

Opening Remarks

by

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Regional Director, WHO South-East Asia*

At the

*Regional Meeting on Health-Care Reform
for the 21st Century*

*20-22 October 2009
Bangkok, Thailand*

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Excellencies, distinguished participants, honorable guests, ladies and gentlemen,

I am very pleased to welcome you all to the Regional Meeting on “Health Care Reform for the 21st Century”. This is one of our “high-profile” regional meetings on the current topics of our “priority concerns” in health care. The primary purpose of these meetings is to advocate for policy and strategy changes in the health care systems.

I overwhelmingly thank all participants for sparing their valuable time to attend the meeting. I specially welcome our distinguished keynote speakers H.E. Lyonpo Zangley Dupka, Minister of Health, the Royal Government of Bhutan. Lyonpo Zangley Dupka has been in the mainstream of the “Gross National Happiness” movement in Bhutan since its inception. The movement is now internationally known and followed; H.E. Dr Fernando S. Antezana, former Deputy Director-General of WHO, former Chairman of WHO Executive Board and former Minister of Health of Bolivia. Dr Antezana was Deputy Director-General of WHO when the Organization underwent a reform process in the light of the global changes during the 1990s, a process that inspired the new paradigm of public health today. Dr Amorn Nondasuta, President, Foundation for Quality of Life, and former Permanent Secretary for Public Health, the Royal Thai Government. Dr Amorn was the pioneer of PHC

development of public health care in Thailand during 1980s which had been a lesson for many countries in Asia. He has also been a key supporter of the health care reform in Thailand.

I sincerely thank them for their interest, time and valuable contribution to this meeting. We look forward to their inspiring and thought-provoking keynote speeches.

Excellencies, distinguished participants,

It is time to revisit “Health Care Reform” to identify necessary changes in our health care systems that are needed to ensure universal coverage of health services for “all people” and to chalk out a road map for effecting those changes in countries of South-East Asia Region during this Century. This is with the view to accelerating progress towards:

- better equity and social justice in health; and
- a universal coverage of, and unlimited accessibility to, health services for “all people” in all countries.

We will appreciate that these broad objectives of health care development will need to be achieved, among others, through:

- full community participation and involvement, and

- multisectoral and multidisciplinary actions.

We need this reform because several important public health problems still prevail in countries of the Region and we are currently facing a multitude of new challenges that need more robust health care systems to tackle. These challenges stem from the various crises of our times, such as:

- climate change,
- the global economic downturn,
- emerging infectious diseases, including pandemic Influenza A(H1N1), and
- fast emergence of Noncommunicable diseases.

We should take these crises as another opportunity, to move one more step forward to strengthen our health care systems; make our health services delivery stronger, more relevant, and more responsive to the changing health problems and needs of the entire population in the community.

We are now at another milestone in a long road to secure improved health for all people, for which the achievements of equity and social justice in health need critical re-examination. Attempts to reach the hard-to-reach, or to reach the unreached, must be intensified through innovative strategies. Overriding priority has to be accorded to health care reform in the national political agenda—the agenda that ensures substantial change in

the health care system to the innovative strategies; changes in the way health care and services are planned and provided. We need the strategies that call for country-wide application of the PHC principle to ensure adequate health care for all, including the poor, underprivileged, vulnerable and marginalized. These strategies must ensure the balanced development of health care, with right mix of the preventive and curative services.

PHC should be made the cornerstone for reorientation of national health care systems, the systems that take into account the entire range of health problems and health needs.

Major health problems include:

- mortality or deaths,
- morbidity, declared or undeclared by suffering people,
- silent diseases, diseases at early stage, and
- health risks and vulnerability, both known and unknown.

We need health care systems that adequately recognize the role of sociocultural, economic and environmental determinants of health that prevail in a particular community. These determinants profoundly impact the health of people of all strata. We need health care strategies that:

- recognize the important role of “local governments” and “civil society”; in the management of “decentralized” health services delivery systems,

- adequately recognize the important role of “community health workers” and “community health volunteers”; who serve the majority of the population at the grassroots levels.

Attempts to reform the health care system are not new. The reforms have been conceived and pursued worldwide in various forms for decades. During the recent past, there have been strategic developments in countries of the Region, in strengthening health care systems based on PHC principle. These experiences will be shared during the course of this meeting. However, a lot more needs to be done in these reform processes to ensure health for all people everywhere, regardless of their social or economic status. Big gaps in health status and in health situations are still prevalent everywhere.

The reforms have to continue to ensure health care systems that are robust enough to effectively face emerging health challenges. More combined efforts of all sectors and disciplines are needed for successful health care reform for the 21st century.

To effectively harness these combined efforts, able leaderships are indispensable. Such leadership can coordinate the work of various sectors across disciplinary lines, and is without “professional prejudice”, neutral and balanced enough to pursue the reform process successfully.

In this reform process, we should expect changes, among others, in:

- health policy development, with emphasis on balanced care between preventive and curative;
- the care that promote people to stay healthy, to lead a socially and economically productive life;
- health systems infrastructure and its governance, with emphasis on decentralized health services delivery to ensure reaching the hard-to-reach or to reach the unreached population;
- the development of human resources for health, with emphasis on workforce in the area of public health, primary care and primary health care.

And even more important is the fact that the reforms should lead to significant changes in allocation of health resources, changes that ensures their equitable distribution, at both national and sub-national levels.

The reforms should lead to effective protection of health consumer through:

- improvement in ensuring the “people’s right” to unlimited access to quality health care, and
- better recognition of “pride” and “dignity” of consumers in the process of health services delivery.

“Healthy public policies” should be further promoted in the reform process. These are policies whereby individual sectors seriously take into account “health concerns” in their development activities. Public-private partnership should be another important area for our attention in any discussion of health care reform. Public-private partnership is not new. But its realization is yet to be achieved. The private sector should be motivated to take more responsibility in areas of public health and primary health care. In managing health care systems, there should be clearly defined roles of:

- governments at all levels,
- service providers – either public or private, and
- consumers of health services.

Ladies and gentlemen,

To achieve all these and others in the health care reform process, what is essential is “unwavering political commitment and support”. “Untiring efforts” are needed for advocacy at policy level for strategic change; and for actions at the operational level.

Once again, I thank all of you for your kind attention to this meeting. I wish you, interesting and fruitful deliberations during the course of this meeting. I wish the meeting all success, and wish you all an enjoyable stay in Bangkok.

With these words, I declare the Regional Meeting on Health Care Reform for the 21st Century open.

Thank you very much.