Editorial

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¹Email from the Acting Regional Director to the WHO Director General, 11 February 2018.

²Meeting of the Programme Review Sub-Committee of the Regional Committee for the Eastern
Mediterranean, April 2018.

23 May 2018 will be remembered as an important day in the history of the World Health Organization (WHO) and global health. It was the day when the 194 Member States that constitute the World Health Assembly (WHA) – the highest decision-making body of WHO, making it effectively the global parliament for health – unanimously adopted the thirteenth general programme of work (GPW 13) for the Organization, covering the next five years (2019–2023) (1). In its 70 years of existence, WHO has already seen 12 GPWs, but GPW 13 marks a new departure in many ways, heralding the Organization’s entry into a new era of work with new ways of tackling the task of improving people’s health and well-being across the globe.

GPW 13 is firmly based on the 2030 Agenda for Sustainable Development (2,3) and has given a clear mission to WHO: “promote health, keep the world safe, serve the vulnerable”. Its development under the leadership of WHO’s new Director General, Dr Tedros Adhanom Ghebreyesus, followed open, broad and far-reaching consultation. This approach provided ample opportunities for feedback and input from all three organizational levels of WHO – headquarters, regional offices and country representations – and meant that its development benefited from extensive engagement with Member States. In consequence, when the final draft was presented to the World Health Assembly in May the Member States gave it their unanimous support.

GPW 13 sets three ambitious global targets to be achieved in five years: 1 billion more people benefiting from universal health coverage; 1 billion more people better protected from health emergencies; and 1 billion more people enjoying better health and well-being. To achieve these targets, the programme presents strategic shifts in the way the WHO works by centering on countries to maximize its impact on public health, focusing on global public goods in its work on developing norms and standards, expanding partnerships and stepping up leadership. Of course, this will require WHO to be smart and fit for purpose, which will be achieved through five major organizational changes. A transformation plan which includes action to change the mind-set and behavior of WHO staff is already being implemented at the three levels of the Organization.

Like all WHO regional offices, the Eastern Mediterranean Regional Office (EMRO) has been fully engaged in developing and finalizing GPW 13. The transparent and consultative development process gave regional offices a good opportunity to start planning for its expected implementation. In EMRO, that planning started in February 2018 with the proposal that
technical discussions of the upcoming Regional Committee be dedicated to discussing the implementation of GPW 13 with Member States, “to agree with Member States on a concrete plan of action for the Region to implement the GPW 13 and contribute to the collective triple billion target. Reaching the triple billion target is a joint responsibility between the Secretariat and Member States – so agreeing on the approach at regional level earlier on in the process will clarify roles and responsibilities.” The plan was presented to Member States at a planning meeting in April 2018, and adopted as the agenda for the sixty-fifth session of the Regional Committee, scheduled for October 2018.

The Eastern Mediterranean is a diverse region of 22 countries with varying socioeconomic circumstances and levels of health system development and infrastructure. The Region is also seriously affected by various emergencies – some caused by nature, some by human action – which challenge efforts to advance universal health coverage (UHC) (4,5,6). Three countries in the Region, Somalia, the Syrian Arab Republic and Yemen, are now Grade 3 emergencies. There is also a large displaced and migrant population in the Region that should be included in any attempt to advance UHC. Aiming for substantial improvements toward the “triple billion” goal in the Region requires focused and coherent action in all its countries.

As such, EMRO teams are now developing four technical papers to address the expectations set by GPW 13 in the Eastern Mediterranean context and inform Member States’ decisions on appropriate action. The first three papers target the “triple billion” goals: advancing universal health coverage, protecting populations from the impact of health emergencies and promoting health and well-being. The fourth paper, titled “Optimizing WHO’s performance: countries at the centre”, focuses on improving WHO’s performance in the Region. The strategic focus of these papers represents an important shift in the way the Regional Committee decisions are made. While in the past decisions often addressed discrete technical areas of work, now they bring together different areas of work under the umbrella of the GPW 13 goals.

As we commemorate the seventieth anniversary of WHO and the fortieth anniversary of the historic Alma-Ata Declaration on primary health care (7), there could be nothing more fitting than a rejuvenated mission for the Organization and institutionalization of a new general programme of work. EMRO and WHO’s Member States in the Region are fully engaged in this transformation.

References


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