EXECUTIVE BOARD 142nd session Provisional agenda item 5.3 EB142/26 22 December 2017

Evaluation of the election of the Director-General of the World Health Organization

Report by the evaluation management group

INTRODUCTION

- 1. The Sixty-fifth World Health Assembly decided, in resolution WHA65.15 (2012), that an evaluation, open to all Member States, will be conducted by the Executive Board within one year from the appointment of the next Director-General of the World Health Organization, to assess the efficacy of the revised process and methods for the election of the Director-General, in order to discuss any need for further enhancing fairness, transparency and equity among the Member States of the six regions of WHO.
- 2. The Executive Board is the commissioner and owner of this evaluation, which will take place during the 142nd session of the Executive Board in January 2018 in an open meeting.
- 3. At the 141st session of the Executive Board, following consideration of document EB141/6 and the adoption of decision EB141(1) (2017), an evaluation management group was established to ensure appropriate oversight of both the process of development of the supporting material and the conduct of the evaluation. This evaluation management group was composed of three Vice-Chairmen and the Rapporteur of the 141st session of the Executive Board (representing Burundi, Canada, Thailand and Kazakhstan, respectively), in addition to a member of the Executive Board from the Eastern Mediterranean Region (representing Bahrain), and was chaired by the first Vice-Chairman (representing Fiji). The WHO Evaluation Office supported the evaluation management group in preparing for this evaluation.
- 4. The informed opinion of Member States as primary stakeholders was sought by means of an online survey³ in the six official languages of the Organization, managed through a secure password-protected WHO electronic platform. In response to a Note Verbale, issued on 17 August 2017, inviting Member States to designate a focal point to complete the survey questionnaire, 84 Member States provided focal points for the survey. Focal points from 59 Member

² This agenda item shall be in an open meeting as provided in Rule 7(b) of the Rules of Procedure of the Executive Board. Rule 7(b) provides that attendance at open meetings shall be limited to members of the Board, their alternates and advisers, Member States not represented on the Board and Associate Members, and the Secretariat.

¹ And, where applicable, regional economic integration organizations.

³ Survey results available on the website of the WHO Evaluation Office, http://www.who.int/evaluation/en/.

States, representing all six regions responded to the survey, a response rate of 70% of those identifying a focal point. The total number of responses received per region is as follows: African Region (10/47); Region of the Americas (13/35); South-East Asia Region (2/11); European Region (22/53); Eastern Mediterranean Region (6/21); and Western Pacific Region (6/27).

- 5. To complement this information, independent feedback on the election process was also requested by means of interviews with the Chairman of the 140th session of the Executive Board and the candidates nominated by Member States. In respect of the latter, key informant interviews were conducted by two members of the evaluation management group with five of the six candidates nominated by Member States.
- 6. Feedback from members of the Secretariat who were involved in the election process was requested in the form of a specific online questionnaire. The online survey generated 10 responses, providing the perspectives of the departments involved in supporting the process.
- 7. Furthermore, the evaluation management group decided to solicit feedback on the evaluation process from non-State actors and other interested stakeholders through an open, web-based public survey. A total of 31 responses to the web-based survey were received, including from public institutions, nongovernmental organizations, multilateral organizations, the private sector, academia and the general public.

FINDINGS

Code of conduct for the Election of the Director-General of the World Health Organization

- 8. The code of conduct was generally welcomed as a means for making explicit expectations for the conduct of candidates and Member States during the election process. No concerns were raised about the aims of the code or the principles it sets out. It was viewed by Member States as being clearly formulated and effective in facilitating achievement of its objectives.
- 9. It was noted that there appeared to be good communication, cooperation and mutual respect among candidates and Member States, as required by the code.
- 10. However, a number of concerns were raised, both by candidates themselves and by Member States, regarding the extent of candidates' travel during the campaign period. The code's suggestions that travel should be limited and that meetings and other promotional activities should be arranged to coincide with other events were seen as being largely ineffectual.
- 11. It was frequently suggested that a formal requirement be introduced for candidates (or the Member State proposing them) to disclose the amounts and source(s) of funding used for their campaigns.
- 12. The survey of Member States indicates that there were some concerns regarding Member States' and, to a greater degree, candidates' compliance with the code.

¹ As defined in document WHA66/2013/REC/1, resolution WHA66.18, Annex 1, those principles are, "equitable geographical representation, fairness, equity, transparency, good faith, dignity, mutual respect and moderation, non-discrimination, and merit".

- 13. The code is also explicit in its requirements that there should be no promises or commitments (financial or non-financial) made to or by candidates, Member States or "any person or entity" with the aim of influencing the election or benefitting from its outcome. However, during the course of the evaluation, assertions were made by candidates alleging non-compliance with that requirement.
- 14. No specific evidence was provided to support allegations of non-compliance and it was clearly not within the evaluation's remit to investigate them. Nevertheless, the fact that they have been made is a cause for concern regarding the effectiveness of the code and its impact on the election process.
- 15. The key suggestions put forward for changes in respect of the code of conduct centred on disclosure of campaign funding and its sources and/or imposing limits on either total campaign costs or travel costs. While recognizing the legitimate intent of such suggestions, their feasibility may be limited. Sources of campaign funds may be unclear if monies are channelled through intermediaries while "in-kind" support may be difficult to identify and value. An approach which required details of spending on specific, easily monitored, items such as travel and promotional events was suggested as a means to provide some level of insight into the scale of candidates' costs.
- 16. More fundamentally, a number of questions were raised regarding the status and enforceability of the code of conduct. It is noted that "the code is not legally binding but Member States and candidates are expected to honour its contents." In addition, Member States when initially proposing a candidate were required to include a statement to the effect that the Member State and the person proposed pledged to observe the provisions of the code of conduct.
- 17. At present, failure to adhere to the code cannot result in a candidate being penalized. It was, however, frequently suggested that accountability could be improved by establishing an independent "referee" function (possibly undertaken by the Officers of the Executive Board or a subcommittee of the Board) or a similar mechanism, to receive and review expressions of concern regarding non-compliance with the code by a candidate, Member State or any other person/entity and to provide reports to Member States.

Web forum

- 18. Member States' feedback on the value of the web forum was generally neutral but favoured its retention as a component of the process. It was acknowledged, in particular, that the web forum provided a means for Member States that were unable to be present at the candidates' forum to interact with candidates. Suggested improvements focused on improving the interactivity of the tool, limiting the numbers of questions submitted and extending the period over which the forum is available.
- 19. The candidates themselves were more divided on the utility of the web forum. Some suggested that they found it helpful to express their positions in writing and share them with Member States. On the other hand, some concerns were raised regarding the amount of work required to respond to questions and how useful those responses were in shaping Member States' views. Candidates were however unanimous in their opinion that there were far too many questions, and that these could have been filtered and categorized to reduce their number. There were also suggestions to limit the word count of the candidate responses in order to ensure brevity and improve the conciseness of positions. There was some speculation by candidates that not everyone answered the questions themselves, and thus responses may not have provided solid evidence of individuals' technical merit.

¹ Resolution WHA66.18, Annex 1.

Candidates' forum

- 20. The candidates considered the forum to be fair, well-timed and beneficial, and they viewed it as an important step in the shortlisting process. It was mentioned that perhaps a second forum could be held following the shortlisting decision, during the lead-up to the vote at the Health Assembly. This would improve Member States' access to candidates, allow more intensive questioning of a smaller cohort and potentially reduce the pressure on candidates to travel to countries to further articulate their positions.
- 21. Much like the responses about the web forum, candidates felt that there was duplication in the questions asked, in part at least as a result of the approach used to ensure a fair allocation of questions. Some form of prior review of questions was suggested as a means to eliminate the risk of such duplication and thus ensure that candidates could be allowed to address a broader range of issues. Candidates also felt that there could have been more time allotted to the question-and-answer portion of the event as opposed to delivery of pre-prepared speeches.
- 22. In discussing the candidates' forum, a majority of the candidates mentioned that an additional, "authorized" moderated debate session would further improve Member States' ability to gauge the merit of the candidates.
- 23. Member States also responded positively with regard to the forum. They were unanimous in their support for it to continue as part of the election process. A quarter of respondents recommended refinements to the forum, which were broadly in alignment with comments from the candidates themselves (e.g. less duplication in questions, more time for the question-and-answer session).

Selection/voting processes

- 24. The selection and voting processes adopted by the Executive Board and the Health Assembly respectively were generally viewed positively. The Secretariat's efforts to identify and mitigate any risks to the effective conduct of the ballots, including by means of "mock" votes, were seen as highly effective.
- 25. There were some concerns expressed that the use of secret ballots by both the Executive Board and the Health Assembly could reduce accountability either on the part of the individual casting a Member State's vote or, potentially, a Member State which might have undertaken to support a particular candidate.

Executive Board

26. The initial Executive Board process, which reduced the number of candidates, initially from six to five and then from five to three, was generally seen as fair and transparent both by the candidates themselves and by Member States, at least 90% of which provided positive assessments in the survey.

- 27. The need for the initial step (which, in this case, had involved the elimination of a single candidate) was queried, but it is noted that this step is in fact mandated by a decision of the Executive Board¹ which requires the preparation and subsequent consideration of a shortlist of five candidates.
- 28. The candidates' statements as presented to the Executive Board were considered to be useful and the process for allocating questions to Executive Board members was seen as appropriate and valid as a means to gain further insights into candidates' views and abilities. The survey results suggest that a number of Member States would have found it useful to devote more time for the question-and-answer session with candidates.

Health Assembly

- 29. The changes made to accelerate the voting process at the Health Assembly were welcomed although there was strong support for the adoption of secure electronic voting in future elections.
- 30. Should the use of electronic voting continue to be judged infeasible, there was also a suggestion that the governing bodies should explore options to further accelerate the voting process.
- 31. It was apparent that there was significant communication between delegates who were in the Assembly Hall during the ballot and others who were outside, despite instructions to the contrary. While the intent to maintain confidentiality is justified, practical enforcement is unrealistic in an environment where electronic communication is widely used.

Role of the Secretariat

- 32. The Secretariat was seen by most respondents as having managed all elements of the election process well. All candidates complimented the Secretariat staff on their support and professionalism.
- 33. Information was provided in a timely and accessible manner. The steps taken to familiarize Executive Board members and Health Assembly delegates with voting procedures were also seen to be worthwhile.
- 34. While expressing their appreciation for the work done by the Secretariat, a number of candidates suggested that confidence in the overall neutrality of the election could be further improved by establishing a stand-alone unit, independent of the Director-General's Office, to provide support to the process. Such a unit could play a more important role and be particularly helpful in any future election if an incumbent Director-General was standing for election against one or more other candidates.
- 35. The ability of the (then) Chairman of the Executive Board and the Secretariat to work closely and collaboratively during the election process was viewed positively. The fact that, in the case of the recent election, the Chairman was temporarily based in Geneva (initially to fulfil an unrelated role) throughout the process was particularly useful. It was acknowledged there could be no guarantee that such an arrangement, while desirable, would be replicated in future elections.

¹ See decision EB100(7) (1997), operative paragraphs 2 and 4.

Election process

- 36. Member States expressed a very high level of satisfaction with the election process in general. It was seen as a fair, equitable, and highly transparent process. While the majority expressed few concerns over the length of the process, a quarter of respondents did indicate their preference for a shorter campaign. A third of respondents to the web-based survey for non-State actors also indicated a preference for a shorter campaign.
- 37. All candidates considered that the new process of nominating up to three persons by the Executive Board, and full voting at the Health Assembly was the right approach; it was seen to have improved the transparency of the process and increased the opportunity for full engagement by Member States. However, in comparison to Member States, the candidates expressed a stronger consensus that the election process was too long, and its length contributed to it being a very arduous campaign that was personally taxing, both mentally and physically.
- 38. Specifically, following the shortlisting in January 2017, the remaining three candidates were actively involved in extensive and costly programmes of country visits. In addition to making such visits in their own right, candidates also felt obliged to track the visits made by each other, which further increased their workloads.
- 39. In terms of changes to the components of the election process, it was suggested by more than one candidate that a set series of "authorized" events during the campaign could reduce the numbers of ad-hoc invitations to candidates. It was noted that candidates felt pressured to accept such invitations if they learned that others were doing so, leading to a progressive escalation in time and travel commitments. It was suggested that more formal events, sanctioned by WHO, could provide an effective "circuit-breaker", protecting candidates against spiralling commitments. At the same time, while candidates acknowledged the importance of Geneva-based events and others that were conducted via electronic means, regional engagement and face-to-face interactions were also highly valued.
- 40. Candidates considered that engagement in regional committee meetings prior to shortlisting during the campaign was challenging. Not all of the candidates attended regional committee meetings as the deadline for nominations occurred after the cycle of meetings began. Further, it was mentioned more than once by candidates that they felt Member States were unsure of how to engage with them in the context of regional meetings and thus, bilateral meetings were not guaranteed, and receptions were not always fully attended.
- 41. The shortcomings noted by candidates may be a reflection of the new election process being unfamiliar. Nevertheless, it was proposed that attendance by candidates at regional committee meetings be a standardized component of future campaigns, with specific agenda items allowing for Member State engagement with candidates, and a clear role for bilateral meetings. It was felt that this "authorized" engagement during regional committee meetings could further reduce the pressure on candidates to participate in multiple country-level visits. If such an arrangement was adopted, the formal closing date for nominations would need to be before the start of the regional committee cycle.
- 42. While not part of the election process itself, the short transition period for the new Director-General was mentioned as being a matter for concern. A number of candidates, as well as Member States and non-State actors felt that 1 July was too soon for the new Director-General to take on the role, and that a longer transition period, possibly extending until the start, or even the end, of the post-election cycle of regional committee meetings, was required. Admittedly, this change could

result in the outgoing Director-General and Assistant Directors-General commanding (or being perceived to command) less influence and authority during this longer end-of-mandate period; however, it would also allow the Director-General-elect the time necessary to have a senior Cabinet in place upon taking on the mantle of responsibility.

ACTION BY THE EXECUTIVE BOARD

- 43. The Board is invited to consider the key findings of this report in its evaluation of the election of the Director-General of the World Health Organization.
- 44. The Board is further invited to consider the following draft decision:

The Executive Board, having considered the report on the evaluation of the election of the Director-General of the World Health Organization, conducted by the evaluation management group, and having discussed its findings at an open meeting held during the Board's 142nd session, decided to request the Secretariat to bring forward a proposal, informed by the report and the Board's deliberations, for a revised election process for the Director-General, and a revised code of conduct, to be presented for consideration by the Board at its 144th session in January 2019.

= = =

¹ Document EB142/26.