Global World Health Day 2018 Event
Nelum Pokuna Theater: 9.00am 7th April, 2018
Address by Hon Dr Rajitha Senaratne, Minister of Health, Nutrition and Indigenous Medicine

- Venerable Maha Sangha,
- Reverends,
- Your Excellency President Maithripala Sirisena,
- Hon Prime Minister-Ranil Wickremasinghe,
- Dr Tedros, Director General of the WHO,
- Dr. Poonam Singh, the Regional Director WHO,
- Hon Ministers, Deputy Ministers,
- Excellencies, Ambassadors,
- High Officials of the Government of Sri Lanka,
- Distinguished Invitees,
- Ladies and Gentlemen,

Today is a truly historic day, as well as a day of immense pride and honour for Sri Lanka and for me, as the Minister of Health. The World Health Organization is celebrating its 70th Birth Day in our island country with the participation of the Director General of the WHO and the Regional Director of our South East Asia Region, with our President His Excellency Maithripala Sirisena
and the Hon Prime Minister Mr. Ranil Wickremasinghe gracing this momentous occasion.

I recall that last January, on the eve of the commencement of the WHO Executive Board, Dr. Tedros, and our dear friend Dr. Poonam Singh and I were informally sharing ideas on Universal Health Coverage when the topic of this year’s World Health Day came up. On what might be a suitable place to celebrate this event, both Dr. Tedros and Dr. Poonam almost simultaneously said, “Why don’t we do it in Sri Lanka? Sri Lanka would be an ideal place with its remarkable record in UHC”. These were their words. I was delighted the next morning when Dr. Tedros in his Opening Remarks to the Executive Board announced that, “this year we are going to celebrate World Health Day in Sri Lanka. There is no better place to celebrate World Health Day!”. That is the little story of how we are all here today.

When I briefed His Excellency the President on my return to the island, he was very pleased and enthusiastic and advised me to make it a memorable occasion. Thank you Sir. As the immediate past Minister of Health and having made such a significant contribution to improve our health care, you are a great source of advice, encouragement and support to all of us.
Our Prime Minister, Mr. Ranil Wickremasinghe, who has an unbending commitment to social justice and fairness and to improvement of the social sector, is always a trusted advisor and an inspiration in my work.

Dr. Tedros, we welcome you most cordially to our country. My warm welcome to our friend Dr. Poonam Singh who has always been a true friend of Sri Lanka, inspiring and guiding us in all our efforts.

Distinguished ladies and gentlemen, my sincere greetings to each and every one of you. We are deeply honoured that all of you are with us this morning.

Dr. Tedros, we have clear evidence from our ancient past that Sri Lanka did have a well organized health care system and also had possibly the oldest organized hospital in the world, located in one of our earliest kingdoms. The ruins of these old hospitals still display in their designs how holistic health had been given a central place, with mental and spiritual health being their key components. The Great Chronicle Mahawansa, as well as some of the excavated ruins record that city designs those days included maternity homes and waste disposal systems and even
cemeteries, thereby giving due emphasis to public health concepts. We therefore have a heritage and a long tradition where health for the entire population has always been a priority of the leaders. In fact our traditional greeting when we meet someone is "Ayubowan", and the word means Long Life.

Sri Lanka’s health indicators were not very different from much of South Asia’s in the 1920s, until our health reforms in the thirties, when we established primary health units called Medical Officer of Health Areas. Our success in universal coverage for Maternal & Child Health can be attributed to the health service organization that we had put in place over the years.

Sri Lankan health system has often been acclaimed for its coverage and efficiency. We are of course pleased that our conventional health indicators are at par with many of the developed countries, and that our country has already eradicated Malaria, Filariasis and Neonatal Tetanus, has near universal institutional delivery coverage, with skilled attendance at delivery, and vaccination. In addition, the literacy rate is above 95% for both sexes and life expectancy has risen to nearly 75 years.
You are no doubt aware that our pro-equity strategies in development played a major role in improving the health outcomes and has enabled us to achieve these impressive health indicators. Sri Lanka had Universal adult franchise since the nineteen thirties, a Free education policy for both males and females has been in place since the forties, and a free health policy since the early fifties. These have greatly facilitated the impressive health gains at national level.

Sri Lanka has a state funded and run health care system providing health care, free of charge at the point of delivery, to each and every citizen. The health budget is funded by the public sector, has a pro-poor health service that facilitates access to lower socio-economic strata of society.

With a wide network of facilities ranging from basic Primary Medical Care Units to advanced and specialized Teaching Hospitals, and public health units, the Government provides a comprehensive package of services to the population.

In spite of this situation, patients, especially those in the private sector, have to bear significant out of pocket expenditures until recently due to the relatively high cost of drugs. To address this situation we have taken action to reduce the price of essential, mostly used drugs, most by 40-100% and some even by 300%.
This is a big relief for patients, especially those getting treatment from private health providers. We have also lifted the price ceiling on cancer drugs to be provided free at the government facilities. Now the patients get best of medication, often very costly, free of charge at government facilities. We have also extended similar benefits towards eye care, providing quality eye lenses to patients free of charge. Similar packages have been introduced for expensive, urgently needed cardio-thoracic care, including cardiac stents. The process, which has already started, is still being fine-tuned and hope it will be fully operational by 2020.

Dr. Tedros you are no doubt pleased to hear that we have been able to provide good health at low cost to our population. But now we are being challenged by a dual challenge – NCDs that now account for more than 75% of the disease burden in terms of mortality and morbidity and a rapidly ageing population with demands for care of the elderly, including good palliative care. As such, the primary health care system needs to adjust to address these two (epidemiologic and demographic) transitions.

We are addressing the NCD epidemic from different fronts, based on the Best Buys of the WHO. For example we have strict policies related to tobacco use with 80% pictorial health warnings, a high level of taxation and a wide range of clean air laws. We have
introduced a traffic light system for sweetened beverages, opened up spaces for physical activity and for engaging in a healthy life style. All of this is backed up by education and communication support.

Our country is still in the process of peacebuilding and reconciliation following the 3 decade conflict. The 2004 Tsunami devastated 2/3rds of the coastal areas and the total human toll and material damage was colossal. The country is now better prepared for disasters and is more resilient. However, we continue to face the adverse impacts of climate change and need to further strengthen our preparedness and response capacity.

Access to timely data and information, and its use for decision-making, needs to be strengthened further to improve the efficiency and effectiveness of our health system. Also Human resources need to be realigned to the increasing and changing health care needs.

While UHC has been around for decades with free health care paid for by the state, overall out of pocket spending needs to be further reduced and access and coverage also need to be made truly universal.
In reorienting our health system to continue to provide UHC as the way forward, we are now further strengthening primary health care. We are making use of the primary level curative health institutions to move towards a state led system of family doctors accountable for smaller populations - "A Family doctor for All" where a trained family physician will be responsible for a population of around 5000 is our aim. We will have an 'Essential Service Package' that will be delivered in close cooperation with the community.

Dr. Tedros, we are extremely happy that we continue to have a strong, seamless partnership with the WHO that has delivered on many successful ventures. We are witnessing that WHO’s engagement in SRL is evolving to more upstream catalytic work to address the SDG agenda and to prepare our health system to the emerging challenges posed by the double transitions.

We also believe that Sri Lanka has a lot to share and to add to the global knowledge. At the same time we need to learn from other countries that have succeeded in areas where we are still lagging – like further reduction in the already low maternal and neonatal mortality; sustainable health financing and protecting equity and social justice amidst rapid economic growth; and of course achieving UHC for all. We also look forward to WHO’s
support in strengthening our capacity for global health diplomacy.

Dr. Tedros, we know that you are respected as a visionary leader who guided your own country Ethiopia and also numerous global health organizations to achieve game-changing results that have had great impact. Your diplomacy and solutions-oriented approach to global health that you bring to the WHO are already being recognized worldwide.

As a member of the Executive Board, Sri Lanka now has the opportunity to share and to contribute to the inclusive health agenda that you have proposed and has been so well received at the global level. Today more than ever the world needs a strong WHO as we face unprecedented threats to health— from pandemics, from emerging anti-microbial resistance, to climate change etc. We need a strong and effective World Health Organization with a farsighted leader and we have intense faith that you will lead the WHO and thereby the entire world community to achieve effective Universal Health Coverage.

Finally and Once again, Dr. Tedros, a very warm welcome to you from His Excellency, the Hon Prime Minister and each and every citizen of Sri Lanka. We hope you will have a very short but pleasant stay in our country.

Thank you very much.