Report of the Executive Board on its 127th and 128th sessions

1. The Executive Board held its 127th session on 22 May 2010 and its 128th session from 17 to 24 January 2011. This report summarizes the main outcomes.

127TH SESSION (22 MAY 2010)

2. Members of the Board considered draft resolutions on cholera: mechanism for control and prevention and on child injury prevention, but in both cases agreed to postpone further discussion to the 128th session (see respectively paragraphs 11 and 20 below).

3. The Board noted reports on Crimean-Congo haemorrhagic fever, hantavirus, and Alkhurma haemorrhagic fever, as emerging infectious diseases and on strategies for the safe management of drinking-water for human consumption.

4. The Board noted the report on meetings of two expert committees.

128TH SESSION (17–24 JANUARY 2011)

5. In her report to the Board, the Director-General identified the current global health challenges and illustrated areas where WHO was strikingly effective. She warned of the difficulties the Organization faced because of its overextension, resource shortages and the current economic crisis. In discussing the future of financing for WHO (see paragraph 21), Board members would need to give careful consideration to WHO’s purpose and unique contribution. Reform was needed. The Board noted her report.

Technical and health matters

6. In discussing pandemic influenza preparedness: sharing of influenza viruses and access to vaccines and other benefits, the Board expressed clear support for the progress made so far by the Open-Ended Working Group of Member States on Pandemic Influenza Preparedness and for the meeting of that group scheduled to be held in April 2011, in order to complete the negotiations on the Pandemic Influenza Preparedness Framework and Standard Material Transfer Agreement. Thorough preparations would be made, with extensive intersessional consultations, to ensure the success of that meeting.

7. Following an update on the functioning of the International Health Regulations (2005) in relation to pandemic (H1N1) 2009, which underlined the importance of the Regulations, members
expressed concern about the rate of enhancing core capacities by some State Parties. The Board noted the report on implementing the Regulations and that of the Review Committee on the Functioning of the International Health Regulations (2005) in relation to Pandemic (H1N1) 2009.

8. In considering the establishment of a **consultative expert working group on research and development: financing and coordination** in the context of public health, innovation and intellectual property, members of the Board expressed concerns about conflicts of interest and considered guidelines for their avoidance. Taking into consideration the issues raised during the discussion, the Board approved the roster of experts proposed for membership of the working group.

9. Five Member States co-sponsored a draft resolution on WHO’s role in the follow-up to the high-level plenary meeting of the sixty-fifth session of the United Nations General Assembly on the review of the **Millennium Development Goals**. Board members expressed concerns about slow progress towards the health-related goals, but welcomed moves to rectify that state of affairs, in particular the establishment of the Commission for Information and Accountability for Women’s and Children’s Health under the auspices of WHO. The Board adopted resolution EB128.R1.

10. In resolution EB128.R6 the Board recommended to the Health Assembly the adoption of a resolution that called for greater efforts and support for the **eradication of dracunculiasis**.

11. The Board discussed the mechanism for control and prevention of **cholera**, further consideration of which had been deferred from the 127th session. The originally submitted draft resolution had been revised in the light of subsequent consultations and comment, and was further amended by Board members before being adopted as resolution EB128.R7. The resolution recommended to the Health Assembly for adoption included a request to the Director-General to revitalize the Global Task Force on Cholera Control and to strengthen WHO’s work in the area.

12. The Board considered two reports and five draft resolutions submitted by several Member States of various aspects of **health system strengthening**: sustainable financing structures and universal coverage; the health workforce; national health emergency and disaster management capacities and resilience of health systems; nursing and midwifery; and national policy dialogue to build more robust health policies, strategies and plans. The Board adopted these as resolutions EB128.R8–R12, respectively.

13. On a related theme, the Board noted the report on the **global immunization vision and strategy**. Members observed the importance of strengthening health systems in order to encourage routine immunization and the links between poliomyelitis eradication efforts and broader immunization goals such as the accelerated elimination of measles.

14. The Board extensively discussed the prevention and control of **malaria** with regard to sustaining the gains made so far and reducing transmission. It adopted resolution EB128.R13 in which it recommended to the Health Assembly for adoption a resolution that, inter alia, urged adequate and predictable funding for malaria control and requested the Director-General, among other support actions, to promote technology transfer for the manufacture of artemisinin-combination therapies.

15. Having reviewed the **draft WHO HIV/AIDS strategy 2011–2015**, the Board agreed that the draft strategy should be revised in the light of the members’ comments and ways to improve it would be the subject of continued dialogue with Board members.
16. Board members expressed regret that the meeting of the working group on substandard/spurious/false-labelled/falsified/counterfeit medical products had been postponed and urged the expeditious convening of its first meeting. The Board was informed that the meeting would be held from 28 February to 2 March 2011. The Board noted the report.

17. The Board further noted reports on smallpox eradication: destruction of variola virus stocks and leprosy. It also noted the report on the United Nations Decade for Action for Road Safety and expressed support for the plan of action.

18. Despite extensive discussion, including informal consultations, of a draft resolution cosponsored by four Member States on the prevention and control of noncommunicable diseases, the Board was unable to reach consensus on WHO’s role in the preparation, implementation and follow-up to the high-level meeting of the United Nations General Assembly on the prevention and control of noncommunicable diseases (September 2011). One reason agreement could not be reached was the late submission of the draft resolution, a practice that the Chairman urged members to avoid in the future. The Board agreed that it would report to the Health Assembly on the status of its discussions and that a revised version of the draft resolution, containing the amendments received from Member States, would be submitted to the Health Assembly. The Board noted the report of the Secretariat.

19. The Board expressed support for the implementation plan submitted for infant and young child nutrition. In order to reflect comments made in the discussion, the title and scope of the plan would be expanded to include reference to maternal nutrition. The Secretariat invited further input and guidance through a dedicated web site. The Board noted the report.

20. The Board discussed child injury prevention, further consideration of which had been deferred from the 127th session. Members considered and further amended the revised draft resolution, before adopting resolution EB128.R15 which recommended a resolution to the Health Assembly for adoption. Actions requested of the Director-General in that text included expanding the evidence base for interventions and better data collection and analysis.

The future of financing for WHO

21. The Director-General summarized the points made in consultations and debates over the previous year, noting that the focus had broadened from purely financing to encompass WHO’s leadership role in global health governance. In an extensive discussion, Board members reaffirmed their belief in WHO’s leadership and welcomed the reform process that the Director-General had proposed, including a plan for strengthening WHO’s central role in global health governance, the definition of the Organization’s unique role and functions, and managerial reforms. The Board noted the report.

Programme and budget matters

22. The Board noted the report on the performance assessment of the Programme budget 2008–2009, including the comments thereon made by the Programme, Budget and Administration Committee.

23. The Board also noted the report on the update on the implementation of the Programme budget 2010–2011, although members expressed concern about the financial position and the imbalances between strategic objectives and among WHO major offices.
24. The Programme, Budget and Administration Committee had considered the **Medium-term strategic plan 2008–2013 and Proposed programme budget 2012–2013** and had welcomed the Secretariat’s willingness to take into account the financial situation when revising the Proposed programme budget. Debate on budgetary matters must be linked to the discussion on the future of financing. The Director-General assured the Board that she would submit to the Health Assembly a realistic budget proposal, in which policy and funding were closely linked and which responded to the concerns of members. The Board noted the report.

**Financial matters**

25. Following the advice of the Programme, Budget and Administration Committee, the Board adopted resolution EB128.R2, which recommended adoption of the **scale of assessments for 2012–2013** by the Health Assembly.


**Management matters**

27. Following the submission by several Member States of a draft resolution and a draft decision relating to the **election of the Director-General of the World Health Organization**, the Board established a drafting group. After many hours of discussion held in a spirit of cooperation, the text of a draft resolution was agreed. The Board, after further consideration of that text, adopted resolution EB128.R14, in which it decided to establish a time-bound and results-oriented working group on the process and methods of the election whose interim progress report would be submitted to the current Health Assembly.

28. Having considered the report of its Standing Committee on Nongovernmental Organizations, the Board adopted resolution EB128.R16 on **relations with nongovernmental organizations**, admitting three such bodies into official relations: Lifting The Burden; Stichting Global Initiative on Psychiatry – an International Foundation for the Promotion of Humane, Ethical, and Effective Mental Health Care (known as the Global Initiative on Psychiatry); and The Cochrane Collaboration. Official relations with eight nongovernmental organizations were discontinued. After review of a third of all nongovernmental organizations in official relations, the Board agreed a series of actions set out in decision EB128(1).

29. Following the reports of its committees or selection panels on **foundations and awards**, the Board decided to award five prizes. In decision EB128(7), the Board approved **amendments to the Statutes of the Dr LEE Jong-wook Memorial Prize for Public Health**.

30. In decision EB128(8), the Board approved the amended **provisional agenda for the Sixty-fourth World Health Assembly**, and in decision EB128(9) appointed its **representatives**. By decision EB128(10), the Board agreed that the **129th session of the Executive Board** would be held on 25 May 2011 in Geneva.
Staffing matters

31. The Board noted the **annual report on human resources**, including the information on the staffing profile, and the **report of the International Civil Service Commission**.

32. In resolution EB128.R4, the Board confirmed **amendments to the Staff Rules** concerning remuneration of staff in the professional and higher categories, several conditions of service and personnel practices. It also requested the Director-General to submit to the Board at its 129th session revisions to the Staff Rule concerning continuing appointments. In resolution EB128.R5 the Board recommended that the Health Assembly note its recommendations regarding the remuneration of both **staff in ungraded posts and the Director-General** and establish those salaries with effect from 1 January 2011.

33. The Board noted the **statement of the representative of the WHO staff associations**.

Matters for information

34. The Board took note of the reports on meetings of two **expert committees** and of **advisory bodies** (specifically the Advisory Committee on Health Research). It also noted the reports requested by earlier resolutions, covering progress made in implementing resolutions in the following areas: **the Capital Master Plan; safety and security of staff and premises; eradication of poliomyelitis; prevention and control of influenza pandemics and annual epidemics; onchocerciasis control through ivermectin distribution; climate change and health; improvement of health through sound management of obsolete pesticides and other obsolete chemicals; improvement of health through safe and environmentally sound waste management; working towards universal coverage of maternal, newborn and child health interventions; female genital mutilation; strategy for integrating gender analysis and actions into the work of WHO; progress in the rational use of medicines; and implementation by WHO of the recommendations of the Global Task Team on improving AIDS coordination among multilateral institutions and international donors.**

Resolutions

35. No resolutions were adopted by the Board at its 127th session. In total the Board at its 128th session adopted **16 resolutions**. The programme budget implications for the Organization of the implementation of the resolutions as assessed in the documents “Report on financial and administrative implications for the Secretariat of resolutions proposed for adoption by the Executive Board or Health Assembly” was a **cost of US$ 43 million for the biennium 2010–2011**. Of that anticipated cost, approximately US$ 30 million was considered to be already included within the activities planned in the approved Programme budget. In the main, the reports on the financial implications of the programme activities resulting from the resolutions adopted by the Board at its 128th session stated that voluntary contributions would be needed for implementation.