



## Reports of advisory bodies and related issues

### WHO policy concerning expert committees

#### Report by the Director-General

The Executive Board at its 101st session in January 1998 requested a report clarifying WHO policy concerning expert committees and their functions, including composition, tasks, responsibilities, time-span, and the use of their reports by the Organization and Member States, for submission to the Board at its 102nd session in May 1998.<sup>1</sup> The Board is invited to note the report.

1. One of WHO's greatest strengths in international health work is its "**convening power**", that is, the ability to call upon the best brains, knowledge, experience and capacity of individual experts, institutions and countries around the world, and to bring their expertise to bear on health development issues.
2. From the inception of WHO, it was understood and intended that the expertise needed for "directing and coordinating" international health work, in the sense of Article 2 of the Constitution of WHO, would come not so much from the Organization's staff, important as that is, but from outside, through WHO's "convening power".
3. **Formal** expertise in WHO is derived from the activity of expert bodies governed by formal regulations or by resolutions of the Health Assembly and Executive Board. There are virtually unlimited **informal** ways for the Director-General to seek expertise, as required, in the pursuit of the Organization's work, including use of ad hoc individual and group consultations.
4. WHO relies on individual **expert advisory panel** members for consultation, and draws on them for participation in purposeful, time-limited meetings of **expert committees** designed to reach authoritative opinion or consensus on significant issues. Furthermore, **study groups** may be convened where the state of knowledge is still too uncertain for an expert committee conclusion, and specialists may be drawn widely from outside the expert advisory panels. The use of expert committee reports is further discussed in paragraphs 19 and 20 below.

<sup>1</sup> Document EB101/1998/REC/1, eleventh meeting.

5. For a comprehensive discussion of the wider context of expertise in WHO, still largely valid today, the reader may refer to the Executive Board's 1980 organizational study on the role of WHO expert advisory panels and committees and collaborating centres in meeting the needs of WHO regarding expert advice and in carrying out technical activities of WHO.<sup>1</sup>

## CONSTITUTIONAL BASIS FOR EXPERT ADVISORY PANELS AND EXPERT COMMITTEES

6. The Health Assembly and Executive Board have authority under Articles 18(e) and 38 of the Constitution of WHO to establish and dissolve formal committees, including expert committees, necessary for the work of the Organization. The same authority is construed to include the establishment of expert advisory panels by the Director-General, as chief technical and administrative officer subject to the authority of the Board.

7. As early as 1948 the First World Health Assembly established several expert committees, intended to continue on a fairly permanent basis, to deal with priority subjects such as malaria, tuberculosis, venereal diseases, maternal and child health and nutrition.

8. Experience soon demonstrated, however, that there was a need for more diversified expert advice from a correspondingly more changeable membership and focus. This led to the establishment of wider "expert committee" meetings, convened by the Director-General when a major new development occurred within a programme area calling for an authoritative expert conclusion. Thus, today, expert advisory panels and expert committees are part of an integrated system.

9. Exercising its constitutional authority, and on the advice of the Board, the Thirty-fifth World Health Assembly in 1982, adopted revised Regulations for expert advisory panels and committees.<sup>2</sup> The main aspects of the system are briefly outlined below.

## OPERATION OF THE EXPERT ADVISORY PANEL AND COMMITTEE SYSTEM

10. **Definitions.** An **expert advisory panel** consists of experts from whom the Organization may obtain technical guidance and support relating to a WHO programme (e.g. Food and Nutrition) and within a particular subject area (e.g. Food Safety), either by correspondence (including electronic means) or at meetings to which experts may be invited. An **expert committee** is a group of expert advisory panel members officially convened by the Director-General for the purpose of reviewing and making technical recommendations on a specific technical subject or problem (e.g. Joint FAO/WHO Expert Committee on Food Additives) where the matter calls for current authoritative expert conclusion or consensus.

11. **Authority.** An **expert advisory panel** may be established by the Director-General in any field required, serving the Organization as a whole, and utilized at whatever level its guidance and support are necessary. The Director-General reports to the Executive Board on the establishment or disestablishment of expert advisory panels and on their membership. Proposals for specific **expert committee** meetings must be included in the WHO biennial programme budget. Technical conclusions of an expert committee are considered authoritative in their own right, but do not bind the Organization.

12. **Membership.** Qualification in medicine or public health is not a prerequisite. Any person possessing qualifications and/or experience relevant and useful to the activities of WHO in a field covered by an established **expert advisory panel** may be considered for appointment as a member of that panel after consultation with the national authorities concerned. The Organization also endeavours to ensure the broadest possible international

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<sup>1</sup> Document EB65/1980/REC/1, Annex 6.

<sup>2</sup> See *Basic Documents*, 41st edition, 1996, page 98, also available as an off-print, document RPS/HQ-1.06.96.

representation in terms of diversity of knowledge, experience and approaches in the fields for which the panels are established. Panel members receive no remuneration but are covered for expenses and by agency immunities when on actual duty. The Director-General establishes the number of experts to be invited to a particular **expert committee**, and selects participants from a particular expert advisory panel, taking into account adequate representation of different trends of thought, approaches and practical experience in various parts of the world, as well as an appropriate interdisciplinary balance. Organizations of the United Nations system, and nongovernmental organizations in official relations with WHO, are normally invited to send representatives to expert committee meetings in which they are directly interested. Changes in the membership of WHO expert advisory panels and number of experts serving are routinely reported to the Executive Board.

13. **Duration.** An **expert advisory panel** may be established by the Director-General at any time, as and when required, and it may be disestablished when its guidance and support are no longer required. In practice, most panels are long-standing because the basic problems (e.g. malaria, tuberculosis, drug dependence) persist, although in an evolving world context (e.g. deforestation, urbanization, social change). Members of an expert advisory panel are appointed for a term up to four years, renewable as warranted, and subject to termination in the interest of the Organization. The Director-General determines the date, duration and venue of **expert committee** meetings, and membership participation is limited to the duration of the particular meeting.

14. **Agenda of work.** The draft agenda for each **expert committee** meeting is prepared and transmitted in reasonable time to members of the Committee and of the Executive Board, and to the Member States. An expert committee, unless formally so requested, may not deal with questions of administrative policy. The agenda may include any subject, within the terms of reference of the Committee, proposed by the Health Assembly, the Executive Board or the Director-General.

15. **Procedures.** These are governed by the Rules of Procedure for Expert Committees. Normally, meetings of expert committees are held in private, unless they become public by express decision of the committee, with the full agreement of the Director-General, who is **ex officio** secretary of all expert committees, a function which may be delegated. Conduct of business and voting in expert committees is guided by the Rules of Procedure of the Executive Board as necessary. Scientific questions may not be put to a vote. If members of a committee cannot agree on a scientific issue, each is entitled to have his or her personal opinion reflected in the eventual report, stating the reasons why a divergent opinion is held.

16. **Reports.** For each meeting an expert committee draws up a report setting out its findings, observations and recommendations. Recommendations are advisory, may not commit the Organization, and must not call on the Director-General to use WHO staff, services or funds in any specified way. The text of an expert committee report may not be modified without the committee's consent. The Director-General may call attention to what might be considered prejudicial to WHO or a Member State, and any difficulty arising out of a divergence of views can be referred to the Executive Board. The Director-General may authorize publication of expert committee reports, normally in the Technical Report Series.

## **ROLE OF THE EXECUTIVE BOARD IN THE FOLLOW-UP OF EXPERT COMMITTEE REPORTS**

17. It has been the practice to submit the full reports of expert committees to the Executive Board. The question was often raised, however, whether and how the Board, with its heavy agenda, could fully review these reports, or introduce their own views. If the Board could not intervene on the full text, would it not be more efficient and effective for the Director-General to report on the programme implications or actions to be taken and seek the Board's views on them? After reviewing the role of the Executive Board in the follow-up of reports of expert committees and study groups, the Board at its eighty-third session reaffirmed the principle that, in view of the technical and scientific expertise of members of expert committees and study groups, the substance of their reports must be respected in its entirety. It urged that current technology should be used to shorten the period between the convening of meetings and the publication of reports and decided that the Director-General should

present to the Board an introductory statement summarizing his views in terms of programme policy, and that he may select those reports which he considers to be of critical public health importance, or may influence the selection of WHO's future priorities, for closer examination by the then Programme Committee before being submitted to the Board for review.<sup>1</sup>

18. Accordingly, the revised Regulations for Expert Advisory Panels and Committees, paragraph 4.23 on reporting to the Board, now read as follows:

*The Director-General shall submit to the Executive Board a report on meetings of expert committees held since the previous session of the Board. It shall contain his observations on the implications of the expert committee reports and his recommendations on the follow-up action to be taken, and the texts of the recommendations of the expert committee shall be annexed. The Executive Board shall consider the report submitted by the Director-General and address its comments to it.*

## **USE OF TECHNICAL REPORTS BY WHO PROGRAMMES AND MEMBER STATES**

19. The WHO Technical Report Series constitutes the primary standard vehicle for publishing and transmitting the findings and conclusions of expert committees, study groups and scientific groups. Over the years, these reports have developed a wealth of knowledge, largely thanks to the quality of experts that WHO's "convening power" has been able to bring together around issues of critical importance.

20. Periodic appraisal shows that WHO programmes make direct use of the Technical Reports at global, regional and country levels. Surveys of Member States show that WHO Technical Reports are taken as an authoritative guide in public health issues, often helping to resolve questions arising from the profusion of health and medical literature and sources continuously generated. This is not to say that there has not been constructive criticism. Two challenges remain: how to make expert reports more readable to local audiences; and how to promote their wider distribution and use within countries and communities.

## **ACTION BY THE EXECUTIVE BOARD**

21. The Board is invited to note the report.

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<sup>1</sup> Decision EB83(9).