

Resolution

**REGIONAL COMMITTEE FOR THE
EASTERN MEDITERRANEAN**

**EM/RC69/R.2
October 2022**

**Sixty-ninth session
Agenda item 3(a)**

Building resilient health systems to advance universal health coverage and ensure health security in the Eastern Mediterranean Region

The Regional Committee,

Having reviewed the technical paper on building resilient health systems to advance universal health coverage and ensure health security in the Eastern Mediterranean Region;¹

Recalling Regional Committee resolutions EM/RC59/R.3 on health systems strengthening, EM/RC60/R.2 on universal health coverage, EM/RC61/R.2 on global health security and the International Health Regulations (2005), and EM/RC68/R.2 on ending the pandemic: preventing future health emergencies;

Recalling that in 2015 all Member States of the Region committed to achieving universal health coverage as part of the 2030 Agenda for Sustainable Development and that in 2018 all Member States signed the UHC2030 Global Compact and endorsed the Salalah Declaration on Universal Health Coverage;

Concerned about progress in achieving the Sustainable Development Goal (SDG) targets for universal health coverage, including target 3.8.1 on service coverage and target 3.8.2 on financial protection; and that the UHC service coverage index in the Region was estimated at 57 (out of 100) in 2019, which was below the global average of 68 and the second lowest among the six WHO regions; and noting that the number of people facing financial hardship in the Region increased from 11.8% of the population in 2015 to 12.5% in 2017;

Concerned about the Region's vulnerability to emergencies from multiple hazards including disease outbreaks and natural disasters, and noting with particular concern the multiple protracted conflicts and humanitarian crises across the Region that have caused major health system disruption and pose enormous obstacles to universal health coverage and health security;

Noting that many health systems in the Region are facing challenges related to: weak governance arrangements; high out-of-pocket payments and inadequate financial protection arrangements; service delivery arrangements and models of care that are not fit for purpose and which are designed to focus on curative care rather than health promotion; shortage of and imbalances in the health workforce and

¹ EM/RC69/4.

inadequate capacity; limited access to essential medicines and technologies with variable quality and fragile medical supply chains; and inadequate health information systems;

Recognizing that COVID-19 has highlighted how ill prepared the world and the Region were to face a pandemic of such magnitude and demonstrated the vulnerability of national health systems in ensuring continuous access to essential health services amid such emergencies;

Aware that the pandemic has already cost US\$ 12 trillion and is projected to cost up to US\$ 28 trillion globally by 2025, a cost that could largely have been avoided with adequate investment in health system strengthening for emergency preparedness, universal health coverage and health security, and noting that health system strengthening is the most efficient and sustainable approach to achieve universal health coverage and health security goals, and that investing in health systems also offers economic, social and political benefits;

Noting that evidence related to the operationalization of health systems resilience is limited and there is a need for actionable recommendations to enhance the efforts of Member States in building and rebuilding health systems while recovering from the pandemic;

Recognizing that many countries of the Region are reviewing their health systems to develop new strategies toward the recovery phase of the COVID-19 pandemic and are incorporating a “build back better” approach;

Noting the regional agenda for building resilient health systems towards universal health coverage and health security set out in technical paper EM/RC69/4;

1. ENDORSES the regional agenda as set out in the paper including the seven regional priorities and the related goals, objectives and priority actions for supporting Member States;

2. URGES Member States to:

- 2.1 Strengthen health emergency and disaster risk management in line with the plan of action for ending the COVID-19 pandemic and preventing and controlling future health emergencies in the Eastern Mediterranean Region;
- 2.2 Optimize ministries of health and build institutions for public health, to advance the dual goals of universal health coverage and health security;
- 2.3 Establish primary health care-oriented models of care;
- 2.4 Enhance and scale up a fit-for-purpose, fit-to-practice health workforce;
- 2.5 Promote equity and enhance financial protection;
- 2.6 Improve access to medicines, vaccines and health products;
- 2.7 Foster an integrated approach in policy, planning and investments for long-term health system resilience.

3. REQUESTS the Regional Director to:

- 3.1 Engage in technical cooperation with Member States to adapt the regional priority actions to each national context and ensure their effective implementation;

- 3.2 Build regional and national expertise in health system strengthening and health emergency and disaster risk management to build resilient health systems towards universal health coverage and health security;
- 3.3 Support Member States in tracking progress on each of the seven regional priorities and the associated priority actions, and collate and regularly disseminate data from across the Region, including establishing regional and national observatories as appropriate;
- 3.4 Facilitate resource mobilization in support of national efforts to ensure effective implementation of priority actions and progress towards achieving the health-related SDGs; and
- 3.5 Report on progress in implementing this resolution to the 71st, 73rd and 75th sessions of the Regional Committee and present a final report to the 77th session in 2030.