The Seventy-fourth Session of the WHO Regional Committee for South-East Asia (SEA) was held on 6–10 September 2021, with Nepal as the Host. In view of the ongoing COVID-19 pandemic restriction, the Session was held virtually. The Regional Committee unanimously elected His Excellency Mr Umesh Shrestha, State Minister of Health and Population, Government of the Federal Democratic Republic of Nepal, as Chairperson of the Seventy-Fourth Session. Her Excellency Ms Dechen Wangmo, Minister of Health, Royal Government of Bhutan, was elected the Vice-Chairperson. The Committee also made a decision (SEA/RC74(1)) to adopt the “Special Procedures” to regulate the conduct of the virtual Seventy-fourth Session. A Resolution Drafting Group comprising of delegates from the Member States of the SEA Region discussed and finalized, under the Chairpersonship of Mr Tashi Penjor (Delegate of Royal Government of Bhutan) resolutions and decisions to be adopted at the Seventy-fourth Session. The Committee adopted a total of four resolutions and five decisions in this Session.

PART 1: TOPICS FOR GLOBAL DISCUSSION

• **Programme Budget 2022–2023:** The Programme Budget 2022–2023, approved by the Seventy-fourth World Health Assembly in 2021, comes at a critical time in the world providing a unique opportunity with the global public health landscape for WHO. The Committee noted that a total allocation for the Programme Budget 2022–2023 for the SEA Region is US$ 476.2 million (with a 6% increase from the biennium 2020–2021). The base budget allocation is at US$ 426.3 million (with an increase of USD 37.8 million over the current base budget of 2020–2021). The Committee further noted that a mid-term revision of the Programme Budget 2022–2023 will be presented to the Seventy-fifth World Health Assembly in May 2022, based on the recommendations of various high-level reviews conducted by WHO. A Concept Paper on the process and scope of the mid-term revision of the Programme Budget 2022–2023 was submitted to the Committee and a presentation was also made. The Committee adopted the Resolution *SEA/RC74/R2* titled “Programme Budget 2022–2023”.

1 [https://apps.who.int/iris/bitstream/handle/10665/345273/sea-rc74-decisions-eng.pdf?sequence=1&isAllowed=y](https://apps.who.int/iris/bitstream/handle/10665/345273/sea-rc74-decisions-eng.pdf?sequence=1&isAllowed=y)

2 [https://apps.who.int/iris/bitstream/handle/10665/345268/sea-rc74-r2-eng.pdf?sequence=1&isAllowed=y](https://apps.who.int/iris/bitstream/handle/10665/345268/sea-rc74-r2-eng.pdf?sequence=1&isAllowed=y)
**Sustainable financing:** The Committee was informed of the Executive Board’s decision EB148(12), establishing a time-bound and result-oriented “Working Group on Sustainable Financing” and that the Working Group has requested inputs from all Regional Committees on five questions provided in the working paper (SEA/RC74/5 Add.1). The Chair of the Working Group (Mr Björn Kümmel, Germany) and the Vice-Chair from SEA Region (Ms Meutia Hasan, Indonesia) presented an update on the progress of the work of the Working Group and stressed on the urgency and historical importance of the decision on sustainable financing. Indonesia, on behalf of the Member States from SEA Region, presented the draft Regional One Voice (ROV) statement in response to the five questions. The ROV (i) recognized the mismatch between the broad scope of WHO work and the available resources and the need for a sustainable financing model for WHO; (ii) expressed agreement to funding at least 50% of WHO base budget in sustainable manner, understanding that increase in the Member States’ Assessed Contributions may be inevitable; (iii) suggested a phased approach be adopted with an incremental schedule taking into consideration country situation due to COVID-19 pandemic; and (iv) recommended finding diverse sources of flexible funding including engagement with non-State actors and the possibility to adopt a replenishment model that is suitable for WHO. The Committee noted that Indonesia would represent the Region in the next meeting of the Working Group on Sustainable Financing and would present the ROV sharing the regional perspective on the five questions.

**Accelerating progress on prevention and control of NCDs, including oral health and integrated eye care in the WHO South-East Asia Region:** The Seventy-fourth World Health Assembly in 2021 requested WHO to develop an implementation roadmap for the prevention and control of NCDs (2023–2030), adopted a resolution to submit a Global Oral Health Strategy and to develop a Global Oral Health Action Plan by 2023 and endorsed the 2030 global targets on increasing the effective coverage of cataract surgery and effective coverage of refractive errors for patient-centred eye care. The Committee noted the uneven progress in technical areas in NCDs across countries and also the possibility of missing the global, regional and SDG targets, if business is as usual. The Committee also noted the outcome of situation analysis of oral health policies and programmes and high prevalence of oral cancer, other oral health diseases and blindness and moderate-to-severe visual impairment and lower coverage for effective cataract surgery and uncorrected refractive errors. The Committee adopted a decision SEA/RC74(2), extending the current Regional Action Plan for the prevention and control of NCDs (2013–2020) till 2030 and requesting the Regional Director to convene technical consultations to develop a Regional Implementation Roadmap for prevention and control of NCDs, a Regional Action Plan on Oral Health with monitoring framework and measurable targets and a Regional Action Plan for integrated patient-centred eye care.

Also, the Committee adopted a decision SEA/RC74(3), thereby, adopting the ‘Guide to healthy meetings’ as set out in Annex of the Addendum 1 of the Working Paper on Agenda 8.1, titled “Promoting healthy meetings in the WHO South-East Asia Region” (SEA/RC74/6 Add.1) and urged Member States to consider implementing the Guide as part of workplace health programmes.

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1 https://apps.who.int/iris/bitstream/handle/10665/345273/sea-rc74-decisions-eng.pdf?sequence=1&isAllowed=y
• **Beginning of the Decade of Action for ending viral hepatitis, HIV and STIs as public health threats by 2030 in the South-East Asia Region:** Welcoming the World Health Assembly Decision WHA74(20), which requested the Director-General to develop the Global Health Sector Strategies (GHSS) on HIV, viral hepatitis and sexually transmitted infections (STIs), for the period 2022–2030, in full consultation with Member States; the Committee adopted the decision SEA/RC74(4)³ and requested the Regional Director to develop, through a consultative process, an integrated Regional Action Plan on viral hepatitis, HIV and STIs, for the post-2021 in alignment with the SDGs and the Global Health Sector Strategies on, respectively, HIV, viral hepatitis, and STIs (2022–2030) for presenting to the next Session of the Regional Committee (RC75) in 2022.

• **Strengthening public health emergency preparedness and response in the South-East Asia Region:** Strengthening health emergency preparedness and response has been one of the most important health priorities in the SEA Region. Emergency risk management has been one of the Regional Flagship Priority Programmes of South-East Asia Region since their inception in 2014. Following the resolution WHA74.7 and recognizing the unprecedented challenges posed by the COVID-19 pandemic, a Member States’ Working Group on strengthening WHO preparedness and response to health emergencies was established in 2021. The Co-Chairs of the Working Group (H.E. Ms Grata Endah Werdaningtyas and Mr Collins Maccade) addressed the Regional Committee and provided an update on the mandate and working of the Group and the benefit of developing new WHO Convention on pandemic preparedness and response. Strengthening IHR effectiveness, implementation and compliance was considered a clear area of priority for all Member States, including strengthening core capacities at national and sub-national levels. The Committee urged new global mechanisms that enables more equitable distribution of pandemic products and facilitates technology transfer and voluntary licensing as critical priority in pandemic preparedness and response. It was proposed to explore a regional mechanism such as regional supply hub for public health emergency.

**PART 2: TOPICS OF REGIONAL SIGNIFICANCE**

• **Ministerial Roundtable on COVID-19 and measures to “build back better” essential health services to achieve UHC and the health-related SDGs:** While COVID-19 demonstrated the vulnerability of health systems in the Region, it also led to innovation and provided learning on the factors associated with “building back better” to both address health emergencies and achieve UHC and the health-related SDGs. The resolution SEA/RC74/1⁴ was adopted by the Committee endorsing the “Declaration by the Health Ministers of Member States at the Seventy-fourth Session of the WHO Regional Committee for South-East Asia on COVID-19 and measures to ‘build back better’ essential health services to achieve universal health coverage and the health-related SDGs”. It urged the Member States to implement the Ministerial Declaration and requested the Regional Director to report on progress on the implementation of the Declaration to the Regional Committee every two years until 2027.

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³ https://apps.who.int/iris/bitstream/handle/10665/345266/sea-rc74-r1-eng.pdf?sequence=1&isAllowed=y
• **Annual report on monitoring progress on UHC and health-related SDGs:** The Seventieth session of the Regional Committee for South-East Asia requested the Regional Director to include “Annual report on monitoring progress on UHC and health-related SDGs” as a substantive Regional Committee Agenda item until 2030 (Decision SEA/RC70(1)). The latest publication entitled *Monitoring progress on universal health coverage and the health-related Sustainable Development Goals in the South-East Asia Region, 2021 update*, was launched which provides a regional update on the target indicators of UHC, the health-related SDGs and Thirteenth General Programme of Work (GPW13). For the first time, it included forecasts for progress likely to be achieved towards health-related SDG indicators where projections can be modelled to 2030. The Committee welcomed the report and noted its comprehensive overview of the progress made towards the UHC and the health-related SDGs. WHO was urged to include analysis on excess mortality from the COVID-19 pandemic, unmet family planning needs and pre- and post-pandemic data in next year’s report.

• **Revitalizing school health and health promoting schools in the South East Asia Region:** Taking note of the *Health Promoting Schools initiative* launched in 1995 and the *Global Standards on Health Promoting Schools 2021*, the Committee appreciated this important agenda item and resolution proposed by Thailand, related to the health and well-being of children and adolescents, especially amid the COVID-19 pandemic. The Committee concurred that comprehensive school health programmes and accelerated actions for health-promoting schools were needed and thus adopted a resolution SEA/RC74/R3, titled “Revitalizing the school health programmes and health promoting schools in the South-East Asia Region”. The resolution requested the Regional Director to develop a regional roadmap with monitoring framework and targets to implement global standards and indicators for health-promoting schools and systems before the end of 2022 in consultation with Member States.

• **Strategic Framework of the South-East Asia Regional Vaccine Action Plan 2022–2030 as aligned with the Global Immunization Agenda 2030:** The Committee endorsed the Strategic Framework of the South-East Asia Regional Vaccine Action Plan 2022–2030 and expressed commitment and full support for developing implementation plan covering the period 2022–2026 to meet the global, regional and national targets. The Committee urged Member States to initiate urgent actions to restore immunization services and vaccine-preventable disease surveillance disrupted due to the COVID-19 pandemic by applying principles outlined in the Strategic Framework.

• **WHO Transformation:** The Committee, which taking a note of the comprehensive report on WHO Transformation, appreciated the Secretariat for making reform an integral part of the business and ensuring continued focus on country priorities and achievement of the Regional Flagship Priority Programmes. The Committee also commended WHO leadership in the SEA Region in the time of COVID-19 pandemic for maintaining regular contact with Member States and for publications of enhanced volume of guidelines, publications and other information products on COVID-19. The Committee welcomed the establishment of a Regional Results Measurement Framework, completed with a compendium of indicators with regional and country baselines and targets and the launching of a Knowledge Hub to support the delivery for impact of the Transformation Agenda. The need for integration of digital health agenda with effective health service deliver was emphasized.

3 https://apps.who.int/iris/bitstream/handle/10665/345269/sea-rc74-r3-eng.pdf?sequence=1&isAllowed=y
• **Time and place of future Sessions of the Regional Committee:** The decision *SEA/RC74(5)* was adopted by the Committee on this agenda.

During the Regional Committee meeting, physical activity sessions of 3-minute energizers were held on all five days. Video footage on stretching exercises at the desk were broadcast during these sessions. From 7-10 September 2021, morning exercises for 40 minutes duration for the delegates were broadcast live at 7:00 am (Nepal time) on social media platforms (Facebook and YouTube) on each day of the RC session.

A video-launch of WHO SEARO Publications was held immediately after the Ministerial Roundtable, wherein twenty-three regional publications were launched.

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6 [https://apps.who.int/iris/bitstream/handle/10665/345273/sea-rc74-decisions-eng.pdf?sequence=1&isAllowed=y](https://apps.who.int/iris/bitstream/handle/10665/345273/sea-rc74-decisions-eng.pdf?sequence=1&isAllowed=y)