

**GOVERNMENT OF INDIA  
HEALTH AND FAMILY WELFARE  
LOK SABHA**

UNSTARRED QUESTION NO:322  
ANSWERED ON:03.12.2003  
CONFERENCE OF SAARC HEALTH MINISTERS  
AJAY SINGH CHAUTALA;V. VETRISSELVAN

**Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:**

- (a) whether the Conference of Health Ministers of SAARC countries had been held recently;
- (b) if so, the details of the issues discussed at the conference;
- (c) the decisions taken at the conference and the steps taken to implement the same; and
- (d) the strategy formulated by SAARC Ministers to meet the situation that is likely to emerge following the introduction of a product patent regime in the drug sector in 2005?

**Answer**

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA)

(a) & (b) Yes sir, the first conference of the Health Ministers of the South Asian Association for Regional Cooperation (SAARC) Countries was held at New Delhi on 14th - 15th November, 2003. Issues related to Traditional Systems of Medicines, Emerging and re-emerging diseases (SARS/HIV/AIDS/TB), Drugs, Pharmaceuticals and Food Certification and Standardization, Population Stabilization and Reproductive Child Health and Immunization were discussed.

(c) As per Annexure-I.

(d) Keeping in view the introduction of product patent regime w.e.f. 1.1.2005, the Member States expressed their readiness to facilitate policy coherence among themselves to maximize opportunities under TRIPS agreement to ensure affordable drugs for public health needs.

**ANNEXURE-I**

The important decisions taken in the first conference of the SAARC Health Ministers held on 14-15th November, 2003 are as follows:-

- i) The Member States agreed to set up a rapid response health deployment system to deal with emerging and reemerging diseases for SAARC Region.
- ii) To set up a networking of malaria institutions within the SAARC Region with National Institute of Communicable Diseases (NICD) being the coordination center on malaria and other vector borne diseases.
- iii) To allocate adequate resource for development of Traditional Systems of Medicine and their mainstreaming in national health programmes and national healthcare delivery systems and to survey and document traditional knowledge so as to safeguard the Intellectual Property Rights.
- iv) To strengthen cooperation among themselves to conduct collaborative drug and clinical research and to promote trade of standardized raw material, Traditional Medicines and therapies.
- v) To take appropriate measures for preservation of endangered medicinal plants and promote their cultivation.
- vi) Agreed to strive towards establishment of an efficient mechanism for exchange of information on regulation policies and procedures concerning drugs and food, exchange of regulation personnel involved in enforcement and quality assurance of food and drugs (through workshops and training programmes) among SAARC States.
- vii) To work towards developing policies and effective partnership to check illegal trade and cross border movement of spurious/substandard drugs and food.
- viii) To develop a database for food contaminants and food borne disease surveillance, and also to take up the issues relating to food certification, standardization and trade in a harmonious manner with Codex Alimentarius Commission/WTO and at other forums.
- ix) To strengthen their policies and programmes to attain respective goals in health and population sector, in keeping with the outcomes of ICPD and ICPD+5 Conferences and the World Summit for Children +10 as well as the relevant Millennium Development

Goals.

- x) To request the international organization/initiatives, including multilateral agencies, UN Specialized agencies, Funds and Programmes, to complement the Region's efforts in addressing its health and population concerns.
- xi) To share best practices, models of governance, research projects and training and to facilitate educational exchange programmes and networking of national institutions.
- xii) To strive towards making health central to the national development strategies, to set up National Commissions on Macroeconomics and Health and to allocate greater resources to health.