Fifth report of Committee B

Committee B held its sixth meeting on 18 May under the chairmanship of Professor A.M. Coll Seck (Senegal).

It was decided to recommend to the Fifty-fifth World Health Assembly the adoption of the attached two resolutions relating to the following agenda items:

16.1 Human resources: annual report

One resolution (as amended) entitled:

– The need for increased representation of developing countries in the Secretariat and in Expert Advisory Panels and Committees

13.10 Infant and young child nutrition

One resolution
Agenda item 16.1

The need for increased representation of developing countries in the Secretariat and in Expert Advisory Panels and Committees

The Fifty-fifth World Health Assembly,

Guided by the Purposes and Principles of the Charter of the United Nations, in particular the principle of the sovereign equality of its Member States;

Reaffirming the principle of equitable participation of all Members of the Organization in its work, including that of the Secretariat and various committees and bodies;

Bearing in mind Article 35 of the Constitution;

Recalling its resolution WHA4.51 adopting the Staff Regulations of the Organization and its subsequent resolutions amending these regulations;

Recalling its resolution WHA50.15 on recruitment of international staff in WHO: geographical representation;

Further recalling its resolution WHA35.10 approving the Regulations for Expert Advisory Panels and Committees and its subsequent resolutions amending these regulations;

Concerned that the developing countries are underrepresented in the Secretariat, in the professional category, including at headquarters;

Also concerned at the limited representation of developing countries on expert advisory panels and committees,

1. UNDERLINES that the Secretariat of WHO is a common secretariat for all Member States and should therefore reflect the composition of its membership, a majority of which are developing countries;

2. STRESSES, in this context, adherence to the principle of equitable geographical representation and gender balance at all levels in the Secretariat, especially at headquarters, in order to improve its representative character;

3. EMPHASIZES the principles of transparency, fair selection, objectivity, competence and merit in appointments both in the Secretariat and to expert advisory panels and committees;

4. UNDERLINES that country ranges for appointments in the Secretariat should, in principle, be based on membership, equitable geographical representation, population criteria, and balance between developed and developing countries, with less emphasis on financial contributions to the Organization;

5. REQUESTS the Director-General to ensure that the principles of equitable geographical representation, gender balance and a balance of experts from developed and developing countries are respected in making appointments in the Secretariat and in establishing expert advisory panels or expert committees;
6. FURTHER REQUESTS the Director-General to consult with health authorities concerned when appointing experts to advisory panels, to circulate information on all appointments made to these panels to Member States through a publicly available document, including on the Internet, and to encourage developing countries to send nominations for the panels;

7. DECIDES to amend the Regulations for Expert Advisory Panels and Committees in light of this resolution, as per the Annex to this resolution;

8. REQUESTS the Director-General to submit a report to the Fifty-sixth World Health Assembly on implementation of this resolution, including different alternatives to the current representation formula in the Secretariat.
ANNEX

AMENDMENTS TO THE REGULATIONS FOR
EXPERT ADVISORY PANELS AND COMMITTEES

Amendment to Regulation 3.1

Add at the end:

Information on all appointments made to these panels shall be circulated to all Member States. The Director-General shall encourage the developing countries and countries in transition to send nominations for the panels.

Amendment to Regulation 3.2

Replace the last sentence with the following:

He/she shall encourage nomination of experts from developing countries and countries in transition and from all regions and shall be helped in this task by Regional Directors.

Amendment to Regulation 4.2

Replace with the following:

As a general rule, the Director-General shall select from one or more expert advisory panels the members of an expert committee on the basis of the principles of equitable geographical representation, gender balance, a balance of experts from developed and developing countries and countries in transition, representation of different trends of thought, approaches and practical experience in various parts of the world, and an appropriate interdisciplinary balance. The membership of expert committees shall not be restricted by consideration of language, within the range of languages of the Organization.
Agenda item 13.10

Infant and young child nutrition

The Fifty-fifth World Health Assembly,

Having considered the draft global strategy for infant and young-child feeding;

Deeply concerned about the vast numbers of infants and young children who are still inappropriately fed and whose nutritional status, growth and development, health and very survival are thereby compromised;

Conscious that every year as much as 55% of infant deaths from diarrhoeal disease and acute respiratory infections may be the result of inappropriate feeding practices, that less than 35% of infants worldwide are exclusively breastfed for even the first four months of life, and that complementary feeding practices are frequently ill-timed, inappropriate and unsafe;

Alarmed at the degree to which inappropriate infant and young-child feeding practices contribute to the global burden of disease, including malnutrition and its consequences such as blindness and mortality due to vitamin A deficiency, impaired psychomotor development due to iron deficiency and anaemia, irreversible brain damage as a consequence of iodine deficiency, the massive impact on morbidity and mortality of protein-energy malnutrition, and the later-life consequences of childhood obesity;

Recognizing that infant and young-child mortality can be reduced through improved nutritional status of women of reproductive age, especially during pregnancy, and by exclusive breastfeeding for the first six months of life, and with nutritionally adequate and safe complementary feeding through introduction of safe and adequate amounts of indigenous foodstuffs and local foods while breastfeeding continues up to the age of two years or beyond;

Mindful of the challenges posed by the ever-increasing number of people affected by major emergencies, the HIV/AIDS pandemic, and the complexities of modern lifestyles coupled with continued promulgation of inconsistent messages about infant and young-child feeding;

Aware that inappropriate feeding practices and their consequences are major obstacles to sustainable socioeconomic development and poverty reduction;

Reaffirming that mothers and babies form an inseparable biological and social unit, and that the health and nutrition of one cannot be divorced from the health and nutrition of the other;

Recalling the Health Assembly’s endorsement (resolution WHA33.32), in their entirety, of the statement and recommendations made by the joint WHO/UNICEF Meeting on Infant and Young Child Feeding held in 1979; its adoption of the International Code of Marketing of Breast-milk Substitutes (resolution WHA34.22), in which it stressed that adoption of and adherence to the Code were a minimum requirement; its welcoming of the Innocenti Declaration on the Protection, Promotion and Support of Breastfeeding as a basis for international health policy and action (resolution WHA44.33); its urging encouragement and support for all public and private health facilities providing maternity services so that they become “baby-friendly” (resolution WHA45.34); its urging ratification and implementation of the Convention on the Rights of the Child as a vehicle for family health development (resolution WHA46.27); and its endorsement, in their entirety, of the
World Declaration and Plan of Action for Nutrition adopted by the International Conference on Nutrition (resolution WHA46.7);

Recalling also resolutions WHA35.26, WHA37.30, WHA39.28, WHA41.11, WHA43.3, WHA45.34, WHA46.7, WHA47.5, WHA49.15 and WHA54.2 on infant and young-child nutrition, appropriate feeding practices and related questions;

Recognizing the need for comprehensive national policies on infant and young-child feeding, including guidelines on ensuring appropriate feeding of infants and young children in exceptionally difficult circumstances;

Convinced that it is time for governments to renew their commitment to protecting and promoting the optimal feeding of infants and young children,

1. **ENDORSES** the global strategy for infant and young-child feeding;

2. **URGES** Member States, as a matter of urgency:

   (1) to adopt and implement the global strategy, taking into account national circumstances, while respecting positive local traditions and values, as part of their overall nutrition and child-health policies and programmes, in order to ensure optimal feeding for all infants and young children, and to reduce the risks associated with obesity and other forms of malnutrition;

   (2) to strengthen existing, or establish new, structures for implementing the global strategy through the health and other concerned sectors, for monitoring and evaluating its effectiveness, and for guiding resource investment and management to improve infant and young-child feeding;

   (3) to define for this purpose, consistent with national circumstances:

      (a) national goals and objectives,

      (b) a realistic timeline for their achievement,

      (c) measurable process and output indicators that will permit accurate monitoring and evaluation of action taken and a rapid response to identified needs;

   (4) to ensure that the introduction of micronutrient interventions and the marketing of nutritional supplements do not replace, or undermine support for the sustainable practice of, exclusive breastfeeding and optimal complementary feeding;

   (5) to mobilize social and economic resources within society and to engage them actively in implementing the global strategy and in achieving its aims and objectives in the spirit of resolution WHA49.15;

3. **CALLS UPON** other international organizations and bodies, in particular ILO, FAO, UNICEF, UNHCR, UNFPA and UNAIDS, to give high priority, within their respective mandates and programmes and consistent with guidelines on conflict of interest, to provision of support to governments in implementing this global strategy, and invites donors to provide adequate funding for the necessary measures;
4. REQUESTS the Codex Alimentarius Commission to continue to give full consideration, within the framework of its operational mandate, to action it might take to improve the quality standards of processed foods for infants and young children and to promote their safe and proper use at an appropriate age, including through adequate labelling, consistent with the policy of WHO, in particular the International Code of Marketing of Breast-milk Substitutes, resolution WHA54.2, and other relevant resolutions of the Health Assembly;

5. REQUESTS the Director-General:

(1) to provide support to Member States, on request, in implementing this strategy, and in monitoring and evaluating its impact;

(2) to continue, in the light of the scale and frequency of major emergencies worldwide, to generate specific information and develop training materials aimed at ensuring that the feeding requirements of infants and young children in exceptionally difficult circumstances are met;

(3) to strengthen international cooperation with other organizations of the United Nations system and bilateral development agencies in promoting appropriate infant and young-child feeding;

(4) to promote continued cooperation with and among all parties concerned with implementing the global strategy.