

TEMPLATE FOR PREPARATION OF REPORTS BY THE REGIONAL COMMITTEES TO THE EXECUTIVE BOARD:

Title:

Sixty-seventh session of the WHO Regional Committee for Africa, Victoria Falls, Republic of Zimbabwe, 28 August – 1 September 2017

Subtitle:

Summary report by the Chairperson, Dr David Pagwesese Parirenyatwa, the Minister of Health and Child Care of the Republic of Zimbabwe

Headings:

PART 1: TOPICS FOR GLOBAL DISCUSSION

- Implementation of the International Health Regulations (2005)
- WHO Reform
- The Role of the health sector in the Strategic Approach to International Chemicals Management
- Proposed programme budget 2018-2019

Implementation of the International Health Regulations (2005)

The document, International Health Regulations (2005): Review of the Draft Five-Year Global Strategic Plan To Improve Public Health Preparedness and Response was presented to obtain contributions of Member States to its finalization as requested in decision WHA70(11) (2017). In addition to 12 guiding principles, the document outlined three pillars, namely: building and maintenance of the core capacities of States Parties as required by the IHR (2005); event management and compliance; and measurement of progress and accountability.

Member States welcomed the draft document and appreciated their involvement in the ongoing consultative process. They endorsed the 12 guiding principles and three pillars outlined in the draft strategic plan. They underscored the need for technical and financial support for the implementation of national action plans as well as the need for multisectoral collaboration in preparing and responding to outbreaks and emergencies.

WHO Reform

The implementation of the Transformation Agenda of the WHO Secretariat in the African Region: 2015–2020, a vision of the Regional Director, aimed to accelerate the implementation of the WHO reform within the African Region was discussed. An independent evaluation of the first two years of the Transformation Agenda, conducted in January 2017 by the WHO Evaluation Office in Geneva, showed that considerable progress had been made on the four focus areas, namely pro-results values, smart technical focus, responsive strategic operations, and effective partnerships and communication.

Member States noted with appreciation the improvement in WHO communication and engagement with countries and partners, leading to the establishment of structures for effective response to natural disasters and outbreaks. They also noted improvements in accountability and financial management. Some of the next steps include implementation of key performance indicators; institutionalization of the core principles of the TA; improved communication; engagement of Member States in the country-level reforms; and implementation of the recommendations contained in the mid-term evaluation report

Proposed programme budget 2018-2019

Regional orientation on the implementation of the WHO Programme Budget 2018-2019 was presented outlining the budget distribution to countries and to the Regional Office as well as steps required for its implementation, in alignment with the five strategic priorities of the Transformation Agenda.

Member States noted that the allocation for noncommunicable diseases (NCDs) appears to be low, in view of the increasing NCD burden in the Region and the new initiatives being planned to address this burden. They appreciated the 3% increase in assessed contributions, and advocated for increased efforts to mobilize more domestic and other resources, which might be more flexible.

PART 2: TOPICS OF REGIONAL SIGNIFICANCE

Framework for Health Systems Development towards Universal Health Coverage in the Context of the Sustainable Development Goals in the African Region.

The document emphasized that UHC attainment underpins the achievement of the health and health-related SDG targets and requires a strong and responsive health system. The document presented an approach that Member States need to consider in order to strengthen and realign their health systems, to ensure that they are able to achieve their health development goals. It proposed options for priority actions to guide comprehensive and integrated health system investments to expand availability and coverage of health services, scale up financial risk protection, improve client satisfaction and address health security challenges. It also proposed measures for monitoring health systems performance and results, including health system resilience, access to services, quality of care and effective demand and utilization of services.

Member States agreed that the implementation of the Action Framework would significantly contribute to the achievement of UHC and the health-related SDGs. They also emphasized the importance of primary health care, and ensuring equity in access to services as well as interventions to reach communities.

The following recommendations were made to WHO and partners:

- a. advocate through the action framework for the separation of functions related to policy-making, provision and regulation of services;
- b. ensure that the monitoring framework has clear indicators for assessing the quality of services and financial protection; and

- c. provide technical assistance to countries to adapt the framework to their context and develop a road map towards the achievement of UHC.

Regional Strategy for the Management of Environmental Determinants of Human Health in the African Region 2017–2021.

This document revealed that 23% of premature deaths in the Region are attributable to unhealthy environments. The strategy is to guide Member States to address health and environmental linkages, in order to reduce the burden of diseases attributable to environmental determinants. The strategy focuses on safe drinking-water, sanitation and hygiene, air pollution and clean energy, chemicals and waste, management climate change, vector control and health in the workplace. Member States highlighted the timeliness and importance of this document and called for the adoption of the “One-Health” approach proposed in it. They also emphasized the need to strengthen multisectoral collaboration, public-private partnerships, and community empowerment to guarantee a successful response.

The following recommendations were made to WHO and partners:

- a. support countries to develop policies, laws, surveillance systems and tools on adequate environmental protection;
- b. support countries to conduct environmental mapping of health risks and mainstream environmental health issues into all levels of the educational system;
- c. raise sufficient funds for research to close existing knowledge gaps; and
- d. build the capacity of local actors and institutionalize roadmaps to measure progress in countries.

Framework for Implementing the Global Strategy to Eliminate Yellow Fever Epidemics (EYE), 2017-2026 in the African Region.

This document noted that despite the availability of a vaccine that confers lifelong immunity, the majority of countries in the WHO African Region are at risk of yellow fever epidemics. It recalled that the Region faces the multiple challenges of suboptimal routine yellow fever vaccination coverage, frequent vaccine stock-outs and inadequate implementation of the International Health Regulations (IHR 2005) among others. The framework aimed at guiding Member States to implement the Global Strategy in order to eliminate yellow fever epidemics and the framework.

The following recommendations were made to Member States:

- a. adapt the best practices that helped with polio eradication for the elimination of yellow fever epidemics;
- b. enforce the application of the International Health Regulations (2005),
- c. optimize yellow fever vaccination coverage as a critical factor for successful elimination of yellow fever epidemics.
- d. enforce that certificates with security features are used to hinder the use of fake certificates.

The following recommendations were made to WHO and partners:

- a. request vaccine producers to increase vaccine stockpiles;
- b. disseminate the global strategy and build the capacity of countries to implement it;
- c. support yellow fever endemic countries to ensure vaccination of all eligible people including screening and vaccination at border posts;
- d. support building and coordination of a laboratory network for early confirmation of suspected cases; and
- e. support research activities to speed up action against yellow fever epidemics, including the use of the fractional dose.

Reducing Health Inequities through Intersectoral Action on the Social Determinants of Health

The document noted that the health of the population and health inequalities are influenced by the conditions in which people are born, live, grow and age. They are also influenced by the broader determinants of health, which are predicated on policies, governance structure, political and economic factors, as well as the environmental and developmental issues in countries. It therefore stressed the need to urgently reduce health inequities in order to improve the health of the population in the African Region. It indicated that reducing health inequities requires the adoption of a multisectoral approach to addressing wider socioeconomic and structural factors and tackling the underlying causes of disease, inaccessibility of health-care services and the paucity of quality services.

The following recommendations were made to Member States:

- a. provide policy, legislative and regulatory frameworks to strengthen intersectoral coordination and collaboration in addressing social determinants of health;
- b. strengthen leadership in health development;
- c. promote the generation and use of evidence, including research;
- d. encourage international cooperation for knowledge and skills sharing;
- e. address the changing landscape, focusing on areas like urbanization; demographic transition; and social and economic health developments; and
- f. strengthen collaboration with the private sector to close existing gaps.

The following recommendations were made to WHO and partners:

- a. continue supporting countries to implement the 'Health in All Policies' and 'One Health' approaches; and
- b. assist countries to develop tools for the collection and dissemination of reliable data.

Global Health Sector Strategy on Sexually Transmitted Infections, 2016–2021: Implementation Framework for the African Region (Document Afr/Rc67/7)

The implementation framework highlights the highly endemic nature of sexually transmitted infections (STIs). It noted that the African Region is particularly affected, with a high incidence of these infections, estimated at 63 million curable cases in 2012, representing 18% of global incidence. In order to adequately respond to this high burden of disease and in line with the 2030 Agenda for Sustainable Development, WHO has developed a global health sector strategy on STIs, 2016–2021, whose goal is to end STI epidemics. The framework is thus aimed at supporting Member States to implement the global strategy. The actions proposed include prioritizing STI prevention, expanding STI testing services and scaling up treatment.

Member States highlighted some potential challenges in the implementation of the framework, such as the inadequacy of data, insufficient funding and laboratory capacity to monitor antimicrobial resistance. They underlined the need to strengthen the integration of STI services into other programmes such as HIV, sexual and reproductive health as well as maternal and adolescent health. In addition, they expressed the need to reconsider and make the HPV vaccination target more ambitious. They highlighted that untreated STI is a risk factor for infertility. However, the high cost of HPV vaccine for those countries that have transitioned or are transitioning out of GAVI support was mentioned as a barrier.

The following recommendations were made to WHO and partners:

- a. provide guidance on dual testing for HIV and syphilis, given the focus on dual elimination;
- b. assist in making HPV vaccine available to countries; and
- c. support the building of the requisite capacity to accelerate the implementation of the framework, including strengthening laboratory and surveillance systems.
- d. Sensitize population on the contribution of untreated STIs to infertility.