Speech by Zsuzsanna Jakab, WHO Regional Director for Europe

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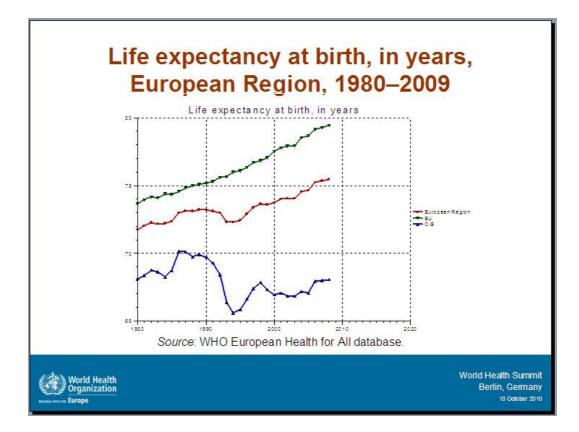
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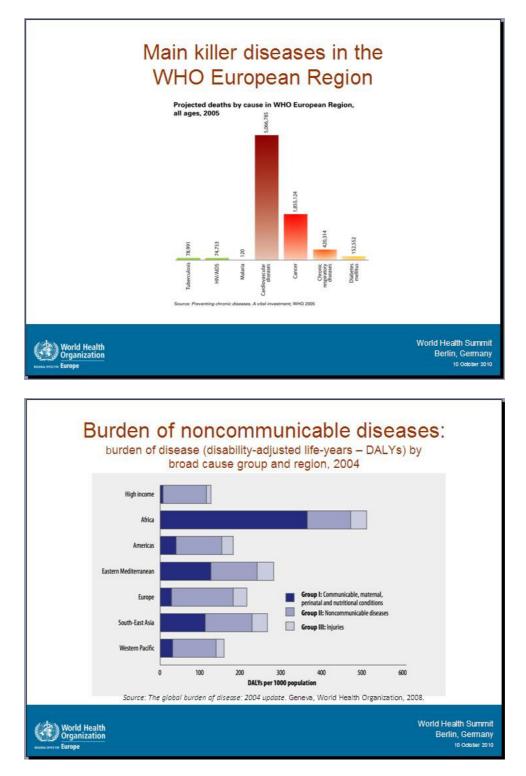
Ladies and gentlemen,

I am delighted to have been invited to attend and speak at this prestigious and inspiring conference.

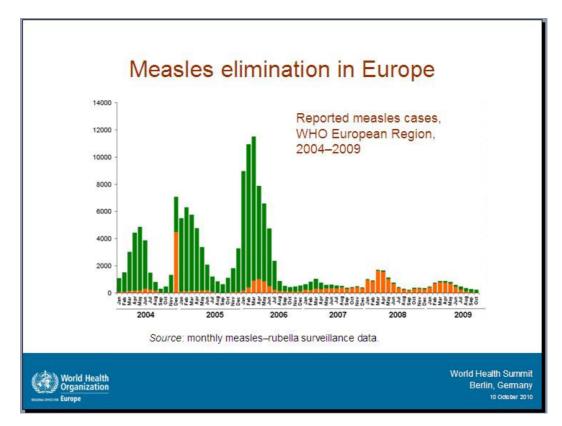
The European Region of WHO spans from Iceland and Greenland in the west to the Pacific coast of the Russian Federation in the east. It comprises 53 countries, and almost a billion people. The health of all these people is improving, yet not enough. There are huge disparities and inequities between and within countries.



Increasingly we understand why. We know much more about the social and economic determinants of health. We have learned of the increasing importance of the challenges of the environment, including new concerns such as climate change, and we know more of the importance and impact of well-performing health systems. Technological capacities in prevention and therapy are expanding exponentially, and on the horizon are the perhaps boundless opportunities of our new genetic understanding.



Right now, we know the big challenges. Noncommunicable diseases (such as cardiovascular diseases, cancer, diabetes and mental disorders), along with the diseases of ageing and disability, predominate now in all European countries. But the old problems also remain, including HIV, malaria and tuberculosis, and the ever-present threat of new pandemics. We have recently seen the re-emergence of poliomyelitis in our Region, and the challenges of measles and rubella elimination remain.



Across the European Region, there is great variation in the structure and capacity of health systems, as well as the resources that are available, particularly as we have passed through a period of acute financial crisis. As technologies improve, health systems matter more and more, and the widening gap in access to health services affects longevity and the quality of lives. As an example, we can think of the huge advances in cardiology and cardiac surgery, and in imaging and screening technologies. As our technologies improve at an increasing pace, this trend will only continue.

The context for European health policy has therefore changed dramatically over the last years. The last major revision, HEALTH21, was in 2000, and was based upon earlier work around WHO's Health for All movement and developments in primary health care going back to the famous Alma-Ata conference in 1978.

This work was based on available knowledge of the socioeconomic, behavioural and environmental determinants of health, and the effects of these factors on the health of populations and individuals, together with a new emphasis on the importance of health promotion and disease prevention. Attention was focused up-stream in the natural history of disease, and on the potential utility of changing the interaction between individuals and society in ways that maximized health potential over the life-span.

This approach remains of profound importance, but we need to look at health policy across the European Region in the light of today's circumstances. Over the last years, the forces of globalization and economic, social, technological and behavioural changes have had profound effects on the health of the people of the Region. In addition, and very positively, health is increasingly seen as a key factor in economic growth and innovation. It is understood that investment in health is vital for human development.

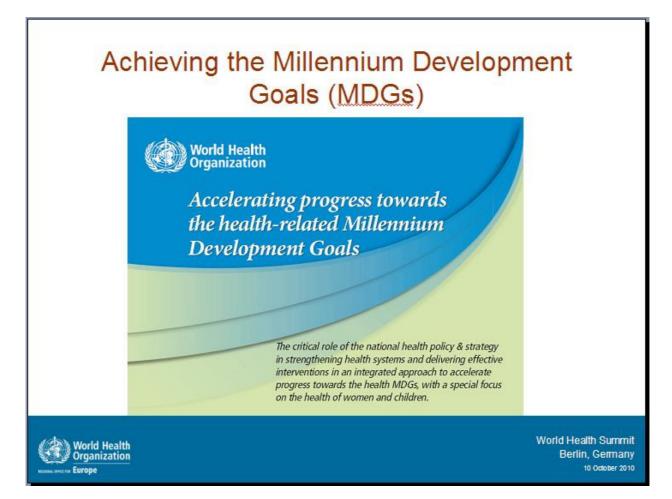
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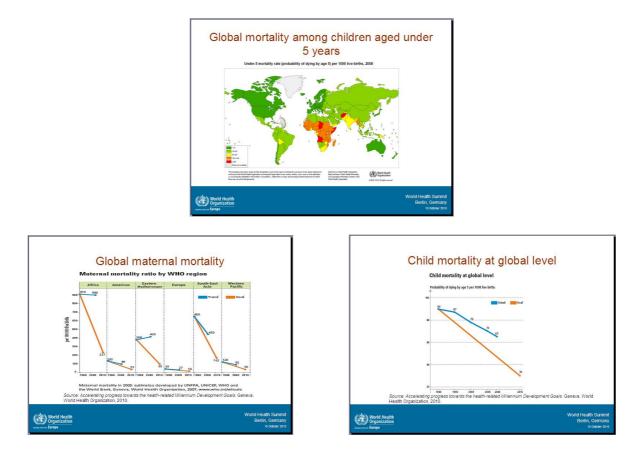
Therefore, with the support of the WHO Regional Committee for Europe, the WHO Regional Office for Europe has launched a new, participatory and inspirational European health policy, which we have entitled Health 2020. Our role at the Regional Office is to take best practice and to lead and help shape European and country experiences. We aim for healthier populations and improved and more responsive health systems, and these objectives will be at the core of Health 2020.

Also at the heart of the policy will be a strengthened leadership role for public health, together with wider and deeper partnerships and coalitions for health. Our key goal will be better health for the citizens of the Member States in the European Region, with reduced inequities. Health 2020 will consider all of the determinants of health and the causes of the present inequities in health. Our multifaceted health context must be understood and policy responses defined and implemented, fundamentally within our Member States, but with our help and assistance.

We must do all this in a global context. Today's world provides a complicated backdrop to health improvement. Health must be seen in an international context, and increasingly as a global issue. These ideas are usually focused around communicable disease threats that have regional implications, yet in truth there are a cluster of trade, food, water, environment, finance and energy challenges that are relevant to health at the global level. Global health is at the cross-roads of global agendas concerning security, economic development and social justice, and increasingly health will be seen as a strategic driver of security, foreign and development policy.



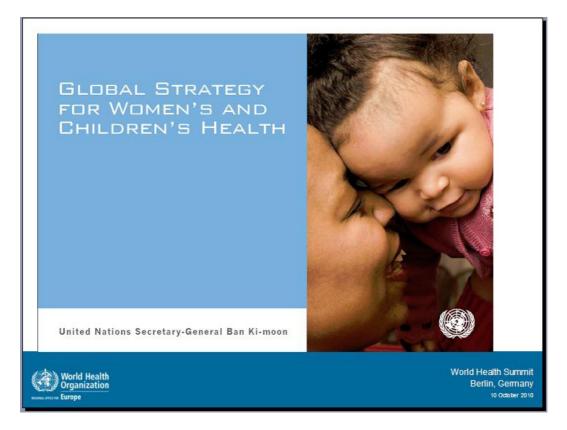
As an example of this high global prominence for health development, I am speaking after the recent United Nations High-Level Plenary Meeting on the Millennium Development Goals, held in New York to review the progress made between 2000 and 2010, and what more needs to be done. The Millennium Development Goals (MDGs) review will inform the policy direction of my Office, and help direct our attention and resources.



I give as one very high-profile example maternal, newborn and child health, where the need for progress is particularly acute. Here our work will be concentrated on high-burden countries. We shall work with other United Nations agencies, civil society and other actors, in the context of national development plans, as well as national health policies and strategies.

Success in improving the health of women, newborn infants and young children will require a continuum of technical interventions across the life-course, with concomitant efforts to strengthen health delivery systems and address the broader social and economic determinants of women's health.

SLIDE 11



We shall follow the evidence provided in the recent WHO publication, *Women and Health: today's evidence, tomorrow's agenda*, and the new Global Strategy for Women's and Children's Health recently announced by the Secretary-General of the United Nations, Ban Ki-moon. To give some global figures, reaching the global targets for MDG 4 (a two-thirds reduction in under-5 mortality) and MDG 5 (a three-quarters reduction in maternal mortality and universal access to reproductive health services) would mean saving the lives of 4 million children and about 190 000 women in 2015 alone. These figures give some specific human substance to what we are trying to achieve regionally in Health 2020.

As I have mentioned, to achieve these ambitious goals, we must build strong partnerships if we are to achieve my vision of better health for Europe and see our Regional Office as a centre of public health excellence. We have a long-standing partnership with the European Commission and propose to extend this into a new strategic vision of collaboration. We shall extend partnerships also with the Organisation for Economic Co-operation and Development (OECD), the Global Fund to Fight AIDS, Tuberculosis and Malaria, the European Investment Bank, and health-related United Nations bodies such as the United Nations Children's Fund, to name some specific examples.

SLIDE 12



To this distinguished audience I would like to mention one more point.

I am determined that all of the work of the WHO Regional Office for Europe and Health 2020 will be underpinned by the best scientific evidence, both fundamental and evidence based, for policy development and implementation. I have established a Chief Scientist role within the Office, which will be supported by a strong and effective European Advisory Committee on Health Research, and I much hope for the full-hearted involvement of the European academic and research communities as we take forward the work on Health 2020. Already, for example, we have commissioned a new European review on the social determinants of health and the health divide, to be led by Professor Sir Michael Marmot, and this will make a major input to our work on Health 2020.

Ladies and gentlemen,

I hope that I have given you a perspective on my vision for better health in Europe and the development of our European regional health policy, Health 2020. We shall need every support in this major initiative to align health-related policy and practice alongside today's health challenges in Europe. It has been a great pleasure to explain our intentions, and to invite your support and involvement.

Thank you.