

**DRAFT STATEMENT FOR THE MEMBER STATES OF THE EASTERN
MEDITERRANEAN REGION**

Seventy-sixth World Health Assembly, Geneva, 21–30 May 2022

Agenda items: 13.3,13.4 &13.5

Documents:

A76/7 and EB152/2023/REC/1, decision EB152(9)

A76/7 and EB152/2023/REC/1, decision EB152(10)

A76/7 and EB152/2023/REC/1, decision EB152(7)

Title:

- Substandard and falsified medical products
- Strengthening rehabilitation in health systems
- Draft global strategy on infection prevention and control

Dear Chair, Your Excellencies, Director-General,

Oman, representing the Eastern Mediterranean Region, would like to comment on infection prevention and control, and rehabilitation and falsified products.

Firstly, we welcome the global strategy on infection prevention and control, drafted following resolution WHA75.13 on the topic last year. As Member States, we have had ample opportunities to discuss the draft during six global and regional consultations and are grateful that the Secretariat has resolved debates on wording using language already agreed upon.

Infection prevention and control is at the core of several health priorities, including quality, safety, preparedness, water, sanitation and hygiene, and antimicrobial resistance. The proposed global strategy aligns with our own national achievements. With WHO support, in the Eastern Mediterranean Region, by 2023, 14 of the 22 countries and territories had set up the required organizational structure for infection prevention and control and 17 had developed national guidelines. The strategy we are about to endorse has clear-cut strategic objectives, targets and indicators. It will lead to greater attention to, and accountability for, infection prevention and control at all levels.

Secondly, rehabilitation is a core aspect of effective health care that should be available to the whole population, not only to those with disabilities or physical impairments. However, our Region struggles to assign the right level of priority, which leads to disparities in access that have grave implications for equity. Rehabilitation is not integrated across health planning, and governance is often fragmented.

Nevertheless, efforts have been made. Jordan, the Islamic Republic of Iran and Pakistan have all developed national strategic action plans using WHO tools. The integration of rehabilitation is ongoing in Jordan and the occupied Palestinian territory, and as part of the response to the earthquakes in the Syrian Arab Republic and Türkiye. Our

Member States are using the regional assistive technology strategic action framework to help them plan to improve access, and five participated in the Global report on assistive technology. Developing guidance to strengthen rehabilitation services, focusing on interventions such as physiotherapy, occupational therapy and speech therapy, would build on the current focus on assistive technology and contribute to achieving universal health coverage.

Finally, we would like to mention the danger to public health posed by substandard and falsified medical products, especially in low and middle-income countries. Both the COVID-19 pandemic and conflicts in the countries of the Region have contributed to the proliferation of falsified medicines, vaccines and in vitro diagnostics. We need field detection technologies and legal measures to control advertisements and sales.

In summary, we would like to:

- Endorse the global strategy on infection prevention and control; and
- Request the Secretariat to continue to support Member States to strengthen rehabilitation within health systems and to provide technical training on the prevention and detection of and response to substandard and falsified medical products and strengthen coordination between WHO and Member States in this area.

Thank you.