

# **Sixty-eighth session of the WHO Regional Committee for the Eastern Mediterranean, Cairo, Egypt, 11–14 October 2021**

**Summary report by the Chair, H.E. Dr Ali Muhammad Miftah Al-Zinati, Minister of Health, Libya**

## **PART 1: TOPICS FOR GLOBAL DISCUSSION**

### **Sustainable financing**

The Regional Committee reviewed the report of the third meeting of the Working Group on Sustainable Financing and considered the five questions posed by the Working Group, as requested. Both the Chair of the Working Group and a member from the Region participated in the session. While representatives welcomed the recommendations of the Working Group, agreed that WHO needed to be sustainably financed and supported an increase in funding, some felt that the increase in Assessed Contributions should be introduced gradually and should take into account the financial impact of the COVID-19 pandemic on Member States. There were also calls for innovative funding models and equitable distribution of the Programme Budget across the three levels of the Organization, including support to explore further the pledging model for pooled non-earmarked Voluntary Contributions. Member States did not formally adopt a common position on these issues.

### **Programme Budget 2022–2023**

The Regional Committee received an update on the Programme Budget for 2022–2023, as approved at the Seventy-fourth World Health Assembly in May 2021, noting that a mid-term revision was expected in May 2022. Member States did not formally adopt a common position on the Programme Budget.

### **Update on the work of the Working Group on Strengthening WHO Preparedness and Response to health emergencies**

The Regional Committee received a presentation on the first meeting of the Working Group on Strengthening WHO Preparedness and Response to Health Emergencies. Both the Chair of the Working Group and a Vice-Chair from the Region participated in the session. Member States discussed related issues but did not formally adopt a common position.

### **Other topics for global discussion**

The Regional Committee received a presentation on other topics for global discussion, including: oral health; the global health sector strategies on, respectively, HIV, viral hepatitis and sexually transmitted infections; social determinants of health; follow-up of the political declaration of the third high-level meeting of the General Assembly on the prevention and control of non-communicable diseases; the role of the global coordination mechanism on the prevention and control of noncommunicable diseases in WHO's work on multistakeholder engagement for the prevention and control of noncommunicable diseases; strengthening efforts on food safety; global actions on epilepsy and other neurological disorders; and accelerating action to reduce the harmful use of alcohol. Regional consultation is being undertaken

on several of these issues, but Member States did not formally adopt a common position through the Regional Committee.

## **PART 2: TOPICS OF REGIONAL SIGNIFICANCE**

### **Accelerating health emergency preparedness and response – a plan of action**

The Regional Committee endorsed a plan of action for ending the COVID-19 pandemic and preventing and controlling future health emergencies in the Eastern Mediterranean Region,<sup>1</sup> which draws on global and regional lessons learned from the COVID-19 response so far. The plan requires Member States to maintain high-level leadership of the response, scale up COVID-19 vaccination while ensuring equity, strengthen the implementation of and adherence to evidence-based public health and social measures, and expand and strengthen other elements of the response. They were also urged to advance efforts to prevent and control future pandemics and other health emergencies through a range of actions, and the Regional Director was mandated to support those efforts.

### **A regional strategy for integrated disease surveillance – overcoming data fragmentation in the Eastern Mediterranean Region**

In response to the serious gaps and weaknesses in countries' disease surveillance capacities exposed by the COVID-19 pandemic, the Regional Committee adopted a regional strategy for integrated disease surveillance.<sup>2</sup> Member States were urged to commit to taking the necessary steps to achieve effective, integrated national surveillance systems that connect to global surveillance systems by the end of 2025 through action across four domains – governance, operations, laboratory support and quality assurance, monitoring and evaluation – while the Regional Director was requested to establish a working group to integrate surveillance programmes within the Organization, and to support Member States' efforts to transition to integrated disease surveillance.

### **Building resilient communities for better health and well-being**

The Regional Committee endorsed a roadmap on building resilient communities for better health and well-being in the Region.<sup>3</sup> The roadmap presents a menu of actions which can be adapted to each country's needs and context across eight strategic directions: engaging community and civil society representatives in governance structures; mapping existing communities, networks, practices and resources; establishing links and building trust with communities and civic institutions; enhancing collaboration and coordination for effective interventions; streamlining listening and community feedback to ensure two-way communication; localizing community engagement approaches; building the capacity of communities and civil society and providing support to maximize community participation; advancing evidence-based and innovative interventions; and documenting and communicating linkages between improved public health outcomes and community engagement programmes.

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<sup>1</sup> EM/RC68/R.2.

<sup>2</sup> EM/RC68/R.3.

<sup>3</sup> EM/RC68/R.4.

## **Addressing diabetes as a public health challenge in the Eastern Mediterranean Region**

Concerned by very high prevalence of diabetes in the Eastern Mediterranean Region, the Regional Committee endorsed a regional framework for action on diabetes prevention and control.<sup>4</sup> Member States were urged to prioritize the prevention and management of diabetes and its risk factors, setting time-bound national targets and indicators for diabetes prevention and control, allocate sufficient financial resources, integrate diabetes as part of universal health coverage benefit packages, improve diabetes management, ensure minimum standards of services for the prevention of complications and strengthen diabetes surveillance and monitoring systems. The Regional Director was requested to assist Member States in implementing the framework.

## **High-level Ministerial Group on the Control of Tobacco and Emerging Tobacco and Nicotine Products in the Eastern Mediterranean Region**

The Regional Committee established a High-level Ministerial Group on the Control of Tobacco and Emerging Tobacco and Nicotine Products in the Eastern Mediterranean Region.<sup>5</sup> The Group will comprise six Member States of the Region and is intended to galvanize high-level strategic leadership and action at both regional and national levels in the area of tobacco and nicotine control. It will serve for two years in the first instance, but this term may be renewed for another two years until 2025 with the possibility of further extension until 2030 to coincide with the planned end of the Global Action Plan on NCDs and the Sustainable Development Agenda.

## ***Vision 2023* Midterm Review and Push Forward**

The Regional Committee welcomed the recommendations of the *Vision 2023* Midterm Review and Push Forward taskforce, established by the Regional Director to accelerate implementation of WHO's vision for the Region.<sup>6</sup> Member States were urged to implement all required programmes and initiatives effectively to meet their commitments under those recommendations, and the Regional Director was requested to support them.

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<sup>4</sup> EM/RC68/R.5.

<sup>5</sup> EM/RC68/R.1.

<sup>6</sup> EM/RC68/R.1.