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Opening Remarks
Ten Years of Transition: Eastern Europe and Eurasia Health Systems Conference
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Good morning, and thank you for the kind introduction. On behalf of the U.S. Agency for International Development (USAID), I would like to welcome you all to this important conference on health systems in Europe and Eurasia.

We are fortunate to have a very distinguished group of professionals here today, and I would like to thank the conference planning committee for all the work they have done in preparation.

This is quite an impressive and diverse gathering. We expect over 700 participants from 37 countries. Present here today are ministers and deputy ministers of health; heads of parliamentary health committees; governors, mayors, rectors and deans of schools of health professions for medicine, nursing, and public health; heads of new health professional associations, and heads of NGOs that are playing new important roles in the region. Also here are ambassadors and their senior staff from embassies, representatives of implementing partners in the region, and American International Health Alliance partners representing major hospitals, health systems and schools of health professionals. USAID also welcomes journalists from Europe and Eurasia that have joined us, as well as those from other countries. We hope many of you among our participants will get a chance to meet with them. We have ambitious goals for the conference and we certainly have the talent here to attain them.

This conference comes at a very challenging time for all of us. For ten years, your countries have struggled to adjust to the demands of the post-Cold War era. The change was very necessary, but it has been difficult. Many of the ties that had bound your countries together have been discarded and it has taken time to develop newer, more efficient ones.

Now, new challenges are emerging in the health sector -- HIV/AIDS, tuberculosis, declining birth rates and decreasing life spans. While conditions vary from country to country, demand for better services and new technologies, medicines, and treatments continue to increase. The good news is that medical science is making new discoveries, improving diagnostic tools and devising new treatments with a speed unmatched at any time in history. The bad news is that all of this costs money. Even countries as wealthy as the United States are struggling with many of these same challenges.

Health issues have become a major concern to the American people over the past decade. Debate over the quality of health care, the cost of pharmaceuticals, and how to provide medical insurance for the millions of uninsured Americans is a prominent feature of our political landscape. Indeed, an interesting phenomenon of this global era is the extent to which the health system has become an important political issue in almost every country in the world. So, to a significant extent, the approaches our countries take in health services have major political, social, and medical consequences.

The importance of health care to a country's development should be very clear to all of us. As President Bush said this past March, "Successful development requires citizens who are literate, who are healthy, and prepared and able to work... Healthy and educated citizens are the agents of development."

It is precisely because of this that President Bush has instructed us to monitor our development assistance programs carefully. So we are looking very closely at our own procedures as well as those that our partner countries put in place. Resources for development are limited and we must be concerned about effectiveness of the activities we support. Also, corruption and a lack of transparency cannot be tolerated. Countries that make serious commitments to invest in the health and well-being of their people can be sure of our continued cooperation.

An important new initiative we are pursuing, one which is directed at increasing resources available for development, is directed at creating partnerships with the private sector. Many companies, foundations, universities, and private voluntary organizations have considerable expertise in health issues and are interested in putting their resources and experience to work. An excellent example of this is the GAVI program – the Global Alliance for Vaccines and Immunizations. GAVI is receiving support from USAID, international organizations, government agencies and many companies, but, GAVI’s real strength comes from the Gates Foundation, an American Foundation, which has contributed more than \$750 million to ensure that millions of children who need vaccines and immunizations get them. So, increasingly we see an important role for USAID in helping put these combinations of public and private funds and expertise together.

Over the next three days you will be analyzing what has happened in your health sectors over the past ten years, discussing what has worked and what has not. To guide you, the organizers have divided the issues into five categories. They are:

- Facing the Challenges of Health Care Financing;
- Improving the Continuum of Care;
- Improving the Quality of Health Services;
- Mobilizing Citizens and Communities for Better Health; and
- Advancing Public Health.

We will be collecting this information and we will publish it. This should become an excellent resource for us all. Let me encourage you, therefore, to use this conference to good result. Share your experiences, both good and bad, and speak frankly about the issues that matter most to you. We have a great deal to discuss and a great deal to learn from each other.

Now, it is my pleasure to introduce the welcoming remarks of three countries’ Ministries of Health.

Dr. Eve Slater, HHS

First, we will hear from Dr. Eve Slater. She is the Assistant Secretary for Health at the U.S. Department of Health and Human Services. Dr. Slater oversees the U.S. Public Health Service and is the primary advisor to Tommy Thompson the Secretary of Health and Human Services, on all matters pertaining to public health in this country. A former senior vice president of Merck Research Laboratories, she supervised Merck's worldwide medicine and vaccine programs and introduced the drug Crixivan to treat HIV infection. In 1976, she became the first woman to be appointed chief resident in medicine at Massachusetts General Hospital in Boston. She has taught at Harvard Medical School and directed laboratory research funded by the National Institutes of Health and the American Heart Association. Dr. Slater has been a pioneer in HIV/AIDS research and welcoming member of the AIDS Research Advisory Council. Join me in welcoming Dr. Slater. Dr. Slater, the podium is yours.

Dr. Yuri Shevchenko, Minister of Health, Russian Federation

Next is the Minister of Health from the Russian Federation, Dr. Yuri Shevchenko (Shev-CHENK-o). Dr. Shevchenko has had a distinguished career in medicine. A surgeon in the armed forces, he went on to serve at The Kirov Military Academy as a professor of Ambulatory Surgery and later, Chief of Cardiovascular Surgery. In 1992, Dr. Shevchenko was appointed Head of the Russian Military Medical Academy. He also served as Chief Heart Surgeon of St. Petersburg and the Leningrad Region. Dr. Shevchenko is author of more than 360 research works and is a member of numerous professional and honorary societies, including Vice President of Russia's Academy of Natural Sciences. Among the many awards and honors he holds is an Honorary Doctor of the All-Russian Scientific Surgery Center at the Russian Academy of Medical Sciences. He has served as the Russian Minister of Health since 1999. Mr. Minister, the podium is yours.

Dr. Radu Deac, State Secretary, Ministry of Health and Family, Romania

Our final welcoming remarks are from, Dr. Radu Deac, the State Secretary of the Romanian Ministry of Health and Family. Prior to his appointment, Dr. Deac was a senior heart surgeon and chief of Cardiovascular Surgery at the Targu Mures Clinical Hospital. He was also Director of the Mures Heart Center and the Regional Cardiac Transplant Center, both of which were established in partnership with the Humana Foundation through a USAID-funded partnership with the American International Health Alliance. He has worked as a Visiting Professor at Boston Children's Hospital, the University of Pennsylvania Hospital, the Minneapolis Heart Institute, and participated in an exchange at the University of Louisville Heart Center. Dr. Deac is well-known in Romania as a leading advocate for health finance reform in Romanian hospitals. Today, he is representing Romania's Minister of Health, Daniela Bartos. State Secretary, the podium is yours.