Mr. Chairman, Your Excellencies and Distinguished Delegates:

On behalf of our children of the world, I would like to thank Dr. Anders Nordstrom at his visionary policy address that he would focus his work on maternal and child health in the coming twelve months. We paediatricians applaud your kindness with great appreciation.

Child Health covers the domains of medical, social and education and all children are endowed with rights to access to optimal health by the United Nations Charter for Children’s Rights which promises children with equity and quality healthcare. Equity means equal opportunity, free access and easy availability while quality includes high standard of child health services, competent healthcare professionals and ethical clinical practice. Attainment of these noble goals depends on cardinal principles of evidence-based practice, professional readiness, resource availability, social justice as well as government endorsement and support.

With the advent of advancement of knowledge of paediatrics, betterment of child health services, and availability of high technology in diagnosis and intervention of childhood medical conditions, new pattern of childhood problems also emerges from the former prevalent infective illnesses, hereditary disorders, birth trauma, metabolic and other medical disorders to the present day challenges in mental health, obesity, accident and injury, substances abuse and learning difficulties. Child health professionals should therefore be familiar with these new problems and be ready to accept the challenges in a proactive and effective manner. The pediatrician of today should therefore be well equipped as a quality clinician, child health worker, teacher, health educator and child health advocate ready to take up these new challenges.

Child health problems do greatly vary according to developed and industrialized countries/districts, ethnic groups, cultural differences, educational backgrounds and other parameters. It is imperative that coordination, cooperation and collaboration are essential to maintain quality child health nationally, regionally and globally. International Pediatric Association (IPA) is thus obligatory and ready to shoulder up this noble mission. IPA, comprising 143 National Pediatric Associations, 7 Regional Pediatric Associations, and 12 International Pediatric Specialty Associations and 1 Committee for Pediatric Chairs, represents more than 500,000 individual paediatricians who are
doctors trained in child health and dedicated to the care of children and who are professionals working in many different sectors: private, university, government, NGO, United Nations and other agencies. They represent a vital global infrastructure in child health and are intent on bringing the strengths of our profession to global child health issues in collaboration with WHO, UNICEF, World Bank, and other major organizations. The IPA stands ready to provide expert consultation and assistance in all areas of child health in all countries of the world and is well prepared to mobilize pediatricians regionally and globally to combat new challenges facing child health.

To achieve the goals of equity, IPA together with our partners at international child health strives to fight for the rights of justice and equal opportunity for our children. These have met with great success to date. As for the quality healthcare, IPA created a new programme area on quality care, contributed to the book on Hospital Care for Children (with WHO) and hosted workshops, seminars and congresses to update paediatricians on the cutting edge knowledge of paediatrics and effective provision of child health in the community. We promoted activities for Continuing Medical Education (CME) and Continuous Professional Development (CPD) to ensure high standard of practice at clinical level and launched the “Guidelines on Relations with the Industries” last year and many others in the course of time (including “Global ethical standards and review procedures of human research conducted in children in Developing Countries”, “Training of Pediatricians on Ethical Issues related to clinical practice and research with emphasis in developing countries”, “How Pediatricians can contribute to prevent gender discrimination in meeting the specific needs of children”, “Effect of Religion on Ethical Issues including End of Life Consideration, Generic Counseling, Abortion”, “Limits of Neonatal Survival for Extremely Premature Infants” and “Ethical Issues in Artificial Reproduction” and others) to safeguard ethical professional practice. We also operated programmes including Child Health in Sub-Saharan Africa, Childhood Tuberculosis, Children’s Environmental Health, Child Health in Humanitarian Emergency, Essential Medicines for Children, and Universal Immunization. IPA interest groups also include HIV/AIDS, newborn survival, childhood obesity, accident and injury prevention. These together with our joint effort with WHO, UNICEF, World Bank, FIGO and others in the Global Partnership for Survival of Newborn, Children and Adolescents as well as other international movements all endeavour to reach targets for attainment of the Millennium Development Goals (MDG) which contribute significantly to quality child health. We are confident that with dedicated effort, we will surely be able to provide equity and quality healthcare to our children so as to achieve our ultimate goal of “Healthy Children for Healthy World”!

I appreciate for giving me the opportunity and thank you for your kind attention.

Dr. Chok-wan CHAN, Pediatrician  
IPA Representative  
18th September 2006