



Address by

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to the

**SUBREGIONAL MEETING ON SCALING UP ACUTE WATERY DIARRHOEA
AND CHOLERA PREPAREDNESS AND RESPONSE AND MANAGEMENT**

Beirut, Lebanon, 8–9 July 2017

Distinguished Colleagues, Ladies and Gentlemen,

It gives me great pleasure to welcome you all to this subregional meeting on cholera which has been organized in view of the current outbreaks of cholera and acute watery diarrhoea.

I would like to take this opportunity to thank the Government of Lebanon for hosting this meeting. I would also like to thank the Member States, partners and donors represented here today for their support and participation.

Dear Colleagues,

The aim of this meeting is to review the current situation and response to cholera and acute watery diarrhoea in Somalia, Sudan and Yemen and to discuss challenges in the management of these outbreaks. More specifically, we will address the concerns of Member States regarding the risk of international spread of the disease, review the interventions required and agree on a mechanism for information-sharing among the affected countries, partners and neighbouring countries in order to minimize the spread within countries and the Region.

Humanitarian and health emergencies are affecting several countries in the Eastern Mediterranean Region that are experiencing active conflict. These include Afghanistan, Iraq, Libya, Palestine, Pakistan, Somalia, Sudan, Syria and Yemen. Conflict in these countries has weakened basic health and environmental infrastructure, as well as disrupted essential and lifesaving health services such as routine immunization programmes for children and maternal and child health care services. It has also displaced people within their own countries, and to neighbouring countries.

In spite of the best possible efforts from host countries and humanitarian partners, many internally displaced and refugee populations are forced to live in relatively poor and

overcrowded settings, without access to proper water and sanitation facilities and adequate basic health care. In this context of political instability, conflict, deteriorating health and environmental infrastructures and mass displacement of populations, we have seen an increased vulnerability to diseases, and a high number of cases and deaths from epidemic-prone diseases such as cholera and acute watery diarrhoea.

Among all the epidemic- and pandemic-prone diseases, cholera outbreaks are the most commonly recorded in the Region, with over 877 000 suspected cases including 3655 associated deaths reported between 2005 and 2016. In the past 5 years, cholera has been reported in Afghanistan, Iraq, Pakistan, Somalia, Sudan, Syria and Yemen. In 2017, Somalia and Yemen have recorded their largest cholera epidemics in recent years. It is of great concern that these numbers are increasing, placing the lives of already vulnerable people at risk, and resulting in preventable deaths.

The situation has reached a critical point. Cholera-endemic nations and their neighbours urgently need our support to improve their preparedness and response capacities in areas such as early warning surveillance systems, diagnostic capacity, case management, infection practice, community health education, and information-sharing mechanisms.

Sharing information in a transparent and timely manner is important to the early detection of epidemic-prone diseases. This is stipulated under the International Health Regulations (IHR 2005) and is essential to limit the spread of cholera through population movement.

For effective cholera prevention and control, some of the most important interventions are improved environmental infrastructure including adequate sanitation facilities, safe drinking-water and promotion of safe hygiene practices in the community. An additional intervention that has been used in certain countries is the oral cholera vaccine, most recently used in Somalia and Sudan this year.

By the end of this 2-day meeting, we will agree on recommendations for enhanced early detection, investigation and rapid response to potential importation of acute watery diarrhoea and cholera cases, including at points of entry as required under IHR (2005).

Dear Colleagues,

Thank you once again for your presence here. I believe that your active participation and deliberation in the meeting will add significantly to the identification of measures necessary to prevent, detect and respond to the international spread of cholera.

I wish you a very fruitful and productive meeting, and a pleasant stay in Beirut. Thank you.