

PROVISIONAL SUMMARY RECORD OF THE THIRD MEETING

**Palais des Nations, Geneva
Tuesday, 22 May 2018, scheduled at 14:30**

Chairman: Dr S. BROSTRØM (Denmark)

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COMMITTEE A

THIRD MEETING

Tuesday, 22 May 2018, at 14:35

Chairman: Dr S. BROSTRØM (Denmark)

STRATEGIC PRIORITY MATTERS: Item 11 of the agenda (continued)

Draft thirteenth general programme of work, 2019–2023: Item 11.1 of the agenda (documents A71/4, A71/46, EPBAC28/5 and EB142/2018/REC/1, resolution EB142.R2)

The CHAIRMAN drew attention to document A71/4 and invited the Committee to consider the draft resolution contained in resolution EB142.R2.

The representative of CANADA, speaking in her capacity as Vice-Chairman of the Executive Board, said that the Executive Board had considered the draft thirteenth general programme of work, 2019–2023 at its fourth special session in November 2017 and at its 142nd session, at which it had adopted resolution EB142.R2. Extensive consultations had been held with Member States to reach a consensus; the revised draft general programme of work reflected the delicate balance achieved. The wording of the draft general programme of work was closely aligned with the language of the Sustainable Development Goals. The Board was strongly supportive of the Director-General's initiative to develop the draft general programme of work one year ahead of schedule. On behalf of the Executive Board, she urged the Health Assembly to adopt the draft resolution.

The representative of LEBANON commended the reshaping of the planning process to support Member States in setting priorities and strengthening country office capacities. Regarding the five platforms and strategic priorities of the draft thirteenth general programme of work, it was important to consider country contexts when developing the associated targets and indicators. In addition, it was unclear how the multisectoral approach would feed into the creation of such targets and indicators, and how easily they could be measured without placing a burden on implementation of the 2030 Agenda for Sustainable Development at the country level. She welcomed the use of an accountability framework and the joint responsibility of the Secretariat, Member States and partners for the outcomes and associated impacts of the draft general programme of work. It was crucial for the outcomes of the proposed bottom-up approach to be clear and comprehensive in order to achieve the intended impact. Further, the Secretariat should brief Member States on the progress made so far in the intended transformation, particularly the transfer of resources to the country level. There was a risk that the optimistic, fast-tracked and multitask-oriented actions set out in the draft general programme of work would not be fully implemented, especially in countries in conflict or post-conflict situations. She supported the draft resolution recommended by the Executive Board.

The representative of CANADA said that the draft thirteenth general programme of work would require strong visionary leadership at the helm of the Organization; she therefore supported WHO's increased political leadership, including with regard to human rights, gender equality and social determinants of health. WHO should firmly uphold and actively promote health equity in terms of both access and outcomes for all individuals across the life course, without discrimination on any grounds. She supported the draft resolution.

The representative of BULGARIA, speaking on behalf of the European Union and its Member States, said that the candidate countries Turkey, Montenegro, Serbia and Albania, the country of the stabilisation and association process and potential candidate Bosnia and Herzegovina, as well as Ukraine, the Republic of Moldova and Georgia, aligned themselves with her statement. She welcomed the draft thirteenth general programme of work, noting that the “triple billion” goals could only be achieved through collaborative efforts between the Secretariat, Member States, development partners and other organizations of the United Nations system. Further information on how WHO would measure its contribution to the attainment of those goals, particularly in countries transitioning from external to domestic funding for health, would be welcome. She requested a more elaborate road map on promoting healthier populations, with a focus on multisectoral work and on addressing the broader determinants of health.

The Director-General’s efforts to finalize the draft general programme of work one year ahead of schedule were commendable. However, it was regrettable that the vital supporting documents requested by the Executive Board had been issued late. The Secretariat must prioritize the further development of those documents following the Seventy-first World Health Assembly. She reaffirmed that approval of the draft general programme of work did not constitute a commitment to fund it. The Secretariat should provide an update on the establishment of an independent accountability and oversight mechanism to monitor the delivery of the draft general programme of work. In addition, the solutions found to ensure a strong regulatory role for WHO should build on the comparative advantages of in-country actors and take into account the efficiency of existing partner coordination mechanisms. Such reform should be accompanied by an evaluation and needs-based assessment of each country office, to be made available as soon as possible in order for an increase in the budget for country offices to be agreed. Collaboration between WHO headquarters and country offices must be strengthened. Lastly, WHO should provide a plan for managerial reform, with key performance indicators to monitor the impact on the quality and efficiency of its work across the three levels of the Organization.

The representative of ALGERIA, speaking on behalf of the Member States of the African Region, welcomed the Director-General’s approach to strengthening investment in health, including through innovative financing mechanisms and more flexible voluntary contributions. He called for the implementation of a WHO mechanism that was efficient and accessible to encourage the local production of medicines and enable Member States to draw greater benefits from the flexibilities under the Agreement on Trade-Related Aspects of Intellectual Property Rights, while promoting the transfer of technology. It was important to focus on results at the country level. To that end, an emphasis should be placed on strengthening the resilience of national health systems; coordinating efforts as part of an integrated vision of health and in all policies; and tailoring health research, development and innovation to better respond to country needs. It was also important to: maintain adequate financing so as not to reverse the gains made in the fight against poliomyelitis; appropriately reallocate resources across the three levels of the Organization; and strengthen country offices. The objective of the three “triple billion” goals should be consolidated to ensure better follow-up and evaluation of the anticipated outcomes. WHO should continue to improve geographical representation, gender parity, the geographical mobility of staff and the internship programme. He supported the draft resolution.

The representative of GERMANY, while welcoming the focus on climate change in the draft thirteenth general programme of work, said that it was also necessary to address the enormous disease burden relating to environmental pollution, namely with regard to air, soil, water and chemicals, and the lack of proper sanitation and waste management. The draft general programme of work should contain a more explicit reference to and reflection of WHO’s role as a humanitarian actor, its central position as a humanitarian cluster lead, and the humanitarian principles to which it should adhere in conflict settings. Further reference to financial capacity, the reform of the United Nations development

system and the Quadrennial Comprehensive Policy Review should also be made. Implementation of the draft general programme of work should begin immediately, and those important unresolved issues should be addressed during the implementation of the relevant programme and budget processes. Focusing on WHO's advantage compared with other organizations was a key priority, particularly in terms of its norm- and standard-setting function and its role as the guiding and coordinating authority on health. Further work was needed to achieve the shared goals of Member States, and it was essential for all relevant stakeholders to rally behind Sustainable Development Goal 3 (Ensure healthy lives and promote well-being for all at all ages). To that end, the Heads of State of Germany, Norway and Ghana had requested the Director-General to develop, in partnership with all relevant actors and bodies, a single joint global action plan for healthy lives and well-being for all. He expressed strong support for the adoption of the draft general programme of work.

The representative of the PLURINATIONAL STATE OF BOLIVIA welcomed the alignment of the draft thirteenth general programme of work with the Sustainable Development Goals and its promotion of human rights within the context of global health. It was important for the draft general programme of work to reiterate WHO's role as a guiding, coordinating and standard-setting global authority. The correct implementation of the Framework of Engagement with Non-State Actors was vital and should include a clear and robust policy against conflicts of interest. The wording "fair pricing" contained in paragraph 43 of the draft general programme of work should be changed to "accessible pricing" to reflect the real cost of medicines and the need to ensure access to medicines. Further, the matters of resource allocation and prioritization of tasks needed to be further developed; WHO should be able to use voluntary contributions with greater flexibility so as to strengthen the regular budget. It was unacceptable for WHO's agenda to be driven by donors. In that connection, the public character of the Organization should be emphasized, as should the need for a regular, unearmarked and robust budget that reflected the priorities of all Member States. He supported the draft resolution.

The representative of MEXICO expressed support for the draft thirteenth general programme of work, noting the importance of steering actions towards specific outcomes through the adequate use of increasingly limited resources; of maintaining the institutional policies and standards that had arisen from the WHO reform process; and of strengthening the Organization's role as a global health leader. It was also necessary to bolster institutional processes to align efforts and best practices across the three levels of the Organization. Further, the indicators that were aligned with the 2030 Agenda for Sustainable Development should be revised, and a consultation process to facilitate their implementation in accordance with country contexts should be established. The use of a new approach to resource mobilization needed to be reinforced, particularly with regard to unearmarked voluntary contributions. WHO should develop regional and global priorities to allow for collaboration and the creation of synergies.

The representative of JAPAN, acknowledging that the general programme of work was separate from the programme budget process, wished to know how the programme budget would be developed after the Seventy-first World Health Assembly. Collaboration with other organizations was key to balancing the ambitious goals of the general programme of work and budgetary discipline. As the provision of direct services had significant financial implications, WHO should focus on the functions for which it had a relative advantage compared with other organizations and maximize its impact and efficiency. The Impact Framework's indicators should be consistent with existing WHO strategies and the Sustainable Development Goals.

The representative of the RUSSIAN FEDERATION said that adoption of the draft thirteenth general programme of work at the current Health Assembly would allow Member States and the Secretariat sufficient time to agree on a clear definition of global, regional and national priorities, and

on an approach for the targeted mobilization of resources and the establishment of a monitoring system. By the start of the implementation of the draft general programme of work, the Secretariat would be expected to have made significant progress regarding its transformation agenda, the application of the Framework of Engagement with Non-State Actors, and the new approach to resource mobilization, all of which were essential to achieving its ambitious goals. Her Government would continue to support WHO in its work and in implementing the draft general programme of work, including in tackling noncommunicable diseases, strengthening health systems and improving maternal and child health. She expressed support for the adoption of the draft general programme of work.

The representative of DENMARK expressed strong support for the alignment of the draft thirteenth general programme of work with the Sustainable Development Goals, as well as the cross-cutting focus on human rights, gender responsiveness, and sexual and reproductive health and rights. It was also pleasing to see the inclusion of healthy ageing and care for the elderly. With regard to the implementation of relevant policies to achieve the “triple billion” goals, the associated results should be effectively monitored, and resources should be used efficiently within a realistic financial framework. Recognizing the need for flexible funding, she urged donors to provide unearmarked contributions. The Secretariat should engage in cross-sectoral partnerships with other United Nations organizations and relevant partners to ensure successful implementation of the draft general programme of work.

The representative of the DOMINICAN REPUBLIC welcomed the emphasis placed on climate change in the draft thirteenth general programme of work and the commitment to establishing coordination mechanisms and providing regional support to ensure resilient health systems in small island developing States. To achieve the global technical leadership to which WHO aspired, it was vital for international cooperation to focus on the strengthening of public health systems, particularly those most vulnerable to the influence of the private sector, including the pharmaceutical industry. In that connection, WHO should respond to the criticism that institutional changes would continue to be difficult if the dependency on private donors was not eliminated or reduced. He expressed concern that approval of the draft general programme of work at the current Health Assembly would shorten the time needed to make significant changes to the associated interventions before its implementation in 2019. It was necessary to establish a results framework that allocated resources to priority issues for the achievement of global health objectives.

The representative of the FEDERATED STATES OF MICRONESIA welcomed the focus in the draft thirteenth general programme of work on strengthening country offices and its objectives regarding the internship programme. He expressed support for the business case made in the budget to extend services to vulnerable populations in the context of universal health coverage and welcomed the reference to health information systems. In that respect, adequate financing for the use of mHealth, telepathology, telemedicine and open learning, among others, must be provided for in the draft general programme of work. He supported the draft resolution.

The representative of FINLAND said that the key to achieving the Sustainable Development Goals lay in understanding their interconnected nature; the same principle applied to the “triple billion” goals in the draft thirteenth general programme of work. To achieve the goals of the draft general programme of work, WHO should adopt a cross-cutting approach, ensuring increased collaboration between programmes and among Member States. The Health in All Policies approach required the engagement of the whole of society, with the participation of a wide range of sectors and partners. She encouraged the adoption of a systematic approach to disease prevention and health promotion in the prioritization and financing of global health and the Organization’s work. Given the importance of essential public health functions, the technical support and policy advice provided by

the Secretariat to Member States was extremely valuable. Investment in prevention also made economic sense. WHO's norm- and standard-setting role gave it a unique part to play in the global health landscape, particularly through its defence of the right to health.

The representative of OMAN, speaking on behalf of the Member States of the Eastern Mediterranean Region, said that implementation of the draft thirteenth general programme of work required the full cooperation of Member States given its focus on targets to be achieved at the country level. The Member States of the Region were fully committed to working with the Secretariat to achieve those goals. The strategic shift towards a focus on public health impacts at the country level was predicated on enhancing country capacities. Further information on progress made in moving resources to the country level would therefore be useful. The draft general programme of work was ambitious and would require additional investment and resources, including to ensure the availability of reliable data and fund programmes to eradicate polio and integrate essential functions into national health structures. The Member States of the Region were already working with the Secretariat on ways of implementing the draft general programme of work at the regional level. It was time to move forward and proceed with implementation of the draft general programme of work.

The representative of THAILAND said that a stronger commitment on the part of Member States and a less bureaucratic and more highly performing Secretariat would be required in order to increase the level of ambition of the draft thirteenth general programme of work. It was essential to sustain the highest level of political commitment to universal health coverage; identify and support universal health coverage champions at all levels; build resilient primary health care systems with a competent, committed and highly motivated health workforce; and implement effective accountability mechanisms. He fully supported the draft general programme of work and the draft resolution.

The representative of INDIA expressed support for the proposals in the draft thirteenth general programme of work related to flexible financing and increased assessed contributions. Unearmarked voluntary contributions would help to address the current funding imbalance. However, greater clarity was needed regarding the extent and type of support that WHO would provide to countries to develop and strengthen their health emergency preparedness and response capabilities. With regard to the "triple billion" goals, he recommended setting country-specific targets, with a focus on health system strengthening to ensure the achievement of universal health coverage within a predetermined time frame. He welcomed the emphasis on WHO's normative and standard-setting role as the leading global health public health body.

Lack of access to medicines and vaccines in developing and least developed countries constituted a major gap in the global health architecture. Given that the promotion of affordable and cost-effective health interventions was a core element of achieving universal health coverage within the framework of Sustainable Development Goal 3, it was important to avoid focusing on profit at the cost of access and affordability. There was a need to follow up on the Framework of Engagement with Non-State Actors, particularly in view of the need to develop a policy on conflicts of interest, covering both institutional and individual interests. His Government fully supported implementation of the draft general programme of work.

The representative of SWITZERLAND supported the draft thirteenth general programme of work and the related priorities, including the "triple billion" goals. She also welcomed the focus on WHO's leadership in the field of global health. In that context, the Organization must strengthen synergies with the United Nations system, which in turn would contribute to achieving the Sustainable Development Goals. From 2026 onwards, WHO should align its general programme of work with the planning cycle of the wider United Nations family. In addition, registering each country cooperation strategy in the United Nations Resident Coordinator system would help to consolidate WHO's support

for health policies, strategies and plans at the country level, thereby strengthening the impact of its actions.

The representative of IRAQ, expressing support for the draft thirteenth general programme of work, said that it was imperative to: implement a results-based management system; take pragmatic steps to implement the programme of work at the country and regional levels; ensure intra- and interregional collaboration and the exchange of expertise; carry out an analysis of the strengths, weaknesses, opportunities and threats of the draft general programme of work prior to its implementation, focusing on priorities and community needs at the country level; strengthen primary health care concepts; and strengthen WHO country offices, ensuring a bottom-up approach at the country level.

The representative of SWEDEN welcomed WHO's commitment to disaggregating data by sex and bringing a gender lens to needs analysis and programme design and looked forward to updates on those efforts. The incorporation of sexual and reproductive health and rights into the strategic priorities of the draft thirteenth general programme of work was a welcome step. In that connection, universal health coverage provided a unique opportunity to increase access to sexual and reproductive health services. She welcomed the strengthened references to antimicrobial resistance and the reaffirmation of the importance of taking action in line with existing frameworks and collaboration across sectors and with relevant United Nations agencies and partners, as per the One Health approach. Her Government supported the organizational and strategic shifts set out in the draft general programme of work, including the increased focus on WHO's impact at the country level. WHO must decentralize its support to countries and invest in management and performance assessment in order to be fit for purpose. Although not perfect, the draft general programme of work was an ambitious and visionary plan. Her Government stood ready to support both the draft general programme of work and the draft resolution.

The representative of SRI LANKA supported the draft resolution and welcomed the draft thirteenth general programme of work, in particular the Director-General's support to Member States through the governance structure. National efforts to eradicate poliomyelitis and malaria had been highly successful and his Government stood ready to share its experiences with other countries with resource-limited settings. With regard to disaster management, he highlighted the need for a collaborative early warning system and rehabilitation. He urged governments to implement legal frameworks and strong control mechanisms for pesticides and other chemicals, and to engage in collaborative scientific research. Health systems should be focused on country- and region-specific issues, and technical support from the Secretariat should be provided in that regard. His Government's plans for universal health coverage focused on primary health care strengthening, in line with the strategic priorities of the draft general programme of work. He welcomed the results-oriented approach of the draft general programme of work and the proposed reorganization of WHO's internship programme.

The representative of the REPUBLIC OF KOREA generally supported WHO's vision, mission and activities, as set forth in the draft thirteenth general programme of work. Her Government appreciated the efforts made by the Secretariat to incorporate the outcomes of the discussions on the previous version of the draft general programme of work into the revised document presented to the Seventy-first World Health Assembly and supported its adoption.

The representative of BELGIUM welcomed the ambitious draft thirteenth general programme of work, noting that it would require the joint efforts of the Secretariat and Member States. He hoped that the Director-General and his team would adopt a horizontal approach to implementation of the draft general programme of work and ensure that WHO spoke with a single voice. It was regrettable

that the supporting documents requested by the Executive Board had not been issued, thereby preventing Member States from having a clear overview of the feasibility of the draft general programme of work. Flexible voluntary contributions, which his Government would continue to provide, were critical to successful implementation of the draft general programme of work. They must not be used to cover the administrative costs of specific programmes funded through earmarked voluntary contributions; any use of such contributions to cover programme support costs must be transparently justified. His Government would support WHO's efforts to achieve the "triple billion" goals and looked forward to their translation into future programme budgets.

The representative of NIGERIA commended the efforts of the Secretariat in coordinating the development of the draft thirteenth general programme of work, in particular the incorporation of an accountability framework. Her Government would welcome closer collaboration with country teams and further information on how the draft general programme of work would take into account differing national circumstances and the changing dynamics of emergencies at the country level. WHO should prioritize large and diverse countries such as Nigeria in the implementation of the draft general programme of work. She called for flexible funding of WHO's work.

The representative of TURKEY welcomed the ambitious draft thirteenth general programme of work. Although certain concerns remained relating to its funding, she expressed the hope that they would ultimately be resolved during the implementation process. She welcomed the updated financial estimate for the draft general programme of work and the new approach to resource mobilization. Moreover, the acute appeals segment of the proposed programme budget for 2020–2021 would make the Organization more agile. WHO should review its data collection systems and platforms, with a view to ensuring more effective data collection. In that regard, she looked forward to the impact of the value-for-money strategy on the Organization. The functional reviews of WHO country offices, which would increase their capacity, should be conducted transparently and with minimal institutionalization. She supported the adoption of the draft resolution.

The representative of NORWAY said that a drastic change of pace was required to achieve the health-related Sustainable Development Goals by 2030. With that in mind, the Governments of Ghana, Norway and Germany had requested the Director-General to develop a joint global action plan with all relevant stakeholders to achieve Sustainable Development Goal 3 and all related targets by 2030. In the context of the reform of the United Nations development system and the "One United Nations" approach, WHO should ensure integrated delivery and intersectoral cooperation at the country level. To that end, WHO should fully implement the Quadrennial Comprehensive Policy Review and fully contribute to the United Nations Resident Coordinator system at the global level; WHO country representatives should be an integral part of United Nations country teams under the leadership of the resident coordinator. Moreover, WHO should align its planning cycle with the Quadriennial Comprehensive Policy Review, which should be assessed at the Seventy-fifth World Health Assembly. Further, it was important to maintain the essential capacities currently financed through the polio programme. Although the draft thirteenth general programme of work could be aspirational, the programme budget must be realistic. His Government supported the draft general programme of work and stressed that its funding was a collective responsibility.

The representative of COMOROS welcomed the emphasis on action at the country level and called on WHO to strengthen its role as the directing and coordinating authority on health at that level. Her Government had prioritized universal health coverage and had recently approved its first national funding strategy for health. However, further support from the Secretariat and other partners would be needed to enable her Government to implement its national health development plan. She fully supported the adoption of the draft thirteenth general programme of work and called on the Organization to redouble its efforts to mobilize the necessary resources to implement the programme.

The representative of SOUTH AFRICA said that the draft thirteenth general programme of work provided a real opportunity to achieve the objective of health for all. To realize the ambitious targets of the programme, it was vital to focus on strong and effective implementation at the country level and ensure adequate and sustainable financing. The accountability framework would facilitate the monitoring of progress. In addition, the draft general programme of work would help communities to feel safe and be healthy, particularly as a result of improved health emergency response. She supported the draft general programme of work and the adoption of the draft resolution.

The representative of the UNITED REPUBLIC OF TANZANIA welcomed the strategic priorities and shifts contained in the draft thirteenth general programme of work, as well as efforts to foster political commitment for universal health coverage. Public health emergencies continued to be an issue of critical importance; building preparedness and response capacities was therefore key to resilient health systems. He welcomed the emphasis on the normative role of WHO in setting standards, norms and guidelines and appreciated the progress made with regard to resource mobilization, but called for the timely payment of assessed contributions and more flexible funding in the form of voluntary contributions in order to enable the Secretariat to fulfil its commitments to Member States. He looked forward to planning the programme budget for the period 2020–2021 and welcomed the decision to consider setting priorities for a period covering more than two years. Prioritization and planning at the country level should be developed on a consultative basis. Further, achieving the aspirational “triple billion” goals would require close cooperation among Member States, the Secretariat and other partners. He welcomed the draft general programme of work and supported the adoption of the draft resolution.

The representative of the UNITED STATES OF AMERICA welcomed the emphasis of the draft thirteenth general programme of work on measurable goals, outcomes and impacts. To make progress towards the achievement of the goals, WHO must forge partnerships across all sectors, including with civil society and the private sector. The Organization must recommit to overcoming global public health threats and address disease outbreaks as a priority. In addition, it must focus on its core mission and avoid allocating scarce resources other than to Goal 3 of the Sustainable Development Goals. It was important that the draft general programme of work acknowledged the right of each country to determine its own path towards achieving the Goals. WHO should only become involved in advocacy, particularly political advocacy, when it was within its mandate. He welcomed the focus of the draft general programme of work on expanding access to safe and effective medicines and fostering innovation, including through robust intellectual property systems. The ambition of the draft general programme of work must be combined with realistic budgeting and realistic expectations for resource mobilization.

The representative of ECUADOR welcomed the approach set out in the draft thirteenth general programme of work. However, the Secretariat should better engage Member States through a formal consultation process and road map in the development and approval of targets and indicators, which must take account of regional realities and work already undertaken. The Secretariat should also work with Member States to harmonize instruments already established across the three levels of the Organization. In addition, it was important to have a strategic and long-term vision regarding resource mobilization. Although external collaboration was important, WHO must adhere to the Framework of Engagement with Non-State Actors to ensure transparency.

The representative of the NETHERLANDS said that it would be difficult to measure the impact of the draft thirteenth general programme of work on the achievement of the Sustainable Development Goals. She welcomed the attention given in the draft general programme of work to access to medicines as well as the commitment made regarding sexual and reproductive health and rights. WHO should keep track of the impact of the draft general programme of work on targets 3.7 and 5.6 of the

Sustainable Development Goals and make adjustments, as necessary, by 2030. It was also important to align the WHO transformation agenda with the reform of the United Nations development system, especially with regard to strengthening country work. She supported the idea of building platforms, especially for antimicrobial resistance and noncommunicable diseases. However, the Secretariat should clarify the status of the three flagship programmes, namely improving mental health, reducing cardiovascular diseases and eliminating cervical cancer, within the platform on noncommunicable diseases and mental health and how it had selected those topics. Her Government supported the adoption of the draft general programme of work and the draft resolution.

The representative of the BAHAMAS said that it was essential to strengthen partnerships, communications and critical systems and ensure sustained investment in health in order to meet global health challenges. The interconnected strategic priorities and goals of the draft thirteenth general programme of work would enable the collaboration of all stakeholders in efforts to achieve the health-related Sustainable Development Goals. Progress made by his Government with respect to universal health coverage was being hampered by a reduction in the health workforce, particularly nurses, as a result of migration. The Secretariat must develop collaborative mechanisms among Member States to prevent such critical losses in small island developing States. He welcomed the continued focus on health emergencies and the recognition of vulnerable populations in small island developing States affected by climate change. His Government also supported efforts to prevent health system collapse, maintain critical services and rebuild infrastructure following crises. It was important to improve human capital across the life course; to accelerate action on the prevention of noncommunicable diseases; promote mental health; and to tackle communicable diseases and antimicrobial resistance.

The representative of ICELAND, speaking also on behalf of Australia, Denmark, Finland, France, Germany, the Netherlands, New Zealand, Norway, Sweden and the United Kingdom of Great Britain and Northern Ireland, noted with interest the emphasis that the draft thirteenth general programme of work placed on impact at the country level, including strengthening the role of country offices and making them fit for purpose. Indeed, WHO engagement and impact must be strengthened at the country level, with an emphasis on providing technical and policy guidance to national authorities, including on preparedness for outbreaks. However, a better understanding was needed of the roles of WHO at the country level, including with respect to its core functions, staffing, resources and collaboration with other United Nations organizations. The Secretariat should also clarify how the reform of the United Nations development system would be taken into account in WHO's future strategic directions at the country level, including with regard to its engagement with the United Nations Resident Coordinator system. She therefore requested the Secretariat to present a report identifying the roles and purpose of WHO at the country level, to be discussed at the 144th session of the Executive Board, so as to keep the governing bodies informed and enable Member States to provide strategic guidance.

The representative of AUSTRIA welcomed the alignment of the draft thirteenth general programme of work with the achievement of the Sustainable Development Goals and universal health coverage. Effective and harmonized health information systems were essential to monitoring progress in that regard. The experience of the European Region in establishing the European Health Information Initiative would be useful in promoting health literacy. WHO should clarify how it would address gender equality and decent working conditions for health workers and should also indicate how it would prioritize its work if it was unable to mobilize the necessary resources for implementation of the draft general programme of work. Her Government stood ready to support WHO in developing digital health approaches to strengthen health systems. She fully supported the draft general programme of work.

The representative of COLOMBIA welcomed the people-centred approach of the draft thirteenth general programme of work, which was consistent with the Sustainable Development Goals. WHO should focus in particular on improving its efficiency and effectiveness by clarifying the roles and contributions of all stakeholders, and should support regional offices in collecting reliable data for policy-making, exchanging experiences and mobilizing resources. Although she welcomed the emphasis on innovation, attention should also be given to access to medicines and technologies. Putting countries at the centre of efforts was extremely important, in addition to enhancing collaboration between regional and country offices and governments. Her Government supported the draft resolution.

The representative of CHINA supported the draft thirteenth general programme of work. However, the “triple billion” goals should have specific indicators to guide both the work of WHO and the programme budget. He commended the strategic shift of the draft general programme of work and its focus on country impact. The Secretariat should work with regional and country offices to develop country cooperation strategies, build country capacities and ensure the implementation of norms and guidelines at the country level. He urged the Secretariat to take action to improve the representation of developing countries in human resources, for instance through staff and internship programmes, and asked whether the Secretariat would hold Member States and other partners accountable under the Impact Framework and the accountability framework.

The representative of BAHRAIN said that the Secretariat must support countries to make progress in improving health, in line with the Sustainable Development Goals. It was important to measure the impacts and expected outcomes of the draft thirteenth general programme of work, especially for areas such as noncommunicable diseases; children’s, adolescents’ and women’s health; and the health effects of climate change. To realize the objectives of the draft general programme of work, WHO must ensure the availability of the necessary resources; strengthen collaboration between headquarters and regional and country offices, for instance through capacity-building; and conduct regular monitoring and evaluation of progress made, amending the objectives as appropriate. Her Government supported the adoption of the draft resolution.

The representative of SAUDI ARABIA supported the proposals set out in the draft thirteenth general programme of work to implement a comprehensive strategy to achieve universal health coverage as well as to ensure coordination between health programmes. He was also in favour of implementing a bottom-up planning process across the three levels of the Organization and supported the concept of joint responsibility. The draft general programme of work would not succeed without the efforts of Member States. He requested further information on progress made in transferring resources to the country level.

The representative of the UNITED KINGDOM OF GREAT BRITAIN AND NORTHERN IRELAND said that his Government was ready to approve the draft thirteenth general programme of work and the draft resolution; however, that did not include approval of the related funding package. The impact framework, although welcome, should quantify the contribution of WHO. While welcoming the financial estimate, including the cost-saving target, he expressed concern regarding the 14% increase in the base segment of the budget; more work was needed in that area prior to discussion of the proposed programme budget for 2020–2021. His Government was disappointed that WHO had not yet provided an investment case, but would be interested in receiving it following the approval of the draft general programme of work. The much-needed ambitious plan for organizational transformation should be better articulated with clear, measurable milestones for improving organizational effectiveness. He called on WHO to urgently resolve those issues in order to ensure the effective implementation of the draft general programme of work.

The representative of the PHILIPPINES supported the draft thirteenth general programme of work and, in particular, the “triple billion” goals and welcomed its alignment with the proposed programme budget for 2020–2021. However, it was important that the implementation of country cooperation strategies should not be disrupted. Adoption of the draft resolution did not imply approval of the financing required to implement the draft general programme of work. In that context, WHO must urgently finalize the impact framework and identify sources of funding. She expressed support for the metrics and measurement cluster and reiterated the importance of holding relevant entities accountable for ensuring the impact of WHO support as well as for monitoring and assessing performance.

The representative of MONGOLIA said that her Government supported the draft thirteenth general programme of work and was committed to its implementation at the country level, in line with its national policies on health and sustainable development. Effective intersectoral cooperation at all levels was essential for successful implementation of the draft general programme of work.

The representative of PAKISTAN expressed support for the draft thirteenth general programme of work. Countries must be placed at the centre of WHO’s work by increasing their technical capacity to implement the 2030 Agenda for Sustainable Development and achieve universal health coverage, including by strengthening primary health care systems. Adequate, predictable resources should be provided at the country level to enable Member States to meet priorities, in particular for health emergencies, and to achieve the Sustainable Development Goals, especially in relation to noncommunicable diseases and mental health. Closer coordination and collaboration were also needed to avoid the duplication of work and waste resources. His Government looked forward to the development of specific measures based on the recommendations proposed by the Secretariat.

The representative of ZAMBIA welcomed the draft thirteenth general programme of work, noting the improvements made based on feedback from Member States, and the focus on planning, budget allocation and the deployment of human resources at the country level. She strongly supported the strategic priorities, which were closely aligned with those of her country, and the alignment of the draft general programme of work with the Sustainable Development Goals. She urged Member States to participate in the priority-setting process to ensure that country-specific needs were adequately reflected, and urged WHO to call on industry stakeholders to facilitate access to medicines and vaccines, thereby allowing governments to rationalize public funding. Her Government fully supported the adoption of the draft general programme of work.

The representative of MALAYSIA expressed support for the draft thirteenth general programme of work, which her country would use as a guide to strengthen its own health care system as part of efforts to achieve universal health coverage. The strategic priorities were interrelated and reaffirmed that the Secretariat and Member States should improve emergency response. Her country would continue to work effectively with the Secretariat, Member States and partners in addressing public health concerns and emergency response, in line with the Sustainable Development Goals.

The representative of INDONESIA encouraged the Director-General to work with relevant global stakeholders, especially within the United Nations system, to ensure the successful implementation of the draft thirteenth general programme of work. The 2030 Agenda for Sustainable Development contained many health-related issues that went beyond Sustainable Development Goal 3; a multidimensional approach was therefore key to achieving the highest standards of health for all. The successful implementation of the draft general programme of work depended on a “One United Nations” approach, through effective collaboration between Member States and country teams and better alignment of the programmes of country teams with the development agendas of Member States. He requested the Secretariat to adjust the Programme budget 2018–2019 to reflect the

transition from the Twelfth General Programme of Work, 2014–2019, to the draft thirteenth general programme of work.

The representative of BRAZIL expressed support for the draft thirteenth general programme of work and its strategic priorities. In particular, she welcomed the focus on improving access to medicines, which would be supported by the forthcoming road map on access to medicines and the implementation of the global strategy and plan of action on public health, innovation and intellectual property. She also welcomed the references to WHO's normative role, South–South cooperation in the context of research and innovation, and specific targets for gender parity and enhanced geographical diversity within the Secretariat. Successful implementation of the draft general programme of work would depend on strong support from Member States, which in turn would require continuous transparency and dialogue from the Secretariat.

The representative of QATAR welcomed the draft thirteenth general programme of work, particularly the prominence given to universal health coverage and noncommunicable diseases. He encouraged the Secretariat and Member States to ensure, when considering the proposed programme budget for 2020–2021, that sufficient human and financial resources were allocated to implement the priorities of the draft general programme of work. To improve the prevention and control of noncommunicable diseases, WHO should strengthen its actions on complex issues, such as the commercial determinants of health, and promote the Health in All Policies approach. He welcomed the emphasis on the “One WHO” approach, country cooperation strategies, and the appointment of highly qualified country staff affiliated to WHO rather than to their own particular programme. Lastly, he encouraged WHO to ensure that country cooperation was focused on a few priorities with clear, time-bound and quantified objectives evaluated through valid and reliable indicators.

The representative of CHILE commended the inclusive process used to develop the draft thirteenth general programme of work, which provided a strong vision to promote health, keep the world safe and serve the most vulnerable populations and constituted an excellent starting point for collective work to establish the Organization's priorities. His Government supported the programme of work and the associated goals and targets and was prepared to take collaborative, specific action to help achieve those objectives.

The representative of NAMIBIA welcomed the draft thirteenth general programme of work, in particular its alignment with the 2030 Agenda for Sustainable Development. However, the targets for the “triple billion” goals should be aggregated, and a framework established for measuring progress. Although there was a positive emphasis on prevention as a way to achieve the targets of the Sustainable Development Goals, it was difficult to increase allocation to prevention programmes without compromising allocations to diagnostic and therapeutic services even though the political will existed; such challenges could hinder or reverse country progress. Technical support should therefore be provided to support Member States in that area for implementation of the draft general programme of work. He welcomed the target of one billion more people benefiting from universal health coverage and the ongoing work to design the package of essential services and enhance measurement systems for tracking performance. It was particularly important to measure the quality of universal health coverage services, as low-quality services could encourage patients to bypass them and incur exorbitant expenses. He expressed support for the draft resolution.

The representative of AUSTRALIA supported the draft thirteenth general programme of work, which balanced a broad range of priorities and covered the critical health issues of the Sustainable Development Goals. Attention should now turn to implementation, in which the impact framework would play a key role. It was positive that the Secretariat's actions to achieve the targets would be developed and integrated into the proposed programme budget for 2020–2021; a realistic budget and

clear prioritization process would be essential. She urged the Secretariat to continue with transparent and inclusive consultations to engage Member States in the implementation of the draft general programme of work, and asked for further clarification regarding the role and purpose of WHO at the country level.

The representative of UNFPA expressed strong support for the focus on universal health coverage and emergencies in the draft thirteenth general programme of work and welcomed WHO's clear position on sexual and reproductive health and rights. However, she suggested that paragraph 36, which referred to safe and effective surgery in the context of maternal and child health, should also contain a caution against unnecessary interventions, which did not always have positive outcomes for the health of women and newborns. In addition, the Programme of Action of the International Conference on Population and Development should be translated in greater detail into WHO programmes, plans and budgets at all levels to strengthen the Organization's impact. Close collaboration with United Nations organizations, through mechanisms such as the H6 Partnership, at the global, regional and country levels would contribute to the successful implementation of the draft general programme of work and help the United Nations system to deliver as one.

The representative of the GAVI ALLIANCE, speaking at the invitation of the CHAIRMAN, welcomed the draft thirteenth general programme of work, notably the "triple billion" goals, the alignment with the Sustainable Development Goals, and the focus on the most vulnerable. She also welcomed the references to sustaining and enhancing vaccination coverage, the recognition of immunization as a strong platform for primary care and the prioritization of disease prevention, including for vaccine-preventable diseases. The strengthening of health governance, national health system resilience and health financing were also key priorities. She welcomed the draft resolution and looked forward to contributing to full and effective implementation of the draft general programme of work.

The representative of the GLOBAL HEALTH COUNCIL, INC., speaking at the invitation of the CHAIRMAN, observed that in order to achieve the three interconnected strategic priorities, the draft thirteenth general programme of work must reflect the global health architecture within WHO and other global health institutions and partners. It was also necessary to effectively manage polio transition to avoid instability in health systems; further work was required in terms of country-level support and partner engagement plans to produce evidence-based, tailored targets in that area. She encouraged the Secretariat to emphasize the importance of data and monitoring and improve transparency through the reform process and implementation of the draft general programme of work.

The representative of HELPAGE INTERNATIONAL, speaking at the invitation of the CHAIRMAN, praised WHO for addressing ageing in the draft thirteenth general programme of work and welcomed the alignment with existing strategic objectives on healthy ageing. With regard to the impact framework, she welcomed the specific target on older people in need of care, but called for a greater level of ambition in other parts of the framework, for example by not restricting the targets in relation to noncommunicable diseases and violence against women and girls to certain age groups. She expressed concern at the continued emphasis on premature mortality in efforts to combat noncommunicable diseases, which risked diverting services from those most affected, and the failure to mention ageing in the financial estimate for the draft general programme of work. WHO should provide support for capacity-building as part of efforts to ensure healthy ageing, in particular at the country level, and allocate funding to provide the necessary technical support.

The representative of the INTERNATIONAL ASSOCIATION FOR HOSPICE AND PALLIATIVE CARE INC., speaking at the invitation of the CHAIRMAN, expressed support for the draft thirteenth general programme of work, in particular its assistance for vulnerable populations; its

acknowledgement that patients with life-limiting illnesses and their families required more support; and its recognition of palliative care as an essential service within universal health coverage. Member States should commit themselves to creating or strengthening health systems that integrated palliative care into primary care. Her association was committed to working with the Secretariat to help countries implement the draft general programme of work and resolution WHA67.19 (2014) on strengthening palliative care.

The representative of the INTERNATIONAL BABY FOOD ACTION NETWORK, speaking at the invitation of the CHAIRMAN, said that her network placed great value on WHO's core constitutional norm-setting functions, independence, integrity and trustworthiness. She was pleased that the draft thirteenth general programme of work addressed some her network's concerns, including the need to support breastfeeding and protect WHO's work from conflicts of interest and undue influence. Nevertheless, it failed to address the risks of public-private partnerships. Caution must be exercised with regard to the terminology used to describe WHO's interactions with the private sector; for example, using the term "partnerships" threatened its leading role in developing the international rule of law. Furthermore, the draft general programme of work relied on a faulty notion of conflicts of interest as set out in the Framework of Engagement with Non-State Actors. At WHO, there was an internal conflict between its mandate and core functions and its secondary interest in ensuring adequate funding. She hoped that the concept of conflicts of interest would be corrected during the evaluation of the Framework of Engagement with Non-State Actors in 2019.

The representative of the INTERNATIONAL COMMISSION ON OCCUPATIONAL HEALTH, speaking at the invitation of the CHAIRMAN, emphasized that, despite the large number of fatalities and non-fatal health outcomes from work-related diseases and occupational accidents, 85% of the global workforce lacked access to occupational health services. He encouraged the extension of the WHO Global Plan of Action on Workers' Health to 2023 and the inclusion therein of specialized or basic occupational health services covering all types of workers; the establishment of a WHO programme for the prevention of occupational cancer and the elimination of asbestos-related diseases; and the enhancement of the ILO/WHO Global Programme for the Elimination of Silicosis, specifically with regard to tuberculosis prevention.

The representative of the INTERNATIONAL COUNCIL OF NURSES, speaking at the invitation of the CHAIRMAN, said that input from nurses was essential for the development and implementation of the strategic priorities of the draft thirteenth general programme of work. She was pleased that the role of Chief Nursing Officer at WHO had been reinstated; all countries should have a chief nursing officer and nurses in senior leadership positions in all health institutions. Highlighting the importance of access to essential life-saving health services, she said that more work was needed to maintain services for immunization, maternal and child health, mental health and chronic conditions. WHO should support health system strengthening in those areas in order to ensure appropriate emergency response. Lastly, she urged WHO to clearly define how it would apply the new Framework of Engagement with Non-State Actors.

The representative of the INTERNATIONAL FEDERATION FOR MEDICAL AND BIOLOGICAL ENGINEERING, speaking at the invitation of the CHAIRMAN, said that the draft thirteenth general programme of work did not adequately highlight the impact of medical devices and technology on health care. Measures related to non-medical technologies should be included in the draft general programme of work to strengthen health systems and emergency response capacities. He appreciated the importance attached to the collection, processing and diffusion of health care data and supported WHO's intention to remain the global authority in that area. However, reporting, emergency data collection and tasks related to eHealth, mHealth and medical technologies were dispersed throughout the Organization, resulting in a duplication of work and fewer opportunities to provide data

for evidence-based decision-making. Collaboration with the International Council for Science World Data System Scientific Committee and the Committee on Data of the International Council for Science would be beneficial in that regard.

The representative of the INTERNATIONAL FEDERATION OF MEDICAL STUDENTS' ASSOCIATIONS, speaking at the invitation of the CHAIRMAN, welcomed the draft thirteenth general programme of work and highlighted the need for intersectoral action by multiple stakeholders, in particular young people. He appreciated WHO's increasing efforts to engage young people meaningfully in global health and urged all stakeholders to follow suit. To foster the participation of youth-led and youth-serving organizations, he called on the Secretariat and Member States to: establish youth delegate programmes and ensure that youth representatives were part of Member States' delegations at WHO meetings; support the participation of young people in the WHO internship programme, which should be accessible and affordable for all, regardless of socioeconomic background; and include more young people in the initiatives, events and working groups associated with the draft general programme of work.

The representative of the INTERNATIONAL FEDERATION ON AGEING, speaking at the invitation of the CHAIRMAN, appreciated the inclusion in the draft thirteenth general programme of work of ageing and older persons and an indicator on improved access to universal health care. WHO should adopt a life course approach, especially with regard to noncommunicable diseases, with a view to promoting and maintaining intrinsic capacity and functional ability at all ages. Improved functioning and healthy ageing should be measures of success in the application of assistive technology. She looked forward to contributing to a global report on effective access to assistive technology and to including older people in its measures. She applauded the Secretariat's progress on the Global strategy and action plan on ageing and health, specifically in building commitment and capacity at the regional and country levels, and welcomed the efforts to combat ageism and create age-friendly environments.

The representative of the INTERNATIONAL PHARMACEUTICAL FEDERATION, speaking at the invitation of the CHAIRMAN, expressed support for the adoption of the draft thirteenth general programme of work. Governments must focus on the health workforce, decent working conditions and the provision of well-equipped health care settings in order to achieve the innovation and country-specific adaptation required for new delivery models for integrated, people-centred services. Interprofessional collaboration was also necessary for people-centred services, as it would prevent duplication and gaps in patient care. He welcomed the timely reference to patient safety in the draft general programme of work. Engagement with health professionals would strongly influence the success of the implementation of the draft general programme of work.

The representative of the INTERNATIONAL PHARMACEUTICAL STUDENTS' FEDERATION, speaking at the invitation of the CHAIRMAN, welcomed the acknowledgment in the draft thirteenth general programme of work of the health workforce as a major component in efforts to achieve the health-related Sustainable Development Goals and universal health coverage. There was a growing urgency to align health workers' education and training with individual health systems, labour markets and population needs. Persistent under-investment in education, capacity-building and skills development was resulting in shortages in the health workforce. Reaching the "triple billion" goals would require concerted action by all parties. WHO and all stakeholders should recognize the role of young people as the foundation of the future health and social workforce, and provide them with opportunities for collaboration and engagement.

The representative of the INTERNATIONAL PLANNED PARENTHOOD FEDERATION, speaking at the invitation of the CHAIRMAN, welcomed the transparent and inclusive consultation

process for the draft thirteenth general programme of work. Successful implementation of the programme of work would be contingent on the joint efforts of WHO and its partners, including civil society. Universal health coverage would only be achieved through universal access to sexual and reproductive health services and the fulfilment of sexual and reproductive rights for all, including the most vulnerable and marginalized; she therefore welcomed the strong links between sexual and reproductive health and rights and universal health coverage in the draft general programme of work and called for Member States to be held accountable for the level of progress made. She endorsed WHO's commitment to: implement targets 3.7 and 5.6 of the Sustainable Development Goals; end all forms of discrimination and violence against women and girls; and eliminate harmful practices, and she called on WHO and all relevant actors to prioritize the achievement of those targets. She welcomed the non-discriminatory and rights-based approaches to health, as well as WHO's commitment to bringing a gender lens to data collection and disaggregation, and programme design.

The representative of the INTERNATIONAL SOCIETY OF NEPHROLOGY, speaking at the invitation of the CHAIRMAN, appreciated the strong focus of the draft thirteenth general programme of work on universal health coverage. However, she regretted that the platform on noncommunicable diseases failed to recognize kidney disease. WHO should implement an integrated approach to noncommunicable diseases that recognized the burden of kidney disease and its frequent co-morbidities. That approach must be integrated into national strategies and should focus on prevention, management and treatment. Addressing noncommunicable diseases also required increased resources, which could be obtained through innovative financing and price negotiations.

The representative of INTRAHEALTH INTERNATIONAL INC., speaking at the invitation of the CHAIRMAN, praised WHO's transformative approach to health equity and resource mobilization and its work to close the gaps in access to health workers. However, the draft thirteenth general programme of work failed to address the need to strengthen the health workforce, which was critical to achieving the Sustainable Development Goals and the "triple billion" goals. Access to health workers must be embedded in all three strategic areas of the draft general programme of work. He suggested that the paragraphs of the draft general programme of work on the health workforce should be amended to emphasize the significant return on investments from health employment.

The representative of IOGT INTERNATIONAL, speaking at the invitation of the CHAIRMAN, expressed support for the adoption of the draft thirteenth general programme of work and welcomed the inclusive consultation process that had led to its development. She supported the draft general programme of work's three strategic priorities, as well as its overall approach to promote healthy, long lives and the platform for prevention of noncommunicable diseases and promotion of mental health. It was crucial to tackle alcohol-related harm under all three strategic priorities and prioritize alcohol-related "best buy" interventions. Furthermore, it was essential to safeguard against incompatible partnerships with private sector entities, including the alcohol industry, that could give rise to conflicts of interest.

The representative of the INTERNATIONAL WOMEN'S HEALTH COALITION, speaking at the invitation of the CHAIRMAN, supported the adoption of the draft thirteenth general programme of work and appreciated WHO's commitment to achieving targets 3.7 and 5.6 of the Sustainable Development Goals. She called on WHO to show bold leadership to ensure that all people could fully exercise their sexual and reproductive rights, and looked forward to working with the Organization to ensure that a comprehensive package of sexual and reproductive health services was integrated into all universal health coverage programmes, with a focus on women and girls. WHO's continued leadership to ensure that young people had access to scientifically accurate and human rights-based sexuality education was crucial in that regard. Implementation of the draft general programme of work should

focus on evidence-based strategies targeting legal and policy barriers, and ensure appropriate monitoring and the allocation of necessary resources.

The representative of KNOWLEDGE ECOLOGY INTERNATIONAL, speaking at the invitation of the CHAIRMAN, endorsed WHO's commitment to universal health coverage in the draft thirteenth general programme of work, which would only be achieved by reducing reliance upon and eventually abandoning the use of high prices and patent monopolies as an incentive to invest in research and development. Delinkage was essential, and the draft general programme of work should include the evaluation and implementation of alternative business models that supported universal access to products. WHO should explore norms and mechanisms to enhance the transparency of research and development costs, disaggregated by the stage of development, and data on prices, access and revenues. The draft general programme of work showed a lack of ambition in relation to access to cancer medicines; WHO should be more proactive in that regard, including by organizing regional workshops to share expertise on, among others, the technical and practical aspects of compulsory licences.

The representative of MEDICUS MUNDI INTERNATIONAL – INTERNATIONAL ORGANISATION FOR COOPERATION IN HEALTH CARE, speaking at the invitation of the CHAIRMAN, commended the recognition in the draft thirteenth general programme of work of the role of women and civil society organizations in strengthening health systems. However, other aspects had not been adequately addressed, including the excessive influence of donors on the Organization's normative work and finances. She urged Member States to lift the freeze on assessed contributions and un earmark their voluntary contributions.

Further, WHO should address the fact that many private entities, especially transnational corporations, negatively influenced health, and that the ability of the Framework of Engagement with Non-State Actors to manage conflicts of interest remained untested. It was disappointing that the draft general programme of work did not adequately address the barrier of intellectual property rights on access to medicines. Lastly, the Secretariat and Member States should create binding mechanisms for ethical forms of health worker recruitment in order to tackle the health workforce crisis.

The meeting rose at 17:35.

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