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13 October 2016

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Other information

Venue	Conference Hall, Regional Office for the Western Pacific
Distribution of documents	Representatives are kindly requested to collect daily their documents, messages and invitations at their designated mailboxes.
Rapporteurs meeting	The meeting will be held daily following the afternoon session at 17:15 in Room 403 (Emergency Operations Centre).
Internet access	The Regional Office has an Internet lounge along the corridor next to Room 212, adjacent to the Conference Hall on the second level.
WHO publications	Publications related to the agenda of the Regional Committee are on display in the conference lounge and bookshop. A digital publications catalogue is contained on a USB digital flash drive provided to all representatives.
Security	<p>Please ensure your ID card is displayed at all times while inside the WHO premises.</p> <p>Kindly contact the WHO Conference and Administrative Services Officer, Ms Nguyen Thi Minh Ly, should you have any concerns at +63 2 528-9608 (landline) or +63 920-963-5457 (mobile).</p> <p>There is a no smoking policy on the WHO premises. Likewise, smoking is prohibited in public areas in Metro Manila.</p>

I. PROGRAMME OF WORK

Agenda items	09:00–12:00	
15	Progress reports on technical programmes: Part 2 (continuation) 15.4 Regional action plan for healthy newborn babies 15.5 Antimicrobial resistance 15.6 Essential medicines	WPR/RC67/10
Agenda items	14:00–17:30	
16	Coordination of the work of the World Health Assembly, the Executive Board and the Regional Committee 16.1 WHO reforms 16.2 Agenda for the sixty-eighth session of the Regional Committee 16.3 Any other items recommended by the World Health Assembly and the Executive Board <i>(Time permitting)</i>	WPR/RC67/11
17	Special Programme of Research, Development and Research Training in Human Reproduction: Membership of the Policy and Coordination Committee	WPR/RC67/12
18	Time and place of the sixty-eighth and sixty-ninth sessions of the Regional Committee	
19	Closure of the session	

Consideration of draft resolutions

Dengue	WPR/RC67/Conference Paper No. 2 Rev 1
Sustainable Development Goals	WPR/RC67/Conference Paper No. 5
Asia Pacific Strategy for Emerging Diseases and Public Health Emergencies	WPR/RC67/Conference Paper No. 6

Please Note: Draft resolutions (also known as Conference Papers) were distributed this morning. Any amendments should be submitted in writing to the Enquiry Desk using specific language. The Conference Papers will be considered for adoption after the morning coffee break.

II. REPORT OF MEETINGS (WEDNESDAY, 12 OCTOBER 2016)

Fifth meeting

Chairperson: Honourable Datuk Seri Dr S. Subramaniam, Minister of Health, Malaysia

Item 13. Sustainable Development Goals

The Director, Programme Management, presented WPR/RC67/8 on a regional action agenda on achieving the Sustainable Development Goals (SDGs). He said that 2016 is the beginning of a new era in global health and development, and the SDGs will guide efforts until 2030, including WHO's collaboration with Member States.

The Director, Programme Management, said universal health coverage (UHC) is at the core of the SDGs and provides a broad foundation for action. Building on the discussions at last year's high-level side event at the sixty-sixth session of the Regional Committee in Guam, a draft action agenda on SDGs was developed. It is aligned with existing global and regional strategies, World Health Assembly and Regional Committee resolutions, and broader United Nations mandates.

The Director, Programme Management, invited the Regional Committee to consider for endorsement the draft *Regional Action Agenda on Achieving the Sustainable Development Goals in the Western Pacific*.

Interventions were made by representatives of the following Member States (in order): the Republic of Korea, Malaysia, Australia, Brunei Darussalam, France, the Philippines, Cambodia, Japan, New Zealand, Cook Islands (on behalf of the Pacific health ministers), Viet Nam, the United States of America, China, Hong Kong SAR (China), Samoa, Mongolia, Fiji, the Lao People's Democratic Republic and Tonga.

The Director, Health Systems, thanked Member States for their positive feedback, noting that nearly all Member States acknowledged the shared vision for development and health.

She responded to Member State concerns about monitoring, noting the need to strengthen health information systems and to link health information with that of other sectors. She said WHO is putting together the first set of statistics and technical guidance, to be followed by a technical expert meeting next year to determine standards and methods for data collection. To reduce the data-collection burden, she said WHO would pull together data for Member State feedback. She emphasized the importance of analysis to accelerate action on the SDGs and on the progressive implementation of the SDGs through national planning and monitoring systems.

She also responded to Member States regarding universal health coverage (UHC) and affirmed its central role in the SDGs, adding that primary health care is where much of the engagement at the local level with other sectors originates. She said that intersectoral engagement within and beyond governments, including the important role of the parliamentarians, is critical to national development plans.

She addressed Member State concerns regarding the health workforce and its ability to provide quality health services for all people. She stressed that health workers in the future have to be culturally competent, incorporating social competencies into their work.

She noted that the process of mutual learning with Member States had already begun, adding that any language issues or updating of information in the regional framework would be addressed with Member States individually.

The Chairperson requested the Rapporteurs to prepare a draft resolution on SDGs, for consideration by the Regional Committee.

Consideration of draft resolutions

The Chairperson invited the Regional Committee to consider the draft resolution on the draft Proposed Programme Budget 2018–2019 (WPR/RC67/Conf. Paper No. 1). The Senior Editor read aloud the draft resolution. As there were no amendments, the draft resolution was adopted as read (WPR/RC67.R1).

The Chairperson invited the Regional Committee to consider the draft resolution on Dengue (WPR/RC67/Conf. Paper No. 2). The Rapporteur for the English language read aloud the draft resolution. As there were suggested amendments, the Chairperson requested the Rapporteurs to meet and revise the draft resolution on Dengue, and present it again to the Committee.

The Chairperson invited the Regional Committee to consider the draft resolution on Environmental health (WPR/RC67/Conf. Paper No. 3). The Rapporteur for the English language read aloud the draft resolution. Suggested amendments were incorporated and the draft resolution was adopted as read (WPR/RC67.R2).

The Chairperson invited the Regional Committee to consider the draft resolution on Malaria (WPR/RC67/Conf. Paper No. 4). The Rapporteur for the English language read aloud the draft resolution. Suggested amendments were incorporated and the draft resolution was adopted as read (WPR/RC67.R3).

Item 14. Asia Pacific Strategy for Emerging Diseases and Public Health Emergencies

The Director, Programme Management, introduced document WPR/RC67/9 on the Asia Pacific Strategy for Emerging Diseases and Public Health Emergencies, also known as APSED III. He said that the draft strategy was based on APSED (2005) and APSED (2010). He said the new strategy is the result of intensive consultations with Member States, partners and technical experts and incorporates the findings of an evaluation of the previous strategies and lessons learnt from recent regional and global outbreaks.

The Director, Programme Management, said Member States have found that APSED has been key to their efforts to develop core capacities required under the International Health Regulations, known as IHR (2005). He said APSED III also takes into consideration the results of parallel global discussions on (IHR 2005) triggered by the Ebola virus disease outbreak, as well as the new IHR

Monitoring and Evaluation Framework, which includes Joint External Evaluations.

Interventions were made by representatives of the following Member States (in order): the Republic of Korea, Japan, France, the United States of America and China.

Sixth meeting

Chairperson: Honourable Datuk Seri Dr S. Subramaniam, Minister of Health, Malaysia

Item 14. Asia Pacific Strategy for Emerging Diseases and Public Health Emergencies (continuation)

In the continuation of the morning session on APSED III, the Chairperson called on Member States for further interventions. Interventions were made by the representatives of the following Member States (in order): Viet Nam, Singapore, Hong Kong SAR (China), Australia, Mongolia, New Zealand, Brunei Darussalam, the Philippines, Samoa, Malaysia, Macao SAR (China), the Federated States of Micronesia (on behalf of the Pacific health ministers) and Papua New Guinea.

The Regional Emergency Director thanked Member States for their interventions and their active participation in bottom-up consultations over the past one and a half years that led to the development of APSED III. She agreed with representatives who said the use of teleconferences and videoconferences added a valuable dimension to those consultations.

The Regional Emergency Director said the positive interventions were proof of the collective commitment of Member States to take actions to further implement IHR (2005). She said such a commitment is required for national, regional and global health security. In response to the interventions, she highlighted three key points mentioned by many Member States. First, she emphasized the value and importance of investing resources and continuing to work hard on preparedness – even during so-called quiet times between emergencies.

Secondly, she stressed the importance of monitoring and evaluation of IHR (2005) core capacities, not only for accountability but also as a learning tool for programme improvement. Finally, she expressed appreciation for the recognition by Member States of the importance of regional collaboration, noting the value of annual meetings of the APSED Technical Advisory Group, regional information-sharing and other mechanisms.

The Director of Emergency Management, Health Emergencies Programme, WHO headquarters, commended Member States for their commitment to APSED, which he said is driving the implementation of IHR (2005). He said the Region is far ahead of most other regions in this regard. He concluded by noting that discussions are nearly complete within the United Nations System to find a mechanism similar to that used for humanitarian events that can be activated as a system-wide response for very severe public health events, such as Ebola virus disease. He said those discussions have recognized the technical and strategic leadership of WHO and the WHO Director-General.

The Chairperson requested the Rapporteurs to prepare a draft resolution on the Asia Pacific Strategy for Emerging Diseases and Public Health Emergencies, for consideration by the Regional Committee.

Item 15. Progress reports on technical programmes: Part 1

The Director, Programme Management, presented document WPR/RC67/10 which summarizes progress related to implementation of technical programmes. He said the discussion would be divided into two parts.

In the first part, he noted the progress achieved in HIV and sexually transmitted infections, and said that WHO support for HIV efforts has focused on five high-burden countries and three low-burden countries which all have made progress against HIV, and are implementing strategic plans in line with WHO global guidance.

Turning to the Expanded Programme on Immunization, he said the Region had achieved more than 95% immunization coverage and that tremendous progress has been made in measles elimination and hepatitis B control, as well as on other fronts. He noted remaining challenges and gaps. The Director, Programme Management, concluded by briefly updating Member States on progress in disability prevention and rehabilitation, including blindness.

Interventions were made by representatives of the following Member States (in order): the Republic of Korea, the Philippines, Japan, China, Viet Nam, Cambodia, Malaysia, Australia, Samoa, Mongolia, Cook Islands (on behalf of the Pacific health ministers), Hong Kong SAR (China), the United States of America and the Lao People's Democratic Republic.

The Director, Communicable Diseases, thanked Member States for their interventions and noted requests for support and follow-up information. He highlighted issues from various Member States including the large measles outbreak in Mongolia, a delay in introducing new polio vaccine in Viet Nam due to global shortages, processes around measles elimination verification, and the importance of strengthening regular immunization programmes.

He said several countries in the Region, faced declining commitments from partners such as Gavi The Vaccine Alliance, which would require increased national financing of immunization programmes. He said WHO will continue to assist countries to tackle these challenges.

Improving immunization coverage is a core business for WHO and for ministries of health, he said, citing concerns about patchy coverage in parts of the Region. He said the integration of immunization programmes into primary care is a key step for many countries to sustainably boost coverage.

He congratulated Member States on maintaining polio-free status and their progress on measles, adding that the Western Pacific should strive to be the next WHO region to eliminate measles, in reference to the announcement in September of measles elimination in the Region of the Americas.

The Director, Communicable Diseases, commented on efforts in the Philippines, Malaysia and other countries to increase coverage of HIV services, stressing the larger need to make certain all people have access to quality HIV care. He said that reducing sexually transmitted infections needed to be given more priority across the Region, not only because they are associated with higher HIV-infection

risk, but also because they are also themselves drivers of ill health.

The Technical Officer, Disabilities and Rehabilitation, thanked Member States for raising important issues on disabilities and ageing, the costs of rehabilitation services and the lack of prosthetics. He said WHO will be working over the next two years to develop training resources to address gaps in rehabilitation services. With regard to limited data on disability, he said WHO is supporting the Philippines with a disability survey, which other Members States might also soon use.

Item 15.

Progress reports on technical programmes: Part 2

The Director, Programme Management, presented Part 2 of the progress reports, which included the regional action plan for healthy newborn infants, antimicrobial resistance (AMR) and essential medicines.

He said Member States had used the action plan for newborns to guide efforts to improve the skills of health professionals, raise the quality of birthing facilities and

generally improve newborn care. He said more than 27 700 health workers had been coached in Early Essential Newborn Care, drastically improving clinical practice and saving lives.

The Director, Programme Management, also reported on progress on implementation of the action agenda on AMR, noting that seven countries and areas in the Region had developed national action plans for AMR. He said 21 countries in the Region held national campaigns during the first World Antibiotic Awareness Week in 2015. He noted that this year countries will advocate action across human and animal sectors under the One Health concept.

With regard to essential medicines and implementation of the regional framework on essential medicines, he said 21 Member States reported that the regional framework provided helpful guidance in developing, reviewing and implementing national medicines policies. He noted that in the future, guidance for essential medicines will be provided through *Universal Health Coverage: Moving Towards Better Health*, which was endorsed by the Regional Committee in 2015 and monitoring will be handled by the Universal Health Coverage Technical Advisory Group for the Western Pacific.

Interventions were made by representatives of the following Member States (in order): the Republic of Korea, Cambodia, Mongolia and France.

The Chairperson then announced that the session was adjourned and would resume tomorrow to call for interventions from other representatives on this agenda item.

III. OTHER WHO MEETINGS

Thursday, 13 October 2016

12:45–13:45 WHO's work in countries (Conference Hall)

IV. DIRECTOR-GENERAL CANDIDATE MEETINGS

Thursday, 13 October 2016

12:00–12:45 Presentation: Dr David Nabarro (Room 210)