

**Address by the Director-General
Regional Committee of the WHO South-East Asia Region
6 September 2021**

Your Excellency Mr Umesh Shrestha, Honourable State Minister for Health and Population of the Federal Democratic Republic of Nepal, and Chair of the Regional Committee,

Honourable Ministers and Heads of Delegation,
Regional Director, Dr Poonam Khetrapal Singh,
Dear colleagues and friends,
Subha diumṣō.

It's a great honour to be with you again.

Once again, I would like to thank His Excellency Shree Sher Bahadur Deuba, the Right Honourable Prime Minister of Nepal, for hosting this meeting of the Regional Committee, although virtually.

I hope that next year, we can meet in person.

More than 41 million cases of COVID-19 have now been reported from the region, and we have lost more than 646,000 of our brothers and sisters. We know that these numbers are likely to be under-reported.

And of course, the damage from the pandemic is far greater than the disease itself, when we consider the impact on people who could not access overwhelmed hospitals, or have suffered the economic and mental health effects of emergency measures.

I am pleased to see that cases and deaths in the region have been declining over the last month, although I know some of your countries are now facing steep increases.

More than 845 million vaccine doses have now been administered in the South East Asian region. This represents 16 percent of all vaccines administered globally, even though your region accounts for 26 percent of the global population.

WHO's global targets are to support every country to vaccinate at least 10% of its population by the end of this month, at least 40% by the end of this year, and 70% of the world's population by the middle of next year.

WHO and our partners are doing everything we can to find ways of scaling up the production and distribution of vaccines as much as possible, as fast as possible.

More than 49 million doses have been distributed to eight SEARO countries through COVAX, and we're pleased to see that COVAX is picking up speed.

Between now and the end of the year, COVAX aims to deliver more than 500 million doses to SEARO countries. That makes it crucial that all countries step up their preparations to roll out vaccines.

The vaccine crisis illustrates the fundamental weakness at the root of the pandemic: the lack of global solidarity and sharing – sharing of information and data, biological samples, resources, technology and tools.

That's why there is now an emerging global consensus for the idea of an international treaty or other legal instrument, to provide the basis for improved international cooperation to prepare for, detect and respond to epidemics and pandemics.

At the World Health Assembly in May, Member States agreed to discuss this idea at a Special Session of the Assembly in November.

We seek the support of all SEARO Member States for this very important initiative.

WHO also remains committed to further scientific studies to understand the origins of the COVID-19 pandemic.

Recently, we announced our proposal for a permanent International Scientific Advisory Group for Origins of Novel Pathogens, or SAGO, to establish a more systematic way of identifying the source of new outbreaks.

Two weeks ago, we shared the draft terms of reference with Member States, and we have now issued an open call for experts to join SAGO. We urge experts from South-East Asia to apply.

I wish to emphasise that SAGO is not only about the next phase of studies into the origins of SARS-CoV-2; it's a long-term initiative to support studies into the origins of all future emerging pathogens.

And even while we respond to the pandemic, it's critically important that routine immunization and other essential health services are restored as quickly as possible.

Last year, millions of children missed out on vaccines against preventable diseases because of disruptions to essential health services.

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Excellencies,

As always, your agenda this week reflects the wide range of challenges you face as a region, including oral health, eye care, immunization, viral hepatitis, HIV and STIs, school health, access to medicines, vital statistics, patient safety and more.

You will also be discussing the challenges facing our organization, including the challenge of sustainable financing.

The pandemic has shown that the world needs an empowered and sustainably financed WHO at the centre of the global health architecture.

WHO has a unique global mandate, unique global reach and unique global legitimacy. We should avoid the creation of competing institutions and structures.

But a strong WHO demands that we face up to the longstanding challenge of sustainable financing.

Currently, only 16% of our funds come through assessed contributions. Adjusted for inflation, our assessed contributions today are 340 million US dollars less than they were in 1980.

More than 80% of our funds are voluntary, and most of that is earmarked.

This imbalance effectively makes WHO a contractor for donors and means we cannot do the long-term programming at the country level that the biggest health challenges require.

It also means we have an over-reliance on consultants and temporary contracts, which destabilizes our workforce and makes it difficult for us to train and retain the experts we need.

The Member State Working Group on Sustainable Finance will make its recommendations to the Executive Board in January.

You have a historic opportunity to put WHO's finances on a new track and I urge you to seize it.

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Excellencies,

WHO is committed to supporting each of your countries to respond to the pandemic, and to build forward better.

And we will leave no stone unturned in our efforts to dramatically increase the equitable production and distribution of vaccines through COVAX.

I would like to leave you with four specific requests:

First, we seek your commitment to stay the course with the proven public health and social measures that we know work. We can work with you to tailor these measures to your context.

Not vaccines alone, not masks alone, not distancing or hand hygiene or ventilation alone. Let's do it all.

Second, we urge you to invest in local production of vaccines and other health products, as part of your investment in pandemic preparedness and response.

Third, we seek your support for the idea of a treaty or other international instrument on pandemic preparedness and response.

And fourth, we seek your support for building a stronger WHO that is empowered and financed sustainably.

Thank you all once again for your hard work and support for WHO at this critical time.

And we look forward to your continued support as we work together to promote health, keep the world safe and serve the vulnerable.

I thank you. Dhanyabad.

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