ATTRIBUTION OF AWARDS AND HONOURS:
TYPES AND MODALITIES

The Executive Board has hitherto selected laureates for the prizes for which the Director-General is the administrator. In view of the growth in the number of prizes, and the varying sums associated with their award, the Board at its eighty-seventh session requested a study on the modalities of the award of the prizes (decision EB87(9)). The Director-General is submitting this report in response to that request and is proposing some alternatives to the present procedure.

1. At their meetings in 1991, the committees of the Dr A. T. Shousha and the Léon Bernard Foundations were presented with a proposal to increase the sum of money awarded for these prizes, which had remained at the same level since their inception. This would have resulted in a decrease in the frequency of awards, as the amount of money available for these awards depends on the amount of interest accumulated by the capital of each foundation. In their reports to the eighty-seventh session of the Executive Board, the committees of the Dr A. T. Shousha and the Léon Bernard Foundations proposed to the Executive Board that it request the Director-General to undertake a comprehensive study of arrangements for all the awards made by foundations administered by the Organization. This proposal was endorsed by the Board in its decision EB87(9).

THE PRESENT SITUATION

2. The Director-General is the Administrator of several foundations awarding prizes and/or fellowships. One of the prizes (Darling Foundation Prize) is a legacy of the League of Nations, whereas others have been bequeathed by, or are in memory of, various eminent health personalities. With the exception of the recently created Francesco Pocciari Fellowship, the procedure for the award of prizes is similar. Any national health authority or a previous laureate can nominate a candidate for a prize. For each award, there is a committee, which meets during the Executive Board session, usually consisting of the Chairman, the three Vice-Chairmen and, in some cases, an additional member of the Board, in others, representatives designated by the founder. One prize (Dr Comlan A. A. Quenum Prize) is administered at the regional level.

3. The usual procedure is for the committees to recommend one or more candidates to the Board, with whom the final selection rests. The prizes are formally awarded during the Health Assembly to the laureates, or their representative, who briefly address the Assembly. The main features and characteristics of the various awards are given in the table below.
<table>
<thead>
<tr>
<th>Award</th>
<th>Amount and frequency of award</th>
<th>Membership of committee</th>
<th>Final selection made by</th>
<th>Method of award</th>
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</thead>
<tbody>
<tr>
<td><strong>The Darling Foundation Prize</strong> for outstanding achievements in the pathology, etiology, epidemiology, therapy, prophylaxis or control of malaria</td>
<td>Sw.fr. 10 000 and a bronze medal, awarded when the interest amounts to a sufficient sum</td>
<td>Chairman and Vice-Chairmen of the Executive Board and the Chairman of the Expert Committee on Malaria</td>
<td>Executive Board</td>
<td>Ceremony at World Health Assembly</td>
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<tr>
<td>Capital: Sw.fr. 10 000</td>
<td>Establish: 1948 in WHO, but earlier in the League of Nations</td>
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<tr>
<td><strong>The Léon Bernard Foundation Prize</strong> for outstanding service in the field of social medicine</td>
<td>Sw.fr. 1000.- and a bronze medal, awarded when the interest amounts to a sufficient sum (in practice every year)</td>
<td>Chairman and Vice-Chairmen of the Executive Board and a member of the Board</td>
<td>Executive Board</td>
<td>Ceremony at World Health Assembly</td>
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<tr>
<td>Capital: Sw.fr. 19 000</td>
<td>Establish: 1948</td>
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<tr>
<td><strong>Dr A. T. Shousha Foundation Prize</strong> for the most significant contribution to any health problem in the geographical area in which Dr A. T. Shousha served the World Health Organization</td>
<td>Sw.fr. 1000.- and a bronze medal, awarded when the interest amounts to a sufficient sum (in practice every year)</td>
<td>Chairman and Vice-Chairmen of the Executive Board and a member of the Board</td>
<td>Executive Board</td>
<td>Ceremony at World Health Assembly</td>
</tr>
<tr>
<td>Capital (Prize and Fellowship): US$ 60 816</td>
<td>Establish: 1966</td>
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<tr>
<td><strong>The Dr A. T. Shousha Foundation Fellowship</strong> to enable the fellow to obtain a postgraduate diploma or a master’s degree in public health</td>
<td>US$ 15 000, awarded whenever accumulated interest in excess of that required for the award of the Prize is sufficient (in principle approximately every six years)</td>
<td>As for Prize</td>
<td>Executive Board</td>
<td>Letter to laureate</td>
</tr>
<tr>
<td>Establish: 1966</td>
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<tr>
<td><strong>The Jacques Parisot Foundation Fellowship</strong> for research in social medicine or public health</td>
<td>US$ 5000 and a bronze medal, awarded every two years (regional offices are invited in turn to submit candidatures)</td>
<td>Chairman and Vice-Chairmen of the Executive Board and a member of the Board</td>
<td>Executive Board</td>
<td>Letter to laureate. The following year the laureate is invited to present the results of his/her research before the World Health Assembly and to receive the medal</td>
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<tr>
<td>Award</td>
<td>Amount and frequency of award</td>
<td>Membership of committee¹</td>
<td>Final selection made by</td>
<td>Method of award</td>
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<td><strong>The Child Health Foundation Prize for outstanding services in the field of child health</strong>&lt;br&gt;Capital (Prize and Fellowship): US$ 100 380&lt;br&gt;Established: 1980</td>
<td>US$ 2500 and a bronze medal, awarded every two years</td>
<td>Chairman and Vice-Chairmen of the Executive Board, a representative of the International Pediatric Association and a representative of the International Children's Centre, Paris</td>
<td>Executive Board</td>
<td>Ceremony at World Health Assembly</td>
</tr>
<tr>
<td><strong>The Child Health Foundation Fellowship for research in social paediatrics</strong>&lt;br&gt;Established: 1980</td>
<td>US$ 10 000 awarded every two years</td>
<td>As for Prize</td>
<td>Executive Board</td>
<td>Letter to laureate</td>
</tr>
<tr>
<td><strong>The Sasakawa Health Prize for innovative work in health development, in order to encourage the further development of such work</strong>&lt;br&gt;Capital: US$ 1 million (invested by Sasakawa Health Foundation)&lt;br&gt;Established: 1984</td>
<td>US$ 100 000, awarded annually in principle (generally shared between two or three individuals and/or institutions) and a crystal statuette. The exact sum of money for each laureate is determined by the Prize Committee</td>
<td>Chairman and Vice-Chairmen of the Executive Board and a representative appointed by the Founder</td>
<td>Executive Board</td>
<td>Ceremony at World Health Assembly</td>
</tr>
<tr>
<td><strong>The Dr Comlain A. A. Quenum Prize for Public Health in Africa for the most significant contribution to any health problem in the geographical area in which Dr Comlain A. A. Quenum served the World Health Organization</strong>&lt;br&gt;Capital: CFA 1 400 000 (held by the Regional Office for Africa)&lt;br&gt;Established: 1987</td>
<td>US$ 2000 (which may be adjusted upwards from time to time by the Prize Committee) and a medal, awarded every two years</td>
<td>Chairman and Vice-Chairman of the Programme Sub-Committee of the Regional Committee for Africa, and two representatives of the African Advisory Committee for Health Development</td>
<td>Programme Sub-Committee of the Regional Committee for Africa. In case of non-agreement on the choice of candidate, the matter is referred to the Regional Committee for Africa for decision</td>
<td>Ceremony at World Health Assembly</td>
</tr>
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<td>The Francesco Pocchiari Fellowship to enable researchers from developing countries to visit other countries in order to obtain new experience relevant to their own research Capital: US$ 104 960 Established: 1991</td>
<td>US$ 10 000, awarded every two years</td>
<td>Director of the Istituto Superiore di Sanità, Rome, and four members of the WHO Global Advisory Committee on Health Research</td>
<td>Executive Board</td>
<td>Letter to laureate. Name solemnly announced at a public meeting of World Health Assembly</td>
</tr>
</tbody>
</table>

1 The meeting of the Committee for the Francesco Pocchiari Fellowship takes place during the ACHR session.
HISTORICAL DEVELOPMENTS

4. When the prizes were established, the final decision regarding the selection of laureates rested with the Health Assembly, to whom the committees made their recommendations. Apart from increasing the workload of the Health Assembly, this procedure proved unsatisfactory, since the prizes were also awarded during the same Health Assembly. Consequently, even before the selection had been finalized, the proposed candidates had been informed of their nomination and many had already travelled to the Assembly to receive the award. In order to overcome this problem, responsibility for selection of the recipients of the awards was entrusted to the Executive Board in 1979 (decision EB64(16)). At that time there were only four awards, namely those of the Darling, Léon Bernard, Dr A. T. Shousha and Jacques Parisot Foundations.

THE PRESENT PROCEDURE

5. The committees submit proposals to the Executive Board, which makes the final choice of laureates. Consequently, the Health Assembly’s involvement in the awards has become ceremonial only, and the problem regarding the selection process was felt to have been satisfactorily resolved while the number of prizes remained small. With the increase in their number and the increase in the workload of the Executive Board and the Health Assembly, some weaknesses have been revealed.

Acceptance of new proposals for prizes

6. The Executive Board at present meets for 9 to 11 days, during which time an average of four meetings of the committees take place. The volume of material submitted for each of the prizes has increased, and the workload of members of the committees in reading the material submitted is quite considerable. Consequently, if the same procedure for selection of laureates were adopted for any new prize proposed to the Organization, it would be difficult for the committees to undertake the additional work. For instance, if preliminary selection of the Francesco Pocchiari Fellowship had been added to the workload of the Board later then the WHO Global Advisory Committee on Health Research (ACHR), it would have already caused major problems to the committee members. Although the several committees could have different membership, the presence of the Chairman and the Vice-Chairmen of the Board on all of them provides a common viewpoint which would otherwise be impossible to attain. However, if membership of all committees were to derive from the Executive Board, the Organization would face an anomalous situation whereby the existing prizes - however small the sums involved - would be the only ones that could be administered by the Organization, and no new prizes could be accepted.

Problems of logistics

7. Apart from the problems of organizing the meetings of the committees, the increase in the number of prizes imposes some workload on the Executive Board itself. In addition, the award ceremonies are held during the following Health Assembly, and on several occasions delegates at the Assembly and members of the Board have expressed the wish that the award ceremonies be reorganized in order to avoid taking up too much of the Assembly’s time. Over the years the Health Assembly has been progressively shortened, from three to two weeks, and there are at present proposals to shorten it even further. The time taken for the award ceremonies has been kept to the minimum, and the laureates are requested to limit their address to the Assembly to five minutes. Although the Health Assembly offers a degree of visibility to the awards, they tend to be lost from sight in the midst of many other ceremonies and meetings that are also held during the Health Assembly.

Discrepancy between amounts awarded

8. Depending on when the prizes were established, the capital bequeathed to the Foundations has varied, and consequently the sums awarded to the laureates vary substantially. The sum of Sw.fr. 1000 awarded to laureates of the Darling, Léon Bernard and Dr A. T. Shousha Foundations is somewhat low in view of the expenses they incur in coming to Geneva to receive their award. When these prizes were created, some 25 and 40 years ago, the sum of Sw.fr. 1000 was expected to cover most travel expenses. The more recent prizes (Child Health Foundation and Dr Comian A. A. Quenum) offer US$ 2500 and US$ 2000 respectively. As for the Sasakawa Health Prize, it cannot be compared to other prizes as it is essentially different in scope: the sum awarded is intended for the further development of a promising work and not as a reward.
9. The Jacques Parisot Foundation Fellowship, amounting to US$ 5000, is now found to be inadequate for
the expenses of research in social medicine, and usually the regional offices have to supplement the amount of
the Fellowship in order to cover the total expenses. The Dr A. T. Shousha Fellowship, which also used to be
for a relatively small amount, has recently been increased to US$ 15 000. The Child Health Foundation
Fellowship, for research in social paediatrics, on the other hand, amounts to US$ 10 000. Thus the amounts of
the fellowships vary from US$ 5000 to US$ 15 000.

Nomination procedures

10. At present, the national health administrations in Member States are requested to nominate candidates
for the various prizes. At the same time, the Statutes of the Foundations allow former recipients of the prizes
to put forward candidatures. Over the years, with the increase in the number of laureates, the latter provision
has been found to increase substantially the work of the secretariat of the Foundations in contacting the
previous laureates. In addition, there are usually very few cases where nominations are received from former
laureates, and in those cases where nominations are received the relevant national administrations are often
unaware of them, resulting in the nomination of two or more candidates from the same country.

POSSIBLE ACTION BY THE EXECUTIVE BOARD

11. The regulations of the Foundation for the Award of the Darling Medal and Prize and the Statutes of the
Sasakawa Health Prize may be modified by a decision of the Executive Board. The statutes of the other
awards may be modified by a decision of their respective committees. Therefore, the Executive Board may
wish to decide, or to recommend to the respective committees, as appropriate, the following course of action,
with a view to improving further the administration and attribution of the awards.

Amount of awards

12. The sum awarded by the Darling, Léon Bernard and Dr A. T. Shousha Foundations should be increased
from Sw.fr. 1000 to Sw.fr. 2500. This would directly influence the frequency of these awards, which depends on
the amount of interest yielded by the relevant trust funds. As a corollary, the burden on the time of both the
Health Assembly and the Executive Board would be somewhat alleviated. It would also be more in line with
the sum awarded by the other foundations and with the expenses incurred by the laureates in coming to
Geneva to receive their prize. (This would require an amendment of the Statutes of the Darling and
Léon Bernard Foundation Prizes.)

Nominations by previous laureates

13. In view of the relatively rare nominations received from previous laureates and the lack of coordination
with the national administrations concerned, the provision allowing for former recipients of the prize to put
forward candidatures should perhaps be removed from the Statutes of the Foundations.

Selection procedure

14. The responsibility for nominating laureates could be transferred from the committees of the Executive
Board to the WHO Global Advisory Committee on Health Research (ACHR). The ACHR could of course
appoint a subcommittee for such nominations. Since many of the prizes require judgement on research
proposals or contributions in fields such as social medicine or public health, the Global ACHR would seem a
more appropriate body and might be in a better position to evaluate the candidatures than the present
committees. The recommendations of the Global ACHR or its subcommittee could be transmitted to the
Executive Board for final decision. Alternatively, the Global ACHR itself could be empowered to take that
decision.

15. As the Global ACHR meets only every two years, the frequency of the award of the hitherto annual
prizes would have to be re-examined. However, the increase in the amounts for at least three of the prizes
would mean that they would not be awarded more than once every two years. The other alternative would be
for the Global ACHR to consider, at the same session, nominating laureates for two years for any prize which it is felt should be awarded annually.
Awards ceremony

16. The award ceremony could be moved from the Health Assembly to World Health Day (7 April of each year). The names of the laureates would subsequently be solemnly proclaimed at a public meeting of the Health Assembly.

17. Apart from saving the time of the Health Assembly, this solution would have the advantage of enhancing considerably the celebration of World Health Day, giving it more substance and attracting good media coverage. Instead of a drastic limitation in the time allotted to laureates for their speeches, a ceremony more in consonance with the generally high calibre of the laureates and the solemnity of the awards could be organized. (This would require an amendment of the relevant statutes and a recommendation by the Executive Board to the Health Assembly regarding its method of work.)

CONCLUSIONS

18. In view of the current situation with regard to the awards, and the necessity of ensuring a degree of homogeneity in the eventual amendments to be made to the rules governing their administration and attribution, the Director-General would like the guidance of the Board on the way in which the procedure for nomination and selection of candidates for prizes could be modified. In addition, it may be appropriate to undertake a review of the amount and frequency of each award and to make new arrangements for the award ceremony.

19. If the action outlined in paragraphs 16 and 17 above were to be adopted, it might allow for a shortening of the duration of the World Health Assembly so that its work and that of the session of the Executive Board that follows it could be completed in two weeks. Such a step could be undertaken on an experimental basis only if the awards ceremony were to be organized at a time other than during the Health Assembly.