

Director-General and Deputy Director-General of the World Health Organization: review of matters arising from the special and 118th sessions of the Executive Board

Report by the Secretariat

1. At its special session (23 May 2006), and at its 118th session during consideration of the agenda items on acceleration of the procedure to elect the next Director-General of the World Health Organization and on the Deputy Director-General, the Board reviewed and discussed several aspects of the situation arising out of the death of the late Director-General, Dr Jong-wook Lee.¹ It focused in particular on the modalities by which a Deputy Director-General was appointed and on the imperfect alignment of the Rules of Procedure of the World Health Assembly and of the Executive Board in case of a vacancy in the post of Director-General. Some members also raised the question of regional rotation of the post of Director-General.

2. As requested, the present report deals with relevant aspects of the foregoing issues, together with some practical aspects of the procedure for the nomination of a person to the post of Director-General which would warrant clarification, based on the experience gained during the process just concluded.

RULES OF PROCEDURE OF THE WORLD HEALTH ASSEMBLY AND THE EXECUTIVE BOARD

3. At both its special session and 118th session, the Board made comments to the effect that there was an inconsistency between Rule 109 of the Rules of Procedure of the World Health Assembly and Rule 52 of the Rules of Procedure of the Executive Board in case of a sudden vacancy in the post of Director-General. In particular, Rule 109 prescribes that, whenever the office of Director-General is vacant, the Board shall, at its next meeting, make a nomination which shall be submitted to the next session of the Health Assembly. In contrast, Rule 52 of the Rules of Procedure of the Executive Board lays out a structured process beginning at least six months before the opening of a session of the Board at which a Director-General is to be nominated. In case of a sudden vacancy in the post of Director-General, it might be hard to reconcile the requirements of those two rules if they are

¹ See document EBSS-EB118/2006/REC/1, summary record of the special session and summary records of the first, second, third and fourth meetings of the 118th session.

interpreted literally. On the other hand, those provisions were drafted at different times and should be interpreted flexibly in particular circumstances, having regard to their fundamental purpose, namely, to ensure a swift yet orderly and thorough process of nomination of a new Director-General. The Board at its 118th session therefore considered that it was within its authority under its Rules of Procedure to defer nomination of the next Director-General to its 119th session.

4. Thus the way in which the two rules can be reconciled might be sufficient to guide the Board in case of a future sudden vacancy in the post of Director-General. Alternatively, consideration could be given to amending the Rules of Procedure of the World Health Assembly and of the Executive Board in order to clarify the situation. The amendment could provide that the Board would make a nomination as soon as possible, rather than specifically at its next meeting.

PROCEDURE FOR NOMINATION OF THE DIRECTOR-GENERAL

5. The procedure for nomination of the Director-General by the Board is based on Rule 52 of the Rules of Procedure of the Executive Board, and decision EB100(7) which contains detailed provisions for implementing certain aspects of Rule 52. Resolution EB97.R10 sets forth the criteria that should be fulfilled by the candidate nominated by the Board.

6. Even though the overall process, which has been followed on three occasions (1998, 2003 and 2006), has been implemented smoothly, the legal basis of some aspects is not entirely clear and could raise uncertainties or cause difficulties for the Chairman of the Executive Board or the Secretariat, as outlined below.

7. One of the criteria that the candidate nominated by the Executive Board should fulfill is “the good physical condition required of all staff members of the Organization”. The Board, however, did not clarify the way in which the matter should be handled. Consequently, the Secretariat developed the following procedure to assure that this criterion is met. The Secretariat invites the persons who have been proposed for the post of Director-General to undergo a medical examination and to have a completed WHO medical examination form brought to the attention of the Director, Health and Medical Services at headquarters. The Director, Health and Medical Services, in turn reports to the Chairman of the Board whether the candidates appear to enjoy the good physical condition required of all staff members of WHO, and the Chairman informs the Board accordingly.

8. All candidates in the last three nomination processes have complied with the request to submit a medical examination form, and all have been found to enjoy the required physical condition. The process as described has been acceptable to candidates and Board members. Nonetheless, lack of definition by the Board of a specific procedure to assure compliance with the aforementioned criterion leaves its legal force unclear, for example, in the case of a candidate who refuses to produce a medical examination form, and could raise issues of privacy if specific information about the health status of a candidate were to be reported to the Board.

9. Paragraph (1) of decision EB100(7) states that “there should be a guideline of two to three pages for each candidate’s curriculum vitae;...”. The Chairmen of the Board, on the occasion of the last three nominations, have tackled the question of material that substantially exceeded three pages by extracting essential parts of the documentation received so as to reduce it to the limit envisaged by the guideline. The practical difficulty of this process has led to some difference in length in the documentation distributed to the Board, although there has been no criticism from either members or candidates. Notwithstanding, the legal force of “a guideline” is unclear, which could expose the

Chairman of the Board to challenges should a candidate, or the Member State that proposed him or her, object to the reduction in the length of the material submitted. It would be preferable for the Board to specify that the limit of three pages is a requirement that can be enforced by the Chairman of the Board. Moreover, in view of the wide variations in the format of curricula vitae (e.g. font size, line spacing, page layout), the Board may wish to consider moving from a limit based on a number of pages to one based on the total number of words, for example, 2000 words.

10. Rule 52 provides that the proposals received from Member States, curricula vitae and supporting information should be translated into all official languages, duplicated and dispatched to all Member States one month before the opening of the Board's session. The Rule does not clarify what information the Secretariat may make public. Because of the high level of interest in the election of a Director-General of WHO, the Secretariat is subject to pressure from the media to release information. Lack of a clear legal basis as to what it may do with information concerning the candidates places the Secretariat in a difficult position. For the election just concluded it released only the names of the candidates. Given the ease with which such information may be retrieved and circulated through electronic media, it could be argued that the transparency and legitimacy of the process would benefit from its public disclosure. The Board may wish to consider whether, in addition to the names of candidates, the Secretariat may post on WHO's web site the curricula vitae and other supporting information as dispatched to Member States, and contact information, unless the candidate concerned or the Member State that proposed him or her stipulates otherwise,

DEPUTY DIRECTOR-GENERAL OF THE WORLD HEALTH ORGANIZATION

History

11. The position of Deputy Director-General of the World Health Organization has been filled for approximately 42 years and, on an *ad interim* basis, for approximately two years in the 59 years of the Organization's existence.¹

12. Specifically, the position of Deputy Director-General was occupied from 21 August 1950 to 1 August 1992, with one three-week interruption. During this period, the position was filled by three staff members, namely: Dr Pierre Dorolle from 21 August 1950 to 31 October 1973; Dr Thomas Lambo, from 1 November 1973 until 1 July 1988 (with the exception of a short period in 1974, when the position was filled by Dr Dorolle); and from 21 July 1988 to 1 August 1992 by Dr Mohammed Abdelmoumène. In addition, from 1 June 1996 to 21 July 1998, the position of Deputy Director-General was filled by two Assistant Directors-General, who were appointed Deputy Director-General on an *ad interim* basis from 1 June 1996 to 1 May 1997 and from 1 May 1997 to 21 July 1998, respectively.

13. Most recently, Dr Anders Nordström was appointed Deputy Director-General by the late Director-General Dr Lee, and began exercising those functions immediately after the death of Dr Lee on 22 May 2006. The Board reviewed the situation at its special session and appointed Dr Nordström to serve as Acting Director-General.²

¹ See document EB118/19.

² Decision EBSS(1).

Conditions of employment

14. The conditions of employment of the Deputy Director-General are determined in accordance with the Staff Regulations and Staff Rules of WHO. According to Staff Regulation 3.1, “The salaries for the Deputy Director-General, Assistant Directors-General and Regional Directors shall be determined by the World Health Assembly on the recommendation of the Director-General and with the advice of the Executive Board.”.

15. The posts of Director-General, Deputy Director-General, Regional Directors and Assistant Directors-General are all ungraded posts. Within this ungraded category, there are three levels: Regional Directors and Assistant Directors-General are at the first level, the Deputy Director-General is at the second level, and the Director-General is at the third level.

16. The level of remuneration for the Deputy Director-General is equivalent to that of an Under Secretary-General in the United Nations. The salary for the position of Deputy Director-General at WHO was last set in 1998. The Board at its current session will consider the salary to be recommended to the Sixtieth World Health Assembly, namely, a gross level of US\$ 185 874 with a corresponding net salary of US\$ 133 818 (dependency rate) or US\$ 120 429 (single rate)¹.

17. WHO’s staffing tables have been updated to show the position of Deputy Director-General, whether the position is occupied or not.

Appointment of the Deputy Director-General

18. The Deputy Director-General is an official appointed by the respective Director-General in the exercise of his or her authority under WHO’s Constitution and Staff Regulations.

19. Specifically, Article 31 of the WHO’s Constitution states that the Director-General is “... the chief technical and administrative officer of the Organization.”. Article 35 of the WHO Constitution states, “The Director-General shall appoint the staff of the Secretariat in accordance with staff regulations established by the Health Assembly.” Staff Regulation 4.1 states, “The Director-General shall appoint staff members as required”, and paragraph 4.5 of the same Regulation refers specifically to the appointment of the Deputy Director-General.

Duties of the Deputy Director-General

20. With the intention of appointing a Deputy Director-General, the Director-General elect foresees certain general parameters for the post. The Deputy Director-General would, as assigned, undertake special initiatives of high-priority and carry out specific, high-level, technical and administrative functions. He or she would play an important role in assisting the Director-General in leading and managing the programmes and operations of WHO. The Deputy Director-General would support the Director-General in ensuring coherence of activities and programmes that cross functional sectors. He or she would also assist the Director-General in efforts to heighten public awareness of WHO’s priority activities. The incumbent would also perform the functions of Director-General should the Director-General be unable to perform the functions of the office or in case of a vacancy in the office, subject to any relevant decision by the Executive Board.

¹ See document EB120/29.

21. It is not expected that the Deputy Director-General would act on behalf of the Director-General during her absence on duty travel or leave, or replace the Director-General in her primary role of collaboration with Regional Directors in pursuing WHO's work globally.
22. The Director-General elect has confirmed that the appointment of a Deputy Director-General would be announced publicly, without delay.

GEOGRAPHICAL ROTATION OF THE POST OF DIRECTOR-GENERAL

23. Neither WHO's Constitution nor Rules of Procedure of the World Health Assembly provide for the rotation of the post of Director-General among the six regions of WHO. Article 31 of the Constitution states only "The Director-General shall be appointed by the Health Assembly on the nomination of the Board on such terms as the Health Assembly may determine." Rule 108 of the Rules of Procedure of the World Health Assembly is congruent with Article 31.
24. There have been seven Directors-General of WHO:
- Dr Brock Chisholm (Canada), 1948–1953
 - Dr Marcolino Gomes Candau (Brazil), 1953–1973
 - Dr Halfdan Mahler (Denmark), 1973–1988
 - Dr Hiroshi Nakajima (Japan), 1988–1998
 - Dr Gro Harlem Brundtland (Norway), 1998–2003
 - Dr Jong-wook Lee (Republic of Korea), 2003–2006
 - Dr Margaret Chan (China), Director-General elect assuming office on 4 January 2007.
25. A number of other organizations of the United Nations system, and related organizations were consulted about their statutory provisions and practices.¹ All those that replied reported that neither their constitution nor rules contained a requirement for geographical rotation for the post of executive head. Most organizations have no established practice in this regard, and the pattern of elections of the executive head shows that, although consideration of regional rotation carried some weight at a political level, it did not impinge directly on selection.
26. From a legal view point, it should be noted that Article 35 of WHO's Constitution states,

The paramount consideration in the employment of the staff shall be to assure that the efficiency, integrity and internationally representative character of the Secretariat shall be maintained at the highest level. Due regard shall be paid also to the importance of recruiting the staff on as wide a geographical basis as possible.

Although that provision is largely addressed to the Director-General, who has the constitutional authority to appoint the staff of the Organization, Article 35 make it clear that geographical

¹ The following organizations responded to the request for information: United Nations, WMO, UNESCO, ITU, Organisation for the Prohibition of Chemical Weapons, ICAO, FAO, International Organization for Migration, World Intellectual Property Organization, ILO, IMO and IMF.

representation, albeit an important consideration, is secondary to the paramount criterion of the highest standard of efficiency and integrity. The Executive Board may wish to keep this consideration in mind when discussing the issue of geographical rotation of the post of Director-General.

ACTION BY THE EXECUTIVE BOARD

27. The Board may wish to consider the following draft resolution:

The Executive Board,

Having considered the proposals contained in the report on the Director-General and Deputy Director-General of the World Health Organization: review of matters arising from the special and 118th sessions of the Executive Board:¹

1. AGREES with the procedure developed by the Secretariat as to the manner in which the Executive Board assesses whether the candidate nominated by it for the post of Director-General has the good physical condition required of all staff members of the Organization;
2. DECIDES that the curriculum vitae and supporting information of each candidate proposed under Rule 52 of the Rules of Procedure of the Executive Board shall be limited to 2000 words and shall also be submitted in electronic format to enable the Chairman of the Board to verify that this limit is not exceeded;
3. CONFIRMS its previous decision that the curriculum vitae should address the criteria established by the Executive Board, and include a statement on the vision of the candidate on priorities and strategies;²
4. DECIDES that the Director-General may, in addition to the names of the candidates, post on WHO's web site the curricula vitae and other supporting information as dispatched to Member States, and contact information for each candidate, unless the candidate concerned or the Member State that proposed him or her stipulates otherwise.

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¹ Document EB120/30.

² Decision EB100(7).