

Health and healing in the Eastern Mediterranean Region: Progress on Vision 2023 and the priority health targets

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The WHO Eastern Mediterranean Region (EMR) faces several complex health challenges, but also has enormous potential to address those challenges and make huge gains. This conviction guided and informed the formulation of a new vision – Vision 2023 – for the region in 2018 at the beginning of the 5-year term of Dr Ahmed Al-Mandhari as Regional Director (1). Over the 5-year period, WHO and its Member States and partners jointly implemented the vision and its accompanying strategy (2) to accelerate progress towards achieving WHO's global strategic priorities and goals, the health-related Sustainable Development Goals (SDGs) and the Universal Health Coverage (UHC) within the unique context of the region.

Central to Vision 2023 was the principle of Health for All by All – the belief that every sector (government and non-government), individual, family and community can and should make valuable contributions to improving health, and that progress is possible at all levels in this diverse and culturally rich region, which includes some of the world's highest-income countries but also some of the poorest and most fragile.

Optimism towards the achievement of Vision 2023 seemed questionable at the onset in 2018 because the region was already beset by complex and colossal health and humanitarian emergencies, which were later escalated and compounded by the COVID-19 pandemic. In 2023 alone, the region witnessed deadly earthquakes in Afghanistan, Morocco and the Syrian Arab Republic; devastating floods in Libya; multiple disease outbreaks; the Gaza war; and protracted conflict in Sudan and several other countries (3). As of December 2023, more than 140 million people in the region needed humanitarian assistance, around 38% of the global total need for humanitarian assistance (3).

It is therefore hardly surprising that EMR countries are currently not on track to achieve the health-related SDGs. Recent analysis of 50 health-related indicators by WHO reveals the damage caused by the COVID-19 pandemic and other disruptions to healthcare (4). As the WHO report notes, there has been minimal overall progress regarding health coverage, health risk factors and health determinants since 2020, and no progress on most morbidity and mortality indicators, including maternal and child mortality rates, mortality rates due to

noncommunicable diseases (NCDs), and the prevalence of some communicable diseases.

However, there are many reasons to be hopeful. Although progress in reducing under-5 mortality in the EMR has stalled in recent years, the regional average mortality rate has decreased considerably since 2010, from 60 to 45 deaths per 1000 livebirths (4). The stagnating regional average scores on other indicators mask some of the impressive advances in some countries: for example, between 2015 and 2021, mortality due to NCDs decreased by 10% in Oman, 9% in Saudi Arabia and 8% in Qatar (5); and there were significant increases in the UHC Index in the United Arab Emirates (14%), Pakistan (14%) and Islamic Republic of Iran (10%) (6).

Further evidence in the Vision 2023 end-term implementation report shows significant progress (7). While recognizing that EMR is lagging on critical health and development targets, the report identifies numerous successes over the 5-year period in all the 22 countries and territories, and across the full range of WHO's strategic priorities and technical programmes. For example, Bahrain, Egypt, Islamic Republic of Iran, and Oman eliminated measles and rubella (7); Egypt became the world's first country to be validated by WHO as being on the path to hepatitis C elimination (8); and wild poliovirus is now closer to being eradicated than ever in the region (9). Many countries have leveraged digital technologies and telemedicine to improve services for chronic diseases (10). The Regional Healthy City Network expanded from 64 cities in 11 countries in 2019 to 110 cities in 15 countries by August 2023, signalling the commitment of policymakers to promoting healthcare in all policies (7). The report of the Regional Commission on Social Determinants of Health provides evidence on the unprecedented extent of the underlying causes of ill-health in the region, including gender inequities (11), thus paving the way for further progress in the coming years.

Paradoxically, a key factor that drove many recent improvements in the health sector has been the COVID-19 pandemic. While the pandemic undermined essential health services and impaired outcomes in the short-term, it catalysed investment and innovation in health. For example, the average number of sentinel surveillance sites per country increased by 59% (from 51 to 81) and the average number of laboratories increased by 340% (from 25 to 110), including at regional, governorate or district,

and community levels (12). More than 50 000 healthcare workers received critical care training (13). Policymakers and populations across the region have seen that it is possible to mobilise resources and effect change on a large scale. WHO, the Member States and partners are now working together to harness the momentum of innovations and investments due to the COVID-19 pandemic to advance UHC and health security across the region (14).

Now that the leadership of the regional office has been transitioned from Dr Ahmed Al-Mandhari to Dr Hanan Balkhy (15), we are strongly convinced that the transformation of health and wellbeing witnessed during the previous 5 years in the region will continue if all stakeholders build on the documented successes and scale-up proven best practices.

However, WHO and its Member States and health sector partners cannot work miracles. EMR hosts a higher proportion of people in need of humanitarian assistance than any other WHO region (16), and much of the suffering in the region was caused by humans. Conflict stands out as a significant threat to health; but it

could and should be avoided. The brutality and suffering in Gaza and Sudan are the most prominent current examples. At least 9 of the 22 countries and territories in the region were directly affected by armed conflict during the 5-year period of implementing Vision 2023 (17,18). Often, the conflicts included attacks on health workers: between 2018 and 2023, the 22 countries and territories in the region reported 6141 such attacks, resulting in 1855 deaths and 3971 injuries (19). The wider impact of conflict on health in the region is incalculable, with millions of people displaced, hunger, disease outbreaks, and devastated health systems.

Without peace, we cannot rebuild health systems or other critical systems and infrastructure in the region, and cannot ensure that our people enjoy the health and wellbeing they deserve. We therefore call on all Member States and partners to stand by their commitment to ensure health for all, and call on all warring parties to stop fighting and focus on saving and improving lives.

The Eastern Mediterranean Region can thrive, but it must first be allowed to heal.

References

1. World Health Organization. Vision 2023 for the Eastern Mediterranean Region: health for all by all – a call for solidarity and action. Cairo: WHO Regional Office for the Eastern Mediterranean, 2018. https://applications.emro.who.int/docs/RD_Vision_2018_20675_en.pdf?ua=1&ua=1.
2. World Health Organization. WHO's strategy for the Eastern Mediterranean Region, 2020–2023: turning Vision 2023 into action. Cairo: WHO Regional Office for the Eastern Mediterranean, 2019. <https://applications.emro.who.int/docs/EMRPUB-RDO-014-2019-EN.pdf?ua=1>.
3. United Nations Office for the Coordination of Humanitarian Affairs. Humanitarian Action. New York, UNOCHA, 2023. <https://hum-insight.info>.
4. World Health Organization. Progress on the health-related Sustainable Development Goals and targets in the Eastern Mediterranean Region, 2023. Cairo: WHO Regional Office for the Eastern Mediterranean, 2023. <https://applications.emro.who.int/docs/Progress-health-related-SDGs-targets-EMR-2023-eng.pdf?ua=1>.
5. World Health Organization. Probability (%) of dying between age 30 and exact age 70 from any of cardiovascular disease, cancer, diabetes, or chronic respiratory disease, both sexes (SDG 3.4.1). In: WHO Global Health Observatory. Geneva: World Health Organization, n.d. [https://www.who.int/data/gho/data/indicators/indicator-details/GHO/probability-of-dying-between-exact-ages-30-and-70-from-any-of-cardiovascular-disease-cancer-diabetes-or-chronic-respiratory\(-\)](https://www.who.int/data/gho/data/indicators/indicator-details/GHO/probability-of-dying-between-exact-ages-30-and-70-from-any-of-cardiovascular-disease-cancer-diabetes-or-chronic-respiratory(-)).
6. World Health Organization. UHC Service Coverage Index (SDG 3.8.1). In: WHO Global Health Observatory. Geneva: World Health Organization, n.d. <https://www.who.int/data/gho/data/indicators/indicator-details/GHO/uhc-index-of-service-coverage>.
7. World Health Organization. Advancing health for all by all: report on the implementation of Vision 2023 for the Eastern Mediterranean Region. Cairo: WHO Regional Office for the Eastern Mediterranean, 2023 <https://applications.emro.who.int/docs/Advancing-Health-For-All-by-All-Report-eng.pdf?ua=1>.
8. Hassany M, Abdel-Razek W, AbdAllah M. WHO awards Egypt with gold tier status on the path to eliminate hepatitis C. *Lancet Gastro Hep* 2023;8:1073–1074. [https://doi.org/10.1016/S2468-1253\(23\)00364-3](https://doi.org/10.1016/S2468-1253(23)00364-3).
9. World Health Organization. Sustaining momentum to end polio. Cairo: WHO Regional Office for the Eastern Mediterranean, 2024. <https://applications.emro.who.int/docs/WHOEMPOL447E-eng.pdf?ua=1>.
10. World Health Organization. Stories from the field: sharing successful strategies from the Eastern Mediterranean Region in mitigating noncommunicable diseases and mental health disorders during the COVID-19 pandemic and beyond. Cairo: WHO Regional Office for the Eastern Mediterranean, 2023. <https://applications.emro.who.int/docs/9789292741167-eng.pdf?ua=1>.
11. World Health Organization. Build back fairer: achieving health equity in the Eastern Mediterranean Region: report of the Commission on Social Determinants of Health in the Eastern Mediterranean Region. Cairo: WHO Regional Office for the Eastern Mediterranean, 2021. <https://applications.emro.who.int/docs/9789290228677-eng.pdf>.
12. World Health Organization. Unpublished internal report, 2023.

13. World Health Organization. COVID-19 pandemic response in the Eastern Mediterranean Region: progress report of the Incident Management Support Team. Cairo: WHO Regional Office for the Eastern Mediterranean, 2022. <https://applications.emro.who.int/docs/9789292740344-eng.pdf?ua=1>.
14. World Health Organization. Building resilient health systems to advance universal health coverage and ensure health security in the Eastern Mediterranean Region. Technical paper presented to the 69th Session of the WHO Regional Committee for the Eastern Mediterranean. Cairo: WHO Regional Office for the Eastern Mediterranean, 2022. <https://applications.emro.who.int/docs/Build-resilient-health-systems-UHC-EMR-eng.pdf>.
15. Samarasekera U, Hanan Balkhy: WHO Regional Director for the Eastern Mediterranean. *Lancet* 2024; 403:1013. [https://doi.org/10.1016/S0140-6736\(24\)00427-6](https://doi.org/10.1016/S0140-6736(24)00427-6).
16. United Nations Office for the Coordination of Humanitarian Affairs . Global humanitarian overview 2024: February update – snapshot as of 29 February 2024. New York: OCHA, 2024. [02%20GHO%202024%20February%20Update.pdf](https://www.ocha.org/publications/2024-02-global-humanitarian-overview-2024-february-update).
17. Pettersson T, Davies S, Deniz A, et al. Organized violence 1989–2020, with a special emphasis on Syria. *J. Peace Res.* 2021;58(4):809–825. <https://doi.org/10.1177/00223433211026126>.
18. Obermeier AM, Rustad SA. Conflict trends: a global overview, 1946–2022. Oslo: Peace Research Institute, 2023. <https://www.prio.org/publications/13513>.
19. World Health Organization. Surveillance system for attacks on healthcare. Geneva: World Health Organization, n.d. <https://extranet.who.int/ssa/LeftMenu/Index.aspx>.