

# JOURNAL

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and French

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## 71st session of the WHO Regional Committee for the Eastern Mediterranean, 14–17 October 2024 Doha, Qatar

EMRO/RC71/DJ/3-Rev.1 16 October 2024

Registration	Re	aist	rati	on
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All participants are kindly requested to register for the 71st session of the Regional Committee through the secure online registration service at:

Seventy-First session of the WHO Regional Committee for the Eastern

Mediterranean Health beyond borders: solidarity for access and equity in the Eastern Mediterranean Region (14-17 October 2024) no later than 15 August 2024. 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.

## **Documents**

Official documentation of the session is available in Arabic, English and French on the Regional Committee <u>website</u> from September 2024. Documents will not be dispatched by post. Participants are kindly requested to consult the documents online.

#### Credentials

Member States should communicate the names and designations of their representatives and all alternates and advisers to the WHO Regional Director no later than 15 August 2024. Credentials for such persons will be issued by the Head of State, Minister of Foreign Affairs, Minister of Health or any other appropriate authority (Rule 3 of the Rules of Procedure). To guarantee approval of the registration, participants are kindly requested to upload a copy of the signed letter of credentials to the registration system.

## **Statements**

Written statements of no more than 600 words may be submitted for posting on the WHO regional <a href="website">website</a> under the related agenda item. Written statements should be sent in advance of the opening of the 71st 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.

## WHO publications

A selection of recent WHO publications are available on the Regional Committee website.

### 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 <a href="mailto:emrgorcrep@who.int">emrgorcrep@who.int</a>.

## Membership and attendance

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.

## Languages

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

## Wednesday, 16 October 2024

Agenda item	Regular sessions of RC71	
Session 1	Governance matters	
6	Reports of the nineteenth, twentieth and twenty-first meetings of the Programme Subcommittee of the Regional Committee	EM/RC71/11 EM/RC71/12
5(e)	Membership of WHO bodies and committees	EM/RC71/10
9	Application from the Russian Federation to attend the WHO Regional Committee for the Eastern Mediterranean in an observer capacity	EM/RC71/16
8	Procedure for accreditation of regional non-State actors not in official relations with WHO to attend meetings of the WHO Regional Committee for the Eastern Mediterranean	EM/RC71/15
11	Place and date of future sessions of the Regional Committee	EM/RC71/INF DOC 16
Session 2 4(a)	<ul> <li>Technical paper</li> <li>Addressing the increasing burden of trauma in humanitarian settings in the Eastern Mediterranean Region</li> <li>Discussion</li> </ul>	EM/RC71/3-Rev 1
Session 3 4(c)	<ul> <li>Technical paper</li> <li>Regional action plan for mental health and psychosocial support in emergencies, 2024–2030</li> <li>Discussion</li> </ul>	EM/RC71/5-Rev 2
Session 4	Technical paper	
4(b)	<ul> <li>Promoting collaborative action to accelerate the response to antimicrobial resistance in the Eastern Mediterranean Region</li> <li>Discussion</li> </ul>	EM/RC71/4-Rev 1
Session 5	Technical paper	
4(d)	<ul> <li>Enhancement and digitalization of health information systems in the countries of the Eastern Mediterranean Region: a regional strategy, 2024–2028</li> <li>Discussion</li> </ul>	EM/RC71/6-Rev 2
Session 6	<b>Closed meeting (side event)</b> : The impact of economic sanctions on health and health services in the Eastern Mediterranean Region: What are the consequences?	Al Wosail Ballroom
	Meeting of the Drafting Committee	Al Wosail Ballroom
10(a)	Closed meeting: Foundation for the State of Kuwait Prize for the	EM/RC71/INF DOC 14
	Control of Cancer, Cardiovascular Diseases and Diabetes in the Eastern Mediterranean Region	Al Mokhtasar 1

## 2. Report of meetings

## Tuesday, 15 October 2024

## Annual Report of the Regional Director 2023 and Vision of the Regional Director

The Regional Director presented her report on WHO's work and achievements in the Region in 2023 to the Regional Committee, adding that these were a testament to her predecessor, Dr Ahmed Al-Mandhari, and his team. She also highlighted some of the conditions she had witnessed in her country visits so far this year. This included terrible destruction and suffering in Palestine, Sudan and the Syrian Arab Republic, as well as the toll of substance use in Afghanistan, the Islamic Republic of Iran and the Syrian Arab Republic. But while the Region faced multiple crises, there were also grounds for hope. The emergency response in Palestine highlighted the immense resilience and dedication of health workers, especially the Gazan health workforce, and impressive solidarity from other countries.

Dr Balkhy noted that there were successes in every country of the Region and cited examples covering the Healthy Cities programme, communicable disease control, family education, medicine production, medical research, polio eradication and transition, and expanding service coverage. She discussed her strategic plans for the coming term, highlighting three key elements: investment, collaboration and accountability. Dr Balkhy concluded by appealing for concerted efforts from all Member States to endorse and enact the plans presented and change millions of lives for the better.

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

The Regional Director expressed her admiration for the Region's solidarity. She appreciated the strong support that had been expressed for the regional strategic operational plan and flagship initiatives. She reiterated the importance of strong WHO country offices in implementing the plans announced, and pointed out that while organizations were given credit for responses in current emergency situations, the work on the ground was being done by health workers from the population themselves. In closing, she acknowledged the input of youth organizations and requested that Member States bring diverse delegations to future Regional Committee sessions, including not only young delegates but also representatives from key entities involved in implementing the strategic plans at country level.

### Special updates:

## Emergencies in the Eastern Mediterranean Region, including updates on the following:

# Health and humanitarian situation in Palestine Intergovernmental Negotiating Body (INB)

The Regional Emergency Director, WHO Health Emergencies Programme, presented an update on emergencies in the Region. He said the Region faced multiple health emergencies from a variety of causes, leading to an overwhelming burden of morbidity and mortality.

The WHO Representative in the occupied Palestinian territory gave an update on the situation in the Gaza Strip and West Bank, describing the health needs and levels of disease and malnutrition, the number of attacks on health care and some of the challenges and operational constraints. A way forward was presented, which included the delivery of essential health services, public health intelligence, early warning, prevention and control, supplies and logistics support, coordination, and early recovery, rehabilitation and reconstruction.

Interventions were made by representatives of the following Members of the Committee (in order): Palestine, Egypt, Islamic Republic of Iran, Saudi Arabia, Kuwait, Qatar, Iraq, Sudan, Tunisia, Djibouti, Yemen

The Regional Emergency Director acknowledged Member States' solidarity with, and support to Lebanon, the occupied Palestinian territory and Sudan. He said that attacks on health care were a critical issue in the Region and that steps and recommendations were needed to address the rise of impunity in the face of ongoing conflict.

The Assistant Director-General for Health Emergency Intelligence and Surveillance Systems said that disease and conflict were intersecting and that a proactive response to the health impacts of conflict was necessary. WHO at all three levels of the Organization was investing and scaling up its preparedness and response capacities.

The Regional Director said that leadership, collaboration and health diplomacy had become increasingly important. She condemned the attacks on health care and stressed the importance of protecting health care workers. She noted that the Region was facing unprecedented challenges, citing emergencies occurring in many countries and highlighting the need to build national capacities to address the challenges.

Ambassador Dr Amr Ramadan, Vice-Chair of the Negotiating Group and Chair of Sub-Group on Articles 10, 11 and 13, described the stages of the negotiations so far in the work of the Intergovernmental Negotiating Body (INB) to draft a WHO convention, agreement or other international instrument on pandemic prevention, preparedness and response. He highlighted some of the provisions in the WHO pandemic agreement and summarized areas requiring further discussion, including: prevention and One Health; transfer of technology and diversified production; access and benefit sharing; financing; and governance. He urged Member States to collectively work towards a consensus by the end of the year.

Interventions were made by representatives of the following Members of the Committee (in order): Egypt, Palestine, Iraq, Djibouti

The Regional Director thanked Ambassador Amr Ramadan for his valued support to Member States in the Region and expressed her appreciation to Member States for their engagement in the negotiations and for seeking solutions to ongoing obstacles but recognized that these were due to difficult but important issues.

Ambassador Ramadan noted that all points raised during the discussion had been pertinent and encouraged continuing collaboration with the WHO Regional Office for Africa and communication with the pharmaceutical industry, but also urged countries to make concessions.

## Special updates:

# Polio eradication in the Eastern Mediterranean Region, including the tenth and eleventh meeting reports of the Regional Subcommittee for Polio Eradication and Outbreaks

The Director, Polio Eradication, presented an update on polio eradication in the Region. Polio remains a Public Health Emergency of International Concern, with wild poliovirus (WPV) circulating in Afghanistan and Pakistan and active vaccine-derived poliovirus (cVDPV) outbreaks in Palestine, Somalia, Sudan and Yemen. There were fewer outbreaks of cVDPV in the Eastern Mediterranean Region in July 2024 than a year before, and events in Egypt and Jordan have been closed, while transmission in Djibouti and Egypt appears to have stopped. The displacement of people in the Region continues to drive the spread of polio.

Circulation of cVDPV2 continues in Somalia, Sudan and Yemen, in a context of conflict, restricted access to populations and low immunization. There is an increasing risk of the continued spread of cVDPV2 from the uncontrolled outbreak in north Yemen, where vaccine campaigns have not been permitted. Virus strains related to those circulating in Yemen have been detected in Djibouti, Egypt and Somalia, which continues to face the longest-running outbreak of cVDPV2, but has shown strong recent improvement.

The Global Polio Eradication Strategy 2022–2026 has been extended to 2029. New approaches will involve a regional response to regional threats, a programme reset in Pakistan, redefining/remapping mobile groups, integrated delivery, humanitarian partners, expansion of environmental surveillance, new laboratory technologies and rapid sequencing. The Director, Polio Eradication, encouraged the Member States of the Region to continue their strong response and to make political and financial commitments to the Health Emergency Extension Response initiative, while paying attention to prevention, high vigilance and preparedness. The Secretariat has introduced a new initiative, United to End Polio, and he invited Member States to engage with the polio exhibit during the session.

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

## Other meetings

A side event was held on the launch of the regional framework for Immunization Agenda 2030.

A side event was held on innovative approaches for preventing and controlling dengue and other mosquito-borne disease outbreaks.