



Introduction

When I took office in February 2012, I had a vision of what might be achieved in relation to the regional health situation within the term of my office. Five years pass very quickly and so I made it a priority immediately after my election to conduct an in-depth situation analysis of health development in the Region and make a rapid assessment of the challenges, the gaps and what needed to be done, in consultation with regional stakeholders. A high-level expert meeting in March 2012 resulted in consensus on the challenges to progress in prevention and control of the principle causes of ill-health and disease burden, in health system strengthening and in maternal and child health, and on key strategic directions. These are: health systems strengthening; maternal, reproductive and child health and nutrition; noncommunicable diseases; communicable diseases; emergency preparedness and response; and WHO management and reform. Further consultations led to development of the document “Shaping the future of health in the WHO Eastern Mediterranean Region:

¹*Shaping the future of health in the WHO Eastern Mediterranean Region: reinforcing the role of WHO.* Cairo, WHO Regional Office for the Eastern Mediterranean, 2012.

reinforcing the role of WHO”¹ which I shared with ministers of health in Geneva immediately prior to the World Health Assembly in May 2012. The broad agreement of the Member States with the content of that document empowered me with the clear mandate to proceed. Their excellent feedback gave me further guidance with regard to some of these strategic areas. In October, the WHO Regional Committee for the Eastern Mediterranean discussed the way forward and passed relevant resolutions in relation to health systems strengthening, a framework for action on noncommunicable diseases, and control of public health events of international concern through the International Health Regulations. The Committee also endorsed actions I had initiated to implement the principles of WHO reform being discussed at global level, as well as some important observations of the WHO auditors and Member States themselves.

By the end of the year, the Regional Office had also undertaken rapid assessment of progress towards Millennium Development Goals 4 and 5 in regard to maternal and child health in the 10 Member States with the highest burden of mortality in the Region. The results were presented subsequently at a high-level meeting, organized in Dubai in January 2013, on “Saving the lives of mothers and children”, in order to accelerate progress towards the goals. The strengthening of health information, an area of the health system that is crucial for health planning and monitoring, was also a major area of focus. In 2012 all Member States undertook a rapid assessment of their civil registration and vital statistics systems, a major achievement in itself that will lead, by the end of 2013, to the development of national plans, a list of core indicators and a regional strategy for strengthening these systems.

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Thus, the 11 months from February to December were a busy time for WHO and for Member States. Through this groundwork we have laid the foundation for progress. However, improving health in the Region continues to face monumental challenges. For me, a priority issue is the charting of a path toward universal health coverage through prepayment schemes that work for all people. It is shocking that the Region accounts for just 1.6% of global spending on health while it accounts for 8% of the global population. Vast numbers of people in the Region have no social insurance and no easy access to health care. When they or family members need treatment, they must either go without care or must sacrifice much needed income. This is a poor state of affairs for our Region in the 21st century. But even in countries where financing of health care presents no problem, health systems suffer from important gaps that need to be addressed before access to quality health care is achieved.

Another major issue is the impact of emergencies caused by natural disasters and political unrest on the health of affected populations, on health systems, and on socioeconomic development. In the past two years, 13 countries in the Region have experienced such emergencies, with more than 42 million people affected. Most significant, in 2012, was the rapid deterioration of the humanitarian situation in the Syrian Arab Republic, which has resulted in more than 6.8 million people in need of assistance across the entire country, as well as 4.25 million internally displaced and 1.6 million refugees in neighbouring countries.

Polio transmission persists in Afghanistan and Pakistan, threatening the global eradication programme and polio-free Member States. 2012 witnessed strengthened efforts with important achievements including a considerable

reduction in the number of cases in the two countries. However, the current insecurity, the disinformation being propagated against vaccination and the recent attacks on polio health workers renders any resulting optimism null and void. This is a very serious situation that demands intensive response.

Progress in health development is increasingly supported or hindered by economic and geopolitical interests that influence the wider health and foreign policy agendas. This link has been recognized repeatedly at the United Nations General Assembly, and a number of initiatives have been started within the Organization to better prepare Member States and staff for the changed context within which health challenges need to be addressed. In this context, the Regional Office organized a seminar on global health diplomacy which provided an opportunity to bring together representatives from ministries of health and foreign affairs to discuss approaches to strengthening capacity for health diplomacy in the Region. Participants discussed the ways in which foreign policy can either hinder or help health, and the foreign policy concerns posed by emerging infectious diseases and by health issues during conflicts and in post-conflict reconstruction. This initiative is very much in its infancy and I will continue to take it forward in order to promote development of health diplomacy in the Region, including cooperation and partnerships between countries on priority health issues, such as the International Health Regulations and polio eradication, and promoting a rights-based approach in health sector response in order to enhance health equity and universal health coverage.

This annual report defines a new direction for reporting on WHO's work at regional and country

level. The following chapters focus on the strategic priorities identified as well as WHO management and reform. They identify the specific challenges that WHO will address, out of the many existing challenges, and the work that has been initiated to address these challenges. In future reports I plan to report on the progress in each of these areas, against specific benchmarks and milestones. The report does not cover the full range of WHO technical programmes but provides a snapshot of the major work being undertaken in priority areas². I look forward to receiving feedback on the report from Member States, partners and other stakeholders.



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² Five annexes relating to Regional Office structure, staffing, meetings, publications and collaborating centres can be found on the Regional Office web site at <http://www.emro.who.int/about-who/annual-reports/>