

Issue 32/2023

WHO Public Health Report

Bosnia and Herzegovina

October 2023

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WHO ISSUES GLOBAL PLAN TO TACKLE LEADING CAUSE OF DEATH IN CHILDBIRTH



WHO released its first roadmap to tackle postpartum haemorrhage (PPH) – defined as excessive bleeding after childbirth - which affects millions of women annually and is the world’s leading cause of maternal deaths.

Despite being preventable and treatable, PPH results in around 70 000 deaths every year. For those who survive, it can cause disabilities and psychological trauma that last for years.

“Severe bleeding in childbirth is one of the most common causes of maternal mortality, yet it is highly preventable and treatable,” said Dr Tedros Adhanom Ghebreyesus, WHO Director-General. *“This new roadmap charts a path forward to a world in which more women have a safe birth and a healthy future with their families.”*

The Roadmap aims to help countries address stark differences in survival outcomes from PPH, which reflect major inequities in access to essential health services. Over 85% of deaths from PPH happen in sub-Saharan Africa and South Asia. Risk factors include anaemia, placental abnormalities, and other complications in pregnancy such as infections and pre-eclampsia.

Many risk factors can be managed if there is quality antenatal care, including access to ultrasound, alongside effective monitoring in the hours after birth. If bleeding starts, it also needs to be detected and treated extremely quickly. Too often, however, health facilities lack necessary healthcare workers or resources, including lifesaving commodities such as oxytocin, tranexamic acid or blood for transfusions.

A woman is estimated to die [every two minutes](#) from causes relating to pregnancy or childbirth. There has been limited progress in reducing these deaths since 2015 and the world is off-track for meeting related Sustainable Development Goal targets.

The *Roadmap to combat postpartum haemorrhage between 2023 and 2030* outlines goals and activities for research, normative work, implementation and advocacy.

Priority actions include: the development of new and broader guidance for PPH covering prevention, detection and treatment; research to deliver innovations and to increase access to proven interventions; the establishment of a new procurement mechanism to improve the supply of high-quality medicines and commodities; advocacy and awareness-building, and, at the country level, training and facility-based improvements.

[Roadmap to combat postpartum haemorrhage between 2023 and 2030.](#)

More on this at: <https://www.who.int/news/item/11-10-2023-who-issues-global-plan-to-tackle-leading-cause-of-death-in-childbirth>.

MONITORING AIR POLLUTION LEVELS IS KEY TO ADOPTING AND IMPLEMENTING WHO'S GLOBAL AIR QUALITY GUIDELINES

New report summarises air quality monitoring methods to estimate air pollution exposure

- Environmental risks cause 12% of the global burden of disease, with air pollution ranking first.
- In 2021, WHO issued updated and more stringent air quality guidelines to reflect adverse health effects at lower concentrations than previously recognized.
- Air quality monitoring is the first step for understanding a population's exposure and taking action.
- Report provides an overview of the strengths and weaknesses of different measurement and modelling methods.

“Air Pollution is a major public and environmental health issue with serious threats to people’s wellbeing and our environment,” says Dr Maria Neira, Director, Department of Environment, Climate Change and Health, WHO. “Health impact assessment of air pollution and related interventions is the foundation for tackling air pollution efficiently, seriously and sustainably. This new report is key in supporting countries to get local data and measure air pollution exposure to protect people from the adverse impacts of dirty air.”

Data is key to tackle air pollution globally

Every year, 7 million people die prematurely from exposure to air pollution. At the foundation of this mortality figure ([SDG indicator 3.9.1](#)) is the global estimate of ambient (or outdoor) air pollution exposure ([SDG Indicator 11.6.2](#)). This indicator is obtained from a global model, the Data Integration Model for Air Quality (DIMAQ), whose accuracy relies on the availability of local reference-grade monitors, which are a critical part of a comprehensive air quality management programme. In addition to their accuracy, reference-grade monitors enable the monitoring of long-term air pollution exposures that are critical for health studies and the evaluation of interventions or sectoral policies. They are also crucial for the objective evaluation of compliance with standards. Ideally, every country should have access to at least one reference-grade monitor, which open the door to many other air quality measurement methods.

Policy-makers and government officials can use the report to assess their country’s baseline air quality levels as well as to develop plans for air quality monitoring and data management. National and local authorities responsible for protecting public health can leverage its content in their fight against the adverse effects of air pollution. Additionally, low- and middle-income countries can find methods to assess their population exposure to air pollution that are best suited to their country’s social, economic and environmental conditions.

[Overview of methods to assess population exposure to ambient air pollution.](#)

More on this at: <https://www.who.int/news/item/10-10-2023-monitoring-air-pollution-levels-is-key-to-adopting-and-implementing-who-s-global-air-quality-guidelines>.

WHO LAUNCHES THE WHOEYES APP ON WORLD SIGHT DAY



Vision loss can affect people of all ages. Globally, at least 2.2 billion people have a near or distance vision impairment. At least 1 billion of these cases could have been prevented or can be easily addressed with spectacles or cataract surgery. In addition, vision impairment poses an enormous global financial burden, with an estimated US\$ 411 billion lost in workplace productivity due to poor vision.

To draw attention to blindness and vision impairment worldwide, every year on the second Thursday of October, World Sight Day is observed. For this year's celebration, the World Health Organization (WHO) has launched "WHOeyes", a free app for the general public to check how well they can see things close up and at a distance and learn how they can protect their eyes.

The app checks visual acuity – a measure of how well the eye can distinguish shapes and details at a given distance and is the most common assessment of visual function. It is a simple, non-invasive measure, which is critical to determine if someone has a vision impairment. Many people with vision loss are unaware of it. Regular vision checks can ensure that vision impairment is identified as early as possible, and that action can be taken to preserve eyesight.

Understanding that engaging the public is pivotal to advance the demand for eye care services, WHOeyes targets the entire population aged over 8 years. WHOeyes **does not replace the need for regular eye checks** by an eye care professional, and its primary objective is to encourage people to seek out eye care. If you suspect you have vision loss, please seek the advice of a qualified professional.

"The WHOeyes app can help people quickly and easily identify potential vision issues that merit further checking by a qualified professional," said Dr Bente Mikkelsen, WHO Director for Noncommunicable Diseases. *"We decided to share this simple eye test and quick tips for eye care on an app, as people use their phones daily, and many people are unaware that they have a vision problem until it is too late."*

Available in all 6 UN languages (Arabic, Chinese, English, French, Russian and Spanish), the WHOeyes app can be downloaded for free both on the [Apple App Store](#) and [Google Play](#).

[WHOeyes webpage.](#)

UNITED NATIONS PARTNERS CALL FOR INVESTMENTS IN SELF-CARE INTERVENTIONS TO IMPROVE SEXUAL AND REPRODUCTIVE HEALTH



On the side-lines of the World Health Summit in Berlin, United Nations (UN) agencies launched a joint statement to call for greater commitments and investments in self-care interventions for sexual and reproductive health and rights, which aim to help people gain autonomy over their health while improving access to vital healthcare.

Closely following commitments made by world leaders at the UN General Assembly to redouble efforts towards universal health coverage by 2030, the joint interagency statement emphasizes the potential of self-care interventions to improve global healthcare access. It calls for coordinated, strategic action in five areas – financing; the health and care workforce; partnerships and accountability; improving quality regulation, and research.

“Self-care interventions offer huge potential in ensuring people have access to the sexual and reproductive health services they need,” said Pascale Allotey, Director of Sexual and Reproductive Health and Research at the World Health Organization (WHO) and the UN Special Programme of Research, Development and Training on Human Reproduction (HRP). *“Expanding availability of high-quality self-care options will not only improve agency and autonomy within healthcare, it will also help achieve health for all.”*

[World Health Summit.](#)

[Joint statement.](#)

More on this at: <https://www.who.int/news/item/17-10-2023-united-nations-partners-call-for-investments-in-self-care-interventions-to-improve-sexual-and-reproductive-health>.

DESPITE PROGRESS, CHALLENGES PERSIST IN ADVANCING SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS IN THE WHO EUROPEAN REGION



While significant strides have been taken to enhance sexual and reproductive health and rights in the WHO European Region, challenges persist. In the run-up to the 73rd session of the WHO Regional Committee for Europe, WHO/Europe hosted a side event on this topic to discuss these key challenges with partners from across the Region. Sexual and reproductive health and rights (SRHR) are crucial for overall health and well-being, gender equality, and societal development, as recognized by the Sustainable Development Goals. However, considerable inequalities persist in SRHR outcomes among Member States.

Data gathered from across the Region are sobering. Maternal mortality rates vary significantly across countries. In 2020, mortality rates ranged from 2 to 68 per 100 000 live births, with some countries' reporting rates 6 times higher than the regional average. Since then, more countries have reported increases in maternal mortality rates, potentially marking the first significant increase in these levels in the last 20 years. While over half of women of child-bearing age in the Region are using contraception, over 36% of all pregnancies are unintended and often lead to unsafe abortions and severe, long-term negative health consequences for women, families, and societies. Alarming, adolescent pregnancies are also on the rise, with some countries experiencing adolescent birth rates 3 times higher than the regional average, reaching an unprecedented 40 births per 1000 women aged 15–19 years.

Additionally, some Member States are witnessing a rise in caesarean section rates, increasing to levels that are not justified medically. Emergencies like the COVID-19 pandemic, conflict and forced displacement have highlighted the fragility of progress made so far – and have underscored that, when core sexual and reproductive health services are disrupted or deemed non-essential, women, their families and indeed society at large are greatly affected.

More on this at: <https://www.who.int/europe/news/item/18-10-2023-despite-progress--challenges-persist-in-advancing-sexual-and-reproductive-health-and-rights-in-the-who-european-region>

ALBANIA: A NEW STUDY OFFERS FURTHER PROOF THAT THE COVID-19 VACCINE BOOSTER IS VITAL FOR HEALTH WORKERS



A new study in Albania shows that the COVID-19 vaccine booster offers significant protection against SARS-CoV-2 infection among health-care workers. The research, a collaboration between several health organizations and supported by the Task Force for Global Health, found that during the Omicron wave, health workers who received a booster were 88% less likely to contract COVID-19 compared to their unvaccinated counterparts.

Conducted during January to May 2022, the study covered nearly 1500 health workers in 3 hospitals. The results fill a knowledge gap on the booster's effectiveness in low- and middle-income countries. "*Vaccines remain the best way to protect against COVID-19,*" stated Silvia Bino, the study's senior author. Bino further urged health workers and vulnerable populations to get their COVID-19 and influenza vaccines.

The WHO European Region continues to grapple with COVID-19, its variants, and the potential for influenza and respiratory syncytial virus (RSV) to co-circulate. Uptake of recent booster doses and the influenza vaccine is inconsistent across the Region, with many countries reporting low rates. To address this, WHO/Europe initiated a campaign during the European Flu Awareness Week.

Dr. Marc-Alain Widdowson, from WHO/Europe, conveyed, "*If you're vulnerable, the best way to safeguard your health is to get vaccinated against COVID-19 and influenza.*"

More on this at: <https://www.who.int/europe/news/item/13-10-2023-albania--a-new-study-offers-further-proof-that-the-covid-19-vaccine-booster-is-vital-for-health-workers>.

WHO OUTLINES CONSIDERATIONS FOR REGULATION OF ARTIFICIAL INTELLIGENCE FOR HEALTH

The World Health Organization (WHO) has released a new publication listing key regulatory considerations on artificial intelligence (AI) for health. The publication emphasizes the importance of establishing AI systems' safety and effectiveness, rapidly making appropriate systems available to those who need them, and fostering dialogue among stakeholders, including developers, regulators, manufacturers, health workers, and patients.

With the increasing availability of health care data and the rapid progress in analytic techniques – whether machine learning, logic-based or statistical – AI tools could transform the health sector. WHO recognizes the potential of AI in enhancing health outcomes by strengthening clinical trials; improving medical diagnosis, treatment, self-care and person-centred care; and supplementing health care professionals' knowledge, skills and competencies. For example, AI could be beneficial in settings with a lack of medical specialists, e.g. in interpreting retinal scans and radiology images among many others.

However, AI technologies – including large language models – are being rapidly deployed, sometimes without a full understanding of how they may perform, which could either benefit or harm end-users, including health-care professionals and patients. When using health data, AI systems could have access to sensitive personal information, necessitating robust legal and regulatory frameworks for safeguarding privacy, security, and integrity, which this publication aims to help set up and maintain.

“Artificial intelligence holds great promise for health, but also comes with serious challenges, including unethical data collection, cybersecurity threats and amplifying biases or misinformation,” said Dr Tedros Adhanom Ghebreyesus, WHO Director-General. *“This new guidance will support countries to regulate AI effectively, to harness its potential, whether in treating cancer or detecting tuberculosis, while minimising the risks.”*

[Regulatory considerations on artificial intelligence for health.](#)

More on this at: <https://www.who.int/news/item/19-10-2023-who-outlines-considerations-for-regulation-of-artificial-intelligence-for-health>.

BY 2024, THE 65-AND-OVER AGE GROUP WILL OUTNUMBER THE YOUTH GROUP: NEW WHO REPORT ON HEALTHY AGEING



By 2024, it is estimated that the population of individuals aged over 65 years will outnumber those under the age of 15 in the WHO European Region. This trend means new social, economic and health challenges, which demand a focus on healthy ageing to mitigate the impact of an ageing population. WHO's report **“Promoting physical activity and healthy diets for healthy ageing in the WHO European Region”** navigates this shift, providing a roadmap for healthy longevity.

The new WHO report underscores the key role of physical activity and diet quality as pivotal factors influencing the health of individuals.

Physical activity and healthy diets throughout the lifespan can help prevent noncommunicable diseases (NCDs), such as cardiovascular diseases, cancer, diabetes, dementia, and mental health issues.

Policy-makers have a major responsibility in preparing for the demographic shift that is ahead of us. The WHO report highlights several opportunities in this context.

- Health surveillance systems in countries of the Region can be better unified to enhance the development of better policies.
- Physical activity policies should prioritize social connectedness and community-based programs.
- Government policies should integrate nutrition into medical education.
- Primary care is key to providing advice and guidance on maintaining a healthy diet and daily physical activity.

[WHO report: Promoting physical activity and healthy diets for healthy ageing in the WHO European Region.](#)

More on this at: <https://www.who.int/europe/news/item/11-10-2023-by-2024--the-65-and-over-age-group-will-outnumber-the-youth-group--new-who-report-on-healthy-ageing>.

IMPROVING THE EXPERIENCE OF PREGNANT AND BIRTHING WOMEN



A growing body of evidence shows that the mistreatment of women in maternal health care is a reality worldwide. For several years, the World Health Organization (WHO) and HRP (the UNDP/UNFPA/UNICEF/WHO/World Bank Special Programme of Research, Development and Research Training in Human Reproduction) have been documenting this human rights violation, and its impact on health and wellbeing.

The WHO guideline on intrapartum care for positive childbirth experience includes a number of related recommendations, but little research has been done into what interventions can be put into place to make a difference – until now.

HRP and WHO authors and collaborators have now published a special series of five papers in the journal *PLOS Global Public Health* exploring a range of strategies on different themes to end mistreatment of women during childbirth and improve respectful care.

The authors make the point that solutions must not focus merely on staff failures through trainings or audit procedures, but must, in addition, look for longer-term solutions that can encourage sustainable changes in attitudes and beliefs that then make a permanent change in behaviour. This would have the effect of changing behaviour at all levels of the health and social care system, from first-line health workers to senior staff and middle managers, and from organizational funders and auditors to leaders of local communities, politicians and any other key stakeholders.

The authors comment, “The intention is that resulting individual, group, institutional, and community norms change profoundly and sustainably to resist ‘othering’ at a fundamental level, and into the longer term, after the formal intervention programme is complete.” Implementation science tools, which integrate practical solutions, such as the theoretically informed *Behavioural Change Wheel*, might be helpful in designing tailored interventions suitable for each context.

[HRP](#)

[WHO guideline on intrapartum care for positive childbirth experience](#)

[WHO's work on maternal health](#)

More on this at: <https://www.who.int/news/item/12-10-2023-improving-the-experience-of-pregnant-and-birthing-women>

FRANCE'S NEW GLOBAL HEALTH STRATEGY



From left to right: Minister of Health and Prevention H.E. Aurélien Rousseau, WHO's Director-General Dr Tedros Adhanom Ghebreyesus, Minister for Europe and Foreign Affairs H.E. Catherine Colonna, and Minister of Higher Education and Research, H.E. Sylvie Retailleau.

France has released its Global Health Strategy for 2023-2027, in Lyon, in the presence of three French Ministers, the Minister for Europe and Foreign Affairs, the Minister of Health and Prevention, the Minister of Higher Education and Research, and WHO's Director-General. As a lead player for shaping global health policies, France has called on national and international stakeholders to support building a new global health architecture towards achieving the Sustainable Development Goals (SDGs) and in particular SDG3, focused on ensuring healthy lives and promoting well-being for all, at all ages. The new Health Strategy aims to help reduce health inequalities and strengthen the One Health approach to better prevent and prepare for future global health emergencies. It urges the global community to address the health consequences of climate change and the environmental impact on health systems.

To underscore WHO's and France strong collaboration and in recognition of France's pivotal global health role, Dr Tedros travelled to France to join the launch event. *"France was a founding member of WHO in 1948 and has been a strong friend to WHO throughout the 75 years since then,"* said Dr Tedros Adhanom Ghebreyesus, WHO Director-General. *"As one of the world's largest economies, France has a critical role to play in global health, and the new Global Health Strategy will enhance that role. It aligns well with WHO's priorities to promote, provide, protect, empower and perform for health."*

France also provides support for transformative initiatives at WHO such as the WHO Academy and the International Agency for Research on Cancer (IARC) which the Ministers visited today.

"The World Health Organization, whose 74th anniversary we are celebrating today, must continue to play a central and driving role," said Ms Catherine Colonna, the French Minister for Europe and Foreign Affairs. *"France will continue to support the WHO and its ambitious governance and financing reforms."*

WHO [Academy](#).

More on this at: <https://www.who.int/news/item/12-10-2023-france-s-new-global-health-strategy>.

WHO-OHCHR LAUNCH NEW GUIDANCE TO IMPROVE LAWS ADDRESSING HUMAN RIGHTS ABUSES IN MENTAL HEALTH CARE



The World Health Organization (WHO) and the Office of the High Commissioner on Human Rights (OHCHR) jointly launched new guidance, entitled “**Mental health, human rights and legislation: guidance and practice**”, to support countries to reform legislation in order to end human rights abuses and increase access to quality mental health care.

Human rights abuses and coercive practices in mental health care, supported by existing legislation and policies, are still far too common. Involuntary hospitalization and treatment, unsanitary living conditions and physical, psychological, and emotional abuse characterize many mental health services across the world.

While many countries have sought to reform their laws, policies and services since the adoption of the United Nations Convention on the Rights of Persons with Disabilities in 2006, too few have adopted or amended the relevant laws and policies on the scale needed to end abuses and promote human rights in mental health care.

“Mental health is an integral and essential component of the right to health,” said Dr Tedros Adhanom Ghebreyesus, WHO Director-General. *“This new guidance will support countries to make the changes needed to provide quality mental health care that assists a person’s recovery and respects their dignity, empowering people with mental health conditions and psychosocial disabilities to lead full and healthy lives in their communities.”*

“Our ambition must be to transform mental health services, not just in their reach, but in their underlying values, so that they are truly responsive to the needs and dignity of the individual. This publication offers guidance on how a rights-based approach can support the transformation needed in mental health systems” said Volker Türk, UN High Commissioner for Human Rights.

While the guidance proposes a set of principles and provisions that can be mirrored in national legislation, countries may also adapt and tailor these to their specific circumstances (national context, languages, cultural sensitivities, legal systems, etc.), without compromising human rights standards.

[“Mental health, human rights and legislation: guidance and practice”](#)

More on this at: <https://www.who.int/news/item/09-10-2023-who-ohchr-launch-new-guidance-to-improve-laws-addressing-human-rights-abuses-in-mental-health-care>

WHO RELEASES UPDATED GUIDANCE ON ADOLESCENT HEALTH AND WELL-BEING



The World Health Organization (WHO) is releasing the second edition of its Global Accelerated Action for the Health of Adolescents (AA-HA!) guidance. The document aims to equip governments to respond to the health and well-being challenges, opportunities and needs of adolescents.

The guidance provides the latest available data on adolescent health and well-being. It also outlines an updated list of core indicators that data should be collected on. Globally, road injury was the top cause of death for adolescent males in 2019. Among

female adolescents, the leading causes of death were diarrhoeal diseases among the younger group (10-14 years) and tuberculosis (TB) in the older group (15-19 years).

Over the last 20 years, mortality rates have declined among adolescents globally, with the largest decline in older (15–19 years) adolescent girls. For non-fatal diseases, the burden has not improved over the past two decades, with the main causes of ill health in this category being: mental health conditions (depressive and anxiety disorders, childhood behavioural disorders), iron deficiency anaemia, skin diseases and migraine.

Adolescent well-being depends on a range of factors, including healthy food, education, life skills and employability, connectedness, feeling valued by society, safe and supportive environments, resilience, and the freedom to make choices. To take an appropriately holistic approach, the guidance outlines how to take crosscutting action to support adolescent health and well-being, with mutually reinforcing interventions across sectors, such as health, education, social protection, and telecommunications. Targeted efforts are also required to engage adolescents, as they trust health systems less than adults do and are especially vulnerable to modern-day trends, like online bullying and gaming.

There has been substantial progress since the launch of the guidance's first edition in 2017. A range of World Health Assembly resolutions address these issues, spanning areas such as the health workforce, noncommunicable diseases (NCDs), emergencies, and water and sanitation. New initiatives have been established, such as the WHO Global Initiative for Childhood Cancer in 2018 and the Joint Programme on Mental Health and Psychosocial Wellbeing and Development of Children and Adolescents launched by WHO and UNICEF in 2020.

[WHO Global Initiative for Childhood Cancer.](#)

[Joint Programme on Mental Health and Psychosocial Wellbeing and Development of Children and Adolescents.](#)

More on this at: [https://www.who.int/news/item/11-10-2023-who-releases-updated-guidance-on-adolescent-health-and-well-being.](https://www.who.int/news/item/11-10-2023-who-releases-updated-guidance-on-adolescent-health-and-well-being)

NEW FUNDING TO ENSURE 370 MILLION CHILDREN RECEIVE POLIO VACCINATIONS AND TO BOOST HEALTH INNOVATION IN LOW-INCOME COUNTRIES



Last week, the European Commission, the European Investment Bank and the Bill & Melinda Gates Foundation announced a new financing partnership to address critical global health opportunities: eradicating polio and ensuring that innovations in health are more accessible to the people who need them most. The World Health Organization and UNICEF, as implementing partners for the polio funding, will deploy the resources to eradicate polio, support the distribution of other childhood immunisations and strengthen health systems so they are better able to respond to emerging health threats.

The expected €1.1 billion financing package aims to provide new funding to eradicate a human disease for only the second time in history and help solve the health and development challenges faced by the world's most vulnerable people, who otherwise do not get fair access to healthcare services and innovations.

The partnership marks a significant increase in funding for global health and human development under the European Commission's European Fund for Sustainable Development plus (EFSD+) and is expected to include a match of new complementary funding for global health by the Bill & Melinda Gates Foundation, maximising the impact of every Euro committed by the EU and the European Investment Bank.

Specifically, the funding partnership is expected to include:

- ✚ **€500 million in new funding for the Global Polio Eradication Initiative** (as outlined above)
- ✚ **€500 million in investments and grants to ensure health innovations are more accessible, strengthen health systems and prepare for future pandemics:** The Bill & Melinda Gates Foundation plans to provide €250 million of grants and investments to match a €250 million in investments made by the European Investment Bank and guaranteed by the European Fund for Sustainable Development plus.
- ✚ **€80 million grants for Technical Assistance:** The Bill & Melinda Gates Foundation expects to match €40 million in grants from the European Commission to provide technical assistance and ensure that global health programs achieve their full potential.

More on this at: <https://www.who.int/news/item/11-10-2023-new-funding-to-ensure-370-million-children-receive-polio-vaccinations-and-to-boost-health-innovation-in-low-income-countries>

RETHINK MENTAL HEALTH: INVEST IN AND DESIGN BETTER SYSTEMS FOR A MORE RESILIENT EUROPEAN REGION



In a region where as many as 1 in 7 people live with a mental health condition, too few get any form of care or support. In fact, many people continue to experience discrimination for seeking mental health support – it can lead to the loss of their job or home; while physical health problems may be wrongly attributed to a person’s psychiatric diagnosis.

Although mental health has climbed higher on the health agenda regionally in recent years, it is increasingly difficult to access mental health care, in part because of a worrying

decline in mental health workers. From 2017 to 2020, the number declined from 50 per 100 000 population to around 45. This means longer waiting times and a more burnout-prone mental health workforce.

Successive crises over the past three years – COVID-19, the war in Ukraine, a rising cost of living, multiple natural disasters and extreme weather events – have made it all the clearer that current approaches to protecting mental health do not serve people’s needs and preferences. Far too many vulnerable people fall through the gaps.

It is time for the WHO European Region to invest in and design better mental health systems at this time of permacrisis.

The WHO Regional Office for Europe is calling on its 53 Member States to:

- ✚ rethink what mental health systems look like;
- ✚ listen to the people who operate in those systems, especially health workers and people with lived experience, in shaping the implementation of mental health policies;
- ✚ invest mental health budgets better, across a variety of types of mental health support.

The permacrisis of recent years, and decades of poor investment, have taught us much about what mental health systems are, as well as what they can and should be. We simply cannot wait for the next crisis to tell us once again what we already know: that mental health is vital across the entire life-cycle and that our systems for protecting and enhancing it can, and should, be better.

We have no time to lose in investing strategically in protecting mental health as a foundation for individual and societal well-being.

More on this at: <https://www.who.int/europe/news/item/10-10-2023-rethink-mental-health--invest-in-and-design-better-systems-for-a-more-resilient-european-region>.

MENTAL HEALTH - A HUMAN RIGHT FOR PEOPLE AFFECTED BY TUBERCULOSIS



WORLD MENTAL HEALTH DAY SPOTLIGHT

World Mental Health Day 2023 was an opportunity to raise awareness about mental health as a universal human right, and about the required actions to promote and protect mental health for all. This year's World Mental Health Day was commemorated under the theme "mental health as a universal human right". It recognised that all people have the right to the highest attainable standard of mental health as a fundamental human right. All people should be protected from stigma, discrimination and other mental health risks, have access to high quality care for mental health conditions and enjoy full inclusion in society.

Worldwide, almost 1 billion people are living with a mental health condition. People affected by TB have a higher risk of mental health conditions, which can negatively impact TB treatment outcomes, health-related quality of life and other health and social outcomes. In fact, mental health conditions are one of the top impairments suffered by people with TB. Stigma and discrimination associated with a TB diagnosis and the treatment course, as well as human rights-related barriers to TB care can also adversely affect mental health. Therefore, mental health care should be addressed as an important part of holistic people-centred care for people with TB and their families.

To promote high quality mental health care for all people with TB, the World Health Organization (WHO) will soon publish new guidance and an associated e-course on TB and mental health conditions and substance use disorders.

"On World Mental Health Day we are excited and pleased to signal that WHO will soon be issuing new guidance and an e-course on TB and mental health conditions, these new resources will further emphasise the importance of mental health as a fundamental human right for all people, including for people affected by TB."

Dr Dévora Kestel, Director of WHO's Department of Mental Health and Substance Use

More on this at: <https://www.who.int/news/item/09-10-2023-mental-health-a-human-right-for-people-affected-by-tuberculosis>.

FIVE KEY THEMES FOR IMPROVED MENTAL HEALTH CARE FOR REFUGEES AND MIGRANTS



On World Mental Health Day, the World Health Organization (WHO) released a new report entitled *Mental health of refugees and migrants: risk and protective factors and access to care*, outlining the latest global evidence on main factors influencing the mental health of refugees and migrants and their access to care. This is fifth report of the Global evidence review on health and migration (GEHM).

Around 1 in 8 people globally live with a mental health condition. Refugees and migrants are particularly vulnerable, as they can be exposed to various stress factors and challenges, which affect their mental health and well-being both during their journeys and on arrival. The prevalence of common mental disorders such as depression, anxiety and post-traumatic stress disorder (PTSD) tends to be higher among migrants and refugees than among host populations. Girls and women on the move have a higher risk of depression and anxiety.

"Good mental health and well-being is a right for all, including for refugees and migrants," said Dr Santino Severoni, Director of the WHO's Department of Health and Migration. *"This report will support and strengthen health systems' responses to the mental health needs of refugees and migrants so that they can receive quality mental health care and support in ways they find accessible, acceptable, and affordable."*

The report summarises different risk factors and barriers refugee and migrant groups experience and outlines five key themes to be addressed in order to improve their access to mental health care:

- **Community support:** Evidence shows that being part of a community with a shared background and attending school are associated with lower rates of mental disorders.
- **Basic needs and security.** For example, an insecure legal status can contribute to poor mental health.
- **Stigma:** experiences of racism and discrimination are consistently associated with adverse mental health outcomes.
- **Adversity and trauma.** For example, extended detention is associated with increased rates of depression and PTSD.
- **Access to services.** Refugees and migrants often do not prioritize their mental health because they are not aware of the services available free of charge or do not accept health care due to language barriers and concerns around confidentiality.

"Refugees and migrants face many unique stressors and challenges. This report sets out the urgent need for robust policies and legislation, rooted within stronger health systems, to meet the mental health care needs of refugees and migrants," said Dévora Kestel, WHO Director for Mental Health and Substance Use.

[Mental health of refugees and migrants: risk and protective factors and access to care.](#)

More on this at: <https://www.who.int/news/item/10-10-2023-five-key-themes-for-improved-mental-health-care-for-refugees-and-migrants>.

EVIPNET AND UNIVERSITY COLLEGE LONDON LAUNCH NEW PROJECT TO PILOT THE WHO CHECKLIST ON EIPM INSTITUTIONALIZATION

The World Health Organization (WHO), the Evidence for Policy & Practice Information and Coordination Centre (EPPI-Centre) at University College London, and the Special Programme for Research and Training in Tropical Diseases (TDR) are jointly launching a new project on piloting a checklist for the institutionalization of evidence-informed policy-making (EIPM).

This checklist was developed in 2023 and aims at assisting countries in planning, monitoring, evaluating, and learning about their EIPM institutionalization process. However, this tool has seen limited application in practice, leading to a need to test its validity and feasibility in the real world.

A new project, funded by the Geneva Science Policy Interface, will pilot the checklist in two countries in the WHO European Region and the Americas. These countries were chosen due to their diverse geographical locations and different stages of EIPM institutionalization. The pilot aims at assessing the evidence ecosystem for EIPM in both countries, identifying the current stage of institutionalization, producing a list of key actions to strengthen current institutions, and obtaining stakeholders' feedback on the tool's usefulness and efficiency. The project will run from October 2023 to September 2024.

The pilot study will be divided into two phases. The first phase involves a comprehensive situation analysis, similar to an exploration mission, using methods such as a scoping review, focus group discussions, and key informant interviews. This phase will paint a picture of the national context, health system, and EIPM landscape of each country.

The second phase will be more interactive and revolve around a participatory workshop held in each country. The aim is to identify the institutionalization stage and actions under the six domains of the WHO checklist. It also seeks feedback from participants on the tool's usefulness.

[Evidence for Policy & Practice Information and Coordination Centre \(EPPI-Centre\).](#)

[Special Programme for Research and Training in Tropical Diseases \(TDR\).](#)

More on this at: [https://www.who.int/news/item/08-10-2023-evipnet-and-university-college-london-launch-new-project-to-pilot-the-who-checklist-on-eipm-institutionalization.](https://www.who.int/news/item/08-10-2023-evipnet-and-university-college-london-launch-new-project-to-pilot-the-who-checklist-on-eipm-institutionalization)

GOVERNMENTS MAKE PROGRESS TOWARDS AGREEING AMENDMENTS TO THE INTERNATIONAL HEALTH REGULATIONS (2005)

Progress was made this week on many of the over-300 proposed amendments to the International Health Regulations 2005 (IHR). In this fifth round of intensive discussions, taking place under the aegis of the Working Group on Amendments to the IHR (WGIHR) – which includes the 196 States Parties to the IHR, the European Union and the Observer Delegation of Palestine – participants discussed proposed amendments including those in the areas of:

- Points Of Entry
- Public Health Measures
- Health Documents
- General Provisions
- Final Provisions
- Definitions, Purpose and Scope, Principles and Responsible Authorities
- The Emergency Committee
- Decision Instrument for The Assessment and Notification of Events.

The Working Group also discussed a consolidated proposal by the proponent States Parties of proposed amendments to Article 13A Equitable Access to Health Products, Technologies and Know-How for Public Health Response, as well as Article 8 Consultation.

The IHR are an instrument of international law that is legally-binding on 196 State Parties, including the 194 WHO Member States. The IHR, in their version adopted in 2005, have been amended twice – in 2014 and 2022 (the most-recent amendments will come into force in May 2024). The newest proposed amendments come in response to the challenges posed by the COVID-19 pandemic.

WHO IN BOSNIA AND HERZEGOVINA

SDG Week in BiH and WHO CO contribution

This year, SDG Week in BiH 2023 took place in the week of 9 – 13 October 2023, under the general theme “Partnership – accelerators of sustainable and inclusive development”. WCO BiH has organised three events as part of several events organised by UN agencies: (i) healthy ageing; (ii) promoting healthy lifestyles; and (iii) health and emergencies. Partners were given a forum to share their contributions to promote public health and through them highlight the work of WHO.

Participants were representatives of all WHO/CO partners in BiH – FBiH and RS and Brcko District: Ministries in charge of health, IPHs, Red Cross Society of BiH (including local chapters); Civil Protection Agency; CSOs Genesis, GSS BiH and all other engaged in health issues; representatives of UN agencies in BiH; representatives of local communities, staff from local hospitals and/or health centres, local teachers, local youth groups – end beneficiaries (women, men, children).

Objectives were to establishing a dialogue between partners in health, both public and CSO sector, underlining the necessity to cooperate and complement each other’s work and effort; exchange of best ideas and practices among the partners in working in different environments and communities, dealing with diverse members of the public and their different needs; celebrate achievements of past engagements; exchange of best practices among partners working on projects tackling specific issues (e.g. promotion of vaccination, health promotion, disease prevention, youth health; mental health) - with groups considered as more vulnerable such as migrants, long-term unemployed persons, families with young children or ethnic minorities.

Healthy Aging Lecture, Zenica, 9 October 2023

WHO Country Office in Bosnia and Herzegovina will organise an event on the topic of healthy aging, in cooperation with Faculty of Medicine, University of Zenica and Zdena Šarić.

Zdena Šarić is one of the Healthy Aging 50: Leaders transforming the world to be a better place to grow older, an inspirational champion that showcase what is already possible in the area of healthy ageing, whether at local, national, regional, or global levels. The lecture she gave to students, local community, members of NGOs stressed the position of elderly people, many of whom are combating serious mental health issues, without the supporting network.

On this occasion, on behalf of World Health Organization, Dr Cooreman, Special Representative WHO in BiH awarded Ms Šarić with Certificate congratulating her on being part of the Healthy Ageing 50 leaders who are transforming the world to be a better place to grow older.



Prevention of disease by promoting Healthy Lifestyles, Doboj, 11 October

The theme of the event was disease prevention and promotion of healthy lifestyles, with panellists from Red Cross of the Republika Srpska, Public Health Centre Brcko District and NGO GENESIS, Banja Luka.



Emergency Situations and Environment, Livno, 13 October

Public debate was held with some of the key stakeholders and activists in the area of emergency preparation and response. This was followed by a discussion on significant topics such as risk identification, chain of command, crisis communication and cooperation between different actors in an emergency situation. The panellists were representatives from Red Cross of the Federation of BIH, Search and Rescue Organization of Livno, and Danish Refugee Council in BIH. 13 October is globally celebrated as Disaster Risk Reduction Day.



HEALTH TOPICS

Climate change

The global climate is changing. This affects human health, well-being and life on earth. In the near future it will lead to an amplification of current health problems, as well as new risks and pressures for the environment and the social and economic determinants of health.

Digital health

Digital health is the field of knowledge and practice associated with the development and use of digital technologies to improve health. Digital health expands the concept of eHealth to include digital consumers, with a wider range of smart devices and connected equipment. The following areas are commonly understood as being part of, or related to, digital health: artificial intelligence, big data, blockchain, health data, health information systems, the infodemic, the Internet of Things, interoperability and telemedicine.

Mental health

Mental health should be seen as a valued source of human capital or well-being in society. It contributes to individual and population health, happiness and welfare, enables social interaction, cohesion and security, and feeds national output and labour force productivity. We need good mental health to succeed in all areas of life.

Yet, individuals with mental ill-health are often shunned and denied access to care, with services for promoting and protecting mental health and preventing ill-health often starved of resources. It is vital to not only address the needs of people with defined mental disorders but also to protect and promote the mental health of all people, and recognize the intrinsic value of positive mental health.

Vaccines and immunization

Immunization is one of the most cost-effective ways to save lives and promote good health and well-being throughout the life course. Every year, vaccines save millions of lives, and millions more people are protected from disease and disability. By preventing many serious early-childhood infectious diseases, like polio and measles, immunization helps children grow into healthy adults. Other vaccines given early in life help prevent liver and cervical cancer many years later, and vaccination of older adults protects them from influenza, COVID-19 and other serious diseases.

The WHO European Region has made great progress in recent decades on many of these fronts, but there are still gaps in vaccination coverage that put especially the most vulnerable at risk. Access to vaccines, including against human papillomavirus and SARS-CoV2, is also not equitable within and among countries.

WHO EMERGENCIES

Health emergencies list

The health emergencies list details the disease outbreaks, disasters and humanitarian crises where WHO plays an essential role in supporting countries to respond to and recover from emergencies with public health consequences.

[Hospitals in the Gaza Strip](#)

[COVID-19](#)

[Ukraine emergency](#)

[Earthquake in Türkiye and Syrian Arab Republic](#)

WHO CAMPAIGNS

Keeping safe from COVID-19, influenza, and respiratory syncytial virus (RSV) this autumn and winter. Protecting lives. Strengthening health systems

On 29 September 2023, the WHO Regional Office for Europe launched the campaign “Keeping safe from COVID-19, influenza, and RSV this autumn and winter. Protecting lives. Strengthening health systems”.

The campaign aims to highlight that:

it’s vital for vulnerable populations to stay up to date with their COVID-19 vaccination and also to get an influenza vaccine this autumn/winter; and

it’s important that everyone takes individual measures to reduce the risk of infection from respiratory viruses.

The campaign is also seeking to share best practices from successful health protection campaigns, including vaccination, and other initiatives in response to infections from respiratory viruses.

PUBLICATIONS

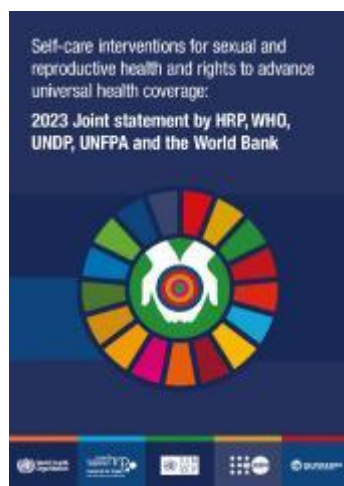
[Promoting physical activity and healthy diets for healthy ageing in the WHO European Region](#)



Lifestyle and medical advances that contribute to longevity are achievements to celebrate, but they have brought considerable and unintended social, economic and health challenges as life expectancy increases faster than life-years spent in good health. In this context, healthy ageing – defined by WHO as a process of developing and maintaining functional abilities to foster well-being in older adults – not only increases the welfare of older adults, but also directly influences health-care and long-term care costs. Although health status in older ages mainly is dependent on lifestyles determined during adulthood and youth, the level of physical activity and quality of diet in older age are also important determinants of health, well-being, functional ability, mobility and independence. For most older people, healthy ageing means much more than just the absence of diseases; it also represents the maintenance of good functional

ability. This report advocates for investment in promoting healthy lifestyles in the older population to encourage active healthy ageing and increase healthy life expectancy. Inspiring examples of innovations in promoting physical activity and healthy diets from across the WHO European Region are presented to support implementation and scale-up of interventions by Member States.

[Self-care interventions for sexual and reproductive health and rights to advance universal health coverage: 2023 joint statement by HRP, WHO, UNDP, UNFPA and the World Bank](#)



According to the latest available data, over half of the world's population lack access to essential health services, and health worker shortages are estimated to reach 10 million by 2030. These contextual factors point to an urgent need to explore innovative strategies – that go beyond a conventional health-sector response – for reaching people with the health services they need.

Self-care interventions offer huge potential to enhance individual agency and reduce health inequities by increasing the availability of accessible, acceptable and affordable health-care options that are in addition to and can complement services and care received at a healthcare facility. As we reach the half-way mark towards the end of the 15-year Sustainable Development Goals (SDGs) period, and we look at the challenges facing the world, we need to embrace potentially transformative solutions. WHO recommends self-care interventions for every country and economic setting, as critical tools on a path to improve primary health care, reach universal health coverage (UHC), promote health, keep the world safe and serve the vulnerable.

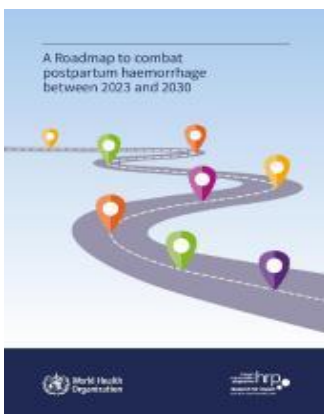
Overview of methods to assess population exposure to ambient air pollution



This document summarises several air quality measurement and modelling methods that can be used to estimate ground-level air pollutant concentrations and presents multiple approaches to monitoring ambient air pollution at different spatial and temporal scales. These methods are crucial for estimating population exposures, which can be defined as the product of the pollutant concentration and the time over which a person is in contact with this pollutant.

Air quality measurements and models are presented in order of increasing complexity/technology, starting with the least complex. For each method a brief description is provided followed by its strengths and limitations as well as a few examples of global or regional applications. A comparison with advantages and disadvantages for each monitoring method is then presented, followed by a brief discussion on exposure disparities.

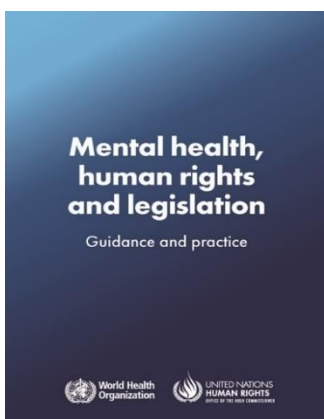
A roadmap to combat postpartum haemorrhage between 2023 and 2030



Postpartum haemorrhage (PPH), commonly defined as a blood loss of 500 ml or more within 24 hours after birth, is the leading cause of maternal mortality worldwide. It affects millions of women every year and accounts for over 20% of all maternal deaths reported globally. Death from PPH is largely preventable and has been nearly eliminated in high-income countries (HICs). Yet women in low- and middle-income countries (LMICs) continue to be disproportionately affected. Most maternal deaths from PPH occur in sub-Saharan Africa and south Asia.

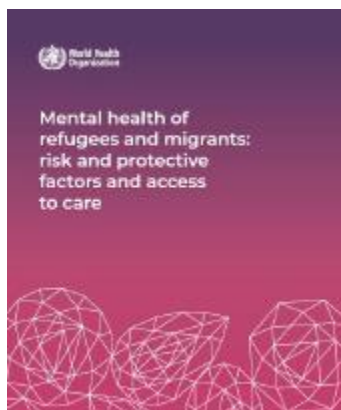
This Roadmap is intended for leading actors in public health and all stakeholders working in the PPH ecosystem: the international community, funders, researchers, innovators and industry, professional associations and guideline developers, implementers (including 3 CSOs and NGOs), ministries of health, and also the general public – particularly women.

Mental health, human rights and legislation: guidance and practice



Mental health is increasingly recognized as a public health and human rights concern. Many existing mental health laws fall short in addressing discrimination and rights violations. To assist countries in reforming their legislation, the World Health Organization and the Office of the High Commissioner for Human Rights introduced the “Mental health, human rights and legislation: guidance and practice” publication. This guidance promotes a rights-based approach to mental health, emphasizes deinstitutionalization, and offers ways to counter stigma and discrimination. It also advocates for the elimination of coercive practices, ensuring the respect of patients' rights. Additionally, the guide provides tools for countries to ensure their laws meet human rights standards.

Mental health of refugees and migrants: risk and protective factors and access to care

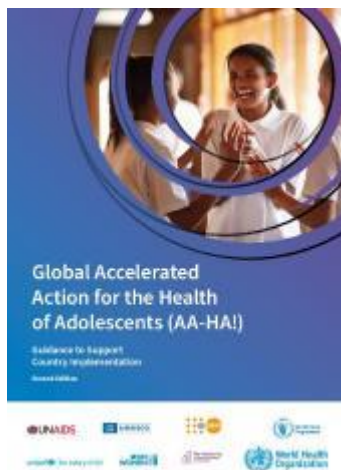


This is the fifth report of the Global Evidence Review on Health and Migration (GEHM) series. The publication focuses on the mental health needs of refugees and migrants by providing an overview of the available evidence on patterns of risk and protective factors and of facilitators and barriers to care at all levels (individual, family, community and national government). It identifies five high-level themes, each of which has implications for research and policy and is relevant across refugee and migrant groups, contexts and stages of the migration process: self-identity and community support; basic needs and security; cultural concepts of mental health as well as stigma; exposure to adversity and potentially traumatic events; navigating mental health and other systems and services.

Based on these five themes, policy considerations are put forward to serve as a starting point for recognising and responding to the needs of refugee and migrant groups.

Ensuring that those at risk of mental health conditions are identified and adequately supported, while understanding the factors that facilitate access to mental health services is essential for effective policy and programming.

Global Accelerated Action for the Health of Adolescents (AA-HA!) - Second edition



Adolescents are not simply old children or young adults. This deceptively simple observation lies at the heart of Global Accelerated Action for the Health of Adolescents (AA-HA!): guidance to support country implementation, which reflects the coming of age of adolescent health within global public health.

The second edition of the AA-HA! guidance is a collaborative effort spearheaded by the World Health Organization in collaboration with UNAIDS, UNESCO, UNFPA, UNICEF, UN WOMEN, the World Food Programme and PMNCH. Building on the solid foundation of the first edition and voices of adolescents and young adults around the world, this multi-agency product has evolved to incorporate valuable learnings from the past six years, including of the COVID-19 pandemic's impacts. Latest estimates of mortality and

disease burden, updated evidence, and a broader focus on wellbeing make our second edition a cutting-edge resource for policy makers in the area of adolescent health and well-being.

WHO STORIES

[WHO refugee response in Armenia](#)

The health needs are immense for the more than 100 000 refugees that have entered Armenia since 20 September 2023. The United Nations High Commissioner for Refugees (UNHCR) has assessed that close to 42 000 refugees require health assistance. In addition to the overall health needs of the refugee population, more than 200 people died and over 300 were injured following the explosion on 25 September 2023 at a fuel depot, as thousands of people were on the move. Such a high number of severe burns patients would place immense strain on any health system, due to the intensive care and pain management required, along with the risk of secondary infections.

WHO and the Armenian Ministry of Health quickly established an Emergency Medical Teams (EMT) coordination cell to bring in specialised care from across the world and to provide the best possible medical services for the burns patients. To date, close to 20 patients have been medically evacuated and are receiving care abroad.

PODCASTS

[Episode #105 - Growing up informed: sexuality education](#)

Are you a parent, teacher or just someone who cares about sexuality education? Dr Chandra-Mauli Venkataraman answers the important questions on sexuality education in the latest episode of Science in 5. Tune in to learn why it is crucial for our overall health and when, how and by whom it should be provided.

[Awake at Night](#)

Podcast is an in-depth interview series focused on remarkable frontline United Nations staff members, including WHO staff, who have dedicated their lives to helping people in parts of the world where people have the hardest lives - war zones, refugee camps, slums and areas hit by pandemics, natural disasters and the devastation of climate change.

[Global Health Matters: Snakebite gurus reveal untold truths](#)

In this episode, guests tackle snakebite, a topic suggested by one of our research partner organizations, the Oswaldo Cruz Foundation (Fiocruz) in Brazil. While snakebite is a neglected public health issue, the World Health Organization (WHO) estimates that each year, 5.4 million people are bitten by snakes, and up to 137,880 people die from snake bites. Host Garry Aslanyan speaks with Fan Hui Wen and Thea Litschka-Koen, snakebite gurus in Brazil and Eswatini, respectively, who reveal untold truths about snake bites in their communities and the complexities associated with producing and administering antivenom. Diogo Martins, the research lead for snakebite at Wellcome in the United Kingdom, makes the case for why we should consider snakebite a global health issue.

WHO COURSES

[WHO Health & Plastics Dialogues - next three webinars](#)

Join us for a continuation of the WHO series of dialogues on plastics and health ahead of INC3.

Registration links:

[Webinar #2 Registration -Zoom](#)

[Webinar #3 Registration - Zoom](#)

[Webinar #4 Registration - Zoom](#)

More information on this [leaflet](#)

[WHO Academy e-course: Harnessing the power of routine health facility data: Tuberculosis](#)

The Global Tuberculosis Programme in collaboration with the WHO Academy is pleased to announce the launch of the e-course, **Harnessing the power of routine health facility data: Tuberculosis**.

The WHO e-course aims to **strengthen technical capacity on the analysis and use of TB surveillance data** for programme planning. The course uses adult learning principles with material consisting of **theory, videos, case studies and practice exercises**. A **WHO Academy Award of Completion** will be provided with the successful completion of each module.

WHO EVENTS

[73rd session of the WHO Regional Committee for Europe](#)

24–26 October 2023, Astana, Kazakhstan

Health ministers and high-level delegates from the 53 Member States of the WHO European Region, as well as representatives of partner organizations and civil society, will meet in Astana, Kazakhstan, on 24–26 October 2023 for the 73rd session of the WHO Regional Committee for Europe (RC73).

In 2023, WHO marks its 75th anniversary, 45 years since the signing of the historic Alma-Ata Declaration on primary health care (PHC), and the mid-point of the European Programme of Work (EPW) 2020–2025 – “**United Action for Better Health in Europe**”. RC73 will therefore be an opportunity for delegates to reflect on the current state of health and well-being across the Region, take stock of progress in delivering the EPW, celebrate public health milestones over the past 75 years, and discuss what is needed to address current and future challenges.

[Learn more.](#)

28th annual meeting of the Regions for Health Network – “Health for all: addressing challenges, sharing experiences”

15 – 17 November 2023, Seville, Andalusia (Spain)

WHO/Europe’s Regions for Health Network (RHN) is set to host its 28th annual meeting in Seville, Andalusia (Spain) from 15–17 November 2023. Founded in 1992, the RHN serves as a collaborative platform for over 30 regions, numerous partners, and Member States of the WHO European Region. Its mission is to foster better health and well-being for all, ensure universal access to quality care, safeguard against health emergencies, and leverage science, data, and innovation. The upcoming meeting in Andalusia, one of RHN's earliest members, will focus on "**Health for all: addressing challenges, sharing experiences**".

More on [Regions for Health Network \(RHN\)](#).

COP28 Health Pavilion

30 November – 12 December 2023, Dubai, United Arab Emirates

WHO in collaboration with the **Wellcome Trust** and partners will host the Health Pavilion at the COP28 UN Climate Conference, taking place in Dubai, the UAE, from 30 November to 12 December 2023.

The COP28 Health Pavilion will convene the global health community and key stakeholders across various sectors to ensure health and equity are placed at the centre of climate negotiations. It will offer a rich 2-week programme of events showcasing evidence, initiatives and solutions to maximize the health benefits of tackling climate change across regions, sectors and communities.

The [call for side events at the COP28 Health Pavilion](#) is open until 15 September 2023.

WHO VIDEOS

Latest videos:

[New funding to ensure 370 million children receive polio vaccinations & to boost health innovation](#)

[How to check your vision? Use WHOeyes app!](#)

Check out our official video channel on YouTube for the latest video news on our work from around the globe:

<https://www.youtube.com/c/who/playlists>.

SOURCES

- <https://www.who.int/>
- <https://www.un.org/en/>
- <https://www.youtube.com/c/whoregionalofficeforeurope>
- <https://eppi.ioe.ac.uk/cms/>

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