

**69th session of the WHO Regional Committee for the Eastern Mediterranean,
10–13 October 2022
Cairo, Egypt**

**EMRO/RC69/DJ/3
12 October 2022**

Documents	Official documentation of the session is available in Arabic, English and French on the Regional Committee website . Participants are kindly requested to consult the documents online.
Internet access	The meeting will be conducted both in person and virtually using the Zoom video conferencing platform, facilitated from WHO's Regional Office in Cairo, Egypt. Details for accessing the virtual platform will be provided following completion of the registration process.
Support	You will find here useful tips on how to connect to and navigate the virtual Regional Committee platform, as well as useful contact information for IT and administrative support for the Regional Committee.
Statements	<p>Written statements of no more than 600 words may be submitted for posting on the WHO regional website under the related agenda item. Written statements should be sent in advance of the opening of the 69th session of the Regional Committee. They may be submitted in lieu of a live intervention or to complement a live intervention from a Member State.</p> <p>Please send written statements for posting to the WHO website to emrgogovbod@who.int, indicating the name of the country delegation/entity in the subject line of the email.</p>
WHO publications	WHO publications are available on the Regional Committee website .
Security	Please ensure that your RC69 ID badge is displayed at all times while inside the premises, if attending in person.
Interventions	To help in drafting the report of this session of the Regional Committee, delegations may provide the text of remarks on paper to a member of the WHO Secretariat or by email to emrgogovbod@who.int . NGO statements may also be submitted for posting on the website.
Membership and attendance	The Regional Committee consists of one representative from each country or territory of WHO's Eastern Mediterranean Region. For the hybrid modality of the Regional Committee, Member delegations can attend in person or access the Zoom platform. Advisers and representatives of other entities invited under Rule 2 of the Regional Committee's Rules and Procedures will be able to follow the sessions and deliberations through webcast.
Languages	The working languages of the Regional Committee are Arabic, English and French. Statements made in any of these languages will be interpreted simultaneously into the other two languages. Member State delegation members will be able to follow in the chosen language by selecting their preferred language when connecting to the Zoom platform. The meeting will also be webcast in multiple languages. The Agenda and other documentation for the session are available in Arabic, English and French on the Regional

Available online: www.emro.who.int/about-who/regional-committee/

Virtual Regional Committee platform

Committee website. Documents will not be dispatched by post. Participants are kindly requested to consult the documents online.

A [virtual platform](#) has been created that simulates the Regional Office. It includes an exhibition of success stories from the Member States of the Region, which can also be viewed in-person in the foyer of the Regional Office. A virtual marketplace provides an exhibition hall of booths showcasing advocacy and technical products from a selected range of regional WHO initiatives. Attendees can save documents and presentations to a virtual briefcase for later viewing. These will also be emailed to attendees later on. Attendees can chat or talk to the relevant technical team for any questions or inquiries about the displayed content.

1. Programme of work

Wednesday, 12 October 2022

Agenda item	Regular session	
Session 1 3(b)	Accelerating the prevention, control and elimination of communicable diseases through integration: optimizing support from Gavi and the Global Fund	EM/RC69/5
Session 2 3(c)	Promoting health and well-being in the Eastern Mediterranean Region: moving from theory to action to achieve the health-related Sustainable Development Goals	EM/RC69/6
Session 3 3(d)	Advancing the implementation of One Health in the Eastern Mediterranean Region	EM/RC69/7
Session 4	Panel discussion Towards more country impact: supporting Member States in accelerating implementation of health-related SDGs through joint action of UN country teams	
Session 5 3(e)	Regional strategy for fostering digital health in the Eastern Mediterranean Region (2023–2027)	EM/RC69/8
Session 6	Panel discussion Leveraging partnerships for collective and transformative actions to achieve Health for All by All	
Session 7	Side event (not part of regular sessions) Report on the most recent data on emerging tobacco and nicotine products	Parallel meeting 7th floor meeting room
Session 8	Side event (not part of regular sessions) One Planet, One Health: sustainable and resilient health care systems	Parallel meeting 5th floor meeting room
Session 9	Side event Health systems governance framework for action: institutionalizing participatory governance in the Eastern Mediterranean Region	Parallel meeting Kuwait Hall
	Closed Meeting: Foundation for the State of Kuwait Prize for the Control of Cancer, Cardiovascular Diseases and Diabetes in the Eastern Mediterranean Region	3rd floor meeting room
	Meeting of the Drafting Committee	7th floor meeting room

2. Report of meetings

Tuesday, 11 October 2022

Agenda item Regular sessions

The Regional Committee elected the following officers:

Chair: H.E. Dr Mai Alkaila, Minister of Health of Palestine

Vice Chair: H.E. Dr Hani Mousa Bader Al-Eqabi, Minister of Health of Iraq

Vice Chair: H.E. Dr Firas Abiad, Minister of Public Health of Lebanon

The Regional Committee adopted special procedures for its 69th session regulating the conduct of the hybrid meeting.

Based on the suggestion of the Chair of the Regional Committee, the Committee decided that the following should constitute the Drafting Committee:

Dr Ahmed El-Sobky (Egypt), Dr Ahmad Dmeirieh (Syrian Arab Republic), Mrs Noura Abdi (Djibouti), Dr Yaser Bouzia (Palestine), Dr Hanadi Haydar Hassan (Sudan), Dr Hussain Alrand (United Arab Emirates), Dr Mohammed Mustafa Rajamanar (Yemen). Secretariat: Dr Rana Hajjeh, Dr Christoph Hamelmann, Dr Richard Brennan, Dr Maha El-Adawy, Dr Yvan Hutin, Dr Awad Mataria, Dr Arash Rashidian, Mr Tobias Boyd.

The Regional Committee adopted the provisional agenda and provisional daily timetable.

Chair: H.E. Dr Mai Alkaila (Palestine)

Annual report of the Regional Director for the year 2021 and progress reports

The Regional Director presented his report to the Regional Committee on the work of WHO in the Eastern Mediterranean Region in 2021. His presentation also outlined more recent achievements and challenges, and suggested ways forward. The Regional Director noted examples of achievements in every country of the Region, showing that progress was possible despite grave challenges. Member States needed even stronger commitment to achieve the health-related Sustainable Development Goals. The COVID-19 pandemic had shown that the most effective and cost-effective protection was to invest in strong, integrated, people-centred health systems. The Seventy-fifth World Health Assembly had decided to give WHO the sustainable, flexible funding needed to fulfil its mandate, and so the task now was to turn global momentum into life-changing action to improve health across the Region. The agenda for the 69th session of the Regional Committee included proposals to step up work in several critical areas towards the regional vision of Health for All by All.

Interventions were made by representatives of the following Members of the Committee (in order): Lebanon, Morocco, Kuwait, Islamic Republic of Iran, Bahrain, Egypt, Iraq, Somalia, Syrian Arab Republic, Pakistan, Sudan, Libya, Yemen, Palestine, Saudi Arabia and Tunisia.

Special updates:

Emergencies in the Eastern Mediterranean Region and the work of the Intergovernmental Negotiating Body (INB)

The Regional Emergency Director, WHO Health Emergencies Programme, presented an update on emergencies in the Region. Humanitarian needs were soaring due to disease outbreaks, natural disasters and conflict. IHR core capacities were still insufficient and there were key gaps in leadership and governance, investment in preparedness and emergency management capacities. WHO was working to strengthen all-hazards emergency preparedness, readiness and management in the Region. The Organization had played a key leadership and coordination role in the response to COVID-19, and had provided crucial logistics and supply chain support, capacity-building for clinical staff and enhanced access to life-saving equipment and therapeutics. In the Region, 46% of the population had been fully vaccinated against COVID-19 and there had been a focus on intensification campaigns in fragile country settings. WHO had also successfully responded to the humanitarian crisis in Afghanistan in partnership with UNICEF and with humanitarian funding from partners, providing essential support to the country's health facilities. Furthermore, WHO had been working to advance the science and practice of emergency management. Good progress had been made, but Member States should continue to advocate for high-level political engagement and investment in preparedness, operationalize the Health Emergency Preparedness and Response Architecture (HEPR), professionalize emergency management and share data and lessons learned.

Ms Precious Matsoso of South Africa, Co-Chair of the INB Bureau noted that in December 2021, the World Health Assembly had established an intergovernmental negotiating body (INB) to draft and negotiate a convention, agreement or other international instrument under the Constitution of the WHO to strengthen pandemic prevention, preparedness and response.

Mr Ahmed Soliman of Egypt, Vice-Chair of the INB, presented the work of the INB. It had been agreed that the instrument should contain both legally binding and non-legally binding elements. A working draft had been produced, and a process agreed for intersessional work. The draft document aimed to strengthen pandemic prevention, preparedness and response (PPR) using a whole-of-society and whole-of-government approach, consistent with the right to health and respect of human rights, in accordance with each Member State's capabilities and respectful of its sovereign rights and national context. The INB Bureau would develop a conceptual zero draft, to be shared with all Member States and relevant stakeholders by mid-November.

Interventions were made by representatives of the following Members of the Committee (in order): Tunisia, Bahrain, Iran (Islamic Republic of), Iraq, Lebanon, Morocco, Sudan, Somalia, Palestine, Syrian Arab Republic and Yemen.

The Regional Emergency Director welcomed the interventions and noted that WHO would support Member States to prioritize strengthening emergency preparedness and response capacities in the context of building a resilient health system. There was a need for the adoption of a whole-of-government and whole-of-society approach that was integrated and comprehensive, and to share experiences and lessons learned.

Mr Ahmed Suliman said that the INB process was an historic opportunity to address problems that had faced the Region for decades, and it was vital that Member States of the Region participated in the process.

Dr Jaouad Mahjour, Assistant Director-General, Emergency Preparedness, noted that there were currently two important Member State-led processes underway to make the world better prepared for the next pandemic and that currently there was no Eastern Mediterranean Region representation on the Working Group on IHR Amendments.

The WHO Regional Director said that it was not enough just to survive; the Region needed to excel or be left behind. There was an opportunity to be seized to build back better, stronger, more resilient health systems for the future. The Region needed to have a voice in the INB and to share its experience globally. The Region could become a global model for emergency response and recovery.

WHO's Director-General welcomed Member States' engagement. While emergencies threatened hard-won health gains, they also ironically offered opportunities to mobilize broad support for necessary long-term changes. The devastating and wide-reaching impact of the COVID-19 pandemic had shown that when health is at risk, everything is at risk. Health was an essential investment, not a luxury. He called on Member States to work to protect future generations.

Special updates:

Polio eradication in the Eastern Mediterranean Region, including the fourth and fifth meeting reports of the Regional Subcommittee for Polio Eradication and Outbreaks

The Director of Polio Eradication presented an update on the status of polio eradication in the Region. An unprecedented decline of wild poliovirus type 1 (WPV1) transmission in the epidemiological bloc of Afghanistan and Pakistan provided a window of opportunity to finally interrupt transmission and achieve eradication, but the virus continued to circulate among hard-to-reach populations. Key developments since 2021 had included: nationwide polio campaigns across Afghanistan; the Director-General's award to health workers killed in Afghanistan; implementation of novel oral polio vaccination type 2 (nOPV2) campaigns in Egypt, followed by Djibouti; and the transition of most non-endemic countries of the Region from Global Polio Eradication Initiative to WHO funding, with greater integration of polio assets into other health efforts. The major risk of poliovirus spread was from the uncontrolled outbreak of circulating vaccine-derived poliovirus type 2 (cVDPV2) in northern Yemen. Member States had demonstrated strong outbreak responses and were owning challenges and solutions. While Afghanistan and Pakistan, north Yemen and Somalia had opportunities to stop polio, they also faced risks, and a range of actions for all countries was needed to finally interrupt transmission and achieve eradication.

The third and fourth meetings of the Regional Subcommittee for Polio Eradication and Outbreaks, established in response to resolution EM/RC67/R.4, were held in February 2022 and June 2022.

Interventions were made by representatives of the following Members of the Committee (in order): Somalia, Yemen, Islamic Republic of Iran, Lebanon, Egypt, Sudan, Iraq, Palestine, Djibouti, Bahrain and Kuwait.

The Regional Director said the Region was witnessing a resurgence of poliovirus. Member States needed to demonstrate strong commitment to contain the outbreaks of cVDPV2 occurring across the Region.

The Director of Polio Eradication acknowledged the commitment of Pakistan to eradicating polio despite the floods affecting the country. Investment in polio eradication was an investment in public health. He accepted the Islamic Republic of Iran's recommendation of polio vaccination for travellers. He praised Sudan in stopping its polio outbreak and agreed that migration was encouraging the international spread of the virus.

Reports of the thirteenth, fourteenth and fifteenth meetings of the Programme Subcommittee of the Regional Committee

On behalf of Dr Ahmed Elsobky, Chair of the Programme Subcommittee of the Regional Committee, a summary report was provided by Mrs Noura Abdi on its thirteenth, fourteenth and fifteenth meetings. The sixteenth meeting of the Subcommittee will be held in February 2023, during which the arrangements for the 70th session of the Regional Committee will be considered.

Place and date of future sessions of the Regional Committee

The Regional Committee decided to hold its 70th session at the WHO Regional Office for the Eastern Mediterranean in Cairo, Egypt, from 9 to 12 October 2023.

Membership of WHO bodies and committees

Chef de Cabinet provided an overview of the current and upcoming regional membership of a number of WHO bodies and committees, including the Executive Board, World Health Assembly and the Programme Subcommittee of the Regional Committee. In addition, a Standing Committee on Health Emergency Prevention, Preparedness and Response had been established in May 2022 and would comprise 14 members. Morocco and Yemen had now submitted their candidatures to serve as the two inaugural regional members.

Building resilient health systems to advance UHC and promote health security in the Eastern Mediterranean Region

The Director of UHC/Health Systems gave a presentation on building resilient health systems to advance universal health coverage and promote health security in the Eastern Mediterranean Region. He noted that the COVID-19 pandemic had highlighted gaps in the design and implementation of health systems globally. Health systems in the Region were already challenged prior to the pandemic and had been further compromised by it, particularly those in fragile, conflict-affected and vulnerable settings. The pandemic had shown that advancing universal health coverage and ensuring health security were complementary and interrelated goals, and a regional agenda was therefore proposed for building resilient health systems towards universal health coverage and health security, based on seven regional priorities. Member States were recommended to implement the most urgent priority actions, adapted to country contexts, with support from WHO and other development partners.

Interventions were made by representatives of the following Members of the Committee (in order): Kuwait, Palestine, Iraq, Somalia, Tunisia, Pakistan, Lebanon, United Arab Emirates, Bahrain, Egypt, Islamic Republic of Iran, Djibouti, Yemen and Saudi Arabia.

The Director, UHC/Health Systems, welcomed the contributions from Representatives and noted that many of the priority actions discussed were included in the technical paper. National strategies and roadmaps needed to be developed to integrate universal health coverage and health security and build resilient health systems. WHO was working to reconceptualize health system resiliency and update the available tools used to assess it. UHC Day in December would be an opportunity to consider the seven regional priorities and implementation at country level.

The Director, Programme Management, stressed the urgency of the situation, as underlined by the COVID-19 pandemic and other outbreaks and natural disasters such as the recent flooding in Pakistan. WHO was looking forward to working with Member States to rebuild, strengthen and reshape their health systems.

Leveraging religious scholars to promote public health; the Islamic Advisory Group – Report and future plans

Dr Yagob Al Mazrou, Chairperson of the Islamic Advisory Group (IAG) Executive Committee, outlined the Group's work to leverage religious scholars and imams as agents of change to address misconceptions, constraining public health interventions. Initially it had focused on polio vaccination, but since 2016 the mandate had expanded to include broader public health issues, such as routine immunization and maternal and child health, and more recently COVID-19 vaccination and other physical safety measures.

Other meetings

A closed meeting (Member States only) was held on a consultation on the relocation of the Regional Office for the Eastern Mediterranean from Cairo to the New Administrative Capital, as proposed by the Government of Egypt.

A panel discussion was held on Learning to live with COVID-19. The panel included a moderated discussion with experts from the Eastern Mediterranean Region.

In addition, side events took place on:

- Operationalization of the humanitarian-development-peace nexus in the Eastern Mediterranean Region
- The new Global Health Sector Strategies on HIV, hepatitis and STIs
- Strengthening palliative care in the Eastern Mediterranean Region.

3. Other meetings

Wednesday, 12 October 2022

16:00	Side event (not part of regular sessions) Report on the most recent data on emerging tobacco and nicotine products	Parallel meeting 7th floor meeting room
16:00	Side event (not part of regular sessions) One Planet, One Health: sustainable and resilient health care systems	Parallel meeting 5th floor meeting room
16:00	Side event (not part of regular sessions) Health systems governance framework for action: institutionalizing participatory governance in the Eastern Mediterranean Region	Parallel meeting Kuwait Hall
