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## Conclusion

This report reflects the work of WHO in the past year in supporting health development in the Member States of the Region. It also highlights key challenges that need to be addressed and reflects continued work and next steps for both Member States and WHO for 2015 and beyond. To be brief and focused, the report presents the progress made over the past year in tackling the five key health challenges shared and endorsed by all Member States in 2012. WHO's work during 2014 also covered other initiatives of specific relevance to health development in the various countries of the Region. I am confident many of them will be raised and discussed during the different sessions and events of the 62nd session of the Regional Committee in October 2015.

It is impossible to report on health support without recognizing the impact of the humanitarian crises on national health systems and health status, and on WHO's overall capacity in the Region. Health facilities and programmes have been badly affected in the increasing number of countries in crisis and the lack of adequate donor funding is a very real concern. All Member States, without exception, will need to place more emphasis on building resilient health systems, with improved access to health services. Emergency medical services need to be strengthened in most countries. These are areas of work that will be given special priorities in WHO's collaboration with Member States over the coming years.

As the world makes the transition from the Millennium Development Goals to the post-2015 agenda and new sustainable development goals,



↑ The Sixty-first session of the Regional Committee for the Eastern Mediterranean took place in Tunis, Tunisia

it will be important to build on the momentum generated in regard to maternal and child health in the Region in the past three years. Maternal and child health concern all countries of the Region. We will continue to focus on the high-burden countries and countries that are affected directly or indirectly by complex emergency situations. However, all countries of the Region will be developing strategic and operational plans for reproductive, maternal, neonatal and child health for the period 2016–2020, in accordance with the updated Global Strategy on Women's, Children's and Adolescent Health, endorsed in September 2015. In particular, WHO and its partners must maintain focus on countries in crisis, to avoid falling back on the gains achieved.

In 2015 and going forward WHO will focus more on how to tackle the need for better preconception care in the Region and the persistent inequities in access to quality health care for mothers and children. We will also work with Member States to implement the key recommendations of the Second International Conference on Nutrition (ICN-2) based on the priorities agreed in a recent intercountry meeting on nutrition. This will include a special focus on promoting breast-feeding, treatment of undernutrition and preventing childhood obesity.

It will also be important to maintain commitments at regional and national levels to make further progress in reducing the burden of HIV, tuberculosis and malaria. We are already developing regional action plans for 2016–2020, in line with the post-2015 WHO global strategies and proposed sustainable development goal for health, and we will continue to work with countries to ensure continued progress.

Polio eradication in our region, and globally, is now within reach. We have intensified our support

to affected countries in the final push to eradicate polio. I urge all countries, as we approach the final hurdle, to ensure the highest possible levels of immunization and surveillance until global eradication is achieved and certified. I also call on all countries to continue their crucial and valuable support to Pakistan and Afghanistan to achieve the goal of eradication as quickly as possible.

The focus placed on the importance of effectively managing health security threats, following the Ebola crisis needs to be maintained. All countries, with no exception, have to reinforce their core capacities under the International Health Regulations. The situations with regard to transmission of Middle East respiratory syndrome coronavirus MERS-CoV and avian influenza A(H5N1) will continue to be closely monitored at national and regional levels. There are gaps in our knowledge concerning both diseases and it is vital that research into these, and other, high-risk diseases is supported and the results shared in a timely manner. Above all, countries need to ensure they are prepared to handle cases in a manner that places emphasis on the safety of patients and health workers alike.

The growing antimicrobial resistance to previously effective drugs is extremely worrying. It is clear that our region, and we are not alone in this regard, is not well prepared to tackle the problem. WHO is co-sponsoring a high-level ministerial conference in the Region in early 2016, during which a detailed situation analysis and a concrete regional plan will be presented. We are working with Member States and other stakeholders to prepare for it. The Region is witnessing a rapid acceleration in the magnitude and devastating consequences of noncommunicable diseases. We have sound vision and a robust road map to guide us; we can stop this epidemic through the implementation of the regional framework

for action. I will continue to scale up our work in this area so that we can increase capacity for technical support to countries but the ultimate responsibility is with Member States. Heart disease, cancers, diabetes and chronic lung diseases will not be checked unless declared commitments are translated into concrete action. In May 2015, WHO developed a list of process indicators that will be used to assess the progress made by countries in realizing the national commitments included in the United Nations political declaration of 2011. The assessment will be published during the United Nations high-level meeting which will be held in New York in 2018. We will use the indicators to monitor progress on an annual basis and will work with Member States to ensure that they are adequately prepared to monitor implementation in this regard.

Universal health coverage is now part of the sustainable development goals. A regional road map was supported last year by the Regional Committee. The next step for WHO is to support countries to develop their own plans, focusing on the key interventions recommended by the regional framework. Special emphasis is being given in WHO's work to building national capacities in strategic health planning and health sector regulation, strengthening service delivery through the family practice approach, hospital care and management, patient safety, and more effective contribution from the private sector. A plan for reform of medical education will be discussed by the Regional Committee which, I hope, will lead to a commitment to effective action from Member States.

Health information systems will continue to be an important priority. Building on the achievements made over the past three years, we will be working closely with the different groups

of countries, and with United Nations partners, to have stronger national health information systems in order to monitor health trends and health system performance, based on the new health information framework.

We have witnessed difficult times in the past year in many parts of our region. Health systems and the people who work in them are facing enormous challenges and pressures. The development of public health leadership capacity in our region has never been more crucial to health development than now.

I remain fully committed to managerial reform. I am pleased with the progress we have made so far but clearly more needs to be done in improving our performance and support to Member States, based on efficiency, accountability and transparency. Country offices have been a major focus of my attention in the past year and while positive progress has been made in several countries, our plan is to continue expanding WHO's presence in other countries. We will continue to listen to our Member States and to respond. We, in turn, need the support of Member States to address the priorities.

As I stated last year, I believe we have established some solid foundations on which to build a brighter future, in partnership with our Member States. These are challenging times, but also times of great opportunity. Let us not miss these opportunities. Let us all – Member States, international organizations and civil society – continue to strengthen our partnership in health.