

## Letter to the Editor

### WHO Regional Director visiting Pakistan: high level policy dialogue on key public health strategic policies and programmes

Sir,

Launched in 1950, the Pakistan–World Health Organization (WHO) partnership was reinforced in 1960 through establishing a WHO Country Office, and forging, sustaining and enhancing technical collaboration over the years. The relationship characterized by biennially reviewed and jointly planned technical collaboration is based on a mutually shared vision of universal access to essential primary health care services (PHC), inculcating equity and social justice. Pakistan has the world's largest female community health workforce; a nascent developing cadre of community midwives, a strong commitment to strengthen district health systems; several national programmes for controlling communicable diseases; a health system and policy unit focusing on priorities across all the six building blocks of the health system; and a health policy envisaging the implementation of a PHC-based essential health services package.

Pakistan has also gained a successful legacy in organizing emergency response interventions that significantly reduced the mortality and morbidity during the frequent disasters that have hit the country over the past five years. In the area of health legislation, Pakistan has promulgated a mental health act; ratified and substantially executed the Framework Convention on Tobacco Control with a smoking ban in public places and the introduction of pictorial warnings; and enacted a tissue and organ transplantation law in conformity with WHO guiding ethical principles providing access to deceased donors.

The country is, however, facing a myriad of public health challenges ranging from high infant, child and maternal

mortality, the burden attached to the estimated 40-years population doubling, persistent transmission of wild poliovirus, low immunization coverage and a double burden of communicable and non-communicable diseases amidst socioeconomic and security challenges. WHO has aligned its technical support with the government, assisting 30 public health programmatic interventions and related strategic policies. As a key partner in UN reform, WHO is assisting Pakistan, a country successfully modelling the "Delivering as One" initiative, conforming to the Paris Declaration on Aid Effectiveness, governed by the principles of national ownership, alignment, harmonization and results-based accountability.

The 4-day visit of the WHO Regional Director, Dr Gezairy, to Pakistan during March 2010 maintained the established high level consultations between WHO and the Government of Pakistan, making the joint collaboration assume greater heights both in scope and efficiency. Dr Gezairy had a meaningful consultation with the Prime Minister and frequent interactions with the Health Minister, Secretary and Director General of Health. He encouraged the UN Country Team in their new initiative, and invited the Surgeon General of the Army Medical Corps to support challenging health interventions.

Deliberations focused on interrupting wild polio transmission in 15 high risk districts/towns, while maintaining vigilance in the remaining 90% polio-free areas; consolidating the Expanded Programme on Immunization (EPI) by strengthening the lady health workers roles and skills, improving EPI planning and cold chain management; halting excessive maternal and neonatal mortality through universal access to community

midwives and emergency obstetric care services; replicating the Basic Development Needs (BDN) programme and linking PHC community action to social determinants of health to rapidly impact on the Millennium Development Goals; and controlling hepatitis viral infections through universal child immunization, exclusive use of auto-disable syringes and access to safe drinking water. Consensus was also reached on strengthening the institutional capacity for emergency preparedness and response; implementing patient safety interventions; addressing environmental health challenges; fostering health system research; building capacity on Integrated Vector Management; launching leadership courses in public health; consolidating the Tobacco Free Initiative and enhancing the autonomy of the vaccine and pharmaceutical regulatory authority.

The Regional Director also met the Chief Minister of Punjab province where EPI/Polio, Maternal, Neonatal and Child Health and BDN issues were discussed. While in Lahore, Dr Gezairy attended a meeting organized by the Punjab University of Health Sciences where the Vice-Chancellor brought together principals and senior academicians from 24 medical and public health institutions to discuss the role of medical education on community health with active participation and experience-sharing from BDN Kasur community representatives. A declaration endorsing community-oriented medical education was unanimously adopted, and the eligibility of the University of Health Sciences to host WHO collaborating centres was supported.

Three WHO-assisted national centres, the Health Emergency and Preparedness Centre; the Patient

Safety Friendly Hospital Centre, and the National Environmental Health Protection Unit, were inaugurated by the Regional Director. He also met with the North-West Frontier Province Secretary and Director General Health handing over 15 ambulances as part of

WHO support to internally displaced persons, triggered by the ongoing crisis in the area. Dr Gezairy apprised the Federal Minister of a US\$ 1.57 million contribution from the United Nations “Expanded Delivering as One Funding Window”, channelled through WHO

for scaling up four public health programmes. The visit validates the significance of the joint collaboration between WHO and Pakistan, and confirms the unwavering determination to control health challenges and harness attainable health opportunities.

K.M. Bile,  
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### *World Malaria Day*

World Malaria Day is observed every year on 25 April. Approximately half the world's population is at risk of malaria, particularly those living in lower-income countries. It infects more than 500 million people per year and kills more than 1 million. The burden of malaria is heaviest in sub-Saharan Africa but the disease also afflicts Asia, Latin America, the Middle East and even parts of Europe.

World Malaria Day—which was instituted by the World Health Assembly at its 60th session in May 2007—is a day for recognizing the global effort to provide effective control of malaria. It is an opportunity:

- for countries in the affected regions to learn from each other's experiences and support each other's efforts;
- for new donors to join a global partnership against malaria;
- for research and academic institutions to flag their scientific advances to both experts and the general public;
- for international partners, companies and foundations to showcase their efforts and reflect on how to scale up what has worked.