PROVISIONAL SUMMARY RECORD OF THE SECOND MEETING

WHO headquarters, Geneva
Monday, 28 May 2018, scheduled at 14:30

Chairman: Ms M. N. FARANI AZEVÊDO (Brazil)
later: Dr P. SILLANNAUKEE (Finland)
later: Ms M. N. FARANI AZEVÊDO (Brazil)

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SECOND MEETING
Monday, 28 May 2018, at 14:00

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OTHER MANAGERIAL, ADMINISTRATIVE AND GOVERNANCE MATTERS: Item 4 of the agenda (continued)

Appointment of the Regional Director for the Eastern Mediterranean: Item 4.8 of the agenda (document EB143/11)

The meeting was held in open (private) session until 15:10, when it resumed in public session.

At the request of the CHAIRMAN, the RAPPORTEUR read out the resolution on the appointment of the Regional Director for the Eastern Mediterranean adopted by the Board in open (private) session:¹

The Executive Board,
Considering the provisions of Article 52 of the Constitution of the World Health Organization;
Considering also the nomination made by the Regional Committee for the Eastern Mediterranean at its special session on 19 May 2018,

1. APPOINTS Dr Ahmed Salim Saif Al Mandhari as Regional Director for the Eastern Mediterranean Region as from 1 June 2018;

2. AUTHORIZES the Director-General to issue to Dr Ahmed Salim Saif Al Mandhari a contract for a period of five years and eight months from 1 June 2018, subject to the provisions of the Staff Regulations and Staff Rules.

The CHAIRMAN congratulated Dr Al Mandhari on his appointment.

At the invitation of the CHAIRMAN, Dr Al Mandhari took the oath of office contained in Staff Regulation 1.10 and signed his contract.

The REGIONAL DIRECTOR FOR THE EASTERN MEDITERRANEAN thanked the Executive Board for appointing him as Regional Director for the Eastern Mediterranean and for giving him the opportunity to implement his agenda for change towards a stronger, healthier and more cooperative Region. Paying homage to his predecessor, he conveyed his deepest condolences to the family of the late, former Regional Director, Dr Mahmoud Fikri.

¹ Resolution EB143.R1.
Recounting the Region’s current challenges, he presented his vision for the future of the Eastern Mediterranean. The priorities for his term in office would be, inter alia, to promote appropriate planning and programme budgeting within the Organization; tackle health emergencies including disease outbreaks; improve control of communicable and noncommunicable diseases and their risk factors, and strengthen health systems to achieve universal health coverage. He would also take steps to address morbidity and mortality rates, which had been aggravated by the challenges facing the Region, strengthen country-level core capacities, maintain a dialogue with national health authorities to solve regional health problems, and encourage better communication and coordination, including with WHO partners.

At the invitation of the CHAIRMAN, the RAPPORTEUR read out a resolution of appreciation adopted by the Board in open (private) session:¹

The Executive Board,
On the occasion of the appointment of Dr Ahmed Al Mandhari for the post of WHO Regional Director for the Eastern Mediterranean;
Commending the remarkable efforts made by the Acting Regional Director Dr Jaouad Mahjour to ensure continuation of the work and activities of WHO in the Eastern Mediterranean Region following the untimely death of Dr Mahmoud Fikri in October 2017, in particular, in facilitating the acceleration of the procedure to elect the next WHO Regional Director for the Eastern Mediterranean,

1. EXPRESSES its appreciation to Dr Jaouad Mahjour for his contribution and commitment to the Organization and implementing the regional and global health agenda, especially facilitating WHO’s work in emergency settings that heavily affects countries of the Eastern Mediterranean Region;

2. ADDRESSES to him its sincere good wishes for his next appointment in service of the Organization.

The ACTING REGIONAL DIRECTOR FOR THE EASTERN MEDITERRANEAN REGION thanked the Executive Board for its resolution of appreciation and congratulated Dr Al Mandhari on his appointment as Regional Director. He also thanked the officers of the Regional Committee for the Eastern Mediterranean for their support and guidance which had expedited the election process, and the Director-General for the trust and responsibility bestowed on him to serve as Acting Regional Director. He applauded the staff members of the Region who had supported him to ensure the continuity of work during the transition period and the wider WHO workforce working in the field or in emergency settings. While acknowledging the challenges facing the Eastern Mediterranean, he highlighted the potential arising from the Region’s commitment to the Sustainable Development Goals and the Thirteenth General Programme of Work. He remained committed to making progress in that regard and offered his full support to Dr Al Mandhari.

The DIRECTOR-GENERAL thanked Dr Mahjour for his leadership during the transition period. He congratulated Dr Al Mandhari on his appointment and wished him every success in his term of office.

¹ Resolution EB143.R2.
The representative of BURUNDI, speaking on behalf of the Member States of the African Region, congratulated Dr Al Mandhari on his appointment and assured him of his Region’s cooperation. He also paid tribute to the late Dr Fikri for his contribution to the Organization and commended the work of Dr Mahjour, whom he wished every success in the future.

The representative of AUSTRALIA, speaking on behalf of the Member States of the Western Pacific Region, thanked Dr Mahjour for his leadership during difficult circumstances. She paid tribute to the dedication and professionalism of the late Dr Fikri, remembering his kindness and politeness, and recognized both men’s work in addressing key health challenges and promoting health and well-being in their Region. She congratulated Dr Al Mandhari on his appointment and looked forward to working with him on shared areas of interest.

The representative of INDONESIA, speaking on behalf of the Member States of the South-East Asia Region, congratulated Dr Al Mandhari on his appointment and expressed confidence in his leadership. She further commended the work of Dr Mahjour and expressed regret at the passing of Dr Fikri, who had made a profound contribution to the Eastern Mediterranean Region and WHO.

The representative of the NETHERLANDS, speaking on behalf of the Member States of the European Region, congratulated Dr Al Mandhari on his appointment and wished him every success in his role. He also thanked Dr Mahjour for his dedicated support to WHO.

The representative of CHILE, speaking on behalf of the Member States of the Region of the Americas, thanked Dr Mahjour for his work. He congratulated Dr Al Mandhari on his appointment and expressed confidence in his leadership to overcome the existing and emerging challenges in the Eastern Mediterranean. His Region fully supported the new Regional Director and wished him great success in his role.

The representative of IRAQ congratulated Dr Al Mandhari and wished him success. He also expressed appreciation for the work of Dr Mahjour and paid tribute to the late Dr Fikri. He called on Member States to commit to strengthening WHO activities, particularly in the Eastern Mediterranean Region.

Report of the Programme, Budget and Administration Committee of the Executive Board: Item 4.2 of the agenda (document EB143/5)

The representative of NEW ZEALAND, speaking in his capacity as Chairman of the Programme, Budget and Administration Committee of the Executive Board, said that the Committee had considered reports from various internal and external audits which had noted continuous quality improvements within WHO. Although further progress was required, the Organization was on course to implement the changes needed to address the remaining financial and human resource issues. The Committee had called for the Independent Expert Oversight Advisory Committee to assess future WHO work programmes and the transformation agenda. It had also urged the Secretariat to provide further information on its implementation of the United Nations Joint Inspection Unit recommendations on actions to support small island developing States as part of the climate change and health agenda, and to update the Committee on the ways in which the Evaluation Office could secure the full amount of its approved budget and align its work with the United Nations Evaluation

1 Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.
Group norms and standards, as well as incorporate and reflect the reforms required by the United Nations quadrennial comprehensive policy review.

The representative of MEXICO, speaking on behalf of Australia, Austria, Belgium, Brazil, Bulgaria, Canada, Chile, Colombia, Cyprus, the Czech Republic, Denmark, Estonia, Finland, France, Germany, Ireland, Israel, Italy, Japan, Luxembourg, Mexico, Monaco, the Netherlands, New Zealand, Norway, Panama, Peru, Poland, Portugal, Romania, Slovenia, Spain, Sweden, Switzerland, Thailand, the United Kingdom of Great Britain and Northern Ireland, the United States of America and Uruguay, commended WHO for its efforts to update policies to prevent and manage incidents of harassment and sexual exploitation and abuse and stressed the need to strengthen the existing procedures and human resources so as to address related complaints in a timely, effective and professional manner, in accordance with the principle of due process of law. She urged the Secretariat to implement the recommendations of the independent external review of the WHO investigation function with a view to holding perpetrators to account and creating a safe environment for reporting and whistle-blowing. Communication with beneficiaries, staff, partners and Member States should be open and transparent in order to implement robust preventive measures and support victims and survivors, who should be provided with adequate psychosocial support and protection and spared prolonged administrative processes wherever possible. Reporting on sexual exploitation and abuse, abuse of power and harassment in all its forms should be encouraged in order to uncover cases, with greater protection afforded to whistle-blowers. The Office of Internal Oversight Services should also be strengthened. Appropriate and ongoing training should be provided to all staff, including temporary personnel and interns, at headquarters and in field locations. A unified United Nations-wide approach should be adopted in which affiliated organizations, suppliers and implementers abided by the same principles and perpetrators were prevented from circulating from job to job. Welcoming WHO senior management’s commitment on the issue, and in order to increase transparency and accountability, she requested that updates on the above issues be presented annually to the Executive Board as either a regular, standalone agenda item or as part of the annual report on compliance, risk management and ethics. In support of all those who worked for zero tolerance, she commended the Secretariat for its continued engagement and leadership to combat harassment.

The representative of INDONESIA, noting that the financial estimate for the Thirteenth General Programme of Work had been revised upwards, called on the Secretariat to strengthen dialogue with Member States and align WHO country programmes with national development agendas in order to ensure the successful implementation of the general programme of work.

The representative of ZAMBIA, speaking on behalf of the Member States of the African Region, expressed support for the Programme, Budget and Administration Committee’s recommendations concerning the Independent Expert Oversight Advisory Committee, the compliance, risk management and ethics function, hosted partnerships, and the draft evaluation policy (2018).

The representative of IRAQ, supporting the statement made by the representative of Mexico, said that harassment and sexual exploitation and abuse should be considered as part of the broader issue of gender-based violence. He urged WHO to work with the global community to address any practices that would prevent the attainment of Sustainable Development Goal 5 (Achieve gender equality and empower all women and girls) and the successful implementation of the Thirteenth General Programme of Work.

The Board noted the report.

Dr Sillanaukee took the Chair.
**Evaluation: annual report:** Item 4.3 of the agenda (document EB143/6)

The CHAIRMAN drew attention to the summary of the discussion of the agenda item by the Programme, Budget and Administration Committee of the Executive Board, contained in paragraphs 11 to 14 of document EB143/5, and invited the Board to take note of the report and consider the draft decision contained in document EB143/6.

The representative of the NETHERLANDS, welcoming the draft evaluation policy (2018), said that an independent Evaluation Office would be integral to the success of the Organization’s transformation agenda. Adequate resources would also be required to ensure effective organizational learning. He therefore wished to know what steps had been taken to allocate sufficient funding for the draft evaluation policy (2018) and the Evaluation Office in the programme budget for 2020–2021.

The representative of the UNITED STATES OF AMERICA urged the Secretariat to conduct cross-cutting evaluations that would enhance decision-making and organizational learning. Recognizing the effective work conducted by a comparatively small number of evaluation staff at WHO, she called for an increase in human and material resources. While she welcomed the proposed draft evaluation policy (2018), it lacked clear definitions of the roles and responsibilities to be assumed by evaluation stakeholders. She therefore proposed that a paragraph 43bis should be inserted, which would read as follows: “Additionally, the Director-General, regional directors, senior management and programme directors across the Organization also play a critical role in promoting a culture of evaluation. These roles and responsibilities are detailed in the evaluation practice handbook.”

The representative of FINLAND agreed with the representative of the Netherlands regarding the need for sufficient funding. Priority should be given to evaluating WHO’s key metrics- and information-related activities in the light of the vital role they played in assessing the progress made towards the Thirteenth General Programme of Work and the Sustainable Development Goals. The availability of relevant information across all levels of the Organization helped to support funding efforts and enhance Member States’ health promotion and prevention capacities.

The representative of GERMANY said that strengthening evaluation and organizational learning should remain a key priority. Evaluation analyses, conclusions and recommendations should be systematically used to inform decision-making and future action. He wished to know when the Executive Board would discuss the outcome of the second annual evaluation of the implementation of the WHO geographical mobility policy. He expressed concerns regarding the budgetary constraints mentioned in the report and wished to know what percentage of WHO’s resources had been allocated to the evaluation function.

The representative of AUSTRALIA expressed support for the continued efforts to improve organizational transparency and accountability and monitor the implementation of evaluation recommendations. She welcomed the recommendations of the comprehensive review of the United Nations system support for small island developing States and reforms aimed at addressing the burden of multiple reporting frameworks for those countries. WHO’s approach to evaluation should reflect the focus of the Thirteenth General Programme of Work and promote more impact-related assessments. She shared the concerns that the evaluation function had been hampered by budgetary constraints and underscored the need for additional funding.

The representative of BENIN, speaking on behalf of the Member States of the African Region, welcomed the report, particularly the references to the mid-term evaluation of the transformation
agenda of the WHO Secretariat in the African Region 2015–2020. The draft evaluation policy (2018) should be fully aligned with the Thirteenth General Programme of Work, and evaluation objectives consistent with countries’ needs. The evaluation function should be transparent, independent and adequately resourced, and evaluation findings should be made widely accessible and recommendations effectively implemented.

The representative of MEXICO, noting the progress made in implementing the evaluation recommendations, said that action must be taken to align those recommendations with organizational objectives. With respect to recent evaluations, she hoped that the results of the preliminary evaluation of the global coordination mechanism on the prevention and control of noncommunicable diseases would include an evaluation of the work of the Independent High-level Commission on Noncommunicable Diseases. She urged the Secretariat to keep Member States informed of the outcomes of subsequent evaluations and to complete pending evaluations. She endorsed the draft decision.

The representative of JAPAN expressed support for the amendments proposed by the representative of the United States of America and the comments made regarding budgetary constraints and resources. He suggested that paragraph 43 of the draft evaluation policy (2018) should be amended to state that the Director-General should be responsible for securing the resources needed to support the work of the Evaluation Office.

The representative of SRI LANKA, welcoming the outcomes of the country office evaluations, said that the evaluation of regional programme directors remained an important issue for countries in the South-East Asian Region. Evaluation reports should be made available in a timely manner to allow for corrective action, where necessary. A comparative evaluation method would help regions learn from one another.

The representative of IRAQ, endorsing the draft evaluation policy (2018), stressed that evaluation resources should be allocated according to priority. Evolving standards in line with epidemiological and demographic variables should also be taken into account during the evaluation process. Evaluation should start with country offices and be harmonized across all three levels of the Organization. WHO should use its evaluation framework to make progress towards the implementation of the Thirteenth General Programme of Work.

The representative of NORWAY, speaking on behalf of Australia, Belgium, Canada, Denmark, Finland, France, Germany, Luxembourg, Monaco, Norway and Sweden, proposed that the draft evaluation policy (2018) should be amended to include a paragraph 40bis, which would read: “The World Health Assembly shall approve the budget for the central evaluation function as a separate budget line in the biennial programme budget.” In order to ensure direct reporting to the Executive Board, she suggested that, in subparagraph 42(k), the words “through the Director-General” should be deleted so as to read: “submitting an annual report on evaluation activities to the Executive Board.” She also proposed that, at the end of paragraph 43, the sentence: “The head of the Evaluation Office serves for a fixed term of four years with a possibility of reappointment only once for a further term of four years, and is barred from re-entry into the Organization after the expiry of his/her term” should be inserted. That proposal corresponded to the recommendations made during the independent review of WHO’s evaluation function. A term limit and prohibition of re-entry into the Organization were common practice in many United Nations organizations. As similar concerns had been raised

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1 Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.
regarding the position of the Internal Auditor, amendments to the rules of appointment for the head of the Evaluation Office should also be applied to the Internal Auditor in due course. She supported the amendment proposed by the representative of the United States of America.

The representative of the NETHERLANDS expressed support for the amendments proposed by the representative of Norway.

The representative of JAPAN, noting that the proposed amendment would place a limit of two four-year terms on the appointment of the head of the Evaluation Office, said that he would like clarification regarding the legal and human resource consequences of that proposal in terms of the Staff Regulations and Staff Rules.

The representative of the UNITED STATES OF AMERICA, endorsing the proposal by the representative of Norway, said that the amendments would strengthen the independence of the Evaluation Office and reflected best practices in the United Nations system.

The LEGAL COUNSEL said that the appointment of the head of the Evaluation Office could be limited to two four-year terms, provided that the respective employment contract stipulated as much. It was also possible to bar re-entry to the Organization at the end of the second term. However, a clause barring re-entry could not be retrospectively inserted into an existing contract and would not be applicable to staff holding a continuing appointment.

The REPRESENTATIVE OF THE DIRECTOR-GENERAL (Evaluation and Organizational Learning) thanked the members of the Board and Member States for their support and insightful comments. A number of issues had been raised, including the value of strengthening evaluations and organizational learning, the ability to evaluate impact at the country level, and the importance of the independence of the Evaluation Office. Concerted efforts had been made to ensure the transparency of evaluations, and most evaluation reports had been made readily accessible online. Implementing evaluation findings remained a challenging, but important area. Evaluation findings had been taken into account in the formulation of the Thirteenth General Programme of Work. The Organization, under the stewardship of the Deputy Director-General for Corporate Operations, was in the process of establishing a mechanism to apply recommendations identified during audits, evaluations and reviews. Evaluation findings were also disseminated through the Evaluation matters newsletter and mission briefings.

The number of human resources dedicated to evaluation functions in the other organizations of the United Nations system varied. In agencies where the evaluation function had been embedded within internal oversight services, as had previously been the case at WHO, two or three staff members worked on evaluation functions. As evaluation offices became separate entities, they grew in size, and more well-established agencies had between 15 and 20 staff members. At WHO there were currently 6 staff members, with a budget of around US$ 5 million.

The DIRECTOR-GENERAL said that, given the importance of the matter, he would have liked to have had more time to discuss the proposed amendments with senior management.

The SECRETARY read out the proposed amendments to the draft evaluation policy (2018). The new paragraph 40bis would read: “The World Health Assembly shall approve the budget for the central evaluation function as a separate budget line in the biennial programme budget.” In subparagraph 42(k), the words “through the Director-General” should be omitted, so that it would read: “submitting an annual report on evaluation activities to the Executive Board.” At the end of paragraph 43, the following sentence should be added: “The head of the Evaluation Office serves for a
fixed term of four years with a possibility of reappointment only once for a further term of four years, and is barred from re-entry into the Organization after the expiry of his/her term.” A new paragraph 43bis would read: “Additionally, the Director-General, regional directors, senior management and programme directors across the Organization also play a critical role in promoting a culture of evaluation. These roles and responsibilities are detailed in the evaluation practice handbook.”

The CHAIRMAN took it that the Board wished to suspend consideration of the draft decision to allow for further informal consultations on the proposals for amendments to the draft evaluation policy (2018).

It was so agreed.

Hosted partnerships: Item 4.4 of the agenda

- **Report on hosted partnerships** (document EB143/7)
- **Review of hosted partnerships** (document EB143/8)

The CHAIRMAN drew attention to the summary of the discussion of the agenda item by the Programme, Budget and Administration Committee of the Executive Board, contained in paragraphs 15 and 16 of document EB143/5.

The representative of the UNITED STATES OF AMERICA said that Unitaid’s coordination function had led to improved procurement with decreased costs for medicines and diagnostics. He shared the Secretariat’s concerns with regard to the limited funding available for multidrug-resistant tuberculosis proposals and for tuberculosis projects in general. He requested additional information on the “enabler grant” functions. His Government firmly believed that WHO hosted partnership arrangements should benefit the work of both parties in order for the partnership to be considered successful. Unitaid must stick to its strategic objectives, namely to help innovators address the needs of underserved populations, and to work with partners to create the right conditions for scale-up so that better health products reached all those who needed them.

The representative of GABON, speaking on behalf of the Member States of the African Region, welcomed WHO’s collaboration with Unitaid and other partners in the fight against HIV, tuberculosis and malaria. The African Region hoped that the Unitaid Strategy 2017–2021 would provide greater support to people in developing countries facing barriers of access to, and affordability of medicines. Overall progress in his Region remained insufficient and had failed to positively impact health indicators. He encouraged hosted partners to align their activities more closely with those of WHO, which, in turn, should coordinate its efforts and make optimal use of the available resources. It would be vital to strengthen and revitalize primary health care systems in order to achieve universal health coverage. In addition to serving as advocates, hosted partnerships should further contribute to the implementation of the Thirteenth General Programme of Work.

The representative of MEXICO urged WHO to continue its hosted partnerships with a view to strengthening innovative approaches to governance and administration, and to replicate those efforts at the regional level. Renewed efforts should be made to apply research and study findings to the management and planning work of the Organization and its partners. Future reports should include how work with hosted partnerships contributed to the achievement of the targets contained in the Thirteenth General Programme of Work in order to identify programmatic synergies. Unitaid’s efforts
to improve access to treatments for HIV/AIDS, malaria and tuberculosis, and encourage price reductions for medicines and quality diagnostics were greatly appreciated. His Government hoped that those efforts would continue to have a positive impact and would be reflected in the Organization’s progress reports and workplan.

The representative of IRAQ said that hosted partnerships represented one of the most important pillars of all primary health care programmes, and would contribute to the achievement of the targets of the Thirteenth General Programme of Work. The cluster approach to emergency preparedness and response provided for unified efforts within countries to prevent outbreaks.

The representative of CHILE said that combating HIV/AIDS, malaria and tuberculosis remained a priority for her country, which was a founding member of Unitaid. Unitaid’s work had had a direct impact on populations and markets in developing countries by leveraging price reductions on medicines and diagnostics, and it was vital to continue to promote such projects. Her Government looked forward to continue working with the organization to achieve global health targets.

The representative of BRAZIL said Unitaid occupied a very specific niche in the health innovation chain. It focused on the fight against HIV/AIDS, tuberculosis and malaria, and had become increasingly active in related areas such as intellectual property. He welcomed the report’s recognition of the fact that the hosting arrangement remained beneficial for both parties.

The representative of TURKEY said the report was informative but short. Other partners in the field including the Roll Back Malaria Partnership, the Global Health Workforce Alliance, UNAIDS and the WHO Framework Convention on Tobacco Control should be included in similar, future reports.

The representative of SPAIN,1 welcoming the report, said that Unitaid’s programme of work was compelling and supported WHO’s overall goals.

The ASSISTANT DIRECTOR-GENERAL (External Relations), responding to the points raised, said that Unitaid provided enabler grants to WHO for activities that it could not carry out itself and that related primarily to the Organization’s normative and prequalification activities. Those grants were combined so that each disease was covered by a single grant, resulting in a more coherent approach. The grants exceeded US$ 60 million annually in total. Unitaid had also recently launched a call for proposals on multidrug-resistant tuberculosis. In future, the Secretariat would endeavour to report on hosted partnerships’ contributions to the Thirteenth General Programme of Work. While the report currently focused on hosted partnerships, additional information could be provided on other important partnerships, where appropriate.

The CHAIRMAN took it that the Board wished to note the reports contained in documents EB143/7 and EB143/8.

The Board noted the reports.

Ms Farani Azevêdo resumed the Chair.

1 Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.
Statement by the representative of the WHO staff associations: Item 4.5 of the agenda (document EB143-INF./1)

The representative of the WHO STAFF ASSOCIATIONS, speaking on behalf of the staff associations of WHO, PAHO, UNAIDS and IARC welcomed the Director-General’s open-door policy and his engagement with elected staff representatives. The Director-General’s readiness to address issues arising from the organizational culture survey and the Organization’s commitment to following up on recommendations made at the 16th Global Staff/Management Council in October 2017 had been commendable. It was hoped that efforts would continue in that vein and that the Organization’s initiatives in response to the report of the Ombudsman would be submitted for consideration by the Executive Board in a timely manner.

She expressed appreciation for senior management’s commitment to taking staff inputs and concerns into account when devising policies to prevent all forms of harassment and abuse of authority. The draft WHO policy on prevention of harassment and sexual harassment should be further revised to: incorporate a definition of harassment and sexual harassment aligned with the new United Nations system-wide definition; provide for access to due process for consultants, other contracted personnel and interns; eliminate barriers to filing formal complaints, and ensure follow-up on the recommendations made by the Office of Internal Oversight Services and the Global Advisory Committee on future actions in harassment complaints. It should also clearly set out the types of situations eligible for informal resolution and clarify the circumstances under which management, witnesses, and other parties not directly concerned could trigger an investigation. Deadlines for investigations and for the work of the Global Advisory Committee, as well as a commitment to track those deadlines and other key performance indicators for formal complaint mechanisms, should also be included. To be effective, the new policy would require strong related mechanisms and the confidence of staff. She called for further discussion on how the Office of Internal Oversight Services would follow up on recommendations from external assessments. Constructive dialogue on the ways in which to professionalize and uphold the independence of the respective adjudication panels would also be important.

Senior management should capitalize on the concrete opportunities that existed to modernize and expand the reach of approaches to learning and development. As the Organization prepared to scale up its geographical mobility policy, it was important that staff members had the chance to prepare for their new assignments. Greater efforts should also be made to promote women’s leadership across WHO and monitor access to opportunity for all staff. The gender parity and diversity policy should be implemented at all levels of the Organization for all employment categories in a consistent, fair and transparent manner. While most of the dialogue on gender parity had focused on the recruitment and retention of younger women, consideration should also be given to older women.

The lack of local recognition of the WHO Staff Health Insurance scheme posed a serious risk. The global network of facilities that recognized the scheme urgently needed to be expanded and negotiated prices for health services offered. Staff, retirees and dependents should not have to provide up-front, out-of-pocket, cash guarantees. Health facilities in only 25 countries had signed agreements with the WHO Staff Health Insurance scheme to date.

Devaluation of local currencies affected staff in an increasing number of duty stations and had been felt most acutely by locally recruited staff. The United Nations had been slower than other development or foreign service employers to respond. The Federation of International Civil Servants’ Associations had advocated for a mechanism that would respond to the effects of high inflation and currency devaluation on salaries and pensions. Action must therefore be taken at the earliest opportunity to uphold the purchasing power of all staff, regardless of where they served.

There had been deep concern and a loss of confidence in the independence and technical competency of the International Civil Service Commission, following a series of major failings. She therefore called on the Board’s support for the urgent reform of the Commission and the restoration of its transparency and credibility.
The representative of the NETHERLANDS said that open communication between staff and senior management had helped to build a culture of transparency within the Organization. He commended the Secretariat for sharing the organizational survey results and actively soliciting the views of staff members. The findings of the survey should be integrated into the organizational culture in a sustainable and lasting manner. He welcomed the report’s focus on harassment and sexual exploitation and abuse. He encouraged staff to address behaviour that crossed acceptable boundaries in a respectful, transparent manner so as to instil a safe and effective working culture. He encouraged the staff associations and senior management to continue their constructive dialogue with a view to developing and implementing effective anti-harassment policies.

The representative of ZAMBIA welcomed the WHO staff associations’ engagement in the drafting of the return to work and gender parity and diversity policies. It remained of great concern however that staff members continued to perceive harassment, harassment claims and abuse of authority as challenges to the Organization. WHO must therefore ensure that work on the draft WHO policy on prevention of harassment and sexual harassment did not stop at the policy’s formulation. Concerted efforts should be made to guarantee that the policy set out a clear trajectory for implementation and evaluation and contained detailed guidance on how unacceptable behaviour would be addressed. She expressed concern that only 25 countries had signed agreements with the WHO Staff Health Insurance scheme. The Secretariat should engage with Member States to resolve that issue at the earliest possible opportunity. She supported the recommendation for a review of the International Civil Service Commission.

The representative of MEXICO agreed that mutually acceptable solutions must be found in order to ease the transition to mandatory geographical mobility. Staff mobility would be essential to enrich and strengthen the coordinated work at headquarters, regional offices and country offices.

The representative of FINLAND, welcoming the opportunity to engage in a constructive dialogue with the WHO staff associations, said that WHO should continue to consider staff well-being and productivity as key assets. The efforts made to strengthen relations between senior management and staff across the Organization should be commended, particularly the introduction of the Respectful Workplace initiative and the gender parity and diversity policy. With respect to the draft WHO policy on prevention of harassment and sexual harassment, she echoed the earlier comments made in that regard by the representative of Mexico under agenda item 4.2. Maintaining open channels of communication with the WHO staff associations would be essential to the success of the Organization’s transformation agenda. The reported lack of confidence in the independence and technical competency of the International Civil Service Commission was therefore concerning. Prompt action should be taken to rectify that situation.

The representative of JAPAN welcomed the opportunity to consider the report by the WHO staff associations in detail. He asked for a definition of the term “senior management” as used in document EB143/INF./1. The front-line supervisor for many staff was a mid-level manager. It would be useful to know how those mid-level managers had been involved in the dialogue between staff and management and how their specific needs had been addressed. He also requested clarification of the reference to WHO staff in Tokyo contained in paragraph 18 of document EB143/INF./1. To his knowledge, there were no WHO staff members based in that location.

The representative of ESWATINI commended the work of the Director-General and senior management in openly engaging with staff. The negative perception of, and lack of confidence in the International Civil Service Commission remained of grave concern. He wished to know what role the Executive Board would play in facilitating the requested review of the Commission and what the long-
term implications would be of implementing the two measures requested in paragraph 17 of document EB143/INF./1.

The representative of GERMANY said that, as a knowledge-based organization, WHO’s workforce remained its greatest asset. Noting that staff-management relations had been overwhelming positive in recent times, he expressed strong support for the continuation of the Respectful Workplace initiative. While acknowledging staff concerns regarding geographical mobility, he remained confident that constructive engagement on the part of the WHO staff associations, Member States and senior management would lead to a win-win situation.

The representative of IRAQ reaffirmed his support for the statement given by the representative of Mexico on the prevention of harassment and sexual harassment under agenda item 4.2, and called for a stronger approach to combating gender-based violence. Greater attention should also be paid to building a healthy working environment and promoting teamwork among all staff members: an equitable distribution of tasks and roles would help in that regard. The Secretariat should focus on staff capacity-building and conduct regular analyses of the Organization’s strengths and weaknesses and the opportunities and threats facing it in terms of its workforce.

The representative of AUSTRALIA stressed that the International Civil Service Commission’s decision on the post adjustment for Geneva-based staff members must be upheld. The post adjustment system remained a cornerstone of the United Nations system and had been designed to give all staff members equal purchasing power regardless of their location. Her Government welcomed WHO’s prompt implementation of the Commission’s decision pursuant to United Nations General Assembly resolution 72/255 on the United Nations common system, and would continue to work with the Secretariat to ensure that the Organization adopted holistic management policies and practices designed to drive excellence. As a knowledge-based organization, WHO’s workforce remained its most important resource.

The representative of the UNITED STATES OF AMERICA said that staff members would play a key role in the Organization’s future success and expressed his gratitude for their efforts to safeguard global health and well-being. Concerning the draft WHO policy on prevention of harassment and sexual harassment, he echoed the comments made by the representative of Mexico under agenda item 4.2 in that regard, and urged senior management and the WHO staff associations to closely monitor the outcomes of cases of sexual exploitation, abuse and harassment. His Government would not support action that had the potential to undermine the work of the International Civil Service Commission or the United Nations common system. Reform of the Commission should only be discussed during the sessions of the United Nations General Assembly. The WHO staff associations should engage the Commission in constructive dialogue. He strongly supported the WHO geographical mobility policy, which should be implemented as efficiently and effectively as possible.

The ASSISTANT DIRECTOR-GENERAL (General Management) said that the Organization took a zero tolerance approach to cases of harassment, sexual harassment and abuse of power. Ongoing consultations between staff representatives and WHO senior management to revise the draft WHO policy on prevention of harassment and sexual harassment had been constructive and an updated version of the document would shortly be made available. Senior management would continue to address the concerns raised by the WHO staff associations. Given the importance of the subject, several measures had been introduced to combat harassment, including the establishment of mandatory training modules on prevention of harassment for all staff members, the launch of a whistle-blower policy and reporting hotline, and the development of a staff toolkit. A pamphlet on the processes for reporting harassment would be distributed in June 2018. WHO had also actively contributed to the setting up of a United Nations high-level task force on sexual harassment.
A greater focus on staff development and learning was needed at all levels. The Secretariat intended to strengthen staff performance management and career counselling in order to ensure that the WHO workforce would be ready to deliver the Thirteenth General Programme of Work. Leadership and management development training, mentoring, career development workshops and coaching sessions had been made available to staff members, including managers, and their implementation would be scaled up. A new policy on short-term developmental assignments had also been adopted.

Some staff members had been unable to access treatment through the WHO Staff Health Insurance scheme owing to the failure of some health facilities to recognize staff members’ insurance cards and shortcomings in local health services in certain locations. WHO had therefore taken steps to increase the number of hospitals that recognized the scheme as a means of addressing that situation.

With respect to staff concerns about exchange rate fluctuations, inflation and currency devaluations, he said that local salaries were based on local labour markets, and the International Civil Service Commission had developed ad hoc measures to safeguard staff members’ purchasing power in exceptional circumstances such as conflict situations. The methodology used to review compensation for locally recruited staff members would be further examined to improve conditions for staff members in different economic settings and ensure their remuneration was competitive. The United Nations Joint Pension Fund was in the process of reviewing its provisions in exceptional circumstances so as to help staff members make informed decisions on their retirement benefits in those cases. WHO also continued to work with other United Nations organizations and the Commission to address staff concerns. The Director-General and senior management team greatly valued their relationship with the WHO staff associations and would look to further strengthen the channels of communication between staff and management for the benefit of the Organization.

The representative of the WHO STAFF ASSOCIATIONS, speaking on behalf of the staff associations of WHO, PAHO, UNAIDS and IARC, said that the Director-General had held monthly consultations with staff representatives, which had focused on issues affecting staff members working at WHO headquarters. However, certain matters, such as mobility, concerned staff members posted elsewhere and the views of those staff members had not been presented in the latest briefing report submitted to the Director-General. That situation would be rectified in future. The WHO staff associations had used the term “senior management” in the report to refer to the Office of the Director-General and the Human Resources Management Department, and on occasion staff members from the Office of the Legal Counsel and other departments. It remained of the utmost importance for staff representatives to be able to engage in regular dialogue with the Director-General.

The DIRECTOR (Human Resources Management) said that the International Civil Service Commission reported directly to the United Nations General Assembly. Member States should therefore discuss the Commission’s work in that forum.

The DIRECTOR-GENERAL acknowledged that WHO staff members had had different experiences of the WHO geographical mobility policy. Although staff members often expressed a preference to be posted to Geneva, as international civil servants they should be ready and willing to serve wherever their skills would be of best use. Some staff members had asked for mobility to be linked to career development, while others had said that promotion should be open and inclusive and that staff members should be involved in the development of guidelines to avoid favouritism and nepotism, a proposal that had received majority support from the Board. WHO could learn from organizations like UNICEF, which had already implemented such an approach. He underscored the importance of ongoing debate, which should remain open, collaborative and honest, even in the event of disagreement. The Organization’s workforce represented its most vital asset and staffing issues remained a central consideration; it was therefore crucial for senior managers to allocate time to listen to staff members, who would be motivated by transparent dialogue. His monthly meetings with staff
representatives had helped to foster a supportive working environment which encouraged staff members to work to the best of their ability. He expressed his appreciation for the understanding and candour of the WHO staff associations and his gratitude for staff members’ support in the swift drafting and early adoption of the Thirteenth General Programme of Work. The continued commitment of staff members and strong support of Member States would be essential to the implementation of the Thirteenth General Programme of Work and the attainment of the Sustainable Development Goals.

The Board noted the report.

Committees of the Executive Board: filling of vacancies: Item 4.6 (documents EB143/9 and EB143/9 Add.1)

The CHAIRMAN said that there were five vacancies to be filled on the Programme, Budget and Administration Committee, which was composed of 14 members: two members from each region, selected from among the members of the Board; plus the Chairman and a Vice-Chairman of the Board, as ex officio members. She asked whether the Board approved the proposals contained in paragraph 2 of document EB143/9 Add.1.

It was so decided.¹

The CHAIRMAN said that there were two vacancies to be filled on the Foundation Committees, and asked whether the Board approved the proposals contained in paragraph 2 of document EB143/9 Add.1.

It was so decided.²

The CHAIRMAN proposed that the Board should be represented at the Seventy-second World Health Assembly by the Chairman and the first three Vice-Chairmen. If any of them were not able to attend the Health Assembly, the other Vice-Chairman and the Rapporteur could be asked to represent the Board. In the absence of any objections, she took it that the Board wished to approve that proposal.

It was so decided.³

Future sessions of the Executive Board and the Health Assembly: Item 4.7 (document EB143/10)

The representative of VIET NAM supported the adoption of the second draft decision regarding the dates of the Seventy-second World Health Assembly. She proposed however that the 144th session of the Executive Board should be convened on Monday, 21 January 2019 in order to avoid the meeting falling at the same time as public holidays in her country.

The representative of JAPAN expressed support for that proposal. The programme budget for the biennium 2020–2021 and the eleventh revision of the International Classification of Diseases would be discussed at the 144th session of the Executive Board. Convening the Board earlier in the

¹ Decision EB143(1).
² Decisions EB143(2) and EB143(3).
³ Decision EB143(4).
year would allow the Secretariat more time to finalize the documents relevant to those items before the Seventy-second World Health Assembly.

The CHAIRMAN took it that the Board wished to suspend the discussion on the first draft decision pending further consultations.

It was so agreed.

The CHAIRMAN also took it that the Board wished to adopt the second draft decision contained in document EB143/10.

The decision was adopted.¹

The meeting rose at 18:00.

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¹ Decision EB143(5).