Using science, technology and innovation to close the gap on Sustainable Development Goal 3, good health and well-being

Statement submitted by

H.E. Mr. Fortunato de la Peña
Secretary, Department of Science and Technology
The Philippines
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Statement to be delivered by

FORTUNATO T. DE LA PEÑA
Secretary
Department of Science and Technology

On behalf of the

Republic of the Philippines
Good evening, Mr. Chair.

To our distinguished panelists,
To my fellow ministers who are presenting today,
To distinguished delegates,

Good evening from the Philippines.

The current pandemic has underlined the importance of achieving Sustainable Development Goal 3. It further illustrated how a health crisis can affect the three pillars of sustainable development: the economic, the environmental, and the social aspect.

The Report of our Secretary-General on Using science, technology, and innovation to close the gap on Sustainable Development Goal 3, good health and well-being states that there are common challenges in the health system of developing countries. Some of the deficiencies mentioned were research and development skills; science, technology, engineering, and mathematic skills; research and development infrastructure; and research and development investment.

Excellencies, the Philippines believes that in order to address these issues and ensure that the benefits science, technology, and innovation for health is enjoyed by all, there must be a whole-of-Government approach and more than that, a whole-of-Nation approach.

Our Department, the Department of Science and Technology has long recognized the value of investing in research and development programs in health. We have a Philippine Council for Health Research and Development which handles this sector. And if I may say, we have been fortunate that in identifying the R&D priorities in our Harmonized National Research and Development Agenda, the programs that we have prioritized came in very handy when COVID-19 came.

For example, we have a program on diagnostics development and it came in very handy because while we have finished our diagnostics kits on dengue and leptospirosis, then COVID-19 came. And so after the genomic sequence of the virus was released in January, immediately our diagnostic researchers went into work and by March 20, we have already developed a Philippine rRT-PCR detection kit. By April 3, we already have the approval of our Food and Drug Administration. And so, we already rolled out our rRT-PCR diagnostic kit.
We were also very much involved in drug discovery, mostly using our bioresources. Many of the natural products that actually we have developed have been found to have good effects in terms of hastening recovery and in terms of preventing deterioration into severe cases.

Now, we also have a program on disease modeling. After our disease modeling for dengue and for typhoid fever and for measles, immediately we went into work. One of our universities which was working with us went to develop the disease modeler for COVID-19 which was adopted by the Government.

We also had this program on biomedical devices and so we were able to come up with our telemetry devices so that patients and health workers can actually have less contact because of this ICT tool. Likewise, we went into the development of local ventilators, although they are still in the testing phase up to now.

ICT was heavily used whether in managing travel, in border control, or in management of the logistics that became very important, particularly among our local government units. We also had to use ICT during this crisis, particularly, to implement remote learning schemes considering that there was constraint in terms of face-to-face learning in the classrooms.

We also used the tools of advanced manufacturing to develop components and other items like personal protective equipment.

One of the important decisions that we have made early enough was to join in the COVAX facility and we are now benefitting from that in terms of the availability of vaccines.

We also volunteered and has taken part in the WHO Solidarity trials for therapeutics. We have also volunteered – although it has not yet started yet because there has been no announcement yet from WHO – our participation in WHO solidarity trials for vaccines.

So, these are the developments that have taken place. It was difficult but research and development and science, technology, and innovation has been of help.

Definitely, digitalization had to be resorted to because of the limitations on mobility. To a certain extent, our businesses were able to cope up but there are observations also that digitalization can exacerbate inequality. Government has to play a vital role in ensuring that these innovations in health would be equitable and sustainable, particularly to the disadvantaged sectors.
With the aim to make health care services become accessible to all, the Philippines just passed the Universal Health Care law in 2019. There is still a lot of work to do, but this law will make sure that the health services will be available to all.

Multidimensional poverty still remains to be a barrier and governments need to deploy scientific interventions to facilitate better provision of services. We promote strengthened international cooperation and global solidarity, particularly in these difficult times. Therefore, these forums such as the CSTD provides us a good platform to connect and collaborate. Joint activities such as this conference would catalyze bilateral, triangular, regional, and multilateral cooperation in research, science and technology development, as well as, capacity building.

In closing, I would like to express again my happiness of being with CSTD again. I was Chair of the 15th Session in 2012 and I'm happy to be here with you again.

Thank you very much, Mr. Chair.