

Address by

HER ROYAL HIGHNESS PRINCESS MUNA AL-HUSSEIN

to the

WHO REGIONAL COMMITTEE FOR THE EASTERN MEDITERRANEAN

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Bismillah Al Rahman Al Raheem

Mr Chairman, Regional Director, Ministers of Health, Ladies and Gentlemen,

Dr Alwan, let me thank you for inviting me to address this Committee today. I would also like to express my gratitude to our host, the Government of Oman, for its kind welcome and generous hospitality. The advances that Oman has made in health and social development over the past four decades stand as a model for the world.

Ladies and Gentlemen,

It has been 8 years since I last had the privilege of addressing this important annual gathering of the ministers of health of the Region where we have all witnessed significant events and changes since then. We are here today to discuss health in our region and the progress we are making to attain better health for our citizens.

A 19th century philosopher famously said: "***He who has health, has hope; and he who has hope, has everything.***" The WHO Constitution uses the word "enjoyment" in regard to health when it says, "***The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being***". Our instinct is that the enjoyment of good health is a major determinant of happiness. Last month the United Nations Sustainable Development Solutions Network published an interesting report: **The World Happiness Report 2013.**

This is the second such report since the UN General Assembly passed a resolution in 2011 inviting Member States to measure the happiness of people and to use this to help guide public policy-making, and follows the UN high-level meeting last year on Happiness and Well-being.

The latest report has a number of valuable and insightful things to say to us from a health perspective. For example, having ranked over 150 countries according to happiness, based on population surveys during 2010-2012, the authors found that a healthy life expectancy was one of the key variables affecting country scores. It also found that mental disorders are the single most important cause of unhappiness, but are largely ignored by policy-makers. The report shows that happy people live longer, are more productive, earn more and are better citizens. These are important observations for national development and for policy-makers across all sectors.

So where do we stand in the happiness index? Well, out of the countries surveyed, the report showed that the region's happiness had overall decreased in 2010-2012 compared with 2005-2007 data. No wonder! Daily our news screens portray a region beset by conflict, instability, financial and economic insecurity, social change, poverty, inequity and disease. But we all know that there is **much** that is positive that is happening in the region. Your meeting here today, **your** vision and **your** hard work to promote health development will also have a positive impact in addressing the crisis that our region is facing on many fronts.

How much, as policy makers, do we focus on health, on "physical, mental and social well-being", and if I may continue to be bold, how much of our discussions in WHO forums are focused, in fact, on practical solutions to promote health? Many of the countries in this region, including my own, have made great improvements in health indicators over the past three decades, but at the same time we are witnessing an enormous increase in exposure to serious health risks.

Your Excellencies,

Now, this is more easily said than done. However, there are successful examples in our region and elsewhere, of working across government to promote health. Inshallah we can learn from these experiences.

Looking at your agenda, I see you will discuss the initiative on saving the lives of mothers and children. Nothing can be more important than this. The diversity of our region makes us all very sensitive to the fact that, while some of our countries have among the lowest rates for maternal and child mortality, and we can be justly proud of that, other countries still have very high rates. I am pleased to see that, through this initiative, which is aimed primarily at accelerating progress towards achieving the Millennium Development Goals, and together with a number of partners, we are now focusing on the priority countries and on the priorities with regard to preventing maternal and child mortality.

The success of this initiative, it seems to me, depends on how much we support each other. While several countries of the region have already met their targets, solidarity among countries of the region is essential to achieve the goal for others and for the region as a whole.

We also need to target our efforts where they can do the most good. This means seeking out and reaching mothers and children in the poorest and rural districts. It means reaching out to mothers who have not had the opportunity to complete their education. We all know that the longer girls are able to stay in school, the healthier and let me say happier, they will be as women and as mothers, and more healthy and happy their children, and other family members will be. Let us not forget however that the MDG's are only a means to an end, not an end in themselves. We must ensure that the progress that is achieved can be sustained, and that more and more mothers and children live to enjoy more healthy and happy lives.

Ladies and Gentlemen

You will also discuss non-communicable diseases. I think we are all touched by the growing tragedy of non-communicable diseases in the

region, as health professionals, as public servants, as members of our own communities and families.

The tragedy lies not only in the growing numbers affected by chronic diseases, such as heart disease, diabetes and cancer, and the devastating disabilities and early death they cause. It lies in the state of un-preparedness that we see in our countries and in the lack of a common agenda of work with other parts of government. Sometimes this is a matter of resources, but often it is a matter of strategic planning and organization, or of a mindset that prevents us from making real change.

What does that real change come down to? The real change we need to see is concerned with promoting health. Tobacco use is a major factor in so many chronic diseases and conditions. Yet, it is a sad fact that not enough is being done around the region to create a smoke-free environment and to stand up to the pressures and commercial interests of the tobacco industry.

As a region, we also lack conviction when it comes to encouraging healthy lifestyles, more exercise, more healthy eating, less fats, less sugar, less salt. Not only would this encouragement improve health, it would save money, for individuals, families and governments.

Healthy habits and behaviours are learnt at a very early age. The older we become, the harder it is to change. So when we talk about saving the lives of mothers and children, we must not forget the long-term issues.

As we set policies and plans for prevention of non-communicable diseases, it is our grandchildren we must think of, and it is our colleagues in education and other sectors that we must work with.

We also need to see change in how we manage these conditions. For the millions of people who already have high blood pressure, heart disease or cancer, the change we need to see is surely to ensure that quality health care is accessible to them at the primary health care level. People should also not have to pay large sums for basic medicines.

I know that in my country, and presumably all your countries also, the cost of health care for these and other diseases is of major concern to governments and citizens.

It is heartening therefore to see the political momentum that is gathering behind the concept of universal health coverage. I have been following the discussions on this in global forums, including the World Health Assembly and I look forward to seeing the outcome of your discussion on this agenda item and how our region proposes to help people to access quality health care.

Ladies and Gentlemen,

As WHO Patron for Nursing and Midwifery in the Eastern Mediterranean, the health workforce remains a primary interest for me, and universal health coverage cannot be achieved without an effective workforce. I have said before, when I addressed the World Health Assembly as an invited speaker in 2008, and in other forums, that we cannot attempt to strengthen health systems without addressing the health workforce crisis. And we have a real crisis in this region.

I agree with your conclusion last year that no country of the region is without major gaps in the health workforce. At one end of the spectrum we are dependent on expensive, and sometimes un-sustainable, expatriate arrangements, particularly in the nursing field. At the other end of the spectrum we lack sufficient adequately trained doctors, nurses and other health professionals to cope with the needs of our citizens.

In both cases the heart of the matter is in planning and in co-ordination between the health and higher education sectors. At the social level it is also about encouraging our young people to make a career in the service of health and in making such a career attractive and possible. We need also to ensure that our career structures provide incentives to retain skilled professionals and enable mobility so that good health professionals are accessible to everyone, in the poorest remotest areas, and not just in our capital cities.

Partnerships in all our work are essential. None of us can achieve anything in isolation. I have already spoken of the important role of health leadership in the work that must take place with other sectors, education, higher education, commerce and industry. Other and potential partners exist in civil society which we should encourage in our region. At a time when non-governmental organizations are under pressure in our region, it is up to health leaders to strengthen these partnerships and to promote the many great contributions that civil society can make to health development.

Your Excellencies,

I have deliberately not referred to the current emergencies besetting us around the Region. I know that these will be an important part of your discussions in the next three days. Let us remain positive. Let us focus on dialogue. Let us continue to make health an opportunity for diplomacy and a bridge for peace.

I wish you all peace, health and, above all, happiness.

Thank you.