



PAN AMERICAN HEALTH ORGANIZATION
WORLD HEALTH ORGANIZATION

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**WELCOMING REMARKS BY THE SECRETARY GENERAL
OF THE ORGANIZATION OF AMERICAN STATES**

Mr. José Miguel Insulza

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A very good morning to you,
Dr. Margaret Chan, Director-General of the World Health Organization,
Dr. Mirta Roses Periago, Director of the Pan American Sanitary Bureau,
Dr. Luis Castillo, outgoing President of the Pan American Sanitary Conference,
Dr. Howard Koh, Assistant Secretary of the U.S. Department of Health
and Human Services,
Esteemed Ministers
Esteemed Representatives of the Member States of the Pan American
Health Organization

I would first like to recall—in order to refer subsequently to our relationship with PAHO as a sister organization—the slogan that we saw a moment ago onscreen: “We do it better together.” Actually, I believe that our two organizations, the OAS and the Pan American Health Organization, have been collaborating for more than 100 years, which is no small thing.

PAHO was created in 1902 under the Pan American Union, and although the names have changed as have those of its offices—because in 1948 the Pan American Union became the Organization of American States and PAHO became the Regional Office of World Health Organization—we have continued to work together, as is proper, for 11 decades. And that is very important and speaks first to the value and relevance of Pan-Americanism, but also to the work of this Organization, which is an example throughout the Americas.

The 28th Pan American Sanitary Conference approved the Strategic Plan 2008-2012, which I am sure we will discuss at length in this conference. In the plan, Dr. Roses stressed that health and well-being in the Americas require not only a strong political commitment, but the integration of development and health policies as well. The past 10 years have seen the Region prosper. At the same time, for the past couple of decades, the States have enjoyed democracy as never before in the Americas. We have never had more democratic governments than we do today—governments whose public policies have sought to improve the economic and social conditions of their citizens. Clearly, there is a direct relationship between this fact and declining indices of poverty, extreme poverty, and unemployment, as well as the significant reduction in

communicable diseases and homicide rates, as Dr. Roses pointed out. This period is one of the most fruitful in the history of Latin America and the Caribbean, in terms of both the consolidation of democracy and the strengthening of the rule of law, and we should not lose sight of that.

That said, there are new and old challenges. Poverty and inequality remain serious challenges in the Americas, and they are usually accompanied by insecurity and poor health, so there is work to do in this area. At the same time, we have new problems, which have been highlighted here; the main one is the increase in noncommunicable diseases related to population aging. Today, precisely because the citizens of the Americas live longer, we face challenges that differ from those of not so many decades ago, when diseases decimated a significant portion of our young people.

That is why the Organization of American States and PAHO are very proud of the work we do together. We work hand in hand to achieve social and economic development with equity, considering the social determinants of health approach to be central to this strategy. We work in the full awareness that the Millennium Development Goals and the goals specifically related to health make the work that you do especially important.

For these reasons, we believe that the approval of a Social Charter of the Americas by the Organization of American States is one of the most important, complete, and comprehensive steps forward in social affairs. It addresses the social determinants as key determinants of health. As the Social Charter itself says, health is an essential condition for inclusion and social cohesion, integral development, and economic growth with equity.

In this regard, I wish to highlight—as previously stated—the work of Dr. Mirta Roses throughout these years to develop a coherent program of public health policies. Her commitment to social well-being and the fight against inequality in the Americas is the mark she has been making for a decade at the helm of this Organization. That commitment has been characterized by her unflagging support for the countries in their efforts to meet the Millennium Development Goals and the helping hand she has extended to the most vulnerable communities in our Hemisphere in building more just and equitable societies. I believe that the report she is going to present to us will demonstrate how far we have come in this respect and what remains to be done, but her legacy will be indelible for all of us involved in the work of this Organization.

I would like to point out our work in the Consumer Safety and Health Network, jointly implemented by the OAS and PAHO; the Inter-American Social Protection Network; and our Regional Consultation on the Social Determinants of Health in the

Region of the Americas from the civil society perspective. I should especially emphasize our recent work, mandated by our heads of state in the wake of the technical report on drug policies, and the new approaches of these leaders in which PAHO's collaboration is fundamental. The drug problem has become a public health problem, and that approach, which enables us to go beyond the purely repressive vision that has dominated action until now, is an important legacy that Dr. Mirta Roses leaves us.

We have, then, many things to celebrate. We are parallel and sister organizations that have worked together for more than a century, and we hope to continue to do so in the future. And in that future, the mark left by Dr. Mirta Roses will remain, helping us work better each day.

Thank you very much.

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