



World Health
Organization

European Region

Country Impact Report

Inspiring stories of collaboration
from the 53 countries
in the WHO European Region

#healthimpact





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European Region

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Abstract:

The Country Impact Report is a collection of examples of collaboration between the WHO Regional Office for Europe and countries in the WHO European Region – one story for each of the 53 Member States. These short summaries were developed together with countries, based on interviews with people directly involved in the initiatives described. They outline the impact of WHO's work with Member States, identify lessons learned from this collaboration and offer inspiration for other countries. Every example is linked to advancing one or several of the core priorities and flagship initiatives of the European Programme of Work, 2020–2025 – “United Action for Better Health”, and complements the Report of the Regional Director for 2023–2024. The Country Impact Report was produced for the 74th session of the WHO Regional Committee for Europe.

KEYWORDS: LEADERSHIP; POLICY; HEALTH PLANNING; COMMUNITY RESOURCES; ORGANIZATION AND ADMINISTRATION; INTERSECTORAL COLLABORATION

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Foreword by Hans Henri P. Kluge

Five years ago, before starting my mandate as WHO Regional Director for Europe, I received a very clear message from Member States across the WHO European Region: to put country work at the centre of everything we do.

Since 2020, through the European Programme of Work, 2020–2025, the WHO Regional Office for Europe has been on a journey to become more accountable and responsive to country needs. Right now, we are navigating multiple complex issues affecting health – the climate emergency, the threat of antimicrobial resistance, health security issues, epidemics, war and conflict, noncommunicable diseases, mental health challenges, digitalization, and demographic shifts. It is increasingly apparent that WHO has a unique and cherished role, in partnership with countries, to safeguard and advance public health.

Showing impact in each of the Region's 53 countries – 32 with a country office and 21 without – was the guiding principle behind concerted efforts initiated four years ago to take stock of and explore new ways to enhance our collaboration. When canvassed at the beginning of this process, Member States acknowledged the Organization's long-standing work in translating global norms and standards to national contexts, guiding policy and public health measures, providing operational support to health ministries, networking and facilitating outreach across sectors, and supporting health advocacy and communications.

Member States also identified opportunities for WHO to enhance collaboration and become more responsive, agile and tailored to country contexts through engaging in more active dialogue, incorporating medium-term strategic perspectives and insights into planning processes, improving institutional exchange and learning, and leveraging regional resources such as WHO's network of collaborating centres and other partners.

Delivering United Action for Better Health – a strategy for collaboration between the WHO Regional Office for Europe and Member States in the WHO European Region, approved by Member States in 2022, sought to capture this learning. It framed the Regional Office's existing collaboration from the perspective of countries, and set out new ways to realize additional opportunities.



*Hans Henri P. Kluge,
WHO Regional Director
for Europe*

I am both proud and humbled by how far we have come. This Country Impact Report offers a compendium of stories that illustrate the diversity of the Regional Office's work with countries, with examples of how we collaborate in familiar and new ways, and what the impact has been across the European Programme of Work's three priorities and four flagship initiatives. From engaging youth in health decision-making in Albania to advancing access to outpatient medicines in Uzbekistan, the Report includes a unique example of collaboration from every Member State.

Each story is based on interviews with and insights from those directly involved, and offers lessons learned to inspire and guide other countries. Many thanks to the health professionals, national counterparts, ministry officials and partner representatives who contributed to these examples in a spirit of trust and solidarity.

Let me also thank the members of the 31st Standing Committee of the Regional Committee's subgroup on WHO's work at country level for their invaluable guidance in shaping the direction and co-creation of this report. The production of the Country Impact Report is as much an example of collaboration as the stories it contains.

Together, we really do undertake an extraordinary spectrum of activities, delivering our promise of "United Action for Better Health".

Foreword by Olivia Wigzell

One of the most fulfilling aspects of serving as a member of the Standing Committee of the Regional Committee's subgroup on WHO's work at country level is gaining insights into the myriad ways in which Member States collaborate with the WHO Regional Office for Europe. We have seen this collaboration broaden and deepen in recent years, guided by the subgroup.

Two years on from the adoption of *Delivering United Action for Better Health – a strategy for collaboration between the WHO Regional Office for Europe and Member States in the WHO European Region*, and nearing the end of the first European Programme of Work, we have a key moment to document examples of this joint work so that other countries can see what opportunities are available.

The subgroup was determined that these examples not only catalogue best practices, but also offer real insights into the different forms of collaboration: why they were needed, what they have achieved, what lessons have been learned, and how they are being taken forward. Most importantly, we agreed that they should reflect country experiences from the perspectives of the countries themselves.

The Country Impact Report is a departure from other such reports. Using the power of stories of collaboration identified by Member States, and conveying the words and learning of people who have been directly involved in these activities, it is a co-creation showcasing the evolving partnership between countries and the Regional Office.

Through stories about participating in the Pan-European Leadership Academy, engaging Country Support Teams, working with collaborating centres and opening a next-generation country office, among many others, the Report explains how new collaborative approaches identified in the strategy have been applied. It also gathers examples of tried-and-tested collaboration through capacity-building, policy guidance, research and data sharing, operational support, networking, outreach, and so on.

I am convinced that these stories, individually and together, make a compelling case for the strong added value of WHO and its relevance for every Member State in the Region.

We hope that the clear and simple way that each story is presented will invite policy-makers and partners to explore the different ways in which our collaboration is developing, and to reach out to WHO experts and national counterparts who have experience to share.



Olivia Wigzell,
Chair of the 31st Standing Committee of the Regional Committee's subgroup on WHO's work at country level, and Director-General of the Public Health Agency of Sweden

The subgroup's work is to provide direction to the Regional Office based on learning from our challenges and our successes. The concepts informing our activities this year have been:

- *innovation* – continuing to drive the most effective initiatives;
- *together* – creating more opportunities for all Member States to work collectively on new approaches to collaboration with WHO; and
- *impact* – helping to ensure and communicate more systematically the tangible impact of implementing the strategy for collaboration.

This report combines these three elements, weaving a richly colourful tapestry of the invaluable work we all undertake to improve the health of citizens in the Region.

Acknowledgements

This report has been prepared under the auspices of the 31st Standing Committee of the Regional Committee's subgroup on WHO's work at country level: Ms Mirjana Djuranović, Montenegro; Ms Jelena Jankovic, Serbia; Dr Amós José García Rojas, Spain; Ms Olivia Jacobson Wigzell, Ms Kerstin Carlsson and Dr Birgitta Lesko, Sweden; Professor Salomudin Jabbor Yusufi, Tajikistan; Dr Sachly Nuryyva, Turkmenistan; Dr Sergii Dubrov, Ukraine; and observers Ms Anne Swalue, Belgium; and Ms Marcela Kubicová and Dr Alena Šteflová, Czechia.

The report was developed in close collaboration with Member State representatives and partners across the WHO European Region, with the invaluable support of WHO staff at national, regional and global levels. The report was written by Mr Ian Lacey, Consultant to the World Health Organization, Copenhagen, Denmark from May 2024 to December 2024, and Ms Faith Vorting, Senior Communications Advisor, WHO Regional Office for Europe.

Abbreviations

AMR	antimicrobial resistance
BALTOHOP	Baltic One Health One Plan
BIPAM	German Federal Institute for Prevention and Education in Medicine
DR-TB	drug-resistant tuberculosis
EHP	European Environment and Health Process
EMT	Emergency Medical Team
EPW	European Programme of Work, 2020–2025
EU	European Union
GIS	geographic information systems
HIS	health information system
HPV	human papillomavirus
IHR	International Health Regulations
NCD	noncommunicable disease
NDC	Pan-European Network for Disease Control
NGO	nongovernmental organization
PHC	primary health care
STRAMA	Swedish Strategic Programme for the Rational Use of Antimicrobial Agents and Surveillance of Resistance
TAP	Tailoring Antimicrobial Resistance Programmes
TB	tuberculosis
TİTCK	Turkish Medicines and Medical Devices Agency
UKHSA	United Kingdom Health Security Agency
UNICEF	United Nations Children’s Fund
USAID	United States Agency for International Development
WASH	water, sanitation and hygiene

Common themes and key learnings

Recent years have seen a significant evolution in how the WHO Regional Office for Europe collaborates, increasing its proximity and relevance to every country in the WHO European Region. The stories in this Country Impact Report are based on interviews with people closely involved in the initiatives they describe. They shared many similar reflections and observations regarding the factors that have contributed to successful collaboration between countries and the Regional Office and, ultimately, to positive health impacts.

As the implementation of *Delivering United Action for Better Health – a strategy for collaboration between the WHO Regional Office for Europe and Member States in the WHO European Region* progresses, the learning from such stories will inform and guide how joint work continues to evolve.

Twelve common themes

Sustainable support: Building and maintaining a relationship with countries through country offices and the Regional Office over many years, including through mechanisms such as country cooperation strategies, facilitates consistency and sharpens the focus on long-term health goals. This involves fostering effective networks and communication channels with colleagues and ministries to support work on domestic priorities.

Learning among countries: Outreach and the establishment of networks to exchange experiences, build capacity and provide access to expertise from other countries and partners, including WHO's collaborating centres, strengthens the sustainability and reach of health initiatives.

A trusted organization: WHO's role as a trusted, credible and impartial partner enables stakeholders with diverse interests to come together, and brings legitimacy to public health approaches at the country level.

Peer support: Convening and networking with public health colleagues within countries and across the Region and facilitating career-long learning and professional development is a unique and valued contribution of WHO that can enable collaboration on joint activities at various levels.

Real-life scenarios: WHO collaboration is stronger when supported by real examples and experiences that can be shared at learning events and through simulation exercises, and drawn on in the implementation of relevant recommendations and guidance.

Quality data and research: WHO's data and insight generation are vital elements supporting informed decision-making and policy development, especially when they combine qualitative storytelling with quantitative data and evidence.

Stakeholder participation: Active engagement of the public, patients, youth, people with lived experience, people with experience of social injustice and health workers in the co-creation of activities and policies is key to culturally sensitive and effective public health action.

Value-driven work: Recognizing human, social and environmental well-being as core values and drivers of prosperity moves political priorities beyond achieving economic growth and puts health at the centre of policy-making.

Timely response: Providing support quickly and reviewing and updating guidance regularly strengthens the success of collaboration and can leverage a politically favourable environment to increase the impact of health initiatives.

Changing role: Systematically reviewing and adjusting ways to collaborate – for example, by rethinking the role of country offices or introducing country counterparts – fosters agile and responsive ways to address country and regional health needs and capitalize on national capabilities.

Country leadership: When Member States actively take the lead in initiatives of key importance, they can harness the expertise and networking potential provided by WHO while maintaining ownership over the ways in which they address national and regional public health challenges.

Tailored interventions: By starting with the specific context and requirements of a country, and tailoring health campaigns and interventions to both country-level and local needs, WHO ensures that its work has an impact and resonates not just with policy-makers but also with the public. This helps promote greater acceptance of public health approaches to achieve lasting change.

How to use this report

Every story highlights a relevant area of the European Programme of Work, 2020–2025 and, where applicable, the flagship initiatives it supports.

Core priorities

- Moving towards universal health coverage
- Protecting against health emergencies
- Promoting health and well-being

Flagship initiatives

The Mental Health Coalition

Empowerment through Digital Health

The European Immunization Agenda 2030

Healthier Behaviours: incorporating behavioural and cultural insights


The primary type of WHO collaboration is also shown, together with how this collaboration is undertaken.

For more information:

Please contact eusrc@who.int for more information on the stories showcased in this Country Impact Report, and on collaborating with the WHO Regional Office for Europe.

Raising voices for change

EPW core priorities and flagships

Promoting health and well-being
The Mental Health Coalition 

WHO collaboration

Facilitating dialogue
National/subregional/regional network

ALBANIA

Mental health issues and gaps in sexual and reproductive health knowledge are among the most pressing public health concerns for Albania's youth. The COVID-19 pandemic added new layers of complexity, disrupting education and amplifying mental health struggles while also highlighting the need for more resilient health systems.

To foster youth engagement, the WHO Regional Office for Europe and Albania hosted the Tirana 2022 Health and Well-being Forum for Youth. The event gathered 500 participants and 200 decision-makers from across the WHO European Region to discuss critical health issues and promote dialogue between young people and policy-makers. The Forum resulted in the Tirana Youth4Health Statement, calling for greater youth involvement and intergenerational collaboration in health decisions, and marking a new era of youth-driven health initiatives in Albania and beyond.

The impact

After the Forum, the Regional Office and youth continued supporting the Tirana commitments, launching the Youth4Health network in September 2023 at the 73rd session of the WHO Regional Committee for Europe. The WHO Country Office in Albania hosted a satellite event where Albanian Youth4Health members discussed issues such as mental health, climate change, antimicrobial resistance (AMR), and sexual and reproductive health. Ten Albanian representatives are now part of the network. In 2023 Albanian youth co-created the "Force of the Future" event on immunization, aiming to strengthen ties between students and professionals.

Lessons learned

- Safe and inclusive spaces can help to empower young people to share their ideas and perspectives.
- When given the platform and support, youth can contribute meaningfully to public health discussions and policy formulation.
- It is important to create ownership by soliciting content from youth and letting them lead and present.

Donors and partners

Ministry of Health and Social Protection; Municipality of Tirana; Office of the Minister of State for Youth; United Nations Population Fund



Participants at the Tirana 2022 Health and Well-being Forum for Youth.
© WHO

“Young people’s presence in health discussions is growing, and it’s crucial because they often don’t realize they can be key stakeholders.”

Ms Ania Genti Sauku, Youth Advocate, Albania

What’s next?

Albania aims to continue strengthening youth engagement in health initiatives. Young advocates are expected to play a larger role in future mental health awareness campaigns and in addressing other key issues such as sexual and reproductive health. The Regional Office will continue to support these efforts, ensuring that youth remain central to Albania’s evolving public health strategies.

Unlocking data insights for better health

EPW core priorities and flagships

Moving towards universal health coverage

WHO collaboration

Health research and data provision
National health review

ANDORRA

Countries need an accurate understanding of how health is distributed within their borders in order to monitor the indicators that either promote or hinder health equity, and to inform resource allocation. Recognizing the critical role of reliable data in shaping effective health policies and improving care, Andorra, a member of the Regional Office's Small Countries Initiative, embarked on an ambitious reform of its health information system (HIS).

The Regional Office conducted a comprehensive HIS assessment in Andorra using a standardized methodology that has been applied in 25 European countries. This assessment identified key areas for improvement, including the need for better coordination among health sector stakeholders and the development of a comprehensive set of health indicators.

The impact

The introduction of a centralized electronic health record system in 2019 has improved care coordination and data use. During the COVID-19 pandemic, electronic health records were very important as a way to share information among professionals and maintain efficiency. Andorra has established a multistakeholder coordination mechanism, bringing together the Ministry of Health, the Andorran Healthcare Service, and the social insurance system to bolster collaboration and the effective use of health data. The country has also developed a set of over 200 health indicators, which will play a crucial role in informing policy decisions and ensuring that health services are responsive to the population's needs.

Lessons learned

- The HIS assessment tool provided a clear and objective methodology to analyse current issues in information management.
- Gathering high-quality data requires regular, coordinated reporting efforts from the health-care sector.
- The success of an electronic health record system relies on its technical functionality and its acceptance by end users.

Donors and partners

Ministry of Health; Department of Statistics



Dr Hans Henri P. Kluge, WHO Regional Director for Europe, speaking with staff at the Nostra Senyora de Meritxell Hospital in Andorra, July 2024. © WHO

“The coordination and communication among health-care professionals is the foundation for a quality and efficient health-care system.”


Helena Mas Santuré, Minister of Health, Andorra

What's next?

Andorra plans to complement its electronic health record system with the electronic prescription system, which will improve patient safety address the misuse of medication.

A united effort: boosting HPV vaccine uptake

EPW core priorities and flagships

Promoting health and well-being
The European Immunization Agenda 2030 

WHO collaboration

Health advocacy and promotion
Training and capacity-building

ARMENIA

In Armenia, every two days a woman is diagnosed with cervical cancer, and every three days a woman dies from the disease. Nearly all of these cases are preventable with the human papillomavirus (HPV) vaccine. However, since the introduction of the vaccine in 2017, Armenia has struggled with low uptake due in part to misinformation and hesitancy among the public and health-care workers.

In 2022 the Regional Office and Country Office began working with the Ministry of Health to implement a strategy to increase coverage. This included the creation of working groups of gynaecologists, oncologists, paediatricians and epidemiologists. The Regional Office guided the development of trainings and peer-to-peer workshops focusing on building trust in the vaccine among health-care workers, girls and their parents. A key success factor was the teamwork established between WHO, the Ministry of Health, the National Centre for Disease Control and Prevention, Yerevan Municipality, and subnational health authorities.

The impact

In 2018 HPV vaccination coverage in Armenia stood at just 8% among the primary target groups. However, by 2023, after the country implemented educational sessions with health workers, including school nurses, coverage had risen to 26%.

Lessons learned

- Engaging health-care workers as opinion leaders is a crucial factor in overcoming public hesitancy towards vaccines.
- Building strong partnerships at local, national and international levels is key to achieving positive public health outcomes.
- Direct engagement with parents and teenagers can prove effective in addressing concerns.

Donors and partners

Ministry of Health; local governments; Gavi, the Vaccine Alliance; European Union (EU)



A 14-year-old girl in Armenia receives the HPV vaccine.
© WHO



“WHO’s support was crucial in turning around the HPV vaccine uptake.”

Dr Marine Kirakosyan, Paediatrician at the National Centre for Disease Control and Prevention, Armenia

What’s next?

Armenia plans to increase HPV vaccination rates further by expanding successful initiatives such as supporting parents in informed vaccine decision-making, ensuring continuous medical education for health workers, and enhanced health literacy education in schools. The country is working to achieve WHO’s goal to eliminate cervical cancer as a public health issue by 2030.

Ensuring equitable access to novel medicines

EPW core priorities and flagships

Moving towards universal health coverage

WHO collaboration

Cultivating knowledge exchange
National/subregional/regional network

AUSTRIA

Innovative medicines often treat complex and rare conditions such as neurological disorders in children, specific cancers and genetic conditions. The high cost of these medicines is a major obstacle for the patients who need them. The Regional Office established the Access to Novel Medicines Platform in March 2023 to improve affordable and equitable patient access to new costly and effective medicines across the Region.

Austria participates actively in this initiative, focusing on tackling affordability and transparency issues. This involvement allows the country to use the experiences and expertise gained from the Access to Novel Medicines Platform to address national health policy and pharmaceutical issues. The Regional Office has provided technical support and facilitated multistakeholder meetings, helping Austria and other Member States to address common access challenges and share best practices in areas such as drug pricing and reimbursement.

The impact

The Access to Novel Medicines Platform supports Austria in learning about strategies for drug pricing negotiations and furthering its goal to achieve more sustainable health-care budgets. Additionally, pilot projects such as a dashboard for measuring access to medicines across the Region aim to improve insight into access and affordability. Such a tool can provide meaningful information to inform policy decisions.

Lessons learned

- Regular discussions among stakeholders are essential for addressing complex issues related to drug pricing and access.
- Recognizing common challenges regarding innovative medicines facilitates the search for effective solutions.
- Comprehensive solutions require the buy-in of all stakeholders, including the health workforce, industry representatives, patient organizations and payers.

Donors and partners

Ministry for Social Affairs, Health, Care and Consumer Protection; National Public Health Institute



The Access to Novel Medicines Platform aims to improve patient access to novel medicines in the Region.
© WHO/Marcus Garcia



“Even though there are contentious topics, I think most of the participants in the Access to Novel Medicines Platform agree that discussions must continue.”

Dr Susanne Zöhrer, Policy Officer at the Ministry for Social Affairs, Health, Care and Consumer Protection, Austria

What's next?

Austria will continue its active participation in the Access to Novel Medicines Platform to advance the development of concrete projects that improve access to innovative medicines. Through international collaborations it will share experience and expertise with other countries facing similar challenges, exploring unified approaches to pricing and reimbursement policies that will ultimately benefit all participating nations.

Reaching the malaria-free milestone

EPW core priorities and flagships

Promoting health and well-being

WHO collaboration

Strategic planning
National health review

Efforts to eradicate malaria in Azerbaijan have been ongoing since the 1930s. Cases increased in the 1990s following mass population displacement due to conflict along the country's borders. In response, the Government scaled up malaria interventions, including insecticide spraying, water management and health worker training. A key advance was the 2010 introduction of the electronic integrated disease surveillance system for near-real-time detection and rapid investigation. The Regional Office and Country Office provided guidance for these activities, and Azerbaijan detected its last case of locally transmitted malaria in 2012.

The Ministry of Health sought WHO's support for the malaria elimination certification process, which led to a technical consultation in 2018 and several pre-certification missions. In October 2022 WHO's Technical Advisory Group on Malaria Elimination reviewed Azerbaijan's specimen collection, laboratory services, data management, clinical management and prevention measures.

The impact

The Technical Advisory Group confirmed that indigenous malaria transmission had been interrupted for at least the past three years, and that the country had demonstrated its capacity to prevent the re-establishment of local transmission. WHO certified Azerbaijan malaria-free in March 2023.

Lessons learned

- Continuous training for doctors, parasitologists and health workers in prevention strategies and reactive protocols safeguards against resurgence.
- Investment outside the health sector – in quality housing, road networks and modern irrigation systems – contributes to interrupting malaria transmission.
- Sustained political commitment backed by resources can stamp out an age-old scourge.

Donors and partners

Ministry of Health; other ministries and national authorities; International Federation of Red Cross and Red Crescent Societies; Global Fund to Fight AIDS, Tuberculosis and Malaria; United Nations Children's Fund (UNICEF); academic institutions and private entities



The WHO mission to Azerbaijan in 2022 was part of the malaria elimination certification process.
© WHO

“Azerbaijan has contributed to the stabilization of the epidemiological situation of malaria in the European Region, which is also important for us.”


Dr Nazifa Mursalova, Head of the Department of Public Health and Disease Control, Ministry of Health, Azerbaijan

What's next?

The Government is committed to maintaining the country's malaria-free status with WHO support. Epidemiological and entomological surveillance, monitoring, analysis, prevention activities, and work with partners and the population is ongoing.

Success in hepatitis B control

EPW core priorities and flagships

Promoting health and well-being
The European Immunization Agenda 2030 

WHO collaboration

Health research and data provision
Partnership between the Regional Office and Country Office

Before the introduction of the hepatitis B vaccine in the national immunization programme in 1996, Belarus had an estimated hepatitis B prevalence of 3.9% and registered more than 100 acute infections in children per year. Realizing the severity of the situation, the country initiated a nationwide hepatitis B vaccination programme with WHO's support, continuously refining its strategy to ensure coverage remained as high as possible.

Although the vaccine roll-out worked well, the programme's effectiveness needed to be measured. In 2019 Belarus began planning an epidemiological survey to do just that. In line with the EPW, Belarus and the Regional Office collaborated to refine the survey methodology and measure the prevalence of the hepatitis B antigen across the population. With technical and financial support from the Regional Office, the country successfully conducted the nationwide study in 2023, overcoming obstacles posed by the COVID-19 pandemic.

The impact

The survey revealed that Belarus has achieved high hepatitis B vaccination coverage and maintained antigen prevalence below the target threshold of 0.5% in vaccinated cohorts, meeting WHO's regional control targets. Children and adolescents were among the most vaccinated groups, with over 90% coverage. The collaboration also introduced new methodologies in study design and patient sampling, significantly enhancing the objectivity and reliability of the results.

Lessons learned

- The introduction of a sampling method, where Belarus was divided into districts and samples were taken from different demographic groups and urban/rural locations, improved the study's accuracy.
- Close collaboration and communication among health-care institutions ensured that the study was conducted smoothly.
- Partnership with the Regional Office enhanced the technical skills and competencies of Belarusian health professionals.

Donors and partners

Ministry of Health



Hepatitis B and children

0.03% prevalence

Chronic hepatitis B in children aged 6–12 years is close to being eliminated in Belarus



“This collaboration has helped us meet our targets and empowered us with new skills and methodologies for future public health initiatives.”

Dr Veronika Vysotskaya, Head of the Epidemiology Department, Republican Center for Hygiene, Epidemiology and Public Health, Belarus

What's next?

Having met regional hepatitis B control targets in 2023 and maintained progress, Belarus is now a candidate for validation of eliminating mother-to-child transmission of hepatitis B. Future initiatives will also focus on hepatitis C, leveraging the successful strategies developed with WHO and the global goals of disease elimination and health promotion.

A strategic health approach to NCD prevention

EPW core priorities and flagships

Promoting health and well-being

WHO collaboration

Technical guidance
Country Support Team

BELGIUM

Belgium faces significant challenges with NCDs, especially in reducing preventable mortality rates. In 2020 the country initiated a collaboration with the Regional Office to address NCDs, driven by the new Government's goal of setting measurable health objectives. WHO experts conducted a comprehensive desk review of public health policies, facilitated online interviews and discussions with Belgian experts, and hosted a roundtable discussion with key government officials in Brussels.

The collaboration aimed at identifying critical areas for improvement and providing strategic public health recommendations. The process emphasized the importance of primary prevention and the social and commercial determinants of health, while highlighting the need for coordinated efforts across federal and regional levels of government to find practical actions to improve public health policies.

The impact

The public health review carried out by WHO experts provided a solid, evidence-based background for the development of national health objectives. The partnership captured a comprehensive, high-level overview of NCD interventions, and the emphasis on WHO's best-buy policies is steering the focus towards regulatory measures rather than voluntary campaigns. Aware of the risk of industry interference, the Belgian Government is also collaborating with the Regional Office on the commercial determinants of health.

Lessons learned

- Effective NCD prevention requires continuous cooperation among federal, regional and local governments.
- Implementing WHO's best-buy policies can demonstrate the value of regulatory approaches in achieving positive public health outcomes.
- Direct interactions with experts from the Regional Office broadened perspectives and highlighted the potential for substantial health reforms.

Donors and partners

Public Health Institute; federal ministries of public health, finance, employment, and social affairs; regional ministries of health; academic institutions, including the interuniversity programme on global health



Noncommunicable diseases contributed to nearly 90% of deaths in Belgium between 2009 and 2019.
@ WHO/Claudia Weiss

“This collaboration underscored the importance of primary prevention and addressing social and commercial determinants of health to effectively combat NCDs.”

Mr Lieven de Raedt, Strategic Adviser in International Relations at the Ministry of Public Health, Belgium

What's next?

Belgium aims to leverage the insights from the WHO review to advocate for and implement the recommended best practices. The Ministry of Public Health (Federal Public Service for Health, Food Chain Safety and Environment) plans to use these strategies to ensure that NCD prevention remains a top priority.

Enhancing laboratory capacity during the pandemic

EPW core priorities and flagships

Protecting against health emergencies

WHO collaboration

Technical guidance

Country mission

During the COVID-19 pandemic, Bosnia and Herzegovina faced a critical shortage of laboratory testing capacities for human pathogenic agents, including SARS-CoV-2. The laboratory space at the Institute of Public Health was not up to international standards for molecular diagnostics, significantly hindering the ability to detect and monitor SARS-CoV-2 and other pathogens. This posed a serious public health risk at a time when rapid and accurate diagnostics were crucial.

In response, the Regional Office stepped in to provide vital support. A comprehensive mission was organized, led by technical officers from the WHO Health Emergencies Balkan Hub. The mission focused on evaluating the laboratory space, optimizing the use of existing equipment and identifying additional resource requirements. The Regional Office also facilitated training for more than 10 staff members in molecular diagnostics according to WHO guidelines and provided essential equipment and reagents to enhance the laboratory's capabilities.

The impact

A new human molecular laboratory was established and officially opened in November 2022. The laboratory, equipped with state-of-the-art technology, now operates according to the latest WHO standards. This has enabled Bosnia and Herzegovina to boost its diagnostic capacity for COVID-19 as well as other respiratory pathogens such as influenza and respiratory syncytial virus.

Lessons learned

- Tailored technical support combined with hands-on training ensures that new capacities are sustainable over the long term.
- Adhering to global health standards while addressing local needs is crucial for the success of public health initiatives.
- International partnerships are key to rapidly overcoming health infrastructure challenges.

Donors and partners

Ministry of Health; United Nations Development Programme



Dr Maja Ostojic in the new laboratory at the Institute for Public Health, Sarajevo.
© WHO

“Building a robust laboratory system is not just about equipment, it’s about empowering people with the skills and knowledge to protect public health.”

Dr Maja Ostojic, Medical Doctor at the Institute for Public Health, Bosnia and Herzegovina

What’s next?

The Institute for Public Health plans to further expand its diagnostic capabilities to include surveillance of mosquito-borne diseases and waterborne pathogens. There is also an ambition to acquire sequencing equipment to better monitor and compare pathogens with those found in other European countries.

On the front foot in crisis preparedness

EPW core priorities and flagships

Moving towards universal health coverage
Protecting against health emergencies

WHO collaboration

Training and capacity building
Partnership between the Regional Office and Country Office

Since the escalation of the war in Ukraine, Bulgaria has granted Ukrainian refugees with temporary protection status the same access to health-care services as citizens. This influx, along with the arrival of asylum seekers from regions such as North Africa and South Asia, has stretched the capacity of the country's health system to cope effectively. To identify the most serious pressure points, the Regional Office and Bulgaria partnered to conduct a joint review team mission in late 2022. The goal was to identify areas for improvement, especially in addressing the urgent needs of refugees and host communities.

One of the mission's recommendations was to organize a training on early warning, alert and response in emergencies. In May 2024 the four-day workshop brought together frontline health workers, epidemiologists and policy-makers to bolster the country's ability to detect and respond to public health crises.

The impact

The training involved a mix of practical exercises and lectures. Twenty-one attendees reported improvements in their technical knowledge in areas such as surveillance, risk assessment and outbreak management. The hands-on approach and real-world scenarios used by the Regional Office's instructors proved highly effective, with most participants stating that the content was comprehensive and relevant to their work.

Lessons learned

- The inclusion of case studies tailored to Bulgaria's specific context was particularly valuable for participants.
- Facilitation through translators can be a barrier to the smooth running of training courses.
- Working on scenarios beyond refugee-based exercises would be beneficial to the broad professional background of participants.

Donors and partners

Ministry of Health; United States Centers for Disease Control and Prevention; European Centre for Disease Prevention and Control



WHO has been working with a variety of Bulgarian partners in the Ukraine refugee response.
© WHO/Arete/Todor Tzanov

“The training was very useful and will be for all countries, no matter what stage their supervisory system is at.”


Dr Radosveta Filipova, State Expert at the Public Health Protection and Health Control Directorate, Bulgaria

What's next?

With continued support from the Regional Office, the Government will focus on improving health data systems, enhancing communication strategies, and further strengthening coordination between health authorities and refugee services. These efforts will ensure that both refugee populations and Bulgarian citizens are better protected against future health threats.

Catalysing mental health reform

EPW core priorities and flagships

Moving towards universal health coverage
Promoting health and well-being
The Mental Health Coalition 

WHO collaboration

Mobilizing expertise
Partnership between the Regional Office and Country Office

CROATIA

In recent years, Croatia has begun transitioning its mental health-care system to a more community-centred approach. Before 2016, mental health services in the country were largely confined to psychiatric hospitals with limited integration into broader health services. Recognizing the need for change, Croatia developed a community-based mental health strategy, a journey supported by the Regional Office.

The Regional Office's collaboration with Croatia has been pivotal, particularly through the QualityRights initiative, which promotes the rights of people with psychosocial, intellectual and cognitive disabilities. The initiative has now been implemented in regions such as Zagreb and Split. The Regional Office has also trained health-care workers to emphasize human rights in psychiatric settings. The current EU-funded project provides an opportunity to advance this work. A mission to Croatia is planned for late 2024 to design a QualityRights work plan.

The impact

The QualityRights course has not only improved the quality of care, but also empowered individuals with lived experiences of mental health issues to actively participate in their recovery and contribute to the care of others facing mental health challenges. These peer workers are now integral members of mobile mental health teams, offering support and hope to others undergoing treatment.

Lessons learned

- Human rights-based approaches significantly enhance the quality of mental health care.
- Involving individuals with lived experience in care delivery fosters a more empathetic and effective support system.
- Continuous training is required for the evolution of Croatia's mental health support system.

Donors and partners

Institute of Public Health; Ministry of Health; EU



The Regional Office is supporting Croatia with its mental health reform.
© UNICEF Croatia

“The QualityRights initiative is improving care in Croatia, empowering those living with mental health challenges to support others in need.”

Professor Danijela Štimac Grbić, Head of the Mental Health Department, Institute of Public Health, Croatia

What's next?

Croatia is expanding the number of community-based mental health centres and mobile teams. A new postgraduate degree in community mental health will train professionals in supporting marginalized groups, and telemedicine is being developed for remote areas. Priorities for WHO support include strengthening primary health-care (PHC) practitioners' capacity in early detection, management and referral.

Establishing a next-generation country office

EPW core priorities and flagships

Protecting against health emergencies
Promoting health and well-being

WHO collaboration

Strategic planning
Partnership between the Regional Office and Country Office

Cyprus and the Regional Office have collaborated closely for many years, notably through the Small Countries Initiative, a network of countries in the Region with fewer than 2 million inhabitants that aims to address their specific health needs and opportunities.

In 2022 the Cypriot Government sought to enhance collaboration with WHO, taking into account its experience during the COVID-19 pandemic. In turn, the Regional Office was looking to harness the country's expertise in cross-border partnerships and its unique geopolitical position to advance inter-regional health security. Following negotiations, Cyprus and the Regional Office signed an agreement to open the WHO Country Office in Larnaca in January 2023. It set out a vision for a next-generation country office for both national and cross-border initiatives. Health systems financing, emergency preparedness and crisis management, mental health, and AMR are focus areas for WHO technical assistance.

The impact

In 2023 a Region-wide consultation on migrant and refugee health in Larnaca informed the action plan endorsed at the 73rd session of the WHO Regional Committee for Europe. Training to strengthen laboratory capacity for diphtheria and pertussis surveillance and reporting was also delivered to over 40 participants from three WHO regions. The Country Office now provides guidance on the health-related aspects of the Cyprus Maritime Corridor, a Cypriot initiative to bring humanitarian aid to the Gaza Strip. Similarly, WHO is coordinating health-related contingency planning to manage the humanitarian needs of populations displaced to Cyprus in the event of escalating conflict in the Middle East. In 2024, Cyprus also hosted the 10th High-level Meeting of the Small Countries Initiative.

Lessons learned

- A country office can support both national and cross-border health and health security needs when this dual role is mutually embraced.
- Strategic partnerships, diplomacy and pragmatism are vital elements to maintain WHO's relevance and impact in a country.

Donors and partners

Ministry of Health; Ministry of Foreign Affairs; Health Insurance Organization; United Nations Peacekeeping Force in Cyprus; University of Nicosia; European University of Cyprus



Participants at the 10th High-level Meeting of the Small Countries Initiative.
© WHO/Vini Vaid



“I welcome the establishment of a WHO country office in Cyprus. The new office will not only help advance public health and health security but will also work collaboratively with the wider UN family in Cyprus to make much needed progress with global United Nations goals in support of peace and development.”

Mr Colin Stewart, Special Representative of the Secretary-General and Head of Mission United Nations Peacekeeping Force in Cyprus

What's next?

Work on drafting a national mental health strategy and updating the national health emergency preparedness and response plan is ongoing. Inter-regional meetings on digital health for health security and on childhood cancer are planned.

Boosting mental health services for refugees

EPW core priorities and flagships

Moving towards universal health coverage
The Mental Health Coalition 

WHO collaboration

Training and capacity-building
Country cooperation strategy

CZECHIA

The war in Ukraine has led to an influx of refugees into Czechia, increasing the population by almost 3%. Many of these refugees face severe mental health challenges; approximately 40% experience issues such as depression and anxiety. The existing mental health system in Czechia, already strained by the impact of the COVID-19 pandemic, was unprepared to handle the sudden increase in demand for mental health services.

In response, the Regional Office worked with Czechia to establish a technical working group to map the mental health needs of refugees and identify the most affected regions. This led to integrating Ukrainian specialists, including psychologists and interpreters, into existing mental health centres across the country. These centres provide multidisciplinary care involving psychiatrists, nurses, social workers and other therapists.

The impact

The project has facilitated over 7000 interventions for Ukrainian refugees in seven regions of Czechia, while more than 215 000 refugees have benefited from wider WHO and partner-supported services, including information campaigns. It has also improved social cohesion by supporting children and adolescents in schools, including through regular visits by psychologists. The inclusion of Ukrainian mental health professionals not only provides culturally and linguistically appropriate care, but also builds the confidence of refugees accessing Czechia's health system.

Lessons learned

- The integration of multidisciplinary teams, including local and refugee mental health professionals, is essential for providing effective care.
- Addressing language barriers and cultural differences is crucial for successful mental health interventions.
- Continuous support and capacity-building for mental health professionals are necessary to sustain services.

Donors and partners

Ministry of Health; Alliance of Mental Health Centres; TRIGON Association; Bureau of Population, Refugees, and Migration of the United States Department of State (donor)



Ukrainian refugees in Czechia take part in a group mental health session.
© Alliance center duševního zdraví



“With WHO support, we strengthened regional mental health centre teams to provide tailored services for Ukrainian refugees.”

Ms Hana Bolinová, Project Manager for Mental Health and Psychosocial Support Projects, Alliance of Mental Health Centres, Czechia

What's next?

Czechia plans to expand its network of community-based mental health centres and continue supporting the integration of Ukrainian mental health professionals. Efforts will focus on the long-term integration and well-being of refugees, particularly children and older people, to ensure they can live their lives with minimal disruption.

Empowering new mothers through song

EPW core priorities and flagships

Promoting health and well-being
Incorporating behavioural and cultural insights 🚩

WHO collaboration

Implementing new tools and innovations
Partnership with the Regional Office

From prescriptions for culture to reading groups for mental well-being, Denmark is exploring diverse ways to harness the therapeutic potential of the arts. One notable initiative is the Music and Motherhood project run by the Regional Office and implemented by the Central Denmark Region since 2021. This initiative specifically addresses post-partum depression by using the healing effects of singing to support new mothers, while also playing a key role in the broader national dialogue on the health benefits of arts interventions.

In 2019 the Regional Office published a report on the role of the arts in improving health and well-being. This scoping review laid the foundations for Music and Motherhood, while the credibility and support provided by the Regional Office helped to secure essential partnerships and funding. Today, it has gained the backing of local health departments and cultural institutions nationwide.

The impact

The intervention has shown consistent results in improving mothers' emotional well-being. Over 10 weeks, a group of up to 10 mothers join weekly one-hour sessions, singing songs that resonate with their experiences of motherhood. By the sixth week, participants commonly report significant improvements in their mood and a sense of empowerment. The programme also incorporates breathing exercises that help participants connect with their bodies.

Lessons learned

- Community nurses have been essential in building trust in the programme and supporting mothers who attend the classes.
- The Regional Office adds credibility and facilitates essential partnerships, which are critical for programme expansion.
- Research-backed arts and health interventions have important potential to improve health and well-being.

Donors and partners

Breathe Arts Health Research; WHO Collaborating Centre for Arts and Health at University College London (United Kingdom); Ministry of Health; Nordic Culture Fund; Jameel Arts & Health Lab



A singing-based intervention for mothers at Den Kreative Skole, Silkeborg.
© Den Kreative Skole



“I discovered physically that singing could put me at ease in a way that I hadn’t been able to feel before.”

Participant at Den Kreative Skole’s singing class, Denmark

What’s next?

The programme is set to expand from Silkeborg to 11 municipalities in central Denmark. This growth will be partly funded by local music and art schools, demonstrating a strong commitment to sustaining the intervention. Ongoing collaboration with the Regional Office and research partners will ensure the programme continues to evolve based on best practices.

Transforming mental health care

EPW core priorities and flagships

Moving towards universal health coverage
The Mental Health Coalition 

WHO collaboration

Technical guidance
Country cooperation strategy

ESTONIA

During the COVID-19 pandemic, Estonia prioritized mental health in its public health agenda. Realizing that greater numbers of people needed access to essential services, the country collaborated with the Regional Office to strengthen its mental health and psychosocial support systems.

WHO's expertise has been instrumental in developing the national mental health action plan, organizing psychological first aid training for first responders, and adapting materials such as the *Doing what matters in times of stress* guide for refugees fleeing the war in Ukraine. WHO also facilitated the establishment of a national mental health and psychosocial support coordination group, bringing together key stakeholders to ensure a unified and effective response to public mental health challenges. This collaboration is building a more integrated mental health system to ensure everyone receives the support they need.

The impact

The Regional Office's partnership with Estonia has trained over 200 public health professionals. A national suicide prevention plan is also in development, while the WHO Mental Health Gap Action Programme has expanded the reach of mental health services by integrating them into PHC settings. Additionally, awareness campaigns and community-based initiatives are reducing stigma around mental health struggles, empowering individuals to seek help and support earlier.

Lessons learned

- Continuous cooperation with stakeholders is vital for sustained progress on mental health issues.
- Integrating mental health into broader health systems requires buy-in across all areas of government.
- Training and capacity-building at the community level are crucial for effective mental health support.
- WHO's research materials are a valuable resource to guide health policy planning.

Donors and partners

Government of Estonia; National Institute for Health Development; Estonian Red Cross; European Commission; United Nations High Commissioner for Refugees; International Organization for Migration



Estonia and the Regional Office are collaborating to build a more integrated national mental health system.
© WHO/Viktor Koshkin

“Continuous cooperation between WHO and the Estonian Ministry of Social Affairs has significantly improved our mental health response capabilities.”

Ms Anne Randväli, Head of the Mental Health Department, Ministry of Social Affairs, Estonia

What's next?

Estonia plans to further integrate mental health services into PHC and strengthen community-level support, including in humanitarian contexts. Mental health will remain a priority consideration in all government policy decisions.

A shift towards well-being

EPW core priorities and flagships

Promoting health and well-being

WHO collaboration

Health advocacy and promotion
Partnership with the Regional Office

FINLAND

Finland has long embraced the well-being economy approach, including through contributions to EU Council conclusions, the Resolution on Economics and Health for All, and in its National Action Plan for the Economy of Wellbeing (2023–2025). The Regional Office has supported this process, offering technical support on the National Action Plan's objectives and implementation through an expert group.

Through the WHO European Well-being Economy Initiative, Finland has engaged different government sectors to invest in health equity and well-being. The Regional Office provided an evidence synthesis report on the role of equitable health outcomes and well-being in economic recovery and social cohesion. It also helped to establish the New Economics Expert Group, which has been instrumental in identifying the multiplier effects of transitioning to a well-being economy. The WHO European High-level Forum on Health in the Well-being Economy has advanced the agenda for future well-being initiatives in Finland and the Region as a whole.

The impact

The collaboration produced guidance for national development work to shape Finland's National Action Plan for the Economy of Well-being 2023-2025. The Regional Office continues to provide evidence, methodologies and tools that empower health authorities to create policies promoting social and human capital, economic inclusion, and mental well-being.

Lessons learned

- A whole-of-government approach is essential to achieve well-being.
- International collaboration is key to building political support and driving innovation.
- The public health sector is a crucial advocate and change agent in advancing welfare systems.

Donors and partners

Ministry of Health and Social Affairs



Children rowing a boat on a lake in Pargas, Finland.
© WHO/Petra Hongell

“Well-being is the foundation of a thriving society, and a sustainable economy is the foundation for prosperity.”

Ms Taru Koivisto, Director, Ministry of Social Affairs and Health, Finland

What's next?

Finland will continue to implement the national action plan. Well-being indicators will soon be published and used across all government areas, embedding them into regional and local decision-making. The country will continue collaborating with the Regional Office, strengthening international cooperation to further the well-being economy agenda.

Saving lives in emergencies

EPW core priorities and flagships

Protecting against health emergencies

WHO collaboration

Training and capacity-building
Partnership with the Regional Office

FRANCE

Emergency Medical Teams (EMTs) are dedicated groups of doctors, paramedics and firefighters who are expertly trained to deliver urgent medical care during crises and disasters. The ability to rapidly deploy these teams is vital, especially when national capacities are insufficient to handle an effective response. France is committed to ensuring that its EMTs meet the highest standards for delivering medical assistance wherever it is needed.

In collaboration with the Regional Office, France has strengthened its EMT capabilities through tailored training programmes that prepare French EMTs for a range of emergency situations. Through the Regional European EMT Capabilities Hub in Istanbul, WHO has supported France to run scenario-based simulations that help EMTs practise their responses in realistic settings. Additionally, the Regional Office has conducted workshops on critical communication protocols to ensure clear lines of communication between EMTs and other emergency services.

The impact

France has eight EMTs. Of these, two are WHO-classified and six are undergoing evaluations. The teams have been actively deployed to international emergencies, such as the hurricane response in Guadeloupe and the dam collapses in Libya. During the 2022 forest fires in France, standardized communication protocols ensured strong coordination among multiple agencies and support teams from across Europe, helping to contain and eventually extinguish the blazes.

Lessons learned

- Highly trained personnel and an enabling environment, including continuous funding, are essential for the successful operation of France's EMTs.
- Realistic emergency simulations help to hone the skills of EMTs in advance of deployment.
- The vital importance of communication and coordination cannot be understated, and must remain a top priority in capacity-building exercises.

Donors and partners

Ministry of the Interior; various government agencies; EU



In September 2023 French EMTs responded to the devastating dam collapses in Libya.
© Ministry of the Interior

“It’s one thing to meet international standards, but it’s another to be ready to help people in crisis. We must keep focusing on all aspects of preparation.”


Lieutenant Colonel Emmanuel Chapeau, EMT Focal Point for the Ministry of the Interior, France

What’s next?

France will organize national training exercises annually to ensure its EMTs stay up to date with the latest international emergency response guidelines. These exercises continuously develop team members’ skills and proficiency with new equipment. Additionally, they support France’s efforts to maintain the EMTs’ certification, which must be renewed every five years.

Turning geospatial data into public health action

EPW core priorities and flagships

Protecting against health emergencies
Empowerment through Digital Health 

WHO collaboration

Training and capacity-building
Country mission

GEORGIA

Infectious disease outbreaks pose a serious threat to public health in Georgia, as elsewhere. In recent years, the National Center for Disease Control and Public Health had struggled to map and analyse relevant health data effectively, hindering strategic planning and timely responses to such threats. Recognizing the transformative potential of geographic information systems (GIS), the Regional Office partnered with Georgia in 2022 to address these issues. The collaboration began with a comprehensive GIS capacity assessment, which led to the selection and use of software to map all of the country's health facilities.

A pivotal component of this initiative was a five-day training workshop held in June 2023. This workshop equipped health professionals from several agencies with essential GIS skills, improving their ability to visualize and analyse information effectively.

The impact

The use of GIS has boosted public health efforts in Georgia. Prediction modelling of tularaemia outbreaks identified new high-risk areas, enabling targeted fieldwork and preventive measures. GIS mapping has also improved the efficiency of data collection and analysis of disease vectors. This collaboration has fostered evidence-based decision-making within Georgia's public health system, enhancing the country's ability to respond rapidly and accurately to health threats.

Lessons learned

- Ongoing education and experience are crucial for maintaining and expanding GIS capabilities.
- Successful GIS implementation requires collaboration among multiple stakeholders, including government agencies, international organizations and technical experts.
- GIS provides valuable information that supports informed decision-making, leading to more effective public health interventions.

Donors and partners

Ministry of Internally Displaced Persons from the Occupied Territories, Labour, Health and Social Affairs; National Center for Disease Control and Public Health; EU; United States Agency for International Development (USAID)



In June 2023 participants from Georgia took part in a GIS training supported by the Regional Office.
© WHO/GVC

“GIS is helping us to prevent disease outbreaks by identifying cases, mapping them and making evidence-informed public health decisions.”

Dr Irma Burjanadze, GIS Technical Team Lead at the National Center for Disease Control and Public Health, Georgia

What's next?

Georgia plans to continue integrating GIS into its public health infrastructure, focusing on expanding training programmes and using GIS for a wider range of health challenges. Efforts will also aim at improving data collection and analysis capabilities.

Reforming public health: a collaborative effort

EPW core priorities and flagships

Moving towards universal health coverage
Promoting health and well-being

WHO collaboration

Technical guidance
Designated WHO counterpart

GERMANY

Germany faces significant challenges in reducing premature mortality and preventable illnesses, particularly NCDs. In February 2023 Germany's Ministry of Health requested the Regional Office's support to strengthen international collaboration in areas related to population health, most notably by establishing the Federal Institute for Prevention and Education in Medicine (BIPAM).

This collaboration led to bilateral and joint exchanges with chief medical officers in several European countries. The Regional Office also supported activities related to the Pact of Public Health Services, including the founding of the German Society for Public Health Services, and convened ministerial staff in a WHO public health leadership course in 2023. A renewed focus has been put on continuous cooperation with stakeholders at federal, regional and local levels, and enhancing joint work with WHO collaborating centres.

The impact

BIPAM, which is set to open in 2025, will improve data analytics and use, public health research using artificial intelligence, health service linkages, health promotion, and risk communication, all while ensuring that international best practices are embedded in its work. Evidence-based guidelines for public health services have also been developed to improve decision-making and quality of health services. The Regional Office will continue to support national public health reforms by enhancing access to knowledge and experience from other countries.

Lessons learned

- Collaboration that includes cooperation with stakeholders at federal, regional and local levels ensures cohesive public health strategies.
- A clear understanding of roles and boundaries among partners supports effective cooperation.
- WHO's networking support for accessing colleagues and their expertise in other countries is vital.

Donors and partners

Ministry of Health; various public health institutes and scientific societies



Outdoor recreational activities in Immenstadt im Allgäu in southern Germany.
@ WHO/Faith Vorting

“Collaborating with the Regional Office on a key policy priority was mutually beneficial, strengthening our health reforms and improving our ability to support its mission.”

Dr Ute Teichert, Director General for Public Health and Chief Medical Officer, Ministry of Health, Germany

What's next?

Germany plans to further integrate international best practices into its public health system with continued support from the Regional Office. The focus will be on strengthening a collaborative approach in the German public health system, improving data-driven public health policies, and maintaining international collaborations to address both current and future health challenges.

Childhood obesity: a national crisis and response

EPW core priorities and flagships

Promoting health and well-being

WHO collaboration

Technical support

Partnership between the Regional Office and Country Office

Greece faces a critical public health challenge: it leads Europe in childhood obesity rates across several age groups. An alarming one third of Greek children are now overweight or obese. This trend poses significant long-term health risks, including an increased likelihood of diabetes and cardiovascular diseases.

The Ministry of Health, in collaboration with UNICEF Greece, launched the National Action Against Childhood Obesity (2022–2026), a collaborative effort funded by the National Recovery and Resilience Plan (NextGenerationEU). Supported with technical guidance from the Regional Office and Country Office, the WHO Athens Quality of Care Office, and the WHO Special Initiative on NCDs and Innovation, it aims to reduce childhood obesity rates to 24.5% by 2030. The programme unites UNICEF, health and education ministries, academia, and other partners to promote healthier lifestyles through education, improved access to nutritious food, and more physical activity opportunities in schools and communities.

The impact

WHO's expertise has prioritized this issue nationally and introduced innovative approaches, such as digital tools for early obesity detection and comprehensive support for affected children. In addition to ongoing technical support and stakeholder coordination, WHO hosted policy dialogues on childhood obesity with participants from 10 countries, including Greek health and education ministries, to assess interventions and identify future actions. The Athens Office also engaged young participants in interactive sessions promoting physical activity and healthy eating.

Lessons learned

- Addressing childhood obesity requires coordinated efforts across multiple sectors.
- Digital technology and data analysis are crucial for early identification and effective intervention.
- Creating health-promoting environments in schools can significantly influence children's lifestyle choices.

Donors and partners

Ministry of Health; UNICEF; NextGenerationEU



In Athens, children take part in physical exercise as part of a series of activities to combat childhood obesity.
© WHO

“The insights and strategies developed through this partnership are instrumental in our fight against childhood obesity.”

Dr Eirini Agapidaki, Alternate Minister of Health, Greece

What's next?

The next stage of the National Action Against Childhood Obesity will focus on building up school-based interventions and incorporating more sophisticated digital tools for monitoring and early detection of obesity.

A commitment to the environment and health

EPW core priorities and flagships

Promoting health and well-being

WHO collaboration

Technical guidance
Partnership between the Regional Office and Country Office

HUNGARY

As host of the Ministerial Conference on Environment and Health in 2004 and again in 2023, Hungary has a strong track record in the European Environment and Health Process (EHP). The 2023 Ministerial Conference led to the adoption of the Budapest Declaration, which emphasizes urgent action on health challenges related to climate change, pollution, biodiversity loss and land degradation in the Region.

In collaboration with the Regional Office, Hungary has prioritized improving indoor air quality, especially in schools, and monitoring water quality. The Regional Office has provided technical guidance on developing indoor air quality risk assessment tools, and facilitated study tours and workshops enabling Hungarian experts to adopt best practices from other countries. The WHO Collaborating Centre on Environmental Health Risk Management at the National Public Health Center in Budapest also enhances risk-based management and surveillance for safe water and sanitation, benefiting Hungary and the entire Region.

The impact

Hungary's water safety planning system, developed with WHO support, has significantly improved access to safe drinking water, thereby reducing related health risks. Within the EHP, Hungary is working with countries including Germany, Luxembourg and the Republic of Moldova to share tools, guidelines and best practices to improve indoor air quality across the Region.

Lessons learned

- Long-term engagement with the EHP is vital for sustained public health improvements.
- Implementing science-based risk assessment tools can reduce the burden of environmental health factors.
- Sharing knowledge and tools across borders strengthens the overall capacity of the Region.

Donors and partners

Hungarian National Public Health Center; Ministry of the Interior



The Regional Office is supporting Hungary's long-standing engagement with the EHP.
© Donát Kékesi

“We have to act now, using our knowledge and expertise, to improve the quality of the environments we live in.”

Dr Tamás Pándics, Director of the National Public Health Center, Hungary

What's next?

Hungary plans to further integrate environmental health into its public health framework, with a focus on the recently launched EHP Partnership on indoor school environments. This initiative aims to leverage the extensive research already conducted in Europe, using it to implement practical solutions that improve air quality and reduce health risks in schools.

A future focused on well-being

EPW core priorities and flagships

Promoting health and well-being

WHO collaboration

Health advocacy and promotion
Partnership with the Regional Office

ICELAND

Iceland has been transitioning to a well-being economy focused on human, social and environmental well-being rather than just gross domestic product. It recognizes that investing in well-being not only enhances the quality of life but also strengthens the economy. Setting an example for other nations, Iceland has created a framework to monitor and measure its well-being and economic progress that is linked to its fiscal strategy.

The Regional Office has been a key partner in this journey. In 2023 it published a report outlining the country's well-being strategies, and supported Iceland's Wellbeing Economy Forum in 2023 and again in 2024. Iceland is participating in WHO's Finding Common Ground Initiative, which aims to develop tools to shape investment in well-being priorities. The Government recently received a WHO award for its progress on well-being economies. Iceland is also a long-standing member of the Small Countries Initiative, leading discussions among the 12 small countries in Europe.

The impact

The Regional Office's support has strengthened international leadership and knowledge exchange, reaching over 300 policy-makers and stakeholders and increasing commitment across sectors to working towards well-being economies.

Lessons learned

- The public health sector in Iceland is a driver, co-creator and beneficiary of well-being economy policies.
- Strong political leadership and a long-term vision are essential for sustaining the well-being agenda.
- A whole-of-government and whole-of-society approach ensures that policies promoting well-being are supported at all levels.

Donors and partners

Ministry of Health; Prime Minister's Office



Common elements framing the well-being economy approach in Iceland.
© WHO



“We are delighted that WHO is supporting us on this journey, and the collaboration has significantly strengthened the visibility and reach of our work”

Dr Dóra Guðrún Guðmundsdóttir, Director of Public Health, Directorate of Health, Iceland

What's next?

Iceland continues international collaboration through the Wellbeing Economy Governments (WEGo) partnership. The third Wellbeing Economy Forum will be held in 2025, further reinforcing Iceland's role as a regional convener to advance health, equity and sustainability.

The path to sustainable home care

EPW core priorities and flagships

Moving towards universal health coverage
Promoting health and well-being

WHO collaboration

Technical guidance
Country mission

Over the past decade, Ireland has experienced a rise in the demand for home support services, driven by an ageing population and a policy commitment to support older people to live independently at home and in age-friendly environments. Recognizing the escalating need, Ireland sought to refine and sustainably finance its home support sector, which has grown by 25% since 2021.

For support in this area, Ireland approached the European Observatory on Health Systems and Policies, a partnership hosted by the Regional Office that identifies and generates evidence to inform public health decisions. This collaboration provided Ireland with vital research and opportunities to network with experts to improve financing for home care, which will allow people to age comfortably and while continuing to engage with their communities.

The impact

Ireland benefited from comprehensive research and a policy dialogue to support its evaluation of home care financing. The collaboration highlighted that a co-payment model might not be a sustainable solution due to administrative costs and potential financial burdens on older people. Instead, the dialogue suggested leveraging Ireland's broad tax base and considering social insurance models as viable alternatives.

Lessons learned

- Leveraging global best practices and research is invaluable for shaping effective national health policies.
- Engaging stakeholders through structured policy dialogues fosters informed decision-making and consensus building.
- Addressing both financial and administrative aspects is crucial for sustainable policy development.

Donors and partners

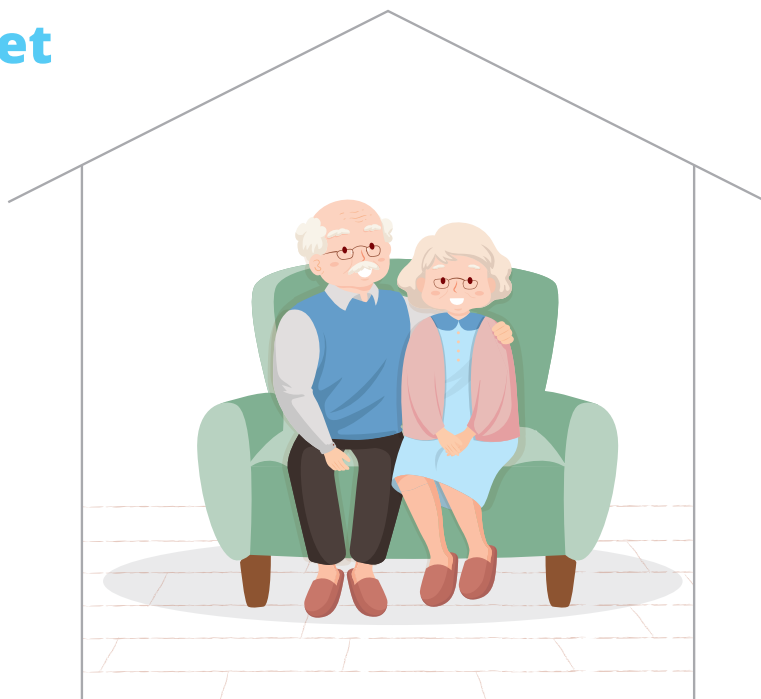
Department of Health; Health Service Executive; European Observatory on Health Systems and Policies

Ireland's home support budget

2024
€726
million

↑

2020
€495
million



IRELAND



“The policy dialogue facilitated by the European Observatory was eye opening. It shifted our perspectives on how we think about co-payments.”


Tommy Sheridan, Civil Servant at the Department of Health, Ireland

What's next?

Building on this work, Ireland is deepening its collaboration with the Regional Office with a focus on refining sustainable funding models for home support. Future efforts will include a comprehensive capacity review to project long-term demand and resource needs. Public consultations will ensure that the voices of service users and stakeholders are incorporated into policy decisions.

Fostering resilience through faith-based support

EPW core priorities and flagships

Protecting against health emergencies
Promoting health and well-being
The Mental Health Coalition 

WHO collaboration

Facilitating dialogue
Country mission

ISRAEL

Since October 2023, the crisis in Israel and the occupied Palestinian territory has intensified mental health challenges in both Jewish and Muslim communities. The trauma resulting from the violence, coupled with the stigma surrounding mental ill health, has created barriers to accessing support. The role of trusted religious leaders in such a situation is crucial, but their ability to provide effective mental health guidance was initially limited by a lack of resources and training.

In January 2024 the Regional Office partnered with Mosaica, an Israeli nongovernmental organization (NGO), to engage with over 700 religious leaders in Jewish and Muslim communities. Together, they reached approximately 2 million followers, encouraging them to access mental health support if needed. Additional guidance helped to develop mental health training programmes and facilitate dialogue between religious leaders and trauma psychologists, creating a network for addressing the mental health needs of communities.

The impact

The collaborations yielded tangible and far-reaching results. Over 75 meetings between religious leaders and mental health professionals were organized, resulting in the treatment of over 200 Jewish and Muslim youth who might otherwise have been overlooked. Additionally, more than 2000 young people attended community sessions led by religious leaders, where they learned coping strategies and received guidance on how to access further professional help.

Lessons learned

- Engaging religious leaders was key to increasing acceptance of mental health services and reducing stigma.
- Tailored mental health tools for Jewish and Muslim communities enhanced the effectiveness of interventions and proved key for building social cohesion.
- Flexible outreach strategies, continuous support and relationships built on trust were essential for success in a rapidly evolving environment.

Donors and partners

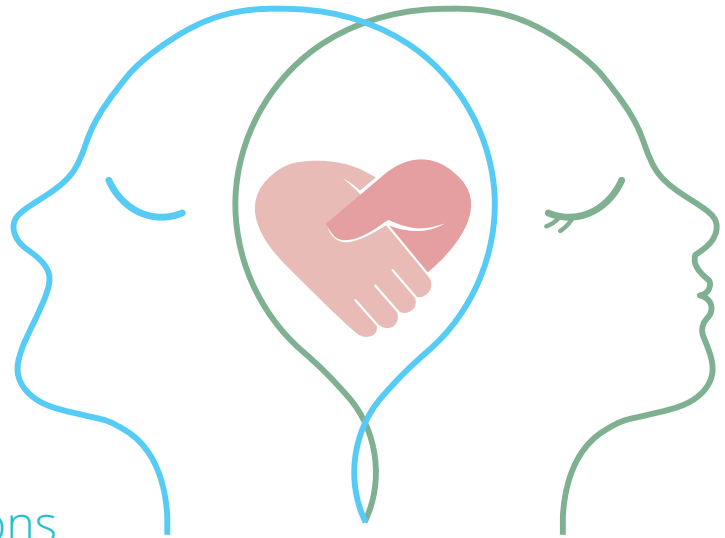
Mosaica; local religious leaders; mental health networks

1500

religious leaders
amplified mental
health messages

100

mental health sessions
conducted in community
centres, mosques and
synagogues



ISRAEL



“Thousands have been impacted so far, and the project has answered a need that unfortunately continues to be relevant, so efforts to expand and replicate the model are ongoing.”

Rabbi Dr Daniel Roth, Director of Mosaica, Israel

What's next?

Mosaica plans to expand this model to other sectors of Israeli society. With the Regional Office's continued support, the initiative aims to further empower religious leaders to combat mental health stigma and enhance community resilience in the face of ongoing challenges.

A journey to social cohesion and prosperity

EPW core priorities and flagships

Moving towards universal health coverage

WHO collaboration

Health research and data provision
Partnership with the Regional Office

ITALY

Equity is a core principle of Italy's National Health Service, alongside universal coverage and solidarity in financing. However, health disparities continue to pose a challenge to upholding the national value of social cohesion. In response, Italy launched the Health Equity Status Report initiative to pinpoint cross-sectoral solutions to increase equity in health and ensure all citizens can live healthy lives.

National and international partners, including the Regional Office, supported Italy by developing, analysing and visualizing disaggregated health indicators. They sorted data into subgroups such as socioeconomic status, education level, region and gender, showing how different populations are affected. Now in the form of an interactive online platform hosted by the Regional Office, it helps the Government find actionable solutions to disparities. This collaboration culminated in the presentation of the Italian Health Equity Report to the Italian Senate's Health and Social Affairs Committee in 2022.

The impact

Working with the Regional Office and partners has enabled Italy to take evidence-based actions to reduce health inequities. Policy-makers now have the tools and data required to implement targeted interventions that address the root causes of these gaps. This collaboration laid the groundwork for sustained progress in promoting equitable health outcomes across all regions of Italy.

Lessons learned

- Reliable data and localized indicators are essential for understanding and addressing health inequities effectively.
- Early engagement with policy-makers ensures that findings are translated into actionable policies.
- Ongoing collaboration between international organizations and national governments is key to maintaining progress in health equity efforts.

Donors and partners

Ministry of Health; Italian National Institute of Health; National Institute of Statistics; National Agency for Regional Health Services; National Institute for Health, Migration and Poverty; Ca' Foscari University of Venice



The Regional Office worked with multiple stakeholders to develop and visualize health indicators.
© WHO/Catharina de Kat-Reynen

What's next?

Italy plans to expand the use of the interactive tool across all regions, enhancing its capacity to monitor and address health disparities. A new National Plan for Health is also incorporating the data and evidence from the survey as part of national consultations and policy development.

Setting standards for WASH in schools

EPW core priorities and flagships

Promoting health and well-being

WHO collaboration

Technical guidance

Partnership between the Regional Office and Country Office

Every child needs easy access to adequate and safe water, sanitation and hygiene (WASH) at school to stay healthy, learn and thrive. Of the 7700 schools across Kazakhstan, 5200 are in rural areas where the provision of WASH can be challenging. In 2020 a baseline assessment of access to WASH was conducted in 153 schools; in 2022 it found that some schools did not comply with safe sanitation requirements.

With guidance from the WHO European Centre for Environment and Health, the Country Office built on the results of a national public awareness campaign organized by social activists. Called “Toile”, it focused attention on the problem of school toilets. WHO established a platform for civil society and government to come together to take action, and presented findings to the Ministry of Health, Ministry of Education and Kazakhstan Parliament. A multisectoral working group was then established to develop a new national standard for school WASH services in Kazakhstan, which came into force in January 2024.

The impact

This standard sets requirements for toilet facilities based on the number of students and makes provisions for children with special needs. It ensures that schools adopt modern facilities and comprehensive measures for the safety, hygiene and comfort of students.

Lessons learned

- Raising public awareness of the health issue helped to accelerate action at the national level.
- WHO played a key role in bringing different ministries together, establishing a timeline for action and providing technical guidance on international standards.
- Adopting new standards quickly is possible when stakeholders have a shared goal.

Donors and partners

Ministry of Health; Ministry of Education; Parliament of Kazakhstan



Children use new hand-washing facilities at school, based on national standards.
© WHO



“Every child deserves the opportunity to grow up in a healthy and safe environment, with quality conditions and access to health care, education and emotional support.”

Dr Nurkan Sadvakassov, Acting Chairman of the Sanitary and Epidemiological Control Committee, Ministry of Health, Kazakhstan

What's next?

An education model has also been developed for school health-care and teaching staff, and will be rolled out shortly.

Building leadership in health

EPW core priorities and flagships

Moving towards universal health coverage
Protecting against health emergencies
Promoting health and well-being
Incorporating behavioural and cultural insights 🇰🇾

WHO collaboration

Training and capacity-building
Pan-European Leadership
Academy

Kyrgyzstan is experiencing a growing burden of NCDs, with particularly high rates of cardiovascular diseases and type 2 diabetes. These challenges are exacerbated by lifestyle factors, delayed diagnoses and systemic weaknesses within the health-care system. Addressing these pressing issues requires strong leadership and innovative approaches to public health.

Kyrgyzstan partnered with the Regional Office through the Pan-European Leadership Academy, a programme designed to develop transformational leadership across the Region. As part of this initiative, Deputy First Minister of Health Dr Mederbek Ismailov led a project to create institutional frameworks that incorporate behavioural and cultural insights into public health strategies for combating NCDs.

The impact

The Academy's structured learning and peer-to-peer exchanges equipped the Deputy First Minister of Health with practical tools and new approaches to improve the prevention and treatment of NCDs in Kyrgyzstan. These insights are being used to shape the 2030 Health System Development Strategy, which now prioritizes enhanced communication between health workers and patients to build trust and ensure continuity of care.

Lessons learned

- Interacting with international peers offers valuable perspectives on health system management.
- Modules focused on communication practices help health professionals succeed in joint decision-making at the national policy level.
- Ongoing learning is crucial for adaptation to new and emerging public health issues.

Donors and partners

Ministry of Health



First Deputy Minister of Health Dr Mederbek Ismailov receives his Pan-European Leadership Academy completion award from Dr Hans Henri P. Kluge, WHO Regional Director for Europe.
© WHO

“Despite my extensive experience, the Academy taught me that it is never too late to learn about new public health tools and approaches.”

Dr Mederbek Ismailov, First Deputy Minister of Health, Kyrgyzstan

What's next?

Building on his experience with the Pan-European Leadership Academy, the Deputy First Minister of Health is committed to further strengthening Kyrgyzstan's health system with a focus on incorporating behavioural and cultural insights into PHC reform. Continued collaboration with WHO and other international partners will be key to sustaining these efforts.

Improving access to affordable medicines

EPW core priorities and flagships

Moving towards universal health coverage

WHO collaboration

Technical guidance

Country cooperation strategy

LATVIA

Latvia's share of out-of-pocket payments in health spending is consistently among the highest in the EU, making it difficult for many residents to afford essential treatments. Recognizing this, the country embarked on reforms to reduce this financial burden and improve access. In collaboration with the Regional Office, Latvia developed a roadmap focused on revising the pricing and coverage of medicines.

The Regional Office provided essential support through expert consultations, data analysis and stakeholder meetings. This collaboration identified high wholesale and pharmacy markups and relatively low levels of coverage as major factors driving up medicine costs for patients. The Regional Office's report on the significant role of outpatient medicines in undermining affordable access to health care was pivotal in gaining political backing for new regulations, which cap markups and mandate doctors to use International Non-proprietary Names in prescriptions to reduce user charges for covered medicines.

The impact

As a result of these reforms, Latvia is moving forward in efforts to reduce out-of-pocket expenses for medicines. In July 2024 co-payment rates for eligible medications were reduced to 25% and 0%, depending on the severity of the diagnosis. Additionally, new regulations on pharmacy and wholesale markups, set to take effect on 1 January 2025, aim to further lower medicine costs and ensure fair pricing.

Lessons learned

- WHO's technical knowledge brings credibility to new policy proposals.
- Learning from other countries helps shape an approach to reducing medicine costs and out-of-pocket payments.
- Involving stakeholders from the public and private sectors is essential to overcome roadblocks in the reform process.

Donors and partners

National Health Service; State Medicines Agency; patient organizations; pharmaceutical manufacturers; pharmacy associations



Since July 2024, co-payment rates for eligible medications in Latvia have been lowered to 25% and 0%.
© WHO/Gatis Orlickis

“Do not hesitate to involve international experts when discussing policy reforms. Their credibility and experience can serve as powerful tools for change.”

Ms Inese Kaupere, Director of the Pharmaceutical Department, Ministry of Health, Latvia

What's next?

Latvia plans to continue its collaboration with the Regional Office to evaluate the impact of the new regulations and make necessary adjustments. The government will also seek to explore strategies for improving access to innovative medicines and addressing any new challenges that arise in the pharmaceutical sector.

Turning the tide of alcohol-related harm

EPW core priorities and flagships

Promoting health and well-being

WHO collaboration

Technical guidance

Partnership between the Regional Office and Country Office

Over the past two decades, Lithuania has grappled with a severe alcohol consumption crisis, marked by some of the highest alcohol-attributable death rates in Europe. In response, Lithuania began implementing alcohol control measures in 2007, aligning with WHO's best-buy policies including higher excise taxes, restricted alcohol marketing hours, and a minimum legal drinking age of 20 rather than 18 years of age. These measures significantly reduced alcohol consumption and related harms.

The Regional Office provided crucial data on alcohol consumption and related diseases, facilitating evidence-based policy adjustments. Training workshops and events uniting governmental stakeholders to share experiences and current evidence have played a major role in maintaining strict alcohol control measures against industry pressures and political challenges.

The impact

Since adopting WHO's best-buy policies, Lithuania saw a 20% reduction in alcohol-attributable deaths by 2016, record-low alcohol consumption by 2023, and increased budget revenues from higher excise taxes. Public support for alcohol control measures surged, contributing to decreases in alcohol-related cancers, liver cirrhosis and drink-driving incidents.

Lessons learned

- Continuous stakeholder cooperation is essential for sustaining progress in alcohol control.
- Evidence-based policy interventions can effectively reduce alcohol-related harm.
- Public support and advocacy are crucial for the successful roll-out and maintenance of alcohol control policies.

Donors and partners

Lithuanian University of Health Sciences; Ministry of Health; National Institute on Alcohol Abuse and Alcoholism



Lithuania is implementing WHO's best-buy alcohol policies to address alcohol consumption and its public health effects.
© Peeter Kukk

“The data clearly show a mirror effect. As we implemented stronger alcohol control policies, alcohol-related deaths decreased significantly.”

Professor Mindaugas Štelemėkas, Head of the Health Research Institute, Lithuania

What's next?

Lithuania plans to maintain and strengthen its existing alcohol control measures, focusing on continuous monitoring and enforcement to ensure their effectiveness. The Government also aims to address new challenges, such as the increasing use of electronic cigarettes, by applying successful strategies from alcohol control initiatives.

Small country, big plans: boosting human resources

EPW core priorities and flagships

Moving towards universal health coverage

WHO collaboration

Technical guidance

Partnership with the Regional Office

A growing population and a rising number of older people are posing questions about the ability of Luxembourg's health-care system to meet needs now and in the future. For example, the density of midwives is below the averages of both the Region and the EU. The country has largely relied on recruitment from abroad and public information campaigns to attract skilled doctors, nurses and clinical specialists; however, it wants to transition to an ethical recruitment approach, which prioritizes the provision of education and job opportunities for those based in the country.

Through the Regional Office's Small Countries Initiative, Luxembourg is developing a national strategy for human resources for health, committed to implementing the WHO Framework for Action on the Health and Care Workforce for the WHO European Region 2023–2030. The Regional Office is also facilitating networking through a WHO platform for chief nursing officers that shares experiences and solutions across the Region.

The impact

The national human resources for health strategy is expected to offer a structured pathway to boosting the health workforce by focusing on the five pillars of the Framework for Action. Notably, the country has moved its nursing education to a bachelor degree level, a step linked to better health outcomes including lower mortality rates and fewer hospital readmissions.

Lessons learned

- International cooperation and knowledge sharing help to validate concerns and spur action.
- Reliable information on the demographics, specialities and location of health professionals is vital for future planning.
- Aligning education with health service needs leads to better patient care.

Donors and partners

Minister of Health and Social Security



A patient undergoes rehabilitation exercises in Luxembourg.
© Ministry of Health and Social Security

“The WHO nursing platform has helped me to validate concerns and ask for advice about the day-to-day challenges that I face.”

Ms Michèle Wolter, Chief Nursing Officer at the Ministry of Health and Social Security, Luxembourg

What's next?

Luxembourg plans to continue improving its human resources for health data systems and refining its workforce planning. The country wants to further explore how health professionals are trained and licensed, and how they work, across different disciplines in Europe to inform future reforms in its 21 regulated health professions.

Putting NCDs on the public health agenda

EPW core priorities and flagships

Promoting health and well-being

WHO collaboration

Strategic planning
Country Support Team

MALTA

Since 2022, Malta has been collaborating with the Regional Office to develop a comprehensive NCD policy framework to improve public health. This initiative emerged from the country's long-standing relationship with WHO to address its significant burden of NCDs, which account for over 90% of deaths.

Recognizing the urgency of tackling NCDs, particularly during the COVID-19 pandemic, Malta sought the Regional Office's technical expertise to formulate best-practice policy changes. Mental health, environmental health and equity considerations were also incorporated. The NCD policy framework is set to guide Malta's public health policies for the next decade, with the goal of a 25% reduction in premature mortality from NCDs by 2030.

The impact

WHO's involvement in the development of the all-inclusive NCD policy framework lent credibility and gravity to the initiative, helping to align various ministries and stakeholders towards a common goal. Key achievements include the establishment of comprehensive strategies targeting tobacco use, alcohol consumption, physical inactivity and unhealthy diets.

Lessons learned

- Integrating frequently overlooked issues such as mental health and environmental factors into NCD strategies is crucial for effective prevention.
- Coordinating efforts among specialized WHO teams and national stakeholders can be challenging, but is essential for thorough policy development.
- The Regional Office's role as a convener and source of technical expertise is invaluable in strengthening national health initiatives.

Donors and partners

Ministry of Health; other national ministries and departments; academia and training institutions



Mental health and NCDs

In Malta, life expectancy is

20
years

shorter for those with both an NCD and a mental health condition compared to those with an NCD and no mental health condition

“Our collaboration with WHO has brought invaluable technical expertise and encouraged stakeholders to sit down together, enabling us to align towards a unified health goal.”


Professor Charmaine Gauci, Director General, Office of the Superintendent of Public Health, Malta

What's next?

Malta will finalize the NCD policy framework in 2024, with public health activities expected to begin later in the year. Future steps include developing an implementation plan and forming dedicated teams to ensure the framework's objectives are met. Continuous collaboration with WHO will support ongoing evaluation and adaptation of strategies to meet emerging health challenges.

Tackling COVID-19 with expert support

EPW core priorities and flagships

Protecting against health emergencies
The European Immunization Agenda 2030 

WHO collaboration

Mobilizing expertise
Partnership with the Regional Office

As COVID-19 vaccines became available in December 2020, Monaco launched an ambitious vaccination campaign. However, although the mRNA vaccines were understood to protect individuals from severe disease, questions arose about their effectiveness in preventing virus transmission. To address this, Monaco collaborated with the Regional Office to analyse vaccine effectiveness using detailed contact tracing and data collection methods.

The Regional Office provided extensive support by connecting Monaco with leading scientists and modellers, facilitating regular consultations and workshops, and offering guidance on communication strategies. Over a year of almost weekly calls, the Regional Office helped the country refine data collection and analysis methods, ensuring accurate results.

The impact

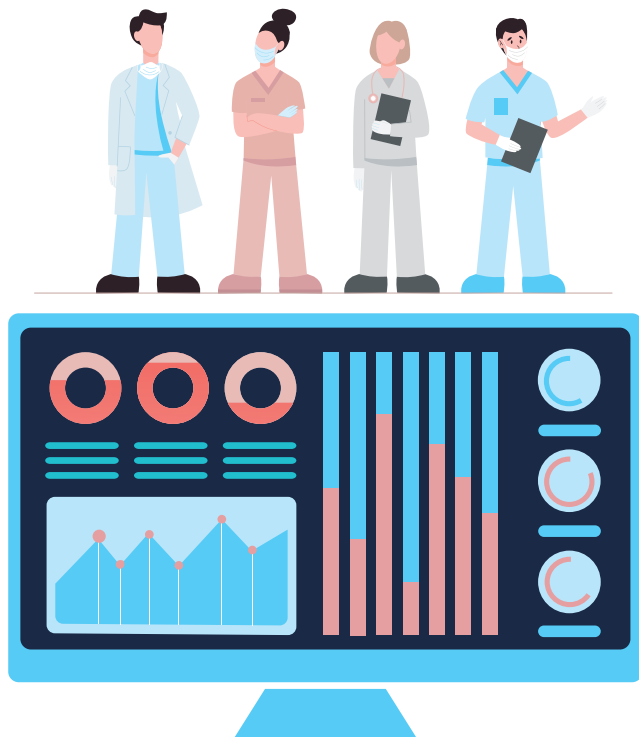
The collaboration with the Regional Office led to a more accurate understanding of the vaccine's role in reducing severe COVID-19 cases and mortality. Although initial public health messages about the vaccine's ability to prevent transmission were adjusted, the clarified communication strengthened public trust and ensured that vaccines and non-pharmacological measures such as mask-wearing and social distancing remained in focus.

Lessons learned

- Accurate data are vital for shaping effective public health messages. Clear communication of these findings is essential for maintaining public trust.
- Strengthening local capabilities in data analysis and biostatistics is crucial for small countries like Monaco.
- Involving international experts can significantly enhance the quality and credibility of public health initiatives.

Donors and partners

Directorate of Health; University of Liverpool (United Kingdom); University of Manchester (United Kingdom)



Support from the Regional Office

- Collaboration began in 2021 and involved almost weekly technical calls to monitor vaccine roll-out and effectiveness
- The Regional Office connected Monaco with scientists from the universities of Liverpool and Manchester to assist with data analysis
- A national data set that centralized health-related data was developed

“Collaborating with the Regional Office was essential to refine our COVID-19 response. Their expertise helped us communicate more effectively and build the capacities for better public health outcomes.”

Dr Thomas Althaus, Public Health Expert at the Directorate of Health, Monaco

What's next?

Monaco plans to implement advanced pathogen surveillance systems, including arbovirus monitoring in mosquitoes and wastewater surveillance. These initiatives aim to provide early detection of potential outbreaks and improve overall preparedness. Additionally, Monaco is establishing a national dataset to centralize health-related information, which will aid in future health crises.

Health equity for people with disabilities

EPW core priorities and flagships

Moving towards universal health coverage

WHO collaboration

Health research and data provision
Partnership between the Regional Office and Country Office

Since 2007, the Constitution of Montenegro has guaranteed special protection and free health care for people with disabilities. More recently, Montenegro put health equity for people with disabilities even higher on the political agenda; it became the first country in the Region to implement the WHO Disability Guide for Action and ensure those with disabilities have equitable access to health services.

WHO headquarters, the Regional Office and the Country Office are committed to supporting these goals. In 2023 technical experts assessed the gaps in disability inclusion within the national health system, interviewing stakeholders from PHC centres, hospitals, NGOs and patient advocate groups, laying the groundwork for a national action plan. The plan is currently in development and focuses on 17 key activities across the 10 PHC areas of the health system. As Montenegro is committed to universal health coverage, the strategy seeks to align itself with the EU Global Health Strategy.

The impact

The situational analysis, supported by the Regional Office, provided Montenegro with a clear roadmap to address inequities in health-care access. The collaboration between WHO and the Ministry of Health has brought international expertise and data-driven insights to addressing disability inclusion in health care. The development of a national action plan marks a key achievement, setting the stage for long-term reform.

Lessons learned

- Making the health system inclusive for people with disabilities improves the system for everyone.
- The action plan should align with Ministry of Health priorities and be integrated into key activities and plans where possible.
- Political commitment, alongside strong multisectoral collaboration, is the foundation for success.

Donors and partners

Ministry of Health; national NGOs; various United Nations agencies



Montenegro is the first country in the European Region to implement the recommendations in *Health equity for persons with disabilities: a guide for action*. @ UNICEF Montenegro/Dusko Miljanic

“The level of health care for people with disabilities is a true measure of our commitment to creating a more inclusive society.”

Ms Milica Markovic, Independent Adviser at the Directorate for Health Protection, Regulated Professions and Chambers Monitoring, Montenegro

What's next?

Montenegro is following the official procedure for writing and clearing the national action plan to ensure it follows appropriate rules and guidelines before adoption. Once approved, the action plan will drive forward key reforms, such as improving access to health-care services and updating regulations within the Health Insurance Fund.

Enhancing PHC

EPW core priorities and flagships

Moving towards universal health coverage

WHO collaboration

Mobilizing expertise
WHO collaborating centre

In recent years, countries across the Region have increased focus on improving their approaches to PHC. The Regional Office has supported these efforts in collaboration with the University of Amsterdam, a designated WHO collaborating centre. The core of this partnership has been developing and rolling out a PHC performance management training programme to better use data intelligence to make strategic decisions and optimize health outcomes.

The current phase of the initiative complements WHO's PHC global measurement framework through a nine-month training programme. It also considers how best to use additional frameworks to measure, monitor and improve PHC. So far, 21 countries have benefited from the support to create and implement projects to improve their PHC performance management systems. This work has highlighted the importance of performance measurement and data integration in the Netherlands, offering valuable lessons for improving coordination between primary, secondary and social care.

The impact

Participating countries are now better equipped to think strategically about the use of data. The training programmes have fostered a community of practice, enabling countries to share experiences and learn from each other. Additionally, the focus on patient-centred care and stakeholder engagement builds trust in health systems, ensuring that care is more responsive to patient needs. This ultimately leads to healthier communities and more efficient resource use.

Lessons learned

- Fostering trust and openness among stakeholders in the training programme is vital for health system improvements.
- Integrating performance measurement into the governance of PHC systems provides evidence-based insights that support strategic decision-making.
- A participatory approach among policy-makers, health-care providers, medical associations, communities and patients is essential.

Donors and partners

University of Amsterdam; national ministries of health; national medical organizations



Team members from the WHO Collaborating Centre for Quality and Equity in PHC Systems at Amsterdam UMC.
© Dr Óscar Brito Fernandes

“Working with the Regional Office helps make a societal impact, but it is also very positive for making a difference scientifically. It’s a win-win partnership.”

Dr Dionne Kringos, Head of the WHO Collaborating Centre for Quality and Equity in PHC Systems, University of Amsterdam

What’s next?

The focus will remain on refining and expanding the PHC performance management system across the Region, with follow-up in the countries that have taken part in the training programme to understand the impacts.

Forging a defence against health emergencies

EPW core priorities and flagships

Protecting against health emergencies

WHO collaboration

Strategic planning

Biennial collaborative agreement

The COVID-19 pandemic highlighted the essential role of coordinated government action in preparing for and responding to health emergencies. The continuous need to develop, enhance and maintain capacities to deal with fast-moving health crises nationally and internationally became clear.

With this in mind, North Macedonia initiated the development of a comprehensive national action plan for health security for 2024–2030, drawing on recent assessments of the health system and insights gained during the pandemic. The Ministry of Health led the initiative, supported by expert guidance from the Regional Office and partners. The Regional Office and the WHO Health Emergencies Balkan Hub facilitated workshops that brought together national stakeholders from health, veterinary and emergency response sectors to identify priorities and actions. The national action plan was designed using WHO's International Health Regulations (IHR) (2005) framework, ensuring alignment with international standards and best practices.

The impact

The collaborative process resulted in a seven-year national action plan complemented by a detailed two-year operational plan that includes improvements to legislative and financing mechanisms to respond to health emergencies. Strengthening multisectoral coordination is a foundational element that cuts across all action areas. Since the country adopted the action plan, the Regional Office has supported simulation exercises, helped to train over 50 health-care professionals in emergency response, and improved national health surveillance systems.

Lessons learned

- The Regional Office's advice and planning tools facilitated the development of a concrete national action plan.
- Coordination challenges were overcome by establishing a multisectoral committee, ensuring shared responsibilities.
- Learning from the experiences of neighbouring countries enriched the planning workshops.

Donors and partners

Ministry of Health; national NGOs; EU; USAID



The national action plan for health security will support North Macedonia to respond effectively to future health crises.
© WHO/Tomislav Georgiev

“The path towards the national action plan has been marked by commitment and dedication, with vital support from our international partners.”

Dr Dragan Kochinski, Head of the Unit for Prevention and Control of Communicable Diseases, Institute of Public Health, North Macedonia

What's next?

The Government has established programmes to address several health security priorities. Additionally, the WHO Country Office and USAID are funding initiatives within the two-year operational plan. A mechanism for monitoring the national action plan has been established, with a national IHR commission providing ongoing oversight and implementation.

United against tobacco industry tactics

EPW core priorities and flagships

Promoting health and well-being

WHO collaboration

Facilitating dialogue

Partnership with the Regional Office

NORWAY

Norway is one of many countries facing tobacco industry tactics and litigation brought against tobacco control policies. The Norwegian Cancer Society recognized the need for lawyers working on tobacco control to have specialized training. In 2013 it partnered with the McCabe Centre for Law and Cancer to host a workshop for EU/European Economic Area countries. The Ministry of Health partnered with the project and co-funded subsequent workshops.

Since 2016, the Regional Office has co-organized these annual workshops with the Norwegian Cancer Society, gathering up to 40 lawyers and legal experts from NGOs, ministries, national authorities and academia from 10 countries on average. The workshops emphasize new laws and the tobacco industry's legal tactics, examining real-life issues such as tackling legal loopholes in marketing on social media and regulating novel tobacco products. Countries also showcase pioneering legislation, such as Norway's law on plain packaging for snus, an oral tobacco pouch.

The impact

The workshops have deepened health lawyers' understanding of complex areas of law, including trade and human rights, which the tobacco industry uses in its legal arguments. They have built an international network of expert lawyers who can be consulted when industry uses a new legal argument in a member's country.

Lessons learned

- Success in tobacco control at the national level requires legal competence as well as work in other areas, such as research and communications.
- Bringing together small groups for in-person workshops facilitates learning, encourages the exchange of experiences, and helps build effective contacts and a stronger network.
- Having the Regional Office as co-organizer legitimizes the workshops and ensures the participation of international technical experts.

Donors and partners

Norwegian Ministry of Health; McCabe Centre for Law and Cancer; Secretariat of the WHO Framework Convention for Tobacco Control



Participants in the Law and Tobacco Control Workshop, October 2022.
© WHO

“Industry finds ways to blur its tactics using baseless legal threats. Legal professionals can clearly see them. These workshops could easily be adapted to address challenges in the alcohol or food industries.”

Ms Marianne Hammer, Head of the Legal Section, Norwegian Cancer Society

What's next?

This year's workshop will address both European and global perspectives. Participants will also discuss ways to document the impact of the workshops.

A people-centred approach to TB care

EPW core priorities and flagships

Moving towards universal health coverage
Promoting health and well-being

WHO collaboration

Leveraging resources
Partnership between the Regional Office and Country Office

Tuberculosis (TB) remains a global threat to public health, causing 1.4 million deaths annually. In Poland, TB cases have surged, with over 4300 diagnoses in 2022 – a 27% increase from 2020. This is partly linked to challenges faced by refugees arriving from Ukraine, where TB prevalence is higher. Traditional hospital-centric treatment approaches created additional barriers to effective care, particularly for patients with drug-resistant tuberculosis (DR-TB).

The Regional Office and Country Office collaborated with Poland to implement a people-centred approach, introducing home-based, fully oral regimens for DR-TB patients and a video-supported mode of outpatient treatment. Supported by a multiagency partnership, this improved care coordination and resource pooling. WHO also facilitated the revision of national TB guidelines, provided technical support for Poland's National TB Consilium, and ensured the availability of WHO-recommended rapid testing and advanced access to medicines for DR-TB.

The impact

Poland's shift to a people-centred approach has transformed TB care by enabling timely and accurate diagnosis, particularly for DR-TB, and boosting treatment capacities. With WHO's support, TB treatment is now accessible at home for local communities and refugees, reducing hospital stays and combating stigma. WHO's collaboration has also led to the donation of critical medicines for DR-TB and the upgrading of 21 TB laboratories.

Lessons learned

- A people-centred model improves treatment accessibility and adherence.
- Multiagency partnerships help to leverage resources for innovative health-care solutions.
- Revising national guidelines in line with international recommendations leads to better TB care and management.

Donors and partners

Ministries of health of Poland and Ukraine; Polish Institute of Tuberculosis and Lung Diseases; Polish Respiratory Society; Governmental Strategic Reserves Agency; Médecins Sans Frontières



WHO staff visits the Kuyavian-Pomeranian Pulmonology Centre in Bydgoszcz.
© WHO/Aleksander Binek



“It was really important to deliver trustful care. If someone is afraid of being treated, they will not be treated effectively.”

Dr Adam Nowinski, Project Coordinator for Outpatient Treatment of DR-TB at the Ministry of Health, Poland

What's next?

Poland plans to further expand the people-centred TB treatment model, integrating it into the national health system. Ongoing capacity-building efforts, supported by the Regional Office and Country Office, will be crucial to sustaining progress. Poland aims to continue cross-border cooperation to address future public health challenges, particularly in managing DR-TB.

Bridging the health gap in prisons

EPW core priorities and flagships

Moving towards universal health coverage
Empowerment through Digital Health 

WHO collaboration

Technical guidance
WHO collaborating centre

PORTUGAL

Portugal has embarked on an ambitious journey to integrate prison health services into the national health service, a move rooted in the country's constitution and the European Convention on Human Rights. This initiative, developed in close collaboration with the Regional Office, aims to ensure that people in prison receive the same quality of health care as the general population, addressing long-standing health inequities.

The Regional Office has played a key role by facilitating a policy dialogue and supporting the development of a comprehensive health plan for prisons. The partnership began by establishing a working group comprising representatives from the Ministry of Health, the Ministry of Justice, and the Ministry of Science, Technology and Higher Education. The working group's main proposal was to transfer the responsibility of prison health care from the Ministry of Justice to the Ministry of Health.

The impact

Portugal's working group has developed a prison health plan built on six pillars: health protection and promotion, early detection and prevention, continuity of care, social reintegration, information systems and technology, and research. The country is already rolling out activities such as telehealth services and transitioning to electronic medical records, which improve access to health information and boost continuity of care.

Lessons learned

- Bringing together experts working on mental health and infectious diseases alongside representatives from hospitals, NGOs, civil society and the justice system is paramount for success.
- Data-driven decision-making processes ensure that health interventions are effective and appropriate for the prison environment.
- Political commitment and intersectoral agreement (in particular between health and justice sectors) are essential to ensure health care is equitable in underserved environments such as prisons.

Donors and partners

Ministry of Health; Ministry of Justice; Ministry of Science, Technology and Higher Education; Institute of Public Health; University of Porto



A prison exterior in Lisbon, Portugal.
© WHO/Filipa Azevedo e Silva

“Government commitment can enable the strategic plan and nourish it to its full potential.”

Dr Ana Paula Martins, Minister of Health, Portugal

What's next?

Portugal plans to build on these initial successes by expanding health services within prisons and ensuring they are on par with those available to the general population. Future efforts will focus on enhancing mental health services, strengthening health education and regularly monitoring the prison health plan's recommended actions.

Modernizing emergency care

EPW core priorities and flagships

Protecting against health emergencies

WHO collaboration

Training and capacity-building
Biennial collaborative agreement

The dual impact of the COVID-19 pandemic and an influx of refugees escaping the war in Ukraine put the Republic of Moldova's health-care system under pressure. The main public health issue was the need to improve the organization of emergency medical services, particularly for trauma, stroke and critical illness. The existing system struggled to deliver high-quality care, leading to increased morbidity and mortality rates and underscoring the need for reform.

The Regional Office undertook a national assessment of the country's emergency medical services, which identified vulnerabilities in the system's ability to manage high-risk patients and respond to emergencies at speed. At the request of the Ministry of Health, experts from the Regional Office and Country Office initiated a programme to upskill acute-care providers and respond to mass casualty incidents. It included the development of clinical guidelines, simulation-based training, on-the-job mentorship and the provision of new equipment.

The impact

Since 2022, over 1350 health-care workers have been trained in specialities such as advanced trauma care, trauma sonography and airway management. Nineteen hospitals received direct support, including essential supplies. The programme also included the development of a mass-casualty incident management system to streamline the coordination of emergency care.

Lessons learned

- WHO's global best practices were tailored to meet the local context, allowing practical changes to be made in the health-care system.
- Simulation-based trainings helped participants to refine their skills and gain confidence.
- The creation of a pool of national trainers means knowledge and skills are more likely to remain in the country.

Donors and partners

Ministry of Health; Nicolae Testemitanu State University of Medicine and Pharmacy; Center for Simulation in Medical Training; Royal College of Surgeons (United Kingdom)



A participant takes part in a training course in Chisinau.
© WHO

“Change is in the DNA of our health-care system. We must embrace innovation and collaboration for continuous improvement.”

Dr Alexandru Gasnaș, State Secretary, Ministry of Health, Republic of Moldova

What's next?

The Republic of Moldova plans to incorporate the WHO-supported training into national curricula for doctors, nurses and health-care managers. The country is also working towards establishing a WHO collaborating centre for emergency and trauma care at the Nicolae Testemitanu State University of Medicine and Pharmacy.

Strengthening health-care management for the future

EPW core priorities and flagships

Moving towards universal health coverage

WHO collaboration

Training and capacity-building
Country cooperation strategy

ROMANIA

Romania's health-care system has long faced challenges such as inadequate funding, outdated infrastructure and shortages of health workers, particularly in rural areas. The Ministry of Health is addressing these issues within the National Recovery and Resilience Plan with the support of the Regional Office. A key component is capacity-building in health service management to boost the efficacy and sustainability of health-care delivery nationwide.

At the request of the Ministry of Health, the Regional Office and Country Office provided technical assistance to professionalize health-care management through an ambitious training programme designed and delivered in collaboration with European universities. The course, held at the new National Institute for Health Services Management, focuses on building the capacities of health managers and trainers through modules on ethics, innovation, digital transformation, public health and leadership.

The impact

Since the programme began in 2023, 116 health-care professionals have completed the intensive curriculum. They are now ready to share their knowledge across Romania, ensuring that the next generation of health-care managers is well equipped to tackle the challenges and complexities of modern health care.

Lessons learned

- Meaningful stakeholder engagement is crucial for overcoming resistance to change and ensuring the success of health reforms.
- International collaboration accelerates the adoption of best practices and innovation.
- Tailored training programmes enhance the impact of capacity-building efforts.

Donors and partners

Ministry of Health; National Institute for Health Services Management



Professor Federico Lega from the University of Milan leading a train-the-trainer course in Bucharest.
© WHO

“These training programmes are crucial for empowering our health managers with the skills needed to improve care across the country.”

Dr Alexandru Rogobete, State Secretary, Ministry of Health, Romania

What's next?

More than 1000 additional health-care managers will be trained by 2025. There are also plans to establish a centre of excellence at the National Institute for Health Services Management. This centre will continue to update and refine training programmes, ensuring that Romania's health managers and trainers remain at the forefront of advances in innovation and governance.

Sustaining TB care during the COVID-19 pandemic

EPW core priorities and flagships

Moving towards universal health coverage
Promoting health and well-being

WHO collaboration

Technical guidance
WHO collaborating centre

The COVID-19 pandemic strained the Russian Federation's national health system and forced the diversion of resources to combat the virus. This created obstacles in maintaining routine health services such as TB testing, which are crucial to prevent a surge in undiagnosed and untreated cases.

The WHO Collaborating Centre for Research in TB and HIV, located at the National Medical Research Centre of Phthisiopulmonology and Infectious Diseases, provided essential technical support through video conferences, webinars and workshops that enabled health authorities to adapt TB services to the constraints imposed by the pandemic. This included implementing comprehensive TB screening guidelines aligned with WHO recommendations, enabling TB facilities to continue operations even as some were repurposed to treat COVID-19 patients.

The impact

By 2022, TB testing rates surpassed pre-pandemic levels, reaching 76% of the population. This comprehensive coverage included high-risk groups and the general population, and was facilitated by mandatory screening for children in schools and daycare centres. Remote monitoring with video technology ensured patients continued their treatment and received follow-up care, maximizing their chances of a full recovery.

Lessons learned

- The establishment of the WHO Collaborating Centre for Research in TB and HIV improved the skills of health-care workers in the country and around the world.
- Developing clear guidelines that align with WHO recommendations is crucial for adapting health services during crises.
- Implementing remote monitoring technologies ensures continuous patient care when face-to-face interactions are limited.

Donors and partners

National Medical Research Centre of Phthisiopulmonology and Infectious Diseases; Ministry of Health; regional health authorities; Russian Society of Phthisiologists; WHO Collaborating Centre for Research in TB and HIV



A doctor and patient discuss TB test results at the National Medical Research Centre of Phthisiopulmonology and Infectious Diseases in Moscow. © WHO/Anton Chuprinin

“During the pandemic, it was vital for us to detect both TB and COVID-19 cases. The support we received from partners was crucial to achieve this.”

Dr Irina Vasilyeva, Chief TB Specialist at the Ministry of Health, Russian Federation

What's next?

The Russian Federation plans to further integrate data systems for TB and other infectious diseases to enhance monitoring and response capabilities. Continued use of telemedicine will support remote areas, ensuring timely and effective care. The lessons learned will guide future responses to health crises, with ongoing training for health-care workers to strengthen outbreak management.

A life-course approach to healthy ageing

EPW core priorities and flagships

Promoting health and well-being

WHO collaboration

Health advocacy and promotion

Partnership with the Regional Office

With 30.5% of its population aged 60 and above, San Marino is dedicated to creating age-friendly environments and care systems that meet the needs of older adults today while building a foundation for the health of future generations. The country has prioritized healthy ageing by working with the Regional Office and the Healthy Ageing Collaborative to implement a life-course approach, improve access by integrating health and social services, and support older adults to age in place. San Marino is also a pioneer within the Small Countries Initiative.

The impact

Since partnering with the Regional Office, San Marino has implemented an integrated approach to long-term care focusing on linking health and social services. WHO supported the development of community-based care systems that allow older adults to age in their homes and communities. The collaboration has focused on addressing the full range of needs in service provision to support individuals without overburdening families. This project brought together health care professionals to provide in-home support, connect with families and caregivers, and improve service coordination for older people.

Lessons learned

- Community-based care aligns with WHO's guidance on promoting environments that allow older adults to remain in their homes longer.
- Digital tools streamline communication among health-care providers, ensuring more personalized, continuous care for older people.
- Linking health and social services improves outcomes for older adults by addressing both medical and social needs.

Donors and partners

Ministry of Health and Social Security



San Marino has adopted an integrated approach to long-term care, connecting health and social services.
© Istituto per la Sicurezza Sociale

“Age-friendly environments ensure that older citizens can age with dignity, staying active and connected within their communities.”

Dr Pierluigi Arcangeli, Director of the Department of Social and Health Care, San Marino

What's next?

San Marino will continue working with the Small Countries Initiative and the Regional Office to promote healthy ageing by reorienting health and care systems, developing community-based long-term care, and creating age-friendly environments. These efforts aim to support older adults now while ensuring a sustainable and resilient health system for all in the future.

Building mental health resilience in communities

EPW core priorities and flagships

Moving towards universal health coverage
The Mental Health Coalition 🇷🇸

WHO collaboration

Health advocacy and promotion
Biennial collaborative agreement

SERBIA

Mental health is a public health priority for Serbia. During the COVID-19 pandemic, the Ministry of Health provided support to both the population and health-care workers. However, a tragic school shooting in Belgrade in May 2023, and another shooting the day after, sent shockwaves through the country. These events highlighted the urgent need to adopt a joined-up approach to mental health in communities that brings together the health and education systems – as well as youth – to build and maintain mental health resilience.

The Ministry of Health requested WHO's help to roll out a project on mental health and psychosocial support. It includes assessing capacity and developing mental health protocols for PHC professionals tailored to young people; engaging and empowering youth to recognize mental health issues, develop coping skills and seek professional assistance when necessary; introducing protocols in the education system together with UNICEF; and creating a resource platform.

The impact

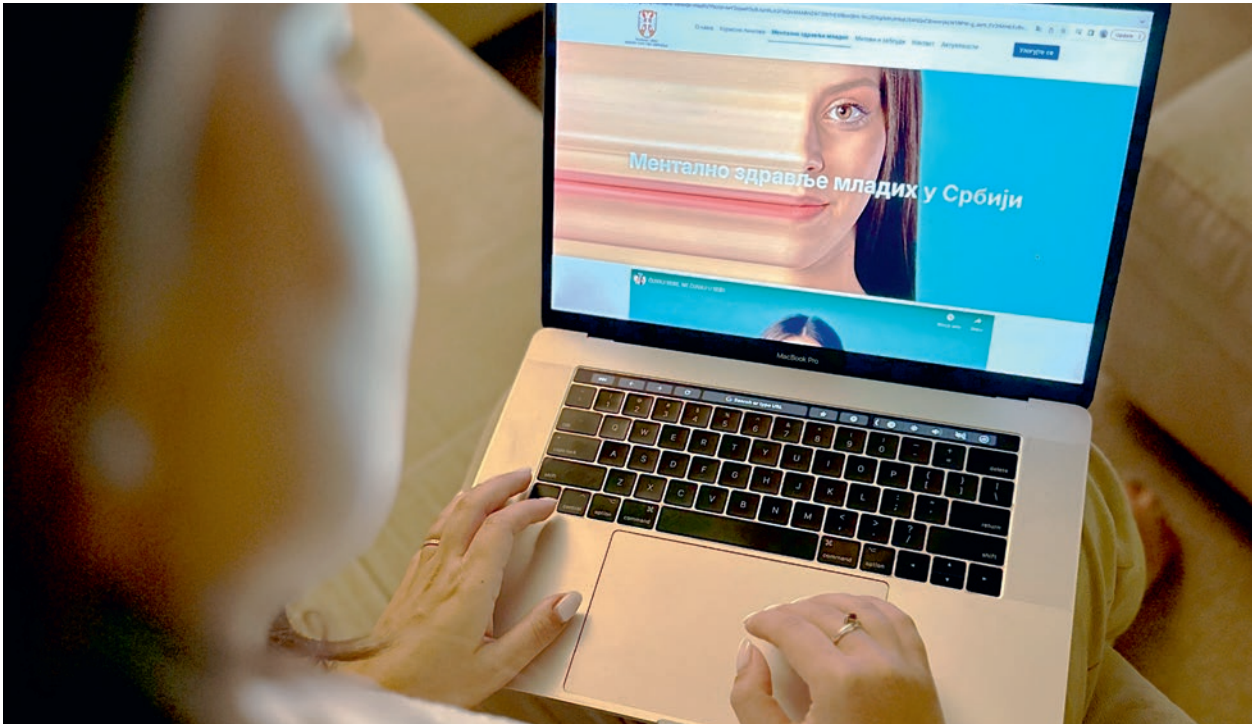
A digital platform has been developed to address the needs of youth, parents and communities in situations of mental distress. Seventy-nine general practitioners, paediatricians and psychologists in PHC centres have completed a curriculum based on WHO guidelines and can now provide mental health guidance to colleagues. Another curriculum has been developed for school psychologists. A joint Ministry of Health–WHO mental health awareness campaign has reached 1.2 million people.

Lessons learned

- A long-term strategic vision to improve mental health prompted the engagement of multiple sectors and opened pathways for leveraging of the roles of paediatricians, general practitioners and school psychologists.
- The initiative enables health-care workers to recognize and provide initial support without adding to their heavy workloads.
- With WHO support, an assessment ensured that all activities aligned with needs in the field, built on the country's existing mental health programme, and were informed by experiences and good practices from other countries.

Donors and partners

Ministry of Health; UNICEF



A young person uses the digital mental health platform.
© WHO



“There is no health without mental health. Psychosocial support is a necessary measure in any wider health crisis. We are ready to share our experience and use it in further joint work for the benefit of public health.”

Dr Ivana Stašević Karličić, State Secretary, Ministry of Health, Serbia

What's next?

The project will continue, and be adjusted, based on feedback from youth.

Community-based success in TB care

EPW core priorities and flagships

Moving towards universal health coverage
Promoting health and well-being

WHO collaboration

Training and capacity-building
Partnership between the Regional Office and Country Office

Slovakia has faced persistent challenges in controlling TB, particularly among vulnerable populations. Despite being a low-incidence country, Slovakia grapples with screening and treating specific risk groups for TB, including Roma people, homeless individuals and those with comorbidities such as diabetes.

The Regional Office has been a crucial partner in Slovakia's fight against TB. The collaboration began in earnest in the early 2000s through the Roma Health Assistants programme. This initiative trained members of the Roma ethnic group to ensure that people affected by TB received proper care and follow-up in their communities. In recent years, support from the Regional Office has included technical advice, training materials, and trainings for health assistants on TB management and basic hygiene standards.

The impact

Through this partnership, Slovakia has achieved an 85% treatment success rate – among the highest in Europe. This is largely attributed to the effective work of Roma health assistants, who ensure that TB patients adhere to their treatment regimens and receive the necessary support. The integration of these assistants into the health-care system has also helped reduce the stigma associated with TB within the Roma community.

Lessons learned

- Involving community members as health assistants has been crucial for effective TB management.
- Regular training and retraining are essential for maintaining the quality of care and adapting to new challenges.
- Providing comprehensive support, including education on hygiene and assistance in understanding the health-care system, enhances treatment success.

Donors and partners

Ministry of Health; National Institute for TB, Lung Diseases and Thoracic Surgery



A laboratory technician tests for TB at a medical facility in Slovakia.
© WHO



“The success of our TB treatment is a testament to effective collaboration with partners and the dedication of our Roma health assistants.”

Professor Ivan Solovič, Deputy Director of the National Institute for TB, Lung Diseases and Thoracic Surgery, Slovakia

What's next?

Slovakia plans to expand its successful model to other marginalized groups and continue strengthening its TB control efforts. The focus will be on maintaining high treatment success rates and addressing new challenges, such as the influx of Ukrainian refugees. Continued collaboration with the Regional Office will provide vital technical support and coordinating efforts with neighbouring countries.

Towards a tobacco-free society

EPW core priorities and flagships

Promoting health and well-being

WHO collaboration

Facilitating dialogue
National/subregional/regional
network

Slovenia is confronting a challenging public health issue: nearly 20% of the adult population uses tobacco, and the use of new nicotine and tobacco products among youth is on the rise. Between 2014 and 2022, electronic cigarette use among 15-year-olds surged from 0.4% to 18% for girls and from 1.5% to 19% for boys. In response, the country enacted progressive tobacco control legislation, including a 2017 law instituting plain packaging and banning smoking in private cars with minors. In 2024 further amendments banned flavours in electronic cigarettes and heated tobacco products, and banned smoking rooms in public places.

The Regional Office has been a key partner on this journey, offering technical expertise, supporting policy development and facilitating workshops to strengthen capacities. The collaboration, which takes place through the Slovenian National Tobacco Control Group, has fostered a united approach and bolstered the credibility of tobacco-control proposals made to decision-makers.

The impact

Slovenia is making major strides in reducing tobacco consumption. The 2024 amendments, which further protected youth from pressures to take up smoking, have been supported by strong public campaigns and international advocacy efforts, including the endorsement of proposals made to the Government from 24 NGOs in 20 countries.

Lessons learned

- Coordination among stakeholders is crucial for the successful implementation of tobacco control measures.
- WHO's expertise significantly enhances the country's capacity to develop national tobacco-control policies.
- Advocacy is vital in advancing strong tobacco control measures and protecting them from tobacco industry interference.

Donors and partners

Ministry of Health; National Institute of Public Health; Slovenian NGOs

Decreasing tobacco use

2016 **23.1%**
of adults smoke
(daily and occasionally)



2021 **20.4%**
of adults smoke
(daily and occasionally)



“The joint efforts of stakeholders in Slovenia have created a unified front against tobacco use.”

Dr Helena Koprivnikar, Senior Public Health Specialist at the National Institute of Public Health, Slovenia

What's next?

Slovenia aims to further strengthen its tobacco control policies, aspiring to reduce the prevalence of nicotine and tobacco product users to less than 5% of the population by 2040. Efforts will focus on expanding flavour bans to all nicotine products and enhancing public awareness campaigns, drawing on successful strategies and continued collaboration with the Regional Office.

Reshaping PHC

EPW core priorities and flagships

Moving towards universal health coverage

WHO collaboration

Cultivating knowledge exchange
Partnership with the Regional Office

SPAIN

Spain's PHC system is a cornerstone of the country's universal health coverage, offering accessible, comprehensive care that contributes to low rates of avoidable hospital admissions and excellent health outcomes. Public trust in PHC professionals remains strong, as these teams deliver effective, patient-centred care through a multidisciplinary approach.

To further enhance this system, Spain has collaborated with the Regional Office on two major initiatives: the PHC Demonstration Platform in Madrid (showcasing the Principality of Asturias) and a comprehensive PHC case study. The Demonstration Platform, launched in June 2024, allows Spain to showcase its PHC model to international delegations, promoting collaboration and the exchange of solutions to common challenges. The PHC case study, involving regional health authorities, scientific societies and patient organizations, highlights Spain's key strengths, such as strong community health services, while also identifying areas for improvement.

The impact

The Demonstration Platform has further reinforced Spain's role as a global leader in PHC. Its opening session, which welcomed a delegation from Czechia, showcased the innovative practices of the Asturian health system. The PHC case study has helped align Spain's national and regional health policies with global best practices. It also provides a framework for Spain's new primary and community health-care action plan for 2025–2027, set to be finalized by the end of the year.

Lessons learned

- Public perception of PHC worsened after COVID-19, and sustained efforts are needed to rebuild trust.
- The decentralization of health care in Spain causes challenges in aligning standards across regions.
- The new action plan must focus on improving continuity of care and workforce recruitment.

Donors and partners

Ministry of Health; Principality of Asturias; other regions and autonomous communities



A doctor and patient at a PHC centre in Spain.
© WHO

“The collaboration has helped us to align our national policies with the realities of our decentralized health system.”

Dr Javier Padilla, State Secretary, Ministry of Health, Spain

What's next?

Spain aims to solidify the gains made in PHC by implementing the new action plan, which is informed by the insights from the WHO-supported PHC case study and Demonstration Platform. The action plan will focus on enhancing the role of non-physician health professionals, improving working conditions and modernizing PHC infrastructure.

Leading the charge against AMR

EPW core priorities and flagships

Promoting health and well-being
Incorporating behavioural and cultural insights 🚩

WHO collaboration

Facilitating dialogue
WHO collaborating centre

SWEDEN

The misuse of antibiotics in humans and animals has accelerated resistance, making AMR a global health threat leading to prolonged illness, higher health-care costs and increased mortality. Recognizing the severity of this issue, Sweden was the first country to ban antibiotic growth promoters in animal feed in 1986, setting a global precedent.

Sweden's collaboration with the Regional Office on AMR began with piloting the Tailoring Antimicrobial Resistance Programmes (TAP) framework, which takes a behavioural insights approach. This provided a critical understanding of migrants' expectations around antibiotics. After supporting the development of the Global Antimicrobial Resistance and Use Surveillance System, the Public Health Agency of Sweden focused on regional and country-level AMR activities. Sweden supports regional efforts by leading the Baltic One Health One Plan (BALTOHOP) project, building institutional and technical capacity and strengthening Nordic-Baltic collaboration with a One Health perspective.

The impact

Sweden's leadership in AMR, particularly as chair of the novel antimicrobials working group in the Novel Medicines Platform, has advanced regional and global discussions on AMR. The Swedish Strategic Programme for the Rational Use of Antimicrobial Agents and Surveillance of Resistance (STRAMA) looks to reduce unnecessary antibiotic use and promote responsible prescribing practices. The model has been successfully adopted in other countries, demonstrating the broader impact of Sweden's collaboration with the Regional Office.

Lessons learned

- Early and targeted interventions, such as TAP, are worthwhile projects to inform policy-making.
- Regional implementation of successful models, such as STRAMA, amplifies impact beyond national borders.
- Country-to-country partnerships are essential for long-term success, and solidarity can foster progress beyond national efforts.

Donors and partners

Ministry of Health and Social Affairs; WHO Collaborating Centre for AMR Containment; ReAct



Stacks of antibiotic discs at Jönköping County Hospital.
© WHO/Malin Bring



“We’ve advanced from surveillance to integrated AMR work in health systems. Beyond data collection, we aim to build bridges with countries and foster partnerships across sectors.”

Dr Sonja Löfmark Behrendtz, Head of the WHO Collaborating Centre for AMR Containment, Sweden

What’s next?

The WHO Collaborating Centre for AMR Containment will support the implementation of the Regional Office’s AMR Roadmap 2023–2030. Key efforts include promoting the STRAMA model with a focus on the use of AMR data for action, and implementing antimicrobial stewardship programmes using behavioural insights across Europe over the next four years.

Radiation readiness: a collaborative approach

EPW core priorities and flagships

Protecting against health emergencies

WHO collaboration

Technical guidance
WHO collaborating centre

Over the past decade, Switzerland has improved its radiation protection strategies to address both natural and human-made risks. The Swiss Federal Office of Public Health is committed to implementing comprehensive measures against radiation exposure, including by addressing natural challenges such as radon in homes and preparing for potential emergencies.

WHO works closely with the Federal Office of Public Health, providing essential support in the development of the country's emergency response protocols. Annual meetings facilitate discussions on strategies, ensuring Swiss policies align with international best practices. WHO's global networks, such as the Radiation Emergencies Medical Preparedness and Response Network, connects Swiss and international experts in the field. The WHO Collaborating Centre for Radiation and Public Health at the Federal Office of Public Health supports WHO's global activities in preparedness and response, contributing to worldwide safety initiatives.

The impact

The collaboration has led to improved protocols for managing public health preparedness and response to radiation emergencies, including the distribution of iodine tablets within 50 km of nuclear power plants. The partnership has also supported the development of the Radon Action Plan 2021–2030, which aims to reduce radon-related risks in residential buildings.

Lessons learned

- Leveraging knowledge and expertise from WHO and a WHO collaborating centre benefits both national capacity and global safety initiatives.
- Public awareness and education are essential for effective emergency preparedness.
- Continuous updates and revisions of action plans ensure adaptability to emerging challenges.

Donors and partners

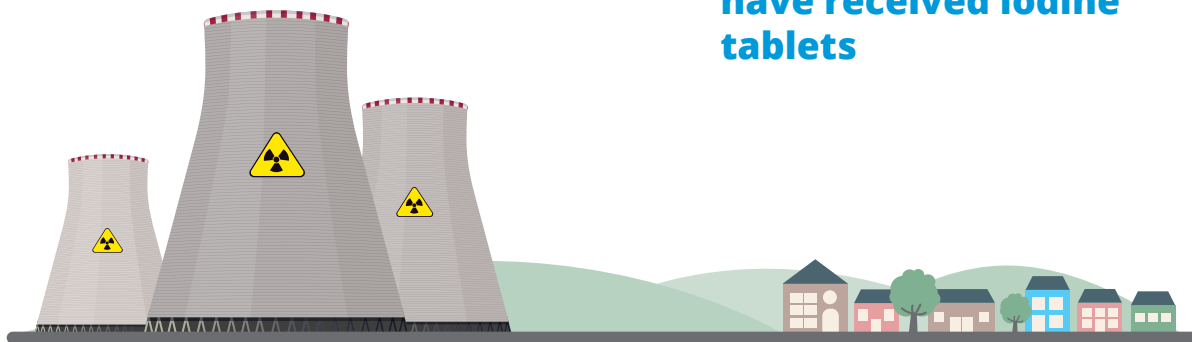
Federal Office of Public Health; Swiss Cancer League; Swiss Federal Nuclear Safety Inspectorate; International Atomic Energy Agency; other international radiological organizations

Almost

100%

of households

**within 50 km of a Swiss
nuclear power plant
have received iodine
tablets**



“Partnering with WHO is like having a trusted guide on this journey to better protect our communities from radiation risks.”

Dr Daniel Storch, Head of Section at the Radiation Protection Division, Federal Office of Public Health, Switzerland

What's next?

Switzerland will focus on integrating advanced radiation monitoring technologies and enhancing public communication. A national conference on radon and indoor air quality is planned for 2025. A new chemical, biological, radiological and nuclear action plan, led by the Regional Office and funded by the European Commission, will enhance national emergency readiness and the European presence of expert networks.

Strengthening the backbone of health care

EPW core priorities and flagships

Moving towards universal health coverage

WHO collaboration

Health research and data provision
National health review

A strategic distribution of doctors, nurses and clinical specialists is essential to ensure all citizens have access to quality health care. In Tajikistan, a major shortage of health workers, particularly in rural and remote areas, has created substantial disparities in access. The capital has five times more doctors per 10 000 people than some rural regions. Low salaries further exacerbate staffing challenges outside urban centres.

Tajikistan's Ministry of Health and Social Protection of the Population approached the Regional Office and Country Office to conduct a health labour market analysis to identify key areas for investment. The results led the Ministry to establish a working group of technical experts, medical university representatives, financial experts and other stakeholders to find solutions. In April 2023 the Regional Office facilitated a high-level policy dialogue with government and international partners, guiding discussions on closing workforce gaps based on the analysis.

The impact

The collaboration led to crucial updates to Tajikistan's national health strategy to 2030. The Regional Office also contributed to a roadmap with key reforms, including aligning nursing education with international standards, improving recruitment and working conditions, ensuring ongoing professional development, offering incentives to retain health workers in rural areas, and allocating additional places in medical universities for applicants from regions with a shortage of doctors.

Lessons learned

- The involvement of multiple ministries and international partners in the policy dialogue built consensus around key issues.
- Strategies including financial and non-financial incentives and enhanced educational development opportunities help to retain health workers.
- Data form the foundation on which progressive changes to health care can be made.

Donors and partners

Ministry of Health and Social Protection of the Population; university medical departments; EU



Nurses studying in Rudaki District, Tajikistan.
© WHO

“Health workers are the pillars of our health systems, but they need support and investment to care for their patients and their well-being.”

Professor Salomudin Yusufi, Department Head at the Ministry of Health and Social Protection of the Population, Tajikistan

What's next?

Tajikistan will focus on increasing and retaining health workers outside of urban centres. Future activities will also include revising medical education curricula to better align with health system needs, improving information systems for human resources for health, and developing incentives to attract professionals in underserved regions.

Opening doors: reaching a regulatory milestone

EPW core priorities and flagships

Moving towards universal health coverage

WHO collaboration

Technical guidance
Partnership between the Regional Office and Country Office

TÜRKIYE

In 2018 Türkiye embarked on a journey to elevate its national regulatory system for medicines and medical devices to international standards. At the time, the Turkish Medicines and Medical Devices Agency (TİTCK) recognized that WHO and other United Nations agencies could not widely procure its medical products due to a lack of regulatory recognition. TİTCK sought the Regional Office's support to use the WHO Global Benchmarking Tool, which checks regulatory functions against more than 260 indicators. It aimed to achieve a maturity level that would enhance its credibility on the world stage.

The collaboration began with a self-benchmarking workshop in 2018, followed by technical support visits until 2023, during which experts provided guidance on updating the regulatory framework. Although TİTCK's capacities were high, the agency needed strengthening in some areas. Throughout this process, the Regional Office, Country Office and WHO headquarters delivered regular workshops and consultations.

The impact

In October 2023 Türkiye achieved Maturity Level 3 in WHO's classification of regulatory authorities for medicines and vaccines. This achievement confirmed that Türkiye's regulatory system is stable, well functioning and capable of ensuring the safety, quality and efficacy of medical products. Consequently, Türkiye is now closer to being recognized as a WHO Listed Authority, allowing for its medical products to be more readily procured by international organizations, including WHO, for use in global health initiatives.

Lessons learned

- Engagement with WHO's benchmarking process opens opportunities for broader international recognition and collaboration.
- Consistent leadership and commitment are required to advance multiyear collaborations.
- The process created greater awareness among Turkish manufacturers of the importance of international standards.

Donors and partners

Ministry of Health; TİTCK

May 2019 and January 2020

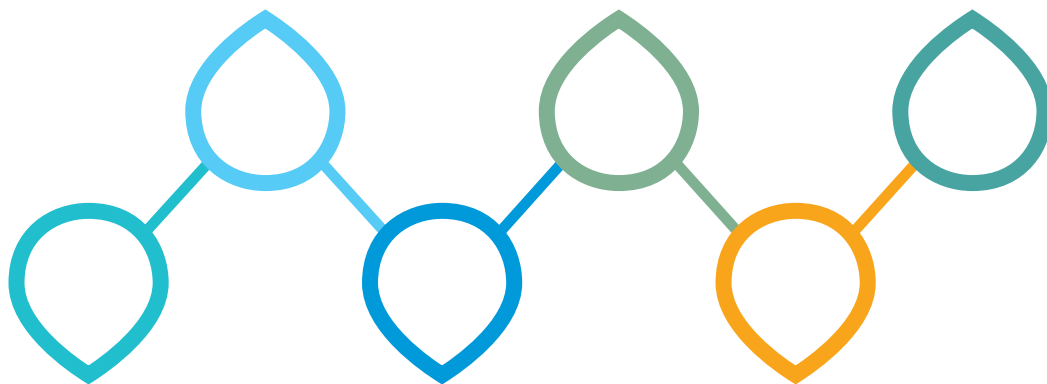
Technical support visits from the Regional Office

August 2022

Technical support visit by the Regional Office to the National Quality Control Laboratory

October 2023

TİTCK achieves WHO Maturity Level 3 for medicines and vaccines



September 2018

WHO self-benchmarking workshop in Ankara

January 2022

High-level meeting between WHO, the Ministry of Health and TİTCK

September 2022

WHO formal benchmarking begins



“This process has opened doors for Türkiye to contribute to global health by ensuring our medical products meet the highest standards.”

Dr Mehmet Kürşat Derici, Vice-President of Economic Services and Laboratory Assessment, TİTCK, Türkiye

What's next?

Türkiye plans to build on its success by addressing any remaining gaps to potentially advance to Maturity Level 4, further solidifying its position as a leading regulatory authority in the Region. Continued monitoring, annual reporting to WHO and participation in international regulatory forums will help to build upon the standards achieved.

Mitigating the impacts of climate change on health

EPW core priorities and flagships

Promoting health and well-being

WHO collaboration

Technical guidance

Country mission

As Turkmenistan experiences the effects of a changing climate, it is focusing on adaptation and mitigation strategies to fulfil the international commitments under the Paris Agreement. Rising temperatures and extreme weather events are escalating the risk of vector-borne, foodborne and waterborne diseases, increasing heat-related mortality, and straining the health-care system. Proactively addressing these emerging threats is essential for the nation's continued development and for achieving the Sustainable Development Goals.

Turkmenistan partnered with the Regional Office to create a national action plan for adapting health to climate change. This joint work is embedded in the biennial collaborative agreement between the Regional Office and the Ministry of Health and Medical Industry. The Regional Office provided technical expertise, including through advisory missions to familiarize policy-makers with international experience and best practices in climate change action plans.

The impact

In 2020 the national action plan was launched. It addresses critical areas such as strengthening the health system's capacity to respond to climate change impacts, and enhancing surveillance for infectious diseases transmitted through vectors, water, air and food. Building on this momentum, a heat-health strategy was approved in 2022, further reinforcing the country's comprehensive approach to mitigating climate-related health impacts.

Lessons learned

- Multisectoral cooperation is critical for the successful implementation of climate adaptation strategies.
- Leveraging WHO's expertise in climate and health enables the development of more scientifically informed adaptation approaches.
- Establishing clear indicators within the action plan allows for precise tracking of progress.

Donors and partners

Ministry of Health and Medical Industry



The Akhal region of Turkmenistan.
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“Adaptation measures to climate change are key to keeping our communities healthy and ensuring Turkmenistan thrives for generations to come.”

Dr Guzaliya Gazizova, Chief Specialist at the State Sanitary and Epidemiological Service, Ministry of Health and Medical Industry, Turkmenistan

What's next?

Turkmenistan plans to continue integrating climate-related health adaptation measures into broader socioeconomic strategies. Monitoring and evaluation mechanisms are being developed and will be further implemented to ensure the ongoing effectiveness of the national action plan, with continued support from the Regional Office.

Stopping polio amid crisis

EPW core priorities and flagships

Protecting against health emergencies
Promoting health and well-being
The European Immunization Agenda 2030 🇪🇺
Incorporating behavioural and cultural insights 🇺🇦

WHO collaboration

Operational support
Country cooperation strategy

In October 2021 Ukraine faced a serious public health threat when a vaccine-derived poliovirus outbreak emerged. Threatening children's health nationwide, the outbreak was exacerbated by suboptimal immunization coverage and disruptions caused by the COVID-19 pandemic. Complicating the situation, the escalation of war in early 2022 led to the mass displacement of people, damage to health-care infrastructure and disruptions to the delivery of medical supplies.

Ukraine's Ministry of Health, with support from the Global Polio Eradication Initiative, of which WHO is a partner, swiftly responded to the outbreak. The Regional Office provided technical and operational support, including guidance on enhanced poliovirus surveillance, the roll-out of a rapid immunization campaign, and strategic coordination with local health authorities. The Country Office coordinated community engagement and risk communication, which also played an important role in the response.

The impact

Ukraine successfully vaccinated nearly 140 000 children under 6 years of age who had missed their routine immunizations. Mobile vaccination teams were deployed, ensuring that even the most vulnerable and difficult-to-reach children were immunized. Despite the ongoing war, these efforts meant that no new polio cases were detected and risk of further transmission within and beyond Ukraine was prevented. The outbreak was officially declared closed in September 2023.

Lessons learned

- Close collaboration between health authorities and international organizations is crucial in crisis situations.
- Rapid outbreak responses, including targeted vaccination campaigns, can effectively control the spread of disease even in challenging environments.
- Sustaining sensitive surveillance systems for vaccine-preventable diseases, including the laboratory component, can help to ensure early detection of cases.

Donors and partners

Ministry of Health; Global Polio Eradication Initiative; USAID



A child receives a polio vaccine as part of the rapid outbreak response in Ukraine.
© WHO

“The Ministry of Health is committed to strengthening vaccine-preventable disease surveillance and working to achieve and sustain high routine immunization coverage.”

Dr Viktor Liashko, Minister of Health, Ukraine

What's next?

Ukraine aims to bolster its immunization infrastructure, maintain high polio vaccination coverage and further enhance its surveillance system to prevent future outbreaks. The Regional Office will continue to support these efforts, focusing on protecting the health of every child, even amid the challenges posed by ongoing conflict.

Harmonizing health security across Europe

EPW core priorities and flagships

Protecting against health emergencies

WHO collaboration

Cultivating knowledge exchange
National/subregional/regional
network

In an increasingly interconnected world, the risk of disease outbreaks has surged, driven by factors such as climate change, population density and frequent international travel. The COVID-19 pandemic exposed gaps in global preparedness to manage rapidly spreading diseases. Against this backdrop, the Pan-European Network for Disease Control (NDC) was established in April 2024.

Launched by the Regional Office and the United Kingdom Health Security Agency (UKHSA), the NDC aims to boost preparedness by enabling Member States to share knowledge and identify health risks before they escalate. Its three working groups (collaborative surveillance, emergency coordination and access to countermeasures) have activities underway to monitor and address potential threats. Dame Jenny Harries, Chief Executive of UKHSA, serves as Chair of the NDC Steering Group. Daily management is carried out by the Secretariat, hosted by the WHO European Centre for Preparedness for Humanitarian and Health Emergencies.

The impact

Although a new initiative, the NDC is already improving Europe's ability to respond to health threats. Its early efforts, including information-exchange meetings on avian influenza (H5N1) and mpox, are building a foundation to streamline coordination across the Region, all while reinforcing the United Kingdom's role in shaping health security policies in Europe.

Lessons learned

- Cross-border collaboration is critical for disease surveillance and control.
- Balancing resources among Member States can be challenging.
- Knowledge and insights gained during the global pandemic response must be meaningfully incorporated into future disease prevention initiatives.

Donors and partners

Various public health institutes, ministries of health and subregional entities (all partners); WHO European Centre for Preparedness for Humanitarian and Health Emergencies (donor)



Dame Jenny Harries at the launch of the Pan-European Network for Disease Control.
© WHO/Hedinn Halldorsson

“We are better prepared when we work together. Working in partnership is a crucial aspect of developing a truly global approach to health security.”

Ms Julie van der Woude, Senior Strategy Adviser for Global Strategy, UKHSA, United Kingdom

What's next?

The NDC plans to expand its membership to include more countries and institutions, including academia and civil society. It will continue to focus on enhancing preparedness for health emergencies, with upcoming meetings and activities aimed at implementing a strategic work plan and solidifying its role in Europe's health security framework.

Advancing access to outpatient medicines

EPW core priorities and flagships

Moving towards universal health coverage

WHO collaboration

Cultivating knowledge exchange
Biennial collaborative agreement

Uzbekistan has struggled to ensure a timely and uninterrupted supply of essential medicines, leading to high out-of-pocket costs and poor health outcomes, especially for those with chronic conditions. With the Regional Office's support, the Ministry of Health and the State Health Insurance Fund introduced a reimbursement scheme for medicines targeting five key NCDs, aligning with the President's priority of equitable health-care access. Patients now receive selected medicines at no cost from community pharmacies, which are reimbursed by the State Health Insurance Fund.

The Regional Office's expert guidance, based on best practices, has been essential to success. In 2023, for example, it facilitated discussions among six countries, including Uzbekistan, focused on medicines pricing, selection and reimbursement. Seamless collaboration between WHO offices and national partners is actively shaping a sustainable, patient-centred health system.

The impact

Starting as a pilot in Syrdarya Oblast in 2022, the reimbursement scheme later expanded to the capital of Tashkent. It continues to progressively increase the geographical coverage, the volume of reimbursed products and the number of beneficiaries. By May 2024, over 40 000 people were covered under the scheme, with 11 medicines eligible for reimbursement.

Lessons learned

- Health financing reform should be comprehensive, covering both health services and medical products.
- Effective pricing and reimbursement mechanisms should be adapted to the national context and health priorities.
- The Ministry of Health's coordination and the State Health Insurance Fund's inclusive outreach to stakeholders are paving the way to further expand the reimbursement scheme.

Donors and partners

Ministry of Health; State Health Insurance Fund; UHC Partnership



A patient receives medicines in a community pharmacy participating in Uzbekistan's reimbursement programme.
© State Health Insurance Fund of Uzbekistan



“WHO’s comprehensive support has been instrumental in shaping our national reimbursement system into a patient-centred partnership.”

Dr Farukh Sharipov, Deputy Minister of Health and former Executive Director of the State Health Insurance Fund, Uzbekistan

“This collaboration multiplies the impact of the medicines reimbursement system, increasing coverage and helping us to reach more people to cater for their health.”

Mr Zokhid Ermatov, Chief Executive Officer of the State Health Insurance Fund, Uzbekistan

What’s next?

Uzbekistan plans to expand the reimbursement system nationwide. The initiative has created a platform on which additional priority medicines can be added, further improving coverage. WHO remains committed to supporting Uzbekistan’s journey towards universal health coverage and Sustainable Development Goal 3: health and well-being for all.

The WHO Regional Office for Europe

The World Health Organization (WHO) is a specialized agency of the United Nations created in 1948 with the primary responsibility for international health matters and public health. The WHO Regional Office for Europe is one of six regional offices throughout the world, each with its own programme geared to the particular health conditions of the countries it serves.

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