Summary report from the President (Mr Magnus Heunicke, Denmark)

PART 1: TOPICS FOR GLOBAL DISCUSSION

- Results framework

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

- Global strategy for tuberculosis research and innovation

The Regional Committee agreed on the importance of effective tuberculosis (TB) 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 who come into contact with people with TB. Communities and people affected by TB must be engaged, empowered and supported to contribute to TB control efforts. The Regional 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 TB and drug resistance.

- Global strategy on digital health

The Regional Committee 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 roadmap for the digitalization of health systems. The Regional 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.

- Global strategy to accelerate cervical cancer elimination

The Regional Committee noted that it is recommended that girls should be immunized against human papillomavirus (HPV) 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 recommendations about immunization for boys are still under discussion. The main challenges to implementation of the measures advocated in the draft strategy are the shortage of vaccines against HPV 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.

- **Global strategy and action plan on ageing and health**

The Regional Committee observed that the three levels of the Organization work well together on the health of older people. Over the next year, the Regional Office will focus on long-term care and on how health systems respond to ageing populations.

- **Country presence report**

The Regional Committee welcomed that fact that WHO is poised to enhance its work in and with countries under GPW 13 and noted that GPW 13 is 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 is a need for additional flexible funds to support and build WHO’s work at country level.

**PART 2: TOPICS OF REGIONAL SIGNIFICANCE**

- **The Regional Committee nominated Dr Hans Kluge as Regional Director for a period of five years from 1 February 2020.**¹ The Regional Committee also expressed its gratitude to Dr Zsuzsanna Jakab for her commitment and outstanding services to international public health and development during her long career in WHO, and in particular as Regional Director for Europe, and declared her Regional Director Emeritus.²

- **Lessons learned from Health 2020 implementation.** Health 2020, the European health policy framework, provides evidence-based guidance on preparing and updating national health policies and addressing key public health challenges and opportunities to promote health and well-being. It reflects the complex nature of health determinants and the leadership necessary to address these determinants, promotes whole-of-government approaches and supports Member States in moving towards universal health coverage; it also promotes a universal rights-based approach, markets that work for society and the environment, and empowered participation. The Committee noted that since its adoption by the Regional Committee in 2012, the guiding principles of Health 2020 have been widely incorporated into national health policymaking in the Region. The Regional Office has worked to align its strategies and action plans with Health 2020, organized meetings and high-level events on different aspects of the policy

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¹ See resolution EUR/RC69/R3, Nomination of the Regional Director (http://www.euro.who.int/__data/assets/pdf_file/0006/413817/69rs03e_RD_Nomination_190586.pdf?ua=1).
² See resolution EUR/RC69/R4, Expression of appreciation to Dr Zsuzsanna Jakab (http://www.euro.who.int/__data/assets/pdf_file/0005/413834/69rs04e_RD_Appreciation_190587.pdf?ua=1)
framework and facilitated enhanced intersectoral cooperation at the national and regional levels. Valuable national and subregional health networks have been established and should be expanded, and the policy’s targets and indicators have proved useful for results monitoring and accountability. The Committee urged Member States, inter alia, to continue to strengthen leadership in health policy and practice and to promote policy coherence and sustainability at all levels and across sectors. The Committee recalled that in 2017 it had adopted the roadmap to implement the 2030 Agenda for Sustainable Development, building on Health 2020, and requested continued WHO support to Member States in developing and updating their health policies in accordance with the values and approaches of Health 2020 and the roadmap.\(^3\)

**Promoting health equity in the WHO European Region.** The Health Equity Status Report initiative and the outcomes of the regional high-level conference, Accelerating Progress towards Healthy and Prosperous Lives for All in the WHO European Region (Ljubljana, Slovenia, 11–13 June 2019), gave a clear insight into the factors driving health inequalities and shifted the emphasis to finding solutions. The Regional Office has identified six steps to put people at the centre of equitable health and sustainable development policies and bring about measurable reductions in inequities. Member States made the commitment to place health equity at the centre of government decision-making, investment, and implementation of policies and programmes within health as well as in other sectors, through whole-of-government and whole-of-society approaches and participation. WHO was requested to support them in implementing this approach, to provide policy guidance, to launch a health equity solutions platform, and to establish a multidisciplinary health equity alliance of scientific experts and institutions to generate cutting-edge evidence and methods.\(^4\)

**Primary health care strengthening.** The Regional Committee urged Member States to implement 10 evidence-based “policy accelerators” (and associated “digital pointers”), as described in a report submitted by the secretariat,\(^5\) which provide guidance on scaling up primary health care and improving the performance of health systems as an essential step towards universal health coverage. Member States renewed their commitment to solidarity, equity and participation, as enshrined in the Tallinn Charter and Health 2020, as the foundations for strengthening health systems based on primary health care and for pursuing universal health

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\(^3\) See resolution EUR/RC69/R6, Lessons learned from the implementation of Health 2020, the European policy framework for health and well-being (http://www.euro.who.int/__data/assets/pdf_file/0004/413842/69rs06e_Resolution_Health2020_190591.pdf?ua=1).

\(^4\) See resolution EUR/RC69/R5, Accelerating progress towards healthy, prosperous lives for all, increasing equity in health and leaving no one behind in the WHO European Region (http://www.euro.who.int/__data/assets/pdf_file/0009/413838/69rs05e_HealthEquityResolution_190589.pdf?ua=1).

The Committee encouraged Member States, with the support of WHO, to proactively measure and monitor the impact, performance and capacity of primary health care; to ensure that the primary health care workforce has the necessary knowledge, skills, competencies and capacities; to empower patients and carers to engage in joint decision-making in treatment- and care-related issues; to actively participate in the global consultation for the development of the operational framework for primary health care; and to put people at the centre of their health systems.6

- **Health literacy.** According to a survey conducted in 2012, nearly half of all adults in the surveyed European countries had inadequate health literacy skills. WHO, the United Nations and other international bodies are currently pushing to put health literacy on the global agenda. The European Region has long been at the forefront of health literacy promotion, and a draft roadmap, prepared in consultation with Member States and experts and submitted to the Regional Committee,7 provides a comprehensive framework for pooling existing strategies, actions, networks and best practices. The Regional Committee welcomed the proposed roadmap as a useful tool to unify and consolidate existing initiatives, build a common policy for the Region and synchronize Member States’ efforts to improve the health and well-being of their populations. The participatory approach to developing the roadmap was commended. Acknowledging the value of health literacy for greater equity, the Committee suggested that health literacy initiatives could be implemented in tandem with measures to combat social exclusion, inequality, stigma and gender stereotyping. A focus on vulnerable population groups was recommended. Health literacy is a prerequisite for the achievement of health goals, such as noncommunicable disease prevention and control, and healthy lifestyle choices.8

- **Putting countries at the centre in the WHO European Region.** The Standing Committee of the Regional Committee has established a subgroup on countries at the centre; a series of visits to WHO country offices has been organized for members of governing bodies, which provided first-hand insight into the cooperation between country offices, other agencies, host country governments and civil society. The visits have also facilitated an understanding of Member States’ diversity in terms of context, needs, capacities and ways of working, and the different modalities of country work. The European Region has been country-focused for many years but has been strengthening its efforts in recent years in line with Health 2020. Training of WHO staff

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6 See resolution EUR/RC69/R8, Accelerating primary health care strengthening (http://www.euro.who.int/__data/assets/pdf_file/0007/413827/69rs08e_PHC_Resolution_190595.pdf?ua=1).
8 See resolution EUR/RC69/R9, Towards the implementation of health literacy initiatives through the life course (http://www.euro.who.int/__data/assets/pdf_file/0005/413861/69rs09e_ResolutionHealthLiteracy_190598.pdf?ua=1).
in countries (including heads of WHO country offices and local technical, administrative and support staff) and key national stakeholders has reduced dependency on regional and global capacities. To make best use of scarce resources, networks have been established to facilitate resource-sharing among Member States and the Regional Office.

- **The work of the geographically dispersed offices (GDOs) in the WHO European Region.** The Regional Committee reviewed the work of the GDOs and outpost offices and observed that the GDOs and outpost offices add considerable technical capacity to the Region as centres of excellence, providing essential support to Member States, gathering data and evidence for policy-making, and making a major contribution to the outputs of the Regional Office. Under the Region’s GDO strategy, they are fully integrated into the work of the Regional Office. The Committee noted that the Director-General is considering how such offices could contribute to the global work of the Organization, while remaining part of the regional architecture. Every effort is being made to keep the lines of communication between these offices and the Regional Office permanently open, and to ensure that they are involved in cross-divisional activities. GPW 13 provides a useful framework for such integration measures. While the benefits of the GDOs and outpost offices are clear and cooperation with them should be strengthened, the critical mass of technical expertise should remain at the Regional Office in Copenhagen.9

- **The WHO transformation and its implications for the WHO European Region.** Processes at the Regional Office have already been aligned with the new global operating model in several respects, including planning and communications. The Regional Office is also spearheading the alignment with the new GPW framework for the Programme budget 2020–2021 and contributing to the redesign of global recruitment, supply chain management and performance management processes, as well as core technical functions such as norms and standard-setting, research, provision of data and the strategic policy dialogue. The preparation of a culture change action plan for the Regional Office, which will address the results of the 2017 WHO-wide culture survey and the recommendations of the Respectful Workplace Initiative, should be completed by the end of 2019. The Regional Office is also working with Member States to determine their needs and priorities. A staff survey and staff meeting took place in late September and early October 2019 to present progress to date and collect feedback from staff. A regional General Service Staff Task Force will be established to make full use of the skills and expertise of General Service staff.

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9 See resolution EUR/RC69/R7, Work of the geographically dispersed offices in the WHO European Region (http://www.euro.who.int/__data/assets/pdf_file/0006/413826/69rs07e_GDO_Resolution_190594.pdf?ua=1).