



## PRESS RELEASE

### **Health CS delivers Kenya's 2030 Health Agenda to the 70<sup>th</sup> World Health Assembly**

**Geneva, Switzerland, May 23, 2017** – Kenya has made significant investment in domestic and external resources in disease control, maternal and child health, and primary health care programmes.

The Government's resource mobilization efforts have yielded close to 120 million U.S Dollars annually as additional funding from the government budget and external resources, with over 80% of the resources being channelled to support primary health care, free maternity programme, medical Equipment Leasing Service and health insurance subsidies for the poor, older persons and people with severe disabilities.

In addition to this, the Ministry of Health, in partnership with the UN and Private Sector, have launched an SDG Partnership Platform to mobilize additional 2 billion U.S dollars from the private sector to drive universal health coverage by strengthening primary healthcare services, said the Cabinet Secretary for Health, Dr. Cleopa Mailu during the 70<sup>th</sup> plenary session of the 70<sup>th</sup> World Health Assembly on Monday.

He noted that “As the country moves towards the attainment of Universal Health Coverage (UHC), the Ministry of Health will intensify efforts to address the health needs of the poor, inequities in health, health promotion and pay greater attention on quality of health care services. Adding as a country we contend with a huge burden of communicable diseases, and a growing burden of non-communicable diseases such as high blood pressure, diabetes and cancers, as well as injuries and violence and domestic violence against women and children.”

The CS highlighted significant progress Kenya has made in improving the health status and socio-economic well-being of the Kenyan population as demonstrated by the gradual improvement in life expectancy at birth from a low of about 52 years in the year 2000 to the current 62 years.

He thanked the outgoing Director General, Dr. Margaret Chan for her years of services and excellent leadership at the helm of the World Health Organisation.

In her final address to the World Health Assembly as Director-General, Dr Margaret Chan told the delegates to continue to shape the future of WHO and called on the Health Assembly to make “reducing inequalities” a guiding ethical principle.

She said, "WHO stands for fairness. Countries should also work to improve collection of health data and make health strategies more accountable. Protecting scientific evidence should form "the bedrock of policy", said Dr Chan, citing vaccine refusal as one of the reasons that the "tremendous potential of vaccines is not yet fully realized."

She stressed the importance of continued innovation, citing the research partnership between WHO and others, to produce effective and highly affordable meningitis A vaccine that has transformed the lives of millions of people in Africa. “Meeting the ambitious targets in the Sustainable Development Goals depends on innovation,” she said.

She urged governments and partners to safeguard WHO’s integrity in all stakeholder engagements. "The Framework for engagement with non-state actors is a prime instrument for doing so, and to listen to civil society. Civil society organizations are best placed to hold governments and businesses, like the tobacco, food and alcohol industries, accountable. They are the ones who can give the people who suffer the most a face and a voice."

Dr Chan also urged the government representatives to "Remember the people...Behind every number is a person who defines our common humanity and deserves our compassion, especially when suffering or premature death can be prevented."

On Monday May 22, the Kenyan delegation participated in a side event on the International Health Regulations and the Impact of the Global Health Security Agenda: Achieving Results and Sustaining Progress.

During the meeting, Kenya was applauded for participating in the 11<sup>th</sup> Joint External Evaluation (JEE) in the WHO African Region which was facilitated by external experts drawn from WHO, US-CDC, Public Health England and the Food and Agriculture Organisation.

The evaluation report identified the following key best practices and strengths within our existing IHR framework; Utilization of a One health approach; Existence of an Emergency Operations Centre; Strong political commitment; Skilled personnel and supportive infrastructure to conduct all 10 WHO core tests for human and animal health; existence of a National Food Safety Coordination Committee and Biosafety Act which address genetically modified organisms and presence of a multi-sectoral National Disaster Management Unit leading to better coordination and improved response.

The Ministry of Health intends to disseminate the evaluation report to all stakeholders by June 2017 in addition to setting up an IHR coordination platform to mobilize financial and technical support to monitor IHR implementation.

**MINISTRY OF HEALTH**

**23<sup>rd</sup> May 2017**