Member States have continued to make significant progress towards ambitious communicable disease control and elimination goals. In supporting Member State efforts, WHO’s strategic focus has been to consider these goals as key universal health coverage (UHC) challenges: they will not be achieved and sustained unless quality disease prevention, diagnosis and treatment services reach all who need them.

An important example of this has been the increased service coverage achieved through implementation of the Regional Framework for Action on Implementation of the End TB Strategy in the Western Pacific, 2016–2020, particularly the expansion of rapid diagnostic tools and new drugs for treating drug-resistant tuberculosis (TB).

In the first year of implementation, the number of cases tested for rifampicin resistance increased by 46%, resulting in an increase in drug-susceptibility testing coverage of 42%. The number of people living with HIV receiving isoniazid therapy to prevent TB co-infection increased by 41%, and people with TB/HIV co-infection receiving antiretroviral therapy (ART) increased by 36%.

Member States in the Region have also been leading the way in national TB patient
cost surveys to identify the extent to which families are incurring catastrophic costs due to TB. Seven surveys have been undertaken or planned. The information produced will be important for the strengthening of national efforts to end TB.

Similarly, WHO work on HIV, hepatitis and sexually transmitted infections has focused on supporting countries to provide key interventions to all who need them, with an emphasis on whole-of-system and integrated delivery approaches. The Member State endorsement of the Regional Framework for the Triple Elimination of Mother-to-Child Transmission of HIV, Hepatitis B and Syphilis in Asia and the Pacific 2018–2030 was a key milestone. The framework takes an integrated and coordinated approach to achieving triple elimination, emphasizing the principles of UHC and mother-, newborn- and child-centred care.

WHO continued its work with Member States to help improve coverage of key HIV services, with Cambodia achieving the “90–90–90” coverage target three years ahead of the 2020 deadline. This means as of 2017 in Cambodia, 90% of all people living with HIV know their HIV status; 90% of all people with diagnosed HIV infection receive sustained antiretroviral therapy; and 90% of all people receiving antiretroviral therapy have viral suppression. Overall, 73% of people living with HIV in the Region have been diagnosed, and 55% have accessed treatment. Progress has been made, but much more remains to be done.

To help improve access to important hepatitis interventions, support was provided to Cambodia, China, Kiribati, Mongolia and the Philippines to identify how best to deliver viral hepatitis testing and treatment services and monitor patients using existing health services, laboratory and information systems. Eleven countries have completed disease burden estimates for viral hepatitis B and C. National hepatitis action plans are available in eight countries.

Contributing to global and regional efforts to combat antimicrobial resistance, WHO provided support to strengthen gonococcal antimicrobial resistance surveillance in Cambodia and the Philippines.

Most malaria-endemic countries have continued to make good progress towards achieving national elimination, although Cambodia, Papua New Guinea and Solomon Islands experienced an increase in the total number of cases, due to outbreaks. Supporting countries on the journey to elimination remains the key focus for WHO, along with the battle against partial resistance to artemisinin and its partner drugs in the Greater Mekong Subregion: no new foci of resistance were detected, indicating that further expansion of affected areas was prevented during the year.

Strengthened surveillance will be key to achieving and sustaining malaria elimination. Efforts to achieve such strengthening, along with updating national treatment guidelines, have continued in many endemic countries, guided by the Regional Action Framework for Malaria Control and Elimination in the Western Pacific (2016–2020). Important progress has also been made in combat-
ing neglected tropical diseases (NTDs). Tonga was validated as having achieved elimination of lymphatic filariasis as a public health problem, while Cambodia and the Lao People’s Democratic Republic were validated as having achieved elimination of blinding trachoma as a public health problem. High population coverage with mass preventive chemotherapy helped Member States make further progress on the control and elimination of selected NTDs. Strengthening integrated intersectoral efforts continues to be needed in the water, sanitation and hygiene as well as food safety and animal health sectors, to eliminate Asian schistosomiasis and control other zoonotic and foodborne NTDs.

Continued efforts to assure access to integrated, effective and high-quality immunization services have produced measurable achievements at the regional and national levels. For example, the Region as a whole has achieved 97.3% coverage of three doses of diphtheria–tetanus–pertussis vaccine, while 22 countries and areas have reached coverage of over 90%, a goal of the Decade of Vaccines initiative.

Cambodia successfully sustained measles elimination, despite multiple importations of measles virus from endemic countries. New Zealand and the Republic of Korea were the first countries in the Region to be verified as having achieved rubella elimination. The Lao People’s Democratic Republic conducted a periodic intensification of routine immunization activities with inactivated polio vaccine, which helped close immunity gaps of other vaccine-preventable diseases as well.

Meanwhile, the Philippines achieved maternal and neonatal tetanus elimination after three quality rounds of tetanus vaccination in the Autonomous Region in Muslim Mindanao, an isolated region with armed conflicts and other security concerns. Efforts to further increase the health impact of immunization through the introduction of new vaccines also continued. For instance, Mongolia introduced pneumococcal conjugate vaccine to cover Ulaanbaatar in early 2018, and it plans to cover the whole country in 2019.

Continued progress in these important areas is cause for celebration. However, if together we are to ensure that no one is left behind — that quality services reach all who need them, and that these services are sustained — there is still much to be done.