The Regional Committee (RC) met in Brazzaville, Republic of Congo, from 19 to 23 August 2019, and was chaired by Hon. Jacqueline Lydia Mikolo from Congo. This statement summarizes the main outcomes of the meeting.

PART 1: TOPICS FOR GLOBAL DISCUSSION

Thirteenth General Programme of Work, 2019–2023 Results Framework: An Update (DOCUMENT AFR/RC69/4)

The RC reviewed the document **Thirteenth General Programme of Work, 2019–2023 Results Framework: An Update**. This document is in response to the request of the Seventy-second World Health Assembly, that the Director-General continues developing the GPW 13 results framework, in consultation with Member States, and to be presented to the 146th session of the Executive Board in January 2020. The framework consists of the results that WHO aims for, to make an impact on people’s health at the country level, and the three-level measurement system to track impact through quantitative indicators and milestones using the healthy life expectancy (HALE) for the top-level indicator, the corresponding indices of the triple billion targets (universal health coverage index, health emergency protection index and healthier population index) and outcomes (the 46 programmatic indicators).

Delegates noted the need to finalize the results framework and show how data shall be harmonized at country level. They also noted that there will be need-based support to countries, and that the inclusion of qualitative narrative report documenting best practices will ensure that country performance is highlighted regardless of country size. The delegates recommended the involvement of partners, academia and other technical experts in finalization of the results framework.

PART 2: TOPICS OF REGIONAL SIGNIFICANCE

Nomination of the Regional Director

The RC nominated Dr Motshidiso Moeti as Regional Director for the African Region and requested the Director-General to propose to the Executive Board the reappointment of Dr Matshidiso Moeti from 1 February 2020.

The RC reviewed the report of the Regional Director, which outlines the significant results achieved by WHO in the African Region, guided by the Twelfth General Programme of Work, 2014–2019 (GPW 12). It noted that progress continued to be made in the four focus areas of the regional Transformation Agenda. The technical priorities of WHO’s work in the Region include universal health coverage, health emergencies and high-priority, high-impact health interventions. Efforts are ongoing to strengthen operations, sustain compliance, promote efficient resource use and ensure an enabling environment for delivery of technical work. Partnerships are being strengthened through strategic interaction with senior health officials and other existing and new partners. In communication, media interactions, use of social media and innovative platforms are being scaled up to ensure that public health messages reach a wider audience and contribute to greater visibility of WHO’s work in the Region.

Member States highlighted the support they have received from WHO in various areas including in addressing emergencies such as Cyclones Idai and Kenneth in Southern Africa and the Ebola epidemic and preparedness in the DRC. Delegates lauded the Transformation Agenda and the functional reviews aimed at making WHO country offices fit for purpose. However, they called for more efforts to support populations in security-compromised areas and address the health needs of Small Island Developing States (SIDS).


Member States expressed satisfaction at the significant progress recorded in the four thematic areas of the Transformation Agenda. Delegates particularly recognized and lauded accomplishments in improved gender parity in staffing, donor and DFC reporting and the leadership and management training. They also expressed satisfaction with the functional reviews and improved dialogue between ministries of health and WHO country offices. Member States welcomed the next steps and affirmed their commitment to the way forward.

Regional Strategy for Integrated Disease Surveillance and Response: 2020–2030

The RC reviewed the Regional strategy for integrated disease surveillance and response: 2020-2030. The document noted that the strategy provides Member States with the technical guidance and priority interventions to achieve the WHO GPW 13 goal of protecting one billion more people from health emergencies. These include conducting high-level advocacy; ensuring good
system design and country ownership; ensuring consistent availability of skilled health workers; institutionalizing IDSR training and review of curricula of training institutions; scaling up event-based surveillance, community-based surveillance and electronic IDSR; implementing IDSR in complex situations; providing feedback and information sharing; strengthening cross-border preparedness and response; and integrating IDSR into broader health information systems.

Delegates acknowledged that epidemics and emergencies are a real threat in the Region and thanked WHO for the support provided in addressing them, including strengthening IDSR. Several Member States indicated that they were already using the new IDSR guidelines and innovative electronic IDSR, leading to significant improvements in timeliness and quality of surveillance data. Community-based surveillance, coordination of the “One Health” approach and laboratory systems were highlighted as weak areas that need more attention. The delegates reiterated that IDSR needs to be implemented in the context of health systems strengthening for UHC.

**Strategic plan to reduce the double burden of malnutrition in the African Region: 2019–2025**

RC reviewed the document entitled, “Strategic plan to reduce the double burden of malnutrition in the African Region: 2019–2025”. The strategy aims to reduce all forms of malnutrition throughout the life course for better health and well-being in the African Region. Its objective is to strengthen national capacity and the evidence base for nutrition programming and thus reduce all forms of malnutrition throughout the life course, in line with the Sustainable Development Goals. It proposes priority actions covering legislation and regulation, resource mobilization, multisectoral action, service delivery, data innovation and research as well as integration of nutrition actions in existing service delivery platforms.

Delegates acknowledged the challenge of the double burden of malnutrition in the African Region. Apart from the known contribution of undernutrition to mortality, noncommunicable diseases associated with obesity are increasing the burden of disability and premature death. They enumerated key enabling factors for the implementation of the strategy, including high-level political commitment and the existence of relevant policies and strategic plans. The main challenges identified included lack of financial resources for nutrition, lack of capacity to conduct food composition analysis, lengthy procedures in changing legislation and limited availability and use of routine data in nutrition monitoring.

**Framework for provision of essential health services through strengthened district/local health systems to support UHC in the context of the SDGs**

RC reviewed the Framework for provision of essential health services through strengthened district/local health systems to support UHC in the context of the SDGs, aimed at guiding Member
States on revitalizing and enhancing the capacity of district health systems to provide essential health services and achieve UHC in the context of the SDGs. It envisions equitable access for all people at all ages to quality essential health services that respond adequately to the needs of the population.

Delegates shared their experiences and the successes achieved in district health system strengthening, including the establishment of mobile health units using multidisciplinary teams; decentralization of services and collaboration with local authorities while ensuring pooled and centralized procurement of medicines and consumables; community training of health-care workers and community-based interventions to extend coverage of access; establishment of primary health care institutes; provision of free package of basic care to specific populations including children under five years of age and pregnant women; and promotion of intersectoral collaboration at district level. They also highlighted common challenges such as lack of skilled health-care professionals; inadequate health and laboratory infrastructure; poor community involvement; dearth of leadership and governance; inadequate budget allocation and accountability.

**Framework for the implementation of the Global Vector Control Response in the WHO African Region**

RC reviewed the Framework for Implementation of the Global Vector Control Response in the WHO African Region. The regional Framework is intended to guide Member States of the WHO African Region in planning and implementing the priority actions of the GVCR in the context of their local situations, as well as to strengthen institutional and human capacity to implement vector control. These include conducting needs assessments, updating strategic plans, improving multisectoral responses, vector surveillance and information systems, regulatory and legislative frameworks, and basic and applied research for entomology.

Delegates indicated that insecticide resistance remains a constraint to effective vector control and that the poor understanding of behavioural attributes of local malaria vectors and the paucity of data on significance of secondary vectors compounded residual malaria transmission. Concerns were raised about accountability and the sustainability of vector control interventions owing to limited domestic resources. Members States also highlighted challenges related to lack of human, technical and financial resources to support vector control initiatives.

**Accelerating the response to noncommunicable diseases in the African Region in line with the Political Declaration of the High-level Meeting of the General Assembly on the prevention and control of NCDs**

The RC reviewed the document entitled, “Accelerating the response to noncommunicable diseases in the African Region in line with the Political Declaration of the High-level Meeting of the
General Assembly on the prevention and control of NCDs”. The document notes that in 2017, the NCD Progress Monitor revealed that progress in scaling up NCD programmes and services to prevent premature deaths from the major NCDs such as cardiovascular diseases, cancer, diabetes and chronic respiratory diseases in the African Region remains inadequate. The third High-level Meeting of the United Nations General Assembly on NCDs was held in New York on 27 September 2018 under the theme “Scaling up multi-stakeholder and multisectoral responses for the prevention and control of non-communicable diseases in the context of the 2030 Agenda for Sustainable Development”. The document highlights the outcome of the High-level Meeting, key issues and challenges in the African Region, and proposes actions to accelerate the response to NCDs.

Delegates expressed concern about the increasing burden of NCDs in their countries and the extremely high costs of diagnostics and treatment for cancer and for the management of other NCDs. They indicated that as data on NCDs are not readily available in routine systems, they rely on STEPS surveys to understand the prevalence of risk factors and the actual burden of NCDs and their contribution to overall mortality. The delegates also shared information on ongoing efforts and the progress made to address NCDs and their risk factors, including services for their screening, diagnosis and treatment. In addition, several countries have made progress in tobacco control and a few have introduced increased taxation on alcohol, but most still lack policies and regulations for reduction of alcohol consumption.