When we held our first press briefing on health emergencies after I took office about four months ago, I could not have foreseen the escalation of violence in our Region. The situation has grown more relentless and unforgiving, while life-saving aid remains out of reach for too many whose lives depend on it.

In Gaza, the health crisis continues to reach horrifying levels. Over a million people in Rafah have been displaced again since early May. Except for an ICRC field hospital, there are no functioning hospitals left in Rafah. At least 10 000 people are stuck within Gaza in desperate need of medical evacuations, although several countries around the world are ready to offer help. At the recent conference in Jordan on the Urgent Humanitarian Response for Gaza, I emphasized that our consistent calls for the protection of healthcare and sustained access to aid remain unmet.

In Sudan, 12 million people have been displaced since the conflict escalated in early 2023. In parts of Khartoum, Darfur, and the Kordofan regions, there is an imminent risk of famine as people are still cut off from food and health assistance. Around 2 million people are at high risk of slipping into catastrophic hunger. Health care continues to come under attack. On June 21, the only functioning maternity hospital in El Fasher, North Darfur, was attacked and is only partially functional now.

These are the harrowing realities of our Region, where the politicization of health has left humanitarians facing severe access restrictions and left millions of men, women, and children cut off from aid and facing unbearable suffering.

I cannot stress enough the urgency of containing the ongoing humanitarian catastrophes with immediate ceasefires and lasting solutions for peace. This need becomes even more crucial as the regional impact of the war in Gaza sharply escalates.

Despite the unimaginably difficult circumstances, our teams continue to deliver at risk to their own lives and mental well-being. Our missions to transfer patients within Gaza and provide hospitals with lifesaving supplies have continued throughout this time. In the past 8 months, our teams on the ground have truly shown what it means to value each human life. I am in awe of their courage to uphold the values WHO stands for.

WHO has delivered supplies to hard-to-reach parts of Sudan, including South Kordofan, Khartoum and Al Gezira. This aid includes supplies for trauma care, cholera, malaria and malnutrition treatment, among other critical items.

In my short time since taking office, I have visited nine countries and plan on visiting all 22 member states at least once this year.

One of the biggest challenges that was evident to me over the course of my visits, was how so many factors that fall beyond the scope of the health sector have a direct impact on people's health. Political conflict, poverty and economic decline, mass displacement, and food and water insecurity — all of these cross-cutting factors negatively impact health outcomes. Yet the main responsibility falls on our shoulders as health actors to address the catastrophic consequences.

Across the Region, health officials, health partners, and the health workers themselves told me of the challenges they face in responding to increasing needs with very limited resources. In many countries, damages to infrastructure, the impact of sanctions on access to medicines and medical equipment, and the fleeing of health workers as a result of insecurity, have left health systems weakened, and many people deprived of the health services they urgently need.

While my visits revealed the gravity of needs and challenges on the ground, they also showed me the positive impact that can occur when we come together for the common good: During my visit to Afghanistan with the Regional Director for UNICEF Sanjay Wijesekera, house-to-house vaccination campaigns in the southern region of Afghanistan were authorized. This dialogue is part of the broader efforts of the G5 group, which includes Iran, Pakistan, Iraq, and Afghanistan, who are reconvening to strengthen their cooperation on health-related issues. By focusing on human capacity-building, the G5 group is investing in the future health workforce, which is key for long-term sustainability and effectiveness of health systems in the region.

It is crucial to me that support for the Region stems from the Region: for medical supplies to efficiently and equitably reach the people they are meant to serve; that we foster a strong health workforce that is valued, protected, and incentivized to remain in the Region; and that the issue of substance use – a neglected and taboo subject that is destructive to public health – be addressed head on to protect individuals and societies.

Before I close, I want us to remember that “millions in need,” now a common phrase for our Region, has a real human cost. Within those millions is a pregnant, hungry, woman fleeing to save her life, a child orphaned by war; a parent watching their child’s body weaken and change form without food, almost unrecognizable from the child they raised.

I can say with complete certainty that each of these individuals has wished for a better life.

While we cannot undo the past or discount the loss, as WHO, we will do everything in our capacity to make the present as bearable as possible with a life of dignity, health and safety for all, and to tirelessly work to rebuild better futures.

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