
Specific modalities for a rigorous screening process at the Executive Board

Report by the Secretariat

1. The Working Group of Member States on the Process and Methods of the Election of the Director-General of the World Health Organization, in its report to the Executive Board,¹ requested the Secretariat, inter alia, to prepare for the next meeting of the Working Group proposals, based on the discussions at the second meeting, on modalities of a strengthened screening process at the Executive Board in connection with the nomination of the Director-General.

CURRENT MODALITIES OF THE SCREENING PROCESS

2. The Executive Board agreed in decision EB100(7) that the first stage of the nomination process, namely the initial screening of candidates to eliminate those candidates who do not meet the criteria set by the Board in resolution EB97.R10,² should be limited to determining whether there is a consensus that one or more candidates do not meet those criteria. Additionally, in resolution EB120.R19, the Board agreed with the procedure developed by the Secretariat concerning the manner in which the Executive Board assesses whether the candidate nominated by it has the **good physical condition** required of all staff members of the Organization. Hence, the Secretariat requests the persons who have been proposed for the post of Director-General to undergo a medical examination and have a completed WHO medical examination form brought to the attention of the Director of Health and Medical Services at WHO headquarters. The Director of Health and Medical Services then reports to the Chairman of the Board, who informs the Board accordingly.

3. At its second session, the Working Group agreed that the qualifications of the candidate are of paramount importance.³ The Working Group focused, in particular, on the criteria established by the Board and how they could be used effectively. In this regard, the Working Group reviewed the criteria set down by the Executive Board in resolution EB97.R10, as well as a proposal from a Member State, and discussed areas of improvement in order to strengthen the criteria. The Working Group could not reach consensus and considered that further discussions would be necessary. It also noted that the screening process as it was currently carried out tended to be superficial, and discussed how the Executive Board could undertake a rigorous screening of candidates for the post of Director-General.

¹ Document EB130/29 Corr.1, Annex.

² An extract from resolution EB97.R10 is attached in the Annex of this document.

³ See the report of the Working Group in document EB130/29 Corr.1, Annex.

OPTIONS FOR MODIFICATIONS

4. Rule 52 of the Rules of Procedure of the Executive Board states that Member States may propose for the post of Director-General one or more persons, submitting with the proposal a curriculum vitae or other supporting information for each person. The Rule, however, does not specify what such supporting information should include. In order to ensure consistency and comparability of the information to be provided and assessed, it might be possible to introduce **a standard form for the curriculum vitae of candidates, or a questionnaire to be used in addition to the curriculum vitae.**¹ Whichever document was chosen, it could either request information or ask questions that refer directly to the criteria adopted by the Board. Member States could be required to use the standard curriculum vitae form or the questionnaire when proposing names of persons for nomination for the post of Director-General. The use of a standard form would facilitate a comparative assessment of the candidatures, in which the merits and qualifications of candidates could be gauged against the criteria set forth by the Board. The standard form or questionnaire could also require each candidate to provide a statement on specific aspects of his or her vision of priorities and strategies, again with a view to comparing candidatures.

5. The screening process at the Executive Board may also be rendered more rigorous by requesting candidates to provide **professional references** in support of their candidacy. This is a feature that has already been introduced into the process of assessing candidates for senior posts in some WHO regions. With the aim of further facilitating a comparative assessment of candidatures, the Executive Board could decide on a set of predetermined questions to be posed to the referees. The referees could be contacted and the replies received could subsequently be shared with the Executive Board members, who would be able to consider them in the context of the criteria set forth by the Board.

6. If the Board eventually considers adopting the foregoing proposals, its work could benefit from a prior assessment of the information concerning the candidates and the feedback received from the referees. One option could be to establish, at the session preceding the one at which the Director-General is to be nominated, a working group composed of a limited number of Board members, based on equitable geographical representation. Such a group would be mandated to conduct a preliminary screening of all documents and materials supplied by Member States proposing candidates, and by the referees. That screening would imply an assessment of the candidatures against the criteria set forth by the Board. The working group would then provide a consolidated assessment either to the Board on a confidential basis or to all Member States. The Board would still have at its disposal the original information, but its work could benefit from a prior assessment by a smaller, dedicated group.

7. A second option, which has already been discussed by the Working Group with the aim of increasing the transparency and credibility of the selection process, would be to amend Rule 52 of the Rules of Procedure of the Executive Board of the World Health Organization in order to make **the process more inclusive**. That would imply the participation of all Member States in the initial screening. To that end, different modalities for performing the initial screening could be identified.

8. At its second session, the Working Group reviewed the **existing criteria** for selection of the Director-General. As noted above, the Working Group noted that the existing criteria were rather

¹ This builds on the useful experience in this area that has been provided by (i) the nomination process for the post of Regional Director for Europe, and (ii) the review of the nomination process for the post of Regional Director for the Western Pacific that is currently being conducted by the Regional Committee.

vague and did not facilitate a thorough screening of the candidates. The Working Group also discussed the possibility of complementing criteria on the personal qualifications of the candidates with additional criteria providing guidance to the Board. Although the Working Group has not concluded its consideration of this issue, it may wish to distinguish between, on the one hand, more general criteria (such as extensive leadership, administrative and diplomatic experience) which would apply independently of the technical background of a candidate, and, on the other hand, more focused public health criteria, which may include specific competencies, qualities and experience.

CONCLUSIONS

9. The Working Group is invited to consider the above-mentioned proposals, to express its views on them and to further elaborate on the specific modalities for a rigorous screening process by the Executive Board.

ANNEX

**EXTRACT FROM RESOLUTION EB97.R10,¹ ADOPTED BY THE
EXECUTIVE BOARD AT ITS NINETY-SEVENTH SESSION**

The Executive Board,

Having considered the report of the ad hoc group established by its decision EB95(1) to consider options for the nomination and terms of office of the Director-General,²

1. RESOLVES that the candidate nominated by the Executive Board for the post of Director-General should fulfil the following criteria; he or she should have:

- (1) a strong technical and public health background and extensive experience in international health;
- (2) competency in organizational management;
- (3) proven historical evidence for public health leadership;
- (4) sensitiveness to cultural, social and political differences;
- (5) a strong commitment to the work of WHO;
- (6) the good physical condition required of all staff members of the Organization; and
- (7) sufficient skill in at least one of the official and working languages of the Executive Board and Health Assembly;

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¹ See document EB97/1996/REC/1.

² See document EB97/1996/REC/1, Annex 1.