

Summary of the Inaugural Session

Dr. Uton Muchtar Rafei, Regional Director for South East Asia Region of the World Health Organization, **expressed that health is a fundamental right and that this right can be used as an opportunity to strengthen development efforts. He advised equity in health should be ensured, while harnessing the remarkable breakthroughs in health technology.**

The worldwide need to improve health, at a time of cost-containment, required a Public Health perspective. Public Health aims to develop health systems to deliver appropriate and holistic health to the population. Dr. Rafei visualized it as the process of mobilizing local, state, national and international resources to ensure the condition and facilities for healthy living. He hoped that the Conference would re-emphasize the need for governments and the people to promote Public Health as a discipline, to strengthen Public Health practice, and to develop strong Public Health education and research institutions.

In his remarks, **Dr. S. P. Agarwal, Director General of Health Services, Government of India** drew attention to the many milestones in India's health progress. The Infant Mortality Rate declined from 146 per 1,000 live-births in 1951 to 72 in 1997, the under-five mortality dropped from 236 per 1,000 in 1951 to 111 during the same period. Life expectancy increased from 36 years in 1951 to 62 in 1997. Child mortality rate declined from 236 per 1000 in 1951 to 115 in 1997. Incidence of Iodine Deficiency Disorders declined due to the universal salt iodization program. Guinea-worm eradication awaited certification.

Dr. Agarwal reviewed the progress made by India in controlling various communicable diseases, such as malaria, kala-azar, TB, Leprosy, AIDS/HIV infection, acute respiratory infections, diarrheal dis-

eases and viral hepatitis. He expressed an urgent need to develop a strong communicable disease surveillance system with laboratory support for monitoring diseases, detecting diseases in the early stages, responding immediately, and containing diseases. Dr. Agarwal drew attention to the emerging health problems of non-communicable diseases and conditions, such as cardiovascular diseases and tobacco use. Commenting on health consequences of natural disasters, he detailed the medical rehabilitation measures initiated for the population hit by the cyclone in Orissa in October, 1999.

Dr. Agarwal highlighted the need for adopting a multi-sectoral approach involving science and technology, information technology, and agriculture, as well as other fields. According to Dr. Agarwal, only through an inter-professional and inter-agency approach can we achieve the agenda we are setting for ourselves for health promotion and disease prevention.

Mr. Javed A. Chowdhury, Secretary (Health) to the Government of India in the Ministry of Health and Family Welfare stated that the rise in communicable and non-communicable diseases in the developing world is due to the gross neglect in practice of Public Health and hygiene by government and public alike. According to Mr. Chowdhury, while smallpox has been successfully eradicated, and some success achieved in controlling malaria, progress in other areas has not been as expected.

Mr. Chowdhury expressed concern at the resurgence of TB and the delay in eliminating leprosy. Newly emerging diseases like HIV infection are also posing a formidable challenge. Stroke, cardiovascular diseases and cancer are putting tremendous pressure on the health care delivery system, which also has to cope with old problems like

cholera, diarrheal diseases and Sexually Transmitted Diseases. According to Mr. Chowdhury, Public Health needs to take center stage, and we need to commit ourselves to implementing Public Health programs for the prevention and control of communicable and non-communicable diseases.

Mr. Chowdhury stated that the Government of India has been successful in mobilizing adequate funds from international agencies. In the allocation of Rs 30 billion made for health in the Ninth 5-year Plan, Rs 18 billion was from external funding. The results are beginning to show. Nine million cataract operations have been performed reducing the earlier backlog of 11 million. Leprosy has reached near elimination levels, except in five states where it is still endemic. Intensified efforts are occurring to reduce its prevalence to less than 1 in 10,000 by the year 2004.

Mr. N.T. Shanmugham, Honorable Minister of State for Health and Family Welfare, Government of India expressed satisfaction at the progress made in the field of health in India over the last five decades. The Technology Mission has allowed safe drinking water to be provided more quickly, reducing incidences of diarrheal diseases. Sanitary latrines are being increasingly used in rural areas. He felt that with minimum investment in primary health care activities, freedom from epidemic outbreaks can be ensured. He mentioned that India had a triple burden of disease. Apart from old diseases like malaria, there were new diseases like HIV infection/AIDS, viral hepatitis C and E, and new strains of cholera; India is also confronted with cardiovascular diseases, hypertension, diabetes mellitus and cancer.

Stressing the need for international cooperation, Mr. Shanmugham stated that health and disease have no political or geographic boundaries. He cited the instance of common border strategies evolved and implemented for malaria control. There was need for similar co-operation and collaborative efforts to establish an equitable global health order. He commended the role of the World Health Organization in this endeavor, especially in areas of health policy and the development of laboratory norms. He expressed India's readiness to share its wealth of experience in primary health care and promotion of health of under-privileged.

While the priority areas for the region have already been identified, he hoped that the deliberations and the Calcutta Declaration would provide the 'launch pad' for the South East Asian countries with WHO's technical support.

Mr. Justice Shyamal Kumar Sen, Honorable Governor of West Bengal, India, stressed the pivotal role of Public Health in health and socio-economic development. With the ongoing rapid globalization and increased market pressures, Public Health concerns need our immediate attention. Justice Sen stressed the need to close gaps and inadequacies, and place health at the center of development as outlined in the Declaration of Health.

There was an urgent need to revise priority areas in health to ensure quality health care for all. Drawing attention to population issues, Justice Sen stated that South East Asia had one-fourth of the global population and one half of the world's poor. The region's population was expected to reach 1.5 billion. Other issues like pollution, waste management, violence and accidents are also posing serious health risks. According to Justice Sen, with the large influx of population into urban areas, the local governments needed to take adequate steps for sanitation and health. Gender inequalities and related issues, like women being victims of domestic violence and not having freedom of choice, are also matters of concern. Inappropriate prescribing practices have resulted in a rise of multi-drug resistance and adverse drug reactions. There was an increase in problems associated with old age, disabilities, alcohol and drug abuse, and suicides. Heart diseases and cancer had placed additional pressure on hospitals for long time care.

According to Justice Sen, partnerships with other governmental and non-governmental agencies (including voluntary organizations) were essential for improving Public Health.

Dr. Indira Chakravarty, Director-Professor, Dean and Head of Department of Biochemistry and Nutrition, All India Institute of Hygiene and Public Health, Calcutta, offered a vote of thanks.