



Report of the regional committees to the Executive Board

Report by the Director-General

1. This report summarizes the proceedings of the WHO regional committees, based on the reports of the chairpersons. It has been prepared pursuant to the proposals for enhancing alignment between the regional committees and the Executive Board, and the decision by the Health Assembly that chairpersons of the regional committees should routinely submit a summary report of the committees' deliberations to the Board.¹ The report focuses on the key issues and outcomes, particularly those that are of global significance and those that respond to decisions of the Health Assembly and Executive Board.
2. The six regional committees met between 19 August and 17 October 2019 as follows:
 - Sixty-ninth session of the Regional Committee for Africa, 19–23 August, Brazzaville, chaired by Mme Jacqueline Lydia Mikolo, Minister of Health, Population and Women's Affairs, Congo;
 - Seventy-second session of the Regional Committee for South-East Asia, 2–6 September, New Delhi, chaired by Dr Harsh Vardhan, Union Minister of Health and Family Welfare, Science and Technology and Earth Sciences, India;
 - Sixty-ninth session of the Regional Committee for Europe, 16–19 September, Copenhagen, chaired by Mr Magnus Heunicke, Minister for Health and Senior Citizens, Denmark;
 - Fifty-seventh Directing Council of the Pan American Health Organization (PAHO)/seventy-first session of the Regional Committee for the Americas, 30 September–4 October, Washington, DC, chaired by Dr Daniel Salas, Minister of Health, Costa Rica;
 - Seventieth session of the Regional Committee for the Western Pacific, 7–11 October, Manila, chaired by Dr Park Neunghoo, Minister of Health and Welfare, Republic of Korea;
 - Sixty-sixth session of the Regional Committee for the Eastern Mediterranean, 14–17 October, Tehran, chaired by Dr Saeed Namaki, Minister of Health and Medical Education, Islamic Republic of Iran.

¹ Decision WHA65(9) (2012) on WHO reform, paragraph (4)(d).

3. Summary reports of the regional committees are posted on the WHO website.¹

TOPICS FOR GLOBAL DISCUSSION

Results framework

4. In resolution WHA72.1 (2019) on Programme budget 2020–2021, the Health Assembly requested the Director-General inter alia “to continue developing the results framework in consultation with Member States, including through the regional committees, and to present it to the Executive Board at its 146th session”. Regional committees were invited to comment on the Thirteenth General Programme of Work, 2019–2023. Results framework: an update.

5. The regional committees welcomed the results framework as a tool for measuring results and impact, enhancing transparency and accountability and optimizing the use of resources, and in particular the focus on measuring impact at country level. Several noted areas for comment.

6. The Regional Committee for Africa noted the need to show how data would be harmonized at country level. It also noted that there would be needs-based support to countries, and that the inclusion of a qualitative narrative report documenting best practices would ensure that country performance is highlighted regardless of country size. The Committee recommended the involvement of partners, academia and other technical experts in finalization of the results framework.

7. The Regional Committee for the Americas supported the addition of indicators relating to areas of key importance for public health, such as mental health. Concerns were raised about the development of a universal health index separate from the Sustainable Development Goal framework. The potential complexity of reporting on two different indices was a particular concern. It was pointed out that the identification of the 2023 milestones for the 2030 targets of the health-related Sustainable Development Goals by the partners in the Global Action Plan for Healthy Lives and Well-being for All and the finalization of the results framework for the Thirteenth General Programme of Work were distinct work streams and should be treated as such. The Secretariat was urged to continue working with Member States to improve data quality and strengthen national health information systems.

8. The Regional Committee for Europe emphasized that the results framework should not lead to an increase in the reporting burden for Member States and suggested that the Secretariat provide an annual overview of planned requests for reporting, consultations and questionnaires, which would help to ensure timeliness of reporting, effective coordination and the efficient use of resources.

9. The Regional Committee for the Western Pacific noted that the results framework could play an important role in making WHO more transparent and accountable, and in focusing the impact of transformation efforts. It welcomed the attention to gender equity and rights. The importance of providing technical support to improve data to determine impact at the country level was also stressed.

Global strategy for tuberculosis research and innovation

10. In resolution WHA71.3 (2018) on Preparation for a high-level meeting of the General Assembly on ending tuberculosis, the Health Assembly requested the Director-General “to develop a global strategy for tuberculosis research and innovation, taking into consideration both ongoing and new

¹ WHO website. Summary reports submitted by the chairpersons of the regional committees (<http://apps.who.int/gb/statements/RC/2019/>, accessed 22 November 2019).

efforts, and to make further progress in enhancing cooperation and coordination in respect of tuberculosis research and development, considering where possible drawing on relevant existing research networks and global initiatives". Regional committees were invited to comment on the draft strategy.

11. Several regional committees indicated that the global strategy had been discussed or was being discussed at regional level, while the Regional Committee for South-East Asia endorsed it.

12. The Regional Committee for Europe agreed on the importance of effective tuberculosis prevention strategies at both country and regional levels, as well as early diagnosis, screening and adequate treatment for high-risk groups, particularly children from vulnerable groups. Communities and people affected by tuberculosis must be engaged, empowered and supported to contribute to control efforts. The Committee called for further research on vaccines and effective treatments and noted that the European Tuberculosis Research Initiative had stressed the risks associated with latent tuberculosis and drug resistance.

13. The Regional Committee for the Eastern Mediterranean suggested that consideration might be given to establishing a global high-level committee to guide work in this area.

Global strategy on digital health

14. In resolution WHA71.7 (2018) on digital health, the Health Assembly requested the Director-General "to develop, within existing resources, and in close consultation with Member States and with inputs from relevant stakeholders as appropriate, a global strategy on digital health, identifying priority areas including where WHO should focus its efforts". Regional committees were invited to comment on the draft strategy.

15. Several regional committees noted that the draft global strategy had been discussed at regional level earlier in the year and input had been provided at that time.

16. The Regional Committee for Europe agreed that the draft global strategy on digital health would enable Member States to draw up interoperability standards and guidelines for the confidentiality of health data and reduce the digital divide between countries. A dialogue was currently under way in the Region on the creation of a European road map for the digitalization of health systems. The Committee suggested additions to the strategy, which included: a rationale for sharing health data, detailed targets on the protection of personal data, and governance of digital health data. More emphasis should be placed on the creation of infrastructure for interoperability and clarification of WHO's role in standard-setting. The future guidelines for implementation of the strategy should include recommendations on encouraging stakeholder engagement, determining best practices and adapting existing organizational processes to incorporate digital technologies.

17. The Regional Committee for the Eastern Mediterranean suggested that, as part of the process of global consultation, a package of best practices and lessons learned might be developed to avoid previous mistakes as countries address the legislative and other challenges.

Global strategy to accelerate cervical cancer elimination

18. In decision EB144(2) (2019) on accelerating cervical cancer elimination as a global public health problem, the Executive Board requested the Director-General "to develop, in consultation with Member States and other relevant stakeholders, a draft global strategy to accelerate cervical cancer elimination,

with clear goals and targets for the period 2020–2030, for consideration by the Seventy-third World Health Assembly, through the Executive Board at its 146th session”. Regional committees were invited to comment on the draft strategy.

19. Several regional committees noted that the draft global strategy had been discussed at regional level earlier in the year and input had been provided at that time.

20. The Regional Committee for South-East Asia noted that significant progress had been made in the Region towards the elimination of cervical cancer as a public health problem and achievement of the interim global targets by 2030. It highlighted the importance of an uninterrupted supply of vaccine. Also, as the human papillomavirus DNA test was too expensive for a population-based screening programme, it requested the Secretariat to consider addressing the issue of pooled procurement of screening test kits at an affordable cost within the strategy.

21. The Regional Committee for Europe noted that it is recommended that girls should be immunized against human papillomavirus infection over a relatively wide age range, namely 9–14 years, to ensure that all of them are fully vaccinated by the age of 15 years. WHO’s recommendations about immunization of boys are still under discussion. The main challenges to implementation of the measures advocated in the draft global strategy are the shortage of vaccines against human papillomavirus and potential risks to vaccine supplies. Uzbekistan has agreed to be the first demonstration country for the global flagship project on cervical cancer in the Region.

22. The Regional Committee for the Eastern Mediterranean acknowledged the importance of this global strategy. It noted a need for accurate and reliable data as there were well-recognized gaps in the available information, for example on the incidence of cervical cancer in individual countries. Concerns were also raised about the current low uptake of screening programmes in the Region. Accelerating the elimination of cervical cancer will require ensuring the supply of, and access to, affordable vaccines, and procurement processes therefore need to be established. Potential approaches to increasing the supply and availability of vaccines included the implementation of a collective regional procurement mechanism, possibly with WHO’s support and applications to Gavi, the Vaccine Alliance by eligible countries. The issue of criteria for eligibility for Gavi support and their potential revision, including in relation to emergency-affected countries, was highlighted.

Global strategy and action plan on ageing and health

23. In resolution WHA69.3 (2016) on Global strategy and action plan on ageing and health 2016–2020: towards a world in which everyone can live a long and healthy life, the Health Assembly requested the Director-General “to leverage the experience and lessons learned from the implementation of the Global strategy and action plan on ageing and health in order to better develop a proposal for a Decade of Healthy Ageing 2020–2030 with Member States and with inputs from partners, including United Nations agencies, other international organizations, and nongovernmental organizations”. Regional committees were invited to comment on the draft proposal for a Decade of Healthy Ageing.

24. Several regional committees discussed implementation of the global strategy. No comments were forthcoming on the proposal for a Decade of Healthy Ageing.

Country presence report

25. In decision WHA69(8) (2016), based on the agreed recommendations of the Open-ended Intergovernmental Meeting on Governance Reform (Geneva, 8 and 9 March 2016 and

28 and 29 April 2016), the Health Assembly requested “the Director-General and the regional directors to provide the biennial WHO country presence report for review by the regional committees, and as an information document for the Health Assembly, through the Executive Board and its Programme, Budget and Administration Committee”. The latest report was submitted to the Seventy-second World Health Assembly as document A72/INF./4 .

26. The Regional Committee for the Americas considered the report as part of the discussion of the Report on strategic issues between PAHO and WHO. It was emphasized that WHO’s work at country level should be aligned with the strategic priorities of countries and should serve to build national and local capacities. The need for strong communication between PAHO/WHO country staff members and national officials was also underscored. The greater numbers of WHO country-level staff members was welcomed, but it was considered important to avoid creating new posts indiscriminately, without a prior evaluation of the availability of resources.

27. The Regional Committee for Europe welcomed the fact that WHO is poised to enhance its work in and with countries under the Thirteenth General Programme of Work, that being a tool to enhance the efficiency of outcome-oriented cooperation. There was broad agreement that the policy advice and technical support provided by WHO country offices and their cooperation with national counterparts and stakeholders boosts national health outcomes. The Committee pointed out that there was a need for additional flexible funds to support and build WHO’s work at country level.

28. The Regional Committee for the Eastern Mediterranean discussed WHO’s current country presence and plans for an enhanced future country presence for the Organization.

29. The Regional Committee for the Western Pacific expressed appreciation that regional reforms of the past decade, which put countries at the centre of all WHO’s work, had been maintained and would be strengthened in the coming five years under the regional strategic vision. It considered how WHO had effectively engaged partners to provide support to Member States, with specific examples from Member States in the Region.

TOPICS OF REGIONAL SIGNIFICANCE

30. The Regional Committee for Africa adopted a regional strategy for integrated disease surveillance and response, and a strategic plan to reduce the double burden of malnutrition in the African Region. It also adopted regional frameworks for provision of essential health services through strengthened district/local health systems to support universal health coverage in the context of the Sustainable Development Goals, and for the implementation of the global vector control response in the Region, and reviewed the progress made in implementation of the Transformation Agenda in the Region. The Committee nominated Dr Matshidiso Moeti for a second term as Regional Director for a period of five years from 1 February 2020.

31. The Regional Committee for the Americas approved the strategic plan 2020–2025 for PAHO, the theme of which is “equity at the heart of health”, as well as the PAHO programme budget for 2020–2021. The Committee examined a report on issues of strategic importance for PAHO and WHO, including the implementation of the WHO transformation agenda at the regional level, PAHO’s participation in United Nations development system reform and the Region’s allocation from WHO’s overall budget. It endorsed a policy for an integrated sustainable approach to communicable diseases and resolved to approve and implement regional strategies and plans of action in several areas: elimination of industrially produced trans-fatty acids; strengthening information systems for health;

health promotion; donation and equitable access to organ, tissue, and cell transplants; quality of care in health service delivery; and ethnicity and health.

32. The Regional Committee for South-East Asia approved the regional programme budget for 2020–2021. It endorsed the Delhi Declaration – Emergency preparedness in the South-East Asia Region, and adopted resolutions setting the goal for measles and rubella elimination by 2023 and endorsing a regional plan of action for the WHO global strategy on health, environment and climate change 2020–2030.

33. The Regional Committee for Europe adopted resolutions on lessons learned from the implementation of Health 2020, the European policy framework for health and well-being; accelerating progress towards healthy, prosperous lives for all, increasing equity in health and leaving no one behind in the Region; accelerating primary health care strengthening; the implementation of health literacy initiatives through the life course; and the work of the geographically dispersed offices in the Region. It also discussed WHO's transformation and its implications for the Region. The Committee nominated Dr Hans Kluge as Regional Director for a period of five years from 1 February 2020. It expressed its gratitude to Dr Zsuzsanna Jakab and declared her Regional Director Emeritus.

34. The Regional Committee for the Eastern Mediterranean adopted resolutions on strengthening the nursing workforce to advance universal health coverage and a strategy for nutrition. It endorsed regional frameworks for action on: ending preventable newborn, child and adolescent deaths and improving health and development; the hospital sector; improving national institutional capacity for the use of evidence in health policy-making; acute rheumatic fever and rheumatic heart disease; strengthening the public health response to substance use; and an updated framework for action to implement the United Nations Political Declaration on Non-communicable Diseases, including indicators to assess country progress by 2030.

35. The Regional Committee for the Western Pacific endorsed the regional implementation plan for the Thirteenth General Programme of Work and strategic vision for WHO's work in the Region for the next five years, entitled "For the future: towards the healthiest and safest Region". It also endorsed a regional action plan for tobacco control; a regional action framework on protecting children from the harmful impact of food marketing; and a framework for accelerating action to fight antimicrobial resistance.

ACTION BY THE EXECUTIVE BOARD

36. The Board is invited to note the report.

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