

Remarks

By
Dr Samlee Plianbangchang
Regional Director, WHO South-East Asia

At

***Launching of WHO Country Cooperation Strategy for
Bangladesh***

Dhaka, Bangladesh
31 October 2007

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REGIONAL DIRECTOR, WHO SOUTH-EAST ASIA**

Your Excellency, Maj. Gen Dr A.S.M Matiur Rahman, Health Advisor, the Government of Bangladesh; Your Excellency, Mr Anwarul Iqbal, Adviser for Local Government and Cooperatives; Excellencies; Honourable Health Secretary, Mr A.K.M. Zafarullah Khan; Honourable Secretaries from other ministries; Honourable Director-General of Health Services, Dr Shahjahan Biswas; Honourable Representatives of international agencies; Honourable guests; Ladies and gentlemen,

At the outset, I would like to thank the Government of Bangladesh for hosting the launching of WHO CCS, 2008-2013. I thank the organizers for inviting me to participate in this important event.

WHO CCS is an important technical tool for facilitating collaboration between individual Member States and WHO. It is the tool to help ensure the effective implementation of WHO country focus and WHO county specific approach. This approach is to ensure that WHO's work is really responsive to the needs and requirements for health development in the country concerned - the needs and requirements that are determined within the country's socio-cultural, economic and political context.

WHO CCS is country specific; it is developed to guide the implementation of WHO collaborative activities in the individual

Member States. This technical tool is implemented through the use of WHO resources – knowledge, know-how, information and expertise; with necessary catalytic financial support.

The priority concern in the development of WHO CCS is the local health problems, issues and needs. At the same time, WHO CCS is developed, by taking into account the global health policies and strategies, as mutually agreed by all Member States in the Governing Bodies. These are particularly those policies and strategies as reflected in the WHO General Programme of Work and the Medium-Term Strategic Plan.

Within the UN system at the country level, WHO CCS is considered to be a part of the UN Development Assistance Framework (UNDAF). The aim of WHO CCS is to ensure the complementarity of WHO's work with those of other international agencies, both within and outside the UN system, that are working locally. It helps facilitate efficient coordination and cooperation between WHO and those partners. The development of WHO CCS is basically a joint endeavour between WHO and the concerned national health authorities. This is also developed in consultation with the local offices of the relevant international organizations. It is a medium-term strategic plan that needs review and update as appropriate during the course of its implementation, in order to ensure its continued responsiveness to the changing health situation and to the changing circumstances in the country concerned.

WHO CCS is an important basis for the preparation of the WHO country biennial programme budget and plans of action, which are developed to ensure systematic, efficient and effective implementation of WHO collaborative programme activities in the country. The continuity in the use of WHO CCS by Member States will also

contribute to the development of WHO global policies and strategies. When the need arises, WHO CCS may be used as a basis for resource mobilization for the health sector of the country concerned.

I am very pleased to have this opportunity to participate in the launching of WHO CCS for Bangladesh. Bangladesh, has achieved commendable results in its health development efforts during the last decade. The capacity of the health systems infrastructure in most of the areas has been greatly strengthened, along with the capacity of the health workforce. Health indices in all aspects have significantly improved. With cleaner environments and better nutrition, the Bangladeshi people look much healthier today. If this development trend continues, Bangladesh will certainly attain the health-related MDGs within the stipulated time frame.

On behalf of WHO, I sincerely congratulate the Government of Bangladesh for their laudable achievements in the health field. I am confident that this WHO CCS will further enhance WHO support to the strengthening of country capacity, in the health sector in particular. WHO wishes to see the health systems in Bangladesh strong and ready to face effectively all of today's health challenges – the health systems that are capable to ensure a healthier population throughout the country.

With our partners, both within and outside the UN system, WHO will spare no efforts in supporting the Government in their health development endeavours. This WHO CCS will ensure that WHO collaborative activities in the country will always meet the expectations of the Government. And, I wish, that this WHO CCS would be used flexibly in the process of its implementation, in order to always ensure its responsiveness. The responsiveness to the country's changing needs and requirements; and to the dynamic situations in the health

field. The WHO Regional Office for South-East Asia will provide the required support to the WHO country office, and to the concerned national authorities in implementing this CCS.

I would also like to mention that, without the CCS, WHO collaboration with the country may not be adequately focused to ensure the required impact on the country health problems and health situations. If implemented properly, this WHO CCS with its seven strategic directions, can take us a long way in strengthening the capacity of the country health systems. The capacity that is the prerequisite for sustainable health development and self-reliance that are required for the long-term health improvement for all people.

Before concluding, let me underline the crucial importance of multisectorality of health development. Success in health development for improving the health of the entire population in the country depends, to a large extent, on the inputs and actions from sectors other than health. Multisectoral involvement in health development is an essential requisite for long-term sustainable health improvement for all people.

WHO CCS for Bangladesh has also been developed with an aim towards promoting multisectoral actions in health. I hope that this important aspect of the strategy would be adequately emphasized in the course of its implementation.

I, finally, wish Bangladesh all success and all the best in its collaboration with WHO through the implementation of WHO CCS.

Thank you.