Report on the

68TH SESSION OF THE WHO REGIONAL COMMITTEE FOR EUROPE (ROME, ITALY, 17–20 SEPTEMBER 2018)

in preparation for EB144

Summary report from the President (Dr Armando Bartolazzi (Italy)

PART 1: TOPICS FOR GLOBAL DISCUSSION

• Draft WHO global strategy on health, environment and climate change

The Regional Committee noted the potential health co-benefits to be gained from climate change mitigation and adaptation activities, using a cross-cutting and preventive approach and promoting action aimed at healthier societies. The Regional Office has elaborated a strategic document intended to create a health sector that is better than climate-neutral. The European Environment and Health Process is a strong policy platform that can provide a good model for the future global strategy. The European Health Information Gateway gives access to documentation, tools and other information in English and Russian on climate change adaptation, resilience and mitigation.

Development of the road map on access to medicines and vaccines

The Regional Committee welcomed the broad approach of the global road map and noted that all the activities in the proposed I road map are aligned with WHO's mandate. The Committee asked for a calendar showing key deliverables and milestones should be drawn up for the following five years, so that the discussion at the Health Assembly each year can focus on a specific topic, with key deliverables and milestones. In addition to areas like research and development, intellectual property, the roadmap should also address demand-side factors, such as patient behaviour and health literacy, and diagnostics. The European Region can provide examples of valuable initiatives in the area of medicines pricing, including the Valletta Group and the BeNeLuxA collaboration.

Development of a draft global action plan on the health of refugees and migrants

The Regional Committee commanded the inclusive consultation process for the draft global action plan on the health of refugees and migrants, due to be submitted to the World Health Assembly in 2019. The Committee requested WHO to continue its close collaboration with the Office of the United Nations High Commissioner for Refugees and the International Organization for Migration (IOM), as well as with the European Union, to establish guidance for good practices in respect of specific groups of migrants, such as children or elderly people.

The Committee indicated that robust evidence, good surveillance systems and more disaggregated data are required in order to develop informed policies and enhance high-quality health service delivery by competent health professionals. In addition, accurate communication and public information will help to eliminate discrimination, stigmatization and barriers to

health care. The Committee acknowledged WHO European experience of finding the best humanitarian, legal and technical solutions, accumulating knowledge and achieving consensus and dialogue had made a valuable contribution to the preparation of the global compact for migration, as well as to the global action plan development.

Proposed programme budget 2020-2021

The European Member States acknowledged the consultative process for developing the proposed high-level programme budget 2020–2021, driven by country-ranked priorities, in a bottom-up approach that would orient the work of the Organization at all three levels, including its normative function.

Thus far, 35 Member States in the European Region had finalized their priorities; 18 had yet to complete their prioritization. Delegates noted that there was insufficient time for the prioritization exercise. WHO/Europe will provide Member States with further details on the outcome of the prioritization exercise through the governing bodies.

Several queries were raised concerning the level of detail in the programme budget and the budget envelope proposed for the Regional Office for Europe, which did not have the increase compared with that proposed for other regions. Member States also queried the proposed increase being applied only to the country component of the budget and requested that this be reviewed, noting that that different regions would need to implement different business models. The proposed 12% increase to the global budget was felt to be unrealistic. The European Member States raised concerns over issues including: the reflection of thematic areas such as NCDs and antimicrobial resistance. Delegates requested further information on the functions to be carried out at the 3 levels of the Organization, stressing that the emphasis should be on increasing investment at the country level and not in country offices.

The delegates called for a timetable and key points for the development of the next programme budget to be provided in good time, along with the relevant documentation allowing discussions at the Regional Committees.

• Impact of WHO reform on the work of the WHO European Region.

Member State delegations welcomed the steps already taken to transform WHO following the adoption of GPW 13 and to ensure that it was a modern organization able to play a pivotal role in meeting future health challenges. They welcomed recent key regional developments include the establishment of a regional coordination team and the appointment of senior staff to all the work streams of the transformation, with active engagement of the Regional Director at GPG, well as was the work done by the European Region.

Through the SCRC and its successive working groups, the Region had been proactive in governance reform, focusing on: nomination procedures for membership of the Executive Board and SCRC; the procedure for nomination of the Regional Director; strengthened governance oversight by Member States; management of the agendas of sessions of the Region's governing bodies; management of resolutions and amendments; alignment of global and regional governance; and management of regional conferences.

They emphasized the importance of involving Member States in major decisions concerning the transformation plan, and notably in the further development of the Proposed programme budget 2020–2021.

PART 2: TOPICS OF REGIONAL SIGNIFICANCE

• European health report

The flagship publication; the *European health report 2018* provided valuable information on the status of health and well-being and measuring progress in the implementation of Health 2020in the WHO European Region. The key findings highlighted that health and well-being in the European Region are steadily improving: life expectancy is increasing for men and women in all countries and regional gaps in life expectancy are shrinking. However, there is a persistence of high premature mortality rates and health inequalities between and within Member States. The gender mortality gap remains high, overweight and obesity levels are high and increasing. Tobacco use in young children is also higher than in the past and alcohol consumption in the Region remains the highest in the world. Other concerns are antimicrobial resistance, low vaccination coverage and the current outbreaks of measles and other vaccine-preventable diseases in the Region. While health expenditure as a proportion of gross domestic product remains stable, there are vast differences between countries.

Implementation of the roadmap for the 2030 Agenda and review of the joint monitoring framework

Delegations acknowledged that the European roadmap to implement the 2030 Agenda is aligned with GPW 13 and provided a unique opportunity to accelerate progress for collective action, particularly on strengthening universal health coverage, primary health care, and public health, tackling the social, economic, environmental, cultural and commercial determinants of health, acting in partnership, and engaging in local implementation.

The Regional Office, with support from a multi-country expert group, developed a joint monitoring framework based on a set of 41 indicators covering relevant areas across the reporting frameworks on Health 2020, NCDs and the SDGs. The Regional Committee expressed unanimous support for the roadmap, the joint monitoring framework and the draft decision under consideration. They extended their appreciation to the Regional Office and the expert groups for their efforts to reduce the reporting burden on Member States. Commitment to implement the 2030 Agenda was strong and cooperation was seen as an important tool.¹

¹ See decision EUR/RC68(1), Joint monitoring framework in the context of the roadmap to implement the 2030 Agenda for Sustainable Development, building on Health 2020, the European policy for health and well-being (http://www.euro.who.int/en/about-us/governance/regional-committee-for-europe/68th-session/documentation/resolutions/eurrc67conf.doc.6-draft-resolution-on-governance-in-the-who-european-region).

Advancing public health in the WHO European Region for sustainable development.

Since the dynamic concept of public health needs to be continuously adapted to the changing knowledge and policy environment and the emerging challenges faced by Member States, the unifying vision for advancing public health in the Region has been considered very timely. The 10-point action plan proposed by the Secretariat was endorsed by the Regional Committee, calling for strong political leadership and accountability for health, supported by solid and transparent governance mechanisms across all levels of government. It advocates the institutionalization of multisectoral cooperation and effective engagement with all relevant sectors, civil society, local actors and stakeholders. A transparent accountability system would need to be put in place. The plan also calls for the development of a new fit-for-purpose public health workforce.²

Health systems

The Committee reviewed the outcomes of the WHO high-level meeting, Health Systems for Prosperity and Solidarity: Leaving No One Behind (Tallinn, Estonia, 13–14 June 2018), and the WHO high-level meeting, Health Systems Respond to NCDs: Experience in the European Region (Sitges, Spain, 16–18 April 2018).

The Committee welcomed the policy recommendations presented at Sitges meeting and highlighted that NCD respond needs to be scaled up in order to make a greater impact on NCD outcomes. This required a comprehensive and aligned health system response - an approach that will contribute to the debate on NCDs at the UN General Assembly and the primary health care conference in Kazakhstan in October³. WHO's role in providing leadership and supporting implementation at the country level, as well as promoting the need to tackle risk factors and to work beyond the health sector is acknowledged.

The Committee welcomed the themes of Tallinn meeting: inclusion, dealing with access to services, coverage and financial protection; investment, focusing on sustained investment in health systems as a prerequisite for making them more inclusive and innovative; and innovation, harnessing innovations to create stronger and more equitable health systems. Member States voiced support for policy makers to invest more in health systems to move towards universal health coverage, and several underlined the pivotal role of primary care in advancing universal health care. The Committee noted the Regional Office's support for country efforts to strengthen health systems which contributes to Member States' achievement of universal health coverage and their SDG targets and adopted the Resolution

² See resolution EUR/RC68/R6, Advancing public health for sustainable development in the WHO European Region (http://www.euro.who.int/en/about-us/governance/regional-committee-for-europe/68th-session/documentation/resolutions/eurrc67conf.doc2.9-draft-decision-on-strengthening-member-state-collaboration-on-improving-access-to-medicines-in-the-who-european-region).

³ See resolution EUR/RC68/R3, Reaffirming commitment to health systems strengthening for universal health coverage, better outcomes and reduced health inequalities (http://www.euro.who.int/en/about-us/governance/regional-committee-for-europe/68th-session/documentation/resolutions/eurrc67conf.doc.8-draft-resolution-on-improving-environment-and-health-in-the-context-of-health-2020-and-the-2030-agenda-for-sustainable-development-outcomes-of-the-sixth-ministerial-conference-on-environment-and-health).

• New evidence on financial protection in Europe

The Regional Committee welcomed the new study undertaken by the Regional Office on financial hardship using an advanced methodology which resulted in a better understanding of the number of households that are impoverished by out-of-pocket payments for health care and the coverage policies that protect people from financial hardship. The evidence suggests that many people in the Region – even in high-income countries – are insufficiently protected against the cost of using health care, catastrophic out-of-pocket payments are heavily concentrated among the poorest and they are mainly for outpatient medicines in poorer households and dental care in richer households.

The evidence confirms that financial protection is stronger where public spending on health is high. Delegates acknowledging the actionable outcomes of the study, highlighted the importance of putting in place policies that are carefully designed to minimize out-of-pocket payments and protect poor and other vulnerable groups from co-payments.

Action plan to improve public health preparedness and response in the WHO European Region

The action plan, welcomed with appreciation by the Regional Committee, builds on the guidance for accelerating implementation of the IHR (2005) and increasing laboratory capacity, as approved by the Regional Committee at its 67th session, and is aligned with the global strategic plan to improve public health preparedness and response. The three strategic pillars of the draft action plan are: to build, strengthen and maintain the core capacities of States Parties to the IHR (2005); to strengthen event management and compliance with IHR requirements; and to measure progress and promote accountability, including compulsory annual reports to the World Health Assembly and voluntary qualitative and quantitative assessments.⁴

• Strategy on the health and well-being of men in the WHO European Region.

The groundbreaking Strategy adopted by the Regional Committee is based on promoting a gender-sensitive approach to health and human rights and aims to reduce premature deaths among men from NCDs. The Strategy connects several agendas at the heart of WHO's work and which encompass SDGs 3, 5 and 10. Delegates stressing the importance of strengthening advocacy and partnerships; aligning actions with national priorities; developing a patient-centred approach; considering gender and masculinity as a factor for health; and creating greater awareness of society's perception adopted the Resolution ⁵.

⁴ See resolution EUR/RC68/R7, Action plan to improve public health preparedness and response in the WHO European Region (http://www.euro.who.int/en/about-us/governance/regional-committee-for-europe/68th-session/documentation/resolutions/eurrc67conf.doc.5-draft-resolution-towards-a-sustainable-health-workforce-in-the-who-european-region-framework-for-action).

⁵ See resolution EUR/RC68/R4, Strategy on the health and well-being of men in the WHO European Region (http://www.euro.who.int/en/about-us/governance/regional-committee-for-europe/68th-session/documentation/resolutions/eurrc67conf.doc.7-rev.1-draft-resolution-on-partnerships-for-health-in-the-who-european-region).

 Implementation of the Regional Framework for Surveillance and Control of Invasive Mosquito Vectors and Re-emerging Vector-borne Diseases 2014–2020: lessons learned and the way forward.

The Regional Committee noted the importance of implementation of the Framework considering increase in vector borne diseases in the Region. They highlighted important interventions to implement the Framework successfully, including political and financial commitment; surveillance, monitoring and evaluation; training of health-care workers; a multisectoral approach; community engagement; cross-border collaboration; and vector control supported by legislation. Member States expressed their full support for the implementation of the Framework and requested to expand the scope of the diseases and acknowledged that more resources are needed for adequate country support.

European Vaccine Action Plan (EVAP) 2015–2020.

The results of the midterm review towards EVAP goals indicated that the Region is on track with respect to retaining its polio-free status; making evidence-based decisions on new vaccines; and achieving financial sustainability of immunization programmes. It is likely that the goal to control hepatitis B infection will also be met. However, gaps in immunization coverage are caused by vaccine shortages and impediments to access to new vaccines in some countries, along with vaccine hesitancy and resulted in outbreaks which are of great concern. Health care professionals have a key role to play in that regard, and good quality immunization data are critical to inform decision-making at the local level. Delegations reaffirmed their commitment in full implementation of the action plan.

• Countries at the centre: the strategic role of country offices in the WHO European Region.

The Regional Committee acknowledged the information on WHO's work with, for and in countries, and the strategic role of country offices in advancing the health agenda. They welcomed the unique initiative by the Region through country visits by the governing body members of the European Region which provided a better understanding of the work and functions of a country office. They expressed broad support for continuations of these visits, and requested to be exported to other regions. Given the increasing focus on country work under GPW 13, participants requested that the specific role and features of country offices should be well established and communicated in order to facilitate a better understanding of resource needs. Transparency and accountability for results achieved and resources used were considered fundamental.

The delegates requested a document to be discussed at 144th session of Executive Board on country offices' core functions, staffing, resources, relationship with authorities and collaboration with other United Nations agencies to enable the governing bodies to provide strategic guidance, They also suggested that the impact of United Nations reform on WHO's work in countries and how the reforms will be implemented should be included in the document.

• Accreditation of regional non-State actors to the WHO Regional Committee for Europe

Resolution on accreditation of 19 regional non-State actors not in official relations with WHO to attend future Regional Committee sessions was unanimously adopted, which followed RC67's adoption of a procedure of accreditation in line with the global Framework of engagement with non-State actors (FENSA).