# 66th Session of the WHO Regional Committee for the Eastern Mediterranean, 14–17 October 2019
Tehran, Islamic Republic of Iran

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### Credentials
Original credentials not submitted in advance of the opening session should be handed to the WHO Secretariat on the first day of the meeting.

### Documents
Official documentation of the session will be available in Arabic, English and French on the Regional Committee website: [http://www.emro.who.int/about-who/rc66/index.html](http://www.emro.who.int/about-who/rc66/index.html). As RC66 is the first paperless Regional Committee, participants are kindly requested to consult the documents online as no hard copies will be provided.

### Internet access
- **Wireless internet access** is available in all meeting areas.
  - **For participants residing in Parsian Azadi Hotel**: Please use the same WIFI used in the hotel “Azadi hotel”.
  - **For participants not residing in Parsian Azadi Hotel**: Please use the meeting WIFI “RC66”.

### WHO publications
A WHO publications exhibition stand has been set up in the foyer area on the mezzanine floor. Publications including the EMHJ are available online.

### Security
Please ensure that your RC66 ID badge is displayed at all times while inside the premises.

### Interventions
To help in drafting the report of this session of the Regional Committee, delegations may provide the text of remarks on paper to a member of the WHO Secretariat or by email to emrgorcrep@who.int. NGO statements may also be submitted for posting on the website.

### Contact information
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### Note
WHO has a no-smoking policy for all WHO meetings and related functions. Smoking is prohibited in all areas related to the Regional Committee sessions.
1. Programme of work

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<tr>
<th>Agenda item</th>
<th>08:30–10:30 Regular session (Zarrin Hall – Parsian Azadi Hotel)</th>
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<tbody>
<tr>
<td>3(a)</td>
<td>Regional implementation framework on ending preventable newborn, child and adolescent deaths and improving health and development</td>
</tr>
<tr>
<td>3(b)</td>
<td>Strengthening the nursing workforce to advance universal health coverage in the Eastern Mediterranean Region</td>
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<table>
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<tr>
<th>Agenda item</th>
<th>11:00–13:00 Regular session (Zarrin Hall – Parsian Azadi Hotel)</th>
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<tbody>
<tr>
<td>3(c)</td>
<td>Introducing the framework for action for the hospital sector in the Eastern Mediterranean Region</td>
</tr>
<tr>
<td>3(d)</td>
<td>Developing national institutional capacity for evidence-informed policy-making for health</td>
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<tr>
<th>Agenda item</th>
<th>14:00–16:30 Regular session (Zarrin Hall – Parsian Azadi Hotel)</th>
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<tbody>
<tr>
<td>3(e)</td>
<td>Accelerating regional implementation of the Political Declaration of the Third High-level Meeting of the General Assembly on the Prevention and Control of Noncommunicable Diseases, 2018 Signature of the “Tehran Declaration on Healthy Lifestyles”</td>
</tr>
<tr>
<td>3(f)</td>
<td>Regional framework for action to strengthen the public health response to substance use</td>
</tr>
<tr>
<td>4(a)</td>
<td>Resolutions and decisions of regional interest adopted by the Seventy-second World Health Assembly and the Executive Board at its 144th and 145th Sessions</td>
</tr>
<tr>
<td>4(b)</td>
<td>Review of the draft provisional agenda of the 146th Session of the WHO Executive Board</td>
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Dinner hosted by the WHO Regional Director (Espinas Palace Hotel)
2. Report of meetings  
Tuesday, 15 October 2019

Opening session

Formal opening of the session
The opening ceremony of the 66th session of the Regional Committee for the Eastern Mediterranean was held in the Organization of the Islamic Conference, Tehran, Islamic Republic of Iran on 15 October 2019.

Address by the Regional Director
The Regional Director, Dr Ahmed Al Mandhari, said that every citizen had the right to health without facing discrimination or financial hardship. This right was and always would be a key prerequisite for, and not a product of, development; positively affecting people’s productivity and raised educational and living standards. The Political Declaration of the United Nations High-level Meeting on UHC had reaffirmed countries’ commitment to UHC. Conflict, natural disasters, epidemics and political instability had had a severe impact on the provision and availability of health services and people’s health, which he had witnessed in his visits to countries, describing conditions in health facilities as catastrophic. He commended the efforts of people and organizations working to make a difference; they were the true embodiment of the regional vision of “Health for all, by all”. WHO’s new regional strategy for 2020–2023 outlined key strategic objectives in relation to the strategic priorities set out in Vision 2023, which included clear mechanisms to identify results and measure impact. WHO would continue to support countries to achieve SDG 3 and the other health-related goals in closer collaboration with partners and other United Nations agencies. He praised Islamic Republic of Iran, Bahrain and Oman in their efforts to eliminate measles and rubella. In closing, he thanked Islamic Republic of Iran for the cordial reception, hospitality and excellent care that had been extended to all delegates in this year’s session of the Regional Committee.

Address by the Director-General
Dr Tedros Adhanom Ghebreyesus, WHO Director-General, said the Islamic Republic of Iran was a leader in public health with its innovative approach to primary health care and Health Transformation Plan, which delivered health care for all of its citizens. While the Region generally was facing significant challenges there were also reasons for optimism, including the Salalah Declaration reaffirming countries’ commitment to UHC. An urgent priority for the Region was reducing neonatal mortality and the regional implementation framework for newborn, child and adolescent health would provide concrete actions to ensure that more babies survived their first month of life. The Region was facing a serious and growing shortfall in nurses and midwives, essential for every health system, and the proposed resolution on strengthening the nursing workforce was a welcome response. While primary health care was the foundation of universal health coverage, high-quality, person-centred care was needed in hospitals, and a proposed new framework for action would support countries to transform this sector. The resolution to accelerate regional implementation of the Political Declaration of the High-level Meeting on NCDs would support the Region’s progress to achieving the NCD-related targets of the SDGs and a regional framework for action would strengthen the public health response to substance use. Reducing neonatal mortality, strengthening the health workforce and forging ahead in the midst of crisis were daunting key challenges that could be overcome with strong political commitment and courageous decision-making.
Welcome by the Government of the Islamic Republic of Iran

H.E. Dr Hassan Rouhani, President of the Islamic Republic of Iran, and H.E. Dr Saeed Namaki, Minister of Health and Medical Education, welcomed participants to the 66nd session of the Regional Committee.

President Rouhani noted that the Islamic Republic of Iran had a distinguished history of medical achievement. In recent decades, public health had been a high priority, and average life expectancy had improved very significantly. Great efforts were being made to advance towards universal health coverage and to address environmental health risks. Effective, prompt action had prevented any communicable disease outbreak when floods struck the country in March 2019, demonstrating the value of strong collaboration between health professionals and other stakeholders. He thanked the health workforce worldwide. The Region faced many challenges, but success was possible through cooperation.

Dr Namaki reiterated the determination of the Islamic Republic of Iran to play its full part in attaining the SDGs. The country had pioneered the primary health care approach, and was also making increasing use of electronic systems in its health system. Dr Namaki highlighted the role played by the Islamic Republic of Iran in the WHO Framework Convention on Tobacco Control and urged other countries to make a concerted effort in this important area. In conclusion, Dr Namaki welcomed the opportunity to share national success stories, experiences and lessons learned.

Agenda item

Regular sessions

The Regional Committee elected the following officers:
Chair: H.E. Dr Saeed Namaki (Islamic Republic of Iran)
Vice-Chair: H.E. Dr Mai Salem Al-Kaila (Palestine)
Vice-Chair: H.E. Dr Ehmed Mohamed Ben Omer (Libya)

Based on the suggestion of the Chair of the Regional Committee, the Committee decided that the following should constitute the Drafting Committee:
Dr Said Harib Manna Al Lamki (Oman), Dr Mohammed Hamad Al-Thani (Qatar), Dr Badereddin B. Annajar (Libya), Dr Randa Hamadah (Lebanon), Dr Mohsen Asadi-Lari (Islamic Republic of Iran).

Secretariat: Dr Rana Hajjeh, Dr Maha El-Adawy, Dr Awad Mataria, Dr Arash Rashidian, Dr Richard Brennan, Dr Ruth Mabry, Mr Tobias Boyd.

The Regional Committee adopted the provisional agenda and provisional daily timetable.

Chair: H.E. Dr Saeed Namaki (Islamic Republic of Iran)
Annual report of the Regional Director for the year 2018 and progress reports

The Regional Director presented his report to the Regional Committee on the work of WHO in the Eastern Mediterranean Region in 2018. His verbal statement focused on WHO’s new strategy for the Region, which had been developed to support the Organization’s regional vision of Health for All by All. The new strategy aligned with WHO’s global strategic priorities: enhancing universal health coverage, protecting people from health emergencies, promoting health and reforming WHO itself. There were numerous challenges, but WHO was working hard with Member States and many partners to tackle them, and the technical agenda of the 66th session of the Regional Committee included a range of proposed measures and actions to take work further forward. Meanwhile, the WHO Transformation project was well under way in the Region, bringing changes in the Organization’s structure, business processes and culture with the aim of maximizing its positive impact at country level.

Interventions were made by representatives of the following Members of the Committee (in order): Qatar, Islamic Republic of Iran, Lebanon, Tunisia, Pakistan, Oman, Iraq, Palestine, Syrian Arab Republic and Libya.
Press conference
A press conference was held on the release of a WHO advisory package on ending tobacco industry interference in tobacco control. Dr Fatimah El-Awa, Regional Advisor for the Tobacco Free Initiative, presented the package, saying it was developed in response to requests from Member States to address innovations by the tobacco industry, including the introduction of new electronic products.

Agenda item

Regular sessions

Update on emergencies in the Eastern Mediterranean Region
Despite considerable regional needs and high levels of risk, the management of emergencies and mitigation of their impact have improved across the Region. Nevertheless, a number of factors now threaten to significantly increase both the frequency and impact of emergencies in the Region. An overview was therefore presented of the comprehensive emergency management approach now adopted by WHO. Member States were urged to invest in their relevant domestic capacities in order to meet the critical need to promptly detect, report and declare outbreaks and other emergencies.

Interventions were made by representatives of the following Members of the Committee (in order): Islamic Republic of Iran, Tunisia, Palestine, Pakistan, Afghanistan, Djibouti.

Representatives acknowledged that strengthening preparedness for emergency events in the Region was a top priority, and shared a number of recent national initiatives and ongoing challenges in this area. Investing in emergency preparedness and response capacities and integrating such capacities into routine national health systems strengthening, including the strengthening of surveillance systems, are viewed as prerequisites of any well-coordinated and well-functioning system. It was recognized that the evaluation of national emergency preparedness through initiatives such as joint external evaluations (JEEs) is key but such evaluations must be linked to adequate follow-up and implementation activities if meaningful progress is to be made. In some settings it was noted that conflict and attacks on health facilities made preparedness and response efforts very difficult.

The acting Director of the WHO Health Emergencies Programme highlighted the active engagement of WHO in relation to strengthened cross-country collaboration and outlined a number of upcoming meetings and other activities under way or planned in this area. Regarding the issue of JEE follow-up, WHO aims to provide its support to the subsequent development and roll-out of national action plans for health security (NAPHS) and to support countries in the strengthening of national health information systems. JEEs are viewed by WHO as very useful tools in guiding actions to strengthen all preparedness and response capacities. The Regional Director thanked participants for their inputs and reiterated that WHO activities benefit from the conducting and aftermath of JEEs in countries and outlined a number of gains made.

Update on polio eradication in the Eastern Mediterranean Region
The Director, regional Polio Eradication Initiative, updated Member States on the status of polio eradication in the Region, noting the resurgence of wild poliovirus type 1 (WPV1) in Afghanistan and Pakistan in 2018 and 2019. Eradication efforts were being hindered by conflict and insecurity, community mistrust, and a ban on immunization campaigns in parts of Afghanistan, now partially lifted. Significant population movement also continued to play a role in the spread of WPV. A number of other countries experiencing varying degrees of complex emergency, access or security constraints were also at high risk of outbreaks caused by importation of WPV1 or development of vaccine-derived poliovirus, as has occurred in Somalia, with risk of spread to Yemen. He emphasized the need for Member States to maintain high levels of vaccination coverage, surveillance and readiness for outbreak response, and noted
that polio transition was another priority, with polio staff and assets being transitioned to integrated systems to sustain eradication and enhance broader surveillance, essential immunization and emergency outbreak response.

**Report of the fifth meeting of the Programme Subcommittee of the Regional Committee**

The Chair (Qatar) of the Programme Subcommittee of the Regional Committee presented the fifth report of the Programme Subcommittee, which had met on 20–21 February 2019. He also presented a brief oral report of the fourth meeting of the Programme Subcommittee, held on 14 October 2019.

**Place and date of future sessions of the Regional Committee**

The Regional Committee decided to hold its 67th session at the Regional Office for the Eastern Mediterranean in Cairo, Egypt, from 12 to 15 October 2020.

**Regional suggestions for elective posts for the Seventy-third World Health Assembly and Executive Board members**

Chef de Cabinet outlined the processes adopted by the Regional Committee at its 63rd session (EM/RC63/R.6) for the nomination of Executive Board members and elected officials of the World Health Assembly. He presented regional suggestions for the elective posts for the Seventy-third World Health Assembly and for new members of the Executive Board.

### 3. Other meetings

**Wednesday, 16 October 2019**

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<th>Time</th>
<th>Event</th>
<th>Venue</th>
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<tr>
<td>17:00</td>
<td>Emergency operations centres (EOCs) in the Eastern Mediterranean Region</td>
<td>Zarrin Hall</td>
</tr>
<tr>
<td>17:00</td>
<td>The Global Fund to Fight AIDS, Tuberculosis and Malaria and Gavi, the Vaccine Alliance</td>
<td>Almaas meeting room</td>
</tr>
<tr>
<td>17:00</td>
<td>Update on UN reform</td>
<td>Brilliant meeting room</td>
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<tr>
<td>18:30</td>
<td>Daily meeting of the Drafting Committee</td>
<td>Brilliant meeting room</td>
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