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WHO events addressing public health priorities

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This is a summary of the report of a workshop for sharing best practices in sexual and reproductive health in the Eastern Mediterranean Region, available at: https://applications.emro.who.int/docs/WHOEMWRH111E-eng.pdf.

Introduction

There has been an increase in access to sexual and reproductive health (SRH) services, including contraceptives and voluntary counselling and testing for sexually transmitted infections, in the Eastern Mediterranean Region (EMR) (1). Improvements have been reported in several countries such as Afghanistan, Lebanon, Islamic Republic of Iran, Jordan, Libya, Morocco, Somalia, and Sudan (1). However, countries need to document and share lessons and experiences from these improvements to help shape the SRH research agenda in the region, and increase adoption, sustainability and impact of SRH initiatives by increasing the health and well-being of populations.

In March 2021, the WHO Regional Office for the Eastern Mediterranean convened a virtual workshop on sharing best practices in SRH in the EMR. The workshop aimed to facilitate sharing of innovative methodologies, tools and approaches used to improve SRH services by countries in the region and discuss how to scale-up and sustain the outstanding initiatives. The workshop included 72 participants from 8 countries and territories in EMR and WHO.

Summary of discussions

Effective knowledge-sharing is a good strategy for providing essential evidence for policies and interventions and encouraging adoption of best practices. Based on mathematical modelling conducted in Afghanistan, Iraq, Morocco, Pakistan, Somalia, and Sudan, the benefits of continuing to provide SRH services at health facilities and in the community far outweigh the risks of infections during a pandemic such as the COVID-19. However, the magnitude of the benefits and the number of lives saved will depend on the effectiveness of interventions included in the model, baseline coverage of services, level of coverage disruption, number and impact of the mitigation measures, household size, and age structure of the population.

During the ongoing pandemic, Morocco and Pakistan have been using the digital platforms for training, data collection, counselling, information sharing, and other SRH services. Lebanon, with guidance from the Ministry of Public Health, continues to involve professional, non-governmental and community-based organizations in the provision of SRH services.

Participants agreed on the need to continue and advance the use of information technology and digital platforms for training, counselling, provision of SRH information, and to secure additional resources for services. They noted the importance of actively involving non-governmental organizations in service provision during emergencies and their catalytic role in maintaining essential SRH services. To make such support effective, coordination and clear guidance are essential, as they would help prevent duplication and overlapping of services and ensure the convergence and standardization of services based on the relevant national, regional, and global guidelines (2).

Recommendations

1. WHO Member States are to identify SRH-related best practices for documentation and publication, organize dissemination forums for SRH-related best practices, and scale-up and sustain innovative initiatives by institutionalizing them.
2. WHO will provide technical and financial support for advocacy with the relevant authorities for identification, documentation, dissemination, adoption, and scale-up of innovative initiatives.

References

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2. World Health Organization. WHO consolidated guideline on self-care interventions for health: sexual and reproductive health and rights. Geneva: World Health Organization, 2019. https://apps.who.int/iris/bitstream/handle/10665/325480/9789241550550-eng.pdf.

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