





Why monitor the impact of sanctions on health?

Growing trend

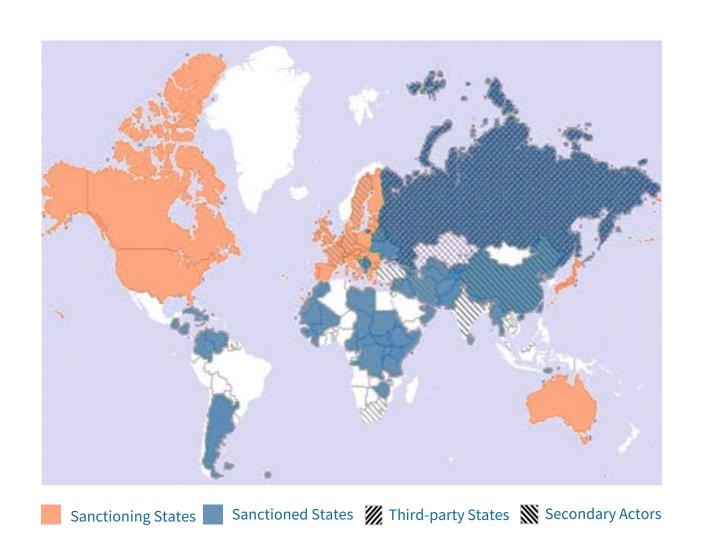
Tripled since 2010

Eastern Mediterranean Region

Increasing number of countries affected

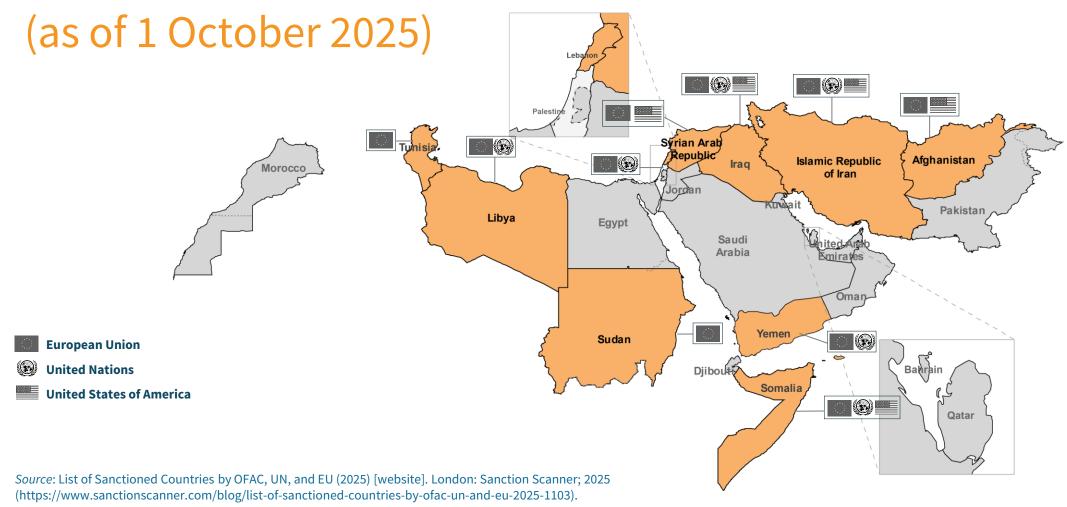
Gap

No unified approach to monitoring impact in support of resilience building



Eastern Mediterranean Region:

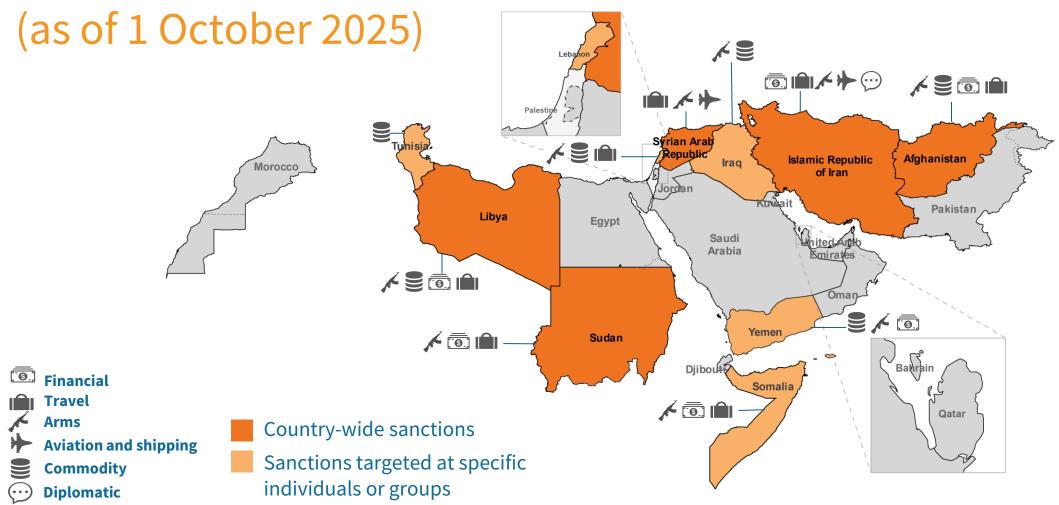
Member States subject to sanctions



Disclaimer: 'The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there May not yet be full agreement.'

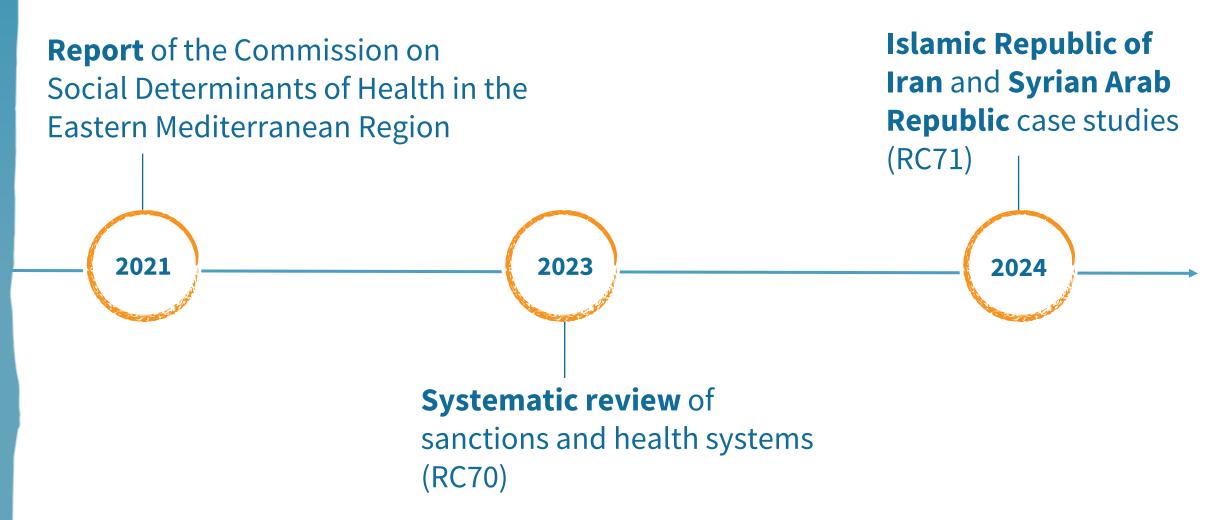
Eastern Mediterranean Region:

Scope and type of sanctions



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What has happened so far:



Request to WHO at RC71 (2024)



Develop

a standardized methodology or data collection tool



Explore

interest from a Member State to champion this agenda in the Region

Sanctions' Health Assessment and Monitoring Support (SHAMS) tool



OCHA/IASC handbook and UN Special Rapporteur's online tool on unilateral coercive measures



WHO monitoring tool on the impact of cuts in development assistance for health



In-depth interviews with global and regional experts with first-hand experience

SHAMS

A. Sanctions context

Type (e.g. economic, etc)

Issuing authorities

Supplementary sanctions

Secondary measures

Overcompliance

Exemptions

C. Health system functions

C1. Access to essential health products
C2. Service provision
C3. Emergency capacity
C4. Health financing
C5. Health and care workforce
C6. Health information systems
C7. Health governance
D. Beyond health system
Economics

Economics

Food security

Migration and displacement

Education

Healthy living

B. Health outcomes

Intermediate

Longer-term

Equity

Mitigation measures

Health system resilience

Social protection

Humanitarian aid and partnerships

International diplomacy and advocacy

SHAMS: Target audience and purpose

Nationally owned for *policy formulation* and *international engagement*

- Ministries of health and insurers
- Government social sectors
- UN agencies and partners
- Sanctioning entities









Academic institutions: evidence generation and analysis

SHAMS: Recommended frequency



Medicines and health products, services and finance

→ monthly



Governance, health and care workforce and health information system

→ quarterly or semi-annual



Quantitative indicators

→ annually



Outputs: simple two-page country profile

Next steps

Regional Director

Support implementing the **SHAMS tool** to monitor the impact of sanctions in the Eastern Mediterranean Region, and regularly report back to the Regional Committee

