

**70th session of the WHO Regional Committee for the Eastern Mediterranean,  
9–12 October 2023  
Cairo, Egypt**

**EMRO/RC70/DJ/4  
12 October 2023**

<b>Registration</b>	All participants are kindly requested to register for the 70th session of the Regional Committee through the secure online registration service at: <a href="#">Seventieth session of the WHO Regional Committee for the Eastern Mediterranean (9–12 October 2023)</a> no later than 15 August 2023. It is recommended to use the latest version of Google Chrome to access the registration page. The WHO Secretariat will confirm your registration via email. Registration is a prerequisite for attending the sessions in person.
<b>Documents</b>	Official documentation of the session is available in Arabic, English and French on the Regional Committee <a href="#">website</a> . Participants are kindly requested to consult the documents online.
<b>Internet access</b>	This year, the meeting will be conducted in person only. Wireless internet access is available in all meeting areas. The network name is RC70.
<b>Support</b>	You will find <a href="#">here</a> useful contact information for IT and administrative support for the Regional Committee.
<b>Statements</b>	Written statements of no more than 600 words may be submitted for posting on the WHO regional <a href="#">website</a> under the related agenda item. Written statements should be sent in advance of the opening of the 70th 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. Please send written statements for posting to the WHO website to <a href="mailto:emrgogovbod@who.int">emrgogovbod@who.int</a> , indicating the name of the country delegation/entity in the subject line of the email.
<b>WHO publications</b>	A selection of recent WHO publications are available on the Regional Committee <a href="#">website</a> .
<b>Security</b>	Please ensure that your RC70 ID badge is displayed at all times while inside the premises.
<b>Interventions</b>	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 <a href="mailto:emrgorcrep@who.int">emrgorcrep@who.int</a> .
<b>Membership and attendance</b>	The Regional Committee consists of one representative from each country or territory of WHO's Eastern Mediterranean Region. Member State delegates and advisers and representatives of other entities invited under Rule 2 of the Regional Committee's Rules and Procedures, who are unable to attend in person, will be able to follow the sessions and deliberations through webcast.
<b>Languages</b>	The working languages of the Regional Committee are Arabic, English and French. Statements and other interventions made in any of these languages will be interpreted simultaneously into the other two languages. Delegates will be able to follow in the chosen language by selecting their preferred language. The meeting will also be webcast in the three languages.

## 1. Programme of work

Thursday, 12 October 2023

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Agenda item	Regular sessions of RC70
Session 1	<b>World Health Assembly and Executive Board follow-up – governance matters</b>
4(c)	Review of the draft provisional agenda of the 154th session of the WHO Executive Board <a href="#">EM/RC70/8-Annex 1</a>
11	Review of the status of resolutions adopted by the Regional Committee during the period 2000–2017, and recommendations for sunseting and reporting requirements <a href="#">EM/RC70/14-Rev.2</a>
4(e)	Update on implementation of the WHO Transformation Agenda in the Eastern Mediterranean Region <a href="#">EM/RC70/10</a>
Session 2	<b>Coordination of work of the World Health Assembly, Executive Board and the Regional Committees</b>
4(b)	Resolutions and decisions of regional interest adopted by the Seventy-sixth World Health Assembly and the Executive Board at its 152nd and 153rd sessions: <a href="#">EM/RC70/8-Rev.1</a>
Session 3	<b>World Health Assembly and Executive Board – Programme and budget matters</b>
4(f)	Fourteenth General Programme of Work, 2025–2028 <a href="#">EM/RC70/11</a>
4(a)	Proposed approach for a full plan for the WHO investment round <a href="#">EM/RC70/7</a> Statement from the Eastern Mediterranean Region Staff Association (EMRSA) Statement of the Association of Retired and Former Staff/EMR (EMR/RFS)
Session 4	<b>Nominations</b>
10	Nomination of a Member State to the Policy and Coordination Committee of the Special Programme of Research, Development and Research Training in Human Reproduction <a href="#">EM/RC70/INF DOC 17</a>
Session 5	Adoption of the report, resolutions and decisions
Session 6	<b>Closing session</b>

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## 2. Wednesday, 11 October 2023

### **Reports of the sixteenth, seventeenth and eighteenth meetings of the Programme Subcommittee of the Regional Committee of the Eastern Mediterranean Region**

Dr Riyadh Al-Hilfi, Chair of the Programme Subcommittee of the Regional Committee, provided an overview of the recent work of the Subcommittee. The Regional Committee decided to adopt amended and restated terms of reference for the Subcommittee. The nineteenth meeting of the Subcommittee will be held in February 2024.

### **Place and date of future sessions of the Regional Committee**

The Regional Committee decided to hold its 71st session in Doha, Qatar, from 14 to 17 October 2024.

### **Membership of WHO bodies and committees**

The 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, Programme Subcommittee of the Regional Committee and Standing Committee on Health Emergency Prevention, Preparedness and Response.

### **Addressing noncommunicable diseases in emergencies: a regional framework for action**

The Medical Officer, Noncommunicable Diseases Management, presented a regional framework for action for addressing noncommunicable diseases (NCDs) in emergencies. Emergencies disrupt health systems, increasing morbidity and mortality from NCDs. The Region faces many emergencies, with half its countries particularly at risk of NCD service disruption following catastrophes, and the COVID-19 pandemic highlighted the vulnerability of NCD services. A regional framework was proposed with prioritized strategic interventions and indicators. Member States were recommended to integrate NCDs into their national emergency preparedness plans and strengthen coordination and collaboration to prioritize NCDs in emergency efforts, according to an all-hazard approach. Securing funding for NCDs during emergencies and ensuring that health care systems are resilient was also recommended.

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

The Director for Noncommunicable Diseases and Mental Health expressed his appreciation of the actions and deep experience of Member States, many of which are already implementing plans within the scope of the proposed framework, and also acknowledged the contribution of partner organizations.

The Director of Programme Management emphasized the importance of good prevention and management of NCDs at all times to reduce the burden during emergencies, and welcomed the commitment of Member States to the proposed framework.

The Regional Director concluded by saying that the tools to convert suffering to success were already available and that he was optimistic that the needless suffering caused by NCDs in emergency contexts would be reduced.

### **Strengthening public health readiness for mass gatherings in the Eastern Mediterranean Region**

The Programme Area Manager, Emergency Preparedness and International Health Regulations, gave a presentation on strengthening public health readiness for mass gatherings in the Eastern Mediterranean Region. She said the Region was host to some of the world's largest recurring mass gatherings, including religious, sports, cultural and political events, such as the Hajj in Saudi Arabia, Ashura and Arba'een in Iraq, and Grand Prix races in several countries, and was hosting more and more non-recurring mass gatherings, such as Dubai Expo 2020 in United Arab Emirates, COP27 in Egypt and the 2022 FIFA World Cup in Qatar. Mass gatherings could stretch the health system's capacity and posed challenges in managing health risks such as communicable and noncommunicable diseases, psychosocial disorders and injuries resulting from extreme weather conditions, accidents and terrorism incidents. However, mass gatherings also presented opportunities for long-term benefits for the health system, and experience across the Region demonstrated that risks could be effectively mitigated by effective risk assessment and planning. In many countries in the Region, mass-gathering management processes lacked effective risk assessment, multisectoral coordination, and risk communication and community engagement, and challenges existed in systematically documenting and exchanging experiences. Building on the extensive experiences and achievements in the Region, a regional framework for action was proposed to enhance

the readiness of the Region's health systems for mass gatherings and to minimize the associated public health risks.

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

The Programme Area Manager, Emergency Preparedness and International Health Regulations, thanked Representatives for their support for the proposed framework and highlighted the need to better document the success stories and best practices in the Region and share experiences among countries. She said it was important to integrate these lessons into existing plans, including those for IHR implementation, and to see risk assessment as a continuous process. WHO was ready to support countries in areas such as risk assessment, health worker capacity-building, risk communication and community engagement, and building capacities at points-of-entry for mass population movements. She noted that an operational framework for cross-border collaboration was being finalized and work was underway to adapt a mass gathering tool for different country contexts, and said that Public Health Emergency Operation Centres could be used as platforms for managing mass gathering events.

The Director, WHO Health Emergencies Programme, said planning for mass gatherings had advanced significantly over the decades, and that large mass gatherings had been held in the Region during the COVID-19 pandemic without public health events due to effective planning and mitigation measures. He emphasized the importance of not setting up parallel systems for mass gatherings but rather strengthening the capacities of the health system to leave a lasting legacy, and the need to improve research on the subject.

The Director, Programme Management, noted the global significance of the work in the Region on mass gatherings and said it showed that that planning and preparedness worked.

#### **Health workforce in Eastern Mediterranean Region: from COVID-19 lessons to action**

The Coordinator, Health Workforce, gave a presentation on the health workforce in the Eastern Mediterranean Region, including COVID-19 lessons and proposing action. The COVID-19 pandemic highlighted the importance of health workers in maintaining health, providing essential services, ensuring public health and health emergency response. The Region faced longstanding health workforce shortages, as health workforce production capacities had not kept pace with population growth. Limited employment capacities, imbalances in health workforce distribution and skill mix, weak governance and regulatory capacities, and insufficient information and evidence to inform policy affected many countries. Crises and deteriorating working conditions had increased the international mobility of health workers. Action to accelerate implementation of the Framework for action for health workforce development in the Eastern Mediterranean Region 2017–2030 was therefore called for. Priorities included increasing and sustaining investment in the production and employment of health workers; strengthening the health workforce at the primary care level; reorienting and transforming health professional education to address the competency needs of current and future health workers; improving retention of health workers and responding to the increasing mobility of health professionals; protecting and safeguarding the health and well-being of the health workforce; and promoting regional solidarity.

Interventions were made by representatives of the following Members of the Committee (in order): United Arab Emirates, Bahrain, Islamic Republic of Iran, Iraq, Somalia, Kuwait, Morocco, Egypt.

The Coordinator, Health Workforce, was reassured to see that significant actions to prioritize the health workforce had already been taken, and was pleased to offer the Region a tool, in the form of the regional framework, to develop strategic plans for long term action.

The Director of Universal Health Coverage/Health Systems emphasized the need to invest in the health workforce, calling such investment an engine for economic development.

The Director of Programme Management reminded the Committee of the crucial role of the health workforce in achieving the Sustainable Development Goals (SDGs).

#### **Climate change, health and environment: a regional framework for action, 2023–2029**

The Regional Advisor, Climate, Health and Environment, presented a proposed regional framework for action on climate change, health and environment for 2023–2029. Climate change is the greatest health challenge of the 21st century. In the Eastern Mediterranean Region, the mean temperature increase has already reached an alarming level, with further increase expected. He said the consequences for health were substantial and included increases in deadly extreme weather events, cases of noncommunicable

diseases, the emergence and spread of water-, food- and vector-borne diseases, injuries resulting from extreme weather conditions, malnutrition, the health impacts of air pollution, mental health problems and population displacement. WHO's proposed new framework had five objectives: build climate-resilient and environmentally-sustainable health systems; prioritize health in climate-change policies; engage the health sector effectively to support climate action by other sectors; improve the health sector's access to climate-change funding; and build a robust evidence base for policy-making. The role of the health community in achieving the framework would include working with multisectoral partners and engaging with the wider community and civil society to make a critical contribution to adapting and combating climate change and accelerating progress towards the SDGs.

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

The Regional Advisor, Climate, Health and Environment, said that he was encouraged by Member States' support to endorse the proposed framework for action on climate change and health and urged countries to ensure that their voices were heard at COP28, as regional achievements needed to be reflected in the Conference's final declaration as examples for international cooperation and action on climate change and health.

The Director, Department of Healthier Populations, highlighted that climate change affected the social and environmental determinants of health. The proposed framework focused on the health sector but was multisectoral in nature and ministries of health were responsible for generating evidence on climate change and health.

The Director of Programme Management said that no country was safe from the impact of environmental health from a range of different threats, including food insecurity, epidemiology of vectors, flash floods and drought. She emphasized the importance of multisectoral action under a One Health approach.

#### **Other meetings**

A closed meeting was held on the effect of sanctions on health and health systems.

A closed meeting was held on the Foundation for the State of Kuwait Prize for the Control of Cancer, Cardiovascular Diseases and Diabetes in the Eastern Mediterranean Region.

#### **Meeting of the Drafting Committee**