

Towards one regional WHO–UN health agenda in 2025: a Regional Health Alliance strategic dialogue

Strengthening UN collaboration to address regional health priorities and accelerate progress on the Sustainable Development Goals



Report of the third Regional Health Alliance meeting

January 2025



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Glossary of Acronyms

AI	artificial intelligence
AMR	antimicrobial resistance
AWG	Accelerator Working Group
EMR	Eastern Mediterranean Region
GAP	Global Action Plan for Healthy Lives and Well-being
HiAP	health in all policies
MENA	Middle East and North Africa
MoH	ministry of health
JAP	Joint Action Plan
RHA	Regional Health Alliance
SDG	Sustainable Development Goal
TG	Thematic Group
UHC	universal health coverage
UNCT	UN Country Team
UNSDCF	UN Sustainable Development Cooperation Framework
WHE	WHO Emergency Programme

Executive Summary

The Regional Health Alliance (RHA) was established by WHO in 2019 as the primary UN collaborative platform addressing health-related Sustainable Development Goals (SDG3+) in the Eastern Mediterranean Region. Comprising 18 UN agencies, the Alliance aligns with regional and global health agendas to drive collective impact through a “One UN” approach.

The RHA Strategic Dialogue, held on 15 January 2025 in Cairo, Egypt, provided a critical forum for reviewing the RHA's revised structure and advancing its Joint Action Plan (JAP) 2025. The meeting brought together 88 in-person and 13 virtual participants, including regional heads, UN technical experts and WHO workforce from across the three levels of the Organization – headquarters, the Regional Office for the Eastern Mediterranean and WHO country offices – to align efforts, strengthen partnerships and enhance collaboration to improve health and well-being across the Region.

Key messages from the strategic dialogue

1. Renewed commitment to the Regional Health Alliance (RHA)

- ▶ All 18 UN partner agencies reaffirmed their commitment to joint health initiatives in the Region.
- ▶ A new structure for the RHA was endorsed, transitioning from Accelerator Working Groups (AWGs) to Thematic Groups (TGs) covering
 - Primary health care for universal health coverage
 - Health determinants, risk factors and community engagement
 - Health emergencies preparedness and response
 - Research, innovation and evidence-informed policy

2. The JAP 2025

- ▶ The JAP 2025 serves as a strategic roadmap, aligning health priorities with the SDG3+ agenda.
- ▶ The JAP draws on the outcomes of more than 50 meetings, including individual and team meetings with UN partners and technical experts, as well as findings from analyses undertaken by the RHA Secretariat to ensure alignment with regional priorities, country priorities, UN partners' mandates and their ongoing health initiatives in the Region. It also aligns with WHO's new strategic operational plan for the Region including three flagship initiatives.
- ▶ The JAP will be finalized in the upcoming weeks to integrate outcomes from this meeting and discussions, inputs from partners and feedback from further engagement activities. This process will ensure that the plan reflects common interests and fosters continued dialogue and collaboration.

3. Strengthened UN collaboration

- ▶ Regional perspectives highlighted diverse country needs, including:
 - Djibouti: advancing health system modernization and digital health governance in response to a rapidly evolving economic landscape.
 - Jordan: expanding digital health innovations and health-related SDG monitoring, while ensuring stronger national-level recognition of the partnerships to enhance sustainability and long-term impact.
 - Oman: implementing health system reforms and Healthy Cities and Villages initiatives, and establishing new WHO collaborating centres through an innovative coordination mechanism.
 - Somalia: strengthening humanitarian health system transformation through public-private collaboration and closer engagement with the Ministry of Health.
 - Sudan: addressing the dual crisis of health workforce migration and famine, both exacerbated by the ongoing conflict.
- ▶ High-level interventions from WHO leaders and UN agency heads emphasized the need for coordinated action on several health topics, such as universal health coverage (UHC), access

to medicines and tackling regional health emergencies.

4. WHO's regional flagship initiatives and cross-agency alignment

- ▶ WHO's three flagship initiatives for the Region were introduced:
 1. Investing in a resilient health workforce
 2. Expanding equitable access to medical products
 3. Accelerating public health action on substance use.
- ▶ Roundtable discussions allowed agencies to identify synergies in programmatic implementation and align efforts to optimize impact.

5. Next steps and integration into UN country workplans

- ▶ The JAP 2025 will be finalized by the first week of April 2025, incorporating agency feedback and further discussions.
- ▶ Linkages with UN Country Team (UNCT) coordination mechanisms will be strengthened to mainstream RHA priorities into national-level health strategies.
- ▶ RHA partnerships will be institutionalized through structured governance and monitoring frameworks.

Conclusion

The RHA strategic dialogue solidified a unified One UN Health Agenda, reaffirming multilateral commitment to health system strengthening in the Region. The JAP 2025 will serve as the RHA's guiding framework, ensuring equity-driven, evidence-based and sustainable health outcomes. The success of this initiative depends on continued collaboration, accountability and integration into country-level UN programming.

Introduction

Background

The RHA was established in 2019 by WHO in the Eastern Mediterranean Region as the primary collaborative platform for addressing health-related Sustainable Development Goals (SDGs) in the Region. Bringing together 18 UN health, development and humanitarian agencies, the RHA adopts a “One UN” approach to accelerate progress on health priorities through collective and coordinated action.

The platform translates commitments under the Global Action Plan on Healthy Lives and Well-being (SDG3 GAP) into action in the Region, based on regional and country contexts and priorities. It aligns with global, regional and country-specific agendas, with the aim of ensuring inclusivity and impact-driven outcomes.

Table 1. RHA members as of January 2025

1	Food and Agriculture Organization of the United Nations (FAO)	10	United Nations Children’s Fund (UNICEF)
2	International Organization for Migration (IOM)	11	United Nations Industrial Development Organization (UNIDO)
3	International Telecommunication Union (ITU)	12	United Nations Office on Drugs and Crime (UNODC)
4	Joint United Nations Programme on HIV/AIDS (UNAIDS)	13	United Nations Office for the Coordination of Humanitarian Affairs (OCHA)
5	United Nations Development Programme (UNDP)	14	United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA)
6	United Nations Educational, Scientific and Cultural Organization (UNESCO)	15	United Nations Entity for Gender Equality and the Empowerment of Women (UN Women)
7	United Nations Population Fund (UNFPA)	16	World Bank Group (WB)
8	United Nations Human Settlements Programme (UN-Habitat)	17	World Food Programme (WFP)
9	Office of the United Nations High Commissioner for Refugees (UNHCR)	18	World Health Organization (WHO)

A revised structure and renewed focus

In 2024, the RHA was restructured so it could better respond to evolving health challenges in the Region. This structural reform included transitioning from Accelerator Working Groups (AWGs) to Thematic Groups (TGs), each focusing on critical health areas:

- ▶ Primary health care for universal health coverage
- ▶ Health determinants, risk factors and community engagement
- ▶ Health emergencies preparedness and response
- ▶ Research, innovation and evidence-informed policy

Primary health care for universal health coverage

Health determinants, risk factors and community engagement

Health emergencies preparedness and response

Research, innovation and evidence-informed policy

These four TGs emphasize evidence-based, actionable solutions, leveraging collective expertise to address regional health challenges while striving to avoid duplication.



From left: Dr Akihiro Seita, Chief of Health, UNRWA; Ms Rania Hedeya, Regional Representative ad interim, UN-Habitat; Dr Mary Kavar, UNDP Regional Hub Director; Mr Adel Darwish, ITU Regional Director; Mr Jean-Luc Tonglet, Head of the OCHA Regional Office; Mr Othman Belbeisi, IOM Regional Director; Dr Hanan Balkhy, WHO Regional Director; Mr AbdulHakim Elwaer, FAO Assistant Director-General and Regional Representative; Ms Laila Baker, UNFPA Regional Director; Ms Rawad Halabi, WFP Deputy Regional Director; Ms Cristina Albertin, UNODC Regional Representative



Participants during the meeting

The Joint Action Plan 2025

The RHA's JAP 2025 serves as a roadmap to operationalize its priorities through time-bound deliverables. It has been informed by extensive consultation and evaluations of previous JAPs (2020–2021 and 2022–2023) and countries' evolving needs and priorities, as highlighted in United Nations Sustainable Development Cooperation Frameworks (UNSDCFs) and analyzed in the internal report *Accelerating health-related SDGs (SDG3+) in the Eastern Mediterranean Region: mapping the Regional Health Alliance Joint Action Plan (2022–2023) to United Nations Sustainable Development Cooperation Frameworks (UNSDCFs) (Bahrain, Jordan, Iraq, Lebanon, Libya, Pakistan, Saudi Arabia, Somalia)*. In addition, RHA member agencies' interests and focus were gathered through a mapping exercise to ensure that the JAP reflects collective expertise and leverages existing initiatives to address regional health challenges.

It is planned to finalize the JAP 2025 by the end of March 2025. The plan reflects shared ownership among RHA member agencies. Key strategic inputs also include WHO's *Strategic operational plan for the Eastern Mediterranean Region, 2025–2028*, which includes three regional flagship initiatives on enhancing workforce resilience, equitable access to medical products and accelerating the public health response to substance use.

The JAP 2025 aims to align efforts with the SDG3+ agenda and national priorities, ensuring equity-oriented, gender-responsive and human rights-based goals to improve the health and well-being of the population of the Region.

Towards One Regional WHO–UN Health Agenda in 2025: an RHA strategic dialogue

The strategic dialogue held on 15 January 2025 at the Waldorf Astoria Hotel in Cairo, Egypt, marks a significant milestone in the RHA's journey.

In March 2020, the Regional Health Forum met and agreed on a Regional Joint Workplan (2020–2021). The RHA was launched on 15 December 2020, following a country-focused webinar on implementing the SDG3+ GAP in the Region. A second in-person meeting of the RHA, in December 2021, featured the launch of the RHA JAP 2022–2023.

Convened under the theme “Towards One Regional WHO–UN Health Agenda in 2025”, the January 2025 meeting served as a platform to:

1. introduce the RHA's new structure and the draft JAP 2025;
2. present WHO's new regional strategic operational plan and flagship initiatives, and explore opportunities to leverage partnerships in implementing them; and
3. gather insights from member agencies on priorities and deliverables, strengthen partnerships and explore innovative avenues for collaboration.

The event included sessions on thematic group objectives, regional and country health priorities, and alignment strategies. Discussions were aimed at fostering collective ownership and identifying actionable steps to integrate joint efforts under the RHA into UNCT workplans, thereby ultimately advancing progress on health-related SDGs.



Participants from UNODC, IOM, UNFPA, and other UN agencies engaged with WHO colleagues in lively discussions as part of the RHA

Intended meeting outcomes

The intended outcomes of the meeting included:

Renewed commitment

All 18 UN partner members were expected to reaffirm their unwavering commitment to the RHA. This collective endorsement would underscore the importance of unified efforts in focusing on health priorities and addressing the related challenges in the Eastern Mediterranean Region.

Endorsement of the new structure

The new structure of the RHA, which transitions from AWGs to four TGs, was expected to be fully endorsed by all participating agencies.

Partnerships within TGs

UN partners were expected to commit to work collaboratively within their respective TGs. This approach will leverage collective expertise and resources to address regional health challenges more effectively. The TGs will focus on evidence-based, actionable solutions, ensuring inclusivity and avoiding duplication of efforts.

WHO's regional strategic operational plan and flagship initiatives

UN partners would be introduced to WHO's new regional operational plan and flagship initiatives, highlighting their importance in advancing the Region's health priorities and achieving impactful outcomes

JAP 2025

The JAP 2025 framework would be introduced as a roadmap to operationalize the RHA's priorities through time-bound deliverables. It will reflect shared ownership among member agencies and aligns with the SDG3+ agenda and national priorities, ensuring equity-oriented, gender-responsive and human rights-based actions

Strategic alignment and collaboration

The meeting was intended to highlight the importance of strategic alignment and collaboration among UN agencies. Discussions would emphasize the need for structured partnerships, resource mobilization and effective governance to sustain health systems in the Region. The RHA's One UN approach was expected to be recognized as essential for advancing progress on health-related SDGs.

Conclusion

The RHA exemplifies the transformative potential of regional partnerships in addressing complex health challenges. With its revised structure, renewed focus and a clear agreed plan of work based on finalizing the JAP 2025, the RHA is well positioned to drive meaningful change, fostering equity and access to health for all. The RHA strategic dialogue laid the groundwork for an inclusive and impactful action plan, ensuring its relevance and efficacy in the years ahead.

Next steps

Finalizing the JAP 2025 will be prioritized in the first quarter of 2025, with a focus on aligning objectives and deliverables with regional priorities and emerging opportunities. The plan will aim to strengthen partnerships and enhance coordination between the RHA and UNCTs across member countries.

Summary of strategic dialogue sessions

The RHA strategic dialogue on 15 January 2025 was preceded by an extensive series of consultation meetings involving more than 50 individual and multilateral discussions among partners. These consultations laid the groundwork for the strategic dialogue, including preparatory meetings of Thematic Groups with all partners engaged, ensuring alignment on shared objectives and priorities.

The strategic dialogue brought together 88 in-person attendees and 13 virtual participants, representing the extensive reach and collaborative spirit of the RHA. Attendees comprised RHA members including technical focal points from each participating agency and their regional heads. The meeting also featured senior WHO workforce from across the three levels of the Organization, including assistant directors-general from WHO headquarters, key officials from the WHO Regional Office for the Eastern Mediterranean and selected WHO representatives to countries.

The strategic dialogue divided into two distinct segments. The morning session was dedicated to technical discussions and roundtable dialogues, providing a platform for in-depth exchanges on the thematic and operational areas under the new RHA structure, WHO's new regional strategic operational plan and the three flagship initiatives. The afternoon session was the high-level segment, with contributions from the regional heads of participating agencies to foster strategic alignment and collective vision at the leadership level.

This collaborative gathering underscored the commitment of all partners to advancing the Region's health priorities through unified action, evidence-based strategies and an inclusive, multistakeholder approach.

Session 1: The Regional Health Alliance: the way forward

The first session provided a comprehensive introduction to the evolution and objectives of the RHA.

In his welcome to participants, Dr Adham Ismail, WHO's Director of Programme Management for the Region, emphasized the importance of collaboration to address regional health priorities and advance progress on health-related SDGs. He acknowledged the success of the RHA since its establishment in 2019 and stressed the need for updated strategies to meet evolving health challenges. Dr Ismail outlined three objectives for the day's dialogue: introducing the new RHA structure and JAP 2025, presenting WHO's new regional strategic operational plan and flagship initiatives,



Dr Adham Ismail, WHO Director of Programme Management for the Eastern Mediterranean Region

and exploring partnership opportunities. He emphasized that collective action is key to achieving transformative health outcomes and advancing equity and well-being, and success requires coordinated, evidence-based and sustained efforts across agencies to meet regional health goals. He therefore encouraged participants to align their efforts, deepen partnerships and prioritize the needs of communities across the Region.

Dr Jamal Nasher, from the RHA Secretariat, presented the new structure of the RHA and outlined the JAP 2025, underscoring a shift from eight Accelerator Working Groups (AWGs) to four Thematic Groups (TGs) to enhance focus and impact. The discussion emphasized the RHA's One UN approach, which unites 18 agencies in a collaborative effort to address regional health priorities.

The identified Priority Areas under each TG



WHO's three regional flagship initiatives – on expanding equitable access to medical products, investing in a resilient health workforce and accelerating public health action on substance use – were introduced. These would join various country-level, regional and global frameworks and RHA member agencies' priorities as key pillars of the RHA's strategy.

Participants explored opportunities to optimize resources, align priorities and ensure inclusive and accountable action across countries and territories of the Region.

Session 2: Country perspectives: priorities and best practices

This session brought forward WHO voices from Djibouti, Jordan, Oman, Somalia and Sudan, highlighting varying and dynamic national health priorities and challenges from very different country contexts.

Dr Reinhilde Van de Weerd, WHO Representative to Somalia, focused on addressing the country's humanitarian crisis through public-private collaboration and enhanced engagement with the Ministry of Health. She pointed out that Somalia has changed significantly in the past two

decades. Identifying needs is important in the context of a country in transition, with a new political system and institutions that need to be strengthened. Somalia continues to face one of the highest maternal mortality rates globally. While there has been progress in reducing under-five mortality, it is not on



Dr Reinhilde Van de Weerd, WHO Representative to Somalia



Speakers for Session 2 (left to right): the WHO Representatives to Somalia, Sudan, Djibouti, Jordan and Oman

track to achieve the relevant SDG targets. Somalia continues to experience disease outbreaks, including the longest vaccine-derived polio outbreak, highlighting gaps in immunization coverage which leave many children unreached. In addition, recurrent outbreaks of cholera and dengue persist, exacerbated by the impacts of climate change, further impacting the country's health system. Over the past decade, Somalia has faced significant flooding and droughts, further compounding the ongoing humanitarian crisis. Conflict remains a critical issue, as demonstrated by the recurrent complex attacks happened lately, which the health system could not cope with.

Dr Van de Weerdts noted the urgent need for partners and the Government to address a wide range of health concerns – including noncommunicable diseases, communicable diseases and neglected tropical diseases – within an increasingly complex and fragile operating environment. In Somalia, there are opportunities ahead, particularly with the Government presenting its transformation plan. It is crucial for the UN to build on this momentum, take it forward and ensure that collaborative efforts are aligned with the plan's priorities and support its implementation.

Dr Van de Weerdts also highlighted that a third of Somalia's entire population need humanitarian assistance, making it a key priority. To address these needs, a strong UNCT and humanitarian coordination is needed to lead a comprehensive response. She pointed out that relevant investments from development banks, especially in human capital, along with the presence of the private sector, play a significant role in the country's health landscape. She underscored the importance of the UN working closely with the Ministry of Health to support strengthening regulation and a balanced approach that promotes equitable access to



Dr Shible Sahbani, WHO Representative to Sudan

services while progressing toward SDG3 and UHC.

Dr Shible Sahbani, WHO Representative to Sudan, shed light on the pressing issues of health workforce migration and famine, and stressed the importance of joint advocacy. Dr Sahbani described the devastating impact of conflict on Sudan's already fragile health system. Even before the crisis, the country faced severe underfunding, a critical shortage of health care workers, and alarming health indicators, with maternal mortality at 270 deaths per 100 000 live births, one of the highest rates in the Region. Since the war erupted in April 2023, Sudan has seen the world's largest current displacement crisis, with 11.5 million internally displaced people (IDPs) and 3.3 million refugees—including many health care professionals. There have been 136 documented incidents of attacks on health facilities and personnel, resulting in 238 deaths and 214 injuries and further weakening the health system, leaving the

country with a dangerously low health workforce. In response, WHO and partners have focused on advocacy, workforce retention, diaspora engagement and e-learning for medical students, as more than half of the medical schools in conflict zones have been attacked, looted, or converted into military bases.

The situation in Sudan has been recognized as a famine and protection crisis, with 50% of the population in IPC3+ food insecurity and multiple human rights violations, including sexual and gender-based violence. The country is also experiencing five concurrent disease outbreaks – of cholera, dengue fever, malaria, suspected pertussis and measles – making it imperative to recognize that Sudan is in health crisis as well.

Dr Sahbani concluded by thanking UN health partners for their dedication and collaboration, highlighting WHO's efforts with the FAO, IOM, UNDP, UNFPA, UNICEF and the World Bank in areas ranging from maternal health and sexual and gender-based violence to outbreak response and One Health initiatives. He reaffirmed WHO's commitment to ensuring that health remains a priority in Sudan's humanitarian response.

Dr Joumana Hermez, WHO Representative to Djibouti, emphasized the need to modernize the country's health systems, including integrating digital governance. Djibouti is undergoing a significant economic transition, moving from lower middle-income to upper middle-income status. However, economic growth has not been matched by proportional improvements in health indicators, revealing deep disparities in the health care system. Despite progress in other sectors, the health system remains outdated and ill equipped to meet the needs of a growing and evolving population. This gap is particularly concerning given the pressing health needs of refugees, who face additional barriers to accessing essential



Dr Joumana Hermez, WHO Representative to Djibouti

services. A key challenge is the disconnect between economic development and health system modernization: while investments are being made in areas such as government digitalization, the health sector is often left behind, limiting opportunities for innovation and efficiency. In this context, Dr Hermez identified an urgent need to engage communities directly, bringing health care closer to the people rather than relying solely on traditional facility-based models. Within the UNCT, collaboration on specific health issues has been strong. However, Dr Hermez said a more structured and integrated approach was needed to ensure that health is systematically embedded across different sectors. Applying a health in all policies (HiAP) approach would help bridge these gaps, ensuring that health considerations are integrated into broader national development efforts, rather than being treated as a standalone issue.



Dr Jamela AlRaiby, WHO Representative to Jordan

Dr Jamela AlRaiby, WHO Representative to Jordan, showcased the country's achievements in digital health and monitoring health-related SDGs. In Jordan, the UN Sustainable Development Cooperation Framework (UNSDCF) serves as a key platform for fostering partnerships between the UNCT and national stakeholders. While this framework has enabled valuable collaboration, there is a need to strengthen it further to maximize its impact and ensure a more coordinated and sustainable approach to health and development. Dr AlRaiby highlighted how Jordan has demonstrated leadership in several areas, particularly in supply chain management and regulatory authority, setting good practices that can serve as models for other countries in the Region. It was also the first country in the Region to digitalize health care, a major achievement made possible through collaboration with the ITU and other UN agencies. Additionally, UN agencies have

played a crucial role in supporting the Ministry of Health in establishing a national team dedicated to international cooperation, ensuring alignment with SDG3 and strengthening engagement with UN partners.

Despite these successes, Dr AlRaiby identified a need for stronger national-level recognition of these partnerships to enhance sustainability and long-term impact. By making UN collaboration more visible and better embedded within national strategies, the Ministry of Health and other Government bodies can fully leverage the expertise and resources available through the UNCT. This would also open up new opportunities for different UN agencies to engage with the Ministry of Health, unlocking the untapped potential for deeper cooperation and innovation in the health sector.

Dr Jean Jabbour, WHO Representative to Oman, emphasized that in a high-income country like Oman, WHO's role must go beyond responsiveness and focus on strategic engagement. Strong collaboration with the Government, particularly the Ministry of Health, is key to ensuring alignment with national and global health priorities. To be effective, UN agencies must be proactive and ready for high-level discussions, building strong partnerships that allow for meaningful collaboration, supporting health policies but also preparing the ground for other UN agencies to play a role where needed. Beyond high-level engagement, it is important to work closely with technical networks, strengthening partnerships with both local and international stakeholders and ensuring coherence across WHO's global, regional and country levels.

Dr Jabbour also underscored the importance of collaboration as an alternative to competition among UN agencies, emphasizing that action is leadership, as mentioned previously by Dr Ismail. Without a Resident Coordinator office, UN agencies in



Dr Jean Jabbour, WHO Representative to Oman

Oman have created their own coordination mechanisms, including task forces for technical programmes, communication and logistics – an approach that proved effective during the COVID-19 pandemic. WHO's contributions are visible in the expansion of Healthy Cities and Villages, the establishment of new WHO collaborating centres, and its involvement in health system reforms. The Organization has also worked closely with the UNFPA, UNHCR, FAO, and UNICEF on various health initiatives in Oman and the Region. Dr Jabbour concluded by emphasizing that high-income countries should be seen as partners, not just donors.

A facilitated discussion ensued, with reflections on how UN partnerships could further contribute to specific public health initiatives in the Region. For example, ITU could further support the digital health agenda; FAO is currently supporting countries in implementing Pandemic Fund work

and could further support health system strengthening; and UNRWA's partnership with WHO and role within the UNCT could be strengthened through the RHA.

Session 3: Regional perspectives: health challenges and priorities

The third session shifted focus to regional health challenges and flagship initiatives. Dr Mohammed Abdi Jama, Senior Adviser to the WHO Regional Director for the Eastern Mediterranean, gave an overview of WHO's new regional strategic operational plan. He highlighted how the new framework addresses critical challenges like emergencies and humanitarian crises, climate change and environmental degradation, migration and displacement, and disease outbreaks, while prioritizing tailored country support, integrated partnerships and data-driven approaches for accountable

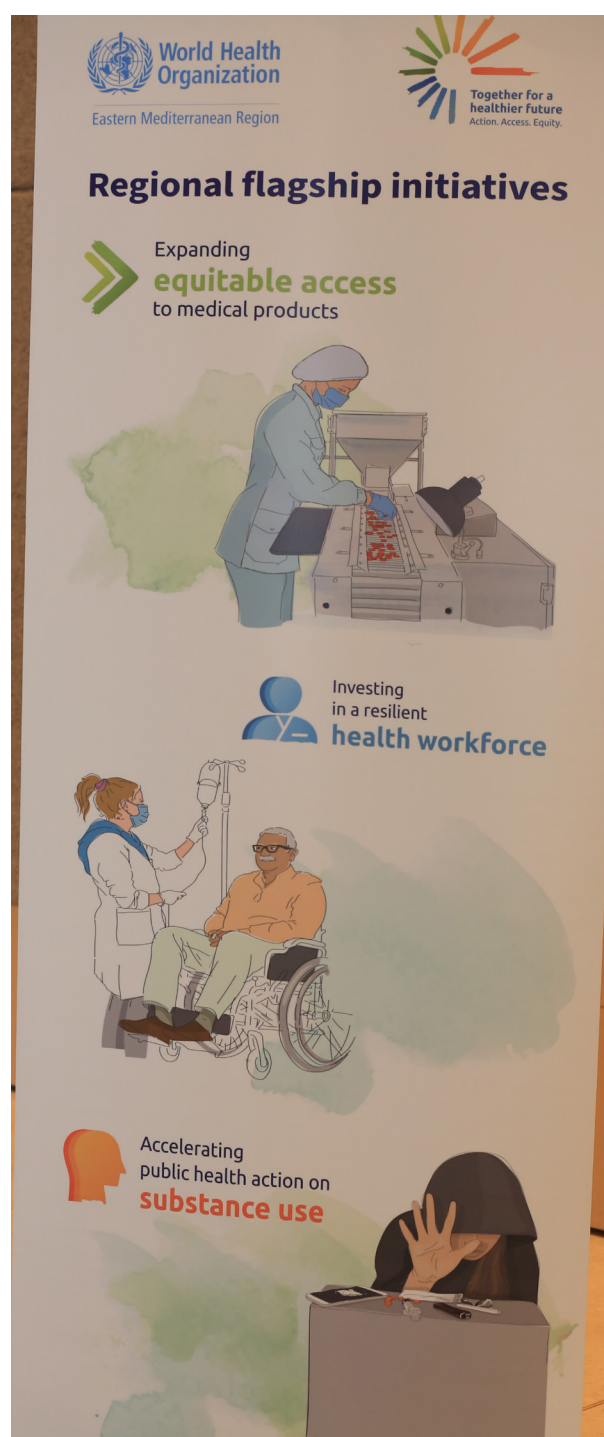


Dr Mohammed Abdi Jama, Senior Adviser to the WHO Regional Director

and measurable impact. The new plan emphasizes the massive potential return that investment in primary health care and preventive measures could generate, improving economic outcomes as well as saving lives.

Dr Adham Ismail presented WHO's three regional flagship initiatives to boost health and well-being by expanding equitable access to medical products, investing in a resilient health workforce and accelerating public health action on substance use. Key strategies include enhancing local production, modernizing procurement and supply systems, strengthening regulatory systems and developing regional pooled procurement; enhancing workforce quality and retention through investment in a health workforce that is fit for the future and well united across the Region, supported by collaborative mechanisms; and preventing initiation of drug use, increasing access to services and reducing morbidity and mortality related to substance use. UN partnerships are crucial to achieving targets like reducing health workforce shortages, scaling-up treatment coverage for substance use, and fostering health and economic resilience.

The session included roundtable discussions to explore potential alignment, contribution and partnerships among the UN agencies under the RHA umbrella. These discussions allowed participants to share best practices, align efforts and identify opportunities for collaborative action to address regional health challenges. Four rounds of questions were posed to participants, with Mentimeter used to collect information shared during the discussion in real time. The questions prompted participants to reflect on their agencies' activities that are linked and could contribute to implementation of the flagship initiatives. Among other points, participants said efforts to expand equitable access to medical products should include improving



supply chain logistics, fostering local pharmaceutical production and supporting regulatory frameworks. Strengthening the health workforce should include strategies such as diaspora engagement, community health workers and midwifery programmes. Discussions of accelerating public health action on substance use explored harm reduction strategies, community engagement and enhanced data collection.



Dr Hanan Balkhy, WHO Regional Director for the Eastern Mediterranean

Session 4: Towards a One UN health agenda

High-level interventions in this session highlighted the importance of inter-agency collaboration to advance UHC, tackle pressing regional health emergencies and enable people to live a healthier life.

Opening this segment of the meeting, Dr Hanan Balkhy, WHO Regional Director for the Eastern Mediterranean, emphasized participants' shared commitment to health and development in the Region. The session aimed to address challenges like limited resources and competing priorities while leveraging innovation and equity to align efforts, strengthen partnerships and drive progress. Dr Balkhy called for bold, collaborative action to achieve meaningful health outcomes for the Region's communities.



Dr Bruce Aylward, WHO Assistant Director-General for UHC and Life Course

Dr Bruce Aylward, WHO Assistant Director-General for UHC and Life Course, stressed the necessity of unified frameworks for achieving UHC. He emphasized that it was critical to achieve UHC by addressing gaps in access to essential health services and financial protection, and highlighted the daily toll of preventable deaths and the disproportionate burden in the Eastern Mediterranean Region. Key strategies in response must include political commitment, leveraging operational platforms and strengthening partnerships and strategic alignment. Challenges such as climate change, migration, geopolitics, pandemics and demographic shifts underscore the importance of coordinated regional and UN efforts to deliver on the promise of UHC.

Dr Yukiko Nakatani, WHO Assistant Director-General for Access to Medicines and Health Products, highlighted the critical role of inter-UN collaboration in addressing barriers



Dr Yukiko Nakatani, WHO Assistant Director-General for Access to Medicines and Health Products

to equitable access to medicines and health technologies, particularly in low- and middle-income countries. She emphasized the importance of supporting countries to develop robust policies, strengthen local pharmaceutical production and enhance supply chains to ensure medicines reach underserved populations. WHO's regional flagship initiatives were commended as exemplary models of aligning regional strategies with global health goals.

Dr Nakatani also underscored the value of leveraging global expertise and fostering innovation, as demonstrated in collaborative research on vaccines for diseases like Ebola and COVID-19. By harmonizing regulatory frameworks and enabling partnerships across UN agencies, systemic challenges can be addressed more effectively. She urged agencies to embrace bold, unified action, using shared priorities to transform access to medicines into a universal right and deliver

meaningful, sustainable health outcomes for all.

Professor Jérôme Salomon, WHO Assistant Director-General for Communicable and Noncommunicable Diseases, discussed approaches to addressing the Region's disease burden through integrated health systems; he highlighted the need for unified action to address noncommunicable diseases and mental health challenges. Emphasizing collaboration across UN agencies and sectors, he celebrated regional successes like Egypt's achievements in disease control such as elimination of malaria, while urging renewed commitment to multisectoral strategies, innovation and shared expertise. Noting upcoming milestones including the 2025 High-Level Meeting on Noncommunicable Diseases, he reiterated the call for collective action to improve health outcomes.

Dr Ahmed Zouiten, Director ad interim of the WHO Emergency Programme (WHE) in the Eastern Mediterranean Region, provided a detailed overview of ongoing health emergencies in the Region, highlighting its disproportionate share of global humanitarian crises, natural disasters and outbreaks. Key issues include strained health care systems, displacement, malnutrition and disease outbreaks in countries and territories including, among others, the occupied Palestinian territory, Lebanon, Sudan and the Syrian Arab Republic. WHO's response focuses on trauma care, outbreak control, supply chain management and strengthening emergency preparedness, with measurable achievements in addressing severe acute malnutrition and controlling case fatality rates. Future priorities should include country capacity building, multisectoral engagement and coordination, health security and strengthening joint platforms to advocate for the right to health of all vulnerable people.

These interventions were followed by a summary of key recommendations from the



Dr Ahmed Zouiten, Director ad interim of WHE in the Region

morning session, included as Annex 3 of this report.

In the following session, statements were delivered by regional heads of RHA member agencies addressing the question, “As One UN, how could we jointly be better aligned, effectively contribute and strengthen our partnerships?”

Mr AbdulHakim Elwaer, FAO Assistant Director-General and Regional Representative for the Near East and North Africa, emphasized the importance of strengthening the One Health approach to address complex health challenges at the human-animal-environment interface in the Near East and North Africa Region. He highlighted the Region’s vulnerability to zoonotic diseases, antimicrobial resistance (AMR), food safety issues and environmental determinants of health, compounded by conflicts, population and livestock movement

and climate change. Mr Elwaer underscored FAO’s commitment to the RHA and its collaborative efforts to tackle these pressing issues. FAO aims to support RHA initiatives focusing on zoonotic diseases, AMR and food safety through risk assessment, surveillance, early warning systems and emergency response; to facilitate the implementation of the One Health Joint Mechanism and Work Plan in collaboration with UN partners to achieve health-related SDGs; and to enhance research, data science and digital health solutions to combat health risks and strengthen governance and national strategies. FAO welcomed WHO’s new regional strategic operational plan and emphasized the importance of intersectoral collaboration, evidence-based strategies and country-focused support to drive progress toward SDG 3. Mr Elwaer concluded with a call for intensified partnerships to mitigate



Mr Abdulhakim Elwaer, FAO Assistant Director-General and Regional Representative for the Near East and North Africa

health risks and ensure the well-being of populations through a unified, impactful One Health approach.

Mr Othman Belbeisi, IOM Regional Director for Middle East and North Africa, said collaborative efforts within the UN system were critical to tackle the Region's health priorities and drive progress on the SDGs. He highlighted the pressing need to focus on migrants and human mobility, noting that the MENA Region hosts 40 million migrants, with most movements occurring within the Region. Ensuring their inclusion in health systems and national plans is vital to address challenges such as limited access to health care, mental health issues, vaccination gaps and stigma. He saw the RHA JAP 2025 as a key platform to strengthen health systems, promote UHC and address the social determinants of health.



Mr Othman Belbeisi, IOM Regional Director for Middle East and North Africa

To further advance these goals, he proposed creating a migration and refugee health subgroup under the RHA, to better integrate their needs into the health agenda. This could re-energize or even merge with Member States' commitment to having a Global Compact on Migration workstream on health led by WHO. Mr Belbeisi also underscored the contribution of IOM in supporting integrated health services for migrants and host communities, conducting vaccination campaigns, training health care workers and leveraging diaspora expertise through telemedicine and capacity-building initiatives. He highlighted the importance of investing in the health workforce, citing successful collaborations between IOM and WHO in countries such as Lebanon, Morocco and Sudan, where diaspora medical professionals have been mobilized to strengthen national health systems. In closing, Mr Belbeisi called for bold, unified action under the One UN approach, stressing that cross-sectoral collaboration is essential to address the Region's complex health challenges and ensure equitable, inclusive health.

Mr Jean-Luc Tonglet, Head of the OCHA Regional Office for the Middle East and North Africa, also emphasized the importance of collective UN action in addressing the Region's pressing health challenges. He reflected on insights from previous sessions and highlighted the importance of developing a joint plan as an opportunity for greater coordination among UN agencies. Underscoring OCHA's role in facilitating coordination at the country level, he noted the agency's engagement with both UN and non-UN entities to strengthen the link between humanitarian and development efforts. At the regional level, OCHA is currently establishing a Regional Standing Group for Emergency and Humanitarian Action; this could be connected to the Regional Health Alliance to enhance response mechanisms.



Mr Jean-Luc Tonglet, Head of the OCHA Regional Office for the Middle East and North Africa

Reflecting on health sector funding in 2023, Mr Tonglet noted that health had received significant financial support, second only to food security, and was the largest recipient of Central Emergency Response Fund (CERF) allocations in terms of beneficiaries. He also pointed to the use of anticipatory action funding, which facilitated staff deployment, improved access to services, enhanced safe water availability and strengthened disease surveillance and infection prevention and control measures.

Another key priority was ensuring access to health care, particularly the safety of health workers and civilians seeking medical services. Mr Tonglet cited recent vaccination efforts in Gaza amid ongoing attacks on health facilities, as well as targeted attacks on humanitarian workers, including WFP staff in Gaza. He condemned such attacks as unacceptable and called for unified efforts to

uphold humanitarian principles and ensure accountability. In closing, he announced that OCHA has developed a three-year joint action plan with the League of Arab States and has recently become an observer in the Council of Health Ministers, presenting an opportunity to strengthen collaboration and engagement in health initiatives across the Region.

Ms Rania Hedeya, Regional Representative ad interim of the UN-Habitat Regional Office for Arab States, discussed the crucial intersection between public health and urban planning, emphasizing the need for integrated approaches to enhance well-being in cities. She introduced "The Heartbeat of the City", a Call for Action launched at the World Urban Forum in Cairo, advocating for health and quality-of-life guidelines that engage urban planners alongside health professionals. Ms Hedeya noted that 70% of the Arab Region's population will reside in cities by 2050, and



Ms Rania Hedeya, Regional Representative ad interim of the UN-Habitat Regional Office for Arab States

underscored the health challenges posed by rapid urbanization, including air pollution, water scarcity and the rising burden of noncommunicable diseases. She highlighted collaboration between UN-Habitat and WHO in the Region to integrate urban and green indicators into WHO's Healthy Cities Programme and implement joint initiatives promoting active transportation, compact urban design and access to green spaces to improve public health outcomes. Ms Hedeya also addressed climate vulnerabilities, including extreme heat, desertification, and sandstorms, citing initiatives in Kuwait and Iraq that focus on land restoration and ecosystem revitalization.

In closing, Ms Hedeya reiterated the importance of cross-sectoral collaboration – bringing together urban planners, health officials, environmental scientists, and policymakers – to advance the HiAP approach. She called on all stakeholders to leverage the WHO–UN-Habitat partnership to drive transformative urban health solutions, ensuring that no one and no place is left behind.

Ms Laila Baker, UNFPA Regional Director for Arab States, highlighted the critical role of collaborative action within the RHA in addressing pressing health challenges across the Region. She noted that sexual and reproductive health is a fundamental human right, yet is increasingly at risk, with maternal and newborn health outcomes stagnating and deep disparities persisting between and within countries. Despite clear evidence of the benefits of investing in health care, the Region continues to fall short. Government expenditures on UHC remain insufficient and high out-of-pocket costs create additional barriers to access.

Welcoming the new structure of the RHA, Ms Baker noted that its thematic groups aligned with UNFPA's mandate to integrate sexual and reproductive health services into



Ms Laila Baker, UNFPA Regional Director for Arab States

broader health strategies. She commended WHO's three regional flagship initiatives, which have the potential to drive meaningful change. In addressing the resilient health workforce, she pointed to the severe shortage of midwives, with only 1.9 per 10 000 people in the Arab Region, significantly below the global average. Strengthening midwifery models of care would not only improve maternal, newborn and adolescent health services but also advance gender equality, as the majority of health care workers in this field are women who face additional challenges in delivering essential services. Turning to the issue of substance abuse, she underscored UNFPA's long-standing commitment to youth engagement and education as a catalyst for prevention. Through comprehensive sexuality education, both in and out of school, and targeted interventions in Women and Girls Safe Spaces, UNFPA works to empower vulnerable

populations, particularly those at risk of HIV and gender-based violence.

Ms Baker raised concern over barriers to sexual and reproductive health services and commodities, noting that one in four women in the Region still lacks the ability to make decisions about her own health. Medicines and medical products for sexual and reproductive health are essential, and Ms Baker reaffirmed UNFPA's commitment to leveraging its expertise in family planning, large-scale procurement and supply chain management to expand equitable access. In closing, Ms Baker emphasized that regional UN cooperation is fundamental to accelerating progress toward the health-related SDGs. She reaffirmed UNFPA's commitment to working alongside WHO to ensure that maternal, newborn, child and adolescent health remains at the heart of the regional agenda through targeted action under the "Every Woman Every Newborn Everywhere" initiative.

Delivering an address on behalf of Dr Patrick Jean Gilabert, UNIDO Regional Representative, Ms Rowan Ahmed said there was an urgent need to strengthen local pharmaceutical production as a key pillar of health security and economic resilience. She noted how supply chain disruptions during the COVID-19 pandemic had exposed deep inequalities in access to essential medicines and vaccines, particularly in developing countries. In response, many countries are now prioritizing local manufacturing to enhance supply chain resilience, ensure regulatory oversight and tailor health products to meet regional needs.

Through its Health Industry Framework, UNIDO has been at the forefront of supporting countries in building sustainable and competitive pharmaceutical industries. Recent initiatives include Good Manufacturing Practice roadmaps, which have already been implemented in 23 African



Ms Rowan Ahmed, Project Administrator, Health Industry, UNIDO

countries, helping local manufacturers meet international quality standards. A major milestone has been the establishment of the International Centre for Health Industry Readiness in the United Arab Emirates, dedicated to strengthening global pandemic preparedness and emergency response capabilities. Additionally, UNIDO has deepened collaboration with WHO, working closely with the Local Production Assistance (LPA) team and rejoining the Interagency Pharmaceutical Coordination group to streamline regulatory frameworks and production standards. Concluding the address, Ms Ahmed underscored that equitable access to health care requires a coordinated, multisectoral approach. She called on partners within the RHA to leverage their collective expertise, align efforts and invest in sustainable solutions that bridge health and industrial development, ensuring no country is left behind in achieving SDG 3.



Ms Cristina Albertin, UNODC Regional Representative in the Middle East and North Africa

Ms Cristina Albertin, UNODC Regional Representative in the Middle East and North Africa, said collaboration within the RHA was needed to address substance abuse and related health challenges as critical public health priorities. She outlined UNODC's evidence-based, human rights-focused approach to drug prevention, treatment and rehabilitation, including the successful implementation of opioid agonist therapy in Algeria and Egypt, which has stabilized lives, reduced illicit activities and supported reintegration for thousands. Additionally, UNODC has improved health care services in prisons, ensuring equitable, rights-based care for communicable and noncommunicable diseases and thereby benefiting over 75 000 individuals in Egypt.

Ms Albertin introduced the CHAMPS initiative, which builds resilience among children to prevent drug use and other vulnerabilities;

Egypt is leading its rollout and there are plans to expand the programme regionally with UN support. Ms Albertin also addressed urgent issues such as the proliferation of falsified medicines and barriers to controlled substances for pain treatment, calling for strengthened regulatory systems, capacity-building and expanded access through partnerships with WHO and other agencies. Concluding her remarks, Ms Albertin stressed that addressing these complex challenges requires unified, cross-sectoral efforts to advance SDG 3. She called on all stakeholders to leverage their collective expertise and resources to ensure equitable health access, drive impactful change and secure a healthier future for the Region.

Mr Adel Darwish, Regional Director of the ITU Office for the Arab States, reflected on the responsibility of serving the Region's citizens, emphasizing that the challenges extend beyond health and can only be overcome through multisectoral action. He noted that ITU is celebrating its 160th anniversary in 2025, marking its long-standing role as the oldest UN agency dedicated to advancing technology and telecommunications. The rapid evolution of artificial intelligence (AI) underscores the increasing need to bridge the gap between industries and their users, ensuring that technological advancements serve communities effectively.

Mr Darwish emphasized that the digitalization of health services would make health care more accessible and efficient, empowering communities to seek care with greater ease. AI presents an opportunity to enhance the quality and sophistication of health care services, offering innovative solutions to long-standing challenges. In the context of the RHA, Mr Darwish noted ITU's strong connection to two key pillars, digitalization and connectivity, both of which are essential in ensuring equitable access to health services. He also highlighted ITU's ongoing collaboration with WHO in the



Mr Adel Darwish, Regional Director of the ITU Office for the Arab States

development of the Global Initiative on AI in Health, reinforcing their shared commitment to leveraging emerging technologies for public health. Concluding his address, Mr Darwish reaffirmed ITU's commitment to advancing technology-driven solutions, ensuring that digital innovation enhances service quality and accessibility across the Region.

Dr Mary Kawar, UNDP Regional Hub Director of Arab States, highlighted the deep interconnection between health and development, emphasizing UNDP's commitment to addressing the inequities that drive poor health. Through its global health strategy, Connecting the Dots, UNDP works to ensure no one is left behind, supporting multisectoral approaches to health and advocating for planetary health alongside UHC. As a signatory of the Global Action Plan on SDG3, UNDP leverages its work in governance, human rights, climate



Dr Mary Kawar, UNDP Regional Hub Director of Arab States

action, gender equality and the rule of law to improve health outcomes. Dr Kawar expressed UNDP's readiness to support the RHA's new structure and the JAP 2025, collaborating closely with WHO and other UN agencies at regional and country levels. She concluded by reaffirming her enthusiasm for future collaboration and expressed her hope that colleagues would be able to celebrate successful implementation of the JAP at their next annual meeting.

Ms Rawad Halabi, WFP Deputy Regional Director, highlighted the essential connection between food security and health, and called for stronger collaboration across the UN system to address regional health priorities and accelerate progress on the SDGs. She pointed to key initiatives such as the 2023 regional Call to Action on Maternal and Child Undernutrition and the Global Action Plan on Child Wasting, which aim to tackle food insecurity and malnutrition in crisis-affected



Ms Rawad Halabi, WFP Deputy Regional Director

countries like Lebanon, the Syrian Arab Republic and Yemen through improved food access, strengthened nutrition services and multisectoral policies.

WFP's regional efforts include cash transfer programmes such as Egypt's First 1000 Days, supporting maternal and child nutrition, and school feeding programmes that served 3.2 million children in 2024, helping improve health and education outcomes. With 36.8 million people in the Region facing acute food insecurity, Ms Halabi stressed the urgency of unified strategies, stronger partnerships and investment in resilient food systems to address both immediate needs and long-term challenges. She also highlighted the importance of innovative approaches, such as shifting to fresh, homegrown school meals, to support dietary diversity and strengthen local food systems. She concluded by calling for

continued alignment of efforts across UN agencies, emphasizing that acting as One UN is essential to creating sustainable and impactful solutions that ensure every child and family has the opportunity to not only survive, but thrive.

Addressing the meeting virtually, Mr Abdul Fofana, UNICEF Deputy Regional Director for the Middle East and North Africa, commended Dr Balkhy's leadership in advancing the RHA and fostering strong collaboration among UN agencies to address regional health priorities. He highlighted the alignment between WHO's new regional strategic operational plan and flagship initiatives and UNICEF's mission, emphasizing the importance of working together to achieve impactful outcomes. He showcased key examples of successful partnerships under the RHA framework, mentioning UNICEF's efforts to strengthen community-based primary health systems across 13 countries, the Regional UN Nutrition Collaboration Framework launched in 2023, which has improved technical and advocacy support for wasting, obesity, and nutrition emergencies, and the regional WASH collaboration between UNICEF and WHO, recognized as a best practice for its joint workplans and health care facility improvements. He also highlighted the role of the Regional Risk Communication and Community Engagement (RCCE) Working Group in enhancing public health emergency preparedness and trust building.

Mr Fofana also praised WHO's regional leadership for seeking to expand equitable access to medical products through initiatives such as regional pooled procurement and local manufacturing of essential medical products. This aligned with UNICEF's localization agenda. He concluded by emphasizing the need for a coordinated and strategic approach among RHA agencies, leveraging their respective strengths to

address the Region's growing complexities and deliver sustainable, impactful results.

Session 5: Meeting closure and renewal of commitment

The final session focused on next steps in work on the JAP 2025, presented by Dr Jamal Nasher. In finalizing the plan in the upcoming months, focus will be given to aligning its objectives and deliverables with regional priorities and emerging opportunities. The plan will aim to strengthen partnerships and enhance coordination between the RHA and UNCTs across member countries. Further steps will include.

- ▶ Framework development: the plan will detail specific actions, timelines, target countries, engaged UN agencies, performance indicators and expected outcomes.
- ▶ Collaborative efforts: the plan will showcase a unified approach among stakeholders to address pressing health priorities and challenges in the Region.
- ▶ Strengthened linkages: a central objective will be to improve the interface between regional coordination mechanisms and

national-level UNCT operations for cohesive health initiatives.

This initiative reflects a commitment to operationalizing a unified, strategic response to the Region's health needs through collaboration and precise planning.

In his closing remarks, Dr Adham Ismail emphasized the pivotal role of partnerships and collaboration among UN agencies in addressing health priorities across the Eastern Mediterranean Region. Dr Ismail underscored that the objective is not for each agency to simply support WHO's agenda, but to identify intersections among the strategies of different UN entities. These points of convergence represent valuable opportunities to harmonize efforts, optimize resources and collectively deliver more impactful and sustainable results. Such an approach fosters a truly integrated response, ensuring that the unique mandates and expertise of each agency contribute to shared outcomes. Dr Ismail concluded with a call to action for UN agencies to work together as equal partners, leveraging their collective strengths and aligning shared priorities. By focusing on synergies rather than isolated strategies, the UN system can achieve transformative health



Dr Adham Ismail, WHO Director of Programme Management in the Eastern Mediterranean Region

outcomes and significantly advance the Region's health and development agenda.

Dr Hanan Balkhy concluded the meeting by reaffirming the importance of collaboration in addressing health challenges in the Eastern Mediterranean Region. She urged participants to sustain the momentum,

stressing that the success of the JAP 2025 will depend on collaboration, accountability and a shared commitment to equity and access to health for all. She called for urgent and steadfast action to achieve transformative results for the Region.



Dr Hanan Balkhy, WHO Regional Director for the Eastern Mediterranean



The RHA Strategic Dialogue "Task Force". From left: Ms Odette Matta, Administrative Assistant; Mr Ahmed Shokry, Help Desk Assistant; Ms Asmaa Elalfy, Technical Officer for Communication; Ms Ines Imbert, Technical Officer; Dr Yara Osman, SDGs and Gender, Equity and Rights Specialist; Ms Grazia Perreca, Programme Officer; Dr Nasim Pourghazian, Technical Officer; Ms Micaela Pereira Bajard, Technical Officer; Dr Nasher Jamal, Coordinator SDGs and Gender, Equity and Rights; Ms Rita Meimari, Senior Administrative Assistant; Ms Nourhan Elrifai, Gender, Equity and Rights Officer

Annex 1: List of participants

FAO

Mr AbdulHakim Elwaer, Assistant Director-General and Regional Representative for the Near East and North Africa

Mr Ahmad Mukhtar, Senior Economist/Head of Strategy and Policy

Dr Friederike Mayen, Senior Livestock Development Officer

Dr Mohamed Moustapha, Food Safety and Quality Officer

Mr Tamás Vattai, Nutrition and Food Systems Officer

Ms Hania Ahmed, Policy Specialist, Nutrition and Food Safety

IOM

Mr Othman Belbeisi, Regional Director for Middle East and North Africa

Dr Michela Martini, Senior Regional Thematic Specialist on Migration Health

Ms Lotte Van Heesewijk, Regional Migration Health Officer

ITU

Mr Adel Darwish, Regional Director of the ITU Office for the Arab States

Mr Karim Abdelghani, Programme Coordinator

OCHA

Mr Jean-Luc Tonglet, Head of the OCHA Regional Office for the Middle East and North Africa

Mr Sherif Arafa, Humanitarian Affairs Officer

UN-HABITAT

Ms Rania Hedeya, Regional Representative ad interim of the UN-Habitat Regional Office for Arab States

Ms Nagwa Lachine, Programme Officer

UN WOMEN

Ms May El Sallab, Programme Specialist

UNAIDS

Dr Walid Ibrahim, Country Manager

UNDP

Dr Mary Kawar, Regional Hub Director of Arab States

Dr Elfatih Abdelraheem, Health and Development Advisor and Team Lead

Mr Arkan El-Seblani, Regional Chief Anti-corruption and Integrity Advisor

UN Development Coordination Office (DCO) for Arab States	Ms Barbara Manzi, DCO Regional Director for Arab States
UNESCO	Ms Areej Atalla, Programme Specialist
UNFPA	Ms Laila Baker, Regional Director for Arab States Mr Dominic Allen, Deputy Regional Director Dr Willis Odek, Regional Population and Development Advisor Dr Hala Youssef, Regional Sexual and Reproductive Health Advisor
UNHCR	Dr Jakob Arhem, Public Health Officer Mr Sherzod Zairzhanov, Senior Operations Officer
UNICEF	Mr Abdul Fofana, Deputy Regional Director for the Middle East and North Africa Dr Sowmya Kadandale, Regional Health Advisor
UNIDO	Ms Rowan Ahmed, Project Administrator, Health Industry Mr Amjed Ali, National Expert on Health Industry Management Ms Nora Markova, International Expert on Health Industry
UNODC	Ms Cristina Albertin, Regional Representative in the Middle East and North Africa Dr Tariq Sonnan, Regional Programme Coordinator
UNRWA	Dr Akihiro Seita, Chief of Health Dr Sayed Shah, Senior Health Policy Officer
WFP	Ms Rawad Halabi, Deputy Regional Director for Enabling Services
World Bank	Dr Sameera Altuwaijri, Global Lead for Population and Development Health, Nutrition and Population Global Practice Dr Ayodeji Gafar Ajiboye, Senior Health Economist
Consultants	Dr Ruth Mabry, Global Public Health Consultant

WHO

WHO Senior Management

Dr Hanan Balkhy, Regional Director for the Eastern Mediterranean

Dr Mohamed Abdi Jama, Senior Adviser to the Regional Director

Dr Bruce Aylward, Assistant Director-General for UHC and Life Course

Dr Yukiko Nakatani, Assistant Director-General for Access to Medicines and Health Products

Professor Jérôme Salomon, Assistant Director-General for Communicable and Noncommunicable Diseases

WHO Senior Management (continued)

Dr Adham Ismail, Director of Programme Management and Chef de Cabinet ad interim

Ms Mira Ihalainen, Director of Communication, Resource Mobilization and Partnership

Dr Asmus Hammerich, Director of UHC/Noncommunicable Diseases and Mental Health and Director ad interim for Healthier Population

Dr Arash Rashidian, Director of Science, Information and Dissemination

Dr Awad Mataria, Director of UHC/Health Systems

Dr Ahmed Zouiten, Regional Emergency Director ad interim and WHO Representative to Libya

WHO representatives to countries

Dr Jamela AlRaiby, WHO Representative to Jordan

Dr Joumana Hermez, WHO Representative to Djibouti

Dr Jean Jabbour, WHO Representative to Oman

Dr Shible Sahbani, WHO Representative to Sudan

Dr Reinhilde Van De Weerd, WHO Representative to Somalia

Other WHO staff

Ms Samah Abdel Aziz, Technical Officer, Governing Bodies

Ms Nesma Abed Abdallah, Social Media Officer

Mr Aly Abouraya, Corporate Communications Officer

Dr Mohamed Afifi, Regional Adviser, Women's Health

Dr Arshad Altaf, Technical Officer, Research and Innovation

Dr Hala Amer, Regional Adviser, Antimicrobial Resistance

Dr Ali Ardalan, Regional Adviser, Health Systems Resilience

Ms Micaela Pereira Bajard, Technical Officer, Chef de Cabinet's Office

Dr Søren Brostrøm, Senior Adviser, Office of the Director-General

Ms Valeria De Oliveira Cruz, Coordinator, Country Cooperation and Collaboration

Dr Henry Doctor, Coordinator, Information Systems for Health

Ms Asmaa Elalfy, Technical Officer for Communication, Chef de Cabinet's Office

Ms Nourhan Elrifaie, Gender, Equity and Rights Officer, Chef de Cabinet's Office

Dr Fawzia ElSherif, Technical Officer, Hospital Care Management

Mr Mahmoud Essa, Multimedia and Studio Associate

Dr Alessandra Ferrario, Technical Officer, Information Systems for Health

Dr Heba Fouad, Regional Adviser, Noncommunicable Disease Surveillance

Dr Fethiye Gulin Gedik, Coordinator, Health Workforce

Dr Samar Hammoud, Team Lead, Operational Readiness and Capacity Building

Dr Quamrul Hasan, Unit Head, Immunization and Vaccine-Preventable Diseases

Ms Ines Imbert, Technical Officer, Director of Programme Management's Office

Dr Muhammad Jamil, Regional Adviser, HIV/AIDS and Sexually Transmitted Infections

Dr Santosha Kelamane, Medical Officer, Tuberculosis

Mr Amr Mahmoud Khafagy, Service Desk Assistant

Dr Wasiq Khan, Team Lead, Partner Operational Readiness

Dr Mehrnaz Kheirandish, Regional Adviser, Evidence and Data to Policy

Dr Houda Langar, Regional Adviser, Access to Medicines and Health Technology

Dr Lamia Mahmoud, Regional Adviser, Noncommunicable Disease Prevention

Ms Odette Matta, Administrative Assistant, Chef de Cabinet's Office

Ms Rita Meimari, Senior Administrative Assistant, Chef de Cabinet's Office

Mr Omid Mohit, Senior Technical Manager, Strategic Communications for Health

Dr Jamal Nasher, Coordinator, SDGs and Gender, Equity and Rights

Dr Adi Al-Nuseirat, Technical Officer, Access to Pharmaceuticals

Dr Yara Osman, SDGs and Gender, Equity and Rights Specialist

Ms Grazia Perreca, Programme Officer, Chef de Cabinet's Office

Dr Nasim Pourghazian, Technical Officer, Director of Programme Management's Office

Dr Hamid Ravaghi, Regional Adviser, Hospital Care Management

Dr Khalid Saeed, Regional Adviser, Mental Health

Dr Hala Sakr, Regional Adviser, Violence, Injuries and Disabilities

Dr Muhammad Sheraz, Project Officer, WHE

Mr Ahmed Shokry, Help Desk Assistant

Dr Khalid Siddeeg, Regional Adviser, Child and Adolescent Health

Ms Hayet Souissi, Protocol Officer, Regional Director's Office

Dr Tana Wuliji, Senior Technical Adviser, Assistant Director-General's Office

Annex 2: Agenda

Towards one regional WHO–UN health agenda in 2025: a Regional Health Alliance strategic dialogue

Strengthening UN collaboration to address regional health
priorities and accelerate progress on the
Sustainable Development Goals (SDGs)

Wednesday, 15 January 2025
Waldorf Astoria Hotel, Cairo, Egypt (09:00–16:30)

Morning sessions Technical discussions

Session Chair: Dr Adham Ismail,
WHO Director of Programme Management for the Eastern Mediterranean Region

Moderated by: Dr Nasim Pourghazian,
Technical Officer, Director of Programme Management's Office

9:00–09:45	Session 1. The Regional Health Alliance: the way forward	<ul style="list-style-type: none">▶ Opening remarks; Dr Adham Ismail▶ Introduction to the meeting and new RHA structure; Dr Jamal Nasher, RHA Secretariat, WHO Regional Office for the Eastern Mediterranean▶ Framework for the RHA Joint Action Plan 2025: objectives and deliverables – thematic groups: 1) Primary Health Care for Universal Health Coverage, 2) Health Determinants, Risk Factors and Community Engagement, 3) Health Emergencies Preparedness and Response, and 4) Research, Innovation and Evidence-Informed Policy; Dr Jamal Nasher▶ Reflections from thematic group leads and members
09:45–10:30	Session 2. Country perspective: priorities and best practices	<ul style="list-style-type: none">▶ Countries' health needs, priorities and best models of engagement with UNCTs<ul style="list-style-type: none">→ Dr Reinhilde Van de Weerd, WHO Representative to Somalia→ Dr Shible Sahbani, WHO Representative to Sudan→ Dr Joumana Hermez, WHO Representative to Djibouti→ Dr Jamela Alraiby, WHO Representative to Jordan→ Dr Jean Jabbour, WHO Representative to Oman▶ Reflections from participants

Coffee break and networking

10:30–11:00

11:00–13:00

Session 3. Regional perspective: health challenges and priorities

- ▶ **An overview of WHO's *Strategic operational plan for the Eastern Mediterranean Region, 2025–2028***; Dr Mohammed Abdi Jama, Senior Advisor to the WHO Regional Director
- ▶ **A briefing on WHO's regional flagship initiatives: investing in a resilient health workforce, accelerating public health action on substance use and equitable access to medical product**; Dr Adham Ismail
- ▶ **Response to participants' questions and comments by flagship initiative penholders**
- ▶ **Roundtable discussion: alignment, contribution and potential partnerships**
 - Round 1: What are the regional midterm health priorities?
 - Round 2: Investing in a resilient health workforce
 - Round 3: Accelerating public health action on substance use
 - Round 4: Expanding equitable access to medical products

Lunch hosted by the WHO Regional Director and group photo

13:00–14:00

Afternoon sessions **Strategic and high-level segment**

Session Chair: Dr Hanan Balkhy,
WHO Regional Director,

Moderated by: Dr Nasim Pourghazian,
Technical Officer, Director of Programme Management's Office

14:00–16:00

Session 4. Towards a One UN health agenda in the Region

- ▶ **Opening remarks**; Dr Hanan Balkhy
- ▶ **Remarks on UN's joint work to achieve UHC**; Dr Bruce Aylward, WHO Assistant Director-General for UHC and Life Course
- ▶ **Remarks on interagency work to increase access to medicines**; Dr Yukiko Nakatani, WHO Assistant Director-General for Access to Medicines and Health Products
- ▶ **Remarks on interagency work to address the burden of disease in the Region**; Dr Jérôme Salomon, WHO Assistant Director-General for Communicable and Noncommunicable Diseases
- ▶ **An overview of health emergencies in the Eastern Mediterranean Region**; Dr Ahmed Zouiten, Director ad interim of the WHO Emergency Programme (WHE) in the Eastern Mediterranean Region
- ▶ **Summary of key recommendations from the morning session**; Dr Jamal Nasher and Dr Nasim Pourghazian

14:00–16:00

Session 4. Towards a One UN health agenda in the Region (concluded)

- ▶ **As “One UN” how could we be better aligned, contribute more effectively and strengthen our partnerships?**
- ▶ **Observations and inputs by UN regional heads**
 - Mr Abdulhakim Elwaer, FAO Assistant Director-General and Regional Representative for the Near East and North Africa
 - Mr Othman Belbeisi, IOM Regional Director for Middle East and North Africa
 - Mr Jean-Luc Tonglet, Head of the OCHA Regional Office for the Middle East and North Africa
 - Ms Rania Hedeya, Regional Representative ad interim of the UN-Habitat Regional Office for Arab States
 - Ms Laila Baker, UNFPA Regional Director for Arab States
 - Dr Patrick Jean Gilabert, UNIDO Regional Representative
 - Ms Cristina Albertin, UNODC Regional Representative in the Middle East and North Africa
 - Mr Adel Darwish, Regional Director of the ITU Office for the Arab States
 - Dr Mary Kavar, UNDP Regional Hub Director of Arab States
 - Ms Rawad Halabi, WFP Deputy Regional Director
 - Mr Abdul Fofana, UNICEF Deputy Regional Director for the Middle East and North Africa

16:00–16:30

Session 5. Meeting closure and renewed commitment

- ▶ **Towards an RHA Joint Action Plan: The Health Pact 2025;** Dr Jamal Nasher
 - ▶ **Integrating the Health Pact 2025 within UNCT work: the way forward;** Dr Adham Ismail
 - ▶ **Closing remarks;** Dr Hanan Balkhy
-

Annex 3: Summary of key recommendations from morning sessions

Session 1: The Regional Health Alliance: the way forward

Frameworks and initiatives

- ▶ **Regional Health Agenda (RHA)** since 2019.
- ▶ 18 UN agencies
- ▶ **ONE UN framework** for unified collaboration.
- ▶ **Global Action Plan on Healthy Lives and Well-being.**
- ▶ **Flagship Initiatives (FIs)** and **Regional Strategic Operational Plan (RSOP).**
 - Based on the 5Ps: Protect, Provide, Promote, Power, Perform.
 - Reflect inclusivity, innovation, and sustainability.

Collaboration

- ▶ Effective collaboration to avoid duplication of efforts.
- ▶ Unified actions to address health challenges.
- ▶ Leverage the power of agencies to implement plans and reach populations.

Health priorities and SDGs

- ▶ Accelerate health priorities to achieve SDGs and address challenges.
- ▶ Support country-specific health priorities identified with Member States.
- ▶ Contribute to Joint Action Plan priorities and deliverables..

Resource optimization and measurable outcomes

- ▶ Optimize resources for measurable outcomes.
- ▶ Develop and execute a unified action plan..

Collaboration and partnership

- ▶ Strong collaboration ensures success; emphasize the **ONE UN framework.**
- ▶ Include all sectors supporting health; no single agency can handle challenges alone.
- ▶ Avoid duplication by improving joint programming and establishing working groups.
- ▶ Align work with a **common agenda** at the ground level.
- ▶ Address governance issues to reflect global and regional partnerships at the **country level.**
- ▶ Strengthen partnerships strategically to avoid fragmentation..

Health financing

- ▶ Focus on global health financing, beyond just funding.
- ▶ Address concerns about the **financing agenda for health**: consider return on investment and domestic financing.
- ▶ Challenges in aligning health financing efforts.
- ▶ Develop a clear and actionable roadmap for health financing.
- ▶ Resource mobilization leadership required, especially from WHO.

Digital transformation and innovation

- ▶ Enhance collaboration through **digital health information systems**.
- ▶ Drive progress with a mission to do more and better together.
- ▶ Transform work on the ground through digital innovations and better data sharing.

Country-level implementation

- ▶ UNCTs must adopt strategies to lead partnerships effectively.
- ▶ Build capacities at the country level to reflect global and regional strategies.
- ▶ Ensure governance structures support cohesive partnerships at the country level.
- ▶ Avoid fragmented partnerships through strategic alignment and planning.

Priority setting and focus

- ▶ Clarify and prioritize emergency health needs.
- ▶ Address risks in multilateral health work.
- ▶ Balance the roles of agencies with narrow vs. broader mandates.

Session 2: Country perspective: priorities and best practices



- ▶ **Contextualized needs** and constantly evolving situation
- ▶ **Human resources for health** – joint advocacy and planning
- ▶ Community engagement and **community-centred health services**
- ▶ **UNCTs empowering national authorities** for sustainability
- ▶ **Health in all agencies**

Session 3: Regional perspective: health challenges and priorities

Investing in a resilient health workforce

- ▶ **Health workforce planning**
WB, WCO, WHO, UNRWA, IOM, UNFPA, UNDP, FAO
- ▶ **Community health workers**
WHO, UNAIDS, UNICEF, UNODC, UNFPA, UNRWA, UNHCR, IOM
- ▶ **Capacity building**
UNIDO, WHO, WCO
- ▶ **Diaspora engagement**
IOM, WHO, UNFPA
- ▶ **Midwifery strategy**
UNFPA, WHO, LAS



Expanding equitable access to medical products

- ▶ **Humanitarian logistics**
UNRWA, WHO, OCHA, UNFPA, IOM, FAO
- ▶ **Local pharmaceutical production**
UNIDO, UNAIDS, WB, WCO, WHO, FAO
- ▶ **Procurement and supply chain**
IOM, WB, WHO, UNDP, UNFPA
- ▶ **Innovative medication support**
UNAIDS, WHO EMRO, IOM, WCO
- ▶ **Regulatory authority support**
WCO, WHO, UNDP, WHO
- ▶ **Access for refugees**
UNHCR, UNAIDS, UNODC, IOM
- ▶ **Health commodities**
UNFPA, WHO
- ▶ **Vaccine delivery**
IOM, UNICEF, UNFPA, UNRWA, WHO



Accelerating public health action on substance use

- ▶ **Harm reduction**
WHO, OAMT, UNODC, UNHCR, UNDP, UNIDO, UNFPA
- ▶ **Community and youth engagement**
WHO, UNHCR, IOM, UNFPA, WCO, UNIDO, UNAIDS, UNICEF
- ▶ **Data collection**
WHO, UNODC







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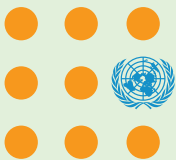
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