

### RC news

1-4 October 2012

Fifty-ninth session of the **Regional Committee for the** Eastern Mediterranean

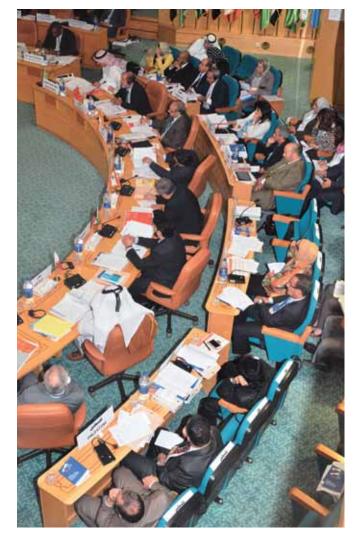
Issue #3

### 59th session of the **Regional Committee** concludes

he WHO Regional Committee for the Eastern Mediterranean concluded its 59th session by calling upon Member States to provide support to alleviate the suffering of refugees and internallydisplaced persons in the Syrian Arab Republic and neighbouring countries. It also expressed solidarity for Afghanistan and Pakistan in their efforts to eradicate poliomyelitis and requested Member States to ensure that a 100% smoke-free policy is implemented in all public places.

Following the approval of the Regional Director's annual report for 2011, the Committee requested the Regional Director to take the necessary steps to ensure implementation of the strategic directions proposed for the next five years.

Regional Committee, WHO's governing body in the Eastern Mediterranean Region, endorsed the Riyadh Declaration of the International Conference on Healthy Life styles and Noncommunicable Diseases in the Arab World and the Middle East and also endorsed the regional framework of action on the commitments



of Member States to implement the recommendations of the United Nations Political Declaration on Noncommunicable Diseases. The 59th Session of the Regional Committee concluded on 4 October 2012 in the Regional Office in Cairo.

In its resolutions, the Regional Committee called for strengthening national health information systems by improving reporting of births, deaths, morbidity and causes of deaths, in addition to risk factors and social determinants of health. It also called on Member States to improve quality, safety, efficacy and rational use of health technologies, as well as rational use of medicines.

As for the International Health Regulations (IHR), the Regional Committee urged Member States to strengthen and empower national IHR focal points to enable effective performance of all core functions of the IHR and fill the gaps. Another resolution was taken calling for further integration of eye care and prevention of avoidable blindness and visual impairment within the health care delivery system and to enhance partnerships with civil society working in the field.

The Regional Committee was invited by Tunisia to host its next session in Tunis in 2013.



### Hend Sabri visits the Regional Office

Actress Hend Sabri visited the Regional Office on Tuesday and participated in the launching of the regional initiative to prevent Mother to child transmission of HIV. The event was also attended by representatives of United Nations agencies. Among the attendees was a woman living with HIV/AIDS, whose courage and honesty earned the respect and admiration of all participants.



# Emergency preparedness

### 51

# Noncommunicable diseases



### South Sudan: Hello ... goodbye

This is the first time for South Sudan to participate as a member in the Regional Director after independence. However, it may also be the last time, as South Sudan has applied for relocation to the African Region. The Representative of South Sudan said that although it was applying for relocation to the African Region, it had received good support from the Regional Office. As a new State, it faced huge health problems, in particular malaria, diarrhoeal diseases and hepatitis B. In this regard, it badly needed support for vector control, water and sanitation and vaccine, respectively.



### Leadership earned not given

With regard to the important issue of partnerships, Dr Ala Alawan noted that leadership of WHO was earned, not given. The Regional Office, he added, was striving to achieve a level of technical competence on which Member States could depend for its quality; it would not compete for funds, but would compete on the basis of the technical competence it could provide.





### Tobacco in Egypt: good strides made

The Representative of Egypt said that Egypt had succeeded in monitoring tobacco consumption through the Global Adult Tobacco Survey and Global Youth Tobacco Survey, which had used a consistent and standard protocol across countries to systematically monitor tobacco use. Egypt had banned tobacco in public places,

established quit lines, placed pictorial health warnings on cigarette packets, banned advertisement of tobacco products and had increased taxation on tobacco products reaching a level of 74% in 2011.



# Pooled vaccine procurement

The Representative of South Sudan praised the proposal for a pooled vaccine procurement



mechanism, which he said would help make new vaccines available to countries in need. The Representative of South Sudan said that mental

Maternal and child health

## Communicable diseases

Health systems

health care in his country was almost nonexistent, and that the country was without a single psychiatrist. He requested WHO to improve the speed with which it responded to appeals from countries for support.

### Emergency preparedness in the Region

The Representative of the General Secretariat of the Arab Red Crescent and Red Cross Organization stressed the importance of emergency services and response, noting that the recent events taking place in some countries of the Region had revealed sharp deficits in emergency response. This necessitated a comprehensive medical service and response system for both pre-hospital care and treatment at hospital emergency rooms. He said it was important to develop specialized staff and procedures and systems that would help achieve this goal.

He added that it was also necessary to provide mental care for the victims, conduct rehabilitation training and build a cadre of qualified trainers in each country.



### Landmines a major problem in the Region

The Representative of the Arab Association for Assisting Mine Affected

Areas highlighted the problem of landmines in countries of the Region and the resulting injuries and deaths. He said that he hoped Member States would agree to put this issue on the agenda of a future session of the Regional Committee. He called for adopting a strategy to combat landmines and limit their effects. He also proposed developing and updating a database that would include the number of landmines, mined areas and related deaths and injuries.

### Mental health integrated with NCD?

The Representative of AFDAP said that mental health and addiction treatment must be integrated with noncommunicable diseases and that it was necessary to provide ambulatory mental health care. He called for a specific timeframe for developing integrated mental health and addiction treatment services.





### **Electronic cigarettes**

Director of tobacco free initiative said that electronic cigarettes were an area WHO had studied over the past two years, with the study group recommending that clinical trials be conducted in order to ascertain their safety. He noted that such products were not regulated consistently across countries, and in some countries they had been found to contain contaminants and carcinogens.



#### **lodine and NCD**

The Representative of the International Council for the Control of Iodine Deficiency Disorders (ICCIDD) noted the high economic costs imposed by micronutrient malnutrition on developing countries and said that the effects on noncommunicable diseases on micronutrients, and vice versa, were immense. He drew attention to the efforts of ICCIDD aimed at accelerating the reduction of high sodium intake at population level. He referred to a recent survey on global urinary iodine excretion which showed that the Region had the highest percentage of children with low iodine intakes. He said that Member States were encouraged to organize national discussions on revision of the global action plan to include expansion of the roles of private industry and of civil and professional societies.

### Delegates corner



### **Palestine**

Our guest to the delegates' corner is H.E. Dr Hani Abdeen, Minister of Health, Palestine

My expectations were:

• To get oriented about the activities of the Regional Committee (RC)

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- To familiarize myself about the topics discussed
- To be introduced to the different stakeholders
- To learn about the future strategy of RC

What I found most useful was the Strengthening of health systems

and smooth running of the meeting and the traffic light system

which curtails the waffling, though this is still occurring to some extent

Delegates should stick to the issue under discussion, rather than out of context presentations, on many occasions, the content is repetitive.



#### Islamic Republic of Iran

Our guest to the delegates' corner is Dr Mohammad Mehdi Gouya,

Director, Center for Disease Control, Islamic Republic of Iran and a member in the Iranian delegation to the Regional Committee.

My expectation from this session of the RC is

• Paying more attention to HIV as the fastest growing epidemic among 6 regions of WHO

 Putting the challenges of MDR-TB/XDRTB/IB/HIV and intensified case finding programmes for TB for the next RC session (we didn't pay attention to challenge of TB in this meeting)

- MDR/XDR-TB/ TB/HIV
- Mental health and drug use challenges
- HIV infection and drug use challenges and access to key population
   .....?

- · NCD discussions
- Pooled vaccine
- Prevention of mother-to-child transmission of HIV (PMTCT)
  .....?

Because all of these issues are important and challenging priorities on our agenda



#### **Pakistan**

Our guest to the delegates' corner is Dr Ghulam Asghar Abbasi, Chief Health Planning and Development division, a member in the Pakistani delegation to the Regional Committee.

The RC meeting is an important event where countries of the Region debate upon the issues faced by them in achieving better health care services. In this regard we expect two or maximum three resolutions, and followed up vigorously in the coming year's implementation report

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- Among the most important issues on top of the RC agenda
- Health systems strengthening
- International health regulations implementation
- Noncommunicable diseases prevention and control

I liked very much the focused discussions on noncommunicable diseases prevention and control

Because the burden of diseases is increasing as a result of the prevalence of NCDs, therefore the issue needs handling in its entirety.

I would like to see a strong resolution on NCDs at the end of the meeting

