Executive summary of key achievements
Communicable diseases

1. Remarkable progress was achieved in the area of communicable diseases prevention and control in the South-East Asia (SEA) Region*. The global targets for tuberculosis case detection and treatment success were met in majority of Member countries. Leprosy prevalence declined remarkably, and, while detection of new cases continues, only two countries have yet to achieve the goal of elimination. Progress was made in interrupting the transmission of lymphatic filariasis, with mass drug administration covering 60% of the target populations. A remarkable decline in yaws was observed, and case management of kala-azar improved. However, the burden of communicable diseases still exists. Diarrhoeal and respiratory infections cause substantial mortality. Dengue continues to pose a major public health problem. Almost half of global avian influenza cases are reported from the Region. In terms of HIV infection, the Region is the second-most affected WHO region. Chikungunya fever is re-emerging and outbreaks of Nipah virus infections are reported. Drug-resistant malaria has spread. The following key achievements addressed these challenges.

Building up outbreak response

- International Health Regulations (IHR) core capacity assessments completed. High-level national task forces on avian influenza (AI) and coordinating bodies with ministries of health, livestock, home affairs and education established.
- Three-month field epidemiology training programme developed.
- Over 2000 health personnel trained in rapid response and containment of outbreaks.
- Laboratory capacity for detection and diagnosis of AI and other infectious diseases strengthened.

* Bangladesh, Bhutan, DPR Korea, India, Indonesia, Maldives, Myanmar, Nepal, Sri Lanka, Thailand, Timor-Leste.
Controlling epidemics and scaling up HIV services

- A set of training modules for national AIDS programme management published; regional training of programme managers concluded.

Implementing the new Stop TB Strategy

- Interventions for managing multidrug-resistant TB established and TB-HIV scaled up; improved management of drug procurement and supply implemented.
- Member countries now have access to quality-assured affordable anti-TB drugs on a regular basis.

Implementing the revised Malaria Control Strategy

- Framework for implementing integrated vector management at district level formulated.
- National treatment guidelines revised and artemisinin-based combination therapy (ACT) adopted.

Improving access and implementation of the Global Fund grants

- Eight proposals worth about US$ 200 million accepted by GFATM in Round 7.
- Assessment of usefulness and impact of WHO support in relation to GFATM grants showed that in spite of a range of significant challenges, WHO’s efforts have had a positive impact and are appreciated.

Aiming to reverse the rising trend of dengue

- Strategic Plan for Dengue Control 2008–2015 drafted to guide Member countries in developing national operational plans.

Implementing strategy and policy in zoonoses

- Regional Framework defining strategy and policy for zoonoses control finalized.
- Review of the avian influenza situation conducted and actions required to prevent and control AI in the Region formulated.
Sustaining control activities in leprosy

- Leprosy programme activities intensified and focused on priority countries.
- Leprosy post-elimination strategy adopted, revised and translated (as necessary).
- Guidelines for Global Surveillance of Drug Resistance for Leprosy developed.

Eliminating lymphatic filariasis and controlling soil-transmitted helminth infections

- The Regional Strategic Plan for Elimination of Lymphatic Filariasis revised.
- National focal points for soil-transmitted helminthiasis appointed and national deworming policies formulated.

Building up to elimination of kala-azar

- International mission determined the technical and operational challenges, reviewed progress in implementation and the epidemiological trends, and identified needs for improvement in kala-azar elimination activities.

Eliminating and eradicating yaws

- Proposal for the eradication of yaws in endemic countries developed and implementation initiated.

Strengthening national and regional resources for blood safety and clinical technology

- Laboratory capacities strengthened for diagnosis of TB and emerging viral infections, guidelines for accreditation of laboratories produced, and training on management of infectious material conducted.
- All aspects of blood safety related to policies, quality, management and access to safe blood addressed.

Strengthening country capacity in tropical diseases research

- Ten research proposals of the TDR small grants programme supported.
Noncommunicable diseases and mental health

2. Chronic noncommunicable diseases continued to be the major causes of death and morbidity in the Region. High levels of modifiable risk factors for noncommunicable diseases have been detected in the populations of South-East Asia, indicating potential for effective prevention. Tobacco use kills more than one million people in the Region annually. The treatment gap for neuropsychiatric conditions is large. One-third of the global burden of injuries is accounted for by the Region. These challenges are increasingly being addressed; key achievements are summarized below.

Developing comprehensive commitment for noncommunicable diseases

- Regional Framework for Prevention and Control of NCDs endorsed by the Sixtieth Session of the Regional Committee used to guide development of national policies, plans and programmes.
- Capacity strengthening workshops for NCD programme managers based on technical materials developed by the Regional Office for South-East Asia conducted, with WHO support.

Aiming for collective action in mental health

- Strategy for training village-based workers to identify the most common and disabling neuropsychiatric conditions implemented.
- Community-based surveys on patterns of alcohol use, and harm from alcohol use, conducted.

Nurturing a multisectoral approach in health promotion and education

- Regional profile on the social determinants of health compiled.
- Regional Strategy for Health Promotion for South-East Asia published.
- Data collection and analysis training conducted under the Global School Health Survey.

Expanding knowledge and awareness of the tobacco epidemic

- Various tobacco surveys conducted; regional strategy developed for utilization of tobacco surveillance data.
• Work on tobacco control implemented in conjunction with the TB programme.

**Focusing on prevention of injuries, violence and disabilities**

• National plans and implementing mechanisms for prevention of selected injuries formulated.
• A Situation Review and Update on Deafness, Hearing Loss and Intervention Programme published.

**Family and community health**

3. The majority of Member countries were on track towards achieving the MDG target in reducing under-five mortality, but there is no room for complacency as half of the countries need concerted efforts to reach the MDG target for improving maternal health. In reducing the prevalence of mild and moderate malnutrition, progress is slow. In the area of immunization, polio cases were reported from the Region. The work was focused on these challenges.

**Moving towards Millennium Development Goal 4 in child health**

• Implementation of the Integrated Management of Childhood Illness Strategy expanded to additional geographical areas.
• Regional initiative for improving quality of care for children in hospitals launched.

**Increasing sensitivity to adolescents’ health needs**

• Data on adolescent health from various sources analysed, and national profiles on adolescent health initiated.
• National standards to help countries measure the quality of services for adolescents developed.

**Dealing with malnutrition through a life-course approach**

• National action plans on nutrition and food safety drafted.
• Regional pool of master trainers on new WHO growth standards created.
Improving the quality of maternal and newborn health care

- Human resources for maternal and newborn health strengthened through midwifery training in Member countries with a low proportion of deliveries by skilled birth attendants.
- Essential newborn health care during child birth and post-natal period at primary health-care level implemented.
- Method for improving the quality of maternal and newborn health care including at first referral hospital introduced for country adaptation.

Confronting the challenges in reproductive health

- The Global Reproductive Health Strategy promoted for implementation within the regional context.
- Initiatives for preventing and managing unsafe abortion supported.
- WHO guidelines on preventing and managing reproductive tract infections adapted and pilot-tested.

Promoting gender equity

- Regional Strategic Directions formulated, enabling Member countries to develop national plans for gender analysis and actions.
- Framework for assessing gender and health drafted, focusing on a database management system and use of available tools.

Focusing on polio and new vaccines

- Massive efforts to stop polio in the Region undertaken.
- Regional laboratory networks (polio, measles, Japanese encephalitis) established, fully accredited and functioning; in polio surveillance, particular attention is paid to cross-border issues.
- New and under-utilized vaccines (hepatitis B, Japanese encephalitis, Haemophilus influenzae type b-Hib, and the pentavalent – DTP+Hep+Hib formulation) piloted and introduced; three vaccine manufacturers in the Region selected to develop seasonal influenza vaccine.
Sustainable development and healthy environments

4. Member countries made important strides towards increasing water supply coverage. Environmental factors including climate change and global warming pose a challenge for the Region, with possible long-term implications for health status. Nine hundred million people still lack access to improved sanitation. More than 70% of workers are not covered by occupational health provisions. In the area of health-care waste management, there is a major gap between the legal framework and its implementation. Public awareness of food hygiene related to food standards is limited, as is the food safety surveillance system. More than half the global number of deaths due to natural disasters occur in the Region. During the period under review, floods and cyclones killed tens of thousands and affected millions. In addressing these challenges, some important achievements of WHO’s work are described below.

Ensuring safety and adequacy of water supply and sanitation

- Water safety plans including water quality standards and the household treatment and safe storage approach pilot-tested.
- Ecological sanitation pilot-tested and found useful. Regional advocacy activities led to countries organizing subsequent activities.

Controlling workplace exposure in occupational health

- Adoption of the “occupation risk management toolbox” initiated in the Region.
- National profiles and action plans for protecting and promoting workers’ health developed.

Taking up the challenges in climate change and human health

- Regional framework for action to protect human health from the effects of climate change prepared.
- The SEA Region made significant contribution to selection of the topic “Protecting Health from Climate Change” as the World Health Day theme for 2008, and to the World Health Assembly resolution on climate change and health.
Supporting country activities on chemical safety

- Regional training curriculum for integrated vector management drafted and made available for Member countries to adapt.
- Assessment of water contamination, strengthening of sound management of hazardous chemicals, and exchange of information on mercury reduction supported.

Supporting national initiatives in health-care waste management

- National strategies and guidelines on management of health-care wastes developed.
- Training courses on strengthening the management (handling to disposal) of health-care wastes, including used syringes, developed and conducted.

Enabling the health sector in food safety

- National training activities on food safety and food standards, including implementing healthy food markets, supported.
- Studies on presence of pesticide residues in food products conducted and the need for total diet studies to improve food safety regulations and policy in the Region promoted.

Addressing the vulnerability of the SEA Region populations to natural disasters

- The SEA Region Benchmarks for Emergency Preparedness endorsed by the Health Ministers’ Meeting (through the Thimphu Declaration). As a follow-up, regional and national consultations on the safe hospitals initiative conducted.
- WHO acted as lead coordinating agency for the health cluster in emergencies.
- The South-East Asia Emergency Fund established to ensure easy accessibility of funds in an emergency. The Fund was activated in recent natural disasters.

Health systems development

5. Investing in the health system will, in the long term, save financial resources and make international and national health goals achievable. However, there are constraints in the health systems of the Region. These
mean that, while a significant proportion of the population does not have access to health services, of the patients that do have access, a substantial proportion still does not receive quality health care, leading to unnecessary morbidity and mortality, not only in remote areas and in vulnerable populations but also in hospitals. There is limited coverage by various health insurance schemes in many Member countries, resulting in high out-of-pocket expenditure. Efforts to produce the maximum benefit of medicines for health continues. Health data analysis and capacity of data management at the district level is a continuing issue in health information. The Region has an acute shortage of trained health workers, including community-based workforce, which can play an effective role in empowering the community. The capacity of some training institutions to train medical, nursing and other technical staff remains low. WHO’s work to confront these difficult challenges continued and the following outcomes were achieved.

**Focusing on management in health services delivery and policy**

- Regional Plan for Strengthening Health Services Management developed.
- Support from GAVI for health systems strengthening received for six Member countries.

**Improving quality and safety of health care**

- Declaration on “Patients for Patient Safety in the SEA Region countries” endorsed by the Regional Committee for South-East Asia.
- Roles and responsibilities for the medical councils in improving patient safety were elucidated.

**Improving equity in health financing**

- Support for establishing contributory mechanisms to supplement tax-based financing of health schemes that provide effective protection for the poor is ongoing.
- Countries are being assisted to improve efficiency in the use of resources, including public sector performance.

**Expanding activities in research policy and cooperation**

- Regional task forces established: (1) to address responsibility and priority areas for AI research, and (2) to address countries’ capacity in health research management.
• Modules on research management revised, consolidated and endorsed.
• Good clinical practice, research ethics, international standard operation procedure and pre-survey for recognition award training activities conducted.

The continuing journey in essential medicines
• Regional Strategic Framework for Promoting Rational Use of Medicines through Education drafted.
• Improvement in selecting medicines for national essential medicines lists, with incorporation of children’s medicines, expected as a result of a regional workshop.

Strengthening country health information systems
• Common standards of format, content and process for reporting of health statistics in Member countries formulated.
• Processes for better utilization of health information by decision-makers identified.

Promoting widespread access to health information
• Regional Institutional Repository of WHO information products made available online.
• Special “display corners” set up for WHO publications in five Member countries; support and training on upgraded WHO library and information systems provided.

Extending the health workforce
• Regional strategic directions for strengthening the community-based health workforce and community health volunteers developed.
• Issues such as medical ethics, quality assurance in medical education and accreditation of medical schools, continuing medical education for professional development and patients’ safety elaborated and followed up by the Regional Network of Medical Councils.
• Regional Strategic Plan for Health Workforce Development formulated.
Developing the health workforce in nursing and midwifery

- Guidelines on Quality Assurance and Accreditation of Nursing and Midwifery Educational Institutions drafted and adopted.
- A diploma programme in nursing, a quality system for nursing education and service, and a bridge programme in nursing developed.

Streamlining the process for education, training and support

- Several mechanisms are under review and development to help countries develop (i) better selection process, (ii) better utilization of the fellows, and (iii) timely implementation of the planned fellowship.
- The processes are also being developed to monitor the training of the fellows and their performance evaluation.

Policy, programme planning and partnership

6. The mobilization of resources for health programmes in the Region has been remarkable. The area of partnership requires continued effort to ensure that health is at the centre of stakeholders’ interests. Intellectual property rights and TRIPS standards would require increased attention in Member countries. The achievements of technical programmes broadly depend on political commitment at the national level and the resources available; governing body resolutions are the tools which can make these commitments realizable. Key achievements in these areas are listed below.

Governing bodies

- The Sixty-first World Health Assembly adopted 21 resolutions (i.e. on health impact from climate change; on tackling noncommunicable diseases; on eradicating polio; and preparing for influenza pandemic, etc.).
- The Sixtieth Regional Committee for South-East Asia adopted 10 resolutions, including: nutrition and food safety; prevention and control of noncommunicable diseases; implementation of the new Stop TB Strategy; the revised Malaria Control Strategy; and international migration of health personnel.
Important meetings

- The Twenty-fifth Meeting of Health Ministers adopted the Thimphu Declaration on International Health Security to work together for the implementation of international health security.

- Parliamentarians from Member countries pledged full support towards realizing a Call for Action regarding harm from alcohol and tobacco use.

- The Joint Meeting of Health Secretaries of Countries of the WHO SEA Region (HSM) and Consultative Committee for Programme Development and Management (CCPDM) reviewed thoroughly and provided recommendations on each of the agenda items of the Sixtieth Session of the Regional Committee and 25th Health Ministers’ Meeting. This ensured that RC and HMM were able to complete their agendas in a most efficient and effective manner.


- Regional Seminar on Strengthening International Health Coordination (IHC) at country level conducted. A regional action plan to strengthen IHC adopted.

Working towards global action in intellectual property, innovation and public health

- Several regional consultations on public health, innovation, essential health research and intellectual property rights organized and common understanding of Member countries on crucial issues achieved.

Consulting and supporting countries in programme planning and coordination


- Member countries fully involved at each stage of preparation of the Programme Budget workplan.

- Actions and follow-up to improve performance of WHO Representatives related to their roles and responsibilities formulated.
Country Cooperation Strategy reviews, to analyse WHO’s work and focus the agenda, undertaken.

Accessing voluntary and external resources

- WHO regional and country office efforts in resource mobilization intensified, and a total of US$ 344 million in voluntary contributions mobilized.
- 183 donor agreements with 45 donors and partners concluded.

Pooling resources in strategic alliance and partnership

- Regional consultation on UN reform concluded that interaction between ministers of health, foreign affairs, finance and planning would enable Member countries to benefit optimally from their membership of, and influence reform of, the international organizations.
- Memorandums of understanding (MoUs) were signed with UNEP to support the Regional Initiative on Environment and Health, and with UNODC to promote public awareness on the dangers of drugs.

Strengthening strategic communications for public relations and media

- SEARO communications network formed.

General management

7. Expectations from the new global management system (GSM) are high. Based on extensive preparatory work by the WHO administration during the period under review, some important developments in the areas of human resources, budget and finance, informatics, procurement, general support and field security were achieved.

Preparing for the new system in global management

- Plans to ensure regional readiness for GSM developed and work is under way on realigning the business framework and Organization’s structure, training staff, and getting information technology infrastructure and connectivity ready.
Strengthening WHO country capacity in human resources

- WHO’s presence at country level strengthened by establishing new professional posts.
- A gender balance in new appointments of professional staff maintained.

Budget and financial management

- Financial discipline strengthened through implementation of the delivery principle, which resulted in fewer carry-overs of unliquidated expenditures.
- Approximately 70% of expenditure funded by voluntary contributions.

Playing a role at all levels in informatics and infrastructure services

- A strong account management process, and customer-oriented services management through service-level agreements, further enhanced.
- ICT infrastructure review for all country offices carried out and activities to upgrade completed.

Procurement services

- All Regional Office procurement of goods, materials and services centralized under the Medical Supply unit.
- The overall supplies procured for Member countries and the Regional Office was approximately 59% higher than in the previous year.

General support and field security services

- Renewal of infrastructure, renovation of office environments, and enhanced management of stores and archives implemented.
- Number of new safety and security initiatives and training programmes introduced.
Executive summary of key achievements