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

### **Opening of the session**

1. The Programme Subcommittee of the Regional Committee for the Eastern Mediterranean held its fifth meeting on 20–21 February 2019 at the WHO Regional Office for the Eastern Mediterranean in Cairo, Egypt. The Programme Subcommittee was established in response to resolution EM/RC63/R.6 (2016).
2. The meeting was attended by experts nominated by Member States to serve as members of the Programme Subcommittee for a duration of two years, and by WHO staff. The agenda and list of participants are included as Annexes 1 and 2, respectively.
3. The Programme Subcommittee elected the following officers for a duration of one year.<sup>1</sup>

Chair: Dr Mohammed Hamad J. Al Thani (Qatar)  
Vice-Chair: Dr Qamra Khamis Al Sariri (Oman)  
Rapporteur: Dr Hilda Harb (Lebanon)

4. An overview of the Programme Subcommittee was presented, including its establishment, terms of reference, and membership and meetings. This was followed by an introduction to the objectives of the fifth meeting. The main objectives of the meeting were to consider some possible innovations in arrangements for the Regional Committee, to review the status of resolutions passed by previous sessions of the Committee and to discuss the technical agenda for the 66th session of the Regional Committee.

### **Possible innovations to improve arrangements for Regional Committee**

5. The Subcommittee considered a range of ideas to enhance preparations for and the conduct of Regional Committee. It was noted that Regional Committee played a crucial role both as a formal governance and accountability mechanism and as a forum for communication among Member States and between Member States and the Secretariat. WHO was run by and on behalf of its Member States, and so their active engagement in its business was vital. While it was generally felt that RC65 in Khartoum, Sudan, had been very successful overall, there was always room for improvement; indeed, the aim should be – as with the Olympic Games – for each session of the Committee to outdo its predecessors in terms of participation and impact.

6. Several issues were identified. To ensure active country participation, a high level of attendance was a prerequisite. Each country delegation should ideally number at least five people, and should include both high-level ministerial representation and technical experts. Efforts should also be made to broaden participation from other sectors and ministries within countries, and from partner United Nations agencies, nongovernmental organizations and civil society.

7. Participants needed to be well prepared for the session. All technical papers and draft resolutions should be circulated well before the session, ideally as early as June, and WHO country offices should be mobilized to help engage and prepare ministerial and technical teams from each country. All documents should be provided electronically only with the aim of achieving a “paperless” Regional Committee session. Subcommittee members felt that in country offices’ preparatory work, there might be scope to encourage ministerial and technical representatives from countries to prepare concise and focused interventions for the upcoming Regional Committee discussions, to maximize the value of their interventions.

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<sup>1</sup> See EM/RC63/8 Rev.1

8. Another crucial issue concerned the construction of the agenda for the session. It was challenging to ensure that discussions represented the broad spread of the Organization's remit while going into sufficient technical depth. In this regard, it was noted that the Region had already innovated some years back in developing the concept of the "pre-RC" technical meeting to enable discussion and development of topics which in due course might become the subject of a full Committee technical paper with a related resolution. Further innovation in the structure of the Committee's business was considered. One option was to increase the number of topics covered during the full Regional Committee discussions: currently they were limited to around five technical papers per annual session of the Committee; this might be increased to nine or ten, but with much briefer papers and presentations, and less time allocated to the subsequent discussion of each topic. It was felt that this would be too big a change for the next session of the Regional Committee (RC66), but it could be tried in a future year.

9. Whether or not the structure of the agenda was changed, it was felt that there was scope to improve the presentation and discussion of topics so as to increase engagement from countries. More attention should be given to examples of best practice among countries. For instance, rather than WHO technical staff being solely responsible for developing technical papers, particular countries might be invited to prepare contributions highlighting success stories. It would not be possible or appropriate to involve all countries in preparing such contributions to technical papers, but this approach could be complemented with a separate meeting or exhibition at which every country would have the chance to highlight a notable success story. In preparing any such meeting or exhibition, it would be crucial to allow time and space for country representatives to discuss among themselves as well as with WHO technical staff.

10. Subcommittee members also liked the idea of having a theme for each Regional Committee. Although it might not be possible for all technical papers and items of business to refer to a single theme, a main overarching theme could be highlighted in the Regional Director's opening speech and address and in some other items of business, including some side meetings. This might increase the profile and impact of the Committee's annual session, as it would help to focus the external communications campaign. For the 66<sup>th</sup> session of the Regional Committee, the Subcommittee endorsed the theme of "Health for Peace and Unity". Consideration should be given to inviting a high-profile keynote speaker from the Region or beyond to highlight this theme at the opening of the session, and a closing event should also be planned to ensure a "bigger", more eventful conclusion to RC66 than in previous sessions.

11. Finally, it was noted that a survey of country representatives to obtain their feedback on last year's 65<sup>th</sup> session of the Regional Committee had obtained only six responses. The Subcommittee urged the Secretariat to contact countries again and elicit more feedback, allowing for anonymous responses if countries preferred.

## **Review of status of resolutions**

12. The Subcommittee was presented with the findings of a review of previous Regional Committee resolutions that had been undertaken recently by Regional Office staff. The review formed part of efforts to reform governance mechanisms at all levels of WHO, which inter alia required all WHO's governing bodies in the regions and globally to review the status of previously adopted resolutions. There was a general Organization-wide concern – a concern within the United Nations as a whole – that too many resolutions were adopted without leading to concrete action, let alone impact. While Regional Committee resolutions had an important political function as the consensual expression of a shared political commitment, they also had a technical role and generally required actions by both the Regional Director and the countries of the Region.

13. The Regional Office's review followed a similar exercise which had been reported to Regional Committee in 2012, and also drew on the example of two reviews by WHO's European Region in 2008 and 2012. Technical staff in the Regional Office had reviewed 88 resolutions in all from the period 2000–2017, including 53 that had been found to be active during the Region's previous review and 35 others that had been adopted since the previous review, in the period 2012–2017. Technical staff were required to classify each resolution in one of three categories, as defined in the previous review: sunset, meaning no longer active; conditionally sunset, meaning some parts of the resolution were still applicable; and active.

14. One of the main findings of the review was that a large number of resolutions remained active – nearly two thirds (63.6%) overall, with only 20.5% being completely sunset. It was also notable that the classification exercise had proved very difficult as the language of many resolutions was vague.

15. In consequence, the Regional Office suggested several reforms to resolutions going forward. A standard template or minimum requirements should be adopted to ensure that every resolution was drafted with “SMART” requirements clearly stating what the Regional Director and countries needed to do, and when. Further, reporting requirements should be clearly stated and every resolution should have a defined end-date, ideally no more than five years after its year of adoption. In addition, consideration might be given to submitting more items in the form of short decisions rather than full resolutions, where reasonably possible.

16. The Subcommittee endorsed all these recommendations and requested the Regional Office to develop a template or guidelines accordingly.

17. It was also felt that further thought needed to be given to the reporting mechanism. An overall report on the status of resolutions indicating how many were still active should be presented to each annual session of the Regional Committee, perhaps as part of the Regional Director’s Annual Report, and an effort should be made to make progress reporting on the implementation of each resolution more effective, for example by developing clear indicators for each resolution, circulating draft progress reports earlier and inviting country input on draft progress reports.

18. A further proposal from the Regional Office was to sunset or retire all resolutions dating from before 2014 or another chosen cut-off year. The Subcommittee held that any such decision would need to be taken by the Regional Committee itself as the Region’s governing body and, if it were so decided, there would need to be a careful review of all the resolutions before they were retired.

19. While Subcommittee members agreed that the number and scope of resolutions should be limited going forward, it was also recognized that the approach should not be too restrictive as resolutions could be very helpful in strengthening the mandate of Member States’ national technical staff.

### **Preliminary outline of the 66th session of the Regional Committee**

20. An outline of the agenda of the 66th session of the Regional Committee was presented to the Programme Subcommittee. A list of the proposed topics for the different agenda items was shared with participants, as well as brief proposals for each topic. The Subcommittee members listened to concise presentations for the proposals; 19 proposals were presented in total. This was followed by a detailed discussion with the Secretariat and the responsible officers as necessary. Further potential topics were discussed along with those that had been presented.

21. The proposals fell under three broad areas: a) pre-Regional Committee technical sessions; b) technical papers for the Regional Committee; and c) side events.

22. After careful consideration, members of the Programme Subcommittee agreed on topics to be discussed under each of the areas. The topics agreed are listed in Annex 3.

### **Closing of the session**

23. After thanking members of the Programme Subcommittee for their attention and valuable feedback and the Regional Office for its support, the Chair closed the session.

## **Annex 1. Agenda**

1. Opening session
2. Adoption of the provisional programme
3. Overview of the Programme Subcommittee of the Regional Committee for the Eastern Mediterranean
4. Election of office bearers of the Programme Subcommittee of the Regional Committee for the Eastern Mediterranean (February 2019 – February 2020)
5. Possible improvements to arrangements for Regional Committee
6. Preliminary outline of the 66th session of the Regional Committee, including proposals for pre-RC sessions, technical papers and side events
7. Review of the status of previous resolutions of the Regional Committee
8. Closing session

**Annex 2. List of participants***Members of the Programme Subcommittee*

Islamic Republic of Iran	Dr Mohsen Asadi Lari
Kuwait	Dr Rehab Al-Wotayan
Libya	Dr Badereddin Annajar
Jordan	Dr Hikmat Abu-Elful
Lebanon	Dr Hilda Harb
Morocco	Dr Abdelhakim Yahyane
Oman	Dr Qamra Said Khamis Al Sariri
Qatar	Dr Mohammed Hamad J. Al Thani

*WHO Secretariat***SECRETARIAT**

Dr Ahmed Al-Mandhari	Regional Director
Dr Abdallah Assa'edi	Regional Director's Senior Adviser
Dr Rana Hajjeh	Acting/Director, Programme Management and Director, Department of Communicable Diseases, Prevention and Control
Mr Hatem Adel El Khodary	Director, Administration and Finance
Dr Maha El-Adawy	Director, Department of Health Protection and Promotion
Dr Zafar Mirza	Director, Department of Health, System Development
Dr Arash Rashidian*	Director, Department of Information, Evidence and Research
Dr Asmus Hammerich	Director, Noncommunicable Diseases and Mental Health
Dr Brice de le Vigne	Acting Director, Department of Health Emergencies
Dr Ahmad Basel Al-Yousfi*	Director, Centre for Environmental Health Action, CEHA, Amman
Mr Christopher Maher*	Manager, Polio Eradication, Amman
Dr Rayana Ahmed Bou Haka	Manager, Country Focus Support
Mr Jaafar Jaffal	Regional Adviser, Planning, Budget, Monitoring and Evaluation
Dr Ruth Mabry	Technical Officer
Mr Toby Boyd	Manager, Editorial, Graphics and Publishing Services

Ms Hala El Shazly	Senior Administrative Assistant
Mr Kareem El Hadary	IT Service Desk Administrator
Ms Samah Abdel Aziz	Administrative Assistant
Ms Rana Al-Naggar	Team Assistant

\*via VC

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**Annex 3. List of topics agreed for the 66th session of the Regional Committee**


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<b>Lead(s)</b>	<b>Proposed title</b>	<b>Comments</b>
<b>Technical papers</b>		
DHP	Regional implementation framework on ending preventable newborn, child and adolescent deaths and improving health and development	
HSD	Call for action to strengthen nursing and midwifery in the Eastern Mediterranean Region to optimize their contribution to universal health coverage	
HSD	Introduction of the strategic framework for action for the hospital sector in the Eastern Mediterranean Region	
IER	Developing national institutional capacity for evidence-informed policy-making for health	
NMH	Accelerating regional implementation of the UN Political Declaration on the Prevention and Control of Noncommunicable Diseases and addressing NCD risk factors	
<b>Pre-RC technical sessions</b>		
CEHA	Water, sanitation and hygiene (WASH) in health care facilities	
DCD	Achieving the goals of the Eastern Mediterranean vaccine action plan: priority actions for acceleration	
HSD	Eastern Mediterranean Region Professional Diploma in Family Medicine	
HSD	Pharmaceutical financing in the Eastern Mediterranean Region	
WHE	Strategic framework for the prevention and control of emerging and epidemic-prone diseases in the Eastern Mediterranean Region	
<b>Panel discussion and side events</b>		
CFS	Update on UN reform	
DCD	The Global Fund to Fight AIDS, Tuberculosis and Malaria, and Gavi, the Vaccine Alliance (combined session)	
DCD	Implementing the UNGA Political Declaration on Tuberculosis and the multisectoral accountability framework to End TB in the Eastern Mediterranean Region	
HSD	Strengthening primary health care in the Eastern Mediterranean Region by implementing the Astana Declaration – a panel discussion in collaboration with UNICEF	
WHE	Emergency operations centres (EOCs) in the Eastern Mediterranean Region	
<b>Press conference</b>		
NMH	Release of WHO advisory package on ending tobacco industry interference in tobacco control	

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