



**South Centre Statement at the
Meeting of the Non-Aligned Movement (NAM) Health Ministers**

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72nd World Health Assembly
Geneva, 21 May 2019

The South Centre is the intergovernmental organization created by the countries of the South to promote the collaboration and solidarity of developing countries towards common objectives. As the World Health Organization (WHO) is presided over today by Dr. Tedros, the Board of the South Centre is also today privileged to be presided over by one of the leaders of contemporary Africa and the struggle against apartheid, the former president of South Africa, Thabo Mbeki.

In their efforts for universal access to health, the countries of the Non-Aligned Movement have many things in common amidst the diversity that characterizes our countries. It is essential to seek what unites us to strengthen our capacity for action in a world where health problems have no borders.

But at the same time, health solutions, such as access to medicines, do have borders, such as those that frequently create the abusive practices of those who dominate the supply of essential medicines.

Health as a fundamental human right means that access to health services is an obligation of States and of the international community as a whole. The affirmation of this fundamental right requires collective efforts, and a strong condemnation of unilateral and coercive measures that affect the capacity of developing countries to meet the public health demands of their peoples.

The WHO is a key actor in addressing public health problems at the global level. The realities and needs of developing countries should receive special attention in their work. It is disappointing, for example, that WHO has abandoned the search for an alternative to the current model of drug research and development. This is despite the fact that this model, focused on commercial interests, is incapable of responding to the public health needs of developing countries.

Public health is influenced by many economic and social factors; it is not just a medical issue. WHO cannot ignore, in particular, the impact of trade rules. They affect income levels, the environment, the regulatory space of countries, access to medicines. Frequently, developing countries suffer pressures based on trade rules that directly affect their ability to ensure access to health, as in the case of regulations on biosimilar products or when it is necessary to use the flexibilities of the Agreement on Trade-related Aspects of Intellectual Property Rights (TRIPS) of the World Trade Organization.

The WHO should address these problems, including through the effective implementation of the apparently forgotten Global Strategy and Plan of Action on Public Health, Innovation and Intellectual Property.

One of the greatest challenges WHO is currently facing in addressing the general interests of developing countries is how to preserve the public, multilateral and independent nature of the organization.

More than 80% of its budget is currently in the hands of a group of voluntary donors constituted by a small number of industrialized countries and philanthropic foundations of those countries.

Private public partnerships can help solve some of the global problems. But it is worrisome that the specialized agencies of the United Nations System depend more and more on voluntary contributions that determine the priorities and the activities that are carried out.

It is imperative to define clear criteria in terms of financing for the system as a whole, including limits on voluntary contributions that preserve the multilateral and democratic nature of the agencies and above all, ensure that United Nations agencies can contribute to achieving the Sustainable Development Goals defined in the 2030 Agenda.

Article 19 of the WHO Constitution on the adoption of binding standards has been used only once in the history of the organization. This resulted in an instrument of enormous importance, the Framework Convention on Tobacco Control, signed by 168 countries.

This agreement enabled a normative approach to the problem of smoking. It not only allows but also encourages the contracting parties to adopt measures through laws and decrees approved by the parliaments or competent national authorities. This is undoubtedly one of the greatest achievements of WHO in its entire history.

WHO's current work, however, focuses on the development of voluntary recommendations. They, in many cases, influence public policies, but do not create rights and obligations. They lack the necessary strength to implement public health policies of global interest. Why, then, not use the successful example of the Convention on tobacco to evolve towards a new organizational model?

These are just some of the issues that need to be addressed in order for WHO to respond to the demands of our countries.

The South Centre reiterates once again its commitment to support the NAM countries so that there is close and effective cooperation among developing countries to strengthen a global health agenda.

The Centre conducts research from the perspective of development, including in the area of public health policies, supports developing countries in various international negotiations and provides technical assistance.

Currently the Centre has, in particular, a vast support program for the formulation of intellectual property rules that, using the flexibilities of international law, are consistent with public health policies. We invite you to participate in this program.

The South Centre will give priority to the research and generation of ideas and proposals to consolidate a strong, independent and public international agency for health capable of effectively addressing the public health problems facing developing countries.