

Regional Health Alliance



REGIONAL  
**HEALTH**  
ALLIANCE

# Report of the Second Annual **Regional Health Alliance Meeting**

December 2021





## Table of Contents

<b>1. Background .....</b>	<b>4</b>
<b>2. Second annual meeting of the Regional Health Alliance.....</b>	<b>5</b>
2.1 Session 1: Towards SDG3+ progress in the EMR .....	6
2.2 Session 2. Collaborating for Health for All – selected case studies .....	9
2.3 Session 3. Finalizing the RHA Joint Action Plan 2022 – 2023 and the way forward .....	13
2.4 Session 4. Closing .....	14
<b>3. Annexes .....</b>	<b>16</b>
Annex 1. List of Participants.....	16
Annex 2. Joint Statement for the Press.....	20



# 1. Background



The WHO Regional Office of the Eastern Mediterranean initiated the Regional Health Alliance (RHA) in mid-2019 to strengthen coordination and collaboration on the implementation of the health-related SDGs, foster new ways of working and operationalize the Global Action Plan for Healthy Lives and Well-being 1 as envisioned by Vision 2023 of the WHO Eastern Mediterranean Region – Health for All by All 2. Building on the success of existing partnerships, 12 health, development, and humanitarian agencies – UNAIDS, UNDP, UNFPA, UNICEF, UN Women, the World Bank Group and WFP, who are all signatories of SDG3+ GAP, as well as IOM, UNESCO, UNHCR and ITU – endorsed a 2-year RHA joint action plan 2020 – 21 to strengthen their collective support to countries in March 2020. This partnership was virtually launched on Tuesday, 15 December 2020, following a country-focused webinar on the implementation of the SDG3+ GAP in the region.

As the endpoint of the two-year joint action plan draws near, a one-day high-level meeting took place to reflect on the successes and lessons learned on partnerships and collaboration to support countries in achieving the health-related SDGs (SDG3+). Due to COVID-19, the meeting was held in hybrid modality. A concept note outlining the objectives and expected outcomes of the meeting, agenda and provisional list of participants were discussed with the RHA Coordination Team on 8 November 2021.

## Objectives:

- Examine achievements and lessons learned by the RHA in the collaboration and coordination of the planning and

<sup>1</sup> <https://www.who.int/initiatives/sdg3-global-action-plan>

<sup>2</sup> <http://www.emro.who.int/about-who/vision2023/vision-2023.html>



implementation of SDG3+ in the Eastern Mediterranean Region in the context of the RHA joint action plan 2020 – 2021

- Agree on ways to increase engagement of health and development partners and countries at the regional and country levels
- Launch the RHA joint action plan 2022 – 2023.

### **Expected outcomes:**

- Position the Regional Health Alliance as a partnership platform for facilitating collaborative actions to support countries in the region in achieving SDG3+,
- Strengthened commitment to increased engagement in collaborative action by health and development partners in supporting countries in achieving SDG3+, and
- Approved RHA joint action plan 2022 – 2023.

The RHA Coordination Team also discussed criteria and procedures for expanding the membership of the RHA. It was agreed that membership and meeting participation is open to GAP signatories and other UN agencies such as OCHA, UN-Habitat and UNRWA. Preliminary discussions also took place regarding a communication plan for the meeting which was further developed by the communication focal points of all RHA members. The following paragraphs summarize the presentations and discussions at the one-day second RHA annual meeting.

## **2. Second annual meeting of the Regional Health Alliance**

The meeting took place at the Semiramis Intercontinental Hotel, Cairo. A total of 32 people attended in-person and an additional 62 attended virtually; participants included 5 regional heads of agencies from IOM, ITU, OCHA, UNFPA and WHO and 6 regional and country level senior managers from UNHCR, UNICEF, WFP and WHO. A total of 19 UN agencies attended plus the regional director of the UN Development Coordination Office (Arab States) 14 of the 15 RHA agencies as well as ESCWA, FAO, UNOPS, and UNRWA participated. The only non-UN who attended was WONCA. See Annex 1 for the list of participants.





The following documents 3 were prepared and shared with all meeting participants:

- Agenda
- List of participants
- List of Speakers
- Summary progress report, RHA Joint Action Plan 2020 – 2021
- Progress report, RHA Joint Action Plan 2020 – 2021
- RHA Joint Action Plan 2022 – 2023 (draft)
- Review of SDG3+ implementation mechanisms through UN country teams for strengthening country support through the RHA

## **2.1 Session 1: Towards SDG3+ progress in the EMR**

Dr Ahmed Al-Mandhari, Regional Director, WHO-EMR welcomed participants, especially the three UN agencies who newly joined the RHA in December 2021 the United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA): the United Nations Human Settlements Programme (UN-Habitat) and the United Nations Industrial Development Organization (UNIDO). He reminded participants that this strategic and operational partnership is all about collaborative action for country impact which he hoped would bring gains in health and well-being in all countries of the Region.

Following a brief overview of the objectives and structure of the meeting by Dr Christoph Hamelmann, Chef de Cabinet, WHO-EMRO, Dr Luay Shabaneh, Regional Director, UNFPA Arab States and chair of the Session 1, welcomed participants expressing appreciation in the broadening partnership. He recognized the importance of the work



accomplished in the RHA first action plan and looked forward to the continuing commitment by all.


Ms Laila Bakr, Regional Director, UN Development Coordination Office Arab States, in her remarks appreciated that work of the RHA within the context of UN Reform. She highlighted the importance of providing critical support to the resident coordinators and the country teams in achieving SDG3+. The UN regional collaborative platform including the issue-based coalitions are opportunities to use health as a catalyst for some of the regional thematic discussions around conflict resolution, economic recovery and addressing equitable social protections and hopes that the RHA would be able to integrate lessons learned to achieve the 2030 agenda.

Dr Maisaa Youssef, Officer-in-Charge, 2030 Agenda and SDG Coordination Cluster, ESCWA, provided a status overview of the Sustainable Development Agenda in the Arab States. She highlighted how COVID-19 has been a major setback. Nevertheless, she shared key opportunities emerging from the pandemic, health is now on the national agenda, there are positive signs on social protection in many countries, digitalization has expanded opening many opportunities for digital health and sharing of information; we can also see a devolution of the voluntary review process to the sub-national level, and improved integration in addressing SDGs more broadly.

Dr Arash Rashidian, Director Science, Evidence, and Information, WHO-EMRO, presented the progress on the health-related SDGs in the Eastern Mediterranean Region.<sup>4</sup> He noted that although there is some progress in over half the 50 health-related indicators reviewed, there remains significant work to reduce maternal, child and neonatal mortality, vaccination coverage, reducing HIV and malaria and mortality rates due to NCDs and air pollution. Key challenges to achieving the health-related targets related to weak governance, fragmented health care services, limited data availability, the impact of emergencies and gender equality and health inequities. Moving forward, therefore, requires strengthening government leadership, expanding access to health services, promoting intersectoral collaboration, investing in health information systems and ensuring a gender and equity sensitive response.

Dr Hendrik Schmitz Guinote, Senior Advisor, SDG3+ GAP Secretariat, Office of DG / WHO HQ, provided an update on the implementation of the Global Action Plan for Healthy Lives and Well-being for All (SDG3+ GAP). To get back on track, he recommended as strategic priority deepening the joint implementation of SDG3+ within countries. He recognized the key role of the RHA to operationalize the SDG3+ GAP at

<sup>4</sup> The presentations are available [here](#)



the regional level and to support the scaling up of SDG3+ joint actions on country level.

Dr Ruth Mabry, Consultant, WHO-EMRO, provided a summary of the review of progress of the Regional Health Alliance during 2020 – 2021. She noted that almost all countries of the region had been involved in activities of the RHA joint action plan 2020 – 2021 through country assessments and review exercises, the development and operationalization of public health goods and several capacity building activities. Key achievements included the sharing of information across the then 12 RHA member agencies, expanding partnerships, and adapting plans to pressing needs emerging from the pandemic. Based on some of the challenges related to weak coordination between accelerator working groups and challenges in maintaining the momentum established when the plan was developed in March 2020, she outlined steps to improving agency alignment for better impact.

Dr Jamal Nasher, Coordinator, SDGs, Gender, Equity & Human Rights, WHO-EMRO, and RHA Secretariat, shared findings on the review of UN efforts at country level in supporting countries in achieving the health-related SDGs focusing especially on the work of the UN country teams and on experiences of some countries with specially designed SDG3+ GAP initiatives. Although many successful examples of UN collaboration are available, concerns identified during the review were linked to challenges during implementation such as different planning cycles, overlapping mandates by the various agencies and association of some country offices like Afghanistan, Pakistan and others with different regional offices caused by non-alignment of UN regional offices. He outlined several steps to intensity UN Joint Work on SDG3+ and ensure better impact in countries of the region. These include interagency coordination and alignment in addition to using existing interagency mechanisms such as UNSDCF. Information sharing and knowledge management of actions and lessons learned will strengthen the support of SDG3+ coupled with advocacy to accelerate action.

Following these presentations, regional heads of agencies were invited to share their reflections.

Ms Kate Newton, Deputy Regional Director, WFP, commended RHA members for the achievements made so far despite the challenges presented by the COVID-19 pandemic. She highlighted how WFP looks forward to the continued partnership as part of the UN reform, as joint action combined with resources and expertise can address common challenges faced and that cut across agency mandates. She provided examples of the work of WFP in optimizing nutrition as a key driver of good health and data and evidence essential for informing national policies and strategies.





Mr Bertrand Bainvel, Deputy Regional Director, UNICEF MENA, expressed appreciation for the work done in addressing primary health care during COVID-19, including finding ways to incorporating mental health and promoting community engagement. He recognized the good progress being made by the RHA and urged a more efficient partnership in delivering results, especially within the context of different regional coordination mechanism.

Dr Sameh El-Saharty, Program Leader for Human Development, The World Bank Group (MENA), highlighted weaknesses revealed by COVID-19, but also led countries to using technology and innovation to address weak systems and to put health high on the agenda.

Dr Rana Hajjeh, Director Programme Management, WHO-EMRO, stressed the urgency of moving forward with the implementation of SG3+. She called for taking advantage of the momentum generated during the pandemic to improving access to essential health services and expanding health information systems to have a more concrete impact at the country level.

Dr Luay Shabaneh, Regional Director, UNFPA Arab States closed the session by acknowledging that the first RHA joint action plan (2020 – 2021) has generated commitment and partnership and called all agencies for greater collective accountability in the next phase to achieve higher impact in countries of the region. More advocacy is needed for countries to give SDGs greater attention. The RHA accelerators should become more results-focused in order to achieve targeted progress on SDG3+.

## 2.2 Session 2. Collaborating for health for all – selected case studies

Twelve case studies about achievements, challenges and lessons learned on UN collaboration were presented; the following is a summary of each.

- Dr Hassan Salah, Regional Adviser, Primary Health Care, WHO-EMRO, shared the experience of the implementation of the on-line training courses for physicians engaged in the COVID-19 response. He described the partners' collaboration in course development as well as the very positive outcomes from raising awareness in identifying and managing COVID-19 cases and from effecting institutional changes.
- Dr Samar El Feky, Technical Officer, Community-Based Initiatives, WHO-EMRO, briefed the group about training needs assessments for community health workers in seven countries of the region. The review identified numerous gaps including the need to better align training initiatives to avoid duplication of efforts, improve supervision and follow-up training and to ensure the sustainability of these initiatives. She proposed that a standardized curricula across agencies would be useful to develop a capable cadre of community health workers.
- Dr Maha El Adawy, Director, Healthier Populations WHO-EMRO, described how the Healthy Cities programme provides the opportunity to promote health and address numerous SDGs at the local level within the broader concept of social, economic and environmental determinants of health. She noted especially that this platform has shown improved city resilience and responses to epidemics and outbreaks and hoped that more UN agencies would join forces in promoting this platform as a means to accelerate action on SDG3+.
- Mr John McCauley, Regional Analyst for HIV, Health and Development, UNDP, presented the Social Economic and Environmental (SEEDs) Equity Identifier tool developed by a range of partners which has been successfully used to identify from the planning phase of development projects across the sectors what impact on health the project can trigger and how to optimize that impact during project implementation. He described how it better enables managers to understand the interlinkages between health and other development sectors and therefore accelerates implementation of SDG3+.
- Ms Zahra Ahmed, Consultant, Health Promotion and Social Determinants of Health, WHO – EMRO, described the WHO Health for Peace Initiative. Through this initiative several actions

have taken place in the region including the development of a regional framework, of an online course on health and peace and a webinar series on health diplomacy and health security and how it has served for example as a platform to support young people in Somalia.

- Engineer Mazen Malkawi, Regional Advisor, Environmental Health, WHO-EMRO, described interagency efforts to address climate change and air pollution in the region including developing guidelines, conducting regional initiatives as well as country-specific capacity building activities. Key challenges included overlapping mandates, differing jurisdictions, overlapping mandates, and the lack of political commitments and national expertise. Moving forward requires developing multisectoral policies across sections to address air pollution and climate.



Following the above 6 presentations, Mr Bertrand Bainvel, Deputy Regional Director, UNICEF MENA, who chaired the session, expressed his appreciation for the development of regional public goods through concrete tools such as the PHC training package and the potential of the SEEDs Equity tool in the region and stressed these items should be prioritized to help accelerate results on the ground. The case studies showed many great initiatives but called for ensuring they are placed within the broader national agenda. Finally, he mentioned that UN Climate Change Conference 2022 (UNFCCC – COP27) which is taking place 7 – 18 November 2022, Sharm el-Sheikh, Egypt, is a huge opportunity for the RHA to highlight climate change and mitigation in the region.



It followed the second set of the twelve select case studies.

- Dr Ali Ardalan, Regional Adviser, Health Systems in Emergencies, WHO-EMRO, described the UN collaboration work in rolling out COVID-19 vaccinations to refugees and migrants. He expressed concerns regarding information systems and barriers to the supply chain and difficulties in access. He called for UN agencies to strengthening coordination and the sharing of information, equitable access to vaccination services and called for expanded outreach and social mobilization.
- Dr Nevin Wilson, Senior Regional Project Coordinator, Middle East response, IOM, shared the experience of IOM's response to HIV/Malaria and TB in the region. This project funded by the Global Fund is being rolled out in three phases to Yemen, Syria, Lebanon and Jordan, then Iraq and finally to Palestine. Through this partnership they have been able to respond to emergencies and crisis during implementation, build capacity and transition to oral MDR TB treatment regimens. This coordinated approach will also improve data for key populations, improve access to services and contribute to TB elimination in Jordan and Palestine by 2030.
- Ms Sabah Barigou, Head of School Based School Feeding Programme, HIV and Nutrition, WFP, shared the UN collaborative experience of supporting people with HIV/AIDS in Tunisia. Despite the challenges posed by COVID-19, including postponing data collection and switching to remote support, the joint work allowed for a more harmonized approach to mitigate the social and economic impacts of COVID-19 on PLHIV.




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- Ms Layal Wehbe, Project Coordinator, UNDP, Regional Bureau for Arab States, described the first virtual 5-week camp engaging youth to visualize the SDGs by providing technical guidance on analyzing and interpreting available data to produce short advocacy videos. The collaboration between four UN agencies gave young people the space and skills to discuss development issues of their concern. It is hoped that engaging in such discussions pushes forward the 2030 agenda and demonstrates how collaboration can foster a data-driven culture and empower everyone to work with data.
  - Dr Ali Shirazi, Health Systems Coordinator, WHO Pakistan, described the implementation of SDG3+ GAP in Pakistan which involved establishing a national coordination mechanism through a SDG3+ GAP steering committee and technical working groups on PHC and health financing. A SDG3+ GAP mission kept PHC towards UHC high on the agenda and work is on-going in establishing a PHC oriented model of care and developing an essential package of health services for the country. It was found that the establishment of coordination mechanisms is helping in aligning cross-agency work at country level.
  - Dr Maryam Bigdeli, WHO Representative, Morocco, described the achievements of SDG3+ GAP implementation in Morocco by institutionalizing the SDG3+ GAP policy dialogues on health financing, PHC and the determinants of health, launching a leadership course on SDG3+, and a SDG3+ monitoring mechanism. Working in collaboration across agencies has shown to be more effective and policy dialogues are creating convergence among key actors. It is hoped this work will be expanded to policy dialogues at the sub-national level and the initiation of small-scale pilot experiments for specific accelerators.

A brief discussion followed these presentations focusing on monitoring vaccination among vulnerable groups like migrants and refugees and how best agencies could contribute to some of the areas addressed by the case studies. The chair, Dr Sameh El-Saharty, Lead Health Policy Specialist, MENA, The World Bank Group, closed the session.

### **2.3 Session 3. Finalizing the RHA Joint Action Plan 2022 – 2023 and the way forward**

Dr Chaiki Ito, Regional Migration Health Specialist, IOM, introduced the objectives for this working session. The session aimed at finalization of the RHA Joint Action Plan 2022 – 2023 and its endorsement in addition to the review of the recommendations of the morning sessions





and the way forward. This was followed by two presentations by Dr Mabry. In the first, starting with the recommendations of the review of achievements and lessons learned by the RHA joint action plan 2020 – 2021 discussed in the morning session, she presented the operating mechanisms of the RHA (the accelerator working groups 5 terms of reference in addition to their meetings and the RHA coordination team). Given the importance of the RHA aligning with the efforts of the UNCT, she proposed actions for each accelerator to consider for the new plan of action including reviewing UNSDCF to identify how best each accelerator could engage with the joint country teams in its area of focus. She also suggested key actions for the RHA secretariat. It followed the second presentation on the draft RHA Joint Action Plan 2022 – 2023 which was developed during the months before the annual RHA meeting in close consultation between the RHA secretariat, the accelerator teams and the RHA coordination team.

The following discussion moderated by Dr Jamal Nasher, RHA Secretariat, WHO-EMRO, underlined in particular consensus about the importance of improved engagement with the UNCTs in the context of the UNSDCF, of more regular, well-documented accelerator meetings sharing their progress with all members through the RHA secretariat, of seeking linkages with the Regional Collaborative Platform and UN issue-based coalitions (IBC), of finding productive solutions to the problem of different geographical regional coverage among the RHA member agencies and of the clearer role of the RHA Secretariat in disseminating information and lessons learned as well as facilitating coordinated country support.

Under the Chair of Chiaki Ito, Regional Migration Health Specialist, IOM, the RHA Joint Action Plan 2022 – 2023 was accepted in consensus. The Chair called on all RHA members to be accountable for the commitments made.

## 2.4 Session 4. Closing

ITU, UNICEF and WHO made formal closing remarks which are summarized below.

Mr Bertrand Bainvel, Deputy Regional Director, UNICEF MENA, congratulated Dr Ahmed Al Mandhari, Regional Director, WHO-EMR and all colleagues. He stressed the importance for the RHA to prioritize regional public goods in the 2022-23 action plan to


<sup>5</sup> Accelerator Working Groups are the following: 1. Primary health care, 2. Sustainable financing for health, 3. Community and civil society engagement, 4. Determinants of health, 5. Innovative programming in fragile and vulnerable settings, 6. Research and Development, Innovation and Access and 7. Data and digital health, in addition to an additional Advisory Working Group on Gender.



provide tangible support to country teams and confirmed UNICEF's commitment particularly in the areas of PHC, community engagement, gender agenda, and digital health. He welcomed further discussions on promoting access to health care services including outreach strategies to serve difficult to reach populations. He looked forward to the RHA keeping actions broad and avoiding vertical initiatives that would be difficult to scale. He welcomed the opportunity to better position our region and put health on the climate agenda through the UN Climate Change Conference 2022 - COP 27 later this year.

Speaking on behalf of the Regional Director, ITU Engineer Karim Abdelghani, Programme Coordinator, committed to putting technical knowledge on ICT and digital health as this can be an enabler for SDG3+. He informed that ITU is already working with WHO on digital health strategies in Bahrain and Oman with plans to expand to other countries. COVID-19 demonstrated how a digital transformation of health sector is a necessity for agile resilient accessible health systems. He noted that there is a great potential in the region and look forward to collaborating further in 2022-2023.

Dr Rana Hajjeh, Director Programme Management, WHO-EMRO, thanked colleagues for the good discussions. She welcomed the plan for the accelerators and encouraged colleagues to prioritize actions for greater impact. The RHA is a unique partnership and suggested that the partnership may wish to adopt some key initiatives. Focusing on countries that are really in need can make more of an impact.



Dr Ahmed Al Mandhari, Regional Director, WHO-EMR, thanked colleagues for participating in the meeting, for their contributions in its preparations as well as in the day's discussion. He appreciated the useful recommendations to push forward noting that the RHA is a good platform to make sure that we are working together to serve our populations targeting one goal and one aim. He appreciated the scope and breadth of the inspiring discussions. Together, agencies can deliver for impact and despite all challenges COVID-19 has also brought agencies closer together. He called on all participants to innovate, use the energy and enthusiasm of young people and the wisdom of older and experience of older ones to ensure that the RHA will further develop and increase its impact during the coming two years.

Following the closing, a joint press release was issued in both Arabic and English by all agencies of the RHA announcing the launch of the RHA Joint Action Plan 2022 – 2023 (Annex 2). The event achieved broad media coverage through various social media outlets as a joint effort of the communication units of all RHA members.

### 3. Annexes

#### Annex 1. List of Participants <sup>6</sup>

##### RHA Member Agencies

##### Regional directors and Deputy directors

Dr Ahmed Al Mandhari; Regional Director Eastern Mediterranean Regional Office, WHO (P)

Mr Bertrand Bainvel; Deputy Regional Director MENA, UNICEF (V)

Mr Adel Darwish; Regional Director International Telecommunication Union, ITU (V)

Mr Ramzi Dhafer; Head of ROMENA Office OIC Head of Emergency Response Preparedness (ERP) Unit, UNOCHA (V)

Ms Carmela Godeau; Regional Director for Middle East and North Africa Bureau, IOM (V)

Dr Rana Hajjeh; Director of Programme Management, WHO-EMRO (V)

Mr Luay Shabaneh; Regional Director for Arab States, UNFPA (P)

Ms Kate Newton; Deputy Regional Director, WFP (V)

<sup>6</sup> Participants' attendance is noted as either in-person (P) or virtually (V) next to their name.



## Technical experts

Engineer Karim Abdelghani, Programme Coordinator, ITU (V)  
Dr Elfatih Abdelraheem; HIV Health and Development Policy Specialist and Team Leader for Arab States, UNDP (V)  
Mr Khaled Abdelshafi, Director of the Amman Regional Hub of UNDP (V)  
Ms Huda Abdulghaffar, WHO (V)  
Dr Mohamed Afifi; Reproductive Health & Humanitarian Programme Specialist, Arab States Regional Office, UNFPA (P)  
Dr Zahra Ahmed, Consultant, WHO (V)  
Ms Hala Al Khair, UNFPA (V)  
Dr Ali Ardalan; Regional Adviser and Head of Health Systems in Emergencies Lab, WHO-EMRO (P)  
Ms Yasmine Baligh, UNFPA (V)  
Mr Omar Ballan, UNFPA (V)  
Ms. Sabah Barigou; Head of School Based/School Feeding programme HIV and Nutrition, WFP (P)  
Ms Helen Bekele, External Partnership Office, WFP (V)  
Dr Manal Benkiane, Regional Programme Office, UN Women (V)  
Ms Sara Berlese, Programme Officer, UNIDO (V)  
Dr Maryam Bigdeli, WHO Representative, Morocco, WHO (V)  
Dr Rayana Bou Haka; Manager, Country Focus Support, WHO (P)  
Ms Emilia Casella; WFP (V)  
Ms Hania Sabbidin Dimassi; UNFPA (V)  
Dr Henry Doctor; Coordinator, Information Systems for Health, WHO (V)  
Dr Srihari Dutta; Health Specialist- EPI and Primary Health Care, UNICEF (V)  
Mr Karim El Afifi; National Expert, UNIDO (V)  
Ms Jana El Baba, Sustainable Development Officer · United Nations Economic and Social Commission for Western Asia (ESCWA) (V)  
Dr Samar El Feky; Technical Officer Community-based Initiatives, WHO (P)  
Dr Sameh El-Saharty; Program Leader for Human Development, The World Bank (P)  
Ms Emilia Casella, WFP (V)  
Ms Kreeneshni Govender, Regional Programme Adviser, UNAIDS Middle East and North Africa (V)  
Ms Hajra Hafeezurrehman, Programme Officer for Nutrition and HIV, WFP (V)  
Dr Walid Kamal Ibrahim, UNAIDS Country Manager, Egypt, UNAIDS (V)  
Dr Chiaki Ito; Regional Migration Health Specialist, IOM (P)

Ms Rosemary Kumwenda; Regional Team Lead, HIV Health and Development, Istanbul Regional Hub, UNDP (V)

Mr John Macauley; Regional Programme Specialist, HIV Health and Development, Istanbul Regional Hub, UNDP (V)

Engineer Mazen Malkawi, Regional advisor, Environmental health, WHO-EMRO (V)

Dr Ahmed Mandil; Coordinator Health & Innovation, WHO (V)

Mr Pablo Mateu, UNHCR Egypt Representative, UNHCR (P)

Ms Maha Metwally, National Professional Officer, WHO-EMRO (V)

Dr Qaiser Pasha; Consultant, Country Cooperation Unit, WHO (P)

Dr Hassan Salah; Regional advisor Primary Health Care, WHO-EMRO (P)

Ms Heba Shama; Programme Specialist Regional Bureau for Sciences in the Arab States, UNESCO (V)

Ms Abeer Shraiteh, UNFPA (V)

Dr Ali Shrazi, Coordinator HSD, WHO (Pakistan) (V)

Ms Solara Sinno, WHO-Lebanon (V)

Ms Zinia Sultana; Public health officer, UNHCR (P)

Ms Layal Wehbe, Project coordinator, UNDP-Regional Bureau for Arab States, UNDP (V)

Dr Nevin Wilson, Senior regional project coordinator, Middle East response, IOM (V)

Dr Abdel Aziz Zaki; Social and Human Sciences Programme Specialist Regional Bureau for Sciences in the Arab States, UNESCO (V)

### **Communication focal points**

Mr Samir Aldarabi, Regional Communication Advisor, UNFPA (V)

Ms Anny Chaqra, Communication consultant, ITU (V)

Mr Diego De La Rosa; Regional Communications Specialist Regional Office for the Arab States (ROAS), UNWOMEN (V)

Ms Lamia Mahmoud, Communication Assistant, UNHCR (V)

Ms Nourhan Nagdy; Regional Communications Associate ROAS, UNWOMEN (V)

Mr Nagy Yonnes; UNESCO (V)

### **SDG3+ GAP and RHA Secretariat**

Dr Thamer Alhilfi; RHA Secretariat Technical Officer SDG and GER, Team Member CdC (P)

Ms Hilaire Armstrong, Consultant, WHO-EURO (V)

Dr Christoph Hamelmann; Chef de Cabinet, RHA Secretariat, WHO (P)

Dr Ruth Mabry; Consultant (P)

Ms Rita Meimari; Administrative Assistant, CdC (P)





Dr Jamal Nasher; RHA Secretariat, Coordinator SDGs & Gender Equity and Human Rights (P)

Dr Yara Osman; RHA Secretariat, SDG Specialist, CdC (P)

Ms Akunda Pallangyo, Contractor, WHO (HQ) (V)

Ms Isadora Quick, Technical Officer, Office of the Chef de Cabinet, DGO, WHO (V)

Dr Hendrik Schmitz Guinote, Senior Advisor, SDG3+ GAP Secretariat, Office of DG / WHO HQ (V)

### **WHO/EMRO directors and senior managers**

Dr Maha El Adawy; Director of Healthier Population, WHO-EMRO (P)

Dr Asmus Hammerich; Director of Noncommunicable Diseases and Mental Health, WHO-EMRO (V)

Dr Amir Hassan; Director of Communication, Resource Mobilization and Partnership, WHO-EMRO (P)

Dr Yvan Hutin; Director of Communicable Diseases, WHO-EMRO (P)

Dr Hamid Jafari; Director Polio Eradication, WHO-EMRO (V)

Dr Awad Mataria; Director of Universal Health System, WHO-EMRO (V)

Dr Arash Rashidian; Director Science Information and Dissemination, WHO-EMRO (P)

### **WHO/ EMRO facilitators and support staff**

Dr Nesma Abed; Social Media Officer, Communication Team (P)

Ms Samah Abdelaziz Senior Administrative Assistant, WHO (V)

Ms Rana Alnaggar; Programme Assistant (P)

Mr Omar Elmallah; Transformation Programme Officer (P)

Ms Hala Elshazli; National Professional Officer Administration (P)

Mr Gamal Ismail; Messenger (P)

Mr Ahmed Shokry; IT (P)

Mr Osama Helmy; Photographer (P)

Ms Tarja Turtia; Team Lead Transformation (P)

### **Non-RHA Agencies**

Ms Hala AlSharifi, Head of Gulf Countries Liaison Office/ Partnership and Liaison Group, UNOPS (V)


Dr Laila Baker, Regional Director Arab States, UN Development Coordination Office (V)

Taghreed Farahat, WONCA (V)

Nagwa Hegazy, Honorary General Secretary, WONCA EMR (V)

Dr Akihiro Seita, Director of Health Plan, UNRWA (V)

Dr Yousef Shahin, UNRWA (V)



Mr Zelalem Tadesse, Animal Production Health Officer, FAO (P)  
Ms Maissa Youssef, Officer-in-Charge, 2030 Agenda and SDG  
Coordination Cluster, ESCWA (V)

## Annex 2. Joint Statement for the Press

**International development, health and humanitarian agencies  
announce bold plans for Regional Health Alliance**


**Working together towards achieving Health For All By All**

16 December 2021, Cairo-- Motivated by their shared goal to achieve stronger collaboration and better health for all, international development, health and humanitarian agencies in the Eastern Mediterranean and the Middle East and North Africa Region convened today for the second annual meeting of the Regional Health Alliance (RHA), marking its first anniversary.

Seeking to build on early successes, partner members of the RHA launched an ambitious joint action plan for 2022–2023 to step up work on improving access to quality health services for all, enhancing community engagement, improving financial protection, protecting healthy environments, promoting new medical products and augmenting health information systems.

Initiated and led by the WHO Regional Office for the Eastern Mediterranean, as part of the implementation of WHO's vision for the Region to achieve "Health for All by All", the RHA brings together 15 agencies working on the health-related Sustainable Development Goals (SDGs) to improve health throughout the Region. Half of all people in the Region live in countries facing long-term conflicts, environmental threats and natural disasters alongside the COVID-19 pandemic, and the RHA enables different agencies to confront these shared challenges, pool knowledge and resources, and coordinate their efforts for maximum positive impact on the most vulnerable groups, including women and girls. The meeting marked the RHA's first anniversary. Participants reviewed progress so far and discussed examples of successful collaboration, including capacity-building activities as well as community empowerment and vaccine roll-out in the context of COVID 19 response. The RHA focuses on accelerating progress towards a wide range of health-related SDGs, and forms part of the [Global Action Plan for Healthy Lives and Well-being for All](#).

The new plan will channel action through seven closely linked accelerators: primary health care; sustainable financing for health;



community and civil society engagement; determinants of health; innovative programming in fragile and vulnerable settings; research and development, innovation and access; and data and digital health. Additionally, a Gender Advisory Group will ensure mainstreaming gender equality across all areas of work. All seven streams of action will also be addressing the many implications of the COVID-19 pandemic and the systemic gaps that the pandemic has exposed and exacerbated in countries across the region.

The plan adds several new objectives to the RHA's agenda. Countries of the Region will be assisted to tackle the underlying social determinants of health, agencies will collaborate to scale up key health technologies, and there will be a strong focus on addressing health and development and peace as a coherent nexus in emergency countries. The work will reinforce the efforts of UN country teams, guided by the United Nations Sustainable Development Cooperation Framework (UNSDCF).

Adopted by world leaders in 2015, the Sustainable Development Agenda includes 17 SDGs and 169 related targets covering areas such as gender equality, safe drinking water and sanitation, education, environment, human rights and housing, all of which have a direct or indirect impact on health. Achieving the health-related SDGs therefore requires collaboration among many agencies and stakeholders.

The RHA is already attracting new members. In December 2021, its 12 founding agencies were joined by three more – the United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA), the United Nations Human Settlements Programme (UN-Habitat) and the United Nations Industrial Development Organization (UNIDO) – and discussions with other agencies are underway to further broaden and strengthen the Alliance.

### **Note to editors**

The Regional Health Alliance is hosted by WHO and comprises regional offices of the International Organization for Migration (IOM), the International Telecommunication Union (ITU), The World Bank, the Joint United Nations Programme on HIV/AIDS (UNAIDS), United Nations Development Programme (UNDP), United Nations Educational, Scientific and Cultural Organization (UNESCO), United Nations Fund for Population Activities (UNFPA), United Nations Human Settlements Programme (UN-Habitat), United Nations High Commissioner for Refugees (UNHCR), United Nations International Children's Emergency Fund (UNICEF), United Nations Industrial Development Organization (UNIDO), United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA), United Nations Entity for Gender Equality and the Empowerment of Women (UN Women) and the World Food Programme (WFP).

## الوكالات الإنمائية والصحية والإنسانية الدولية تعلن عن خطط جريئة للتحالف الصحي الإقليمي

### معًا لتحقيق "الصحة للجميع وبالجميع"

16 كانون الأول/ديسمبر 2021، القاهرة-- انطلاقًا من هدفها المشترك المتمثل في توطيد أواسر التعاون وتحسين صحة الجميع، عقدت اليوم الوكالات الدولية المعنية بالتنمية والصحة والعمل الإنساني، في إقليم شرق المتوسط ومنطقة الشرق الأوسط وشمال أفريقيا، الاجتماع السنوي الثاني للتحالف الصحي الإقليمي بمناسبة مرور عام على إنشائه.

وفي إطار سعيها إلى البناء على النجاحات الأولى التي تحققت، أطلقت الوكالات الشريكة في التحالف الصحي الإقليمي خطة عمل مشتركة طموحة للفترة 2022-2023، تهدف إلى تكثيف العمل بشأن تحسين وصول الجميع إلى الخدمات الصحية الجيدة، وتعزيز المشاركة المجتمعية، وتحسين الحماية المالية، وحماية البيئات الصحية، والتشجيع على استحداث منتجات طبية جديدة، وتقوية نظم المعلومات الصحية.

ويقود المكتب الإقليمي لمنظمة الصحة العالمية لشرق المتوسط التحالف الصحي الإقليمي الذي أنشئ بمبادرة من المكتب الإقليمي في إطار تنفيذه لرؤية منظمة الصحة العالمية للإقليم لتحقيق «الصحة للجميع وبالجميع»، ويضم التحالف 15 وكالة تُعنى بأهداف التنمية المستدامة المتعلقة بالصحة، وتسعى إلى تحسين الصحة في جميع أنحاء الإقليم. ويعيش نصف جميع سكان الإقليم في بلدان تواجه صراعات طويلة الأمد وأخطارًا بيئية وكوارث طبيعية، ناهيك عن جائحة كوفيد-19، ويساعد التحالف الوكالات المختلفة على مواجهة هذه التحديات المشتركة، وتجميع المعارف والموارد، وتنسيق جهودها لتحقيق أقصى أثر إيجابي على الفئات الأكثر ضعفًا، مثل النساء والفتيات. وصادف الاجتماع الذكرى السنوية الأولى لتأسيس التحالف الصحي الإقليمي. وقد استعرض المشاركون التقدم المحرز حتى الآن، وناقشوا نماذج للتعاون المثمر، منها أنشطة بناء القدرات وتمكين المجتمعات وطرح اللقاحات في سياق الاستجابة لجائحة كوفيد-19. وينصب تركيز التحالف الصحي الإقليمي على تسريع وتيرة التقدم لتحقيق مجموعة كبيرة من أهداف التنمية المستدامة المتعلقة بالصحة، وبشكل جزءًا من خطة العمل العالمية بشأن [تمتع الجميع بأنماط عيش صحية وبالرفاهية](#). وخطة التحالف الجديدة ستوجّه العمل عبر سبعة عوامل مُسرّعة ترتبط فيما بينها ارتباطًا وثيقًا، وهذه العوامل هي: الرعاية الصحية الأولية؛ والتمويل المستدام للصحة؛ ومشاركة المجتمع المحلي والمجتمع المدني؛ ومُحدّدات الصحة؛ ووضع برامج مبتكرة في الأوضاع الهشة والمعرّضة للخطر؛ والبحث والتطوير، والابتكار والإتاحة؛ والبيانات والصحة الرقمية. علاوة على ذلك، سيضمن الفريق الاستشاري المعني بالقضايا الجنسانية تعميم المساواة بين الجنسين في جميع مجالات العمل. وجدير بالذكر أن جميع مسارات العمل السبعة ستعالج أيضًا الآثار الكثيرة التي خلفتها جائحة كوفيد-19، والثغرات العامة التي كشفت عنها الجائحة وزادت حدتها في بلدان الإقليم.

وتضيف الخطة عددًا من الأهداف الجديدة إلى جدول أعمال التحالف. وستحصل بلدان الإقليم على المساعدة في معالجة المحدّدات الاجتماعية الأساسية للصحة، وستتعاون الوكالات فيما بينها للنهوض بالتكنولوجيات الصحية الرئيسية، وسيؤلّى اهتمام قوي بمعالجة الصحة والتنمية والسلام باعتبارها حلقة وصل مترابطة في البلدان التي تشهد حالات طوارئ. وسيُعزّز العمل الجهود التي تبذلها الأفرقة القطرية التابعة للأمم المتحدة، وسيسترشد بإطار الأمم المتحدة للتعاون في مجال التنمية المستدامة.

وتتضمن خطة التنمية المستدامة، التي أقرها قادة العالم في عام 2015، 17 هدفًا للتنمية المستدامة و169 غاية مرتبطة بها، وتتناول مجالات مثل المساواة بين الجنسين، ومياه الشرب المأمونة والصرف الصحي، والتعليم والبيئة، وحقوق الإنسان والسكن، وكلها مجالات لها تأثير مباشر أو غير مباشر على الصحة. وعليه، فإن تحقيق أهداف التنمية المستدامة المتعلقة بالصحة يتطلب التعاون بين العديد من الوكالات وأصحاب المصلحة.

وبالفعل، يجتذب التحالف أعضاء جددًا. وفي كانون الأول/ديسمبر 2021، انضمت 3 وكالات جديدة إلى الوكالات الاثنتي عشرة التي أسست التحالف - مكتب الأمم المتحدة لتنسيق الشؤون الإنسانية، وبرنامج الأمم المتحدة للمستوطنات البشرية (مؤئل الأمم المتحدة)، ومنظمة الأمم المتحدة للتنمية الصناعية (يونيبدو) - وتدور مناقشات مع وكالات أخرى لتعزيز التحالف وتوسيع نطاقه.

### ملاحظة إلى المحررين:

تستضيف منظمة الصحة العالمية التحالف الصحي الإقليمي الذي يضم مكاتب إقليمية للمنظمة الدولية للهجرة، والاتحاد الدولي للاتصالات، ومجموعة البنك الدولي، وبرنامج الأمم المتحدة المشترك المعني بفيروس نقص المناعة البشرية/الإيدز، وبرنامج الأمم المتحدة الإنمائي، ومنظمة الأمم المتحدة للتربية والعلم والثقافة «اليونسكو»، وصندوق الأمم المتحدة للسكان، وبرنامج الأمم المتحدة للمستوطنات البشرية (مؤئل الأمم المتحدة)، ومفوضية الأمم المتحدة السامية لشؤون اللاجئين، ومنظمة الأمم المتحدة للطفولة (اليونيسف)، ومنظمة الأمم المتحدة للتنمية الصناعية (يونيبدو)، ومكتب الأمم المتحدة لتنسيق الشؤون الإنسانية، وهيئة الأمم المتحدة للمساواة بين الجنسين وتمكين المرأة (هيئة الأمم المتحدة للمرأة)، وبرنامج الأغذية العالمي.





# Stronger collaboration, better health

