

Report of the twenty-second 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 twenty-second meeting on 24–25 February 2025 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.¹

Chair: Dr Salih Ali Almarri (Qatar)
Vice-Chair: Dr Abdullah Hamood Al Harthy (Oman)
Rapporteur: Dr Radi Hammad (Egypt)

4. An overview of the Programme Subcommittee was presented. It was noted that the Programme Subcommittee played a critical role in maintaining a close working relationship between the WHO Secretariat and Member States. The Subcommittee's terms of reference had been amended and expanded in October 2023, to better capture the full scope of its activities.²

5. The objectives of the twenty-second meeting were introduced. A central objective was to discuss arrangements for the 72nd session of the Regional Committee. The Subcommittee would also be invited to discuss several other aspects of global and regional governance, and would receive information briefings on some important recent and upcoming developments, including the WHO programme budget process and global high-level meetings under the auspices of the United Nations General Assembly.

Preliminary outline of the 72nd session of the Regional Committee

6. It was noted that the 72nd session of the Regional Committee would be held as an in-person meeting at the WHO Regional Office in Cairo, Egypt, from 15 to 17 October 2025.

7. It was explained that the Secretariat had conducted an extensive review of arrangements for the Regional Committee, soliciting feedback from internal and external stakeholders. Based on that review, the Secretariat proposed significant reforms to arrangements for the upcoming session with the overall aim of facilitating enhanced Member State engagement before and during the session. The overall length of the session would be reduced to two-and-a-half days, to reduce the financial and logistical burden on all participants and ensure maximum strategic focus during the limited time available to high-level decision-makers. The shorter meeting time meant fewer technical papers would be tabled on the agenda for discussion than in previous years, and the number of side events held in the margins of the session would also be reduced. In addition, discussion of the Regional Director's annual report to Member States would be moved to an evening session, to take place shortly before her formal welcoming dinner for Regional Committee participants.

¹ See [EM/RC63/8 Rev.2](#).

² Through [decision 6](#) of the Regional Committee at its 70th session.

8. To support more focused engagement during the Regional Committee session, several changes were proposed for the lead-up to the session. The schedule for development and dissemination of technical papers and other documents would be shortened and brought forward, allowing more extensive consultation with Member States prior to the sessions itself. It was also proposed to have an expanded virtual programme of “pre-RC” technical events; most or all such events would be scheduled for the first week of October and they would include presentation of progress reports on implementation of different Regional Committee resolutions as well as several events that in previous years might have been squeezed into the Regional Committee session timetable. Key points from pre-RC consultations and events would be captured and displayed to participants during the Regional Committee session. The aim was to give Member States more time and more opportunities to consider and comment on Regional Committee business, to enable more focused discussion of draft resolutions during the session itself.

9. An outline of the proposed provisional agenda and timetable for the Regional Committee session was presented to the Programme Subcommittee. Six proposed technical papers were presented, and the Subcommittee was invited to choose three or four for inclusion in the agenda for the session. It was noted that technical papers were intended to cover important public health issues in the Region where it was felt that the time was ripe for a Regional Committee resolution to help achieve positive impact on health in countries of the Region. In a significant change from previous years’ practice, suggested technical paper topics had been solicited from Member States. The 59 suggestions received had been grouped into possible topics, and these had then been prioritized based on objective selection criteria³ to produce a shortlist of six for the Subcommittee’s consideration. For each of the proposed technical papers, the Programme Subcommittee was presented with a provisional outline of possible action points for, respectively, Member States and the Secretariat that might be requested via a related draft resolution. In addition, four topics for possible side events were proposed, and the Subcommittee was invited to decide which events (if any) should be scheduled during the Regional Committee session and which (if any) might be held virtually during the pre-RC period.

10. The Programme Subcommittee was also invited to consider the proposed Regional Committee theme. Instead of creating a bespoke theme for the session as in previous years, it was proposed to use the branding and theme for the regional strategic operational plan that had been adopted at the 71st session of the Regional Committee in October 2024 – “Together for a healthier future: action, access, equity” – as this summarized the strategic focus of WHO’s work throughout the coming four years.

11. It was noted that, in addition to these topics, the Regional Committee agenda would also include several other items of business, including progress reports on implementing certain resolutions, items of business from WHO’s global governing bodies referred for action or information, an update on the WHO investment round and several other standing items. In line with a request from Member States at a closed side meeting in the margins of the 71st session of the Regional Committee, one new standing item was being added to the provisional agenda: an update on the health impacts of economic sanctions in countries of the Region. As in previous years, the Regional Director would present a report highlighting major achievements and challenges; but in another departure from previous practice the reporting period would be changed so that instead of focusing on the previous calendar year, the report would cover developments up to around the middle of the current year.

Decisions by, and feedback from, the Programme Subcommittee

12. The Programme Subcommittee welcomed the proposal to shorten the agenda and timetable for the Regional Committee session, and to complement the session with an expanded programme of pre-RC virtual events. The Subcommittee approved four of the six proposed technical paper topics for inclusion in the agenda for the session, and provided extensive feedback and suggestions on the proposals, to be taken into account by technical teams in drafting the technical papers and developing draft resolutions.

³ One point was awarded to a suggested topic for each of the following criteria that it met: more than three proposals had similar content; topic aligned with WHO’s global health agenda; topic aligned with WHO’s regional strategic operational plan and flagship initiatives; topic relevant to an emerging public health issue. One point was deducted for each of the following criteria: topic discussed during a Regional Committee session within the previous six years; topic covered by an existing global strategy.

13. The Programme Subcommittee approved one proposed side event topic, with two other topics approved for virtual pre-RC events. The proposed Regional Committee theme was approved, as was the addition of a new standing agenda item on the potential health impacts of economic sanctions. The proposed revised reporting period for the Regional Director's annual report was also approved.

14. The provisional agenda topics agreed by the Programme Subcommittee are listed in Annex 3 along with the lead department of the WHO Regional Office responsible for delivering each item.

Global and regional governance matters

15. The Programme Subcommittee discussed several other issues relating to global and regional governance. Dr Abdulrahman AlQashaan updated members on his work as Regional Coordinator for WHO Member States in the Region. It was noted that he had a key role in fostering unity and solidarity among his fellow Member State representatives from the Region, coordinating regional positions and enhancing representation in WHO's global governing bodies. For example, in the most recent session of the WHO Executive Board, Member States had been able to coordinate to draft and deliver regional statements, strengthening their collective voice on shared concerns and common positions. They had also developed a position paper and successfully introduced new text during sessions of the Intergovernmental Negotiating Body (INB) to draft and negotiate a WHO convention, agreement or other international instrument on pandemic prevention, preparedness and response. However, challenges remained including, among others, significant resource constraints and there was a continuing need to build and maintain Member State capacities in health diplomacy.

16. The Subcommittee also received a presentation from the Secretariat on two further issues: the selection processes for Member State nomination to various regional and global bodies and offices, and the accreditation of non-State actors to participate in sessions of the Regional Committee.

17. It was explained that processes for determining Member State representation in various governing bodies and offices – including, among others, Chair of the Regional Committee, membership of the Programme Subcommittee, membership of the Executive Board and President or Vice-President of the Health Assembly – had been changed within the past decade as part of a comprehensive programme of global and regional governance reform. Whereas in previous years nomination to offices had often been a matter of accepting participation from a relatively small number of Member States that volunteered, representation was now generally based on a principle of rotation. Member States were nominated in alphabetical order from within their country grouping, but previous occupancy of posts was also taken into account to grant preference to Member States that had not held offices previously. While it was felt that overall, the reformed selection process worked well, concerns had arisen that those relatively few Member States that had previously been most assiduous in volunteering to hold posts now in effect found that their previous record of service counted against them, as their extensive past occupancy of posts effectively ruled them out of consideration under the reformed rules. In the interests of fairness, it was therefore proposed to modify the rules so that previous occupancy of posts was taken into account only during the period since the reforms had taken effect in 2018. The Secretariat sought the Programme Subcommittee's feedback and approval to present this proposed change to the Regional Committee.

18. As regards the accreditation of regional non-State actors to attend sessions of the Regional Committee, it was explained that a rigorous formal accreditation procedure had been developed in line with WHO's global rules and policies, and approved by the Regional Committee through resolution EM/RC67/R5 (2020). Under that procedure, non-State actors that had previously attended sessions of the Regional Committee but were not recognized as being in official relations with WHO were invited to apply for accreditation to attend future Committee sessions. Accredited non-State actors could participate in open Regional Committee sessions for three years from the date of accreditation, and could speak or submit statements on items of business, but not vote. Three entities had submitted applications and initial due diligence by the Secretariat had determined that in principle all three entities met the requirements for accreditation. Details of these entities were presented, and the Subcommittee's approval was sought for them to be submitted to the Regional Committee for a decision on accreditation at the opening of its 72nd session.

Decisions by, and feedback from, the Programme Subcommittee

19. **The Programme Subcommittee welcomed the briefing from Dr AlQashaan and expressed strong appreciation for his work.** It was agreed that there had been significantly enhanced coordination in governing bodies work among Member States of the Region, but that further improvements were possible. **The Secretariat was requested to continue working with Member States to build capacities in governance and health capacity.**

20. **The Subcommittee approved the proposed change to the Region's process for nomination to posts on WHO governing bodies in principle, and requested the Secretariat to develop a proposal for consideration by the Regional Committee at its 72nd session.** It was noted that Member States might sometimes choose to decline a nomination, and in such cases the next eligible Member State would be invited to be nominated instead.

21. **The Subcommittee recommended to the Regional Committee that the three non-State actors be accredited to attend Regional Committee sessions, without the right to vote, and requested the Secretariat to develop a draft decision to that effect for consideration by the Regional Committee at its 72nd session.** It was emphasized that attendance of non-State actors in the Regional Committee could only be granted through invitation by the Committee, including non-State actors in official relations with WHO. It was further noted that Member States had no obligation to work with any non-State actor accredited at the regional level or in official relations with WHO.

Briefing sessions

22. The Programme Subcommittee received a briefing on the WHO programme budget. It was noted that the withdrawal of the United States would significantly increase the gap between the Organization's available funding and budget commitments for implementation of its Fourteenth Programme of Work (GPW 14). The assessed contribution of the United States would not be redistributed among remaining WHO Members and Associate Members. Instead, WHO would adopt a budget that would be financed on the basis of a reduced level of contributions, i.e. without the assessed contribution of the United States. Strenuous resource mobilization efforts were under way to try to address this situation, but the scale of the challenge meant cost-cutting measures would also be required. The Secretariat was somewhat ahead of the curve in this regard since on taking office in 2024, the Regional Director had already requested a review of operations to optimize expenditure. The number of in-person intercountry meetings and country missions had already been drastically reduced, and functions in the Region were now being rationalized to maximize potential synergies. Further cost reductions would be introduced in line with a global programme of measures, and the Regional Director's two top priorities in any such changes would be to safeguard resources within countries and to ensure effective monitoring, transparency and accountability in all WHO's operations.

23. Member States were advised that the United States' withdrawal made the recent and proposed increases in assessed contributions more important than ever. An information document prepared for the recent Executive Board session showed draft calculations of assessed contributions for the year 2026 of the biennium 2026–2027 for each Member State.⁴ Cost control would continue to be a priority for the Organization going forward, and the proposed changes in arrangement for the new Regional Committee session should help in this, both by significantly reducing the costs attendant on the session itself and in giving Member States more time to scrutinize and assess the potential resource implications of draft resolutions.

24. The Programme Subcommittee also received a briefing from Mr Werner Obermeyer, Director of the Organization's Office at United Nations Headquarters in New York, on recent and forthcoming health-related high-level meetings under the auspices of the United Nations General Assembly (UNGA). Several such meetings had been held in recent years, with significant outcomes: for example, the Political Declaration from the high-level meeting on tuberculosis in September 2023 specified ambitious new targets and funding amounts, while the meeting on antimicrobial resistance the following year produced a complex set of targets covering many sectors. The 80th session of UNGA in September 2025 would include the Fourth High-Level Meeting on NCDs and Mental Health. The meeting would be preceded by several global and regional

⁴ See document [EB156/INF./6](#).

engagement opportunities, and Member States were encouraged to get involved in these. The process for development of meeting documents was presented.

Closing of the session

25. After thanking members of the Programme Subcommittee for their attention and valuable feedback and the Secretariat for their support, the Chair closed the session.

Annex 1. Agenda

1. Opening session
2. Adoption of the provisional programme
3. Election of office bearers of the Programme Subcommittee of the Regional Committee for the Eastern Mediterranean (February 2025–February 2026)
4. Overview of the Programme Subcommittee of the Regional Committee for the Eastern Mediterranean
5. Outline of the 72nd session of the Regional Committee, including proposals for technical papers, side events and pre-session technical consultations and events
6. Practical issues relating to WHO's global and regional governing bodies
7. Briefing on the WHO programme budget
8. Briefing on recent and upcoming health-related high-level meetings under the auspices of the United Nations General Assembly
9. Closing session

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

Egypt	Dr Radi Hammad
Jordan	H.E. Dr Raid Anwar Al Shboul*
Kuwait	Dr Al-Munther Al-Hasawi
Lebanon	Ms Hilda Harb
Oman	Dr Abdullah Hamood Al Harthy
Pakistan	Dr Shabana Saleem*
Qatar	Dr Salih Ali Almarri
Tunisia	Dr Chekib Zedini*

Observer

Dr Abdulrahman AlQashaan	WHO Member States Coordinator for the Eastern Mediterranean Region Health Attaché, Permanent Mission of Kuwait to the United Nations
--------------------------	---

WHO Secretariat

Dr Sussan Bassiri	Director of Business Operations
Dr Adham Ismail	Director of Programme Management
Dr Mohamed Abdi Jama	Senior Adviser (Strategy)
Mr Werner Obermeyer*	WHO Representative at the UN and Head of Office, New York
Ms Mira Kristina Ihalainen	Director, Communication, Resource Mobilization and Partnership (CRP)
Dr Ahmed Zouiten	Director ad interim, Department of Health Emergencies (WHE)
Dr Asmus Hammerich	Director, UHC/Noncommunicable Diseases and Mental Health (NMH)
Dr Nevin Wilson	Director ad interim, UHC/Communicable Disease Control (DCD)
Dr Hamid Syed Jafari*	Director, Polio Eradication (POL)
Dr Awad Mataria	Director, UHC/Health System Development (UHS)
Dr Arash Rashidian	Director, Science, Information and Dissemination (SID)
Ms Samah Abdel Aziz	Technical Officer, Governing Bodies
Mr Amr El Tarek	Regional Adviser, Planning, Budget, Monitoring and Evaluation
Dr Valeria De Oliveira Cruz	Coordinator, Country Cooperation

Mr Omid Mohit	Senior Technical Manager, Strategic Communications for Health
Mr Maroun Karam	Administrative Services Officer
Mr Tobias Boyd	Manager (Publishing, Editorial and Graphic Design)
Mr Amarnath Das	Regional Compliance and Risk Manager
Dr Nasim Pourghazian	Technical Officer
Ms Micaela Pereira	Technical Officer
Ms Miriam Holm	Technical Officer
Mr Ahmed Shokry	IT Service Desk Assistant
Ms Jessica Kanawaty	Administrative Assistant
Mr Seif Tageldin	Governance Specialist
Ms Ines Imbert	Technical Officer

*Via videoconference.

Annex 3. List of topics agreed for the 72nd session of the Regional Committee

Theme	
Together for a healthier future: action, access, equity	
Lead department	Proposed item
Technical papers	
DCD	Zero-dose children: addressing gaps in routine immunization coverage in the Eastern Mediterranean Region
UHS	Health systems recovery in fragile, conflict-affected and vulnerable (FCV) settings in the Eastern Mediterranean Region
NMH	From challenges to solutions: palliative care in the Eastern Mediterranean Region
DCD	Strengthening national biosafety and biosecurity legislation, policies and frameworks in the Eastern Mediterranean Region
Side event	
GBS	Monitoring resolutions of the Regional Committee: addressing longstanding challenges in implementing some resolutions
Pre-RC virtual events	
DCD	Launch of the framework for defeating meningitis in the Eastern Mediterranean Region
DCD	Integrating antimicrobial stewardship and infection prevention and control in primary health care facilities: from resolution to implementation

Annex 4. List of other agreed actions

Lead	Action
Improving governance	
WHO regional Secretariat	Continue working with Member States to build capacities in governance and health diplomacy
WHO regional Secretariat	Develop a proposal to revise the Region's process for nomination to posts on WHO governing bodies, for consideration by the Regional Committee at its 72nd session
Accreditation of non-State actors to participate in sessions of the Regional Committee	
WHO regional Secretariat	Develop a draft decision on accreditation of three non-State actors – the Palestinian Association of Medical Radiation Technologists, the Eastern Mediterranean NCD Alliance and the Gulf Federation for Cancer Control – for consideration by the Regional Committee at its 72nd session