EXECUTIVE BOARD 130th session

Decisions and list of resolutions

I. DECISIONS

EB130(1) Implementation of the action plan for the prevention of avoidable blindness and visual impairment

The Executive Board, having considered the report on progress in implementing the action plan for the prevention of avoidable blindness and visual impairment; noting that the current action plan will end in 2013, and being convinced that work should commence immediately on a follow-up plan for the period 2014–2019 to ensure that it can be considered for adoption in a timely way and in alignment with WHO's planning cycles,

- (1) decided that a new action plan for the prevention of avoidable blindness and visual impairment for the period 2014–2019 will be developed;
- (2) requested the Director-General to develop a draft action plan for the prevention of avoidable blindness and visual impairment for the period 2014–2019 in close consultation with Member States and international partners, and to submit this draft action plan for consideration, through the Executive Board at its 132nd session, to the Sixty-sixth World Health Assembly in 2013.

(Ninth meeting, 20 January 2012) EB130/SR/9

EB130(2) Maternal, infant and young child nutrition: draft comprehensive implementation plan

The Executive Board, having considered the report on maternal, infant and young child nutrition: draft comprehensive implementation plan,² as well as the report on nutrition of women in the preconception period, during pregnancy and the breastfeeding period,³ expressing appreciation for the work completed to date, and noting the draft resolution contained in document EB130/Conf.Paper No. 4,⁴

² Document EB130/10.

¹ Document EB130/8.

³ Document EB130/11.

⁴ Included below.

- (1) requested the Director-General to conduct, as soon as possible, further consultations regarding the targets within the existing draft comprehensive implementation plan via a webbased process open to all Member States,¹ as well as multilateral organizations, to provide further guidance in the finalization of the comprehensive implementation plan;
- (2) decided that the Director-General should finalize the implementation plan on maternal, infant and young child nutrition in time for consideration by the Sixty-fifth World Health Assembly in May 2012, as set forth in resolution WHA63.23;
- (3) encouraged informal consultations among Member States² on the basis of the draft resolution contained in document EB130/Conf.Paper No.4 proposing the endorsement of the comprehensive implementation plan by the Sixty-fifth World Health Assembly.

Agenda item 6.3

EB130/Conf.Paper No.4 17 January 2012

Maternal, infant and young child nutrition: draft comprehensive implementation plan

Draft resolution proposed by Chile, Ecuador, Peru and Poland

The Executive Board,

Having considered the report on maternal, infant and young child nutrition: draft comprehensive implementation plan,² as well as the report on nutrition of women in the preconception period, during pregnancy and the breastfeeding period,³

RECOMMENDS to the Sixty-fifth World Health Assembly the adoption of the following resolution:

The Sixty-fifth World Health Assembly,

- PP1 Having considered the report on maternal, infant and young child nutrition: draft comprehensive implementation plan, as well as the report on nutrition of women in the preconception period, during pregnancy and breastfeeding;
- PP2 Recalling resolutions WHA30.51 and WHA31.47 on the role of the health sector in the development of national and international food and nutrition policies and plans; WHA46.7 on the follow-up action to the International Conference on Nutrition; WHA35.26, WHA37.30, WHA39.28, WHA41.11, WHA43.3, WHA44.33, WHA45.34, WHA46.7, WHA47.5, WHA49.15, WHA54.2, WHA55.25, WHA58.32, WHA59.21, WHA61.20 and WHA63.23 on infant and young child nutrition; and WHA46.7 and WHA59.11 on nutrition and HIV/AIDS;

¹ And, where applicable, regional economic integration organizations.

² Document EB130/10.

³ Document EB130/11.

- PP3 Conscious that poor availability of, or access to, food of adequate nutritional quality or the exposure to conditions that impair absorption and use of nutrients has led to large sections of the world's population being undernourished, having poor vitamin and mineral status or being overweight and obese;
- PP4 Aware that anaemia, mainly due to iron deficiency, affects 468 million women of reproductive age, also that 20 million children are born annually with low birth weight, 171 million children under the age of five years had stunted growth and 43 million children younger than five years were overweight globally in 2010;
- PP5 Concerned that maternal and child undernutrition account for 11% of the global burden of disease and has a negative impact on cognitive development, school and physical performance and productivity;
- PP6 Convinced of the impact of a well-balanced and culturally acceptable women's diet before conception, during pregnancy and breastfeeding, supplying a sufficient amount of energy, protein and vitamins, as well as micro- and macro-nutrients (e.g. iron, iodine, calcium and vitamin D) on the life and health of both mothers and children;
- PP7 Conscious that improper nutrition before conception may cause pregnancy disorders, contribute to the risk of several diseases, and exert a direct influence on child mortality and morbidity, and aware that taking folic acid in the pre- and peri-conception period plays a significant role in protection against congenital malformations, including neural tube defects in newborns:
- PP8 Convinced of the need to eliminate use of alcohol, tobacco and psychotropic substances, and to control better the intake of medicines in pregnant women, as they may increase the risk of low birth weight, congenital malformations or miscarriage and increase morbidity in children;
- PP9 Mindful that breastfeeding is the best source of nutrition for infants in the first six months of life and a major contribution for proper health and development for up to two years of age and beyond, as well as that appropriate nutrition in the first years of life has a significant influence on health and intellectual development at subsequent development stages;
- PP10 Recognizing that policies often do not address the complexity of the challenges of maternal, infant and young child nutrition and do not produce the expected impact;
- PP11 Recognizing that effective policies and programmes on nutrition exist but are not implemented on a sufficiently large scale,
- 1. ENDORSES the comprehensive implementation plan on maternal, infant and young child nutrition;

2. URGES Member States:

- (1) to develop national targets and to commit resources in order to achieve, by the year 2022:¹
 - (a) a 40% reduction in the prevalence of stunting in children under the age of five years globally;
 - (b) a 50% reduction in the prevalence of anaemia in women of reproductive age globally;
 - (c) a 50% reduction in the prevalence of low birth weight globally;
 - (d) no further increase in the prevalence of childhood overweight;
 - (e) an increase in exclusive breastfeeding rates of infants under the age of six months to 50% at global level;
- (2) to put into practice the comprehensive implementation plan on maternal, infant and young child nutrition and, in particular:
 - (a) to revise nutrition policies to include nutrition actions in the overall country health and development policy and establish effective intersectoral governance mechanisms in order to expand the implementation of nutrition actions;
 - (b) to review sectoral policies in the agriculture, social welfare, education and trade sectors in order to determine their impact on nutrition;
 - (c) to include effective and safe nutrition actions in maternal, child and adolescent health services and ensure universal coverage of these actions, particularly to underprivileged populations;
 - (d) to develop or strengthen legislative measures for controlling the marketing of breast-milk substitutes;
 - (e) to implement a comprehensive approach to enhancing the capabilities of health workers and managers to deliver nutrition actions;
 - (f) to implement sustainable financing mechanisms for funding the expansion and the sustained implementation of nutrition programmes;
 - (g) to develop or strengthen surveillance systems for the collection of information on indicators of inputs, outputs and outcomes, and impact of nutrition actions;

¹ From 2010 baseline data.

3. REQUESTS the Director-General:

- (1) to review, update and expand WHO's guidance and tools on effective nutrition actions, analyse their cost-effectiveness, illustrate good practice of delivery mechanisms and adequately disseminate the information;
- (2) to develop guidance and describe successful examples of multisectoral policy measures on nutrition;
- (3) to support Member States, on request, in strengthening national health and development policies that include proven nutrition actions; developing technical and managerial capacities and capabilities in nutrition; strengthening legislative, regulatory or other effective measures to control the marketing of breast-milk substitutes and monitoring their implementation;
- (4) to develop guidelines on the marketing of complementary foods;
- (5) to engage with multiple partners at global and country levels for expanding nutrition actions;
- (6) to report to the Health Assembly, through the Executive Board, in even-numbered years on progress in applying the comprehensive implementation plan on maternal, infant and young child nutrition, together with the report on progress in implementing the Code of Marketing Breast-milk Substitutes.

(Ninth meeting, 20 January 2012) EB130/SR/9

EB130(3) Global mass gatherings: implications and opportunities for global health security

The Executive Board, having considered the report on global mass gatherings: implications and opportunities for global health security, recognizing that mass gatherings have significant implications for public health beyond the acute public health events which may occur and require rapid detection and effective management; recognizing that the planning and organization of mass gatherings is the responsibility of the Member States; building on the existing WHO resources to support the planning and conduct of mass gathering events; and acknowledging the challenges of some Member States in managing mass gatherings and the expertise of Saudi Arabia, which manages the largest annual recurring mass gathering event, attracting close to 10 million people from more than 180 countries across the globe,

(1) requested the Director-General to further develop and disseminate multisectoral guidance on planning, management, evaluation and monitoring of all types of mass gathering events with specific emphasis on sustainable preventive measures including health education and preparedness;

¹ Document EB130/17.

- (2) decided that the Director-General should, where appropriate, work closely with Member States that are planning and conducting mass gatherings, in order to support cooperation and communication between the concerned health authorities in each country, and help Member States strengthening functional capacities to better utilize the International Health Regulations (2005) to that end;
- (3) encouraged the Director-General to reach out to non-profit-making, nongovernmental and civil society organizations, including, as appropriate, the private sector in health education related to mass gatherings;
- (4) requested the Director-General to raise awareness on the health impact of mass gatherings and support countries in developing, disseminating and evaluating effective communication strategies, including, as appropriate, social media, around key public health messages.

(Eleventh meeting, 21 January 2012) EB130/SR/11

EB130(4) Towards the elimination of measles

The Executive Board, taking note of the widespread outbreaks of measles in several WHO regions over the past two years, which have had a devastating impact on the lives of many young children and which further compromise progress towards the achievement of Millennium Development Goal 4 (Reducing child mortality); and considering that, in addition to the existing global approved immunization strategies, five of WHO's six regions have established target dates for the elimination of measles, yet measles outbreaks continue to pose serious challenges to the achievement of those targets,

- (1) requested the Director-General to emphasize that measles remains a serious threat to childhood health globally in the upcoming global vaccine action plan for the Decade of Vaccines 2011–2020, to be considered for adoption by the Sixty-fifth World Health Assembly in May 2012;
- (2) decided to include ambitious immunization coverage targets and measles elimination goals in the global vaccine action plan;
- (3) called upon Member States and other partners to commit themselves to fulfilling their responsibilities, as stated in the existing regional measles elimination targets and 2015 global measles mortality reduction goals, in order to prevent further devastating outbreaks of measles in the future.

(Eleventh meeting, 21 January 2012) EB130/SR/11

EB130 (5) United Nations Conference on Sustainable Development (Rio+20)

The Executive Board, recalling Principle 1 of the Rio Declaration on Environment and Development (1992), which states "Human beings are at the centre of concerns for sustainable development. They are entitled to a healthy and productive life in harmony with nature"; acknowledging that economic, social and environmental objectives are mutually supportive; noting the two main themes of the United Nations Conference on Sustainable Development, namely the green

economy in the context of sustainable development and poverty eradication and; the institutional framework for sustainable development; recalling the WHO World Conference on Social Determinants of Health and, particularly, the Rio Declaration; and noting also the submissions by the Director-General to the United Nations Conference on Sustainable Development Bureau,

- (1) decided to convene informal discussions among Member States on the contribution submitted by WHO to the forthcoming deliberations of the United Nations Conference on Sustainable Development with a view to ensuring that health is appropriately considered in the Conference proceedings while fully respecting the ongoing negotiations in New York;
- (2) requested the Director-General to facilitate discussions among Member States and organize an informal meeting with Permanent Missions to the United Nations Office and other International Organizations in Geneva for that purpose.

(Thirteenth meeting, 23 January 2012) EB130/SR/13

EB130(6) WHO reform (programmes and priority setting)

The Executive Board, having considered decision EBSS2(1),

- (1) decided on the following scope of work and terms of reference for the Member State¹-driven process established to provide recommendations on methods for programmes and priority setting for the consideration of the Sixty-fifth World Health Assembly in May 2012;
 - (a) the scope of work will be: to make recommendations to the Sixty-fifth World Health Assembly on the categories, methodology, criteria and timeline for programmes and priority setting in order to serve as guidance for the development of the next and future general programmes of work, recognizing the important linkages to other elements of the WHO reform process;
 - (b) the specific objectives of the process will be:
 - (i) to review and consider proposals on priority setting contained in document EB130/5 Add.1 taking as a basis for priority setting: country needs, the relevance of WHO for all countries, its specific comparative advantage and its leading role in global health;
 - (ii) to elaborate methodology, criteria and the timeline for the priority-setting process;
 - (iii) to consider possible ways of grouping WHO's work into categories, including but not limited to the seven categories contained in document EB130/5 Add.1, as proposed for the framework for the next general programme of work:

¹ And, where applicable, regional economic integration organizations.

- (iv) to identify additional analytical work for the Secretariat emerging from these discussions, which will contribute to the development of the next and future general programmes of work;
- (c) the process will be open to all Member States,¹ chaired by Mr R. El Makkaoui, Chairman of the Executive Board and any other officers deemed necessary will be determined by the Officers of the Executive Board;
- (d) a meeting will be held on 27 and 28 February 2012 at WHO headquarters to advance the work of the Member State¹-driven process, with any follow-up meetings or discussions, as necessary, to be agreed at that meeting in order to finalize the work before the Sixty-fifth World Health Assembly;
- (e) the Chairman of the Member State¹-driven process shall submit a report on the results of the process to the Sixty-fifth World Health Assembly;
- (2) requested the following support from the Director-General, based on existing information:
 - (a) a presentation on current priority-setting practices and the strengths and weaknesses of those practices and the relationship between the country cooperation strategies, the general programme of work formulation process and the programme and budgeting process, to be held on the afternoon of 26 February 2012. Copies of the presentation are to be circulated three days in advance of the presentation. Arrangements are to be made for a web-based consultation for nongovernmental organizations in official relations with WHO to present their views according to the scope of work and for them to observe the presentation;
 - (b) no fewer than seven days in advance of the meeting on 27 and 28 February, the following documents are to be provided:
 - (i) a three-page summary paper on the presentation described in subparagraph (2)(a) above;
 - (ii) mapping of the functions of the Organization (Article 2, WHO Constitution) in relation to the categories proposed in document EB130/5 Add.1, including crosscutting global needs and areas of work;
 - (iii) an analysis of country cooperation strategies that identifies the needs of countries in a way that allows a determination of what WHO should focus its work on and where WHO is best placed to add value;
 - (iv) a road map and timelines for the preparation of the Twelfth General Programme of Work and the Programme budget 2014–2015;

¹ And, where applicable, regional economic integration organizations.

- (v) reference documents including, in particular, the following:
 - Eleventh General Programme of Work, 2006–2015;
 - Medium-term Strategic Plan 2008–2013 (amended);
 - Documents EB130/5 Add.1 and Add.2;
 - Document EBSS/2/2 and decision EBSS2(1);
 - Document EB118/7 on strategic resource allocation;
 - World Health Statistics 2011 (which provides information on disease burden).

(Thirteenth meeting, 23 January 2012) EB130/SR/13

EB130(7) Election of the Director-General of the World Health Organization: report of the Working Group

The Executive Board, having considered the report of the Working Group of Member States on the Process and Methods of the Election of the Director-General of the World Health Organization, and its recommendation contained in paragraph 24 of the report, decided to convene a follow-up session of the Working Group to further explore discussed proposals and finalize its work ahead of the Sixty-fifth World Health Assembly.

(Thirteenth meeting, 23 January 2012) EB130/SR/13

EB130(8) Review of nongovernmental organizations in official relations with WHO

The Executive Board, having considered and noted the report of its Standing Committee on Nongovernmental Organizations² concerning the review of one third of the nongovernmental organizations in official relations with WHO, and following up decision EB128(1), reached the decisions set out below.

- (1) noting with appreciation their collaboration with WHO and commending the continuing dedication to the work of WHO, the Board decided to maintain in official relations with WHO the nongovernmental organizations whose names are followed by an asterisk in the Annex to the report;
- (2) noting that a plan for collaboration had been agreed, the Board decided to maintain the International Special Dietary Foods Industries in official relations with WHO;

¹ Document EB130/29 Corr.1.

² Document EB130/31.

- (3) noting that agreed plans for collaboration are yet to be finalized, the Board decided to defer the review of relations with CropLife International and La Leche League International, until its 132nd session, at which time reports, either on agreed plans for collaboration or status of relations, would be considered;
- (4) noting the report, and to encourage a successful outcome to continuing efforts to agree a plan for collaboration, the Board decided to defer the review of relations with the International Federation of Biomedical Laboratory Science by one year, until its 132nd session, and further requested that the Federation be informed that, in the absence of an agreed plan for collaboration, official relations would be discontinued.

(Thirteenth meeting, 23 January 2012) EB130/SR/13

EB130(9) Award of the Dr A.T. Shousha Foundation Prize

The Executive Board, having considered the report of the Dr A.T. Shousha Foundation Prize Committee, awarded the Dr A.T. Shousha Foundation Prize for 2012 to Dr Shaikha Salim Al Arrayed from Bahrain for her significant contribution to public health in Bahrain, in particular the control of genetic diseases. The laureate will receive the equivalent of 2500 Swiss francs in United States dollars.

(Thirteenth meeting, 23 January 2012) EB130/SR/13

EB130(10) Award of the Ihsan Doğramacı Family Health Foundation Prize

The Executive Board, having considered the report of the Ihsan Doğramacı Family Health Foundation Selection Panel awarded the Ihsan Doğramacı Family Health Foundation Prize for 2012 to Dr Ayse Akin from Turkey for her long-standing career in the area of family health in Turkey. The laureate will receive US\$ 20 000.

(Thirteenth meeting, 23 January 2012) EB130/SR/13

EB130(11) Award of the Sasakawa Health Prize

The Executive Board, having considered the report of the Sasakawa Health Prize Selection Panel, awarded the Sasakawa Health Prize for 2012 to the Syamsi Dhuha Foundation of Indonesia for its work in improving the quality of life of people living with lupus and poor vision. The laureate, as an organization, will receive US\$ 40 000.

(Thirteenth meeting, 23 January 2012) EB130/SR/13

EB130(12) Award of the United Arab Emirates Health Foundation Prize

The Executive Board, having considered the report of the United Arab Emirates Health Foundation Selection Panel, awarded the United Arab Emirates Health Foundation Prize for 2012 to both Dr Chen Bowen from China for his important contribution to the establishment of community health services in China and to the Renal Disease Control Program of the Philippines, which takes

charge of implementing the public health projects of the National Kidney Transplant Institute in the Philippines on the prevention and control of renal and related diseases. The laureates will each receive US\$ 20 000.

(Thirteenth meeting, 23 January 2012) EB130/SR/13

EB130(13) Award of the State of Kuwait Prize for Research in Health Promotion

The Executive Board, having considered the report of the State of Kuwait Health Promotion Foundation Selection Panel, awarded the State of Kuwait Prize for Research in Health Promotion for 2012 to Dr Eltahir Medani Elshibly from Sudan for his dedication to a wide range of family health issues, from breastfeeding promotion to HIV prevention and nutrition. The laureate will receive US\$ 20 000.

(Thirteenth meeting, 23 January 2012) EB130/SR/13

EB130(14) Award of the Dr LEE Jong-wook Memorial Prize for Public Health

The Executive Board, having considered the report of the Dr LEE Jong-wook Memorial Prize Selection Panel, awarded the Dr LEE Jong-wook Memorial Prize for Public Health for 2012 to the Pacific Leprosy Foundation based in New Zealand for its outstanding contribution to public health. The laureate will receive US\$ 100 000.

(Thirteenth meeting, 23 January 2012) EB130/SR/13

EB130(15) Membership of the Independent Expert Oversight Advisory Committee

The Executive Board, having considered the report by the Secretariat on membership of the Independent Expert Oversight Advisory Committee, and having taken into account the terms of reference of the Independent Expert Oversight Advisory Committee, decided the following:

- (1) to agree to the second option proposed by the Director-General in paragraph 9 of the report, namely, that the terms of office of Mr Miller and Ms Ploix not be renewed;
- (2) to request the Director-General to propose two candidates to the Officers of the Executive Board, taking into account paragraph 3(i) of the terms of reference of the Independent Expert Oversight Advisory Committee, and if possible making the proposal before the next meeting of the Committee;
- (3) to give the Officers of the Executive Board the authority to provisionally approve the proposed two new members of the Independent Expert Oversight Advisory Committee, with the understanding that final approval is to be given by the Executive Board at its 131st session in May 2012;

¹ Document EB130/30.

(4) to request the Director-General that following the provisional approval by the Officers of the Board of the two new members of the Independent Expert Oversight Advisory Committee, their names and biographical information would be shared with all Executive Board members as soon as possible.

(Fourteenth meeting, 23 January 2012) EB130/SR/14

EB130(16) Provisional agenda for the Sixty-fifth World Health Assembly

The Executive Board, having considered the report of the Director-General on the provisional agenda for the Sixty-fifth World Health Assembly, and recalling its earlier decision that the Sixty-fifth World Health Assembly should be held at the Palais des Nations in Geneva, opening on Monday, 21 May 2012, and closing no later than Saturday, 26 May 2012, approved the provisional agenda of the Sixty-fifth World Health Assembly, as amended.

(Fourteenth meeting, 23 January 2012) EB130/SR/14

EB130(17) Date and place of the 131st session of the Executive Board

The Executive Board decided that its 131st session should be convened on 28 and 29 May 2012, at WHO headquarters, Geneva. The Board further decided that the sixteenth meeting of the Programme, Budget and Administration Committee would be held from 16 to 18 May 2012 at WHO headquarters.

(Fourteenth meeting, 23 January 2012) EB130/SR/14

¹ Document EB130/33.

² See decision EB129(7).

II. LIST OF RESOLUTIONS

EB130.R1	Appointment of the Regional Director for the Eastern Mediterranean
EB130.R2	Appreciation of the outgoing Regional Director for the Eastern Mediterranean
EB130.R3	Monitoring the achievement of the health-related Millennium Development Goals: implementation of the recommendations of the Commission on Information and Accountability for Women's and Children's Health
EB130.R4	Nomination for the post of the Director-General
EB130.R5	Draft contract of the Director-General
EB130.R6	Strengthening noncommunicable disease policies to promote active ageing
EB130.R7	Follow-up to the High-level Meeting of the United Nations General Assembly on the Prevention and Control of Non-communicable Diseases
EB130.R8	Global burden of mental disorders and the need for a comprehensive, coordinated response from health and social sectors at the country level
EB130.R9	Elimination of schistosomiasis
EB130.R10	Poliomyelitis: intensification of the global eradication initiative
EB130.R11	Outcome of the World Conference on Social Determinants of Health
EB130.R12	World Immunization Week
EB130.R13	Substandard/spurious/falsely-labelled/falsified/counterfeit medical products
EB130.R14	WHO's response, and role as the health cluster lead, in meeting the growing demands of health in humanitarian emergencies
EB130.R15	Amendments to the Staff Rules
EB130.R16	Salaries of staff in ungraded posts and of the Director-General
EB130.R17	Standing Committee on Nongovernmental Organizations

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