

Dr. Margaret Chan opens 64th World Health Assembly... (to the private sector!)

The 64th World Health Assembly started yesterday, Monday 16th May 2011, in Geneva. The opening speech made by the Ministry of Health of El Salvador, Maria Isabel Rodriguez, strongly called for a return to the values and principles of the Alma Ata declaration. She blamed the structural adjustment plans, forced on many low and middle income countries by the World Bank and the International Monetary Fund, for their devastating impact on the health of the people. She advocated for social justice as the basic principle that should guide the struggle for health for all. She also specifically addressed and thanked former WHO Director Dr. Halfdan Mahler, who was present in the room.

The following opening speech by WHO Director General (DG), Dr. Margaret Chan, was almost entirely dedicated to the successes achieved by the Organisation in the fields of communicable diseases (including neglected tropical disease), with emphasis put on the development of new vaccines (meningitis) as well as new technologies to diagnose TB. Significantly, the collaboration with the Bill and Melinda Gates Foundation was mentioned twice, and more generally multistakeholder action was praised as the way to go in order to mobilise private funds for the people's good. The work of the Commission on the Social Determinants of Health was quickly mentioned once, and no referral was made to the growing health inequalities within and between countries. Dr. Chan then moved to the current global financial crisis, stating that WHO has been advised to "prepare for an era of enduring economic austerity" and therefore justifying the need to "introduce cost-saving measures" and "cut back on traditional areas of work with deep regret". She foreshadowed what she called "the most extensive administrative, managerial and financial reform" in the history of WHO, aimed at giving "a bigger voice to the many partners that work in health". The "new" WHO will pursue excellence, as well as effectiveness, efficiency, responsiveness, objectivity, transparency and accountability. Finally, Dr. Chan invited Member States to join her on "this journey to reaffirmation, remembrance, reform and revitalisation". "Remember the people" is how she opened and closed her speech. Does that make sense?

In the afternoon, the plenary session continued with the statements from the national delegates, who were asked to focus particularly on non-communicable diseases (NCDs). Nearly all contributions addressed mainly lifestyles and behaviours, mentioning in particular alcohol and tobacco use. With the exception of Brazil, France and Iran, nobody mentioned the unequal exposition to risk factors, such as nutrition or life and work conditions, which explains the differential burden that these diseases have among the rich and the poor, at both the national and the global level. Again, only those countries mentioned the broader and structural determinants which underlie NCDs epidemiology and the need to address them. Strikingly out of context, the statement from the US delegate addressed almost entirely the issue of smallpox virus. The need to keep viral strains within US-based laboratories, in order to continue the research on vaccines as well as on diagnostic and therapeutic tools, was emphasised. The delegate therefore strongly opposed the WHA resolution, which will be discussed in the coming days and which proposes a destruction of all viral strains.



Simultaneously with the discussion on NCDs that was happening in the main plenary room, the first session of Committee A (which will be discussing technical and health matters during the Assembly) started addressing the Health System Strengthening agenda point (see <http://www.ghwatch.org/node/223> for background resolutions and reports and PHM comment) . In general, the challenge of universal coverage was the main issue. However, as many member states made their statements from the floor, nothing new came up: words of support to the WHO reports as well as quotes from these, mentions to the challenge of universal coverage, health system financing, health workforce policies, health information systems, and so on. The Paris Declaration on Aids Effectiveness principles were brought up by many of them: alignment, harmonisation and accountability. Chile underlined the need for disaster and emergency situation preparedness. In brief, amongst so many repetitive statements, Thailand was the only country making a more critical intervention: the delegate expressed great concern to see that health has not been treated by WHO in the sense of well being, rather it has been addressed in the context of a limited view aligned with the biomedical perspective only; WHO is seeing health system as a health CARE system, not as a system to achieve well being; in addition, WHO is clearly being influenced by biomedical researchers funded by pharmaceutical industries and by the corporate sector. In summary, regarding Health System Strengthening, we saw a very repetitive session with many commandments to WHO for its reports and for its 2010 World Health Report, with only Thailand speaking up about some crucial concerns.



Among the relevant evening events, a joint seminar from the WHO and the Brazilian government announced the upcoming world Conference on the Social Determinants of Health, which will take place in Rio de Janeiro from the 19th to the 21st of October 2011. Dr. Margareth Chan (WHO DG), Dr. Mirta Roses (PAHO Director), Dr. Alexandre Padilha (Brazilian Minister of Health) and Paulo Buss (Brazilian delegate from Fundação Oswaldo Cruz, taking the lead on the organization of the conference). Dr. Nila Heredia (Health Minister of Bolivia) and Dr. Eduardo Espinoza (Health vice-minister of El Salvador), as well as numerous PHM members were present in the audience. The event has the ambition to put into practice the recommendations from the WHO Commission on Social Determinants of Health (CSDH) stated in their final report, although it has to be reminded that the proposed subthemes for the conference need to be more linked to the Commission's recommendations. The expected output of the Conference is a strong political document, which asks for governments' commitment to address SDH through long-term multisectoral plans. The need for civil society participation has been stressed several times, however it is not yet clear by which mechanisms civil society will be invited and allowed to participate in the works. An effort towards a participatory, transparent and open process was acknowledged: an online consultation on the Conference platform is now open to public comments until June 3rd (see <http://www.who.int/sdhconference/en/>). Several PHM members were able to raise critical voices at the end of the presentations, highlighting in particular the need to address the structural macroeconomic determinants of SDH, related to the global economic order. The concern about the role of "civil society" which might well include philanthropic foundations and the private sector, representing the interests of their founders or share-holders, and not the broader public interest, was raised.

Simultaneously, a side event on non-communicable diseases (NCDs) took place, organized by The Lancet in collaboration with a partnership of scientific societies and NGOs and financed by the Rockefeller Foundation and the main pharmaceutical companies. Public-private-partnerships (PPPs) have once again been mentioned as "the way to go" in order to address prevention and treatment of NCDs. Critical questions from the audience, including PHM members, were not addressed by the speakers.

Highlights of today (Tuesday 17), the second day of the conference, will most likely be the invited speech of Bill Gates in the plenary. Hopefully, the indiscretion of the preannounced dominant role the Foundation he leads plays in financing the study on the necessary WHO reform, will be put up for discussion this morning.