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SPEECH BY DR MARGARET CHAN, WHO DIRECTOR-GENERAL

- Excellencies,
- Honourable ministers,
- Distinguished delegates,
- Representatives of the African Union,
- Dr Sambo,
- Ladies and gentlemen,

In May 2000, the Economist news magazine ran a cover story about Africa. The title was blunt: “Hopeless Africa”.

This was a story about refugees, warlords, famines, floods, and failed governments, about AIDS, malaria, and intractable poverty.

The discussions during that year’s Regional Committee did little to change this hopeless outlook.

AIDS was rampant. Many governments had declared the disease a national disaster.

Antiretroviral medicines were prices beyond the reach of every country in the Region.

The malaria situation was devastating, and getting worse. Maternal mortality averaged 940 deaths per 100 000 live births, compared with fewer than 30 deaths in wealthy countries.

The catalogue of underlying woes was long: failed economies, collapsing social institutions non-functioning public utilities, broken health systems, civil strife, war, and never-ending poverty.

Fortunately, neither of these hopeless views holds true anymore.

This past March, the Economist featured another special report on Africa. The title and sub-title were dramatically different: “Africa rising: the hopeful continent.”

This was a story about peace and democracy taking root, about steady economic growth, booming markets, and a burgeoning, well-educated middle class.

As the report noted, things were still exceedingly bleak in much of the region, but several countries were getting economic development right, and foreign investments and cross-border commerce were soaring.

Huge leaps ahead in human development were reported including steep declines in HIV infections, malaria, and child mortality, and the fastest growing rates of primary school completion anywhere in the world.

The report had an upbeat conclusion. For the first time in a very long time, most African can hope to see a better future for their children.

This is a remarkable turnaround in the assessment of Africa’s prospects, over a remarkable short time.

The assessment is widely shared. The latest reports from the World Bank, the OECD, and the African Development Bank are equally optimistic, also for longer-term prospects.

The fact that robust economic growth coincides with strong moves towards democracy augurs well for the future.

Citizens, activist groups, and the media expect more from politicians, and hold governments accountable for their performance.

Africa is changing. Africa is rising. Africa is at a unique juncture in its history.

Some critical political choices need to be made.

Rapid economic growth carries a classic risk. Unless the right policies are in place, the rich get richer while the misery and sickness of the poor endure.

The world does not need any more rich countries full of poor people.

The latest report of the Africa Progress Panel, chaired by Kofi Annan, puts the focus where it needs to be. What does this growing wealth mean for the people of Africa?

Will it lift millions out of poverty and ill health through equitable public spending?

Or will it make the gaps between the rich and the poor even wider?

As the banks and the economists warn, policies must be in place to reduce poverty, create jobs, and ensure fair access to social services, including health.

As they also note, equitable access to health care is one of the best ways to ensure that the benefits of economic growth are evenly distributed.

Well-managed health systems, with fair access to services, promote social cohesion and stability. As Kofi Annan has stated, the whole world benefits from an Africa that is prosperous, stable, and fair.

This brings me to the three main messages I want to convey.

First, persuade your governments to introduce public spending that make equity an explicit objective. Fair distribution of benefits never happens all by itself.

Economic assumptions that wealth will somehow automatically trickle down from the privileged few to benefit the masses have been soundly refuted.

Africa's decade of remarkable economic growth has not been matched by equally remarkable gains for health.

Growth in GDP is not the real measure of progress.

What matters most is the rate at which new wealth is converted into less poverty, more opportunities, and better health.

Africa has a good foundation to build on. Health has long been regarded as a nation-building strategy.

As the African Development Bank tells us, health and the provision of quality health services for all are vital to the growth and prosperity of Africa.

Health promotes wealth, and wealth promotes health, but only if it is evenly distributed.

Second, make sure that solutions to health problems are made-in-Africa. You have earned the right to do so.

Even as Africa's prospects brighten, even as more countries reach middle-income status, others will continue to need external financial support for their health programmes for some years to come.

Countries absorb development assistance through a large-scale mobilization of their own, usually very limited health resources.

They deserve the first say when decisions are made about health priorities and strategies.

Recent studies show that countries have moved faster and further to improve aid effectiveness than have their development partners.

This discrepancy has put the focus on behaviours that need to change. For example, funding is still not being channeled in ways that strengthen, rather than overburden, existing country capacities.

African health officials have been especially articulate about the causes of ineffective aid and the problems it creates.

Fragmented aid means a proliferation of reporting requirements and indicators. It means the procurement of an array of medicines and equipment types. It means missed opportunities for economies of scale.

My third piece of advice is this. Move your health systems towards universal coverage, with its dual focus on quality care and social protection for all. Universal coverage makes equity an explicit policy objective.

Investment in social protection is one of the most powerful ways for African governments to extend the benefits of resource wealth to their citizens.

Well-designed social safety nets can build resilience among vulnerable populations, support growth, and reduce social inequalities.

They are also a safety net that protects against trends that make the rich richer and keep the rest trapped in poverty.

Ladies and gentlemen,

No one can deny that conditions are exceedingly bleak for many millions of Africans.

In the poorest parts of Africa, WHO estimates that around half the population lacks access to essential medicines.

Nearly all reports before this Committee point to the same barriers to better health: inadequate financial and human resources, weak institutional and regulatory capacity, overburdened health systems, and too little political commitment.

Few health systems are prepared to cope with an onslaught of chronic noncommunicable diseases or with the Region's growing population of the elderly.

Too little has been done to stop the feminization of poverty.

Yet Africa now has countries that have addressed these and other barriers and made progress despite the odds.

This is one reason why I am personally optimistic about the future of health in Africa.

Progress is being made. Old problems are being solved. And new opportunities are opening.

Seize these opportunities.

Thank you.