
WHO Director-General's Keynote Speech at 148th Inter-Parliamentary Union Plenary



The Honourable Tulia Ackson, President of the IPU,

Secretary General Martin Chungong,

Excellencies, Honourable Members of Parliament,

Dear colleagues and friends,

It is an honour and a pleasure to join you today.

As a former Ethiopian parliamentarian and minister myself, I have seen first-hand the power of parliaments to enact the laws, regulations and budgets that make a real difference to the people we all serve.

By the way, every time I join you I feel nostalgic as a former parliamentarian.

Almost 76 years ago, in 1948, the nations of the world converged on a seminal instrument of international law that has made a huge difference to global health: the Constitution of the World Health Organization.

The WHO Constitution was the first legally-binding document to affirm the right to health for all people, without distinction – an end in itself.

But it goes further, by saying health is fundamental to achieving peace and security.

The authors of the WHO Constitution recognised the intimate link between health and peace; a link that remains more relevant than ever in our troubled world today.

Of course, neither health nor peace can be achieved by any single country or agency alone. It requires strong partnerships, like the one WHO has with the IPU.

WHO values enormously its partnership with the IPU, which we see as key for translating political commitments and policies into action to advance the right to health, and the foundations of peace.

In 2018, WHO and IPU signed a Memorandum of Understanding that committed us to work together on several key issues, including universal

© For personal and private use only. Reproduction must be permitted by the copyright holder. Email to copyright@mindbyte.eu.

health coverage, global health security, and the health of women, children and adolescents.

The following year, the IPU Assembly adopted a resolution on achieving universal health coverage by 2030, in Belgrade.

Together, we have developed several tools, including handbooks on UHC and global health security, and an online course on the use of taxes.

We have also undertaken joint activities to engage parliamentarians in implementing universal health coverage, strengthening global health security and advancing the health of women, children and adolescents.

Based on that experience, it's clear we need to do more.

Today, my friend Martin and I will sign a new Memorandum of Understanding to renew the collaboration between our organizations for the next 5 years.

This agreement commits us to working together in four priority areas:

Universal health coverage; global health security; health promotion; and reducing health inequities, especially in relation to sexual and reproductive health and rights.

These priority areas are critical for realising the right to health.

We also decided to add three cross-cutting areas of work, including mobilizing parliamentary support for sustainable financing for WHO; the pandemic agreement; and our work on climate change.

In addition, we will establish a joint focus group to address the health of migrants and refugees.

===

As you are all aware, this is a big year for parliaments, with elections in 72 nations.

And it is a big year for global health.

At the World Health Assembly, which starts in just nine weeks' time, WHO Member States are scheduled to consider a new, legally-binding agreement on pandemic prevention, preparedness and response.

We cannot forget the painful lessons the pandemic taught us, and the scars it left.

More than 7 million people lost their lives to COVID-19, and those are just the reported deaths. We know the true number is much higher. The pandemic also caused, as you know, significant social, economic and political upheaval.

The key issue now is whether we will learn the lessons the pandemic has taught us, so we don't repeat them next time.

And there will be a next time. The next pandemic is a matter of when, not if.

The pandemic agreement aims to address the gaps and challenges all countries faced, and to ensure we are better prepared for future pandemics.

This new agreement would be an instrument of international law, similar to the many other accords and treaties that nations have agreed: the
© For personal and private use only. Reproduction must be permitted by the copyright holder. Email to copyright@mindbyte.eu.

Geneva Conventions; the Nuclear Non-Proliferation Treaty; the Paris Agreement on climate change; and so on.

However, there are currently two major obstacles to meeting that deadline of approving the pandemic agreement.

The first is a group of issues on which countries have not yet reached consensus.

They're making progress, but there are still areas of difference that need further negotiation.

None of them are insurmountable. If countries listen to each other's concerns, I am confident they can find common ground and a common approach.

The second major barrier is the litany of lies and conspiracy theories about the agreement:

That it's a power grab by WHO that will cede national sovereignty to WHO and give it the power to impose lockdowns or vaccine mandates on countries.

Unfortunately, some of these lies have been spread even by members of parliament, and in some cases by heads of government.

Let me be clear: these claims are utterly, completely, categorically false.

This agreement is being written by countries, for countries, and will be implemented by countries, in accordance with their own national laws.

The pandemic agreement will not give WHO any power to dictate policy to any country.

In fact, it says exactly the opposite. Let me read to you Article 24, paragraph 3 of the negotiating text of the pandemic agreement:

"Nothing in the WHO Pandemic Agreement shall be interpreted as providing the WHO Secretariat, including the WHO Director-General, any authority to direct, order, alter or otherwise prescribe the domestic laws or policies of any Party, or to mandate or otherwise impose any requirements that Parties take specific actions, such as ban or accept travellers, impose vaccination mandates or therapeutic or diagnostic measures, or implement lockdowns."

Colleagues, as a former parliamentarian, I find it difficult to understand how elected officials could mislead the people they are supposed to serve on this issue – either knowingly or unknowingly.

If unknowingly, it's negligent not to be properly informed.

If knowingly, it's a deliberate deception that puts at risk the health of future generations, and the social and economic stability of nations, for some short-term political goal.

We urge parliaments to be aware of these issues and to support the ongoing negotiations.

The pandemic agreement is the cornerstone of a new, stronger architecture for global health security that WHO and our Member States are building.

This includes key actions for stronger governance, stronger financing, stronger systems and tools, and a stronger WHO.

===

Excellencies, dear colleagues and friends, let me leave you with just two requests:

First, we seek your support for the finalization of the pandemic agreement and, pending its approval, its ratification and implementation.

And second, we seek your support for action on the priority areas we have identified in the MoU that Martin and I will sign in a few moments: universal health coverage; health security; health promotion; and addressing inequalities.

My thanks once again to my brother Martin, and to all of you, for your support for WHO, and for global health.

WHO remains committed to supporting every country, and every parliament, with the evidence, science and technical support you need to make the right to health not just a slogan, but a reality for your people

I thank you.

Source & Image Credit: [WHO](#)

Published on : Mon, 25 Mar 2024