



*In the Name of God, the Compassionate, the Merciful*

**Address by**

**DR ALA ALWAN**

**REGIONAL DIRECTOR**

**WHO EASTERN MEDITERRANEAN REGION**

**to the**

**SIXTIETH SESSION OF THE WHO REGIONAL COMMITTEE**

**FOR THE EASTERN MEDITERRANEAN**

**Muscat, Oman, 27–30 October 2013**

Your Royal Highnesses, Mr Chairman, Your Excellencies, Ladies and Gentlemen,

It is my great pleasure to welcome you all here today to the sixtieth session of the Regional Committee.

Let me express my appreciation to our host His Highness Haitham Bin Tarik Al Said, Minister of Heritage and Culture, and to the Government of Oman for their kind invitation and for their generous hospitality to all of us here today. Oman has made impressive achievements in health in the past few decades through its sustained commitment to health development and careful planning. The excellent collaboration over the years between WHO and Oman is a model that we aim for with all our Member States, and as Regional Director I extend my particular appreciation to Oman for this admirable achievement.

Let me also thank Her Royal Highness Princess Muna Al Hussein for honouring us with her presence here today and giving a keynote speech. Your Royal Highness, allow me to express our great appreciation for your continued support to WHO programmes and initiatives, regionally and globally, and for your dedication to the cause of the health workforce, in particular in nursing and midwifery.

Ladies and Gentlemen,

During this 60th session of the Regional Committee, we will be reviewing with you what we have collectively achieved so far in the past year, as well as seeking your guidance on what else we need to do, where we should be focusing our efforts and continuing the dialogue on what we need to do together to improve public health in our region. Last year I presented to you for your endorsement the strategic priorities for the Region for the period of my office, together with the key strategic directions. These were the result of considerable consultation with and active engagement from Member States and we were keen to reflect these priorities and strategies in everything we do. Indeed, my annual report, which I will present tomorrow, will reflect what we have done in these areas in the past year.

In each of the strategic priority areas, the secretariat has implemented a full agenda, particularly in the area of health systems strengthening. This is an area that concerns each and every Member State.

There is a growing global momentum also around the concept of universal health coverage. What do we mean by this term? Essentially it is a way of ensuring that everyone can get the health care they need, at an acceptable standard of quality, when they need it and without incurring financial hardship. There are many paths to achieving universal health coverage. But there can be no doubt that a commitment to universal health coverage is the main goal for all health systems.

This is particularly clear for the health of mothers and children. Despite the considerable progress that many countries have made, there are still a number of countries with a high burden of maternal and child mortality. In the past year we have worked with these countries to develop acceleration plans with a view to achieving Millennium Development Goals 4 and 5. Let me express my appreciation for the excellent work that has been achieved by these countries in developing these plans. We will undoubtedly face challenges in implementing them, both logistic and in resource mobilization, and we will need to address these challenges.

Ladies and Gentlemen,

Our collective health security is of paramount importance to all of us. The International Health Regulations (2005) are an important tool to help us maintain that security. In an era of increasing international trade and travel, and as new threats to public health emerge, the regulations are for the protection of health security around the world. Therefore, it is vital that all the concerned sectors in every country are able to comply with the requirements for implementation by the final deadline. .

The emergence of the new coronavirus, Middle East respiratory syndrome (MERS-CoV), is a clear example of why we need the International Health Regulations. Although it has not been declared a public health emergency of international concern, it is correct that we continue to monitor the situation closely and with transparency. This year we organized two international meetings on the subject, during which top international experts discussed a range of technical issues. We still do not know everything we need to know about the MERS-CoV virus and how best to treat it, and we need to develop an effective vaccine. We are working closely with Member States and partners on the issue and will continue to keep you informed.

Let me take this opportunity, in talking about health security, to congratulate the Minister of Health of Saudi Arabia on the successful and healthful conclusion of the *hajj*. We all appreciate very much the efforts made by the Government of Saudi Arabia to ensure the health and safety of the pilgrims.

Polio remains a serious issue. While we have seen a substantial decline in the number of cases in 2013 in 2 of the remaining 3 endemic countries, Afghanistan and Nigeria, compared to 2012, this substantial level of decline has still not been seen in Pakistan. Of greatest concern, there are new polio-infected pockets in new areas of the Region which used to be polio-free and where vaccinators have not been able to reach children for a long time. This poses an increasing international health threat. The continued existence of the virus and its recent transmission to new countries is undoubtedly creating a huge challenge. On our part, we continue to operate on the basis that we face an emergency that is threatening all countries of the world, and all Member States must remain on high alert.

Excellencies, Ladies and Gentlemen

Let me turn to the epidemic of noncommunicable diseases, in particular heart disease, diabetes and cancer, which is affecting all the countries of the Region and taking a growing toll on its people. In parallel, the economic loss for individuals, families and governments is also rising. Unfortunately, we are still focusing on addressing these diseases from the angle of treatment only. Not enough is being done from the angle of prevention and awareness-raising.

Last year, you, the Regional Committee, endorsed a regional framework for action on the commitments of Member States to implement the United Nations Political Declaration. You agreed with us on the vision and the roadmap and you acknowledged that intensive action is needed to implement the high-impact measures to prevent these diseases. You asked us to work on how these measures could be implemented and, thus, this year has seen a series of activities conducted with you, the Member States, on the development of technical guidance. I am pleased that a few countries have already started to implement this guidance but much more needs to be done.

Among the issues that you will discuss this week, let me draw your attention to the challenges of health and the environment which are of great concern. They are hindering achievement of the Millennium Development Goals, and will continue to hinder achievement of long-term health and sustainable development. I look forward to some agreement on moving forward in this area.

Ladies and Gentlemen,

Our Region continues to be a region in which a state of emergency seems almost to have become a way of life. Protracted conflicts and crises have long-term consequences for health. Public health gains accumulated from decades of hard work and investment are wiped away in just a few months. Hospitals and health personnel are targeted as a means of terrorizing local populations. The side-effects of embargoes and economic sanctions deprive patients of vital medicines and services which they need for survival. It is crucial that humanitarian staff be allowed to do their work without threat of personal danger, in accordance with international humanitarian law, and that health care services, medicines and other critical live-saving supplies are given free passage in order to reach those who need them.

Now, we have a major humanitarian situation within the Syrian Arab Republic and its neighbours as the numbers of displaced and refugees continue to rise. This is having severe consequences for the health services of all the countries concerned, and the growing seriousness of the situation for everyone is reflected in the possible re-emergence this month of polio inside Syria which has been polio-free for so many years. I urge you, as health ministers to maintain the solidarity pledged last year to support health care for Syrians inside and outside Syria. We are working with our United Nations partners to reach those whom we can access and who need health humanitarian relief and will continue to strengthen these efforts. In this respect, I would like also to acknowledge the generous contributions from many donors to the relief efforts, with a special gratitude to Kuwait for its generous support to WHO which has enabled us to implement effective health assistance to Syria and neighbouring countries.

Despite the huge challenges facing us, let me salute the heroism and the dedication of the health workers who are providing humanitarian services, sometimes at the risk of their own lives.

Excellencies, Ladies and Gentlemen,

Your session this year focuses on key issues for long-term health development in the Region. At the same time, through the WHO reform process in which you as Member States are all involved, the future of the Organization continues to be reshaped for the demands and requirements of a changing world. My staff in WHO and I are ready to do our part. I urge you to continue to be engaged with this process so that the Organization you wish to see, and that can respond to your needs, is brought about.

I wish you a successful sixtieth session.