

Report of the Twenty-fifth Meeting of Ministers of Health of Countries of the South-East Asia Region

Thimphu, Bhutan, 31 August–1 September 2007



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Contents

Part I. INTRODUCTION	1
Part II. INAUGURAL SESSION	3
Part III. BUSINESS SESSION	8
Introductory Session	8
Follow-up Actions on the Decisions and Recommendations of the 24th Health Ministers' Meeting	9
International Health Security	11
Thimphu Declaration on International Health Security in the South-East Asia Region	13
Climate Change and Health	15
Any Other Item	18
Elective Posts for the Sixty-first Session of the World Health Assembly and Sessions of WHO Executive Board	18
Merging of Meeting of Consultative Committee for Programme Development and Management and Meeting of Health Secretaries of countries of the WHO South-East Asia Region	19
Adoption of the Report	19
Closing Session	20
Annexes	
1. Agenda	23
2. List of participants	24
3. Full text of welcome speech by His Excellency Lyonpo Thinley Gyamtsho, Cabinet Minister and Leader of the Bhutanese delegation	28
4. Full text of address by Dr Samlee Plianbangchang, Regional Director, WHO South-East Asia Region	31

5. Full text of address by Dr Margaret Chan, Director-General, World Health Organization	33
6. Full text of inaugural address by Prime Minister Lyonpo Kinzang Dorji, Royal Government of Bhutan	35
7. Full text of vote of thanks by His Excellency Mr Nimal Siripala de Silva, Minister of Healthcare and Nutrition, Sri Lanka	39

Part I INTRODUCTION

1. Since 1981 the meetings of the health ministers of the countries of the World Health Organization's (WHO) South-East Asia (SEA) Region have provided a forum to discuss important health issues in the Region as well as to forge bilateral and intercountry cooperation and regional solidarity.
2. The Twenty-fifth Meeting of Ministers of Health was held in Thimphu, Bhutan, during 31 August–1 September 2007, at the invitation of the Royal Government of Bhutan. H.E. Lyonpo Kinzang Dorji, Honourable Prime Minister of the Royal Government of Bhutan, delivered the inaugural address at the joint inauguration of the Twenty-fifth meeting of Ministers of Health and the Sixtieth Session of the Regional Committee on 31 August 2007.



H.E. Lyonpo Kinzang Dorji, Honourable Prime Minister of the Royal Government of Bhutan (third from left), inaugurated the joint session of the Twenty-fifth Meeting of Ministers of Health and Sixtieth Session of the Regional Committee at a very impressive ceremony.

3. Honourable Ministers from Bhutan, Democratic People's Republic of Korea, Indonesia, Maldives, Myanmar, Nepal and Sri Lanka participated in the meeting. H.E. Lyonpo Thinley Gyamtsho, Cabinet Minister and Leader of the Bhutanese Delegation, Royal Government of Bhutan, chaired the meeting. H.E. Mr Ilyas Ibrahim, Honourable Minister of Health, the Republic of Maldives, was the co-chair.

4. The objectives of the meeting were to review the following topical health issues and have the benefit of the ministers' guidance thereon for future action:

- (1) Follow-up actions on the Decisions and Recommendations of the Twenty-fourth Health Ministers' Meeting at Dhaka, 2006.
- (2) International Health Security
- (3) Climate Change and Health

5. The ministers accepted the invitation of the Government of India to hold the Twenty-sixth Meeting of Ministers of Health in New Delhi in 2008.

6. The agenda, as adopted by the ministers, and the list of participants are contained in Annexes 1 and 2 respectively.



Ministers attending the 25th HMM with the Chief Guest: from left to right, H.E. Prof. Paing Soe, Deputy Minister of Health, Myanmar; H.E. Dr (Ms) Siti Fadilah Supari, Minister of Health, Indonesia; H.E. Lyonpo Thinley Gyamtsho, Cabinet Minister and Leader of the Bhutanese Delegation, Bhutan; Dr Samlee Plianbangchang, Regional Director, WHO South-East Asia Region; Chief Guest H.E. Lyonpo Kinzang Dorji, Prime Minister, Royal Government of Bhutan; Dr Margaret Chan, Director- General, WHO; H.E. Prof. Choe Chang Sik, Minister of Public Health, DPR Korea; H.E. Mr Ilyas Ibrahim, Minister of Health, Maldives; H.E. Dr Abdul Azeez Yoosuf, Deputy Minister of Health, Maldives; H.E. Mr Nimal Siripala de Silva, Minister of Healthcare and Nutrition, Sri Lanka.

Part II

INAUGURAL SESSION

7. A joint inauguration of the Twenty-fifth Meeting of Ministers of Health and the Sixtieth Session of the WHO Regional Committee for South-East Asia was held in Thimphu, Bhutan, on 31 August 2007.

Welcome Statement by His Excellency Lyonpo Thinley Gyamtsho, Cabinet Minister of the Royal Government of Bhutan and Leader of the Bhutanese Delegation

8. His Excellency Lyonpo Thinley Gyamtsho, Cabinet Minister of the Royal Government of Bhutan and Leader of the Bhutanese Delegation, while welcoming the distinguished delegates to Twenty-fifth Meeting of Ministers of Health, expressed gratitude on behalf of all participants to the Honourable Prime Minister, Royal Government of Bhutan, for gracing the joint inaugural session of the Twenty-fifth Health Ministers' Meeting and Sixtieth Session of the Regional Committee. He also extended a warm welcome to Dr Margaret Chan, Director-General of the World Health Organization, and Dr Samlee Plianbangchang, Regional Director, WHO South-East Asia Region.



9. He briefly presented the status of Bhutanese health service and mentioned that the credit for its success goes to the farsighted leadership of successive monarchs. Through the primary health-care approach and

H.E. Lyonpo Thinley Gyamtsho, Cabinet Minister and Leader of the Bhutanese Delegation, while welcoming the distinguished delegates highlighted that the credit for the success of Bhutanese health services goes to the farsighted leadership of successive monarchs.

highest political commitment to the social sector, Bhutan has already achieved some of the Millennium Development Goals (MDGs) and made good progress on many others. However, several challenges remain, given the topography of Bhutan and shortage of skilled human resources.

10. He called upon development partners, including WHO, to assist developing countries in taking appropriate measures in this regard. He indicated that Bhutan needs support not only to sustain achievements made so far but also to confront the emergence of noncommunicable lifestyle-related diseases.

11. In conclusion, His Excellency expressed an earnest hope that the deliberations at the meeting would help in the formulation of certain strategies and priority actions that may help address the health problems faced by the people of the South-East Asia Region. (For full text, see Annex 3)

Address by Dr Samlee Plianbangchang, Regional Director, WHO South-East Asia Region



Dr Samlee Plianbangchang, Regional Director for WHO South-East Asia Region, expressing thanks to Royal Government of Bhutan for very comprehensive and elaborate arrangements.

12. The Regional Director in his address welcomed the Honourable Ministers and other distinguished delegates, and conveyed his grateful thanks to the Royal Government of Bhutan for hosting the meeting in the picturesque surrounds of the capital city of Thimphu. He conveyed his sincere thanks to His Excellency Lyonpo Kinzang Dorji, Honourable Prime Minister of Bhutan, for kindly consenting to inaugurate the joint inaugural session. He placed on record his appreciation of the progress achieved by Bhutan in health development under the guidance of His Majesty, the King.

eradication of polio, avian influenza, HIV infection and emerging public health problems, and requested the ministers and distinguished delegates to review the progress of health development in South-East Asia Region, and in particular the work of WHO during the past year. He stressed the importance of ensuring achievement of all Millennium Development Goals by Member countries in the South-East Asia Region by the year 2015.

13. He said that there are many health challenges in the Region, such as

14. He also mentioned the new challenges facing the Region, for example global warming, which is responsible for more frequent and severe natural disasters such as cyclones and floods. He laid stress on implementing the International Health Regulations (2005) to ensure our own collective health security.

15. The Regional Director impressed on the audience the necessity of achieving sustainable development in the long term. This, he said, can be achieved only by strengthening health systems based on the primary health-care approach. Special attention needs to be paid to the development of public health infrastructure to ensure effective primary prevention, reaching the unreached and achieving universal coverage.

16. He assured the ministers of all possible support from WHO in their efforts towards achieving sustainable development for the health of all their people. (For full text, see Annex 4)

Address by Dr Margaret Chan, Director-General, World Health Organization

17. The Director-General expressed her happiness to be in Bhutan and thanked the Royal Government of Bhutan, especially the Honourable Prime Minister, His Excellency Mr Dorji, for gracing the occasion.

18. She appreciated the commitment of the Royal Government of Bhutan to poverty reduction and its determination to reach universal coverage with essential interventions. She particularly mentioned Bhutan having been referred to as the Region's "crown jewel" in terms of its equitable and rational policy of access to essential medicines by all. She also commended Bhutan's commitment to "Gross National Happiness" as the best measure of true progress in development.

19. In conclusion, she looked forward to listening to the discussions and benefiting from collective experiences. (For full text, see Annex 5)



Dr Margaret Chan, Director-General, WHO, commended Bhutan's commitment to "Gross National Happiness" as the best measure of true progress in development.

Inaugural Address by His Excellency Lyonpo Kinzang Dorji, Prime Minister, Royal Government of Bhutan



H.E. Lyonpo Kinzang Dorji, Honourable Prime Minister of the Royal Government of Bhutan, conveyed greetings and best wishes of His Majesty Jigme Khesar Namgyel Wangchuck, the King of Bhutan.

20. Prime Minister Lyonpo Kinzang Dorji, addressing the joint inaugural session for Twenty-fifth Meeting of Ministers for Health and Sixtieth Session of the Regional Committee, conveyed the greetings and best wishes of His Majesty Jigme Khesar Namgyel Wangchuck, King of Bhutan, for the success of these meetings. He extended a warm welcome to distinguished delegates on his behalf and on behalf of the people and the Royal Government of Bhutan.

21. He mentioned that during the year 2008 Bhutan will celebrate three major historic events: Bhutan's transition to parliamentary democracy, completion of one hundred glorious years of monarchy

and the coronation of His Majesty the Fifth King.

22. The Prime Minister paid tributes to the successive monarchs for steering the kingdom on a path of enormous socio-economic development and in particular, His Majesty the Fourth King, who introduced the concept of "Gross National Happiness" as the guiding philosophy behind development. This concept is reflected in the health sector through integration of traditional medicine with the modern medical system, and the fact that the government has allocated 10%-15% of its annual budget to the health sector during the last four decades.

23. He also acknowledged the continuous support of Her Majesty Ashi Sangay Choden Wangchuck, Queen of Bhutan, as UNFPA Goodwill Ambassador to Bhutan.

24. He also spoke about the challenges facing the Region on account of emerging and re-emerging diseases, such as Severe Acute Respiratory Syndrome (SARS), avian influenza, Multi-Drug Resistant Tuberculosis (MDR TB), and the serious threat to global health from climate change. He commended WHO for bringing out the revised International Health Regulations (2005) and the proposed establishment of the South-East Asia Regional Health Emergency Fund (SEARHEF).

25. He mentioned that a major challenge for Bhutan is to sustain the achievements made in public health through the primary health-care approach in view of the financial constraints, shortage of human resources, difficult geographical terrain and scattered population. He also sought the continuous support of the Region for training their health workforce, especially at the postgraduate level.

26. The Prime Minister expressed confidence that the passage of the “Thimphu Declaration on International Health Security in the South-East Asia Region” and the action of countries in its follow-up would go a long way in reducing the vulnerability of people in the Region as well as the world to a number of risks and disasters.

27. In conclusion, he wished the meeting all success in its deliberations and in minimizing threats to our collective health security. (For full text, see Annex 6)

Vote of Thanks by His Excellency Mr Nimal Siripala de Silva, Minister of Health Care and Nutrition, Sri Lanka

28. His Excellency, Mr Nimal Siripala de Silva, Minister of Healthcare and Nutrition, the Democratic Socialist Republic of Sri Lanka, proposed a vote of thanks to the Royal Government of Bhutan, and in particular to His Excellency Lyonpo Kinzang Dorji, the Honourable Prime Minister of Bhutan, on behalf of the health ministers and other distinguished delegates.

29. He highly commended the wonderful arrangements and warm welcome extended by Bhutan. He appreciated the ongoing peaceful transition to parliamentary democracy in Bhutan as something unique and exemplary for the world.

30. His Excellency placed on record thanks on behalf of the distinguished delegates to Dr Margaret Chan, Director-General of the World Health Organization, and Dr Samlee Plianbangchang, Regional Director for the WHO South-East Asia Region, and appreciated the efforts that had gone into preparing for the meeting.

31. The Minister hoped that the deliberations would be fruitful, resulting in practical recommendations that would go a long way in further improving the health of the people in the Region. (For full text, see Annex 7)

Part III

BUSINESS SESSION

Introductory Session

Statement of the Chairman of the Meeting (Chairman of the Health Ministers' Forum)

32. His Excellency Lyonpo Thinley Gyamtsho, Cabinet Minister and Leader of the Bhutanese Delegation, thanked the ministers for electing him as Chairman for the Twenty-fifth Meeting of Health Ministers and to chair the Health Ministers' Forum for 2007-2008.

33. The Minister said that he considered this an honour not only for himself but also for his country, and that he was conscious of the challenges and responsibilities involved. He added that with ever-increasing collaboration and solidarity among countries of the Region, it should be possible to resolve common health problems as well as contribute to overcoming global health problems.

34. As chair for the meeting, His Excellency extended a very warm welcome to Bhutan to all the delegates and wished them a pleasant and enjoyable stay in Thimphu.

35. The Chair commended the speeches made by the Director-General of the World Health Organization, and the Regional Director, WHO South-East Asia Region, outlining the health challenges confronting the Member countries, and placed on record his great appreciation for their views, thoughts and leadership.

36. He added that countries of the Region have done well in the development of the health sector and that these achievements are visible in the downward trend shown in problems related to maternal and child health and increased life expectancy.

37. He emphasized that the health sector is seen as a major contributor to poverty alleviation and that regional solidarity and cooperation could play an important role in paving the way towards achieving the MDGs related to this specific goal.

38. His Excellency expressed confidence that this meeting would prove a milestone in strengthening mutual goodwill and cooperation for health development and that bonds of fraternity and friendship would be strengthened among Member countries.

39. A Drafting Group comprising the following country representatives was constituted:

- Mr Mohammad Jahangir (Bangladesh)
- Ms Aradhana Johri (India)
- Dr Ko Ko Naing (Myanmar)
- Dr Mahesh Maskey (Nepal)
- Dr Sarath Samarage (Sri Lanka)
- Dr Sopida Chavanichkul (Thailand)

40. The Drafting Group decided to designate Dr Sarath Samarage from Sri Lanka as their Convener.

Follow-up Actions on the Decisions and Recommendations of the Twenty-fourth Health Ministers' Meeting (*Agenda item No. 3*)

41. Dr Myint Htwe, Director, Programme Management, WHO-SEARO, made a presentation on the subject.

42. He said that in response to the Dhaka Declaration and the call to strengthen national human resources for health (HRH) policies, WHO developed the South-East Asia Regional Strategic Plan for Health Workforce Development and had been assisting countries in implementation to strengthen their health workforces.

43. Key WHO actions included providing countries with technical support for developing national plans. Assistance was given to mobilize resources for the development of the health workforce in the Region. A regional meeting of the medical councils, which established a regional network of medical councils to ensure quality of education for nurses and doctors, was conducted.

44. Among other actions, support was provided for the South-East Asia Public Health Education Institution Network (SEAPHEIN), the South-East Asia Nursing and Midwifery Educational Institutions Network (SEAMEIN) and the Asia-Pacific Action Alliance on Human Resources for Health (AAAH).

45. A region wide database on the health workforce is also in the process of development in order to obtain an overview of the distribution of health workforce — including not



Royal Government of Bhutan and WHO officials responding to print and audio-visual media during one of the many press briefings / media interview sessions.

only doctors and nurses but other health-care providers — to identify trends and map the density of distribution within countries and in the Region as a whole.

Discussions:

- The issue of developing the coverage of basic and community-level health care, particularly in rural areas, was raised. “Basic health workers are the cornerstone of rural public health,” one representative said. The need to create new ways in which to communicate health awareness to rural people was also discussed.
- Concern was raised about the varying standards of medical education in many countries (most outside SEAR) in some institutions/countries as doctors returning from training abroad were not able to pass standard national certification examinations for practice.
- In terms of migration of the health workforce, it was pointed out that in addition to international migration, internal migration between rural and urban areas, and also from public to private sectors, were also a cause of concern. For retention of the workforce, in addition to emoluments it is necessary to create the physical and professional environment, facilities and infrastructure,

as well as job satisfaction (and academic incentives) in order to allow them to provide essential health care.

- It was pointed out that health sciences education should be oriented to the strengthening of health systems, and health systems should provide the proper working environment for health science graduates.

Conclusions:

- It is important to translate the regional strategic plans for health workforce development into action at the country level.
- More information needs to be gathered on the health workforce and its relation to the actual disease burden and most pressing needs of the countries themselves. Dynamic health workforce information systems are required.
- Support will be needed to achieve implementation of a strategic plan for health workforce development and a measurable impact on the health workforce of Member countries.
- Scaling up of production of numbers of health-care workers will need to be matched by expansion of health-care facilities and strengthening of health systems, both to retain the health workforce and extend coverage of the population, especially in rural areas, and to reach the unreached.
- Quality assurance in medical education and accreditation mechanisms need to be strengthened.

International Health Security (*Agenda item No. 4*)

46. Dr Poonam Ketrupal Singh, Deputy Regional Director, WHO-SEARO, and Dr Myint Htwe, Director, Programme Management, WHO-SEARO, made introductory presentations on the subject.

47. The presentation highlighted that people were increasingly vulnerable to health threats, particularly those that transcend international borders. Several factors such as globalization, rapid international travel and trade, climate change and natural and man-made disasters have further increased the health risks we face.

48. The discussion on International Health Security in the Region focused mainly on two issues:

- (1) International Health Regulations (2005)
- (2) Systematic Emergency Preparedness and Response

49. The revised International Health Regulations (IHR) (2005) were unanimously adopted by the World Health Assembly and came into force from 15 June 2007. The

implementation of IHR (2005) helps build and strengthen effective mechanisms for alert and response to events of public health concern at the national and international levels. A series of capacity building activities in the context of IHR (2005) and in the light of the Delhi Declaration was discussed at length.

50. Considering the vulnerability of the Region to natural disasters, and to ensure that lessons from the earthquake and tsunami of December 2004 and previous emergencies were applied, it was deemed necessary to standardize and objectively monitor the progress of Emergency Preparedness and Response (EPR) in Member countries. A set of 12 benchmarks for emergency preparedness and response were developed, each benchmark having a corresponding set of standards and indicators that Member countries are expected to meet.

51. The suggestions on international health security made during the First Joint Meeting of Health Secretaries of Countries of the WHO South-East Asia Region and Consultative Committee for Programme Development and Management (CCPDM), held at WHO SEARO in New Delhi in July 2007, were incorporated in the “Thimphu Declaration on International Health Security in the South-East Asia Region”. The Declaration outlines commitments of Member States and the WHO Regional Office, and a strategic action plan was also presented to support the operationalization of the Declaration.

Discussions

- The IHR (2005) and the SEA Region Benchmarks for EPR were supported by all Member countries.
- WHO will continue to provide support to Member countries in their efforts towards achievement of core capacities in IHR (2005) and the Benchmarks for Emergency Preparedness and Response.
- Strengthening of intercountry and interregional collaboration for the above two areas was stressed.
- The importance of timely sharing of information was emphasized.
- Based on its experience, India offered to assist in the training of Rapid Response Teams and testing of veterinary and human samples for surveillance and outbreak response at its laboratories for other SEAR countries.
- Indonesia’s announcement of an International Training Consortium for Disaster Risk Reduction, to be held in Makasar in November 2007, was appreciated.
- Cooperation and collaboration among Member countries were the key to overcoming health problems associated with rapid globalization.
- There was unanimous support for the Thimphu Declaration and to the proposed establishment of the South-East Asia Regional Health Emergency Fund.



Hospitality par excellence: H.E. Lyonpo Thinley Gyamtsho, Cabinet Minister and Leader of the Bhutanese Delegation, extended a warm welcome to Dr Margaret Chan, Director-General, WHO, Dr Samlee Plianbangchang, Regional Director for WHO South-East Asia Region, and other senior officials from WHO.

- Thailand's offer of US\$ 100 000 for the Regional Health Emergency Fund was appreciated.

Conclusions

- WHO and Member countries agreed to work together to continue to improve International Health Security.
- WHO will continue to provide support to the achievement of core capacities in IHR(2005) and the Benchmarks for Emergency Preparedness and Response.
- Member States recommended that core capacity in handling public health emergencies should be strengthened in the Region. The importance of sharing expertise among countries was highlighted.
- The Thimphu Declaration was recommended for adoption.
- WHO will continue to provide the necessary platform for the exchange of information for International Health Security.
- Quality implementation of core capacity building activities through effective and efficient use of resources, coupled with proper monitoring and evaluation, is to be pursued.

Thimphu Declaration on International Health Security in the South-East Asia Region

52. We, the Health Ministers of Member States of the World Health Organization's South-East Asia Region participating in the Twenty-fifth Meeting of Ministers of Health

in Thimphu, Bhutan, recognize that in the concept of International Health Security lies the realization that there is a need to reduce the vulnerability of people around the world to the escalation of existing, new, acute or rapidly spreading risks to health, particularly those that threaten to transcend international borders.

53. We also recognize that rapid globalization with easy, frequent travel, as well as large-scale trade, give an ample opportunity for communicable diseases to spread across borders quickly and with ease.

54. We are aware that the world climate is changing. Temperatures are rising; tropical storms are increasing in frequency and intensity; polar ice caps and permafrost regions are melting. The acute impact of climate change-related events may be local, but their causes are global.

55. We are also concerned that no single institution, sector or country has all the capacities needed to respond to international public health emergencies caused by epidemics, natural disasters and humanitarian or environmental emergencies.

56. We are of the view that the impact of the above threats on human health has serious implications for morbidity and mortality, and will delay internationally agreed upon development goals.

57. We reiterate our commitment to the World Health Assembly Resolutions related to Emergency Preparedness and Response and International Health Regulations (IHR) 2005.

58. We note the efforts of WHO's Regional Office for South-East Asia to:

- (1) Systematize and measure emergency preparedness and response in health systems through benchmarks, standards and indicators;
- (2) Systematically support countries in the full implementation of the International Health Regulations (IHR) 2005 and in strengthening core capacities;
- (3) Support short-term strategies in stockpiling anti-virals, personal protective devices and pre-pandemic vaccines, as well as long-term strategies to increase influenza vaccine production capacity in the Region; and
- (4) To mobilize adequate resources to support these activities.

59. To achieve effective solutions to address issues related to International Health Security, we are committed to:

- (1) Take further action to improve emergency preparedness and response in line with the World Health Assembly and Regional Committee resolutions WHA58.1, WHA59.20, SEA/RC57/3 and SEA/RC58/3;

- (2) Take further action to implement the International Health Regulations (IHR) 2005 in line with World Health Assembly and Regional Committee resolutions WHA58.3 and WHA59.2 and SEA/RC58/7;
- (3) Develop and systematically implement National Emergency Preparedness Plans, taking into account the significant role of private health providers based on country-specific priority benchmarks and indicators within one year and to revisit the plans regularly;
- (4) Develop and implement action plans towards strengthening core capacities for countries for International Health Regulations (IHR) 2005;
- (5) Develop and implement national action plans for mitigation and adaptation to address the health impacts of global warming and climate change; and
- (6) Mobilize adequate resources for these initiatives and participate actively in developing and maintaining partnerships related to improving these areas of health.

60. We, the Health Ministers of WHO's South-East Asia Region, fully support the establishment of the South-East Asia Regional Health Emergency Fund and commit to the function of the Working Group as well as efforts towards resource mobilization.

61. We, the Health Ministers of WHO's South-East Asia Region, urge all Member States as well as the WHO Director-General and the Regional Director for the South-East Asia Region to continue to provide leadership and technical support in building partnerships between governments, United Nations and bilateral agencies, members of academia, professional bodies, NGOs, the private sector and the media and civil society, and to jointly advocate effective follow-up on all aspects of this Thimphu Declaration on International Health Security in the South-East Asia Region.

Climate Change and Health *(Agenda item No. 5)*

62. Dr Poonam Khetrpal Singh, Deputy Regional Director, WHO-SEARO, made a presentation on the subject.

63. She said that the Intergovernmental Panel on Climate Change (IPCC) had presented a grim scenario based on the high level of unabated global warming across the world. This had serious consequences on human health. The IPCC projected global mean temperatures to rise between 1.4 °C and 5.8 °C by the end of the twenty-first century, the highest in the last 10 000 years of human history, with the last decade being the hottest ever.

64. The 2007 IPCC findings had clearly established that the earth's climate is enduring irreversible change due to global warming. Greenhouse gases (GHGs) have built a

shield encompassing the globe that redirects emitted heat waves back to the surface of the earth. The principal cause of greenhouse gases building up in colossal measure is man-made air pollution due to the burning of fossil fuels, which leads to an increase in overall temperatures.

65. The unabated increase in average temperature levels across the globe has triggered a spurt in glacial melting, heat waves, flash floods and disruption in rainfall patterns. The mean sea level is also expected to rise by up to half a metre on average across the globe in the next 50 years, seriously threatening the survival of low-lying littoral states and island nations.

66. Changing weather patterns would trigger a rise in vector-borne diseases such as malaria and dengue in areas where they were not prevalent. In 2000, WHO estimated climate change had led to 82 000 deaths and the loss of more than 257 000 disability-adjusted life years (DALYS) in countries of the SEA Region.

Discussions

- The Ministers recognized the fact of climate change and that its projected effects pose a major threat to health security in the SEA Region.
- The meeting acknowledged that industrialized countries were mainly responsible for emission and accumulation of the bulk of the greenhouse gases, which were affecting countries of the SEA Region in a greater measure.
- Ministers elaborated on the current and future health impacts of global warming and climate change.
- Members said most countries of the SEA Region are highly vulnerable to the pernicious effects of climate change, and in particular populations living in island nations such as Maldives and low-lying areas in Sri Lanka and the southern part of Bangladesh.
- Communities living in high-altitude areas in Nepal and Bhutan were also exposed to increased rainfall and flooding due to glacial lake outburst floods (GLOFs).
- An increase in sea level will trigger salt-water intrusion, reducing the availability of already scarce freshwater resources, while vector-borne and water-borne diseases will proliferate due to the overall rise in temperatures.
- DPR Korea mentioned that the nation frequently suffered from major landslides and floods that affected road and railway infrastructure, eroded agricultural land and triggered evacuations on a large scale. Thailand noted that Bangkok would be at risk of inundation. It was observed that vector-borne disease outbreaks in higher altitude regions of Nepal and India would also be more frequent.

- The support of the Regional Office in providing material assistance such as disinfectants and vaccines during the recent unprecedented floods in the four flood-prone countries of Bangladesh, DPR Korea, India and Nepal was appreciated.
- Indonesia stressed the need for empowering local communities to protect their own health and for the public health system to strengthen disease surveillance.
- Many countries have established interagency coordinating bodies at high levels. In India, the coordinating body was under the direct responsibility of the Prime Minister. It was noted that such climate change committees are often led by the ministries of environment, which left many health aspects of climate change unattended to while prioritizing only the ecological aspects.
- Members also stressed the need to gradually shift energy production patterns from fossil fuels to alternative energy sources.



The Twenty-fifth HMM in addition to decisions and recommendations on the various agenda items, including climate change and health, adopted the “Thimphu Declaration on International Health Security in the South-East Asia Region”.

Conclusions

- Climate change is a major threat to health security in the South-East Asia Region and needs to be addressed.
- Most Member countries have recognized the health risks that emerge from climate change, although many called for further assessment of the projected impacts on health.

- All countries of the SEA Region should carry out vulnerability assessments in a systematic manner to develop and implement national plans of action incorporating a practical approach towards mitigation and adaptation.
- WHO should support the formulation of a regional strategy to combat the adverse health impacts of climate change.
- WHO should support countries in facilitating the participation of the health sector in forums where climate change issues are discussed and actions decided upon.
- Members called upon WHO to collaborate with other UN organizations and development agencies to include health impact assessments in addition to environmental impact assessments prior to any development efforts.
- More research on the potential health impacts of climate change was called for.
- WHO should support Member countries in promoting the need for multisectoral collaboration to address climate change issues.
- Human health and climate change should be the theme for World Health Day 2008 or later.
- The health sector needs to work more closely with other sectors to advocate for securing health benefits from reducing emissions of greenhouse gases. These include cleaner air, better road safety and healthier food leading to healthier lifestyles and safe consumption patterns.

Any Other Item (*Agenda item No. 6*)

Elective Posts for the Sixty-first Session of the World Health Assembly and Sessions of WHO Executive Board

67. Dr Poonam Khetrpal Singh, Deputy Regional Director, WHO-SEARO, introduced the agenda item related to the nomination of countries for elective posts for the World Health Assembly and Executive Board.

68. She placed before the Health Ministers' Meeting a graphical presentation of the lists of office-bearers from SEA Region, Member countries since 1994 for discussions and consensus.

69. The Ministers, after due consideration of the presentation, endorsed the following position and requested the Regional Director to inform WHO Headquarters accordingly.

Office	Countries
World Health Assembly	
Vice-President	Maldives
Vice-Chairman Committee A	Timor-Leste
Rapporteur – Committee B	Sri Lanka
General Committee (1 Member)	Nepal
Committee on Credentials (1 Member)	Indonesia
Committee on Nominations (2 Members)	DPR Korea and India
Executive Board	
Nomination of a SEA Region country to be made in place of Bhutan, whose term expires in May 2008	Bangladesh

Merging of Meeting of Consultative Committee for Programme Development and Management (CCPDM) and Meeting of Health Secretaries (HSM) of countries of the WHO South-East Asia Region (Agenda item No. 6.2)

70. Dr Poonam Khetrpal Singh, Deputy Regional Director, in her introductory remarks mentioned that the Eleventh Meeting of Health Secretaries (HSM) held in June 2006 suggested that the HSM and Consultative Committee for Programme Development and Management (CCPDM) be merged.

71. This proposal was discussed at the High-level Consultation (HLC) with SEA Region Member States on WHO Programme Development and Management, held in May 2007 in the Regional Office, New Delhi.

72. The HLC, while agreeing with the proposal to combine meetings of the HSM and CCPDM with revised Terms of Reference, desired that it be submitted to the Twenty-fifth Health Ministers' Meeting for endorsement of the merger, and allowing the Sixtieth Session of the Regional Committee to decide on the modalities.

73. The Twenty-fifth Health Ministers' Meeting, following due consideration, endorsed the proposal to combine the HSM and CCPDM.

Adoption of the Report (Agenda item No. 7)

74. The Regional Director said that in order to make best use of the time available, it would be advisable if the ministers focused their attention on the recommendations

that have emerged from the deliberations. The text of the rest of the report, as drafted by the Drafting Group, could be appropriately finalized by the Secretariat.

75. The ministers accepted the suggestion of the Regional Director. They reviewed the recommendations pertaining to all the agenda items, as in the draft report, and approved the same with certain modifications.

76. It was decided that the final draft report should be circulated to all Member States and finalized only after incorporating the comments received. With this guidance, the report as prepared by the Drafting Group was adopted.

Closing Session (*Agenda item No. 8*)

77. The Royal Government of Bhutan, and especially His Excellency Lyonpo Thinley Gyamtsho, Cabinet Minister and Leader of the Bhutanese Delegation, was sincerely thanked by the participating delegations for hosting the meeting in Bhutan. It was noted that Bhutan was holding this Meeting of Health Ministers for the first time. They appreciated the warm hospitality and excellent arrangements that had been made. Distinguished delegates placed on record their special thanks to His Excellency Lyonpo Kinzang Dorji, Prime Minister, Royal Government of Bhutan, for agreeing to inaugurate the meeting and for his motivating inaugural address.



Distinguished delegates and special invitees witnessed a colourful presentation of traditional Bhutanese dance during the State dinner hosted by the Royal Government of Bhutan.

78. Dr Margaret Chan, Director-General, World Health Organization, conveyed her thanks for this opportunity to participate in the Twenty-fifth Health Ministers' Meeting and the Sixtieth Session of the Regional Committee.

79. Distinguished delegates appreciated the agenda items that had been included and also the initiative for the Thimphu Declaration on International Health Security.

80. Dr Samlee Plianbangchang, the Regional Director, congratulated the Honourable Health Ministers on the successful conclusion of their meeting. He stated that the meeting had fully achieved its objectives and made a definite contribution to further strengthening the bonds of mutual friendship among the health leaders in the Region. He placed on record his thanks to the Cabinet Minister and Leader of the Bhutanese Delegation, who as chairman had guided the proceedings very dexterously. He also acknowledged the contribution of His Excellency, Mr Ilyas Ibrahim, Minister of Health, The Republic of Maldives, as co-chair for this meeting. The contribution of the Drafting Group was also acknowledged.

81. The Government of India offered to host the Twenty-sixth Meeting of Health Ministers and Sixty-first Session of the Regional Committee in New Delhi in 2008. The offer was accepted with thanks by all the participants.

82. The Cabinet Minister and Leader of the Bhutanese Delegation thanked the ministers, Director-General, WHO and the Regional Director, for all the compliments. He acknowledged that credit for successful completion of the meeting goes to the cooperation that he so kindly received from all the other ministries in the government. He also conveyed his thanks to the Director-General of WHO for her presence.

83. As Chairman of the Health Ministers' Forum, the Cabinet Minister and Leader of the Bhutanese Delegation assured the meeting that he would do his best to make further progress in health development and to strengthen regional solidarity. He also sought the cooperation and guidance of his colleagues in discharging his responsibilities as Chairman of the Health Ministers' Forum.

84. In conclusion, he declared the Twenty-fifth Meeting of Ministers of Health of the Member States of WHO South-East Asia Region closed.

Annex 1 Agenda

- (1) Joint Inaugural Session of the Twenty-fifth Health Ministers' Meeting (HMM) and the Sixtieth Session of the Regional Committee
- (2) Introductory Session
- (3) Follow-up actions on the Decisions and Recommendations of the 24th HMM
- (4) International Health Security
- (5) Climate Change and Health
- (6) Any Other Item
- (7) Adoption of the Report
- (8) Closing Session

Annex 2

List of participants

1. Ministers

Bhutan

H.E. Lyonpo Thinley Gyamtsho
Cabinet Minister
Leader of the Bhutanese Delegation
Royal Government of Bhutan

DPR Korea

H.E. Prof Choe Chang Sik
Minister for Public Health
Democratic People's Republic of Korea

Indonesia

H.E. Dr (Ms) Siti Fadilah Supari
Minister for Health
Republic of Indonesia

Maldives

H.E. Mr Ilyas Ibrahim
Minister of Health
The Republic of Maldives

H.E. Dr Abdul Azeez Yoosuf
Deputy Minister of Health
The Republic of Maldives

Myanmar

H.E. Professor Paing Soe
Deputy Minister of Health
The Government of the Union of
Myanmar

Nepal

H.E. Mr Giriraj Mani Pokharel
Minister of Health and Population
Government of Nepal

Sri Lanka

H.E. Mr Nimal Siripala de Silva
Minister of Healthcare and Nutrition
Republic of Sri Lanka

2. Observers

Bangladesh

Mr A.K.M. Zafar Ullah Khan
Secretary of Health
Ministry of Health and Family Welfare

India

Mr Naresh Dayal
Secretary
Ministry of Health and Family Welfare

Thailand

Dr Prat Boonyawongvirot
Permanent Secretary of Health
Ministry of Public Health

Timor-Leste

Mr Marcelo Amaral
Head, Department of Planning
Ministry of Health

3. Advisers

Bangladesh

Mr Mohammad Jahangir
Joint Secretary (PH and WHO)
Ministry of Health and Family Welfare

Bhutan

Dasho (Dr) Gado Tshering
Secretary
Ministry of Health

Dr Ugen Dophu
Director, Department of Public Health
Ministry of Health

Dr Rinchen Chopel
Executive Director
National Commission for Women and
Children

Mr Thinley Dorji
Chief Planning Officer
Ministry of Health

Ms Tshering Lhadn
Desk Officer
Department of Multilateral Affairs
Ministry of Foreign Affairs

DPR Korea

Dr Sok Yong Guk
Officer
Department of External Affairs
Ministry of Public Health

Mr Choe Il
WHO Desk Officer
Ministry of Foreign Affairs

Mr Choe Yong Su
Interpreter
Ministry of Public Health

India

Ms Aradhana Johri
Joint Secretary (International Health)
Ministry of Health and Family Welfare

Mr Amit Mohan Prasad
Director (International Health)
Ministry of Health and Family Welfare

Mr D.S. Moorthy
Officer on Special Duty to Honourable
Minister
Ministry of Health and Family Welfare

Indonesia

Dr (Mr) I. Nyoman Kandun
Director-General
Communicable Diseases Control and
Environmental Health
Ministry of Health

Dr (Mr) Budhiardja
Chief
Bureau of Planning and Budgeting
Ministry of Health

Mr Abdul Halim
Chief, Sub-Division of Technical and
International Agreement Cooperation
Bureau of Planning and Budgeting
Ministry of Health

Drg (Ms) Murti Utami
Head
Division of Administration and Protocol
Ministry of Health

Mr Bobby Suryo Wibowo
ADC to HE Minister of Health
Ministry of Health

Myanmar

Dr San Shway Wynn
Deputy Director-General
Department of Health
Ministry of Health

Dr Ko Ko Naing
Deputy Director
(International Health Division)
Ministry of Health

Nepal

Dr Nirakar Man Shrestha
Chief Specialist-Policy, Planning and
International Cooperation Division
Ministry of Health and Population

Dr Mahesh Maskey
Chairman
Nepal Health Research Council

Sri Lanka

Dr H.A. P.Kahandaliyanage
Secretary
Ministry of Healthcare and Nutrition

Dr Sarath Samarage
Deputy Director-General (Planning)
Ministry of Healthcare and Nutrition

Dr Palitha Abeykoon
Adviser
Ministry of Healthcare and Nutrition

Thailand

Dr Tipvadee Bumpenboon
Advisor to the Minister
Ministry of Public Health

Pol Gen. Boonpen Bumpenboon
Council of State Committee, and Royal
Thai Police Committee
Royal Thai Police
Bangkok

Dr Porntep Siriwanarangsun
Senior Advisor on Public Health
Ministry of Public Health

Dr Sopida Chavanichkul
Director, Bureau of International Health
Office of the Permanent Secretary
Ministry of Public Health

Dr Kumnuan Ungchusak
Director, Bureau of Epidemiology
Department of Disease Control
Ministry of Public Health

Mrs Jureporn Boonyawongvirot
Director, Bureau of Quality and
Safety of Food
Department of Medical Sciences
Ministry of Public Health

Miss Puangpen Chanprasert
Public Health Technical Officer
Office of the Permanent Secretary
Ministry of Public Health

Mrs Sumittra Prucpirojkul
Human Resource Development Officer
Office of the Minister
Ministry of Public Health

Mrs Rampai Kaewwichien
Policy and Plan Analyst
Office of the Minister
Ministry of Public Health

Mr Norathep Boonkeb
Legal Expert
Office of the Minister
Ministry of Public Health

Mr Paworn Chongcham
Public Relations Officer
Ministry of Public Health

4. WHO Secretariat

Secretary

Dr Samlee Plianbangchang
Regional Director

Members – SEARO Staff

Dr Poonam Khetrupal Singh
Deputy Regional Director

Dr Myint Htwe
Director, Programme Management

Mr Jeffery Kobza
Director, Administration and Finance

Dr A. Sattar Yoosuf
Director, Sustainable Development and
Healthy Environments

Dr Jai P. Narain
Director, Communicable Diseases

Dr Yonas Tegegn
Strategic Alliance and Partnerships Officer

Mr A. Von Hildebrand
Regional Adviser, Food and Chemical
Safety

Dr Kanchit Limpakarnjanarat
Regional Adviser, Communicable Diseases
Surveillance and Response

Dr Rui Paulo de Jesus
Technical Officer
Sustainable Health Policy

Dr Roderico Ofrin
Ag Regional Adviser, Emergency and
Humanitarian Action

Mr U.S. Baweja
Sr Administrative Secretary
Strategic Alliance and Partnerships Unit

Members – WHO Country Office Staff

Dr Ei Kubota
WHO Representative to Bhutan and
WHO Country Staff

Annex 3

Full text of welcome speech by His Excellency Lyonpo Thinley Gyamtsho, Cabinet Minister and Leader of the Bhutanese delegation

Your Excellency Lyonpo Kinzang Dorji, the Honourable Prime Minister of Bhutan; Honourable Ministers; Excellencies; distinguished delegates; ladies and gentlemen;

May I on behalf of Ministry of Health, Royal Government of Bhutan, and on my own behalf, offer our sincere welcome and gratitude to the Honourable Chief Guest — the Prime Minister of Bhutan, for gracing the Joint Inaugural Session of Twenty-fifth Health Ministers' Meeting and Sixtieth Regional Committee of the South-East Asia (SEA) Region of WHO. Your Excellency's presence has given special encouragement to the delegates and participants of these two important meetings.

May I welcome Your Excellencies, the Honourable Health Ministers from all the Member countries to the Twenty-fifth Health Ministers' meeting and all the distinguished country delegates to the Sixtieth Session of the Regional Committee of the WHO South-East Asia Region. We are indeed highly honoured and look forward to fruitful deliberations.

It is an honour for me to welcome and congratulate Dr Margret Chan for being elected to the post of Director-General of WHO and making herself available to this meeting in Thimphu, despite your very busy schedule. We look forward to working with you.

I also welcome Dr Samlee Plainbangchang, Regional Director, WHO-SEARO.

I would also welcome all the guests who in spite of busy schedules have come to grace this occasion. Your presence here will not only encourage the health personnel of Bhutan but also inspire all the health workers in the Region.

Your Excellencies, ladies and gentlemen,

I would like to briefly present on the status of the Bhutanese health services to this august gathering. Bhutan has been fortunate to have the visionary guidance of the farsighted leadership of Their Majesties, our successive monarchs. Our health sector has made tremendous achievements over the last four decades of planned socio-economic development since 1961. This has been possible due to the highest political commitment accorded to the social sector. In line with the policy of the Royal Government of Bhutan, health-care services are provided free of cost to all the citizens including tertiary care treatment outside the country.

Through the primary health-care approach, many of the vital health indices have seen dramatic improvement. I am happy to report that some of the health Millennium Development Goals (MDGs) have been already achieved while progress against other goals is well on track. In the last 25 years, the infant mortality rate (IMR) declined from 102.8 per thousand to 40. Similarly, the under-five mortality rate (U5MR) declined from 162.4 per thousand to 62. The safe drinking water and basic sanitation coverage are over 90% and 95%, respectively. All these achievements have culminated in healthier and happier Bhutanese enjoying an average lifespan of 66 years.

Maternal mortality still remains a challenge given the topography and shortage of skilled human resources. The Ministry is pursuing the policy of Institutional Delivery coupled with emphasis on Emergency Obstetric Care (EmOC) to address this problem. I urge development partners, the Global Fund and WHO to assist developing countries to develop appropriate measures to promote and improve access to medicines, particularly for malaria, TB and HIV, as these are real problems in our Region. In the area of health security against the threat of HIV/AIDS, epidemics and natural calamities, we are approaching it through a multisectoral strategy. This is also the theme of the *World Health Report 2007*, and as such this issue of international health security will be dealt with during the business session. Bhutan as a Member country stands fully committed to collaborate on it.

Your Excellencies, ladies and gentlemen,

While all these achievements in health have been made possible through the highest commitment and dedication of our health workers and the guidance provided by our farsighted leadership, equal credit goes to our development partners, donors and relevant government sectors, some of whom are present here today. I take this opportunity to express our appreciation for partnering with us and also to solicit your continued support. This is because Bhutan now faces a difficult challenge to sustain the many achievements that have been made. While the country is still grappling with the problem of communicable diseases, the situation is further aggravated by the

need to confront the emergence of noncommunicable lifestyle-related diseases. Given these challenges and also in view of the post-2008 changing political scenario, continued support from our development partners is crucial to strive further towards better health and well being for the people of Bhutan.

Your Excellencies, ladies and gentlemen,

To conclude, it is our earnest hope that this meeting will be able to come out with strategies and priority action that can help to address the health problems faced in our Region. In welcoming you all once again, may I wish Your Excellencies and other distinguished delegates to have an enjoyable stay in our country.

Thank you and tashi delek.

Annex 4

Full text of address by Dr Samlee Plianbangchang, Regional Director, WHO South-East Asia Region

Your Excellency Lyonpo Kinzang Dorji, Prime Minister of the Royal Government of Bhutan; Honourable Health Ministers; distinguished country representatives; honourable guests; ladies and gentlemen;

It is indeed my privilege to welcome you all to the joint inauguration of the Twenty-fifth Meeting of the Health Ministers of countries of the WHO South-East Asia Region, and the Sixtieth Session of the World Health Organization's Regional Committee for South-East Asia.

At the outset, I would like to gratefully thank the Royal Government of Bhutan for hosting the meetings in this beautiful and serene city of Thimphu.

I sincerely thank His Excellency Lyonpo Kinzang Dorji for consenting to inaugurate this Joint Opening Session. I also take this opportunity to thank the Honourable Ministers and distinguished representatives for sparing their valuable time to be here, in spite of their very busy schedules.

Honourable Ministers, distinguished representatives, ladies and gentlemen, we must be pleased to be here in Bhutan. Under the guidance of His Majesty the King, the country has achieved a quantum leap in health development over the past few decades.

Bhutan has developed its health infrastructure almost from scratch into a complete and functional health system. Health indices of the Bhutanese population have remarkably improved in almost all sectors. Bhutanese people look much healthier today. Bhutan is really a model for health development, from which many countries may learn.

Ladies and gentlemen, during the course of these meetings, the Honourable Ministers and distinguished representatives will review the progress of health

development in the South-East Asia Region; and, in particular, review the work of WHO during the past year.

The last year was another significant step on the road to progress in health development in the South-East Asia Region. However, many health challenges still prevail, and call for more enhanced and energetic intercountry collaboration.

Polio is yet to be eradicated from the Region. Avian influenza is endemic in several countries and it really poses a potential for an influenza pandemic. HIV infection is still spreading. In addition, the Region is facing emerging public health problems due to noncommunicable diseases such as diabetes, cancer and cardiovascular ailments. These are some of the prevalent issues and challenges which we have to tackle with concerted efforts in the coming year.

Serious efforts will have to continue to be made to ensure reaching all targets of health-related Millennium Development Goals by all Member States in South-East Asia by 2015. At the same time, Member countries have to prepare to face new health challenges such as global warming, a phenomenon that leads to more frequent and more severe natural disasters such as floods and cyclones.

Very importantly, to ensure our own collective health security, we have to vigorously implement the International Health Regulations (2005). These efforts will contribute to the effective prevention of the global spread of infectious pathogens.

Honourable Ministers, for all our efforts, we have to aim towards achieving sustainable development in the long term. Strengthening health systems based on the primary health-care approach has to be our key strategy in this regard. In particular, special attention has to be paid to the development of public health infrastructure, in order to ensure effective primary prevention, reach the unreached and achieve universal coverage.

As always, WHO on its part will leave no stone unturned in supporting Member States in their efforts towards sustainable development of health for all their people. The bond of collaboration between Member States and WHO will certainly be further strengthened in the years to come. WHO will continue working closely and harmoniously with other international governmental and nongovernmental organizations to ensure the best support to Member States.

Ladies and gentlemen, I finally wish the Honourable Ministers and distinguished representatives all success in their deliberations during the course of the two meetings.

Thank you.

Annex 5

Full text of address by Dr Margaret Chan, Director-General, World Health Organization

Your Excellency Mr Dorji, Honourable Prime Minister of the Royal Government of Bhutan; Regional Director Dr Samlee Plianbangchang; Honourable Ministers of Health, delegates, colleagues of the UN family, ladies and gentlemen;

I am most pleased to be present at this joint inauguration of the Health Ministers' Meeting and the Regional Committee for South-East Asia. I want to thank the Government of Bhutan for hosting these meetings, and specially thank the Prime Minister, His Excellency Mr Dorji, for honouring this event.

I was asked to say a few words today; I have another opportunity tomorrow to share with you my thoughts on the key health challenges for this Region. Some of these are related to the geography, others arise from the size of your populations and the sheer numbers of people you must reach.

You also have, especially at the policy level, some shared assets. I am referring, in particular, to your commitment to poverty reduction, and your determination to reach universal coverage with essential interventions. I see these policy commitments in your national health plans and long-term objectives. Many of these objectives are visionary. As just one example, I know that Bhutan is considered the Region's "crown jewel" in terms of its equitable and rational policy of access to essential medicines.

I also want to commend Bhutan's commitment to Gross National Happiness as the best measure of true progress in development. I doubt that there could be any other objective that so closely aligns with the comprehensive definition of health set out in the WHO Constitution.

Ladies and gentlemen, in this part of the world, an objective of scaling up to reach universal coverage takes on a much bigger meaning.

Your commitment shows great political courage in the face of a challenge magnified many times in this most populous region in the world.

I know that I personally have much to learn from your collective experiences. I will listen closely to your discussions in the next few days and thank you for this opportunity.

Thank you.

Annex 6

Full text of inaugural address by Prime Minister Lyonpo Kinzang Dorji, Royal Government of Bhutan

Director-General of WHO, Dr Margaret Chan; Regional Director, South-East Asia Region, Dr Samlee Plianbangchang; Honourable Ministers of Health from South-East Asia Regional countries; Excellencies; Delegates; ladies and gentlemen;

At the outset, I have the great honor to convey the warm greetings and best wishes of His Majesty Jigme Khesar Namgyel Wangchuck, the King of Bhutan, for the success of the Twenty-fifth Meeting of the Ministers of Health and the Sixtieth session of the Regional Committee of WHO's South-East Asia Region.

I am deeply honored to be here today among all the visiting dignitaries and distinguished participants at this joint inaugural session of these two very important meetings being held here in our capital city of Thimphu. It is indeed a privilege for Bhutan to host a meeting of this stature.

On behalf of the people and the Government of Bhutan and, on my own behalf, I would like to extend a very warm welcome to all the distinguished delegates. I hope you will have a pleasant and comfortable stay in our country.

Excellencies, distinguished delegates, ladies and gentlemen,

Bhutan has witnessed historic and unprecedented changes in recent years, and the year 2008 will culminate in the celebration of three major historical events. These events include Bhutan's unique transition to parliamentary democracy, celebration of 100 glorious years of monarchy and the Coronation of His Majesty the Fifth King. It will be the year when we will celebrate the unique introduction of parliamentary democracy in the country which is a gift from the Golden Throne. It will be the year when our people will pay tribute to a dynasty that has brought unprecedented peace, stability and progress through extraordinary and selfless leadership. Above all, it will be the year when we will celebrate the formal coronation of our Fifth Druk Gyalpo,

His Majesty Jigme Khesar Namgyel Wangchuck, with great jubilation, and look forward to a bright and prosperous future under his reign.

When we look at Bhutan's history, it will be seen that our successive monarchs have steered the kingdom on a path of enormous socio-economic development and have brought about peace and stability in the country. The successive generations of our beloved kings have consolidated and crystallized the foundations of our country, lifted the veil of isolation, and led the country forward as a confident, forward-looking, dynamic and modern nation-state against a global background. In particular, the reign of His Majesty the Fourth Druk Gyalpo, Jigme Singye Wangchuck, will go down in the history of Bhutan as a singularly momentous period in the all-round development of our country. It was under the visionary guidance of His Majesty the Fourth King that "Gross National Happiness" was introduced as the development philosophy, which strives to balance spiritual well-being of the people with socio-economic development.

This principle of Gross National Happiness is reflected in the health sector through integration of traditional medicine with that of the modern medical system. Realizing health as a major component for happiness, the constitution also guarantees free general health services to all the citizens. To this end, our government has allocated 10 to 15% of its annual budget to the health sector for the last four decades.

The Bhutanese health sector is honoured to have the continuous support of Her Majesty, Ashi Sangay Choden Wangchuck, the Queen of Bhutan and UNFPA Goodwill Ambassador to Bhutan. Her Majesty's earnest, enduring and continuous campaigns for advocating and raising health awareness have contributed significantly towards the improvement of the health of our people, particularly in rural areas.

Excellencies, distinguished delegates, ladies and gentlemen,

Recognizing the importance of improving health care for addressing poverty issues, and given its very interrelated nature, health has become one of the agenda items in many global, regional and national forums. The emerging and re-emerging diseases such as SARS, avian influenza, MDR-TB, etcetera do not respect national boundaries, posing a threat to our collective health security. Further, the change in world climate has started to pose a serious threat to global health. Here I would like to commend WHO in bringing out the revised International Health Regulations, to which Bhutan commits fully. I believe such regulations would contribute towards promoting international cooperation and partnerships.

In this context, the Royal Government of Bhutan also whole-heartedly welcomes the establishment of the South-East Asia Regional Health Emergency Fund. I hope this

will go a long way in providing the necessary financial support to unfortunate victims of disasters.

The primary health care approach has been instrumental in attaining public health achievements in Bhutan, with some of them being:

- Polio cases not reported since 1986
- Leprosy eliminated since 1997
- Universal Child Immunization achieved since 1991
- Iodine Deficiency Disorder eliminated since 2003
- Rural water supply coverage is 89%
- Basic health-care service coverage over 90%.

One of the major challenges for Bhutan will be sustaining the above accomplishments in view of the financial constraints. Shortage of human resources is another major difficulty in the light of the expanding healthcare services, difficult geographical terrain and scattered population.

I believe all our countries in the region face similar problems, but of varying degrees. As rightly stated in the *World Health Report 2007*, the region has only around four health workers for every 1000 population against the global health workforce of around nine. The same report states that the Region has 25% of the world's population to provide with health services, with only 17% of medical institutes to produce doctors, and 3% of public health institutes. In addition, the Region has a huge disparity in distribution of medical institutes. For instance, Bhutan continues to depend on the Region to train its doctors and other health workforce since there is only one institute for training paramedical personnel. We would like to thank you for the support that you have provided to Bhutan in its efforts to improve its health services and to have a good health system in place.

The need to sustain and expand primary health care services, the growing demand for quality health care services and emerging international threats are increasingly adding pressure on our already limited financial and human resources, especially the health workforce. Therefore, Bhutan would like to seek continuous support of the Region for training our health workforce, especially at the postgraduate level.

I am confident that the adoption of the "Thimphu Declaration on International Health Security in the South-East Asia Region" will go a long way in reducing the vulnerability of people in the Region and the world to a host of health-related risks and disasters. In this regard, I would like to commend the initiative and efforts of WHO and its Member countries and wish them success in their future endeavours.

I understand that you will be busy with the meetings over the next four days. Nevertheless, I hope you will find time to familiarize yourselves with our country, culture and way of life.

I am confident that your fruitful deliberations will lead to a common vision for minimizing threats to our collective health security.

I now declare the Twenty-fifth Meeting of Health Ministers and Sixtieth Session of the Regional Committee of WHO South-East Asia Region opened.

Thank you and tashi delek.

Annex 7

**Full text of vote of thanks by
His Excellency Mr Nimal Siripala de Silva
Minister of Healthcare and Nutrition, Sri Lanka**

Your Excellency, Lyonpo Kinzang Dorji, Honourable Prime Minister of Bhutan; Your Excellencies; distinguished delegates; ladies and gentlemen;

I, on behalf of the Health Ministers and distinguished delegates, would like to take this opportunity to offer the vote of thanks.

We are very grateful to the Royal Government of Bhutan for hosting these meetings in your land of happiness. The wonderful arrangements and the warm welcome will certainly make our stay in Bhutan highly memorable. We all can feel the human touch that has gone into every detail of the arrangement for these meetings.

We have been hearing about the political changes in Bhutan. Now we are here where the actual changes are taking place. Bhutan is the only country where the democratization process takes place in peace time, and that too at the insistence of the leader in power. Perhaps this form of transition is part of the Gross National Happiness philosophy, and we all admire it very much.

We all take note of the Royal Government of Bhutan's commitment to ensure free general health services to all its citizens as enshrined in its constitution. As the health of the people is crucial for a country's economic development, we all commend this commitment so that the health of the people is fully protected in the face of the upcoming transition and beyond.

We are confident that with the enlightened leadership and guidance from His Majesty the King, the transition to full democracy in Bhutan will be unique and exemplary. On behalf of the Health Ministers and delegates of the countries represented here, I take this opportunity to wish His Majesty the King and the Royal Government of Bhutan every success in this important process.

We would like to thank His Excellency, Lyonpo Kinzang Dorji, Prime Minister of Bhutan, for gracing this important ceremony.

We would also like to thank Dr Samlee Plianbangchang, Regional Director, and his team from WHO-SEARO for preparing us and coordinating this important meeting. We are aware of the enormous amount of work that has gone into preparing these meetings with such professionalism and thoroughness.

We are happy to have Dr Margaret Chan, the WHO Director-General, and her team with us and would like to thank her for her address.

Lastly, we also look forward to taking advantage of this peaceful venue for fruitful deliberations and hope to arrive at some practical recommendations which will go a long way in further improving the health of our people in the Region.

Thank you.



**World Health
Organization**

Regional Office for South-East Asia