

**Keynote Address by
H.E. President Ellen Johnson Sirleaf
President of the Republic of Liberia
on
'Universal Health Coverage: Issues, Challenges and Opportunities'
at the 15th Ordinary Session of the Assembly of Health Ministers of
ECOWAS
Monrovia, Liberia
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Today is a historical day in our country, Fast and Prayer Day. It's the day when we commemorate the difficulties faced in our own beginnings of nationhood.

Let me join in welcoming, all of you, our ECOWAS brothers and sisters to Liberia, and wish you a successful session as you deliberate on "Universal Health Coverage: Issues, Challenges and Opportunities," the goal to which all our nations strive to ensure that all of our people obtain quality and affordable health services.

While the Ebola outbreak is probably uppermost in everyone's minds throughout our nation and our sub-region, we remain convinced that our relentless effort that are now underway, our continuation in our aggressive program of containment will enable us to address this problem.

I want to particularly thank many of you - the World Health Organization, West African Health Organization, all of our partners many of you in this room - for all the support and assistance that you have given to our team headed by Dr. [Walter] Gwengale, all of whom have worked so assiduously in keeping our public informed on measures to take and in addressing in those cases where he have had unfortunate victims of the disease. We all strive to continue to do so.

At the same time, we also continue to lay emphasis on achieving our goals and objectives for Universal Health Coverage, as carried in our current Ten-Year Health & Social Welfare Policy and Plan. This is why I applaud all of you for having taken the decision to come to this meeting here in Liberia to give us all the encouragement as we all work together to enhance quality delivery health care to our people.

In our country, we are working to improve the health and social welfare status of our population on an equitable basis in the face of major challenges many of which have been outlined in some notes that Dr. Gwenigale gave me. I will not go through that because, like someone said he speaks frankly, sometimes too frankly, in a way he would be challenging and chastising me on all these inadequacies that exist to enable him carry out his goal.

He has pointed out and we accept inadequate financing for drugs, facility construction, health workers incentives; poor-quality service delivery; financial constraints of the population themselves, especially the poor; unbalanced service provision across counties sometimes in the light of transport difficulties; and unsustainable health financing sometimes as over-reliance on donor funding.

The added challenge that we recognize today is declining contributions from international partners; this is a reality and this is clear that if our country is to achieve Universal Health Coverage, we must go to work to build sustainable health financing system through domestic financing for our health sector.

This will be a daunting task, no doubt, particularly in Liberia where there are multiple needs of a reconstructing country. However, we must get to the task. Achieving Universal Health Coverage takes time and perseverance for it involves accessibility, affordability and quality of service. Our government is endeavoring to realize this through a strong political commitment at all levels, the highest level in our society. At the 63rd World Health Assembly, in Geneva, I stated that people should not have to die simply because they are poor, and we pledged to find mechanisms to continue to allow Liberians to access the health care they need without having to pay up-front fees. This is why, today we want to commend our health team for the health services that are rendered free in all of our rural areas, sometimes not at the quality we want, but certainly expanding in such a way that they know that if they do have some urgent health problem they can go to a health service center and get immediate and urgent care until they can be transferred to facilities that require much more attention.

We realize that free health care is not free; someone has to pay for it. It has to be paid through other forms of taxes; it has to be paid through the mobilization of resources. Therefore, we continue to applaud and to look for

the support that we receive from our partners who have bought in to the programs that we have collectively designed to enable us to move forward.

Consideration is now being given in our country for the establishment of a Liberia Health Equity Fund – a new funding mechanism that we hope will help to pay for health care for all Liberians on an equitable basis, with everyone having access to the same services regardless of where you are, who you are or your financial standing.

We have a current Health Minister working with the former Health Minister, now a Senator, who we also look to do his part in the Legislature as the budget period comes near. We know that we can all count on them.

Once again, I want to say a big thank you to all of you from WAHO, ECOWAS, African Union – all of our regional institutional partners – that have been of so much help to us as we try to respond to the health needs of our population.

To all of you who are participating in this event, let me express on behalf of the Government and people of Liberia our appreciation for your presence, for your participation, for your partnership, and for your continued support.

With this, I now declare the 15th Ordinary Session of the Assembly of Health Ministers of ECOWAS officially opened.

Thank you.