

**PROVISIONAL SUMMARY RECORD OF THE SEVENTH MEETING**

**WHO headquarters, Geneva  
Thursday, 25 January 2018, scheduled at 9:00**

**Chairman: Dr A. HAFEEZ (Pakistan)**

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## SEVENTH MEETING

**Thursday, 25 January 2018, at 09:10**

**Chairman:** Dr A. HAFEEZ (Pakistan)

**STRATEGIC PRIORITY MATTERS:** Item 3 of the agenda (continued)

**Global strategy and plan of action on public health, innovation and intellectual property:** Item 3.7 of the agenda (documents EB142/14, EB142/14 Add.1 and EB142/14 Add.2)

The CHAIRMAN invited the Board to take note of the report contained in document EB142/14 and to consider the draft decision contained in document EB142/14 Add.1. The financial and administrative implications of the draft decision for the Secretariat were set out in document EB142/14 Add.2.

The CO-CHAIR OF THE EXPERT REVIEW PANEL FOR THE OVERALL PROGRAMME REVIEW OF THE GLOBAL STRATEGY AND PLAN OF ACTION ON PUBLIC HEALTH, INNOVATION AND INTELLECTUAL PROPERTY said that, although there had been some positive developments since the adoption of the global strategy and plan of action on public health, innovation and intellectual property in 2008, the review had confirmed that research and development for health products remained insufficient, particularly for diseases that mainly affected developing countries. Furthermore, the financial resources devoted to research and development for such diseases had not been increased in a sustainable manner. The lack of access to health products posed an acute problem for millions of people and hindered the attainment of universal health coverage and the health-related Sustainable Development Goals. The original 108 priority actions of the global strategy and plan of action had proven too numerous, while the lack of precision had made progress difficult to monitor. The expert review panel had therefore drawn up a shorter, more focused and achievable list of 33 priority actions that covered the eight elements of the global strategy and plan of action and were accompanied by measurable indicators.

The representative of MALTA, speaking on behalf of the European Union and its Member States, stressed the importance of innovation to find solutions for diseases that disproportionately affected developing countries. The European Union and its Member States welcomed the overall programme review and would continue to support the global strategy and plan of action. He noted that two of the priority actions recommended by the expert review panel had not been among the original 108 actions agreed by Member States. Progress to advance implementation of the global strategy and plan of action must be prioritized; the European Union and its Member States would continue to provide substantial financial support to that end and stood ready to engage in further consultations on the way forward.

The representative of ALGERIA, speaking on behalf of the Member States of the African Region, expressed support for the draft decision. He was concerned by the number of challenges identified by the expert review panel that hindered innovation and health research and development. The Secretariat, Member States and all relevant stakeholders should establish sustainable financing mechanisms, in particular for the Global Observatory on Health Research and Development, the Expert Committee on Health Research and Development and the 33 recommended priority actions. WHO and WTO should collaborate closely to identify how the flexibilities provided in the Agreement

on Trade-Related Aspects of Intellectual Property Rights (TRIPS Agreement) could be implemented more effectively in relation to health technology transfer. He stressed the need for health products and services to be made available at lower prices, with increased pricing transparency. The development of an easily accessible database of patents and non-confidential licence agreements for health products and the promotion of voluntary licences would greatly facilitate access to health products.

The representative of PAKISTAN agreed that it was important to promote sustainable financing mechanisms, improve resource allocation and ensure greater transparency regarding the cost of health products and the licensing of patents. Expanding patent pooling was particularly relevant to the attainment of target 3.b of the Sustainable Development Goals. The recommendation that Member States should commit to dedicating at least 0.01% of their gross domestic product to basic and applied research relevant to the health needs of developing countries was merited. Member States should take into account global trends and market analysis when considering the priority public health needs of developing countries. Training programmes should be developed for experts from the public and private sectors involved in research and development, technology transfer should be promoted and new opportunities for collaboration should be identified.

The representative of the NETHERLANDS, agreeing that efforts must be made to improve implementation of the global strategy and plan of action, expressed support for the reduced number of recommended priority actions and endorsed the draft decision.

The representative of JAPAN said that, as mobilizing financial resources for the implementation of the global strategy and plan of action had proved challenging, emphasis should first and foremost be placed on using available resources effectively. Providing an incentive for private entities to develop new medicines was in the interest of all parties, so a balance must be struck between promoting the flexibilities provided in the TRIPS Agreement and protecting intellectual property rights. Since the issue of access to medicines involved a host of factors besides medical product prices and intellectual property, a comprehensive approach would be necessary. He requested additional time to examine the implications of the two new recommendations contained in the expert review panel's list of recommended priority actions.

The representative of COLOMBIA said that, in addition to promoting the development of national legislation, WHO should publicize the flexibilities provided in the TRIPS Agreement and raise awareness of how intellectual property laws could be used to promote research and development. Implementation of the recommended priority actions was essential in order to improve access to medicines. He urged the Secretariat to mobilize resources for the implementation of the global strategy and plan of action and recommended that a specific portion of the proposed programme budget for 2020–2021 should be devoted to it. He expressed support for the draft decision.

The representative of IRAQ said that the global strategy and plan of action should be aligned with the draft thirteenth general programme of work and the Sustainable Development Goals, and that sufficient financing should be ensured. He urged the Secretariat to promote the importance of research and development at the regional and country levels, in order to shape public health policies. The global strategy and plan of action should be linked to endeavours to develop and use assistive technology.

The representative of BRAZIL said that, given the importance of the global strategy and plan of action, its implementation must be prioritized and sufficient resources allocated as part of the future resource mobilization strategy. She fully supported the draft decision and the implementation plan for the recommended priority actions proposed therein.

The representative of the PHILIPPINES said that many of the issues that had prompted the creation of the global plan of action remained unresolved. She supported the expert review panel's recommendations, in particular those on promoting the transfer of technology, managing intellectual property to contribute to innovation and public health, and promoting and monitoring price transparency. WHO should continue to engage with WIPO and related international and civil society organizations so that everyone could benefit from innovations in public health.

The representative of the CONGO said that measures to improve equitable access to medicines were subject to ongoing delays for procedural and other reasons. It was essential not to lose sight of the overall goal of equitable access and to remove obstacles to progress. The necessary resources for research and development must be mobilized in order to facilitate the creation of high-quality, accessibly priced generic health products while protecting the private sector, provided that it in turn respected the principle of equity. He supported the draft decision.

The representative of THAILAND expressed strong support for the draft decision. The global strategy and plan of action would be essential to the achievement of universal health coverage. However, implementing the original 108 priority actions posed a huge challenge, especially as resources were inadequate. She agreed with the expert review panel's recommendation that an implementation and evaluation system should be set up immediately, with clear indicators and time-bound targets.

The representative of PERU<sup>1</sup> said that the methodology to be developed for the prioritization of research and development needs could usefully cover new technologies in addition to medicines, as well as neglected and poverty-related diseases. He would welcome a review of the disease classification system used, as the current classification of diseases into Types I, II and III did not necessarily reflect the burden of morbidity in middle-income countries. He fully supported measures to promote transparency in the costs of research and development. Greater clarity was needed regarding the types of information that would be exchanged as part of the proposed information-sharing mechanism. It would be useful if the proposed database for capacity-building also provided virtual training courses. He encouraged the Secretariat to identify mechanisms to increase technology transfer within the framework of the Sustainable Development Goals and to increase collaboration with WTO in facilitating health technology transfer through the TRIPS Agreement. The Secretariat should provide support to Member States for local technology production programmes, in line with country needs.

The representative of PORTUGAL,<sup>1</sup> noting the emergence of new challenges since the adoption of the global strategy and plan of action in 2008, including the unaffordability of many new medicines, expressed full support for the more focused approach proposed and the reduced number of recommended priority actions.

The representative of SWITZERLAND<sup>1</sup> welcomed the efforts of the expert review panel to prioritize recommended actions. However, under the new recommendations on intellectual property management, which did not reflect the consensus previously reached, certain tasks would be allocated to the Secretariat that fell outside its remit. For that reason, her Government did not support the draft decision, but would continue to support implementation of the global strategy and plan of action and efforts to prioritize action, which should be agreed in consultation with Member States.

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<sup>1</sup> Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.

The representative of the RUSSIAN FEDERATION<sup>1</sup> said that his Government had signed the provision of the TRIPS Agreement on international cooperation with a view to facilitating access by vulnerable populations to much-needed high-quality medicines. There was a need to update the patent list of basic medicines. An information platform on the use by Member States of the flexibilities provided in the TRIPS Agreement should be developed and used to monitor the availability of essential medicines. In the light of the high cost of many new medicines, transparency in price-setting was needed; related policies must therefore be based on an effective compromise with the pharmaceutical industry.

The representative of ECUADOR<sup>1</sup> called on WHO to step up efforts and provide resources to strengthen clinical trial capacity and resource preservation in traditional medicine, in line with country needs. Measures to promote technology transfer and knowledge sharing were essential. Moreover, further action was needed to facilitate free access to publications, especially for middle-income countries like Ecuador. Emphasis should be placed not on the protection of patents, but rather on helping developing countries to make the most of the flexibilities provided in the TRIPS Agreement, particularly its Article 31*bis*. Support should be provided to Member States in negotiating commercial agreements; intellectual property and public health considerations must take precedence over commercial interests. He wished to know how the Secretariat envisaged mobilizing the resources required for implementation of the global strategy and plan of action.

The representative of INDONESIA<sup>1</sup> expressed support for the recommendations of the expert review panel and requested the Secretariat to put in place the necessary follow-up measures. The recommendations should be directed towards, and define the role of, all relevant stakeholders. The proposed indicators should be discussed among Member States prior to their finalization. As part of its national health research agenda, her Government had set up a disease registry to facilitate the sharing of information and hoped to work with the Secretariat on further developing the registry. She encouraged the Secretariat to continue working with Member States to implement the global strategy and plan of action.

The representative of PANAMA<sup>1</sup> welcomed the recommendations of the expert review panel and the extension of the time frame for implementation of the global strategy and plan of action, which, among other things, would help low- and middle-income countries to strengthen their technical and financial capacity. The Secretariat and Member States, together with other international organizations, should develop mechanisms to support and define the procedure for implementation of the global strategy and plan of action, ensuring the necessary human and financial resources. The intellectual property aspects of all trade negotiations should be addressed in line with the TRIPS Agreement and recognize the balance between intellectual property rights and the primacy of public health.

The representative of ARGENTINA<sup>1</sup> said that the Secretariat should develop a detailed estimate of the funding required for the implementation of each of the expert review panel's recommendations, listing any gaps in each case, for presentation to the Seventy-first World Health Assembly. In its 2012 report (document A65/24), the Consultative Expert Working Group on Research and Development: Financing and Coordination had proposed new research and development models and highlighted the need for a binding instrument to secure appropriate funding and coordination. To that end, he requested the Director-General to present a report detailing alternative sources of sustainable and

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predictable funding for implementation of the expert review panel's recommendations to the Seventy-first World Health Assembly.

The representative of the PLURINATIONAL STATE OF BOLIVIA<sup>1</sup> expressed support for the implementation and development of the global strategy and plan of action and welcomed the review. However, the way in which the recommendations had been prioritized should be clarified. Health was a human right and, as such, the issue of access to medicines should be approached from a human rights-based perspective. His Government supported the draft decision.

The representative of KENYA<sup>1</sup> said that the Secretariat should provide technical guidance and support to Member States to help them to implement the expert review panel's recommendations and should submit regular progress reports thereon to the World Health Assembly. Measures were needed to: improve research and innovation capacity in low- and lower middle-income countries; facilitate access to technology knowledge transfer; and align research and development objectives with public health needs. A communications strategy could be developed to raise awareness among all stakeholders of the global strategy and plan of action. Feasible mechanisms were required to mobilize the resources required for implementation of the recommendations.

The representative of the UNITED STATES OF AMERICA<sup>1</sup> said that, although some of the expert review panel's recommendations reflected areas of consensus, others did not; the recommendation regarding the calculation and disclosure by pharmaceutical companies of research and development costs, for example, could lead to the abandonment of high-risk research projects, which often provided the best returns. WHO should not stray beyond its mandate and expertise and should not infringe on topics traditionally covered by WTO, such as the TRIPS Agreement. Action by the Secretariat should instead be directed towards areas of consensus and Member States should focus on policies that promoted access to medicines. His Government could not support the draft decision in its current form. He therefore requested that the representative of a Member State represented on the Executive Board should propose, on behalf of his Government, that a drafting group should be convened to consider revisions to the draft decision.

The representative of JAPAN said that his Government seconded the proposal by the representative of the United States of America to convene a working group to consider the draft decision.

The representative of BRAZIL, supported by the representatives of THAILAND, the NETHERLANDS, LIBYA, ALGERIA on behalf of the Member States of the African Region, SRI LANKA, PAKISTAN, VIET NAM, COLOMBIA, the DOMINICAN REPUBLIC, BURUNDI, the UNITED REPUBLIC OF TANZANIA and BENIN, said that the global strategy and plan of action was intended to ensure that the TRIPS Agreement was implemented fully and fairly. Any attempts to further delay the adoption of the draft decision would be contrary to the objectives of WHO and could be construed as serving to protect the interests of the pharmaceutical industry. The draft decision could be revised to reflect the recommendations of the expert review panel that were acceptable to all, and a time-limited discussion of the recommendations on which consensus had not been reached should be organized, with a view to approving the draft decision at the Seventy-first World Health Assembly.

The representative of CANADA, supported by the representatives of FRANCE, SWEDEN and ITALY, expressed support for the development of an implementation plan for the global strategy and

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<sup>1</sup> Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.

plan of action. A compromise might be found by convening a drafting group whose activity should be restricted to making minor drafting changes to the draft decision.

The representative of IRAQ said that it was important to prioritize work on implementation of the global strategy and plan of action and to report on progress. His Government supported the comments made by the representative of Brazil and took note of the proposal made by the representative of Canada.

The representative of JAPAN said that he agreed that the discussion on drafting changes to the draft decision should be time-limited so as to reach consensus without delay.

The representative of the PHILIPPINES expressed support for the comments made by the representative of Brazil and the way forward proposed by the representative of Canada.

The representative of BRAZIL said that her Government could accept the proposal made by the representative of Canada, provided that the drafting group was limited to discussing only minor changes to the draft decision; there must be no further delay in its adoption.

The representative of BAHRAIN supported the comments made by the representative of Brazil and would accept the proposal made by the representative of Canada. The discussions of the drafting group should be time-limited so as to reach consensus on an agreed text without delay.

The representative of ZAMBIA expressed support for the proposal made by the representative of Brazil and the compromise proposed by the representative of Canada.

The representative of NEW ZEALAND said that a consensus seemed to be emerging relating to the decision to convene a drafting group on the draft decision. He therefore suggested postponing further discussion of the agenda item among the members of the Executive Board, in order to allow the drafting group to begin its work as soon as possible.

The LEGAL COUNSEL confirmed that the Chairman had the authority to suggest that the discussion should be put on hold to allow for an informal drafting group to be convened, subject to the approval of the Executive Board.

The CHAIRMAN suggested that those Member States not represented on the Executive Board who wished to make a statement on the agenda item should do so before the informal drafting group was convened.

The representative of BRAZIL said that she could accept the suggestion made by the Chairman. However, the informal working group should be composed only of Member States represented on the Executive Board.

The representative of INDIA<sup>1</sup> said that the largest obstacle to the implementation of the global strategy and plan of action was a lack of funding, which could be resolved by increasing assessed and unearmarked voluntary contributions. The price of medicines should be delinked from research and development costs. The expert review panel's recommendations on the use of flexibilities provided in the TRIPS Agreement and the promotion of research, development and innovation were imperative to

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meet the public health needs of developing and least developed countries. His Government had made a commitment to implement the global strategy and plan of action and to ensure that research and development in health was driven by need, not the market. He expressed support for the comments made by the representative of Brazil.

The representative of the UNITED KINGDOM OF GREAT BRITAIN AND NORTHERN IRELAND<sup>1</sup> said that some of the expert review panel's recommendations, in particular the recommendation on delinking product prices from research and development costs, went beyond the scope of the global strategy and plan of action, which had been agreed by consensus. Her delegation therefore wished to participate in the further deliberations on the draft decision.

The representative of BANGLADESH<sup>1</sup> said that clinical trials and research at the field level and technology transfer to countries with limited resources were vital to ensuring that effective medicines could be marketed at a low cost. Particular attention should be paid to neglected tropical diseases and vaccine production in developing countries. To make use of the flexibilities provided in the TRIPS agreement, his Government was researching the application of generic formulations of vaccines and medicines. He looked forward to the implementation of the expert review panel's recommendations and expressed support for the comments made by the representative of Brazil.

The representative of GERMANY<sup>1</sup> expressed support for measures to enhance cooperation in research and development for neglected tropical diseases and target unmet research needs for diseases that disproportionately affected developing countries. Action to develop and strengthen regulatory capacity was of paramount importance. She recommended the implementation of measures to support the upscaling of local pharmaceutical production and address the issue of the affordability and availability of medicines in developing countries, such as extending the mandate of the Medicines Patent Pool. Her Government supported the proposal made by the representative of Canada and requested that further discussions on the draft decision should be open to all Member States.

The representative of ANGOLA<sup>1</sup> said that her Government shared the concerns expressed by the representatives of Brazil and the Congo and supported the establishment of a drafting group to resolve the issue as quickly as possible.

The representative of the ISLAMIC REPUBLIC OF IRAN<sup>1</sup> expressed support for the proposal made by the representative of Brazil. With regard to the draft decision, he suggested that the proposed progress report should be submitted for consideration by the Executive Board at its 144th session in January 2019, rather than in 2020.

The representative of THE WORLD MEDICAL ASSOCIATION, INC., speaking at the invitation of the CHAIRMAN, said that harmonized and accurate intellectual property regulations and sustainable and transparent sources of funding would be required to strengthen access to new medicines and facilitate progress towards the attainment of universal health coverage. He therefore called on WHO to accord greater attention to research and development priorities and innovative funding mechanisms.

The representative of the GLOBAL HEALTH COUNCIL, INC., speaking at the invitation of the CHAIRMAN, expressed support for the expert review panel's recommendations to prioritize the

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research and development needs relating to Type III diseases and to establish delinking mechanisms for the sale of certain products, including new antibiotics to tackle antimicrobial resistance.

The representative of the WORLD FEDERATION OF PUBLIC HEALTH ASSOCIATIONS, speaking at the invitation of the CHAIRMAN, urged WHO to prioritize capacity-building, good governance, accurate information and effective advocacy in order to strengthen health systems and make progress towards achieving universal health coverage. Her federation would provide support to WHO in its norm-setting and policy implementation functions. In return, she called on WHO and relevant international organizations to support the public health, innovation and intellectual property processes.

The representative of the INTERNATIONAL PHARMACEUTICAL STUDENTS' FEDERATION, speaking at the invitation of the CHAIRMAN, said that his federation fully supported the efforts to promote research and development, especially measures to encourage funders of research and development to make their publications openly accessible. In order to develop new, safe and effective medicines, steps must be taken to enhance overall research and clinical trial capacities. Stronger collaboration between Member States and the Secretariat was required to ensure access to medicines and health products and to increase funding for research and health technologies, particularly in developing countries, which would significantly enhance the quality of care that patients received.

The representative of MÉDECINS SANS FRONTIÈRES INTERNATIONAL, speaking at the invitation of the CHAIRMAN, welcomed the increased attention accorded to ensuring that health research and development prioritized unmet health needs, but emphasized the necessity of transforming such efforts into tangible outcomes for those in need. She called on Member States to implement the recommendations of the expert review panel at the earliest possible opportunity and to ensure the availability of adequate funding for that purpose. She stressed the need to apply the recommendations on tackling the challenges related to innovation and access to all essential health products to combat all diseases in all countries.

The representative of MEDICUS MUNDI INTERNATIONAL – INTERNATIONAL ORGANISATION FOR COOPERATION IN HEALTH CARE, speaking at the invitation of the CHAIRMAN, expressed support for the recommendations of the expert review panel and welcomed the focus on improving transparency in medicine pricing and the cost of research and development and on ensuring that publicly funded research benefited the public. He urged WHO to implement the expert review panel's findings swiftly in order to improve access to essential medicines for everyone.

The representative of KNOWLEDGE ECOLOGY INTERNATIONAL, speaking at the invitation of the CHAIRMAN, said that WHO should take steps to increase the transparency of research and development costs and medicine prices. He called for better data to be made readily available, particularly on research and development costs and access to new drugs, in order to evaluate pricing and the efficacy of research and development incentives. The scope of the global strategy and plan of action should be expanded to cover a wider range of diseases.

The representative of the INTERNATIONAL FEDERATION OF PHARMACEUTICAL MANUFACTURERS AND ASSOCIATIONS, speaking at the invitation of the CHAIRMAN, said that the expert review panel had failed to fully recognize the significant increase in the number of research and development programmes on diseases affecting developing countries. Many of the expert review panel's recommendations exceeded the mandate of the general strategy and plan of action and risked jeopardizing the global consensus that had been reached on public health, innovation and intellectual property. Those recommendations should therefore not be considered by Member States.

Additional funding should be provided for incentive models that could strengthen research and development.

The representative of STICHTING HEALTH ACTION INTERNATIONAL, speaking at the invitation of the CHAIRMAN, said that the priority actions identified by the expert review panel should be funded through sustainable financing mechanisms, given their importance to ensuring universal health coverage and equitable access to medicines and medical technologies. He also called for consultations to be held on the proposed implementation plan and greater synergies to be developed with other initiatives, such as the Sustainable Development Goals and WHO initiatives on antimicrobial resistance.

The representative of OXFAM, speaking at the invitation of the CHAIRMAN, urged WHO to take forward the recommendations of the expert review panel and expressed full support for the Director-General's call for flexible and unearmarked funding to implement the global strategy and plan of action and ensure access to essential medicines.

The ASSISTANT DIRECTOR-GENERAL (Access to Medicines, Vaccines and Pharmaceuticals) welcomed Member States' general approval of the prioritization approach to the objectives set forth in the general strategy and plan of action. The Secretariat would continue to focus on the main issues that had been raised during the discussion, such as identifying health research and development priorities to address unmet medical needs in developing countries; promoting sustainable financing mechanisms; encouraging transparency in medicine prices; expanding research and development to cover a broader range of diseases; improving technology transfer; and enhancing capacity at the country level. Member States had highlighted the need for an approach that balanced intellectual property rights and public health interests, in line with international agreements including the 2001 Doha Declaration on the TRIPS Agreement and Public Health, and for a detailed estimate of the funding required to implement the expert review panel's recommendations. The Secretariat would welcome financial support from Member States to support the implementation of such work.

The DIRECTOR-GENERAL, thanking participants for their comments, acknowledged the concerns expressed regarding the need to focus on implementation and high-impact actions. The Secretariat would strive to strengthen its collaboration with WIPO and WTO and would ensure that consultations on the recommendations prepared by the expert review panel and the proposed implementation plan were conducted in an open and transparent manner. Support from Member States would be required to ensure that adequate funding was in place.

The representative of CANADA, building on the momentum for progress and calls to ensure that action was not further delayed, proposed that paragraph (1) of the draft decision should be amended to read: "to draw up a detailed implementation plan in consultation with Member States and relevant international organizations considering the recommendations of the evaluation and the programme review." An additional paragraph would then be inserted to read: "to submit a detailed implementation plan to the Seventy-first World Health Assembly for Member State consideration." The current paragraph (2) would then become paragraph (3).

The representative of BRAZIL said that she could not agree to the proposal put forward by the representative of Canada without first seeing it in writing. Deleting the phrase "to take forward the recommendations" from paragraph (1) must be carefully considered. It had the potential to jeopardize the consensus reached and delay the drafting of a detailed implementation plan and the submission of an attendant progress report to the Seventy-first World Health Assembly. Rather than putting the whole process at risk in that manner, she proposed that further informal consultations should be held to address the specific concerns of certain Member States.

The representative of JAPAN said that he supported the proposal put forward by the representative of Canada.

The representative of TURKEY said that he agreed with the proposal by the representative of Brazil. The process should not be delayed for the sake of a few specific areas of concern that could be resolved separately. He proposed that a separate drafting group should be established to address those particular concerns ahead of the Seventy-first World Health Assembly.

The representative of THAILAND agreed that the amendments proposed by the representative of Canada should be made available in writing and stressed the importance of agreeing on a compromise that took into account the concerns of the minority without detracting from the interests of the majority. While it awaited the outcome of informal consultations on the two recommendations of concern, WHO should take steps to implement the expert review panel's other recommendations, given their importance and relevance to the core objectives of the Organization.

The representative of ALGERIA expressed support for the proposal made by the representative of Brazil. The expert review panel's recommendations should be implemented without delay.

The representative of BRAZIL said that a new subparagraph should be inserted listing the recommendations regarding which some Member States had concerns, so that implementation of the remaining recommendations could proceed. She proposed that the new paragraph *1bis* should contain words to the effect that consultations would be held with Member States with a view to integrating the recommendations of concern in the implementation plan. The recommendations listed in new paragraph *1bis* could include those referred to by the representatives of Japan and of Malta on behalf of the European Union.

The representative of MALTA, supported by the representatives of ALGERIA, the NETHERLANDS, FRANCE and ITALY, suggested that both proposals should be made available in writing so that Member States could hold informal consultations on the best way forward.

The representative of the CONGO expressed concern that consensus on a final version of the draft decision would not be reached during informal consultations given the strength of the prevailing opposing views on the subject. He therefore urged Member States to come together to find an acceptable compromise so that tangible progress could be made on the issue.

The representative of CANADA agreed with the comments made by the representative of the Congo and suggested that the Secretariat should incorporate the two proposals into one document for consideration during informal consultations, with the aim of facilitating compromise and building consensus.

The representative of ALGERIA said that informal consultations should focus solely on the two recommendations of concern and not branch out into other areas.

The representative of BRAZIL said that she would prefer to consider the merits of the two proposals separately.

The representative of MALTA noted that the standard procedure was to incorporate the proposed amendments into the existing decision and to clearly indicate the Member State that had put forward each amendment.

The CHAIRMAN took it that the Board wished to postpone the adoption of the draft decision to allow for further consultations among Member States.

**It was so agreed.**

(For continuation of the discussion and adoption of a decision, see the summary record of the tenth meeting, section 2.)

**Draft thirteenth general programme of work 2019–2023:** Item 3.1 of the agenda (documents EB142/3 Rev.1, EB142/3 Add.1 Rev.1 and EB142/3 Add.2) (continued from the fourth meeting)

The CHAIRMAN drew attention to a revised version of the draft thirteenth general programme of work 2019–2023, which was contained in document EB142/3 Rev.1. He also drew attention to the corresponding revised draft resolution contained in document EB142/3 Add.1 Rev.1.

The representative of MEXICO, supported by the representative of the DOMINICAN REPUBLIC, proposed that, in the second sentence of paragraph 29 of the draft programme of work, the phrase “as well as immunization which constitutes a strong platform for primary care upon which UHC needs to be built” should be inserted after the words “Community-based services, health promotion and disease prevention are key components”.

The representative of NEW ZEALAND proposed that, in the second sentence of paragraph 5 of the draft programme of work, the words “stepwise progress in strategic priorities” should be inserted after the phrase “GPW 13 will guide for each biennium”. The words “for 2019” should also be added to the end of the last line of the same paragraph. In the second sentence of the third paragraph in Box 3, the phrase “and reflect these changes in the biennial programme budget” should be inserted after “advance GPW 13’s strategic priorities”. In the first sentence of paragraph 23, the phrase “to reduce health inequalities” should be replaced with “achieve health equity”. In addition, the first sentence of paragraph 39 should be amended to read: “In order to leave no one behind, efforts in support of UHC must focus on reaching those whom services are not reaching, such as marginalized, stigmatized and geographically isolated people of all ages, with a special focus on, and indicators for, women and girls, those from the poorest wealth quintiles, persons with disabilities and indigenous peoples”. The last sentence of paragraph 63 should be amended to read: “The Secretariat will administer the platforms and the development of the related impact and accountability framework so as to ensure a holistic approach that avoids silos”. In the third sentence of paragraph 72, the words “the environment” and the accompanying footnote should be deleted. Lastly, he proposed that the first sentence of paragraph 106 should be amended to read: “WHO will monitor its performance, and establish an independent accountability mechanism to monitor performance”.

The representative of SWEDEN expressed concern about the proposed alignment of the global action plan on antimicrobial resistance with the action plan of the United Nations Inter-agency Coordination Group outlined in paragraph 72 of the draft programme of work. He therefore proposed that, in the second sentence of that paragraph, the phrase “based on the global action plan on antimicrobial resistance, the 2030 Agenda for Sustainable Development and the Political Declaration of the high-level meeting of the General Assembly on antimicrobial resistance” should be inserted after the words “specific pathogens”. The fourth sentence of the same paragraph should also be amended to read: “WHO will also strengthen its collaboration with other United Nations agencies and relevant partners from different sectors including through its role as co-chair of the United Nations inter-agency group and the FAO, OIE, WHO tripartite”. The final sentence of the paragraph should

consequently be amended to read: “WHO will support countries in developing, implementing and updating systematically national action plans.”

The representative of FRANCE proposed that, in the final sentence of paragraph 35 of the draft programme of work, the words “Non-State actors and, in particular” should be inserted before the phrase “the private sector can also contribute to UHC”. She stressed the importance of retaining the original wording of paragraph 80 as the Framework of Engagement with Non-State Actors had been adopted and must be implemented without conditions or caveats. She therefore proposed that the phrase “while managing conflicts of interest appropriately by” should be inserted between the words “health choices and interventions” and “applying the WHO Framework of Engagement with Non-State Actors”, while the words “as needed” should be deleted. In paragraph 39 of the French version of the programme of work, the words “peuples autochtones” should be replaced by “populations autochtones”; similarly in paragraph 81, the words “considération de sexes” should be replaced by “considération de genre”.

The representative of KAZAKHSTAN proposed that, in paragraph 26 of the draft programme of work, the words “people-centred primary healthcare as the means to move toward” should be inserted after the phrase “placing a spotlight on”. In the second sentence of paragraph 29, the words “community-based services, health promotion and disease prevention are key components” should be deleted. He also proposed that the third sentence of the same paragraph should be amended to read: “The Secretariat will support countries to progress towards UHC and the goal of ensuring that all people and communities have access to and can use high-quality promotive, preventive, curative, rehabilitative and palliative health services that are appropriate to their needs and expectations, while not exposing the user to financial hardship.” Paragraph 30 should be amended to read: “To respond effectively and appropriately to needs and expectations, health services need to be organized around close-to-community networks of people-centred primary care, with due attention to effectiveness, safety and efficiency, as well as to continuity, integration and coordination of care and respectful and compassionate relations between people and their health care workers. Financial hardship can be limited if out-of-pocket payments for health are kept below the pre-defined threshold where they are “catastrophic” or “impoverishing”, i.e. exceed a household’s capacity to pay or push it below the poverty line.”

The representative of BRAZIL proposed that, after the sixth sentence of paragraph 70 of the draft programme of work, new sentences should be inserted to read: “In particular, relevant SDG targets call for increased efforts to tackle road traffic injuries and violence. As the lead agency for health in the United Nations system, WHO needs to catalyse action globally and in countries.” He asked the Secretariat to clarify what the subsequent steps would be once the proposals from Member States had been compiled.

The CHAIRMAN said that the Secretariat would incorporate the latest amendments proposed by Member States into a new version of the draft programme of work for further discussion. He stressed that the Board must come to an agreement on the resolution contained in document EB142/3 Add.1 Rev.1 so that the draft programme of work could be prepared and submitted prior to the Seventy-first World Health Assembly.

The representative of FINLAND<sup>1</sup> expressed support for the amendments to paragraph 80 of the draft programme of work proposed by the representative of France. He suggested that the words

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<sup>1</sup> Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.

“public health” should be inserted before the words “impact in every country” as appropriate throughout the text, particularly in Box 3 and in the heading preceding paragraph 83.

The representative of the RUSSIAN FEDERATION<sup>1</sup> said that his country welcomed the inclusion, in the first sentence of paragraph 106 of the draft programme of work, of a reference to establishing an independent accountability mechanism to monitor performance. In that regard, he also suggested that, at the end of that same sentence, the words “outcomes of the implementation of GPW 13” should be inserted. The last sentence of paragraph 128 should be deleted since it was inconsistent with the previous comments made by the Secretariat concerning the budgetary requirements of the draft programme of work.

The representative of the UNITED STATES OF AMERICA<sup>1</sup> said that his country supported the focus of the draft programme of work on improving public health outcomes for vulnerable people and on establishing measurable outcomes, goals and impacts.

The representative of ECUADOR<sup>1</sup> suggested that, in the third sentence of the first bullet point of paragraph 98 of the draft programme of work, the words “surveillance systems and anthropometric data” should be inserted after the words “disease registries”.

The representative of PANAMA<sup>1</sup> suggested that, at the end of the last sentence of paragraph 80 of the draft programme of work, the words “as needed” should be deleted. Although many of the proposed amendments required only minor refinements of the text, other suggestions would necessitate substantial revision of the document. She therefore wished to know how the Secretariat would proceed with that work.

The representative of GERMANY<sup>1</sup> suggested that, at the end of paragraph 106 of the draft programme of work, additional sentences should be inserted that would read: “The principles of risk management, ethics, compliance and evaluation are crucial for the transformation of the Organization. The corporate responsibility of WHO is to be able to identify those risks that may impact the agreed results with Member States. WHO has the responsibility to Member States, partners and the international community in general, to guarantee the judicious use of the resources and maintain the good reputation of WHO, in keeping with the Code of Ethics and Professional Conduct, to build further trust.” He also suggested that, after the final bullet point in paragraph 107, an additional line should be inserted, which would read: “The role of WHO in the country setting will be adequately addressed in the Geneva governing bodies, providing adequate effective oversight.”

The SECRETARY suggested that, in the tenth sentence of paragraph 70 of the draft programme of work, the word “reduce” should be inserted before the words “antibiotics in food”.

The CHAIRMAN invited the Board to consider the draft resolution contained in document EB142/3 Add.1 Rev.1.

The representative of NEW ZEALAND said that, following informal consultations among a number of Member States, he wished to propose that the draft resolution should be amended to read:

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<sup>1</sup> Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.

The Executive Board is invited to consider the following draft resolution:

The Executive Board,  
Having considered the draft thirteenth general programme of work, 2019–2023,<sup>1</sup>

REQUESTS the Secretariat to finalize the outstanding work on the Impact Framework, financial estimates and investment case for consideration of Member States prior to the Seventy-first World Health Assembly.

RECOMMENDS to the Seventy-first World Health Assembly the adoption of the following draft resolution:

The Seventy-first World Health Assembly,

(PP1) Having considered the draft thirteenth general programme of work, 2019–2023 and welcoming its ambitious vision,

(PP2) Noting their approval of the thirteenth general programme of work 2019–2023 does not imply approval of the financial estimate contained in [document EB142/3 Add.2].

(OP)1. APPROVES the Thirteenth General Programme of Work, 2019–2023 and the related aspirational “triple billion” goals;

(OP) 2. REQUESTS the Director-General:

(1) to use the Thirteenth General Programme of Work as the basis for the strategic direction of planning, monitoring and evaluation of WHO’s work during the period 2019–2023 and to develop realistic programme budgets in consultation with Member State;

(2) to take into consideration the changing state of global health in implementing the Thirteenth General Programme of Work , and keep Member States informed on progress with implementation through regular updates to governing bodies;

(3) to provide guidance and support to regional offices on the implementation of the Thirteenth General Programme of Work , taking into account different contexts;

(4) to provide a report to the Seventy-fifth World Health Assembly to inform potential extension to 2025 of the Thirteenth General Programme of Work to align with the wider United Nations planning cycle.

The representative of FIJI, while expressing support for the amended draft resolution, suggested that paragraph 2(3) should refer to both regional and country offices.

The representative of BRAZIL asked for clarification as to why paragraph 1 made specific reference to the “triple billion” goals, particularly given that they represented an integral part of the draft thirteenth general programme of work. He wished to know what impact that reference would have on other integral parts of the programme of work. He also asked why, in paragraph 2(1), the word “realistic” had been used to describe programme budgets, which should, by definition, be well-thought out and feasible.

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<sup>1</sup> Document EB 142/3 Rev.1.

The representative of SWEDEN expressed support for the amended draft resolution.

The representative of THAILAND said that he fully supported the inclusion of a specific reference to the “triple billion” goals precisely because they represented the core objectives of the draft thirteenth general programme of work. He therefore proposed that the original paragraph 2 contained in document EB142/3 Add.1 Rev.1 should be reinstated and amended to read: “URGES Member States to identify their roles, and the specific actions they need to take, to support the achievement of the “triple billion” goals.”

The representative of IRAQ said that his country supported the amended draft resolution and agreed that a reference to strengthening the guidance and support provided to regional and country offices should be included. He requested clarification of the meaning of the reference to “realistic” programme budgets.

The representative of VIET NAM said that she supported the draft resolution as amended. She proposed that the original paragraph 2 contained in document EB142/3 Add.1 Rev.1 should be reinstated and amended to read: “URGES Member States to support the achievement of the “triple billion” goals.” She agreed with the suggestion by the representative of FIJI that reference should be made to strengthening the guidance and support provided to regional and country offices.

The representative of NEW ZEALAND said that the reference to “realistic” programme budgets had been included since the issue had been raised consistently during informal consultations on the draft thirteenth general programme of work. Given the aspirational nature of the draft programme of work, some Member States had stressed the need to specify that programme budgets must be realistic and based on sensible financial estimates. She agreed with the suggestion to include a reference to providing guidance and support to both country and regional offices. The original paragraphs 1 and 2 contained in document EB142/3 Add.1 Rev.1 had been merged to keep the text as succinct as possible. However, she welcomed the proposals to reinstate the original paragraph 2.

The representative of ALGERIA said that he would like more time to analyse the contents of the amended draft resolution together with other Members States of the African Region.

The representative of BRAZIL, supported by the representative of CANADA, proposed that preambular paragraph 1 should make reference to the “triple billion” goals. The amended paragraph would therefore read: “Having considered the draft thirteenth general programme of work, and welcoming its ambitious vision, as expressed by the aspirational “triple billion” goals.” Paragraph 1 should consequently be amended to read “APPROVES the Thirteenth General Programme of Work, 2019–2023”.

The CHAIRMAN took it that the Board wished to suspend consideration of the draft resolution to allow for further informal consultations on the proposals for amendments.

**It was so agreed.**

**The meeting rose at 12:35.**

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