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BREAST CANCER AWARENESS, OCTOBER 2023



Breast cancer stands as the leading form of cancer worldwide, contributing to 12% of global cancer diagnoses. In 2020, 2.3 million women were diagnosed with breast cancer, and 685,000 succumbed to the disease. Breast cancer affects women predominantly in 158 out of 183 countries. Tragically, most women in many countries are diagnosed too late, receive suboptimal treatment, and lack proper palliative care. The brunt of premature breast cancer deaths, over 70%, strikes low- and middle-income countries. Addressing breast cancer is not just a medical concern but also a pivotal gender-equity and human rights issue.

WHO's Global Breast Cancer Initiative (GBCI)

Aiming to lessen breast cancer mortality, GBCI targets a 2.5% yearly reduction, with hopes to prevent 2.5 million deaths between 2020-2040, by focusing on:

- ✓ Promoting early detection through public health education.
- ✓ Ensuring timely diagnosis.
- ✓ Providing comprehensive management.

The initiative seeks a significant decrease in late-stage diagnoses and emphasizes early intervention. Recognizing the limitations of mammographic screening in some regions, WHO pushes for enhanced public awareness and better health worker training.

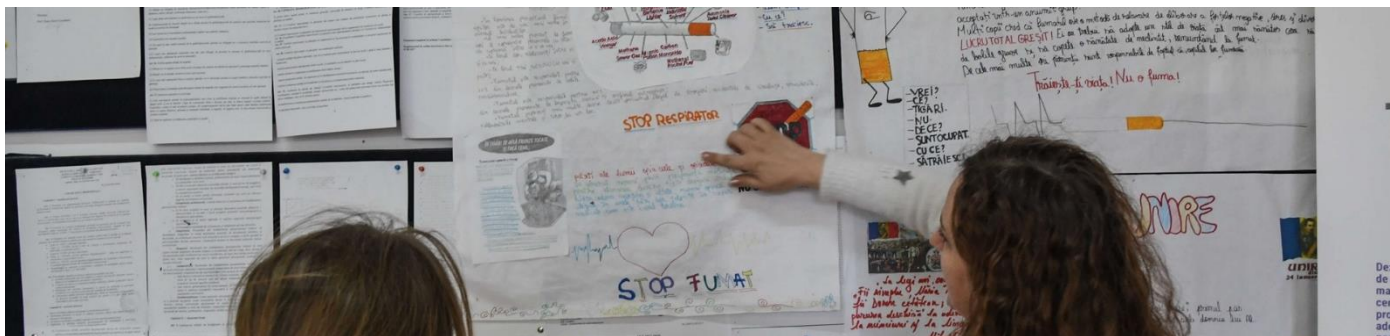
Highlighted Publications & Initiatives:

[Global breast cancer initiative implementation framework: assessing, strengthening and scaling up of services for the early detection and management of breast cancer: executive summary.](#)

[The Global Breast Cancer Initiative.](#)

[Improving breast cancer survival. A new framework for action.](#)

WHO LAUNCHES TOOLKIT FOR SCHOOLS TO CREATE A TOBACCO- AND NICOTINE-FREE ENVIRONMENT



“Every time I pass by a smoking person, I hold my breath and try to move faster. I don’t like cigarette smoke. It’s bad for your health. I don’t know why they invented cigarettes. I wish they didn’t.”

“Oh, they invented cigarettes to make money. They profit from it.”

Amir and Insar, school children from Kazakhstan

WHO is launching a new toolkit to provide practical advice to management and staff in schools on how to develop, communicate, educate on, and enforce effective nicotine- and tobacco-free policies in schools. Around 88% of adult smokers have their first cigarette before turning 18 years of age, and some start as early as age 11. While smoking continues to decline among European adolescents, the use of novel and emerging tobacco and nicotine products – including electronic cigarettes – is on the rise. These products are often marketed specifically at young people, who are an important target market for the tobacco industry. The WHO toolkit complements the global guide to creating nicotine- and tobacco-free schools.

Dr Hans Henri P. Kluge, Regional Director for the WHO European Region, states, *“It is deeply concerning that the tobacco industry is still targeting young people and makes vast profits, harming their health. Schools must be safe spaces for young people, where they are free from exposure to, or pressure to use nicotine products. Creating a smoke- and nicotine-free environment in school settings is fundamental to helping prevent young people from starting smoking. If we don’t take urgent action now, we risk seeing the next generation of tobacco and nicotine users recruited through tobacco industries’ unethical practices.”*

Toolkit recommendations:

- Develop a nicotine- and tobacco-free school policy that is comprehensive so that it covers all students, all teaching and administrative staff, and all visitors.
- Provide preventive education and support for those who want to quit smoking.
- Co-create a communications plan that informs young people about all aspects of tobacco and nicotine use, from the harmful health effects of second-hand smoke to the tactics of the tobacco industry and frame the question as an issue rather than a disciplinary matter.
- For optimal enforcement, include measures to address noncompliance and consistently monitor the effectiveness of the policy.

More on this topic and the launch at: <https://www.who.int/europe/news/item/26-09-2023-who-launches-toolkit-for-schools-to-create-a-tobacco-and-nicotine-free-environment>.

BAN SMOKING AND VAPING IN SCHOOL TO PROTECT YOUNG PEOPLE

The World Health Organization released two new publications, **Freedom from tobacco and nicotine: guide for schools**, and **Nicotine- and tobacco-free school toolkit** to help protect children's health just in time for back-to-school season in many countries.

The tobacco industry [relentlessly targets young people](#) with tobacco and nicotine products resulting in e-cigarette use increasing and 9 out of 10 smokers starting before the age of 18. Products have also been made more affordable for young people through the sale of single-use cigarettes and e-cigarettes, which typically lack health warnings.

Regulators in the United States of America last month [warned companies to stop selling illegal e-cigarettes](#) that appeal to youth by resembling school supplies, cartoon characters, and even teddy bears.

"Whether sitting in class, playing games outside or waiting at the school bus stop, we must protect young people from deadly second-hand smoke and toxic e-cigarette emissions as well as ads promoting these products," said Dr Ruediger Krech, Director of Health Promotion, World Health Organization.

The new guide and toolkit are step-by-step manuals for schools to create nicotine- and tobacco-free campuses, but it takes a "whole-of-school" approach – which includes teachers, staff, students, parents, etc. The guide and toolkit include topics on how to support students to quit, education campaigns, implementing policies and how to enforce them.

The guide highlights four ways to foster a nicotine- and tobacco-free environment for young people:

- ✓ banning nicotine and tobacco products on school campuses;
- ✓ prohibiting the sale of nicotine and tobacco products near schools;
- ✓ banning direct and indirect ads and promotion of nicotine and tobacco products near schools; and
- ✓ refusing sponsorship or engagement with tobacco and nicotine industries.

Countries worldwide were highlighted in the publication as having successfully implemented policies that support tobacco- and nicotine-free campuses including India, Indonesia, Ireland, Kyrgyzstan, Morocco, Qatar, Syria, Saudi Arabia and Ukraine.

The new WHO guide can help create nicotine- and tobacco-free schools that help keep kids healthy and safe. Nicotine- and tobacco-free policies help to prevent young people from starting to smoke; create a healthier, more productive student body; protect youth from toxic chemicals in second-hand smoke; reduce cigarette litter; and cut cleaning costs.

More information is available at: <https://www.who.int/news/item/26-09-2023-ban-smoking-and-vaping-in-school-to-protect-young-people>.

LONG COVID IN CHILDREN: THE SHADOW PANDEMIC



12-year-old Jay's life post-COVID-19 is a poignant reminder of the looming health challenge termed "long COVID". As the world emerges from the acute phase of the COVID-19 pandemic, an undercurrent of long-lasting symptoms in some children and adults casts a long shadow, presenting medical and societal challenges.

Symptoms and frequency

Renowned cardiac specialist and researcher Professor Selina Kikkenborg Berg highlights that children with long COVID often experience symptoms such as headache, fatigue, sleep disturbances, concentration difficulties, and abdominal pain. While it is comforting to note that children are less frequently affected than adults, and most recover within six months, a concerning 15% continue to experience symptoms after a year. These persistent symptoms hinder their normal developmental milestones, impacting their schooling, social interactions, and overall quality of life.

Diagnostic challenges

Long COVID presents unique diagnostic challenges. A definitive test is still elusive, and diverse symptom presentations add to the complexity. Moreover, since children often manifest mild or no symptoms initially, tracing the illness back to a COVID-19 infection can be difficult. The consequence is a diagnostic journey that bounces children from one specialist to another. Parents grapple with a heartbreaking question: "What is wrong with my child?", a sentiment echoing the wider community's search for answers.

Impacts on families

The weight of this uncertainty affects not just the child but the entire family. With limited information and support, parents often make significant life adjustments, such as leaving their jobs, in a bid to support their ailing child.

Call to Action

Professor Berg emphasizes that the challenge of long COVID isn't isolated. It shines a spotlight on the broader issue of post-viral illnesses, an area that has been historically under-researched. She urges health systems and policymakers to recognize the scale and implications of this issue and to fortify the health infrastructure with multidisciplinary teams and patient-centric treatment strategies.

WHO/Europe passionately advocates for focused research, acknowledging the problem, and devising effective rehabilitation strategies. As we chart our course beyond the pandemic's acute phase, addressing the enigma of long COVID remains paramount.

More information about Long COVID is available at: <https://www.who.int/europe/activities/increasing-recognition-research-and-rehabilitation-for-post-covid-19-condition-long-covid>.

RACING TO MEET THE HEALTH NEEDS OF REFUGEES ENTERING ARMENIA



WHO intensifies support to Armenian Ministry of Health at this critical time

In less than a week, over 100 000 ethnic Armenians from Nagorno-Karabakh – have moved into neighbouring Armenia, leading to a humanitarian crisis with pressing health concerns.

“As the exodus began, I swiftly deployed my Special Envoy Robb Butler to help assess the situation and strategize with the Armenian Ministry of Health on a comprehensive health emergency plan. We have already mobilized health supplies and international expertise to assist a health system dealing with a sudden, massive influx of refugees, many of whom have specific medical needs,” noted Dr Hans Henri P. Kluge, Regional Director of the WHO Regional Office for Europe.

WHO had already pre-positioned trauma supplies to Armenia. Following the dramatic explosion of a fuel depot along the route taken by those entering Armenia, WHO is dispatching burn kits to support the advanced care need for severe burns patients. To support the general health needs of the displaced population, WHO is also sending medicines for non-communicable diseases, that will cover three months of treatments for up to 50 000 persons.

“We’ve activated our emergency systems and will be sending experts to the country across a range of disciplines including mental health, burns management, essential health services, and emergency coordination following a full assessment of the needs. The challenges are truly enormous, and we’re there to do all we can.”

Robb Butler, the Regional Director’s Special Envoy, has met with Minister of Health Anahit Avanesyan to reiterate WHO’s full and unwavering support. Based on his discussions and field mission to a critical refugee registration point, WHO/Europe and WHO/Armenia have agreed with the Ministry of Health on the following:

- ✓ Mobilizing burns experts from Israel, Belgium and Lebanon;
- ✓ Addressing the refugees’ immunisation needs;
- ✓ Deploying a mental health team;
- ✓ Establishing modular clinics in distant areas;
- ✓ Assisting in the integration of health workers from the Karabakh region into Armenia’s healthcare system.

“My visit to Goris, near the border crossing-point, where I met with officials, local non-governmental organizations and humanitarian responders and beneficiaries of health and other essential services, filled me with sadness but also hope,” said Mr Butler.

The full statement at: <https://www.who.int/europe/news/item/01-10-2023-racing-to-meet-the-health-needs-of-refugees-entering-armenia>.

WHO/EUROPE ENGAGES YOUNG ACTIVISTS BY LAUNCHING A NEW YOUTH4HEALTH NETWORK TO MEET THE HEALTH CHALLENGES OF THE FUTURE



WHO/Europe polled youth activists from Europe and central Asia about the major public health challenges they foresee. Many highlighted climate change, the sustainability of health systems, noncommunicable diseases, and an ageing population.

Juliane Mirow, 22, from Germany, voiced concerns about climate change, global conflict, and health inequities. Nadhira Samsudeen, 22, from the United Kingdom, emphasized the challenges posed by climate change but noted the potential of technology to address these issues. Judita Perndrecaj, 26, from Albania, mentioned the emergence of new infectious diseases and chronic conditions. To respond to these and other concerns and to increase engagement with youth representatives on pressing public health challenges, WHO/Europe has today formally launched Youth4Health, its first-ever youth network on health and well-being. The network already includes over 80 individual members and 18 youth organisations from 29 countries across Europe and central Asia.

Admissions to the network are rolling. All youth organisations, organisations working in the youth space, Member State youth delegates, youth activists, people with an interest and experience in health and well-being, and youth parliamentarians are encouraged to apply if they are: based in the WHO European Region; and between the ages of 10 and 30.

At the first Youth4Health forum held in 2022 in Tirana, Albania, WHO/Europe and youth representatives agreed on concrete action points for increased youth engagement, including the establishment of a WHO/Europe youth network. This key commitment has now been turned into reality with the launch of the network at the end of September.

What's next?

WHO/Europe will engage the Youth4Health network across all its workstreams and is planning youth events, such as a youth event on immunisation in December, as well as ensuring that youth representatives are engaged in events with high-level decision-makers. Together with the network, WHO/Europe also advocates for youth representatives to be included in delegations to the Seventy-third session of the WHO Regional Committee in Astana, Kazakhstan, in October, which brings together all 53 Member States of the WHO European Region.

[Youth4Health initiative.](#)

The full report on this event: <https://www.who.int/europe/news/item/25-09-2023-who-europe-engages-young-activists-by-launching-a-new-youth4health-network>.

CALLING ALL REHABILITATION PROFESSIONALS: WHAT HAS IT BEEN LIKE TO WORK DURING THE COVID-19 PANDEMIC?



The WHO Regional Office for Europe is conducting an anonymous 15-minute survey for rehabilitation professionals working in five countries (Armenia, Georgia, Italy, Poland and the United Kingdom) on the impact of the COVID-19 pandemic on the rehabilitation workforce and on service delivery.

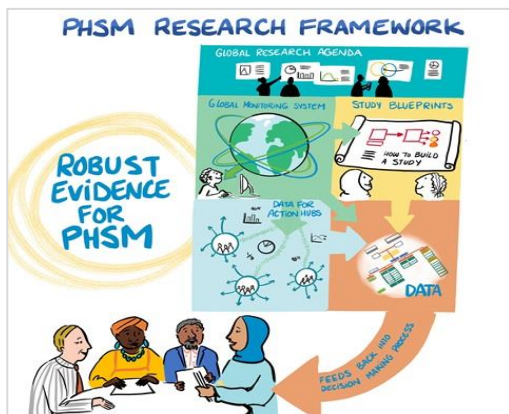
The survey has three main purposes:

- 1) to document experiences, recognizing the unique contributions of rehabilitation professionals during this exceptionally difficult period;
- 2) to give rehabilitation professionals working in different roles and with varying levels of responsibility the opportunity to voice their opinions and shape policy; and
- 3) to inform future emergency responses so that health systems and rehabilitation services in particular can be better prepared.

WHO/Europe would appreciate as many responses as possible by 31 October 2023. Please feel free to share the survey relevant with your rehabilitation colleagues.

More information is available at: <https://www.who.int/europe/news/item/28-09-2023-calling-all-rehabilitation-professionals--what-has-it-been-like-to-work-during-the-covid-19-pandemic>.

SECOND PUBLIC SURVEY TO INFORM THE GLOBAL RESEARCH AGENDA ON PUBLIC HEALTH AND SOCIAL MEASURES



The World Health Organization (WHO) welcomes stakeholders from sectors such as health, education, transport, agriculture, finance, social services, at any level and in any type of role to complete a public survey to identify priorities for a global research agenda on Public Health and Social Measures (PHSM) during health emergencies.

The survey aims to identify medium- to long-term research priorities on PHSM for multiple hazards and will be open for three weeks. The survey can currently be accessed in English, and from early October will also be made available in Spanish and French.

Background

The COVID-19 pandemic put a spotlight on the critical role that PHSM have throughout the emergency management cycle. PHSM refer to a broad array of non-pharmaceutical interventions implemented by individuals, communities and governments to reduce the risk and scale of transmission of epidemic- and pandemic-prone infectious diseases. They can be used to address outbreaks with different modes of transmission and are key to protecting the health of communities.

The results of this survey will inform a global research agenda setting out priorities relevant to countries, researchers, and research funders to support the better understanding of the effectiveness of PHSM and their broader health, social and economic consequences during health emergencies.

The research agenda is being developed as part of WHO's multi-year PHSM initiative, which aims to accelerate global research and strengthen precision in PHSM policies and implementation. Its development started with a global technical consultation in 2021, which identified key themes and research questions. Subsequently, the questions were prioritized through a first public survey focusing on immediate research priorities pertinent to the COVID-19 pandemic. Further information on this can be found in this [web article](#).

Survey link is available at: <https://extranet.who.int/dataformv3/index.php/942538?lang=en>.

TOP DONOR GERMANY SIGNS MAJOR CONTRIBUTION TO WHO FOR HEALTH EMERGENCIES; SIGNS HOST AGREEMENT FOR WHO PANDEMIC HUB



Germany deepened its long-standing engagement with WHO with two new agreements: one to contribute a further €40 million to WHO's work in health emergencies, and a second to host the Berlin-based WHO Hub for Pandemic and Epidemic Intelligence.

With the new contribution, Germany has provided €53.5 million so far this year to support WHO's response to more than 50 active health emergencies.

"This is important because climate disasters, conflicts, and the ongoing pandemic demand urgent action," said Susanne Baumann, State Secretary of the Federal Foreign Office for Germany (GFFO), whose delegation met with WHO Director-General Dr Tedros Adhanom Ghebreyesus. *"Our support is flexible and vital for saving lives around the globe."*

Through GFFO, the country provides substantial funding to humanitarian crises in Afghanistan, Libya, Ukraine, Yemen, and to Ebola responses in Africa.

Germany is an all-time top donor to WHO's Contingency Fund for Emergencies (CFE), having contributed €115 million since the CFE's inception in 2015. The contributions have made a significant impact on the health of people caught up in humanitarian crises; this year alone, CFE funding allowed WHO to bring immediate, lifesaving support to victims of floods in Libya, conflict in Sudan, cholera and diphtheria outbreaks, and earthquakes in Türkiye and Syria.

Of the new €40 million contribution, €20 million goes to the WHO Health Emergencies Appeal 2023, €10 million to the Ukraine emergency, €10 million for emergencies in Africa.

Additional information on this: [Germany - Partner in global health.](#)

More information is available at: <https://www.who.int/news/item/28-09-2023-top-donor-germany-signs-major-contribution-to-who-for-health-emergencies--signs-host-agreement-for-who-pandemic-hub>.

HEALTH IS EVERYONE'S CONCERN: WHO GUIDANCE SUPPORTS ACTION ACROSS SECTORS



The latest WHO guidance on intersectoral monitoring for health reiterates the need for countries to develop a combination of targeted and universal policies across areas such as social affairs, urban planning, urban transport, education, work and the environment.

Roughly 80% of population health is affected by the external circumstances and conditions in which people live, work and age. These are largely shaped by policies outside the health sector and are influenced by various factors beyond age, genetic makeup and access to health care.

For instance, providing people with opportunities for physical activity, such as safe walking and cycling routes, can mitigate the negative health effects associated with a sedentary lifestyle. Similarly, ensuring easy access to healthy food and education on nutrition can reduce dietary risks.

This is why effective health promotion requires action coordinated across multiple sectors. The new guidance provides a summary of different forms of intersectoral monitoring, and outlines relevant indicators, tools, barriers, analytical approaches and frameworks.

Successful implementation of intersectoral action can yield several benefits, such as better understanding among policy-makers regarding the impact of their work on population health, changes in policy direction, development and dissemination of relevant research, and stronger partnerships between health and other government departments. Routine monitoring and reporting by public health authorities facilitate the evaluation and planning of intersectoral actions and policies.

Reliable data and indicators are needed to help governments measure progress, identify good practices, and adopt solutions for meaningful and equitable intersectoral action. The guidance compiled by WHO/Europe, available in English and Russian, aims to help with organizing intersectoral monitoring by explaining the basic requirements and possible obstacles. Alongside these theoretical and preparatory aspects, it provides practical examples of conceptual frameworks, indicator sets and tools that can assist in implementation.

In 2021 Member States adopted a new framework to measure health and well-being in the WHO European Region. The framework is measuring progress across the key areas of the European Programme of Work, 2020–2025, while also considering the impacts of the COVID-19 pandemic on national health systems.

The [Guidance on intersectoral monitoring for health](#).

WHO, WADA SIGN MEMORANDUM OF UNDERSTANDING TO COLLABORATE ON CLEAN, DRUG-FREE SPORT



The World Anti-Doping Agency (WADA) and WHO have signed a four-year memorandum of understanding (MoU) to allow experts from both international organizations to collaborate and share information on issues where anti-doping and public health intersect.

The MoU was signed in Geneva, Switzerland, by WADA President Witold Bańka and WHO Director-General Dr Tedros Adhanom Ghebreyesus. The agreement will run until 1 October 2027 and provides a framework of cooperation between WHO and WADA to further their goals, specifically with regards to health promotion, the prevention of substance abuse and emerging drugs, and the promotion of clean sport.

Mr Bańka said: *“The memorandum of understanding signed today with the World Health Organization is a watershed moment that will benefit anti-doping efforts worldwide. WADA leads the global collaborative mission for doping-free sport; and, in so doing, we also protect the health of individuals around the world. One of the three criteria for a substance to be added to WADA’s Prohibited List of Substances and Methods is if it represents an actual or potential health risk to athletes. Through our agreement with WHO, experts from both organizations will be able to work collaboratively to exchange information on emerging substances and reinforce scientific positions that will ultimately benefit not only athletes, but society as a whole.”*

“WHO’s commitment to health and well-being of society at large fits perfectly with our mission. I want to thank Dr Tedros and his team at WHO for their efforts leading up to this historic agreement and for their commitment to healthy, clean sport around the globe.”

Dr Tedros said partnering with WADA reflected WHO’s commitment to work closely with the sport sector to encourage increased physical activity globally in order to promote healthier lives for all.

WADA’s [Prohibited List of Substances and Methods](#).

More information is available at: <https://www.who.int/news/item/02-10-2023-who-wada-sign-memorandum-of-understanding-to-collaborate-on-clean-drug-free-sport>.

WORLD LEADERS COMMIT TO NEW TARGETS TO END TB



World leaders at the United Nations General Assembly's High-Level Meeting on Tuberculosis have approved a Political Declaration with ambitious new targets for the next five years to advance the global efforts towards ending the TB epidemic.

The targets include reaching 90% of people with TB prevention and care services, using a WHO-recommended rapid test as the first method of diagnosing TB; providing social benefit packages to all people with TB; licensing at least one new TB vaccine; and closing funding gaps for TB implementation and research by 2027.

"For millennia, our ancestors have suffered and died with tuberculosis, without knowing what it was, what caused it, or how to stop it," said Dr Tedros Adhanom Ghebreyesus. *"Today, we have knowledge and tools they could only have dreamed of. The political declaration countries approved today, and the targets they have set, are a commitment to use those tools, and develop new ones, to write the final chapter in the story of TB."*

Taking stock of progress towards targets set in 2018 for a five-year period, WHO reported that while global efforts to combat TB have saved over 75 million lives since the year 2000, they fell short of reaching the targets, mainly due to severe disruptions to TB services caused by the COVID-19 pandemic and ongoing conflicts. Only 34 million people of the intended 40 million people with TB were reached with treatment between 2018 and 2022. For TB preventive treatment, the situation was even more grim, with only 15.5 million of the 30 million people targeted to be reached with preventive treatment accessing it.

Funding for TB services in low- and middle-income countries fell from US\$ 6.4 billion in 2018 to US\$ 5.8 billion in 2022, representing a 50% financing gap in implementing the required TB programmes. Annual funding for TB research ranged from US\$ 0.9 billion to US\$ 1.0 billion between 2018 and 2022, which is just half of the target set in 2018.

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This has placed an even heavier burden on those affected, especially the most vulnerable. Today, TB remains one of the world's top infectious killers: [annually more than 10 million people fall sick](#), and over 1 million lose their lives to this preventable and curable disease. Drug-resistant TB continues to be a major contributor to antimicrobial resistance with close to half a million people developing drug-resistant TB every year.

More information is available at: <https://www.who.int/news/item/22-09-2023-world-leaders-commit-to-new-targets-to-end-tb>.

AS EUROPEAN REGION CONTINUES POSITIVE TREND IN TB CONTROL, WHO/EUROPE WARNS OF CHALLENGES THAT COULD THREATEN GAINS



The WHO European Region has witnessed a significant 52% drop in tuberculosis (TB) incidence since 2012, exceeding the global average of 1.9%. Yet, challenges including unmet treatment needs and insecure supply chains threaten these achievements. The Region particularly struggles with accessing TB medicines, especially in countries with low prevalence. Legal, financial, and regulatory hurdles further impede access to global medicine supplies, necessitating urgent cooperation and a revised approach for TB elimination.

Dr Natasha Azzopardi-Muscat, Director of Country Health Policies and Systems at WHO/Europe, stated, “*Our Region stands at a crossroads, with the opportunity to lead the world in demonstrating the feasibility of TB elimination, but only if it addresses the critical issues plaguing TB medicine supply.*”

Despite the notable 52% reduction in TB incidence since 2012, driven by an annual decline of 7.7%, the Region confronts significant hurdles in TB control. The European Centre for Disease Prevention and Control (ECDC) highlighted the EU's lag in achieving its 2030 TB eradication goal. The decreasing number of TB cases, especially in countries with low incidence, impacts the commercial motivation for providing TB treatments.

The Global Drug Facility (GDF) has made strides in reducing prices and rolling out new TB medicines. However, these efforts mainly benefit low- and middle-income countries, leaving high-income countries, including EU members, with restricted access to GDF products, creating sustainability issues for TB control in the Region.

Issues arise for patients traveling across borders. For instance, Ukrainian TB patients fleeing conflict in EU countries often faced disruptions in their treatments. Differences in regulatory systems across countries hinder TB medicine distribution, emphasizing the need for universal access to all TB medicines and infectious disease products.

More information is available at: <https://www.who.int/europe/news/item/22-09-2023-as-european-region-continues-positive-trend-in-tb-control-who-europe-warns-of-challenges>.

GROUND-BREAKING RESEARCH SERIES ON HEALTH BENEFITS OF THE ARTS



WHO and the Jameel Arts & Health Lab have announced a forthcoming [Lancet Global Series](#) on the health benefits of the arts.

This initiative, initiated during the United Nations General Assembly (UNGA), expands on a 2019 WHO report showcasing the arts' role in health enhancement. The arts contribute to health equity, disease prevention, and managing various health conditions through interventions like dance for Parkinson's Disease, music for pain management, and drama for emotional development.

Sir Jeremy Farrar, Chief Scientist at WHO, emphasized the intersection of Science and Arts as a source of innovation and healing. He highlighted that the Jameel Arts & Health Lab - Lancet series would solidify the scientific foundation of arts in health, fostering collaboration between artists and scientists.

The research will present a unique framework on arts supporting health, primarily focusing on noncommunicable diseases. It aims to highlight existing evidence and propose global policy directions, emphasizing interventions through social prescribing and collaboration across arts, health, education, and social care.

Dr Miriam Lewis Sabin, North American Executive Editor, The Lancet, voiced the series' potential to underscore the importance of arts in health, especially for noncommunicable diseases.

The Jameel Arts & Health Lab's UNGA Healing Arts Week celebrates WHO's 75th anniversary, falling under the WHO75 Healing Arts programme. Events have been held globally, with upcoming ones in Cairo/Alexandria, Copenhagen, Riyadh, and Dubai.

The Jameel Arts & Health Lab, initiated earlier this year, partners with entities such as the WHO Regional Office for Europe, New York University Steinhardt School, Community Jameel, and CULTURUNNERS. It spotlights underserved communities, promoting the arts' role in health and influencing policy across 193 UN Member States.

[2019 WHO report.](#)

More information is available at: <https://www.who.int/news/item/25-09-2023-ground-breaking-research-series-on-health-benefits-of-the-arts>.

WHO RELEASES STEP-BY-STEP GUIDE TO HELP COUNTRIES DEVELOP THEIR NATIONAL GENOMIC SURVEILLANCE STRATEGY FOR PATHOGENS WITH PANDEMIC AND EPIDEMIC POTENTIAL

Did you know that by 31 December 2022, 84% (163 of 194) of WHO Member States have sequencing capability for SARS-CoV-2? This represents a 58% increase (from 103 to 163) in the proportion of Member States with sequencing capability between February 2021 and December 2022.

The COVID-19 pandemic highlighted the importance of genomics in our public health toolkit to prepare for and respond to pathogens with pandemic and epidemic potential. As countries build on the genomic surveillance gains from the COVID-19 pandemic, questions are arising. How should genomic surveillance capacities be sustained? What priority pathogens should have genomic surveillance components? What will it cost to operate genomic surveillance systems?

Applying the step-by-step guide in Oman, it provided good information and guidance on the key steps necessary to build a framework for a national genomics program. The value of bringing together key stakeholders with expertise in a wide range of areas, for open discussion about the principles, goals and challenges associated with implementing genomics was clear.”

**- Luke W. Meredith, Sequencing Consultant, World Health Organization
Regional Office for the Eastern Mediterranean**



To support countries in articulating their genomic surveillance strategy, WHO recently published “**Considerations for developing a national genomic surveillance strategy or action plan for pathogens with pandemic and epidemic potential**”. This step-by-step guide outlines key considerations and an approach for developing a national strategy. It is intended for use by all stakeholders at the national and subnational levels relevant to the development and implementation of the strategy, including health authorities, One Health partners, donors, public health officers, academia, the private sector and laboratory specialists.

[Considerations for developing a national genomic surveillance strategy or action plan for pathogens with pandemic and epidemic potential.](#)

WHO IN BOSNIA AND HERZEGOVINA

EU-funded Action: “EU Support to the Health sector Reform in Bosnia and Herzegovina”



The European Union's commitment to bolstering the health sector in Bosnia and Herzegovina (BIH) recently witnessed a significant milestone. Between the dates of 18-22 September 2023, the World Health Organization (WHO) embarked on an exhaustive assessment of the health information systems (HISs) within the region. This vital endeavor sought to gauge the level of digitalization particularly within the primary health care realm.

Utilizing a standardized methodology, the WHO assessment team engaged in in-depth discussions and evaluations with local health experts. These professionals hailed from primary health care establishments known as 'Dom Zdravlja', public health institutes, health insurance funds, and agencies dedicated to quality enhancement. Central to these discussions were representatives from the Ministry of Health and Social Welfare of the Republika Srpska and the Department of Health and Other Services of the Brčko District of BIH. Their insights were particularly collated during sessions in Banja Luka on 18-19 September 2023.

Furthermore, between 20-22 September 2023 in Sarajevo, the team had the privilege of dialogues with the Ministry of Health of the Federation of BIH. This pivotal gathering witnessed participation from all 10 cantonal health authorities, making it a comprehensive representation of the region's health expertise.

To ensure the accuracy and authenticity of their findings, the WHO team meticulously visited select health institutions. In Banja Luka, they evaluated the Dom Zdravlja Banja Luka, the Public Health Institute, and the Health Insurance Fund of the Republika Srpska. Sarajevo's institutions, including the Polyclinic 'Agram', Public Health Institute of Sarajevo canton, and the Agency for quality improvement AKAZ of the Federation of BIH, also underwent rigorous assessment.

The culmination of these extensive evaluations will be a comprehensive report, which will not only detail the findings but also provide pivotal policy recommendations. These insights are poised to profoundly influence future project investments, steering them towards the fortification of health information systems and promoting a more expansive adoption of digital technologies within Bosnia and Herzegovina's health infrastructure. This endeavor underscores a collaborative commitment to enhancing healthcare services for the residents of BIH.

First WHO EMT Initiative Awareness Meeting in WHO/Europe

In a significant stride toward fortifying health emergency preparedness and response, 48 influential policymakers, Emergency Medical Teams (EMTs) national focal points, and prominent stakeholders convened in Belgrade, Serbia. This notable assembly, which included participants from the Western Balkans and Moldova, also witnessed a robust representation from nongovernmental organizations (NGOs) and partners, all synergized by the financial backing of the European Union.



Furthermore, the presence of Dr Mirza Palo, representing the WHO Country Office for Bosnia and Herzegovina, symbolized the unwavering commitment of international health bodies to the cause.

This collaborative gathering was organized with a distinct mission: to pinpoint tangible opportunities and devise effective methodologies that would pave the way for the seamless integration of the EMT initiative. Their collective vision is to align their efforts with the objectives laid out in the Western

Balkans Health & Well-being Roadmap (2021/25).

Emergency Medical Teams are not just a service; they embody the essence of rapid, efficient, and humane response in times of health crises. They serve as the linchpin in bolstering preparedness, ensuring prompt response, and fostering resilience during health emergencies. Their overarching aim is to safeguard lives, reduce suffering, and provide solace to communities grappling with health adversities.

Central to this agenda is the EMT 2030 Strategy. This forward-looking blueprint seeks to augment the WHO-led EMT Initiative specifically within the WHO/Europe Region. It issues a clarion call to health authorities and organizations, urging them to adopt a forward-thinking, proactive stance. The strategy emphasizes the creation and enhancement of their EMTs, rapid response mechanisms, and associated systems. It encourages these entities to harness the robust EMT methodology, ensuring that when emergencies strike, an agile, effective, and compassionate response is at the ready. The Belgrade assembly underlines the collective commitment of the region to fortify its health emergency response mechanisms for the betterment of its citizens.

Surveillance in Focus: A Gathering of Health Professionals in the Federation of Bosnia and Herzegovina

On October 4th, 2023, in the wake of the COVID-19 pandemic, public health professionals from the Federation of Bosnia and Herzegovina (FBiH) gathered to discuss the trajectory and future of health surveillance, drawing insights from the pandemic's global impact.

The meeting kicked off with remarks from representatives of the Ministry of Health of the Federation of Bosnia and Herzegovina, the Public Health Institute of the Federation of Bosnia and Herzegovina, and WHO representatives, emphasizing the current state of public health in FBiH and outlining future objectives. Dr Rozalija Nedić of PHI FBiH then provided an overview of recent health trends, focusing on prominent diseases affecting the community.

Dr Teufik Goletić elaborated on the 'One Health' approach, particularly its role in monitoring avian influenza in BIH, emphasizing the importance of cross-sectoral collaboration. This was followed by Dr Amela Dedeić-Ljubović, who discussed the rising concern of antimicrobial resistance and its implications for treatment and public health.

Mr Dalibor Pejović, representing the Ministry of Civil Affairs of Bosnia and Herzegovina, shed light on previous reporting methods, segueing into the introduction of new guidelines to improve data collection. Dr Mirza Palo from WHO CO BIH then provided a global view on collaborative surveillance, emphasizing the need for international cooperation. Dr Maja

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Ostojić discussed enhancements in specialized surveillance systems, emphasizing technological and community-centred advancements.



The session wrapped up with an open forum, fostering collaboration and dedication to strengthening FBIF's public health systems. Overall, the emphasis was on the importance of adaptability and unity in public health, especially in light of challenges like the COVID-19 pandemic.

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.

[Ukraine emergency](#)

[Mpox outbreak](#)

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

[Pakistan crisis](#)

[Drought and food insecurity in the Greater Horn of Africa](#)

WHO CAMPAIGNS

World Mental Health Day 2023: “Our minds, our rights”; 10 October 2023

World Mental Health Day 2023 is an opportunity for people and communities to unite behind the theme ‘**Mental health is a universal human right**’ to improve knowledge, raise awareness and drive actions that promote and protect everyone’s mental health as a universal human right.

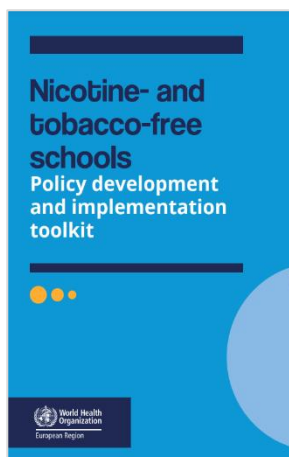
Mental health is a basic human right for all people. Everyone, whoever and wherever they are, has a right to the highest attainable standard of mental health. This includes the right to be protected from mental health risks, the right to available, accessible, acceptable, and good quality care, and the right to liberty, independence and inclusion in the community.

International Lead Poisoning Prevention Week 2023 “End Childhood Lead Poisoning”; 22-28 October 2023

The focus of this year’s campaign “**End Childhood Lead Poisoning**” reminds governments, civil society organizations, health partners, industry and others of the unacceptable risks of lead exposure and the need for action to protect children's health. The campaign builds on the success in outlawing the use of lead in petrol and the progress achieved by many countries in establishing laws that limit the use of lead in paint, particularly those paints to which children are exposed in their homes, schools and playgrounds.

PUBLICATIONS

Nicotine- and tobacco-free schools: policy development and implementation toolkit



The tobacco epidemic continues to pose one of the biggest public health threats the world has faced. Despite a global decrease in the prevalence of tobacco use among all age groups during the last two decades, the rates of tobacco use in young people are concerning. Most adult smokers start smoking in adolescence, and prevalence trends in tobacco-smoking among 11–15-year-olds show a rapid increase by the age of 15 for both sexes.

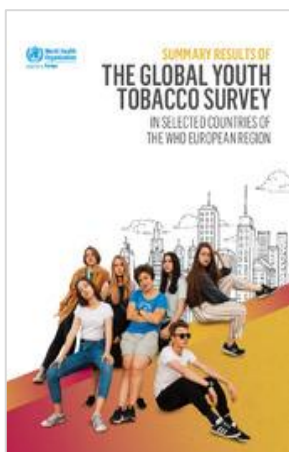
The main concerns are that nicotine, a highly addictive chemical, tends to induce addiction in young developing brains much faster and at lower levels of consumption, and that nicotine has harmful effects on adolescents' brain development. In addition, children are more vulnerable to different forms of marketing and peer pressure and are easily influenced by their role models.

This situation emphasizes the need for more effective and comprehensive measures to prevent the initiation of tobacco use among children and young people. As children spend one third of their daily time at school, it is imperative to offer them clean air and protect their information environment from the misleading and manipulative tactics of the tobacco industry. Developing nicotine- and tobacco-free school policies provides an effective means of attaining this goal.

This toolkit provides practical advice on developing nicotine- and tobacco-free school policies, offering examples related to communication, education and policy enforcement. The annexes contain templates and information that will support policy development.

<https://iris.who.int/bitstream/handle/10665/372960/WHO-EURO-2023-8077-47845-70659-eng.pdf?sequence=2>

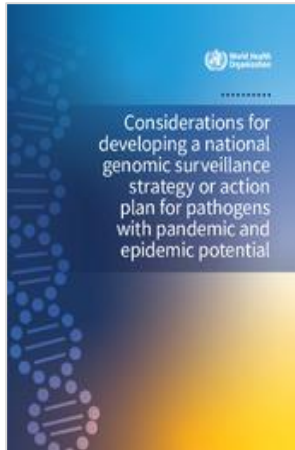
Summary results of the global youth tobacco survey in selected countries of the WHO European Region



The Global Youth Tobacco Survey (GYTS) is one of the globally standardized surveys of the Global Tobacco Surveillance System. The GYTS is a school-based survey that collects data on tobacco use among young people in grades associated with ages 13–15 years and key tobacco-control indicators. This publication summarizes the results of descriptive analyses of GYTS data from 25 countries in the WHO European Region. The findings are presented in illustrative manner to encourage dialogue among public health specialists, representatives from different sectors and decision-makers to accelerate tobacco-control programmes and implementation of WHO Framework Convention on Tobacco Control measures at country level.

<https://iris.who.int/bitstream/handle/10665/336752/WHO-EURO-2020-1513-41263-56157-eng.pdf?sequence=1&isAllowed=y>

Considerations for developing a national genomic surveillance strategy or action plan for pathogens with pandemic and epidemic potential



This step-by-step guide outlines key considerations and a proposed approach for countries to develop a national genomic surveillance strategy or action plan for pathogens with pandemic and epidemic potential. This technical document is intended for use by all stakeholders at the national and subnational levels relevant to the development and implementation of the strategy, including health authorities, One Health partners, donors, public health officers, academia, the private sector and laboratory specialists.

<https://iris.who.int/bitstream/handle/10665/372390/9789240076563-eng.pdf?sequence=1>

Cost-effectiveness of voluntary medical male circumcision for HIV prevention across sub-Saharan Africa: results from five independent models

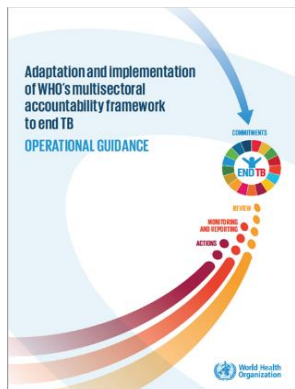


Voluntary medical male circumcision (VMMC) has been a recommended HIV prevention strategy in sub-Saharan Africa since 2007, particularly in countries with high HIV prevalence. However, given the scale-up of antiretroviral therapy programmes, it is not clear whether VMMC still represents a cost-effective use of scarce HIV programme resources.

Using five existing well described HIV mathematical models, we compared continuation of VMMC for five years in men aged 15 years and older to no further VMMC in South Africa, Malawi, and Zimbabwe and across a range of setting scenarios in sub-Saharan Africa. Outputs were based on a 50-year time horizon, VMMC cost was assumed to be US\$90, and a cost-effectiveness threshold of US\$ 500 was used.

[https://www.thelancet.com/journals/langlo/article/PIIS2214-109X\(22\)00515-0/fulltext](https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(22)00515-0/fulltext)

Adaptation and implementation of WHO's Multisectoral Accountability Framework to end TB – Operational guidance



The Operational guidance on adaptation and implementation of WHO's Multisectoral Accountability Framework to end TB (MAF-TB) provides practical advice on key approaches and interventions needed to establish the MAF-TB at the national (and local) levels with concrete country examples, best practices and case studies under each suggested approach and interventions.

It is intended for use by all stakeholders involved in their national TB response, including ministries of health and other relevant government ministries and bodies, national TB programmes (or their equivalents in ministries of health), other relevant national

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programmes, parliamentarians, the private sector, international organizations, nongovernmental and civil society organizations and TB-affected communities involved in planning, implementation, monitoring and evaluation and review of the TB response. The stakeholders involved may vary across countries depending on several factors, including the epidemiology and determinants of TB, the institutional arrangements for TB care and prevention and the degree of devolution of the political and health governance system.

https://cdn.who.int/media/docs/default-source/hq-tuberculosis/high-level-meeting-on-ending-tb/operational-guidance-adaptation-and-implementation-of-the-who-multisectoral-accountability-framework-to-end-tb_maf-tb.pdf?sfvrsn=cfce2277_6&download=true

WHO STORIES

“I would have discontinued the treatment rather than be away from my daughter”

A new project is improving outcomes for Ukrainian refugees in Poland undergoing treatment for tuberculosis.

27-year-old Maryna knew only too well that tuberculosis was serious. Working in forensic medicine in Dnipro, Ukraine, she was regularly involved in post-mortem examinations of patients infected with tuberculosis (TB). Ukraine has the second highest burden of TB in the WHO European Region, with 73 cases per 100 000 in the population.

Maryna realised that she was unwell while Ukraine was under a stringent COVID-19 lockdown, which meant that getting a confirmed diagnosis took longer.

After x-rays showed considerable fluid in her lungs, she was admitted to hospital, separating her from her small daughter, who had just started school. Missing her daughter strengthened her determination to complete treatment.

“I told my husband that whatever happens, I need to live for our daughter,” she said. “I had to get strong and healthy again.”

As COVID-19 continues to circulate, ensuring our most vulnerable populations are protected through vaccination

Although the Public Health Emergency of International Concern caused by COVID-19 has now ended, it is important to stress that the pandemic has not. The virus has not gone away; it is still circulating widely, still developing mutations and in some countries, hospitalizations are rising. As the European Region transitions to living with COVID-19 alongside other respiratory diseases, the need to protect those most at risk from severe consequences from these diseases remains just as important as ever.

PODCASTS

Risking lives to save lives: Health workers in conflict zones

The Safeguarding Health in Conflict coalition recently published a report that documented 232 health workers killed, more than 700 incidents where health facilities were damaged and almost 300 health personnel kidnapped in 2022.

This episode dives into the circumstances and risks health workers face in conflict settings. Host [Garry Aslanyan](#) speaks to a health worker who has been on the frontline of recent conflict in Sudan. Their testimony is discussed with Susannah Sirkin, former Director of Policy at Physicians for Human Rights, and Samer Jabbour, a cardiologist who has worked in the area of conflict in health since war broke out in his home country of Syria.

<https://tdr.who.int/global-health-matters-podcast/risking-lives-to-save-lives-health-workers-in-conflict-zones>

Episode #104 - Smoke-free indoor space

Indoor smoke-free spaces are becoming more commonplace, and for good reason. Did you know that over a million people die every year due to second-hand smoke? One in three countries now have policies in place to create 100% smoke-free spaces, according to a recent WHO report. How do indoor smoke-free spaces help our health and our economies? Dr Kerstin Schotte explains in Science in 5.

<https://www.who.int/podcasts/episode/science-in-5/episode--104---smoke-free-indoor-spaces>

WHO EVENTS

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 launches 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:

1. it is 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
2. it is 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.

[https://www.who.int/europe/news-room/events/item/2023/09/29/default-calendar/keeping-safe-from-covid-19--influenza--and-respiratory-syncytial-virus-\(rsv\)-this-autumn-and-winter.-protecting-lives.-strengthening-health-systems](https://www.who.int/europe/news-room/events/item/2023/09/29/default-calendar/keeping-safe-from-covid-19--influenza--and-respiratory-syncytial-virus-(rsv)-this-autumn-and-winter.-protecting-lives.-strengthening-health-systems)

Seventy-third 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 Seventy-third 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.

<https://www.who.int/europe/about-us/governance/regional-committee/73rd-session-of-the-who-regional-committee-for-europe>

28th annual meeting of the Regions for Health Network – “Health for all: addressing challenges, sharing experiences”; 15-17 November 2023, Seville, Spain

WHO/Europe’s Regions for Health Network (RHN) is set to host its 28th annual meeting in Seville, Spain from 15-17 November 2023. Founded in 1992, 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**”.

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<https://www.who.int/europe/news-room/events/item/2023/11/15/default-calendar/28th-annual-meeting-of-the-regions-for-health-network---health-for-all--addressing-challenges--sharing-experiences>

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

COP28 Health Pavilion; 30 Nov-12 Dec 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, United Arab Emirates, 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 two-week programme of events showcasing evidence, initiatives and solutions to maximize the health benefits of tackling climate change across regions, sectors and communities.

<https://www.who.int/news-room/events/detail/2023/11/30/default-calendar/cop28-health-pavilion>

WHO VIDEOS

Latest videos:

Launch of Nicotine- and tobacco-free schools toolkit. Part 1

<https://www.youtube.com/watch?v=BzTOVLF4FJ8>

Launch of Nicotine- and tobacco-free schools toolkit. Part 2

<https://www.youtube.com/watch?v=Ulo4f1SjqkY>

From permacrisis to resilience: noncommunicable diseases in emergency preparedness and response

<https://www.who.int/europe/multi-media/item/from-permacrisis-to-resilience--noncommunicable-diseases-in-emergency-preparedness-and-response>

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://www.wada-ama.org/en>
- <https://www.fda.gov/>

CONTRIBUTORS

- Faris Dizdar
- Lejla Beglerović
- Mirza Palo
- Erwin Cooreman