

REGIONAL OFFICE FOR Africa

REGIONAL COMMITTEE FOR AFRICA

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<u>Sixty-seventh session</u> Victoria Falls, Republic of Zimbabwe, 28 August–1 September 2017

Agenda item 6

STATEMENT OF THE CHAIRPERSON OF THE PROGRAMME SUBCOMMITTEE TO THE REGIONAL COMMITTEE

1. The Programme Subcommittee (PSC) met in Brazzaville, Republic of the Congo, from 13 to 15 June 2017, and was chaired by Dr Thomas Samba from Sierra Leone. The meeting reviewed 11 documents on public health matters of regional concern that will be presented to the Sixty-seventh session of the Regional Committee. This statement summarizes the main outcomes of the meeting.

Opening remarks

2. The Regional Director, Dr Matshidiso Moeti, welcomed all participants, particularly the members of the PSC who were present at the meeting, from Ethiopia, Guinea-Bissau, Kenya, Mauritania, Namibia, Niger, Sao Tome and Principe, Seychelles, South Africa, Sierra Leone, South Sudan, Swaziland, Uganda and the United Republic of Tanzania. She warmly welcomed members of the WHO Executive Board from Algeria, Benin and Zambia, as well as the representatives of the African Group of health experts in Geneva-based missions, whose presence would facilitate effective linkages between the debates and policies proposed at regional and global levels.

3. Dr Moeti took the opportunity to congratulate Member States of the WHO African Region for the election of the first African WHO Director-General, Dr Tedros Adhanom Ghebreyesus from Ethiopia. She thanked the coordinator of the African Group of health experts in Genevabased missions for efficiently organizing the African Group during the Seventieth session of the World Health Assembly. She then pointed out that the terms of reference of the PSC as adopted last year had been expanded to include, inter alia, oversight of the implementation of the programme of work of the Regional Office. She ended by briefly outlining the important documents to be reviewed by the PSC, which included strategies and regional frameworks based on global strategies, as well as other matters of public health importance.

4. Ms Patricia dos Santos of Angola, the coordinator of the African Group of health experts in Geneva-based missions thanked the Regional Director for inviting them. She congratulated the Regional Director for articulating a very rich agenda that includes documents addressing important public health matters in the African Region.

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5. The PSC elected its Chairperson, Dr Thomas Samba from Sierra Leone and its Vice-Chairperson, Dr Maria Tome Palmer from Sao Tome and Principe. It adopted the agenda and requested the inclusion in the agenda of future PSC meetings a briefing on the latest World Health Assembly, as well as items on audits, risk assessment and human resources.

Technical and health matters

6. The PSC discussed the document entitled *Implementation of the Transformation Agenda*. The Transformation Agenda is a vision to accelerate the implementation of WHO reform in the African Region by fostering results-focused values; evidence-driven technical focus; responsive strategic operations; and effective and efficient partnerships and communication. This is the second report to the Regional Committee, highlighting the progress made and outlining proposals for ensuring the successful completion of its implementation. The PSC commended the Secretariat on the good progress made and lauded the initiative to introduce key performance indicators (KPIs), which is being emulated by other regions. The PSC also commended the progress achieved so far, as well as resource mobilization from partners.

7. The PSC noted, however, that given the strategic nature of the report as an advocacy tool, it should provide more data to concretely demonstrate the progress made. The PSC members suggested that more details on the findings and recommendations of the independent evaluation would be of interest. They proposed the inclusion of annexes where applicable for ease of reference. The PSC also suggested that more information on the KPIs, composition of the Independent Advisory Group (IAG), role of the change management expert as well as the resource mobilization efforts be provided to Member States. Lastly, it was recommended that Member States be encouraged to be more actively involved in the implementation of the regional priorities. The members of the PSC recommended the revised document entitled *Implementation of the Transformation Agenda* for consideration by the Sixty-seventh session of the Regional Committee.

The PSC discussed the document entitled Regional strategy for the management of 8. environmental determinants of human health in the African Region 2017-2021. The document highlights the fact that 23% of premature deaths in the Region are attributable to unhealthy environments. It builds on progress made in the implementation of the Libreville Declaration and recent developments, including the Sustainable Development Goals (SDGs). The PSC members highlighted the need to make reference to recent strategies, resolutions and other commitments that further strengthen the importance of the environmental determinants of human health and the need for urgent interventions to be undertaken. The PSC requested that emphasis be laid on strengthening multisectoral collaboration, public-private partnerships, empowering communities, the economic cost of non-investment in environmental health, and advocacy at the level of Heads of State of the African Union for a successful response. The PSC members suggested that WHO's support to Member States in developing policies, laws and surveillance systems on adequate protection of the environment be underscored. The PSC recommended the amended document Regional strategy for the management of environmental determinants of human health in the African Region 2017–2021 for consideration by the Sixty-seventh session of the Regional Committee.

9. The PSC reviewed the document entitled *Global health sector strategy on sexually transmitted infections, 2016–2021: implementation framework for the African Region*. Sexually transmitted infections (STIs) are a highly endemic public health challenge worldwide. With 63 million cases (18% of the global incidence) in 2012, the African Region is particularly affected. To respond to this high burden of disease, WHO has developed a *Global health sector*

strategy on STIs, 2016–2021, with the goal of ending STI epidemics as a major public health concern. The regional framework is based on the Global strategy and defines a set of priority actions to be undertaken by Member States. The PSC members suggested the use of appropriate language allowing individual countries to define their key populations. They emphasized the need for explicit interventions for case management, the integration of STI and HIV interventions and better use of existing financial resources and political commitment for HIV to address STIs, as they share the same risk factors. The members of the PSC recommended the amended document *Global health sector strategy on sexually transmitted infections, 2016–2021: implementation framework for the African Region* for consideration by the Sixty-seventh session of the Regional Committee.

10. The PSC reviewed the document entitled *Framework for implementing the global strategy* to eliminate yellow fever epidemics (EYE), 2017-2026 in the African Region. Yellow fever (YF) remains a challenge for public health in Africa, despite the availability of a vaccine that confers life-long immunity. The framework aims at strengthening implementation of preventive and routine vaccination, robust screening and onsite vaccination for people not vaccinated at major points of entry, and improving surveillance. The PSC noted that the document was timely. It recommended that the document be made more compelling to Members States so that they could consider the elimination of yellow fever epidemics as a low-hanging fruit that could provide quick public health gains. In addition, cross-border yellow fever control actions and those targeting countries that are not "high-risk" but are "at-risk", should be included for all Member States, in order to facilitate the attainment of the goals of the framework. It requested the inclusion of operational costs, funding modalities and vaccine availability for the implementation of the framework. The PSC recommended the amended document *Framework for implementing* the global strategy to eliminate yellow fever epidemics (EYE), 2017–2026 in the African Region for consideration by the Sixty-seventh session of the Regional Committee.

11. The PSC discussed the document entitled **Reducing health inequities through addressing** social determinants of health. The document articulates some of the health inequities related to social determinants of health in the African Region and the actions required by Member States to reduce them. The PSC members highlighted the need to make reference to previous regional and global commitments on social determinants of health. The PSC suggested that the document should be reviewed to clearly define its purpose, align its content with the title, highlight best practices by Member States, and emphasize linkages between social determinants of health and universal health coverage. It also requested the inclusion of the importance of research and routine disaggregated data for evidence-based decision-making, and a section on international cooperation. The members of the PSC requested that the amended document **Reducing health inequities through addressing social determinants of health** be re-submitted for review by the PSC prior to the Sixty-seventh session of the Regional Committee.

12. The PSC reviewed the document entitled *Framework for health systems development towards universal health coverage in the context of the Sustainable Development Goals in the African Region*. Health system strengthening is key to making progress towards universal health coverage and the SDGs. The framework outlines a menu of actions available to Member States to enable them close identified gaps in various health systems domains based on their context. The PSC members suggested simplifying the language in the document and the annexes to make them accessible to a wider audience. They appreciated the budgetary constraints and suggested that the Secretariat explore alternative avenues to mobilize resources for implementation and monitoring of the framework. They also stressed the need for innovation and technology to facilitate health systems strengthening. The PSC recommended the amended document *Framework for health systems development towards universal health coverage in the context of the Sustainable Development Goals in the African Region* for consideration by the Sixty-seventh session of the Regional Committee.

13. The PSC reviewed the document entitled Framework for the implementation of the Global Strategy on Human Resources for Health (Health Workforce 2030) in the African **Region**. The framework makes the case for investment to strengthen human resources for health (HRH), which are critical for the attainment of universal health coverage and the SDGs. The PSC noted the need to make reference to other documents on the subject, including the Seventieth World Health Assembly resolution on HRH, Draft five-year action plan for health employment and inclusive economic growth, 2017–2021, and the International Labour Organization (ILO) agenda on decent work. The magnitude of the HRH shortage and the role of community health workers should be emphasized and better illustrated using data. The PSC recommended emphasizing mechanisms to strengthen HRH observatories and improve retention and protection of health workers. It also requested that consideration be given to the provision of regional guidance on accreditation of training institutions for health workers. The members of the PSC recommended the amended document Framework for the implementation of the Global Strategy on Human Resources for Health (Health Workforce 2030) in the African Region for consideration by the Sixty-seventh session of the Regional Committee.

14. The PSC discussed the document entitled **Regional framework for integrating essential noncommunicable disease services in primary health care**. The document aims at providing guidance to Member States on the integration of essential noncommunicable diseases (NCDs) interventions in primary health care in order to scale up promotive and preventive measures as well as early detection, diagnosis and treatment. The PSC appreciated the relevance and timeliness of the framework. It requested that the challenge of industry interference in NCD control be highlighted. It equally suggested including in the framework long-term care needs; economic gains from tackling NCDs; community engagement; and NCD determinants in all national surveys. The members of the PSC recommended the amended document **Regional framework for integrating essential noncommunicable disease services in primary health care** for consideration by the Sixty-seventh session of the Regional Committee

15. The PSC reviewed the document entitled *Status report on the implementation of the Decade of Action for Road Safety in the African Region*. Road traffic-specific death rates in the African Region are persistently higher than global averages. The United Nations General Assembly proclaimed 2011–2020 the Decade of Action for Road Safety, with targets that are further emphasized in SDG 3 and SDG 11. Therefore, the document identifies key issues and challenges, and proposes priority actions to be undertaken by Member States in order to meet the targets of these global commitments. The PSC suggested including strengthening of legislation and its enforcement by both law enforcers and road users and improving post-accident care and cooperation across countries. It underscored the need to mobilize civil society and professional associations; facilitate the production of high quality data; engage with other sectors; and explore innovative mechanisms and technologies to enhance road safety. The PSC recommended the amended document *Status report on the implementation of the Decade of Action for Road Safety in the African Region* for consideration by the Sixty-seventh session of the Regional Committee.

16. The PSC reviewed the document entitled *Status of Reviews, Authorizations and Oversight for Clinical Trials in the WHO African Region.* It requested the inclusion of data on the status of clinical trials (CTs) in the Region for a specific period, and the sharing of experiences by Member States on the benefits of participating. It also suggested the inclusion of capacity strengthening of countries for the conduct of CTs, including support from Member States with the relevant capacity. The PSC also proposed referencing recent WHA resolutions on CTs to demonstrate their alignment with global initiatives. Members of the PSC suggested that regular CTs be distinguished from those carried out during public health emergencies. The PSC recommended the amended document *Status of Reviews, Authorizations and Oversight for Clinical Trials in*

the WHO African Region for consideration by the Sixty-seventh session of the Regional Committee.

17. The PSC discussed the document entitled **Regional orientation on the implementation of** *the WHO Programme budget 2018-2019.* The Programme budget 2018-2019 was developed in the broader context of WHO reform, and is the last within the Twelfth General Programme of Work 2014–2019. The PSC suggested including issues related to the funding gap, the implementation of the polio transition plan and delayed Direct Financial Cooperation (DFC) reporting. It also underscored the need for the Regional Committee to discuss ways of encouraging Member States to honour their commitments in a timely manner in order to increase the assessed contributions. It further stressed the need to mobilize additional resources, including from the private sector, and flexibility in allocating funds according to regional priorities. The PSC members recommended the amended document entitled **Regional orientation on the implementation of the WHO Programme budget 2018-2019** for consideration by the Sixtyseventh session of the Regional Committee.

18. The PSC was briefed on two issues from the World Health Assembly that will be considered at the Sixty-seventh session of the Regional Committee. The first related to the implementation of the International Health Regulations (2005); Decision WHA70(11), by which the Director-General was requested to develop in full consultation with Member States including through regional committees, a draft five-year global implementation plan to improve public health preparedness and response, to be submitted to the Seventy-first Wealth Health Assembly in May 2018 through the Executive Board at its 142nd session in January 2018. The second briefing was on Global vector control response: Resolution WHA70.16, which requests the Director-General to develop, in consultation with Member States and through regional committees, as appropriate, regional action plans aligned with WHO technical guidance on vector control. The Secretariat will provide draft documents that will take into account existing regional agreements for Member States to provide inputs.