## Conference on Sustainable Development in Latin America and the Caribbean: Follow-up to the post 2015 agenda and Rio+20

## Intervention by PAHO/WHO Dr. Karen Sealey, Senior Adviser, UN Matters and Partnerships 8 March, 2013

Dr Sealey informed that she was making her remarks on behalf of Dr. Carissa Etienne, Director, Pan American Health Organization, who was in attendance the day before but had to travel to Thailand today for a previous commitment to WHO.

In many LAC countries, the progress towards the global and regional health goals over the past decade has been impressive. However, since <u>LAC remains the most inequitable region in the world</u>, it is important that we anchor discussions relating to the development of the post 2015 development agenda in what is happening at the local level and monitor the experience of the vulnerable groups.

For this reason, about a month ago PAHO facilitated a consultation with representatives of civil society in Latin America: mayors, indigenous authorities, Afro descendants, in Antigua, Guatemala. The participants made several recommendations after discussing the lessons learned from the experience of implementation of the MDGs.

- Recommendations included,
  - Democratizing the debate for a new development agenda
  - Promoting alliances with these communities and opening spaces for their voices to be heard, and for their participation in the implementation of policies.
  - Working with the interior of countries so that the positions and outlooks of these communities are reflected at the international level
  - Reorienting training for health workers to the concepts of health that transcend the biomedical model.

## Madame President.

Many countries of this region are experiencing the dual and sometime triple burden of the epidemiological mosaic in Latin America and the Caribbean: some in LA countries struggling to eliminate neglected diseases like Chagas; the Caribbean subregion, has the second highest prevalence of HIV in the world; and all countries, regardless of level of economic growth, face the looming tsunami of the burden of Non Communicable Diseases (NCDs).

In the context of sustainable development, countries have to be able to provide both the conditions for health which we call the social determinants of health such as education, safe water, affordable nutritious food, protection form impoverishment as a result of illness; as well as comprehensive, quality services to facilitate early diagnosis, effective treatment and rehabilitation, if necessary, for a wide range of diseases when they rise...and there will be new ones in the future.

For this reason WHO and PAHO are advocating the adoption of ONE overarching and inspirational health goal into which all the many dimensions of health priorities new and emerging, can be captured. There is a growing consensus for this in the wide ranging, multi-faceted consultations that have taken place. Specifically, WHO/PAHO is of the view that Universal Health Coverage incorporates the range of quality health services for the promotion, prevention, treatment and rehabilitation.

In this regard, allow me to share with you the results of the high level global dialogue on health which was just held in Botswana, 4-6 March. The meeting pas proposed the following framework for future goals:

"• The post 2015 overall vision should be wellbeing for all people. This would require contributions from all sectors. There should be concrete health targets under all development goals.

• Maximizing health lives at all stages of life as an overarching health goal.

• The rising burden of NCDs should be addressed as an additional specific health goal, with an emphasis on prevention. A sub-goal could be based on the WHA resolution.

• Universal Health Coverage as an operational goal which should include access to all key interventions (promotion, prevention, treatment, rehabilitation, palliation), including those related to the health MDGs and NCDs, as well as financial risk protection for everyone, and require strong efficient and equitable health systems that can deliver quality services on country health priorities.

• Equity should be "hardwired" into the goals through disaggregating indicators and targets at all levels."

Thank you.