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## **Report of the nineteenth 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 nineteenth meeting on 6–7 March 2024 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.<sup>1</sup>

Chair: Dr Chekib Zedini (Tunisia)  
Vice-Chair: Ms Hilda Harb (Lebanon)  
Rapporteur: Dr Al-Munther Al-Hasawi (Kuwait)

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. A key part of that role was the Subcommittee's work in supporting preparations for Regional Committee sessions, but Subcommittee members also undertook a range of other functions to ensure effective regional representation in global governing bodies and strategic oversight of WHO's mandate. The terms of reference of the Subcommittee had been amended and expanded through decision 6 of the Regional Committee at its 70th session in October 2023, to better capture the full scope of its activities.<sup>2</sup>

5. The objectives of the nineteenth meeting were introduced. A central objective was to discuss arrangements for the 71st session of the Regional Committee including the overall theme for the session and the main proposed items for the technical agenda. The Subcommittee would also be invited to discuss three proposed flagship initiatives that would be strategic priorities during the Regional Director's term, and four issues regarding aspects of global and regional governance. In addition, the Subcommittee would receive information briefings on some important recent and upcoming developments, including global high-level meetings under the auspices of the United Nations General Assembly and the WHO programme budget process and related resource mobilization plans.

### **Preliminary outline of the 71st session of the Regional Committee**

6. It was noted that the 71st session of the Regional Committee would be held as an in-person meeting in Doha, Qatar, from 14 to 17 October 2024. The Secretariat was in close contact with the Government of Qatar regarding their role as host. Her Excellency the Minister of Health of Qatar had kindly agreed to join the current meeting of the Programme Subcommittee in observer capacity and contribute to discussions.

7. An outline of the proposed provisional agenda and timetable for the Regional Committee session was presented to the Programme Subcommittee. It was noted that, in response to feedback from Member States, efforts had been made to reduce the number of items on the agenda, to enable participants to better focus on

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<sup>1</sup> See EM/RC63/8 Rev.2.

<sup>2</sup> See EM/RC70/2.

key issues. It was further noted that, whereas in previous years the first day in the Regional Committee timetable had been set aside for “pre-RC” technical sessions, this year it was proposed to devote the day to high-level discussion of the Regional Director’s flagship initiatives (see further paras. 14–15 below).

8. An overarching theme for the Regional Committee session was proposed: “Health beyond borders: solidarity for access and equity in the Eastern Mediterranean Region”, and four proposed technical papers were presented and discussed in detail. It was noted that Regional Committee 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. Proposed technical paper topics had been selected based on close ongoing consultation with Member State technical focal points, and the choice also reflected strategic priorities identified through work to develop WHO’s upcoming new global strategic framework, the Fourteenth General Programme of Work (GPW14). 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. It was noted that work on developing papers would need to begin soon to ensure their timely circulation to Member States in advance of the Regional Committee session. The process of developing papers was likely to involve consultation with Member States and key stakeholders, and the Programme Subcommittee was encouraged to promote engagement from all Member States. In addition, proposals for two side events were briefly presented to the Subcommittee, on the launch of a regional framework for implementing Immunization Agenda 2030 and implementing the regional strategy on local vaccine production. It was noted that, in contrast to technical papers, side events allowed a range of leading voices to be heard on major issues of concern without necessarily resulting in a formal outcome of the Regional Committee (i.e., a decision or resolution). While there was potential space in the timetable for a few more side events, and more proposals might be shared with the Subcommittee later in the year, the Secretariat would endeavour to limit their number, in line with the aim of having a more focused agenda than in some previous years.

9. 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 normal practice, the Regional Director would present an annual report highlighting major achievements and challenges during the previous calendar year.

#### *Decisions by, and feedback from, the Programme Subcommittee*

10. **The Programme Subcommittee formally endorsed the proposed theme**, noting that the term “borders” could mean more than purely geographical boundaries and barriers. **The Subcommittee also endorsed the list of proposed Regional Committee technical papers**, 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.

11. **The Programme Subcommittee formally endorsed the two proposed side event topics and also requested the addition of a side event focusing on the potential health impacts of economic sanctions.** It was noted that a similar side event at the 70th session of the Regional Committee had been well received. In principle, another side event in the margins of the 71st session would be a useful way to follow up and maintain momentum on this issue of strong concern in the Region, and the Secretariat should consult with Member States to establish the optimum desired content for the side event.

12. Furthermore, **the Subcommittee recommended that WHO representatives to countries of the Region be closely involved in developing arrangements for the 71st Regional Committee session**, to help ensure continuing effective liaison between the Secretariat and Member States.

13. 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.

## Regional Director's flagship initiatives

14. The Regional Director presented flagship initiatives that would be among the key priorities for WHO in the Region during her term in office. Three broad themes for initiatives had been identified based on consultations with ministers and senior technical staff: improving access to affordable medical commodities/securing equitable supply chains; investing in and empowering human resources for health; and accelerating control of substance use. It was explained that these initiatives were intended to complement other technical programmes and initiatives by the Secretariat and Member States, and to help ensure that agreed tools and frameworks were operationalized. The Region faced major challenges in each of the three areas, and it was felt that in each case a high-profile initiative led by the Regional Director could galvanize action at the regional level to remove some important bottlenecks. The initiatives might, for example, include action to develop an effectively resourced mechanism for pooled procurement of medicines and vaccines in the Region, twinning projects to build capacities for health workforce accreditation, and Region-wide partnership to raise the salience of health in multisectoral work to tackle substance use and foster approaches based on harm reduction.

15. The Regional Director emphasized that the flagship initiatives were not intended to address each of the three thematic areas comprehensively; on the contrary, it would be important to focus on achieving tangible results through each initiative, and it was particularly important to set limited, achievable but meaningful targets for the first two to three years, as success in meeting such targets could then build momentum for further achievement. Accordingly, feedback from the Subcommittee was being sought on two key points: (i) whether members agreed with the three thematic areas chosen; and (ii) if so, whether members would recommend any specific outcomes or targets for each initiative.

### *Decisions by, and feedback from, the Programme Subcommittee*

16. **The Programme Subcommittee agreed that the three proposed thematic areas were important areas for strategic action in the Region. It was also agreed that ministerial plenaries during the first day of 71st Regional Committee session should be devoted to discussion of the initiatives.** Subcommittee members gave detailed feedback on each of the three proposed initiatives, but it was agreed that further work was necessary to crystallize objectives and targets.

## Improving WHO's regional and global governance

17. Four issues concerning practical aspects of WHO's regional and global governance were raised for the Programme Subcommittee's consideration: arrangements for the preparation of regional Member State statements to WHO's global governing bodies; the role of the Member State coordinator among Permanent Missions from the Region in Geneva; procedures for the development of draft resolutions for Regional Committee; and the timeline for accreditation of regional non-State actors to attend the upcoming Regional Committee session.

18. It was explained that Member States had raised concerns regarding three of the four issues. These included concerns that there was sometimes insufficient coordination among Member States in preparing statements to be delivered in WHO's global governing bodies on behalf of the Region, and this could impact on Member States' engagement; that the critically important voluntary role of the Member State coordinator among Permanent Missions was not well enough defined or supported; and that, while the Secretariat had made efforts to increase Member State involvement in the development of draft Regional Committee resolutions, there remained room for further improvement both in the quality of drafting and in Member States' engagement in the process.

19. 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). Implementation of the new procedure had been disrupted by the COVID-19 pandemic, and the Secretariat was now concerned that there was insufficient time to implement the procedure as adopted by the Regional Committee. Exceptional approval was therefore being sought from the Programme Subcommittee to follow an accelerated timeline for accreditation as an exceptional measure during 2024, to ensure that non-State actors in the Region had the opportunity to be considered for accreditation to attend the 71st session of the Regional Committee.

*Decisions by, and feedback from, the Programme Subcommittee*

20. The Programme Subcommittee discussed these issues in detail. **It was agreed that arrangements for the preparation of regional statements needed to change to support more effective engagement by Member States.** One problem in this regard was that statements were generally invited on grouped agenda items, but the grouping of agenda items was not disclosed by WHO's global Secretariat until a relatively short time before the relevant meeting. **It was therefore agreed that the Programme Subcommittee would contact the WHO Secretariat's global governing bodies via the Regional Director to request more timely notice of agenda items, groupings and documentation. It was also agreed that the governing bodies team in the Regional Office would work with Member States to identify short bullet point-style key messages on the main agenda points before receiving the grouping of agenda items,** so that a starting point for regional statements was prepared in good time; and **it was agreed that Member States should discuss among themselves whether further improvements to arrangements for preparing statements.** More generally, it was felt that Member States might consider augmenting their delegations to WHO's global governing bodies to include more technical experts including young public health professionals, and that permanent missions might be more closely involved in Regional Committee sessions to improve coordination of Member State representation across the three levels of WHO.

21. **Regarding the role of the Member State coordinator among Permanent Missions from the Region in Geneva, it was agreed that the Secretariat should follow up with Member States in capitals and Permanent Missions with a view to establishing written terms of reference.** On the development of draft resolutions for the Regional Committee, **it was agreed that as an experiment, for the upcoming Regional Committee session the Secretariat should provide a shared folder and liaise with Member State focal points to enable and encourage them to co-draft at least one of the four draft resolutions on technical papers.** The Programme Subcommittee also agreed to adopt the proposed exceptional timeline for accreditation of regional non-State actors to attend the upcoming Regional Committee session, noting that the only change would be to the timeline for accreditation, not the procedure or assessment criteria.

**Briefing sessions**

22. The Programme Subcommittee received a briefing from Mr Stewart Simonson, WHO Representative and Head of the Organization's Office at United Nations Headquarters in New York, on recent and forthcoming health-related high-level meetings held under the auspices of the United Nations General Assembly (UNGA). Three such meetings had been held in 2023: on pandemic prevention, preparedness and response, universal health coverage and tuberculosis. A high-level meeting on antimicrobial resistance would be held in September 2024, while a Summit for the Future scheduled for the same month offered an important opportunity to ensure that health policy was given due consideration in broader cross-cutting discussions on revitalizing the multilateral system. It was explained that the focus of UNGA high-level meetings was political rather than technical: they provided an opportunity to galvanize global political support at the very highest levels, but posed potential challenges in that most Member State delegations tended to include relatively few technical experts. There was arguably scope to better leverage the technical expertise available elsewhere to support informed discussion and engagement at UNGA high-level meetings; for example, Member States of the Region might consider working with the Secretariat to develop compelling narratives highlighting key technical issues for the benefit of delegations in New York. This should also help to ensure effective alignment with WHO's technical programmes and other initiatives such as the upcoming Fourth High-level Ministerial Conference on Antimicrobial Resistance, to be held in Riyadh, Saudi Arabia, in November 2024. It was noted that the current briefing session was the first known example of the WHO Representative at the United Nations being invited to discuss coordination directly with one of the Organization's regional governing bodies. It was agreed to strengthen liaison between the Organization's Office at United Nations Headquarters, the Regional Office and Member States from the Region.

23. The Programme Subcommittee also received a briefing on the WHO investment round and related resource mobilization plans, complemented at members' request by a briefing on the WHO Programme Budget. It was explained that significant efforts were needed to secure the financing needed to achieve the results and priorities outlined in the approved Programme Budget 2022–2023. To improve WHO's financing, Member States had approved gradual increases in assessed contributions to reach 50% of the approved base budget, in line with the recommendations of the Sustainable Financing Working Group. The first increase had

already been received for the Programme Budget 2024–2025, with subsequent increases for the 2026–2027 and 2028–2029 Programme Budgets subject to approval from the World Health Assembly. Even with these increases in assessed contributions, there would still be a funding shortfall of approximately US\$ 7 billion over the four-year period for implementation of GPW14. WHO was therefore launching its first ever Investment Round to fill this gap with flexible and predictable resources, again in line with the recommendations of the Sustainable Financing Working Group. It was noted that programmatic implementation of GPW14 would be geared to Member State priorities, as established through extensive ongoing consultation. The critical importance of the WHO Investment Round and other resource mobilization efforts was emphasized, and it was noted that the upcoming Regional Committee session represented a major opportunity to engage with partners. **It was agreed that the Secretariat would prepare concept notes outlining plans in this regard for the Programme Subcommittee.**

*Closing of the session*

24. After thanking members of the Programme Subcommittee for their attention and valuable feedback and the Regional Office for its support, the Chair closed the session.

## **Annex 1. Agenda**

1. Opening session
2. Adoption of the provisional programme
3. Overview of the Programme Subcommittee of the Regional Committee for the Eastern Mediterranean
4. Election of office bearers of the Programme Subcommittee of the Regional Committee for the Eastern Mediterranean (March 2024–February 2025)
5. Preliminary outline of the 71st session of the Regional Committee, including proposals for the session theme, technical papers and side events
6. Preliminary outline of the Regional Director’s flagship initiatives
7. Practical issues relating to WHO’s global and regional governing bodies
8. Briefing on recent and upcoming health-related high-level meetings under the auspices of the United Nations General Assembly
9. Briefing on the WHO Programme Budget and Investment Round
10. Closing session

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

Bahrain	H.E. Dr Samya Ali Bahram
Iran (Islamic Republic of)	Dr Nicknam Mohammad Hossein*
Iraq	Dr Riyadh Abdul Amer Al-Hilfi
Jordan	H.E. Dr Raid Anwar Al Shboul
Kuwait	Dr Al-Munther Al-Hasawi
Lebanon	Ms Hilda Harb
Morocco	Mr Abdelouahab Belmadani*
Tunisia	Dr Chekib Zedini

Observer:

Qatar	H.E. Dr Hanan Mohamed Al-Kuwari*
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*WHO Secretariat*

Dr Hanan Balkhy	Regional Director
Dr Sussan Bassiri	Director of Business Operations
Dr Rana Hajjeh	Director of Programme Management
Dr Christoph Hamelmann	Chef de Cabinet (CdC)
Dr Mohamed Abdi Jama	Senior Adviser (Strategy)
Mr Stewart Simonson*	WHO Representative at the UN and Head of Office, New York
Dr Maha El-Adawy	Director, Healthier Populations (DHP)
Dr Rick Brennan	Director, Department of Health Emergencies (WHE)
Dr Asmus Hammerich	Director, UHC/Noncommunicable Diseases and Mental Health (NMH)
Dr Yvan Hutin	Director, UHC/Communicable Disease Control (DCD)
Ms Mira Kristina Ihalainen	Director, Communication, Resource Mobilization and Partnership (CRP)
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)

Mr Amr El Tarek	Regional Adviser, Planning, Budget, Monitoring and Evaluation
Ms Tarja Turtia	Acting Country Focus Support and Transformation Lead
Mr Tobias Boyd	Manager (Publishing, Editorial and Graphic Design)
Mr Amarnath Das	Regional Compliance and Risk Manager
Dr Nasim Pourghazian	Technical Officer
Ms Hala El Shazly	Administrative Officer
Ms Hayet Souissie	Protocol Liaison Officer
Mr Ahmed Shokry	IT Service Desk Assistant
Ms Samah Abdel Aziz	Governing Bodies Officer
Ms Jessica Kanawaty	Administrative Assistant
Mr Seif Tageldin	Governance Specialist

\*Via videoconference.



**Annex 3. List of topics agreed for the 71st session of the Regional Committee**

<b>Theme</b>	
Health beyond borders: solidarity for access and equity in the Eastern Mediterranean Region	
<b>Lead department(s)</b>	<b>Proposed item</b>
<b>Technical papers</b>	
DCD	Promoting collaborative action to accelerate the regional response to antimicrobial resistance in the Eastern Mediterranean Region
SID	Enhancement and digitalization of information systems for health in the Eastern Mediterranean countries: a regional strategy, 2024–2027
WHE	Trauma care in humanitarian settings
NMH	Regional action plan for mental health and psychosocial support in emergencies, 2024–2030
<b>Regional director's flagship initiatives</b>	
RDO	Improving access to affordable medical commodities/securing equitable supply chains
RDO	Investing in and empowering human resources for health
RDO	Accelerating control of substance use
<b>Side events</b>	
DCD	Launch of the regional framework for Immunization Agenda 2030
UHS	Regional strategy on local vaccine production: moving towards successful implementation
To be confirmed	The impact of economic sanctions on health

**Annex 4. List of other agreed actions**

<b>Lead</b>	<b>Action</b>
<b>Improving governance</b>	
Programme Subcommittee	Write to the WHO Secretariat's global governing bodies team requesting more timely notice of agenda items, groupings and documentation
WHO regional Secretariat	Work with Member States to identify short bullet point-style key messages on the main agenda points before receiving the grouping of agenda items
WHO regional Secretariat	Follow up with Member States in capitals and Permanent Missions to establish written terms of reference for the role of regional Member State coordinator in Geneva
WHO regional Secretariat	Provide a shared folder and liaise with Member State focal points on co-drafting of at least one of the four draft Regional Committee resolutions on technical papers
WHO regional Secretariat	Implement procedure for accreditation of regional non-State actors to attend the upcoming Regional Committee session according to the exceptional timeline agreed by the Programme Subcommittee
<b>WHO Investment Round and resource mobilization</b>	
CRP	Prepare concept notes for the Programme Subcommittee outlining planned events on partnership and resource mobilization during the 71st session of the Regional Committee