Outcome of the Fifty-fourth World Health Assembly

Report by the Representatives of the Executive Board

1. The Fifty-fourth World Health Assembly dealt with a heavy agenda which included review and approval of WHO’s Proposed programme budget for the years 2002–2003; 10 subitems under technical and health matters; financial and management matters; collaboration within the United Nations system and with other intergovernmental organizations; health conditions of, and assistance to, the Arab population in the occupied Arab territories, including Palestine; and governing bodies matters. The Health Assembly adopted 22 resolutions. Not all the items on the agenda were straight forward. Some were potentially controversial. Some touched economic interests as well as health concerns. And some had been given greater prominence by recent and intense media coverage. Yet despite the complexity of the issues, the meetings were conducted in an outstanding spirit of collaboration and cooperation among delegates.

2. In her report to the Health Assembly, the Director-General described this year as one of hope, characterized by new reasons to be optimistic and a corresponding pressure to act with unprecedented effectiveness and solidarity. Throughout its deliberations, the delegates looked for ways to build a united approach to combat some of the most pressing public health problems of our times. HIV/AIDS figured prominently in the debates, as did the related need to find ways of ensuring equitable access to essential medicines at affordable prices. The Secretary-General of the United Nations addressed a special plenary meeting of the Health Assembly. He underlined the commitment of the entire United Nations system to attacking the HIV/AIDS pandemic at all levels.

3. Under the agenda item on the programme budget, the Health Assembly adopted, by consensus, a resolution on the General programme of work. This document will guide the work of WHO, in an appropriately flexible manner, during the years 2002–2005. The Health Assembly then took up the Proposed programme budget for the years 2002–2003. Numerous delegates took the floor to express their satisfaction with this strategic, results-based budget, and to suggest improvements for the future. Delegates welcomed the clear structure according to 35 areas of work and the firm focus on 11 agreed priorities. After considerable discussion and negotiation, the Health Assembly adopted, by consensus, the appropriations resolution.

4. Under the agenda item on technical and health matters, the subitem on the global strategy for infant and young child feeding was taken up in an especially spirited debate. With some carefully worded amendments concerning the optimum duration of exclusive breastfeeding, this resolution, which means so much for the immediate and future health of the youngest citizens, was adopted by consensus.
5. The debate on HIV/AIDS attracted great attention from delegates, who came well prepared to provide guidance for the scaling up of WHO’s response to the pandemic. Delegates took the floor to convey, often with great feeling, their first-hand experiences of the unprecedented devastation, in terms of social and economic impact as well as the enormous human misery and premature deaths caused by this disease. While the need to make life-saving drugs more accessible and affordable was expressed, delegates emphasized the equal need to step up efforts aimed at prevention, and to recognize that the challenge can never be met without well-functioning health systems and laboratory services. Delegates also used this opportunity to exchange lessons learnt from successful strategies and effective interventions, thus adding a measure of optimism and hope. Many of the conclusions reached were reflected in a resolution, on scaling up the response to HIV/AIDS, which was adopted by consensus.

6. The debate on the revised drug strategy covered several difficult matters concerning patents, prices, intellectual property rights, and the rights of people to have access to safe, affordable, effective and often life-saving medicines. A resolution on this subitem, which delegates renamed the WHO medicines strategy, was likewise adopted by consensus.

7. The importance of health promotion, which surfaced repeatedly during the debate on the HIV/AIDS pandemic, was further elaborated as the Health Assembly considered the subitem on this topic. Delegates stressed the fundamental importance of health promotion to the quality of life and the health of populations facing problems ranging from the adverse effects of unhealthy lifestyles to growing numbers of elderly persons.

8. Although the vital importance of health systems was likewise an underlying theme in the debates on both HIV/AIDS and the medicines strategy, the urgent need to strengthen health systems received full attention in a subitem on this topic. The Health Assembly first addressed the difficulties caused by the almost universal shortage of nursing and midwifery personnel. The discussions helped both to clarify the reasons for the dwindling numbers of these crucial personnel and to identify possible solutions for the future. The Health Assembly then considered the particular obstacles to strengthening health systems in developing countries. The two resolutions on this subitem were, once again, adopted by consensus.

9. In an interconnected and highly mobile world, infectious disease outbreaks anywhere have the potential to endanger health everywhere. The importance of such threats to global health security was firmly underscored during the debate on this subitem, which concentrated on WHO’s strengthened mechanisms for facilitating the rapid detection of epidemics and orchestrating the response needed for quick and efficient containment. Delegates expressed appreciation for WHO support in coordinating the international response to recent outbreaks of malaria, cholera, plague, Nipah virus infection, typhoid, Ebola haemorrhagic fever and other diseases. The Health Assembly also considered the need to modernize the International Health Regulations and to ensure that developing countries receive support in strengthening their epidemiological and laboratory capacities. A resolution on this subitem was adopted by consensus.

10. The debate on the control of schistosomiasis showed the will of the international community to take action against a neglected disease that affects society’s vulnerable groups and imposes a huge burden in socioeconomic terms as well as great human misery. Targets and strategies for tackling this disease were set out in a resolution, which was adopted by consensus. The Health Assembly then considered the need to have a better scientific understanding of the health effects of depleted uranium. It also discussed and adopted, by consensus, a resolution on the International Classification of Functioning, Disability and Health, which has now been given the shortened acronym ICF.
11. Under the subitem dealing with tobacco control, the Health Assembly noted the reports on the Intergovernmental Negotiating Body and on activities related to the framework convention on tobacco control. A resolution on transparency in the tobacco control process was adopted.

12. Numerous items were dealt with under financial matters, notably the revised Financial Rules, the interim Financial report on the accounts of WHO for 2000, which was adopted by resolution, the interim report of the External Auditor and the report of the Internal Auditor. The status of collection of assessed contributions, including Members in arrears in the payment of their contributions to an extent that would justify invoking Article 7 of the Constitution, was approved by resolution. The Health Assembly adopted a resolution setting forth a procedure for special arrangements for settlement of arrears. Other matters discussed included the Real Estate Fund, Casual Income and Assessment of new Members and Associate Members, all adopted by resolution.

13. A very lengthy discussion on scale of assessments led to a compromise proposal being put forward by the Director-General. A resolution on assessed contributions for the financial period 2002-2003 was adopted by consensus.

14. Under staffing matters, the annual report on human resources and the report of the United Nations Joint Staff Pension Board were noted, the amendments to the Staff Regulations and Staff Rules were approved, and members and alternate members of the WHO Staff Pension Committee were nominated.

15. After a roll-call vote, a resolution on health conditions of, and assistance to, the Arab population in the occupied Arab territories, including Palestine, was adopted. Discussion of collaboration within the United Nations system and with other intergovernmental organizations resulted in adoption of one resolution on the International Decade of the World’s Indigenous People. The report on the use of languages in WHO was noted.

16. One supplementary item on the effective functioning of the governing bodies in WHO was added to the agenda. A working group was convened and, after lengthy discussion, a resolution on Reform of the Executive Board was adopted.