

African Region

## **REGIONAL COMMITTEE FOR AFRICA**

**ORIGINAL: ENGLISH** 

<u>Seventy-fourth session</u> <u>Brazzaville, Republic of Congo, 26–30 August 2024</u>

## OPENING REMARKS BY THE WHO REGIONAL DIRECTOR FOR AFRICA

Your Excellency Denis Sassou Nguesso, President of the Republic of Congo, Mr Anatole Collinet Makosso, Prime Minister of the Republic of Congo, Mr Gilbert Mokoki, Minister of Health and Population of the Republic of Congo, Honourable Ministers of Health and Heads of Delegation, Honourable Ministers and other leaders of the Republic of Congo, Director-General, Dr Tedros Adhanom Gebreyesus, Your Excellency Minata Samaté Cessouma, Commissioner for Health, Humanitarian Affairs and Social Development of the African Union, The Representative of the Director-General of Africa CDC, The UN Resident Coordinator, and other colleagues from United Nations agencies, Dear partners, Distinguished guests and members of the media, Ladies and gentlemen,

It is my great pleasure and honour to welcome you to the Seventy-fourth session of the WHO Regional Committee for Africa.

I'm particularly delighted to do so as a resident of Brazzaville:

- Mboté!<sup>1</sup>
- Boyeyi malamu awa na Brazzaville!<sup>2</sup>

I express my deep gratitude to His Excellency Denis Sassou Nguesso, President of the Republic of Congo; Mr Mokoki, the Minister of Health and Population; and the Government of Congo across different ministries for the preparations and hosting of this session, and for facilitating the smooth arrival of delegates.

<sup>1</sup> Greetings.

<sup>&</sup>lt;sup>2</sup> Welcome to Brazzaville.

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In 1952, WHO moved its Regional Office for Africa from Geneva to Brazzaville. For 72 years, the Republic of Congo has hosted our Regional Office and provided us with an enabling environment to carry out our mission. I am deeply grateful to the Government and people of Congo for their generosity.

Since 2009, the Republic of Congo has been making efforts towards universal health coverage. It has provided free treatment for HIV/AIDS, tuberculosis, and a range of maternal and child care services to vulnerable citizens.

The country has also been making good progress and achieving results with the support of our Country Office, on decentralization of financing and access to services, as well as the use of technology.

Mr President, your leadership role in preserving the natural environment, and slowing down climate change needs no introduction.

Your engagement in reforestation and the protection of rivers inspires us; it is urgently needed to help reduce greenhouse gas emissions for improved health, and development.

Africa is responsible for only a fraction of global greenhouse gas emissions, but already suffers enormously from climate change.

Africa will pay for a climate crisis it did not cause.

Allow me, Mr President, to make this appeal to you: We would be delighted if you could lend your voice to emphasizing the health impacts of climate change.

We would be honoured if you could advocate for resources to be made available to African countries to mitigate these impacts through prepared and resilient health systems and sectors.

As WHO, we are leading initiatives to reduce the health impacts of climate change. Recently, the Minister of Health of Senegal has been identified as WHO's climate change and health champion. A partnership between the Congo and Senegal would be synergistic and productive.

I thank you in advance, Mr President, for your support.

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I'm sincerely grateful to the Government of Botswana for hosting last year's very successful Seventythird session of the Regional Committee for Africa.

I thank the Chairperson of the session, Dr Edwin Dikoloti, the Minister of Health and Wellness of Botswana, and His Excellency President Masisi.

We have greatly benefited from his leadership and availability for governing body discussions and events throughout the past year. I also congratulate Dr Dikoloti for his work presiding over the Seventy-seventh session of the World Health Assembly in May.

Likewise, I greatly appreciate the valuable assistance of the two Vice-chairs: Dr Austin Demby, the Minister of Health and Sanitation of the Republic of Sierra Leone, and Dr Pierre Somse, the Minister of Health and Population of the Central African Republic.

Thank you for your service and dedication.

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Excellencies, colleagues and friends,

We are living in a challenging global environment.

Economic difficulties - debt servicing, growing inequalities, and conflicts diverting funding - create stagnation and political instability.

Some nations are bouncing back from the COVID-19 pandemic, but the poorest ones are not; many are seeing conditions deteriorating - below 2019 pre-pandemic levels.

We are witnessing a rich person versus a poor person's world.

We are seeing development unfolding in very unequal ways.

Why does this matter?

It creates more vulnerability and makes it even more difficult to achieve the SDG-health targets.

As a Region, we must unite and encourage the rest of the world to join forces against the major threats of the 21st century, especially climate change and the next pandemic.

These threats demand international collaboration, not conflicts.

Who can stop climate change with missiles?

Who can respond to the next pandemic with tanks?

Who can reduce noncommunicable diseases with a bomb?

The last World Health Assembly focused our attention on disease prevention and health promotion; it gave us tools for collaboration.

The historic package of amendments to the International Health Regulations (2005) and ongoing discussions for the Pandemic Treaty illustrated dramatically what we were aware of - the interconnectedness of geopolitics, economics, business, and other sectoral areas of development with health.

I am pleased with the African Member States' role and participation in these processes.

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Having served in global health for a long time, I'm proud of how Africa is raising its voice to shape global health issues, helping to build international dialogue. Thank you for this commitment; let us not waver from it.

What is needed as engagement in the treaty discussions and negotiations is consensus over the outstanding issues; only with this can we reach our shared goal of a pandemic agreement for a safer and more equitable world.

Emerging from COVID-19's impact and other shocks, the continent faces a challenging period in health financing to meet increasing needs.

I applaud our Member States' efforts to explore additional financing for health security through the Pandemic Fund and other funding sources.

Our special event on the WHO Investment Round will further make our voice heard.

I acknowledge the efforts of countries in increasing domestic financing for health. It aligns with the need for more spending on global public goods that benefit everyone.

Our health challenges are diverse. We need to transition from the "silent epidemic" and confront the reality of noncommunicable diseases.

We must invest more now in recognizing and tackling NCDs with adequate and sustained resources, and adopting a person-centred approach, with a focus on addressing risks, early detection and prevention; and leveraging other programme service delivery platforms, especially primary health care services.

Emerging diseases and the changing pattern of existing diseases continue to affect our populations. Our Director-General declared mpox a public health emergency of international concern – which aligns with Africa CDC's declaration of the same outbreak as a "public health emergency of continental security."

We are working with the governments and communities of the affected countries in our Region, as well as the Africa CDC, NGOs, civil society, and other partners, to understand and address the drivers of these outbreaks.

Significant efforts are already underway, with our country teams working on the frontlines to help reinforce measures to curb the spread. We are scaling up international action to support countries and bring the outbreaks to an end.

We continue to advocate for the necessary diagnostic, therapeutic tools and vaccines. We provide technical support for regulatory approvals through the African Vaccine Regulatory Forum (AVAREF).

WHO's new global health strategy – GPW 14 – charts how to deal with emergencies and other challenging problems.

We must ensure that our health systems can cater for the population of 1.5 billion people who call Africa home, so they can get the health care they need.

The greatest lesson of the COVID-19 pandemic was sustainable investments towards resilient health systems and primary health care.

This lesson highlights the importance of being adequately present, with treatment access as part of the resilience.

Your Excellency, Honourable Ministers and partners,

Primary health care also needs health workers. But many of our health workers are migrating.

For example, in 2022 alone, 3% of doctors in Nigeria and 5% of nurses requested letters of good standing to migrate, and 5% of nurses did the same in Kenya. In Uganda, the emigration of doctors increased by 16% in three years, while in Zimbabwe, over one in five doctors has left the country.

Many of these health workers do not work at lower levels of skill and qualification.

In May, we launched the Africa Health Workforce Investment Charter to address this scourge.

We are determined to support our health workers so that they find motivation in our health systems.

Our partnerships in building such systems are getting stronger and larger. We are working towards sustained engagement, recognizing that each contribution, regardless of its scale, increases the overall impact of our Organization.

We are resolute in our efforts for local manufacturing. For instance, the WHO mRNA Technology Transfer Hub, based in our Region, supports the development and transfer of versatile technology to countries in Africa and around the world.

To keep the results, we must efficiently use existing resources, and invest more in addressing the underlying risks associated with access to clean water and sanitation, for example.

As WHO, we support our Member States in making wise use of their resources. We have supported countries for 76 years and want to see progress continue.

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Excellencies, colleagues, and friends,

We have a busy week – from tackling the public health emergency of preventable child mortality to vaccination for better health in Africa; and participating in three special events, five side events, and three breakfast meetings.

I genuinely appreciate and anticipate your usual active participation.

This evening, we will have the "Ten Years of the Transformation Agenda of WHO in the African Region" special event. I look forward to seeing you all.

This Seventy-seventh session of the Regional Committee will elect my successor.

This is thus my last opening speech at a Regional Committee session.

Serving as the 7th WHO Regional Director for Africa, the first woman to do so, is the highest honour of my life – visiting your communities, listening to and learning from you, and working across sectors to deliver results for your countries.

I am grateful to our Member States, particularly the Honourable Ministers, for collaborating with me to achieve the Transformation. We have had many new ministers recently; I extend a special welcome to them.

I'm thankful to our partners for their conviction and investment in the Transformation.

I'm indebted to my WHO colleagues for working so hard to implement the Transformation.

I cannot thank everyone enough for the numerous awards and honours, and my memorable time in Brazzaville. And I thank the Congolese people for making me feel at home:

Matondi!<sup>3</sup>

*Matondi mingi!*<sup>4</sup>

I look forward to handing over to my successor.

And I will do so with pride for a "mission accomplished":

Never before has healthy life expectancy been so high in the African Region.

Never before have fewer young children died each year, or fewer women died of maternal causes.

Never before have we responded to emergencies in so short a time.

Never before have malaria vaccines been introduced into routine child immunization schedules in Africa (after centuries of waiting).

Never before have more senior women managers served the WHO African Region.

Never before has Africa's youthful population more actively embraced the use of technology and digital tools to transform our actions in health.

Never before have partners and governments been so determined to make a better impact – through supporting integrated approaches to addressing health problems; focusing on people; and reducing the fragmentation that has limited the outcomes of significant health investments.

Never before has the WHO African Region attained its current levels of accountability and financial management.

<sup>&</sup>lt;sup>3</sup> Thank you.

<sup>&</sup>lt;sup>4</sup> Thank you very much.

And never before has this Region been praised globally for risk management capacity.

These and much more (as we will see this evening) make the ten years of my leadership of WHO in this Region a "mission accomplished" in protecting and promoting people's health.

I look forward to great discussions and decisions to build on and cement these results, for the future.

Thank you, once again, for your presence, contribution, and partnership - to our common good of improving the African people's health and lives.

Thank you very much!