

Sri Lanka is well on track to achieve the health-related MDG's- Health Secretary tells at the UN

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Statement by Dr. H.A.P. Kahandaliyanage, Secretary, Ministry of Healthcare & Nutrition of Sri Lanka at the High-Level Segment ECOSOC, Geneva, 6th July 2009 Report on "South Asia Regional Ministerial Meeting on Financing Strategies for Healthcare", 16-18 March 2009, Colombo, Sri Lanka

Mr. Chairman, It is my pleasure to participate at this High-level Segment of ECOSOC, dealing with the 2009 Annual Ministerial Review on the theme of Implementing the Internationally Agreed Goals and commitments in regard to global public health. I have listened carefully to the thought-provoking statements on this important subject made by the distinguished Speakers who have taken the floor before me. The Annual Ministerial Review process has strengthened the role of ECOSOC in tracking progress and stepping up efforts towards the realization of the Internationally Agreed Development Goals including the MDGs by 2015 target date. The achievement of the IADG's including MDG's requires a global partnership and a coordinated approach, and the High-level segment of ECOSOC provides an opportunity for such an integrated policy dialogue among all stake-holders including governments, civil society, international financial institutions, private sector, academics and UN agencies. The ultimate objective is to generate added momentum to the timely realization of the IADG's and the MDG's. Excellencies, Ladies and Gentlemen, Previous Ministerial Reviews of 2007 and 2008 have focused on key MDGs - eradicating poverty and hunger. Sri Lanka is pleased that the 2009 Review focuses on the implementation of the commitments in the Health sector, the subject of three MDG's, and an area in which Sri Lanka, despite relatively limited resources, has many experiences, lessons and successes to share. As a result of our commitment over several decades towards human development and social progress, and targeted policy interventions, we are satisfied that today we are well on track to achieve the health-related MDG's. It was against this background that Sri Lanka had volunteered to contribute to the 2009 Ministerial Review process by hosting the South Asia Regional Preparatory Meeting on Financing Strategies for Health Care, 16-18th March in Colombo. The Colombo meeting was one of the five country-led regional meetings which were held in support of preparations towards this session of the ECOSOC AMR. The Meeting was hosted by the Government of Sri Lanka in collaboration with UNDESA and WHO. 121 delegates attended the Meeting, including several at Ministerial level. Participation was obtained from a wide spectrum of stake-holders - senior Government representatives, UN entities, financial Institutions, funding agencies, regional organizations, civil society, private sector and academia. The Agenda of the meeting was divided into the Opening Session followed by four substantive sessions, as follows: Financing strategies for healthcare Including external financing; Health systems in situation; Initiatives and recommendations presenting best practices and new initiatives; Progress in MDGS. The Opening Session was addressed by the Minister for Foreign Affairs of Sri Lanka Hon. Rohitha Bogollagama and the Minister for Healthcare and Nutrition Hon. Nimal Siripala de Silva. The Keynote Address was delivered by the Prime Minister of Sri Lanka Hon. Ratnasiri Wickramanayaka. Opening remarks were also addressed by Mr. Thomas Steltzer, Assistant-Secretary-General UNDESA and Mr. Anarfi Asamoah-Baah, Deputy Director-General World Health Organization. The Vice-President of ECOSOC H.E. Ambassador Hamidon Ali, Permanent Representative of Malaysia to the UN in New York also addressed the Opening Session. Discussions took place against the backdrop of a worsening international economic and financial crisis and other crises which affect progress in the achievement of the MDG's, including in the health sector. The Asian region is very diverse and national health expenditures vary significantly. Solutions to challenges in the health sector needs to be geared towards special needs and peculiar circumstances of each country. The participants examined key challenges that countries, particularly low-income countries face in financing their health systems in the process of achieving the Internationally Agreed Goals on global public health. They discussed how the international community can support countries as they move towards universal coverage by (a) increasing funding in health (b) making it more predictable (d) channeling funds to recipient countries in ways that strengthen national financing systems, and better financing of health in crisis situation. While civil society and the private sector have important roles to play, the public sector has to take the lead role to deliver effective and equitable health services. Public-private partnerships are central for achieving the desired outcomes. The key messages that emerged from the discussions were as follows:

- With regard to domestic sources of healthcare financing, it was agreed that for universal coverage to be achieved, we need to find increased domestic funding and enhance efficiency in the use of resources. Equitable access to healthcare requires a move away from out-of-pocket payments to other options. Even though national growth rates were reducing against the current global background, rising incomes provide an opportunity in many Asian countries to expand domestic health funding.
- With regard to external sources of funding, it was agreed that this needs to increase, and become more predictable and better aligned with national priorities. Innovative sources for health financing should be additional and not a substitute for external ODA funding. Donors tendency to focus on particular countries while neglecting others, is to be avoided.
- With regard to health care in conflict situations, improving health care is possible even when countries are facing crises. Expenditure on health care should be on par with other areas in the recovery and rehabilitation phases. The meeting was followed by a field visit to several locations in the Central Province of Sri Lanka to observe some aspects of the healthcare facilities in operation in the sectors of tertiary healthcare and medical education, primary healthcare and community participation in primary healthcare. The Meeting offered a number of recommendations for consideration by the Economic and Social Council, and actors within the region. These recommendations placed before you in document E/2008/88 for consideration and inclusion in the outcome of this session of ECOSOC. Finally, I would also like to place on record the important contribution made by the UN Department for Economic & Social Affairs (UNDESA) towards the Annual Ministerial Review process, as well as in the Organization

and the successful outcome of the Asian Regional Ministerial Meeting in Sri Lanka. I thank you. 3rd July 2009