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Commentary: The future of the WHO: A call for leadership from Latin America and the Caribbean

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By Beatriz Champagne, PhD

In May, Latin American governments and our colleagues in the Caribbean Community (CARICOM) region will have a unique opportunity to participate in how healthcare will be governed for the next five years, when we, and member states across the globe, elect the next director-general of the World Health Organization (WHO). Who we select will potentially have an impact on not just disease, or systems, but human and planetary health for decades to come.



Dr Beatriz Champagne, PhD, is Executive Director of InterAmerican Heart Foundation

The next WHO leader will need to use a combination of diplomacy and determination to bring together the world at a time of unprecedented challenges to health, including pandemics, deteriorating finances, a burden of noncommunicable diseases that is already under-funded and unmanageable, new challenges associated with climate change, and a profound transformation in how multilateral institutions and agreements are managed, and the role they will play in the future.

These challenges are matched only by unparalleled opportunities – the role of technology in changing “ownership” of health from the professional to the patient and consumer, new models of collaboration and mutual accountability across sectors, the promise of health in all policies including within many elements of the Sustainable Development Goals (SDGs).

For Latin America, we need a leader who understands the dual nature of our health challenges – emerging issues including Zika as well as yellow fever, complex challenges associated with NCDs, populations with both under- and over-nutrition, tobacco successes being threatened by waning political will to implement agreed measures, and drivers including inequity and climate change.

One lesson of tobacco control, where I have focused much of my work as executive director of the Interamerican Heart Foundation, is that the world’s biggest health challenges require working outside of the health sector, both on the prevention side and in “treating” disease by addressing underlying causes including urban planning and access to food.

The specifics of this election are unique: for the first time, all 194 member states of the WHO will vote directly for a director-general, and we are fortunate that the competition has been a transparent and robust one, with three strong finalists. I have thought carefully about this, and believe there is one person who can take us forward where we need to go, through a combination of technical expertise, first person experience on the front lines in health and at the highest levels of national policy, and the tenacity to lead reform: Pakistani cardiologist and global public health leader Dr Sania Nishtar.

We in the global health community have been fortunate to work with her for close to three decades, in her role as a NCD leader, a champion of civil society, and a catalyst for reform in Pakistan that demonstrates her fearlessness and courage in making long needed change. Her vision for WHO is one in which, in her words “WHO reclaims its primacy and earns the world’s trust as its lead health agency, and can foster and sustain partnerships to achieve the vision for health -- universal attainment of the highest possible level of health and well-being.”

Sania’s vision is one that acknowledges that the most pressing problems we face here in Latin America and the Caribbean and across the globe -- NCDs, pandemics, climate related health, the ongoing challenges of infectious disease including HIV/AIDs and new threats such as Ebola and Zika – require a WHO that is strong, effective, and fit for purpose.

Her vision includes a commitment to transparency and accountability, country-relevant support to achieve the SDG,

strengthened action on global public goods including health norms and standards, reform of WHO and a culture of partnerships and new models for financing. The openness and transparency of her campaign reflects her values, and I also had the privilege of witnessing her effective and fair leadership when she co-chaired the WHO Commission on Ending Childhood Obesity; in typical fashion she used her leadership skills and expertise to expand the scope of the commission and ensure that its impact will be crucial to obesity policy for years to come.

The importance of our region in the global health community cannot be overstated. The Pan American Health Organization or PAHO was the first regional health organization, even before WHO itself was fully formed, and the PAHO/WHO approach is seen as one of the best examples of regional leadership and coordination and it is critical those lessons are shared globally. Sania is cognizant of the special status of PAHO and will continue to respect it.

Last week, the *Economist* called for Latin America and the Caribbean to finally deliver on the promise made for five decades – regional integration and a joined-up approach, including around health. As a group of countries with great challenges and far greater promise, let us come together to show the world our support for the best possible candidate and the best possible WHO. Through a shared approach and support for the right candidate, we can ensure that Latin America and the Caribbean deliver on our promise of attainment of the best possible health for all, and serve as a shining example for others.

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