Strengthening UN country team's coherent support to public health Economic and Social Council Operational Activities Segment Geneva, 15-17 July 2009

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I AM REPRESENTING THE LATIN AMERICA AND CARIBBEAN UN REGIONAL DIRECTORS TEAM (UN LAC RDT) AND THE WHO REGIONAL OFFICE FOR THE AMERICAS.

THE REGION OF LATIN AMERICA AND THE CARIBBEAN IS FACING A PARADOXICAL SITUATION AT THE BEGINNING OF THE TWENTY-FIRST CENTURY. ON THE ONE HAND, IT HAS AN EXTRAORDINARY WEALTH OF HUMAN AND NATURAL RESOURCES AND HAS BEEN EXPERIENCING, FOR THE PAST FEW YEARS, A POSITIVE ECONOMIC UPTURN. ON THE OTHER HAND, THE REGION REMAINS THE MOST UNEQUAL ON THE PLANET. INDEED, WHILE A MAJORITY OF OUR COUNTRIES ARE MIDDLE INCOME COUNTRIES AND HAVE MOSTLY HIGH OR MEDIUM HUMAN DEVELOPMENT LEVELS, THE SAD TRUTH IS THAT A LARGE (34%) PROPORTION OF THEIR POPULATION LIVES IN POVERTY.

FOR THE UN SYSTEM, THE MIDDLE INCOME COUNTRIES REPRESENT A SPECIAL CHALLENGE. THE 2007 TRIENNIAL COMPREHENSIVE POLICY REVIEW (TCPR) ACKNOWLEDGED THAT MIDDLE-INCOME DEVELOPING COUNTRIES STILL FACE SIGNIFICANT CHALLENGES IN THE AREA OF POVERTY ERADICATION AND THAT EFFORTS TO ADDRESS THOSE CHALLENGES SHOULD BE SUPPORTED. IN PARTICULAR, THE UN NEEDS TO SUPPORT THE EFFECTIVE

DEVELOPMENT OF COMPREHENSIVE COOPERATION POLICIES IN ORDER TO ENSURE THAT ACHIEVEMENTS MADE TO DATE ARE SUSTAINED. THIS REQUIRES THE SUSTAINED COMMITMENT OF VARIOUS UN AGENCIES EVEN IN THOSE COUNTRIES CONSIDERED TO HAVE "GRADUATED" DUE TO THEIR MIDDLE-INCOME STATUS.

THE UN LAC RDT IS ONE OF THE MOST INCLUSIVE REGIONAL DIRECTORS TEAMS WITH 15 AGENCIES AS REGULAR MEMBERS. ITS MEMBERSHIP ORIGINALLY CONSISTED OF THE FOUR EXCOMS, AS MANDATED IN 2003, BUT EXPANDED TO SIX MEMBERS IN 2006 AND PROGRESSIVELY TO 15 IN 2008,

TO ACCOMPLISH ITS GOALS, THE UN LAC RDT HAS A WORK PLAN AND MEETS AT LEAST 4 TIMES A YEAR TO DISCUSS PRIORITY ISSUES AND FOLLOW UP THE IMPLEMENTATION OF ITS KEY ACTIVITIES. ITS KEY ROLES INCLUDE:

- STRATEGIC PROGRAMME SUPPORT, GUIDANCE AND QUALITY ASSURANCE (QSA) FOR UNCTS
- Oversight of policy implementation to ensure global policies are implemented at the regional and country level;
- IDENTIFICATION OF SPECIFIC REGIONAL PRIORITIES, INCLUDING SUB-NATIONAL INEQUALITIES, MDGs in health, vulnerable groups (indigenous, afro-descendant, women), nutrition, MIC issues, and cross border issues, among others; Inter-agency RC/UNCT Appraisal, oversight, and support;
- Integrated Support for Emergency and Crisis Prevention, Preparedness and Response (through the interagency standar committee IASC); and
- DIRECT SUPPORT TO SPECIFIC UNCTS IN NEED, INCLUDING THOSE IN CRISIS AND THOSE PILOTING NEW INITIATIVES (E.G. HAITI, COLOMBIA, SURINAM)

AN IMPORTANT ACHIEVEMENT OF THE UN LAC RDT HAS BEEN THE ESTABLISHMENT OF THE PANAMA REGIONAL CENTER. THIS REGIONAL "HUB" HAS MADE POSSIBLE THE COLOCATION OF REGIONAL ENTITIES IN PANAMA'S "CITY OF KNOWLEDGE" (IN THE FORMER

US BASE). THIS HAS MADE POSSIBLE INCREASED INTER-AGENCY DIALOGUE, COLLABORATION, AND EFFICIENCY AS REQUESTED BY THE GENERAL ASSEMBLY'S TCPR.

LET ME NOW EXPLAIN SOME OF THE UN LAC RDT'S ACHIEVEMENTS RELATED TO THE PROVISION OF COHERENT SUPPORT TO PUBLIC HEALTH TROUGH THE UNCTS IN LATIN AMERICA AND THE CARIBBEAN:

1. ESTABLISHMENT OF THE PAN AMERICAN ALLIANCE FOR NUTRITION AND DEVELOPMENT TO ACHIEVE THE MDGs:

THE INITIATIVE TO CREATE THE ALLIANCE RECOGNIZED THAT MALNUTRITION AND HEALTH PROBLEMS ARE A PRODUCT OF THE INTERACTION OF MANY FACTORS, SOME OF THEM ORIGINATING IN THE INDIVIDUAL PERSON, BUT MANY OTHERS DIRECTLY LINKED TO THE SOCIAL AND ECONOMIC CONDITIONS IN WHICH WE LIVE. GENERICALLY KNOWN AS "SOCIAL DETERMINANTS." TRADITIONAL APPROACHES TO THE MALNUTRITION PROBLEM HAVE TARGETED THE INDIVIDUAL THROUGH FOOD AND VERTICAL HEALTH PROGRAMS, DOWNPLAYING OR SIMPLY NOT RECOGNIZING THE IMPORTANCE OF SOCIAL DETERMINANTS, WHICH INCLUDE FOOD SECURITY, THE PHYSICAL AND SOCIAL ENVIRONMENT, EDUCATION, ACCESS TO INFORMATION, MATERNAL HEALTH STATUS, FAMILY PLANNING, ACCESS TO HEALTH SERVICES, THE EXERCISE OF HUMAN RIGHTS AND FUNDAMENTAL FREEDOMS, HOUSEHOLD INCOME, AND WORKING CONDITIONS. EFFORTS TO RECTIFY REDUCTIONIST APPROACHES TO ADDRESS MALNUTRITION REQUIRE SIMULTANEOUS, COORDINATED, AND COMPLEMENTARY TECHNICAL COOPERATION FROM ALL UNITED NATIONS AGENCIES AND OTHER STAKEHOLDERS COMMITTED TO THE DEVELOPMENT AND WELL-BEING OF THE POPULATION.

2. PARTICIPATION IN VACCINATION WEEK IN THE AMERICAS:

VACCINATION WEEK IN THE AMERICAS (VWA) IS AN INITIATIVE OF THE COUNTRIES OF THE REGION OF THE AMERICAS WHICH SEEKS TO REVITALIZE HIGH LEVEL POLITICAL COMMITMENT TO VACCINATION AND PROMOTE A CULTURE OF

PREVENTION. THE OBJECTIVES OF VWA ACTIVITIES, WHICH TAKE PLACE ANNUALLY IN APRIL, ARE TO:

- PROMOTE EQUITY AND ACCESS TO IMMUNIZATION;
- SUPPORT THE TRANSITION FROM CHILD TO FAMILY IMMUNIZATION;
- MAINTAIN IMMUNIZATION ON THE POLITICAL AGENDA;
- KEEP THE REGION FREE OF POLIO AND INDIGENOUS MEASLES; SUPPORT THE IMPLEMENTATION OF PLANS TO ELIMINATE RUBELLA AND CONGENITAL RUBELLA SYNDROME (CRS);
- SUPPORT THE INTRODUCTION OF NEW OR UNDERUTILIZED VACCINES;
- STRENGTHEN EPIDEMIOLOGICAL SURVEILLANCE; AND
- PROMOTE CROSS-BORDER COORDINATION.

THE PARTICIPATION OF MULTIPLE UN AGENCIES, AND THE PERSONAL LEADERSHIP AND INVOLVEMENT OF THE LAC RDT, HAVE BEEN ESSENTIAL IN THE TREMENDOUS SUCCESS OF THE VWA. THE REGIONAL DIRECTORS ALSO FORMALLY AND JOINTLY ASKED THE UNCTS TO PROMOTE AND PARTICIPATE IN THE VWA ACTIVITIES AT COUNTRY LEVEL.

THE 2009 VACCINATION WEEK IN THE AMERICAS (VWA) - THE LARGEST MULTI-COUNTRY HEALTH EFFORT IN THE WESTERN HEMISPHERE - WAS HELD FROM 25 APRIL TO 2 MAY 2009 WITH THE GOAL OF VACCINATING SOME 30 MILLION PEOPLE.

3. DEVELOPMENT AND LAUNCH OF HEALTH MDG INTERAGENCY REPORT.

UNDER THE COORDINATION OF THE ECONOMIC COMMISSION FOR LATIN AMERICA AND THE CARIBBEAN (ECLAC), AND WITH THE SUPPORT OF OTHER UNITED NATIONS BODIES, HAVE CONDUCTED A REVIEW OF PROGRESS TOWARDS THE HEALTH-RELATED GOALS IN LATIN AMERICA AND THE CARIBBEAN, THE OBSTACLES TO THEIR ATTAINMENT, THE SUITABLE POLICIES NEEDED, AND AN ANALYSIS OF PROSPECTS FOR THE FUTURE. THE REPORT WAS LAUNCHED IN 2008.

4. REGIONAL DIRECTORS GROUP IN LATIN AMERICA AND THE CARIBBEAN ON HIV/AIDS

AN INNOVATIVE STRUCTURE, PARTICULAR TO OUR REGION, IS THE UNAIDS COSPONSORS REGIONAL DIRECTORS GROUP (RDG) FOR LATIN AMERICA AND THE CARIBBEAN. IT WAS SET UP IN JUNE 2003, AND BRINGS TOGETHER THE REGIONAL DIRECTORS OF THE 10 COSPONSORS OF THE UNAIDS PROGRAM PLUS THE UNAIDS SECRETARIAT. THE UNAIDS COSPONSORS RDG WORKS ALONG 8 STRATEGIC LINES OF ACTION AMONG WHICH HIGH LEVEL ADVOCACY FOR UNIVERSAL ACCESS TO PREVENTION, CARE AND TREATMENT ON HIV/AIDS, AND GUIDANCE AND SUPPORT TO UN THEME GROUPS AND UN JOINT TEAMS AT COUNTRY LEVEL.

RIGHT NOW, CRISES LIKE THE FOOD CRISIS, THE FINANCIAL CRISIS, CLIMATE CHANGE, AND PANDEMIC INFLUENZA ARE REQUIRING SPECIAL ATTENTION FROM THE INTERNATIONAL COMMUNITY AND THE UN SYSTEM. IN LATIN AMERICAN AND THE CARIBBEAN REGION, THE UN LAC RDT has been an important mechanism for sharing the latest information on the H1n1 pandemic with the regional directors, ensureçing the supply of antivirals for the un personnel in the region, and supporting interagency collaboration to deliver effective technical assistance to control the epidemic according to national priorities.

Ladies and gentlemen, let me conclude by briefly summarizing what I believe are some of the lessons learned from UN LAC RDT facing the challenges to strengthen UN country team's coherent support to public health today.

FIRST, A STRONG UN REGIONAL DIRECTORS TEAM IS KEY TO ENHANCE UNCTS EFFECTIVE ACTION.

SECOND, A GOOD COMMUNICATION STRATEGY BETWEEN THE DIFFERENT LEVELS OF UN SYSTEM IS ESSENTIAL TO ACCOMPLISH THE GOAL OF "DELIVERING AS ONE" AT COUNTRY LEVEL.

THIRD, UNCTS REQUIRE EFFECTIVE SUPPORT FROM REGIONAL AND GLOBAL LEVEL OF THE UN SYSTEM, INCLUDING TECHNICAL ASSISTANCE AND CLEAR GUIDANCE ON CRITICAL ISSUES.

THANK YOU FOR YOUR KIND ATTENTION.