



Organización
Panamericana
de la Salud



Organización
Mundial de la Salud

OFICINA REGIONAL PARA LAS Américas

56th DIRECTING COUNCIL

70th SESSION OF THE WHO REGIONAL COMMITTEE FOR THE AMERICAS

Washington, D.C., USA, 23-27 September 2018

CD56/DIV/4
Original: English

**OPENING REMARKS BY HON. ALEX M. AZAR II
SECRETARY OF HEALTH AND HUMAN SERVICES
OF THE UNITED STATES OF AMERICA**

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**56th Directing Council of PAHO
70th session of the WHO Regional Committee for the Americas**

Mr. President, Director Etienne, Mr. Ambassador, Dr. Swaminathan, fellow ministers, distinguished leaders:

It is an honor to welcome you all to Washington and to be here for my first Directing Council.

I especially want to thank you, Dr. Sánchez Midence, for your leadership as President of the Directing Council, and thank you, Director Etienne, for your leadership as well; your reelection demonstrates the confidence and trust that the nations of PAHO have in your vision and capacity to lead us to a healthier and more secure future.

PAHO and the World Health Organization have an impressive legacy fighting diseases and working to promote better health for our peoples.

We in the Western Hemisphere like to remind our friends in Geneva that PAHO predates WHO by 46 years, contributing to the health of the Americas for more than a century.

Both organizations have much to teach each other. PAHO and WHO's partnership provides important opportunities for us to work together to secure a safe and healthy future for all.

We look forward to engaging intensively with you all on an agenda for ongoing improvements and reform within both organizations. We should celebrate PAHO and WHO's accomplishments and expertise, but also take a clear-eyed view of what needs to be improved so both organizations can fulfill their lifesaving missions.

First and foremost, PAHO and WHO must focus their work on preparedness for infectious disease threats. This must be a top priority across our region and the world. Threats that can be spread across borders, by definition, should be the primary concern of an international organization.

As we all know, infectious diseases do not respect boundaries and can rapidly spread through travel or migration to imperil our health, security, and prosperity. Tragically, we have a fresh reminder of this fact with a public health crisis right here in our hemisphere. We believe that the serious health consequences stemming from the Venezuela crisis need to be addressed in an urgent way, working together as we so often do.

Much more work is ahead of us to achieve national, regional, and global health security goals and to maintain these capabilities over time. Joint External Evaluations are an essential tool in this effort, and we have been pleased to see a number of countries in the Americas embracing them as a way to improve their preparedness and meet their International Health Regulations commitments.

But on threats like infectious diseases, governments and international organizations cannot go it alone. Achieving our preparedness goals requires us to collaborate across sectors. I encourage PAHO to be more open to engaging with a broad set of stakeholders, including the private and nonprofit sectors. For PAHO to be the organization our region needs it to be, we must be talking to more than member states.

PAHO must be an organization with wide-open doors, letting all stakeholders in, so that our policies, plans and guidance are as effective as they can be. More cooperation, more assistance, and more solutions to challenges will always be of benefit to the people we serve.

In addition to the contributions of civil society and the private sector, achieving our health security and IHR goals requires the efforts of all sectors within our governments: human and animal health agencies; civil defense and disaster response authorities; finance ministries; and others within government.

The United States is always eager to work with other countries to detect and mitigate outbreaks early to prevent the spread of disease. Together, we must identify areas for improvement and strengthen the systems run by each of our governments. We have effective tools at our disposal to do this, including external evaluations, simulation exercises, and after-event performance assessments.

I want to touch on a final point in closing, the question of how countries manage their domestic healthcare spending, as there can be opportunities to learn from each other here too. There are many drivers of health spending: how we pay providers, how health systems are organized, how coverage is obtained, and how drugs are priced.

In the United States, we are always seeking to improve our healthcare system, but I have made it a particular priority to explore how we can better engage the private sector to pay for value in healthcare.

I know that healthcare costs are a pressing challenge for many countries in our hemisphere, and we encourage everyone to think broadly about how to innovate to solve these challenges. We believe there is much room to grow in the realm of partnerships between the public and private sector to bring down the cost of care while improving health.

We represent individual nations with different approaches to issues, and different resources for addressing them. But we share many health challenges and have much to learn from each other.

By working together, making the contributions each of us can, and remaining focused on our greatest cross-border health threats, I am certain we can improve the health and prosperity of our nations and our whole hemisphere.

Thank you for your kind attention today.
