, and ethical recruitment agreements.

Fourth, a renewed commitment to primary health care and NCD prevention, with financing and technical support tailored to the unique geography and vulnerabilities of small island states.

We may be a small island — a speck on most maps — but our commitment is large. We offer our experience, innovations, and partnerships as an equal voice at this table.

Let us reshape global health together. Let us keep that promise of leaving no one behind — from every nation to every island, from every capital to every remote clinic — so that all communities, regardless of size or location, can access the health systems they need.

Malo 'aupito. Thank you.