

**SEVENTY-FIRST SESSION OF THE WHO REGIONAL COMMITTEE FOR AFRICA  
BRAZZAVILLE, REPUBLIC OF CONGO  
24 TO 26 AUGUST 2021**

**Summary Report from Honourable Professor Moustafa Mijiyawa  
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The Seventy-first session of the Regional Committee (RC71) met virtually from 24 to 26 August 2021. Hon. Professor Moustafa Mijiyawa chaired the meeting with the support of the Vice-Chairs Honourable Mr Edwin Dikoloti and Honourable Mr Edgar Manuel Azevedo Agostinho das Neves from Botswana and Sao Tome and Principe respectively. This statement summarizes the main outcomes of the meetings.

**PART 1: TOPICS FOR GLOBAL DISCUSSION**

**Programme budget 2022-2023 and Sustainable Financing**

The RC71 reviewed the scope and process of the revision of the Programme budget 2022–2023 approved by the Seventy-fourth World Health Assembly.

Following presentations by the Chair and the Vice-Chair of the Working Group on Sustainable Financing (WGSF), the RC71 considered the five questions proposed by the WGSF. MS welcomed the initiative and agreed to support the sustainable financing of WHO by aligning resources with the programme budget to improve the Organization's performance, while increasing its efficiency by relieving it of financial constraints. They supported proposals made by WGSF on full funding of the base segment of the programme budget with assessed contributions, increasing Member States' assessed contribution to at least 50% of the budget and introducing a replenishment mechanism to cover the remaining 50%. Member States (MS) requested information on the proposed replenishment mechanism, how it relates to other initiatives, the experience from other sister agencies and the criteria that would be used for allocating increases to Member State contributions.

MS recommended: (1) an incremental approach to the proposed increase of contributions, starting from the biennium 2024–2025; (2) an assessment of the status of Member States' economies to design a contribution model based on equity and taking into account each country's GDP as well as its ability to honour its financial commitments while promoting the idea of sustainable financing for health at national level, drawing on domestic financing opportunities; (3) holding regular high level intersectoral discussions among the ministries of health, finance and planning to build consensus on sustainably financing health in general and WHO in particular.

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

The meeting with the Regional Committee for Africa was the first interaction with a WHO regional committee. The WGPR noted that the COVID-19 pandemic underscored the need for fundamental changes in the global architecture for emergency preparedness and response.

The WGPR bureau, represented by the Co-Chairs, emphasized that experience sharing from countries would help to shape recommendations and went on to share the method of work and key expected outputs. In conclusion, the members of the WGPR reassured MS that they were there to listen and reflect their views. Dr Moeti in thanking the WGPR for providing the briefing, expressed the commitment of the WHO Secretariat to support mechanisms to help the two-way flow of information between the WGPR and Member States.

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

### **The Work of WHO in the African Region 2020-2021: Report of the Regional Director**

The report outlined achievements of WHO in the African Region in 2020–2021, guided by the Thirteenth General Programme of Work (GPW 13). In line with Transformation Agenda, WHO in the African Region is putting people at the centre of change through six broad workstreams. The technical priorities of WHO's work in the Region include sustaining and capitalizing on gains against poliovirus, fighting COVID-19 pandemic and other health crises and putting in place high-priority, high-impact health interventions, among others. The report noted that in the year ahead, the determined effort to fight COVID-19 will be a top priority both in rolling out the vaccines and sustaining other preventive and public health measures.

Delegates acknowledged WHO leadership in the COVID-19 response and transformation process, and in ensuring continuity of other priority programmes despite the many challenges faced. They lauded WHO and partners for their technical assistance and essential supplies, such as test kits, PPE, equipment and vaccines for the COVID-19 response.

### **Sixth Progress report on the implementation of the Transformation Agenda of the World Health Organization Secretariat in the African Region: 2020-2021**

The RC reviewed the sixth progress report on the Transformation Agenda (July 2020–June 2021) presents the progress made in driving transformation forward across the six broad workstreams of the second phase of the Agenda, namely: (1) strengthening change management processes and enhancing a values-based culture; (2) enhancing the country-focus approach for greater impact; (3) delivering quality results and value for money; (4) promoting efficiency and accountability; (5) broadening engagement with MS and partners; and (6) ensuring more effective communication

of the work of the Secretariat. The report also considers the COVID-19 pandemic and the ensuing disruption of planned transformation activities.

Delegates expressed appreciation for progress made by the Secretariat on the pledge of improving efficiency, accountability and transparency, empowerment, innovation, and resource optimization, amid a global pandemic.

### **Framework for an integrated multisectoral response to TB, HIV, STIs and Hepatitis in the WHO African Region**

The document underscored the persistent high burdens of HIV, TB, viral hepatitis and STIs in the African Region. The framework proposes the prioritization of integrated evidence-based interventions and actions using a primary health care approach in the context of achieving universal health coverage and other health-related SDG targets.

### **Framework for the implementation of the immunization agenda 2030 in the WHO African Region**

The framework prioritizes core system-level strategic actions to meet the target of leaving no one behind and ensuring universal access to immunization. It was developed through a rigorous consultative process, based on the global vision for immunization and aligns well with the Regional Committee resolution on UHC.

### **Framework for the implementation of the global strategy to defeat meningitis by 2030 in the WHO African Region**

The document argues that despite the significant progress made in combating meningitis over the past 20 years, it remains a major public health challenge globally, and its occurrence is worse in the African meningitis belt, with an estimated population of 500 million in 26 Member States. The regional framework serves to guide MS on the implementation of the Global strategy in the African Region.

### **Framework for the implementation of the global strategy to accelerate the elimination of cervical cancer as a public health problem in the WHO African Region**

The document revealed that the African Region has the highest burden of cervical cancer globally due to health system weaknesses, poor health and cancer literacy as well as social, cultural, economic and gender-based barriers that are prevalent in the Region. The Regional framework was developed to facilitate the implementation of the Global strategy to accelerate the elimination of cervical cancer by MS of the African Region

### **Framework for the implementation of the global strategy on digital health in the WHO African Region**

The document noted that although 33 MS have developed digital health strategies, the use of digital health solutions is only at pilot mode in the region due to several challenges. The regional framework was developed to mitigate that challenges and guide implementation of the global strategy on Digital Health.

### **Framework for improving access to assistive technology in the WHO African Region**

The document noted that only between 15% to 25% of the estimated over 200 million people in the Region that need at least one assistive product have access to them, due to several challenges, including weak governance and inadequate domestic funding for assistive technology among others. The regional framework aims to guide MS in planning and implementing priority interventions to promote access to assistive technology.

### **Framework for implementing the priority actions of the global plan of action of the decade of healthy ageing 2021-2030 in the African Region**

The document noted that though MS - have made progress implementing the priority interventions of the implementation framework for the Global strategy and action plan on ageing and health 2016–2030, their health and social systems are stuck at different stages. Very few (11%) have started on the processes of creating age-friendly environments, due to challenges in the systems. This new framework provides guidance to MS on developing policies and building collaborative, multisectoral partnerships to combat ageism and promote age-friendly environments

### **Framework for strengthening the use of evidence, information and research for policy-making in the African Region**

The document noted that the suboptimal use of evidence in health policy-making in the Region due to the weak capacity to use evidence. The framework provides a guide for strengthening the use of evidence, information and research for health policy-making and focuses on clarifying guiding principles and priority interventions that articulate the use of evidence, information and research for health policy-making.

### **Special event on Polio: Update on polio outbreaks and polio transition planning in the African Region**

A special session was held with an update about circulating vaccine-derived poliovirus type 2 (cVDPV2) outbreaks and polio transition planning in the African Region. The event provided opportunity to reiterate commitments to stop the outbreaks by prioritizing them in the midst the COVID-19 pandemic. MS were reminded that starting from January 2022, the Global Polio Eradication Initiative (GPEI) would shift its focus to fund only the two remaining wild poliovirus-endemic countries in EMRO and outbreak responses in the African Region. It was therefore imperative that countries accelerate implementation of their national polio transition plans.

MS reaffirmed their commitment to stop the outbreaks in a timely manner and advocated for continued financial support to the Region, including prioritizing it for supply of the novel oral

polio vaccine type 2 from the global stockpile to quickly stop all forms of polio. They also committed to mobilizing resources and shared their various country strategies and innovative approaches. Speaking on behalf of global polio partners, Dr Chris Elias, Chairperson of the GPEI Polio Oversight Board, reassured MS that nOPV2 will continue to be prioritized for the African Region for outbreak responses. Dr Moeti appealed to MS to honour their commitments and use all opportunities to mobilize resources for their national polio transition plans.

### **Special Event on the COVID-19 Response in the WHO African Region**

The Chairperson stated that the special event would take stock of the Region's response to the COVID-19 thus far, as the pandemic continued to pummel health systems and with only 2% of the population having been fully vaccinated against the virus. While commending MS for their swift action, Dr Moeti highlighted the impact of COVID-19 in the Region and called for accelerated vaccine roll-out, implementation of preventive measures, and resources to promote research and innovations, including African traditional medicines and digital technologies.

The Honourable Minister of Health, representing the President of Côte d'Ivoire, as the keynote speaker, expressed appreciation to WHO for supporting his country and commended the efforts of WHO and partners to make COVID-19 vaccines available to countries. The Regional Emergency Director, Dr Abdou Salam Gueye elaborated on the status of vaccination, citing low vaccination coverage with four doses administered per 100 population compared to the global coverage of 62 doses. He noted that some key challenges remain poor coordination for a multisectoral response, weak health system capacity including gaps in case management, medical supplies, surveillance data and information management.

Addressing these challenges Dr Anthony Fauci, Director of the US National Institute of Allergy and Infectious Diseases, stated that the main lesson learnt from the COVID-19 pandemic was the need for international cooperation. He emphasized the preparedness of the US government to pursue the ideals of vaccine equity by making vaccine available to the LMICs.

On building community trust, Dr Mwebesa representative of the Ugandan Minister of Health, described how his country used various strategies to build community trust and overcome vaccine hesitancy. Mr Kojo Boakye, Director of Africa Public Policy, Facebook, highlighted the ways in which Facebook had partnered with governments, multilateral institutions and others to take advantage of its large user base to promote access to accurate information about public health.

On the future of emergency response, the director of Africa CDC, Dr John Nkengasong, emphasized the need to integrate response activities.