



REGIONAL COMMITTEE FOR AFRICA

ORIGINAL: ENGLISH

Seventieth Session

Resumed virtual session, 24 November 2020

**OPENING REMARKS BY THE REGIONAL DIRECTOR AT THE RESUMED
SEVENTIETH SESSION OF THE WHO REGIONAL COMMITTEE FOR AFRICA**

Honourable Minister of Health, Population and Women's Promotion and Integration of the Republic of Congo, and Chairperson of the Seventieth session of the Regional Committee for Africa, Madame Jacqueline Lydia Mikolo,

Honourable Minister of Health of Benin and the First Vice-Chair, Professor Benjamin Hounkpatin; and Honourable Minister of Health of Ethiopia and Second Vice Chair, Dr Lia Tadesse,

Honourable Ministers of WHO Member States and Heads of Delegation,

Dear colleagues from UN agencies and other partner organizations,

Distinguished guests, members of the media,

Ladies and gentlemen:

It is my great pleasure and my turn to welcome you to this resumed Seventieth session of the WHO Regional Committee for Africa.

I would like to start by thanking Honourable Minister Mikolo for skilfully chairing the Regional Committee sessions and the recently ended WHA regional coordination meetings. Thank you very much for your support to the Secretariat in facilitating the smooth running of these events.

I would also like to thank the Vice-Chairs who have equally well supported our work.

As we close in on the end of an incredibly challenging year, I congratulate and commend the courageous decisions and actions of African governments, the perseverance of individuals, and the solidarity of partners in responding to the COVID-19 pandemic in the WHO African Region. I would like to particularly commend the African Union leadership for their strong action, which they organized collectively.

Since we last met as the Regional Committee in August, we have had more than a full schedule of governing body meetings and I appreciate, Honourable Ministers and Heads of Delegations, your availability and flexibility, which has allowed us to continue the governance of the Organization in this new normal.

In October, we held a Special Session of the Executive Board to review the progress in implementing resolution WHA73.1 on the COVID-19 response, including internal and external mechanisms that have been put in place to evaluate the pandemic response.

Last week, we concluded the resumed session of the Seventy-third World Health Assembly and the 147th Executive Board.

The Health Assembly endorsed key resolutions of relevance to the Region, which were promoted by African Member States. These include the first ever resolution to eliminate meningitis by 2030, and a decision endorsing the new Neglected Tropical Diseases Roadmap. The global strategy on digital health was also adopted. At the regional level, we are already finalizing draft frameworks on digital health and meningitis, which will be submitted to the Regional Committee next year.

The Assembly decided to designate 2021 as the International Year of Health and Care Workers and I concur with delegates who intervened highlighting that appreciation for health and care workers should include the requisite remuneration and safe working conditions. Infection prevention and control and occupational health and safety should therefore become integral parts of our health services delivery.

Other priority issues, such as immunization and polio were discussed, and the resumed Assembly coincided with the emergency use listing by WHO of the novel oral polio vaccine type 2, or nOPV2. This new tool will help in dealing with outbreaks of circulating vaccine-derived poliovirus type 2, which have affected 16 African countries in 2020.

Following our celebration of the regional eradication of wild poliovirus in August, which was a very important moment for all of us, it is imperative that we accelerate the momentum towards ending all forms of polio. This includes integrating polio-related essential functions into national routine programmes.

The Assembly also held extensive discussions on emergency preparedness and response and endorsed a resolution through which Member States renewed their commitments to fully comply with the International Health Regulations.

Several Member States, Honourable Ministers, raised the recent allegations of sexual exploitation and abuse during the Ebola response in North Kivu in the Democratic Republic of the Congo. We are fully investigating these allegations, in order to hold the perpetrators to account, and prevent future occurrences of this nature, including through the Independent Commission established by Dr Tedros, which is co-chaired by two strong African women leaders with very good international profiles.

Some good news last week, as the Minister said in her opening remarks, we celebrated the end of the 11th Ebola outbreak in Equateur Province in the Democratic Republic of the Congo. I would like to appreciate the efforts of the local and national authorities, particularly the leadership role of the Honourable Minister of Health, the work of front-line health workers, the engagement of the communities and the support of partners in bringing this outbreak to an end, while simultaneously fighting COVID-19.

Honourable Ministers, partners and colleagues, the COVID-19 pandemic was top of the agenda in the governing bodies discussions, and our continent has now passed the 2 million reported cases mark, including more than 1.4 million cases and 32 000 deaths in the WHO African Region.

The holiday season is fast approaching, as we observe cases surge in parts of Europe and also in the Americas, and an uptick in our regional daily case graph. We cannot therefore be complacent. We need to prepare for a resurgence of the pandemic, including scaling up precautions in risky situations, such as festive and election-related gatherings.

The news of three effective COVID-19 vaccines is of comfort to us and has us absolutely determined to ensure that African countries obtain sufficient supplies to make an impact on the pandemic at the same time as all others.

Honourable Ministers, you represent 47 of the 187 countries that have joined the COVAX facility which is working with the WHO-coordinated ACT Accelerator to ensure that global solidarity and equity prevail in the collective fight against the pandemic.

The potential impact of several high-income countries having arranged advance purchase agreements of hundreds of millions of doses needs to be closely followed.

Our collective preparations and advocacy will be crucial to make sure principles of solidarity and equity remain at the forefront in the months ahead.

We will have an opportunity to discuss these issues in greater detail during the special event later today on the COVID-19 response in the Region.

In this resumed session of the Regional Committee, we will also discuss the Programme Budget, as well as the necessity of sustainable, flexible and predictable funding for WHO to fulfil our mandate in the context of expanding expectations placed on the Organization. Several Member States called for this during the Health Assembly, and assessed contributions are only one type of flexible funds that are within the control of Member States. You emphasized, from the African Region, the need for adequate resourcing of action by strong WHO country office teams, backed up by regional offices.

Thank you, Honourable Ministers, for the adoption of 11 substantive documents and seven progress reports on our agenda, through a written silence procedure, during the intercessional period.

The first ever Regional Strategy on Scaling up Health Innovations was one of these documents, and we have seen this year the important role played by new tools, technologies and approaches as part of the COVID-19 response. This strategy provides the timely opportunity to strengthen innovation ecosystems so that new ideas and tools can quickly be incorporated into action and services, and also to accelerate progress towards the achievement of universal health coverage and the Sustainable Development Agenda.

Turning now, to the priority actions needed in the coming months:

Renewed, reinvigorated and innovative approaches to encourage and motivate communities and reverse the relaxation and fatigue, frankly, in continuing with preventive measures, will be needed.

In addition to engaged, enabled communities, sustained vigilance will be essential. Through smartly scaled-up public health capacities to quickly find, test and isolate cases, and trace and isolate contacts, COVID-19 transmission can be contained.

It is imperative that we progress concretely with the planning to roll out COVID-19 vaccines, including preparing for regulatory approvals, delivery strategies for priority groups, and importantly, securing the needed financing. Emerging challenges, such as vaccine denial among health workers and some clergy, also need to be proactively addressed.

Mitigating the socioeconomic impacts of COVID-19, including maintaining access to essential preventive and curative services must be a key focus, so as to avoid a reversal in hard-fought gains made over many years in health and development.

Finally, universal health coverage remains our overarching goal. To accelerate progress towards UHC, the lessons learned in the past year and in previous outbreaks and emergencies, must be used to transform our health systems and build resilience.

The reports adopted by the Regional Committee this year on strengthening country presence to deliver universal health coverage in Africa and on the Performance of Health Systems, are key analytical tools in our work together. These reports set out the capacities needed in each Member State and in the WHO offices to support the attainment of universal health coverage.

We are counting on the continued support of Member States and partners to ensure that our country offices are adequately equipped to accompany work towards universal health coverage at the national and subnational levels.

COVID-19 will not be the last threat we face, so preparedness needs to be integrated at every level of the health system.

The experience of this pandemic has shown the limitations implicit in narrow, fragmented investments in health, and point to the need to build health systems that provide care centred on the needs of people at every stage of life.

In closing, Honourable Ministers, I assure you of WHO's continued commitment to accelerating gains in health using integrated, people-centred approaches and with a strong focus on equity.

I look forward to productive discussions and to our continued collaboration towards better health outcomes for people in the African Region.

Thank you very much for your attention.

Thank you, Madam Chairperson.