



WORLD HEALTH ORGANIZATION

EXECUTIVE BOARD

NINETY-NINTH SESSION

GENEVA, 13-22 JANUARY 1997

**RESOLUTIONS AND DECISIONS
ANNEXES**



**GENEVA
1997**

ABBREVIATIONS

Abbreviations used in WHO documentation include the following:

ACC	- Administrative Committee on Coordination	NORAD	- Norwegian Agency for International Development
ACHR	- Advisory Committee on Health Research	OAU	- Organization of African Unity
AGFUND	- Arab Gulf Programme for United Nations Development Organizations	OECD	- Organisation for Economic Co-operation and Development
ASEAN	- Association of South-East Asian Nations	PAHO	- Pan American Health Organization
CIDA	- Canadian International Development Agency	SAREC	- Swedish Agency for Research Cooperation with Developing Countries
CIOMS	- Council for International Organizations of Medical Sciences	SIDA	- Swedish International Development Authority
DANIDA	- Danish International Development Agency	UNAIDS	- United Nations Joint Programme on HIV/AIDS
ECA	- Economic Commission for Africa	UNCTAD	- United Nations Conference on Trade and Development
ECE	- Economic Commission for Europe	UNDCP	- United Nations International Drug Control Programme
ECLAC	- Economic Commission for Latin America and the Caribbean	UNDP	- United Nations Development Programme
ESCAP	- Economic and Social Commission for Asia and the Pacific	UNEP	- United Nations Environment Programme
ESCWA	- Economic and Social Commission for Western Asia	UNESCO	- United Nations Educational, Scientific and Cultural Organization
FAO	- Food and Agriculture Organization of the United Nations	UNFPA	- United Nations Population Fund
FINNIDA	- Finnish International Development Agency	UNHCR	- Office of the United Nations High Commissioner for Refugees
IAEA	- International Atomic Energy Agency	UNICEF	- United Nations Children's Fund
IARC	- International Agency for Research on Cancer	UNIDO	- United Nations Industrial Development Organization
ICAO	- International Civil Aviation Organization	UNRWA	- United Nations Relief and Works Agency for Palestine Refugees in the Near East
IFAD	- International Fund for Agricultural Development	UNSCEAR	- United Nations Scientific Committee on the Effects of Atomic Radiation
ILO	- International Labour Organisation (Office)	USAID	- United States Agency for International Development
IMO	- International Maritime Organization	WFP	- World Food Programme
ITU	- International Telecommunication Union	WIPO	- World Intellectual Property Organization
		WMO	- World Meteorological Organization
		WTO	- World Trade Organization

The designations employed and the presentation of the material in this volume do not imply the expression of any opinion whatsoever on the part of the Secretariat of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Where the designation "country or area" appears in the headings of tables, it covers countries, territories, cities or areas.

PREFACE

The ninety-ninth session of the Executive Board was held at WHO headquarters, Geneva, from 13 to 22 January 1997. The proceedings are published in two volumes. The present volume contains the resolutions and decisions,¹ and relevant annexes. The summary records of the Board's discussions, list of participants and officers elected, and details regarding membership of committees and working groups, are published in document EB99/1997/REC/2.

¹ The resolutions have been cross-referenced to the relevant sections of the *WHO Handbook of Resolutions and Decisions*, and both the resolutions and the decisions are grouped in the table of contents under the appropriate subject headings. This is to ensure continuity with the *Handbook*, Volumes I, II and III of which contain most of the resolutions adopted by the Health Assembly and the Executive Board between 1948 and 1992. A list of the dates of sessions, indicating resolution symbols and the volumes in which the resolutions and decisions were first published, is given in Volume III of the *Handbook* (page xiii).

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¹ As adopted by the Board at its first meeting (13 January 1997).

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¹ See summary record of the sixth meeting of Committee A at the Forty-ninth World Health Assembly (document WHA49/1996/REC/3).

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EB99/4	Administration, Budget and Finance Committee of the Executive Board - Report on the fifth meeting
EB99/4 Add.1	Administration, Budget and Finance Committee of the Executive Board - Report on the sixth meeting
EB99/5	Proposed programme budget for the financial period 1998-1999: financial review - Report on casual income
EB99/5 Add.1 ³	Proposed programme budget for the financial period 1998-1999: Financing of the WHO worldwide management information system through the use of casual income - Report by the Director-General
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EB99/11	Amendments to Financial Regulations and Rules - Report by the Director-General
EB99/12	Real Estate Fund - Report by the Director-General ⁴

¹ Issued in Arabic, Chinese, English, French, Russian and Spanish.

² See page xi.

³ See Annex 1.

⁴ See Annex 2, part I.

EB99/12 Add.1	Real Estate Fund: Relocation of the Regional Office for the Eastern Mediterranean from Alexandria to Cairo - Report by the Director-General ¹
EB99/13	Renewing the health-for-all strategy - Summary of an interregional meeting on health for all for the twenty-first century
EB99/14	Review of the Constitution of the World Health Organization - Report of the special group ²
EB99/15	WHO reform: Role of WHO country offices - Report by the Director-General
EB99/16	Personnel policy and practices - Report by the Director-General
EB99/17	WHO reform: Preparation of <i>The world health report 1998</i> and third evaluation of progress in implementation of the global strategy for health for all by the year 2000 - Report by the Director-General ³
EB99/18	Preparation of the Tenth General Programme of work - Report by the Director-General
EB99/19	Implementation of resolutions and decisions - Report by the Director-General
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¹ See Annex 2, part II.

² See Annex 9.

³ See Annex 8.

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EB99/27	Regulations for Expert Advisory Panels and Committees: reporting to the Executive Board - Report by the Director-General
EB99/28	Report on meetings of expert committees and study groups - Report by the Director-General
EB99/28 Add.1	Report on appointments to expert advisory panels and committees - Report by the Director-General
EB99/29	Quality of biological products moving in international commerce - Report by the Director-General ¹
EB99/30	Health informatics and telemedicine - Report by the Director-General
EB99/31	Personnel matters: report of the international Civil Service Commission - Report by the Director-General
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EB99/33	Recruitment of international staff in WHO: geographical representation - Report by the Director-General ²
EB99/34	Personnel matters: Employment and participation of women in the work of WHO - Report by the Director-General ³
EB99/35	Collaboration with nongovernmental organizations: Review of overall policy on collaboration with nongovernmental organizations (1994-1996) - Report by the Director-General
EB99/36	Method of work of the Health Assembly - Report by the Director-General ⁴
EB99/37 Rev.1	Provisional agenda for and duration of the Fiftieth World Health Assembly
EB99/38	Transfer of funds to Voluntary Fund for Health Promotion Special Account for Disasters and Natural Catastrophes - Report by the Director-General
EB99/39	Health systems development for the future - Progress report of the ad hoc working group
EB99/40	Reports of advisory bodies and related issues: Reflections of the past - visions of the future - Report by the WHO Task Force on Health in Development
EB99/41	Confirmation of amendments to the Staff Rules - Report by the Director-General ⁵

¹ See Annex 3.

² See Annex 4.

³ See Annex 5.

⁴ See Annex 7.

⁵ See Annex 6.

EB99/42 Collaboration with nongovernmental organizations: World Tuberculosis Day -
Report by the Director-General

Information documents¹

EB99/INF.DOC./1	Proposed programme budget for the financial period 1998-1999: additional budgetary tables
EB99/INF.DOC./2	Proposed programme budget for the financial period 1998-1999: General review
EB99/INF.DOC./3	Prevention of violence
EB99/INF.DOC./4	Future research agenda
EB99/INF.DOC./5	Statement by the representative of the WHO staff associations
EB99/INF.DOC./6	Preliminary daily timetable for the Fiftieth World Health Assembly
EB99/INF.DOC./7	Personnel matters: Employment and participation of women in the work of WHO
EB99/INF.DOC./8	Proposed programme budget for the financial period 1998-1999: level of programme and administrative support provided by headquarters and the regional offices
EB99/INF.DOC./9	Health informatics and telemedicine
EB99/INF.DOC./10	Confirmation of amendments to the Staff Rules ²
EB99/INF.DOC./11	Proposed programme budget for the financial period 1998-1999: Income from programme support costs and its use
EB99/INF.DOC./12	Proposed programme budget for the financial period 1998-1999: Financing of the WHO worldwide management information system through the use of casual income

¹ Issued in English and French.

² See Annex 6.

RESOLUTIONS

EB99.R1 Appointment of the Regional Director for the Eastern Mediterranean

The Executive Board,

Considering the provisions of Article 52 of the Constitution and Staff Regulation 4.5;

Considering the nomination and recommendation made by the Regional Committee for the Eastern Mediterranean at its forty-third session,

1. REAPPOINTS Dr Hussein A. Gezairey as Regional Director for the Eastern Mediterranean, as from 1 October 1997;
2. AUTHORIZES the Director-General to issue to Dr Hussein A. Gezairey a contract for a period of five years from 1 October 1997, subject to the provisions of the Staff Regulations and Staff Rules.

Hbk Res., Vol. III (3rd ed.), 4.2.5

(Fourth meeting, 14 January 1997)

EB99.R2 Financing of the WHO worldwide management information system through the use of casual income

The Executive Board,

Noting the report of the Director-General on the financing of the WHO worldwide management information system,¹

RECOMMENDS to the Fiftieth World Health Assembly the adoption of the following resolution:

The Fiftieth World Health Assembly,

Having considered the report of the Director-General on the financing of the WHO worldwide management information system from casual income;

Recognizing the importance of adequate funding for the rapid development and implementation of the management information system in order to increase the efficiency of the Organization;

Recognizing the need for the gradual incorporation of recurring costs into the regular budget,

AUTHORIZES the financing of the WHO worldwide management information system at an estimated amount of US\$ 6 145 000 from available casual income.

Hbk Res., Vol. III (3rd ed.), 1.3.1.5

(Eighth meeting, 16 January 1997)

¹ See Annex 1.

EB99.R3 Status of collection of assessed contributions

The Executive Board,

Having considered the report of the Director-General on the status of collection of assessed contributions;¹

Taking into account the genuine difficulties faced by some developing countries arising out of adverse international economic factors beyond their control,

1. EXPRESSES its deep concern at:
 - (1) the continuing high level of contributions outstanding from Member States;
 - (2) the effect of such delays on the programme of work approved by the Health Assembly;
2. URGES Members that are in arrears to pay their outstanding contributions before the Fiftieth World Health Assembly;
3. RECOMMENDS to the Fiftieth World Health Assembly the adoption of the following resolution:

The Fiftieth World Health Assembly,

Noting with concern that, as at 31 December 1996:

- (a) the rate of collection in 1996 of contributions to the effective working budget for that year amounted to 77.72%, leaving US\$ 93 394 425 unpaid;
- (b) only 102 Members had paid their contributions to the effective working budget for that year in full, and 63 Members had made no payment;
- (c) total unpaid contributions in respect of 1996 and prior years exceeded US\$ 169 million,

1. EXPRESSES deep concern at the continuing high level of contributions outstanding, which has had a deleterious effect on programmes and on the financial situation;
2. CALLS THE ATTENTION of all Members to Financial Regulation 5.6, which provides that instalments of contributions shall be considered as due and payable in full by the first day of the year to which they relate, and to the importance of paying contributions as early as possible to enable the Director-General to implement the programme budget in an orderly manner;
3. REMINDS Members that, as a result of the adoption, by resolution WHA41.12, of an incentive scheme to promote the timely payment of assessed contributions, those that pay their assessed contributions early in the year in which they are due will have their contributions payable for a subsequent programme budget reduced appreciably, whereas Members paying later will have their contributions payable for that subsequent programme budget reduced only marginally or not at all;
4. URGES Members that are systematically late in the payment of their contributions to take immediate steps to ensure prompt and regular payment;
5. REQUESTS the Director-General, taking into account developments in other organizations of the United Nations system and in the review of the WHO Constitution, to continue to review all additional

¹ Document EB99/7.

measures that may be appropriate to the circumstances of WHO with a view to ensuring a sound financial basis for programmes and to report on this matter to the 101st session of the Executive Board and the Fifty-first World Health Assembly;

6. FURTHER REQUESTS the Director-General to draw this resolution to the attention of all Members.

Hbk Res., Vol. III (3rd ed.), 6.1.2.4

(Eighth meeting, 16 January 1997)

EB99.R4 Amendments to the Financial Regulations and Rules

The Executive Board,

Having considered the report of the Director-General on the proposed amendments to the Financial Rules,¹

CONFIRMS the following amendments to the Financial Rules:

EXISTING TEXT	AMENDED TEXT
118.1 The Financial Rules also govern credits made available from the Working Capital Fund for unforeseen and extraordinary expenses.	The Financial Rules also govern the Working Capital Fund and its use, which may be determined from time to time by the Health Assembly in accordance with Financial Regulation 6.2. Pursuant to resolution WHA47.20 (1994), the Assembly decided that the Working Capital Fund shall henceforth be used solely for the purpose of financing any regular budget income deficit pending receipt of assessed contributions from Members and Associate Members.
118.2 The term "unforeseen expenses" means expenses arising from, or incidental to, the carrying out of a programme in accord with the policies approved by the World Health Assembly, which expenses were not foreseen when the estimates were made.	Deleted and replaced by existing text under 118.5 below
118.3 The term "extraordinary expenses" means expenses for items or objects outside the scope of the budget estimates, that is to say, outside the programme on which the estimates were based.	Deleted
118.4 Budget and Finance shall be responsible for the preparation of information on the status of all obligations under the resolutions relating to unforeseen and extraordinary expenses to be submitted to the Executive Board and shall prepare the supplementary estimates required in connection therewith for submission to the Health Assembly.	Deleted

¹ Document EB99/11.

EXISTING TEXT	AMENDED TEXT
<p>118.5 In case of exhaustion of the Fund, the amount of internal borrowing provided under Financial Regulation 5.1 shall be recorded in the Working Capital Fund. For the purposes of Financial Regulation 6.3 such internal borrowing shall be closely monitored by the Director-General, to ensure that reimbursements are applied on a first priority basis to the repayment of such advances.</p>	<p>Renumbered 118.2</p>

Hbk Res., Vol. III (3rd ed.), 6.1.1

(Ninth meeting, 17 January 1997)

EB99.R5 Transfer of funds from the Executive Board Special Fund to the Special Account for Disasters and Natural Catastrophes in the Voluntary Fund for Health Promotion

The Executive Board,

Having noted the report of the Director-General on the Executive Board Special Fund,¹

RECOMMENDS to the Fiftieth World Health Assembly the following resolution:

The Fiftieth World Health Assembly

1. AUTHORIZES the transfer of the principal of US\$ 100 000 of the Executive Board Special Fund to the Special Account for Disasters and Natural Catastrophes in the Voluntary Fund for Health Promotion, to be used for emergency humanitarian activities;
2. REQUESTS the Director-General to report on the use of this amount under the Voluntary Fund for Health Promotion in his financial report.

Hbk Res., Vol. III (3rd ed.), 6.1.5; 6.1.9.2

(Ninth meeting, 17 January 1997)

EB99.R6 Real Estate Fund

The Executive Board,

Noting the report of the Director-General on the status of projects being financed from the Real Estate Fund and the estimated requirements of the Fund for the period 1 June 1997 to 31 May 1998,²

RECOMMENDS to the Fiftieth World Health Assembly the adoption of the following resolution:

¹ Document EB99/38.

² See Annex 2, part I.

The Fiftieth World Health Assembly,

Having considered the report of the Director-General on the status of projects financed from the Real Estate Fund and the estimated requirements of the Fund for the period 1 June 1997 to 31 May 1998;

Recognizing that certain estimates must necessarily remain provisional because of the fluctuation of exchange rates,

1. AUTHORIZES the financing from the Real Estate Fund of the expenditures summarized in part III of the Director-General's report, at an estimated cost of US\$ 1 654 000;
2. APPROPRIATES to the Real Estate Fund, from casual income, the sum of US\$ 815 000.

Hbk Res., Vol. III (3rd ed.), 6.1.7

(Ninth meeting, 17 January 1997)

EB99.R7 Relocation of the Regional Office for the Eastern Mediterranean from Alexandria to Cairo

The Executive Board,

Noting the report of the Director-General on the relocation of the Regional Office for the Eastern Mediterranean from Alexandria to Cairo,¹

RECOMMENDS to the Fiftieth World Health Assembly the adoption of the following resolution:

The Fiftieth World Health Assembly,

Having considered the report of the Director-General to the Executive Board on the subject of relocation of the Regional Office for the Eastern Mediterranean from Alexandria to Cairo;

Recognizing that certain estimates must necessarily remain provisional because of the fluctuation of exchange rates,

1. EXPRESSES its appreciation to the Government of Egypt for making available land in Cairo as well as pledging a cash contribution for the purpose of construction of a new building for the Regional Office for the Eastern Mediterranean;
2. ENCOURAGES other Member States of the Region to make similar financial efforts;
3. AUTHORIZES the financing from the Real Estate Fund of the estimated expenditure of US\$ 9 890 000 for the purpose of building new Regional Office premises in Cairo, on the understanding that any costs over and above this estimate would not be met from the regular budget of the Organization;
4. APPROPRIATES to the Real Estate Fund, from casual income, the sum of US\$ 9 890 000.

Hbk Res., Vol. III (3rd ed.), 4.2.5; 6.1.7

(Ninth meeting, 17 January 1997)

¹ See Annex 2, part II.

EB99.R8 Report of the task force on health in development

The Executive Board,

Having examined the report by the task force on health in development;¹

Increasingly concerned that a global health crisis exists in which there is a worsening of health status, especially for the most vulnerable and disadvantaged groups;

Aware that WHO must change if it is to maintain its global leadership role and meet the health challenges of the twenty-first century,

RECOMMENDS to the Fiftieth World Health Assembly the adoption of the following resolution:

The Fiftieth World Health Assembly,

Noting that the WHO Constitution states that “the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition”;

Recalling resolution WHA45.24 on health and development, requesting the Director-General to establish a task force to undertake a comprehensive review and analysis of factors which could improve the health of the most vulnerable and disadvantaged populations;

Having considered the report by the task force on health in development;

Acknowledging that the development of the Tenth General Programme of Work will be affected by matters concerning vision and mandate raised in the report;

Recalling resolutions WHA48.14 and WHA48.16 concerning review of the Constitution of the World Health Organization and renewal of the health-for-all strategy;

Deeply concerned about the worsening health status of many of the world’s most disadvantaged and vulnerable groups;

Recognizing that poverty, unemployment, economic adjustment, and the emergence and re-emergence of health problems add to the health crisis;

Reaffirming that public health measures can be a powerful bridge to peace by helping to mitigate the negative effects of conflict and social and economic inequities;

Aware of the need for global health leadership to provide guidance in responding to the worsening health crisis in a rapidly changing world;

Convinced that WHO is in a unique position as a leader and advocate for global health, and that in this role of global leader WHO will interact with a variety of partners in implementing global health initiatives and programmes;

Convinced also that WHO must continuously adapt its work in order to respond to the public-health and development exigencies of the twenty-first century,

¹ Document EB99/40.

1. COMMENDS the task force on health in development for its commitment and creativity and for producing an excellent action-oriented report;
2. ENDORSES the components of the task force's vision for health leadership in the twenty-first century:
 - (1) to promote a global "agenda for health";
 - (2) to continue to set high standards in health;
 - (3) to monitor changes in health status;
 - (4) to develop health-promotive and disease-preventive diplomacy;
 - (5) to work in partnership to ensure that health status is promoted and protected in economic policies and development strategies;
 - (6) to act as the world's "health conscience";
3. URGES Member States to consider the task force's report in the planning of development strategies, in accordance with the conditions prevailing in each region and country;
4. REQUESTS the Director-General:
 - (1) to take into account the recommendations of the task force in the preparatory discussions for the Tenth General Programme of Work and in the renewal of the health-for-all strategy;
 - (2) to work with the governing bodies, Member governments and partners in health and development to use the recommendations in the task force's report to strengthen WHO's role as the leader in global health in the twenty-first century;
 - (3) to establish a mechanism for monitoring the progress made in incorporating the task force's recommendations in the renewed health-for-all process and in the overall reform and restructuring efforts of WHO;
 - (4) to report to the 101st session of the Executive Board on the above, including the progress made in integrating the recommendations of the task force into programme development in WHO.

Hbk Res., Vol. III (3rd ed.), 7.1.1

(Tenth meeting, 17 January 1997)

EB99.R9 Recruitment of international staff in WHO: geographical representation

The Executive Board,

Having considered the report of the Director-General on the recruitment of international staff in WHO,¹

RECOMMENDS to the Fiftieth World Health Assembly the adoption of the following resolution:

¹ See Annex 4.

The Fiftieth World Health Assembly,

Noting the report and proposals of the Director-General and the views of the Executive Board with regard to the recruitment of international staff in WHO;

Recalling earlier resolutions of the Health Assembly and the Executive Board on the same subject, the last of which was resolution WHA48.28;

Noting that recruitment of nationals from unrepresented and under-represented countries and countries below the mid-point of the range has not yet reached the target of 60%;

Reaffirming that the principles embodied in Staff Regulations 4.2, 4.3 and 4.4 remain the paramount consideration in staff recruitment,

1. DECIDES to maintain the target of 60% of all vacancies arising in professional and higher-graded posts subject to geographical distribution during the period ending September 1999 for the appointment of nationals of unrepresented and under-represented countries and those below the mid-point of the range;
2. CALLS UPON the Director-General and the Regional Directors to pursue energetically their efforts to continue to improve geographical representation;
3. REQUESTS the Director-General to modify the method of calculating desirable ranges by revising the number of posts used in the calculation to 1450;
4. FURTHER REQUESTS the Director-General to report on the recruitment of international staff in WHO to the Executive Board in 2000.

Hbk Res., Vol. III (3rd ed.), 6.2.2.1

(Eleventh meeting, 18 January 1997)

EB99.R10 Employment and participation of women in the work of WHO

The Executive Board,

Having reviewed the Director-General's report on "Employment and participation of women in the work of WHO"¹ and the relevant information circular,²

RECOMMENDS to the Fiftieth World Health Assembly the adoption of the following resolution:

The Fiftieth World Health Assembly,

Noting resolutions WHA48.28 and WHA49.9;

Noting the situation at September 1996 regarding the proportion of women on the staff in established WHO offices and their distribution by grade;

¹ See Annex 5.

² Information Circular IC/97/1.

Noting that the Strategic plan of action (1995-2000),¹ which was endorsed by the United Nations General Assembly in its resolution 49/167 of 23 December 1994, established the overall goal of parity for women by the year 2000, with a target of 25% in policy-level positions (D1 and above) by 1997;

Recognizing the additional value that a balance of male and female staff can bring to the work of the Organization,

1. CALLS FOR the target for representation of women in the professional categories to be increased to 50% in WHO;
2. STRONGLY URGES Member States to support the strategies and efforts of the WHO Secretariat to increase the percentage of women in professional posts, by identifying more women candidates and regularly submitting their candidatures, and by encouraging women to apply for posts;
3. REQUESTS the Director-General and Regional Directors:
 - (1) to ensure full and urgent implementation of the action outlined in the Director-General's report;
 - (2) to raise the minimum thresholds for the recruitment of women;
 - (3) to report annually to the Executive Board on progress in increasing the representation of women in the professional categories.

Hbk Res., Vol. III (3rd ed.), 6.2.2.3

(Eleventh meeting, 18 January 1997)

EB99.R11 Confirmation of amendments to the Staff Rules

The Executive Board

CONFIRMS in accordance with Staff Regulation 12.2 the amendments to the Staff Rules that have been made by the Director-General with effect from 1 January 1997 concerning the primary and secondary dependants' allowances for professional and higher categories of staff, the non-removal element of the mobility and hardship allowance, the salary scale applicable to staff in the professional category and directors' posts, and the rates of staff assessment for the professional and higher-graded staff.²

Hbk Res., Vol. III (3rd ed.), 6.2.1

(Eleventh meeting, 18 January 1997)

EB99.R12 Salaries for ungraded posts and the Director-General²

The Executive Board

RECOMMENDS to the Fiftieth World Health Assembly the adoption of the following resolution regarding salaries of staff in the ungraded posts and of the Director-General:

¹ See United Nations General Assembly document A/49/587, part IV: "Strategic plan of action for the improvement of the status of women in the Secretariat (1995-2000)".

² See Annex 6.

The Fiftieth World Health Assembly,

Noting the recommendations of the Executive Board with regard to remuneration of staff in the ungraded posts and of the Director-General,

1. ESTABLISHES the salary for the posts of Assistant Directors-General and Regional Directors at US\$ 129 524 per annum before staff assessment, resulting in a modified net salary of US\$ 90 855 (dependency rate) or US\$ 82 245 (single rate);
2. ESTABLISHES the salary for the post of Deputy Director-General at US\$ 142 546 per annum before staff assessment, resulting in a modified net salary of US\$ 99 059 (dependency rate) or US\$ 89 069 (single rate);
3. ESTABLISHES the salary for the Director-General at US\$ 175 344 per annum before staff assessment, resulting in a modified net salary of US\$ 119 722 (dependency rate) or US\$ 106 255 (single rate);
4. DECIDES that these adjustments in remuneration shall come into effect on 1 January 1997.

Hbk Res., Vol. III (3rd ed.), 6.2.4.3

(Eleventh meeting, 18 January 1997)

EB99.R13 Programme budgeting and priority-setting

The Executive Board,

Recalling resolutions WHA46.35 and WHA48.25 on budgetary reform;

Thanking the Director-General for the substantial efforts made for budgetary reform in presentation of the programme budget for 1996-1997 and the proposed programme budget for 1998-1999;

Noting the reports of the Programme Development Committee¹ and the Administration, Budget and Finance Committee² on these matters;

Welcoming the continued development of a strategic approach to budgeting in the 1998-1999 proposed programme budget, with notable progress in presentation of targets and products at the global, regional and country levels;

Welcoming the information provided on the links between the proposed regular budget resources and those expected from other sources;

Reiterating the importance of ensuring accountability at all levels of the Organization for health outcomes in accordance with clear objectives;

Noting the need to improve further transparency in associating allocation of resources with priorities recommended by the Executive Board and adopted by the Health Assembly;

¹ Document EB99/3.

² Documents EB99/4 and Add.1.

Recognizing the need to meet increased demands within resource constraints through a tighter focus of programme activities and through more efficient and effective ways of achieving objectives and delivering programmes;

Recalling the agreement between WHO and the United Nations for close administrative, budgetary and financial relationships to ensure the carrying-out of operations in the most efficient and economical manner possible, with maximum coordination and uniformity;

Concerned that the priorities agreed upon by the Executive Board are not adequately reflected in the proposed programme budget for 1998-1999;

Noting with concern the proposed increase of resources for administrative services, and convinced that there may be further scope to reduce overheads and programme administrative costs at all levels, in order to protect funds for priority programmes,

1. COMMENDS the Director-General on progress made in budgetary reform in the proposed programme budget for 1998-1999;
2. REQUESTS the Director-General to take into account the following factors in respect of the proposed programme budget for 1998-1999 where possible and appropriate, and also to future biennial programme budgets:

A. Regarding budget development:

- (1) further to develop clear statements of strategic objectives for all programmes;
- (2) to clarify all targets in terms of measurable products, where feasible;
- (3) to ensure that evaluation mechanisms are extended to all activities of the Organization including the use of WHO collaborating centres, and that results are reported early enough to affect future planning;
- (4) to strengthen the critical analysis of nonfinancial factors that impede or foster achievement of objectives, outcomes, programme delivery, or products;
- (5) to ensure that priorities recommended by the Executive Board and approved by the Health Assembly are reflected at global level and, as appropriate, regional and country level^s in a more coherent programme of work;
- (6) to take full account of health activities and programmes under way at country level with a view to ensuring complementarity and consistency at all levels of the Organization;
- (7) to harmonize and refine the presentation of the financial statements and the proposed programme budget to permit comparison of budgetary allocations with expenditure at each specific programme level;

B. Regarding priority-setting:

- (1) to consider revising the 1998-1999 proposed programme budget for presentation to the Fiftieth World Health Assembly to take into account the comments of the Executive Board and better to reflect, at all levels of the Organization, the priorities recommended by the Board and adopted by the Health Assembly;
- (2) to provide an explanatory report to the Fiftieth World Health Assembly which:

(a) sets out in detail the specific reallocation of funds to achieve the 2% transfer from global and interregional activities to priority programmes at country level (as requested in resolutions WHA48.26 and EB97.R4);

(b) indicates how the priorities recommended by the Executive Board were enhanced by the proposed programme budget for 1998-1999,¹ including the amounts transferred at each level of the Organization to particular programme priorities and to countries in greatest need, and the sources of the budget from which those funds were transferred;

(c) presents administrative costs associated with programme delivery for the major and specific programmes;

(3) to develop an analytical framework to expedite setting and revision of priorities based on WHO's mandate and on global health determinants and challenges;

(4) to propose to the Executive Board a specific process for developing priorities for the Organization as a whole;

C. Regarding budgetary savings:

(1) to propose a systematic policy for savings stemming from improved efficiency which, based on a review of all major programmes, identifies economy measures, administrative savings and new ways of programme delivery with a view to ensuring that best value is attained for available resources in improving the quality of international health, and that maximum funds are allocated to priority programmes;

(2) to seek a savings target through improved efficiency for the proposed programme budget for 1998-1999 over the biennium that could contribute to reallocations for higher priority programmes and/or cost containment;

D. Regarding multilateral coordination:

(1) to seek, taking into account WHO's comparative advantage as the leader in global health, and with a view to making savings through the elimination of duplication and overlapping, maximum coordination with other United Nations and multilateral bodies, including exploration of greater use of common services and premises where appropriate;

(2) to explore additional mechanisms to make savings, such as the development of new partnerships within the United Nations system, with nongovernmental organizations and with WHO collaborating centres.

Hbk Res., Vol. III (3rd ed.), 1.3.1.3; 2.1.1; 2.2.2

(Thirteenth meeting, 20 January 1997)

EB99.R14 WHO collaborating centres

The Executive Board,

Recalling resolutions WHA33.20 and WHA35.10;

¹ Document EB98/1996/REC/1, Annex 2.

Recognizing the expertise and resources devoted to health that are already available in Member States;

Having considered the report of the Programme Development Committee,¹ the reports of the Administration, Budget and Finance Committee² and the proposed programme budget for the financial period 1998-1999;

Aware that in the context of current budgetary constraints, new resources have to be mobilized and that only a more rational utilization of all the resources required for the task of providing expertise will enable the Organization to undertake increasingly diversified and increasingly numerous activities,

RECOMMENDS to the Fiftieth World Health Assembly the adoption of the following resolution:

The Fiftieth World Health Assembly,

Recognizing that in order to exert global health leadership in the twenty-first century in the current budgetary context the Organization must make every effort to create the broadest possible network of "partners for health" in order to make full use of all the skills available at country and regional levels; and to seek new resources and make optimum use of them in order to fulfil its tasks in the twenty-first century within the framework of the new strategy for health for all;

Aware that the collaborating centres represent a source of expertise that deserves to be better utilized and promoted;

Thanking the Director-General for the work accomplished in coordinating the network of collaborating centres at present in existence,

1. URGES Member States:

- (1) to support and develop national centres of expertise so that they may meet the criteria to become a WHO collaborating centre;
- (2) to inform WHO of the existence of these centres of expertise;

2. REQUESTS the Director-General:

- (1) to undertake a situation analysis concerning the existing networks of collaborating centres:
 - (a) to prepare a review of designations and terminations since resolution WHA33.20 and submit it to the Executive Board in January 1998;
 - (b) to review the definition of the functions of the collaborating centres and the procedure for their designation and redesignation;
 - (c) to explore the arrangements between WHO and the collaborating centres, including the option of working through contracts;
 - (d) to review the procedures for and frequency of evaluation of these centres with a view to their redesignation or termination;

¹ Document EB99/3.

² Documents EB99/4 and Add.1.

- (2) to take steps to promote and encourage the emergence of a larger number of collaborating centres in the countries concerned by WHO's priorities and to foster capacity-building programmes in these centres;
- (3) to explore organizational mechanisms within WHO at headquarters and regional level and the various possibilities of funding to ensure the best support for and coordination of the network of centres;
- (4) to report on his findings and recommendations to the 101st session of the Executive Board in January 1998.

Hbk Res., Vol. III (3rd ed.), 1.5

(Thirteenth meeting, 20 January 1997)

EB99.R15 WHO reform: linking the renewed health-for-all strategy with the Tenth General Programme of Work, programme budgeting and evaluation

The Executive Board,

Having considered the summary of an interregional meeting on health for all for the twenty-first century,¹ the report of the Director-General on preparation of the Tenth General Programme of Work,² and the report of the Programme Development Committee;³

Thanking the Director-General and acknowledging the efforts of the steering committee on health-for-all renewal;

Thanking also the participants in the consultation process,

RECOMMENDS to the Fiftieth World Health Assembly the adoption of the following resolution:

The Fiftieth World Health Assembly,

Recalling resolution WHA48.16, which requests the Director-General to take the necessary steps for renewing the health-for-all strategy together with its indicators, by developing a new holistic global health policy based on the concepts of equity and solidarity, emphasizing the individual's, the family's and the community's responsibility for health, and placing health within the overall development framework;

Recognizing that the new global health policy should be based on an intensive consultation process with Member States, and on a practical and socially feasible approach with a view to achieving equity, solidarity, effectiveness and efficiency, paying attention to the rational use of resources;

Recognizing that the attainment of health is greatly influenced by environmental, social, economic and demographic factors which often lie outside the domain of the health sector, and that whereas the link between poverty and ill-health is well established, the fact that rapid urbanization, population movements and environmental degradation are all also likely to contribute to the future burden of disease is less well recognized;

¹ Document EB99/13.

² Document EB99/18.

³ Document EB99/3.

Aware that more realistic targets are required that take into account the social and economic situation of each region;

Anticipating that the renewed health-for-all strategy will concentrate on improving life expectancy and the overall perceived quality of life, reducing morbidity and disability associated with ageing;

Thanking the Director-General for the progress made,

1. PROPOSES that the renewed health-for-all strategy, taking into account regional differences and respecting cultural values should:

(1) be very carefully linked with health programme priorities nationally, regionally and globally, the Tenth General Programme of Work, the budget and the process for its development, the development of plans of action, and evaluation;

(2) become the guiding framework for the development of the Tenth General Programme of Work;

2. URGES all Member States:

(1) to ensure that future health policies include a commitment to equity, "gender sensitivity" and sustainability for future generations, and that implementation of such policies takes into account scientific progress and cultural values and is guided by reliable data and valid assessments to ensure the achievement of objectives;

(2) to make the necessary changes in health services with special emphasis on prevention, including the control of communicable diseases;

(3) to develop and implement integrated strategies for health, focusing on intersectoral initiatives, cost-effectiveness, accessibility and sustainability of health systems; the use of existing, appropriate and affordable new technology; and the use of initiatives based on scientific knowledge or practical evidence;

3. REQUESTS the Director-General:

(1) to use the renewed health-for-all strategy to enhance WHO's leadership in global health matters;

(2) to ensure that the global policy is implemented through plans of action that will have strong international, regional and national components with revised targets and indicators, incorporating overall monitoring and evaluation;

(3) to continue the preparation of the Tenth General Programme of Work closely linked with the preparation of the new policy for health for all for the twenty-first century, providing targets, revised as appropriate, that have been defined within the terms of the new policy, and showing consistency of vision and content;

(4) to ensure that the products, services and functions of the Organization meet well defined criteria which will be specified in the Tenth General Programme of Work and reflected in development, implementation, monitoring and evaluation of the programme budget;

- (5) to optimize the management and use of WHO's human resources to enhance efficiency.

Hbk Res., Vol. III (3rd ed.), 1.1; 1.3.1.1; 1.3.1.3; 2.1.1; 2.2.2

(Thirteenth meeting, 20 January 1997)

EB99.R16 Renewing the health-for-all strategy

The Executive Board,

Recalling resolutions EB99.R5 and WHA48.16 on WHO response to global change: renewing the health-for-all strategy, and noting the steps taken by the Director-General to implement these resolutions;

Underlining the vital importance of the work in progress for future global health policy, and the unique opportunity to use the health-for-all renewal as a platform for clarifying and crystallizing the role and mission of the Organization;

Stressing the crucial importance of an active participatory involvement of Member States and other partners in the preparatory process in order to ensure commitment to the forthcoming global health policy and its subsequent implementation in practice,

1. REQUESTS the Director-General to submit a draft policy for the twenty-first century determining the renewed health-for-all strategy with a view to review by the Board at its 100th session in May 1997;
2. URGES the Director-General to intensify all efforts to expedite the work in progress and to ensure a systematic process of intensive and participatory preparations, coordinated at global level, of the renewed health-for-all strategy with all interested Member States and other relevant bodies between January 1997 and May 1998.

Hbk Res., Vol. III (3rd ed.), 1.1

(Thirteenth meeting, 20 January 1997)

EB99.R17 Elimination of lymphatic filariasis as a public health problem

The Executive Board,

Having considered the report of the Director-General on the control of tropical diseases and the possibility of lymphatic filariasis elimination,¹

RECOMMENDS to the Fiftieth World Health Assembly the adoption of the following resolution:

The Fiftieth World Health Assembly,

Deeply concerned at the widening spread and increased distribution of lymphatic filariasis throughout the world in both urban and rural areas and that it affects all ages and both sexes;

Appreciating with grave concern the human suffering, social stigma and costs to society associated with lymphatic filariasis morbidity;

¹ Document EB99/20.

Recognizing that there is a general lack of awareness concerning this disease and its impact on health status, and that there are insufficient data on its prevalence and distribution;

Welcoming the recent studies which have defined new, simplified, highly effective strategies;

Acknowledging that an international task force on disease eradication has recently identified lymphatic filariasis as one of only six "potentially eradicable" infectious diseases,

1. URGES Member States:

(1) to take advantage of recent advances in the understanding of lymphatic filariasis and the new opportunities for its elimination by developing national plans leading to its elimination, as well as for the monitoring and evaluation of programme activities;

(2) to strengthen local programmes and their integration with the control of other diseases, particularly at the community level, in order to implement simple, affordable, acceptable and sustainable activities based on community-wide treatment strategies, but supplemented where feasible by vector control and improved sanitation;

(3) to strengthen training, research, diagnostic laboratory, disease and data management capabilities in order to improve clinical, epidemiological and operational activities directed toward eliminating lymphatic filariasis as a public health problem;

(4) to mobilize support of all relevant sectors, affected communities and nongovernmental organizations for the elimination of the disease;

2. INVITES other specialized agencies of the United Nations system, bilateral development agencies, nongovernmental organizations and other groups concerned, to increase cooperation in the elimination of lymphatic filariasis through support of national and international programmes relevant to the prevention and elimination of lymphatic filariasis;

3. REQUESTS the Director-General:

(1) to bring to the attention of the other specialized agencies and organizations of the United Nations system, bilateral development agencies, nongovernmental organizations and other groups concerned the need for closer collaboration in the elimination of lymphatic filariasis as a public health problem;

(2) to mobilize support for global and national elimination activities;

(3) to keep the Executive Board and Health Assembly informed as necessary of progress in the implementation of this resolution.

EB99.R18 Malaria prevention and control

The Executive Board,

Having considered the report by the Director-General on the control of tropical diseases and in particular the review of the global malaria situation by the task force on malaria prevention and control,¹

1. THANKS the Director-General for the report and for establishing the task force and also thanks the task force for its work;
2. RECOMMENDS to the Fiftieth World Health Assembly the adoption of the following resolution:

The Fiftieth World Health Assembly,

Recalling resolution WHA49.11, which noted the concern of the Health Assembly regarding the seriousness of the global malaria situation, recognized that further delay in intensifying the struggle against malaria would cost millions more lives, urged Member States to take action, regional committees to ensure that programmes are vigorously pursued, and the Director-General to explore ways and means of intensifying the programme,

1. THANKS the Director-General for his prompt action in establishing a task force to conduct an external review of the malaria problem and progress being made towards control;
2. NOTES that the task force fully endorsed the WHO global malaria control strategy;
3. URGES Member States to renew their political commitment to malaria control, to accord the highest priority to the control of malaria mortality in Africa south of the Sahara and to guarantee core funding and sufficient, technically competent staff and other resources for national programmes;
4. URGES regional committees to fully support the global effort for malaria control by promoting increased political awareness and commitment and ensuring adequate resource allocations.

Hbk Res., Vol. III (3rd ed.), 1.16.3.1

(Fourteenth meeting, 21 January 1997)

EB99.R19 Eradication of dracunculiasis

The Executive Board,

Having considered the report of the Director-General on the control of tropical diseases, being especially impressed at the progress made towards the eradication of dracunculiasis and wanting to ensure that the momentum is maintained until the last cases of dracunculiasis have been contained,¹

RECOMMENDS to the Fiftieth World Health Assembly the adoption of the following resolution:

The Fiftieth World Health Assembly,

Recalling resolutions WHA39.21, WHA42.29, and WHA44.5;

¹ Document EB99/20.

Encouraged by the finding of an international certification team that one country is no longer endemic for dracunculiasis, and indications that a number of other previously endemic countries are no longer affected;

Encouraged by the good progress made through community participation towards global dracunculiasis eradication, including the significant reductions in the number of cases and high levels of case-containment being reported;

Commending the Director-General on the important step taken to establish the International Commission for the Certification of Dracunculiasis Eradication;

Appreciative of the commitment to dracunculiasis eradication shown by endemic countries, and of the help from all those who have been supporting national programmes with integrated surveillance and with the case-containment phase of dracunculiasis eradication;

Concerned about the risk of dracunculiasis resurgence unless interventions are maintained with at least the current intensity in all remaining endemic countries until there are no more cases of the disease;

Concerned that more than 70% of the world's dracunculiasis cases remain in a single country, which is currently experiencing particular difficulties and where insufficient funds for programme activities are available,

URGES all Member States, international and nongovernmental organizations and other appropriate entities to continue to ensure political support and the availability of much-needed resources for completion of eradication of dracunculiasis as quickly as technically feasible and for the International Commission for the Certification of Dracunculiasis Eradication and its work.

Hbk Res., Vol. III (3rd ed.), 1.16.3.3

(Fourteenth meeting, 21 January 1997)

EB99.R20 African trypanosomiasis

The Executive Board,

Having considered the report of the Director-General on the control of tropical diseases with particular reference to African trypanosomiasis,¹

RECOMMENDS to the Fiftieth World Health Assembly the adoption of the following resolution:

The Fiftieth World Health Assembly,

Deeply concerned at the severity of the African trypanosomiasis problem and the danger of epidemics in a number of countries on the African continent;

Well aware that this disease causes death and impedes development, reduces productivity, and affects family, community and State structures;

Recognizing that the disease is curable but that Member States are experiencing a shortage of human, material and financial resources to combat it;

¹ Document EB99/20.

Welcoming WHO's initiative for global collaboration and consideration of action in support of sustainable agricultural development in the context of socioeconomic development,

1. URGES all Member States in endemic areas to reinforce control and surveillance activities and coordinate their actions through a joint OAU/FAO/IAEA/WHO project for global collaboration and coordination of action;

2. REQUESTS the Director-General:

(1) to bring the problem to the attention of the international and national development agencies, emphasizing the need to mobilize further resources and provide substantial and sustained support for effective collaboration;

(2) to expand and intensify the coordination of control and surveillance and the development of human resources, and establish closer links with FAO and OAU;

(3) to ensure that WHO is able to maintain a sufficient stock of equipment and supplies, in particular drugs, to manage emergencies;

(4) to increase awareness among policy-makers, decision-makers, health personnel, development agencies and communities about the problem and the means for its solution, considering the declaration of an African Trypanosomiasis Day as one possible approach.

Hbk Res., Vol. III (3rd ed.), 1.16.3.3

(Fourteenth meeting, 21 January 1997)

EB99.R21 Guidelines on the WHO Certification Scheme on the Quality of Pharmaceutical Products moving in International Commerce

The Executive Board,

Having considered the thirty-fourth report of the WHO Expert Committee on Specifications for Pharmaceutical Preparations,¹

RECOMMENDS to the Fiftieth World Health Assembly the adoption of the following resolution:

The Fiftieth World Health Assembly,

Taking note of previous resolutions on WHO's Certification Scheme on the Quality of Pharmaceutical Products moving in International Commerce, and particularly resolutions WHA45.29 and WHA49.14;

Having reviewed the revised guidelines on implementation of the Certification Scheme which are the result of field trials in a number of WHO Member States and discussions during the sixth and seventh biennial International Conferences of Drug Regulatory Authorities;²

Believing that the adoption of the revised guidelines will provide an important instrument in support of drug registration in the importing country by ensuring access to transparent information on the

¹ WHO Technical Report Series, No. 863, 1996.

² WHO Technical Report Series, No. 863, 1996, Annex 10.

regulatory status of the pharmaceutical product in the exporting country and the true origin of products to be imported,

1. ENDORSES the guidelines for implementation of the WHO Certification Scheme on the Quality of Pharmaceutical Products moving in International Commerce and associated model certification forms;
2. URGES Member States:
 - (1) to implement these guidelines, and to issue and request WHO-type certificates in the form contained in the guidelines as from 1 January 1998;
 - (2) to inform the Director-General of their intent to apply the Scheme and of any significant reservations they intend to express relating to their participation as provided for in article 2.1 of the guidelines.

Hbk Res., Vol. III (3rd ed.), 1.15.3

(Fifteenth meeting, 21 January 1997)

EB99.R22 Quality of biological products moving in international commerce

The Executive Board,

Having considered the report of the ad hoc working group on the quality of biological products moving in international commerce,

RECOMMENDS to the Fiftieth World Health Assembly the adoption of the following resolution:

The Fiftieth World Health Assembly,

Noting the increasing movement across international boundaries of vaccines and other biological products for prevention and/or treatment of diseases, together with the rapid development and introduction into public health programmes of medicines produced by modern biotechnology in both developed and developing countries;

Recalling previous resolutions of the Health Assembly mentioning the vital need to ensure the quality, safety and efficacy of both established and new biological products;

Bearing in mind the responsibility of governments to ensure that biological products, whether imported or manufactured locally, are of good quality;

Recognizing the specialized technical expertise needed for evaluating and controlling biological products;

Recalling the role of WHO in coordinating technical assistance, including assistance given on a bilateral and multilateral basis, and in promoting resource mobilization from various sources, and aware that, according to its Constitution and the decisions of previous Health Assemblies, coordination and advocacy are among WHO's most important functions;

Recognizing that WHO's standardization activities need strengthening to meet the challenges of rapid growth and expansion in the field of biologicals, and also evaluation for any newly observed potential impact such activities may have on international trade as a result of the entry into force of World Trade Organization agreements;

Recognizing the long-standing and valuable role of WHO's biologicals unit and the Expert Committee on Biological Standardization;

Recognizing the report and recommendations of the ad hoc working group on the quality of biological products moving in international commerce as reflected in the Director-General's report,¹

1. URGES all Member States:

- (1) to use only vaccines and other biological products of demonstrated quality, safety and efficacy;
- (2) to adopt, as part of national regulations, requirements published by WHO or equivalent requirements of competent national control authorities to ensure that their products are safe, effective and of good quality;
- (3) to strengthen their national regulatory authorities and national control laboratories;

2. REQUESTS the Director-General:

- (1) to strengthen the mechanism for providing clear norms and active leadership to promote the quality, safety and efficacy of biological and biotechnological products;
- (2) to extend the assistance offered to Member States within the limits of existing resources to develop and to strengthen their national regulatory authorities and control laboratories so as to increase their competence in this area, efforts to upgrade the quality of biological products being focused primarily on increasing the capabilities of national control authorities;
- (3) to revise the approach to the development of requirements and guidelines for biologicals to ensure that the documents focus primarily on principles and essential elements that ensure the safety and efficacy of products, details of specifications, assays, and processes being provided as appendices, as appropriate;
- (4) to review and update existing requirements and guidelines for biologicals and ensure that there is a mechanism to address and resolve rapidly scientific and medical inconsistencies in available documents;
- (5) to expand WHO's interaction with other agencies and increase the use of selected WHO collaborating centres and other organizations in the preparation and review of documents (including draft guidelines and requirements), and in the production of International Reference Materials;
- (6) to ensure that the decisions taken by the WHO Expert Committee on Biological Standardization are widely disseminated in a timely manner;
- (7) to keep Member States informed of the development of new biological products and their potential value and application;
- (8) to serve as the central resource for providing guidance on quality, efficacy and safety of biological products, when requested by a national control authority, and assist in promoting the exchange of information and "networking" of authorities;

¹ See Annex 3.

(9) to review issues of potential conflict of interest and confidentiality as they relate to the application of requirements and guidelines published by WHO, including advice on the acceptability of vaccines intended for purchase by other organizations of the United Nations system;

(10) to convene an independent review of WHO's remit and activities in this field, particularly WHO's biologicals unit, covering *inter alia* how it interacts with other groups with related functions within WHO and externally, with a view to recommending action that will assist in the harmonization of standards and requirements, minimize duplication of activities and enable WHO to respond to scientific developments in a timely manner;

(11) to review the relation between WHO technical reports, requirements, and guidelines and World Trade Organization agreements, in particular, the Agreement on Technical Barriers to Trade, the Agreement on the Application of Sanitary and Phytosanitary Measures, and the Agreement on Trade-related Aspects of Intellectual Property Rights, as they apply to international trade in biological medicinal products, and to prepare a report on this issue for submission to the Executive Board at its 102nd session in May 1998;

(12) to support and assist developing countries in the necessary negotiation process with potential sources of science and technology and resource mobilization.

Hbk Res., Vol. III (3rd ed.), 1.15.3.1

(Fifteenth meeting, 21 January 1997)

EB99.R23 UNICEF/WHO Joint Committee on Health Policy

The Executive Board,

Noting the report of the Director-General¹ containing a proposal that the United Nations Population Fund (UNFPA) be invited to join the UNICEF/WHO Joint Committee on Health Policy established pursuant to resolution WHA1.120 of the First World Health Assembly in July 1948;

Expressing satisfaction over the valuable contributions of the Committee to the improvement of the health of mothers and children over a period of 48 years;

Noting the reforms taking place within the United Nations system and taking into account the leadership role of WHO and the need to ensure cost-effective deployment of resources available for health and to avoid overlapping,

1. APPROVES the proposal that the UNDP/UNFPA Executive Board be invited to join an expanded Committee to be named the "WHO/UNICEF/UNFPA Coordinating Committee on Health";

2. REQUESTS the Director-General:

(1) to transmit this resolution to the Executive Boards of UNICEF and UNDP/UNFPA;

(2) to prepare draft terms of reference for the Committee in continuance of WHO's role as secretariat of the Committee and in consultation with UNICEF and UNFPA, to be presented to the 100th session of the WHO Executive Board in May 1997;

¹ Documents EB99/22 Add.1 and Add.2.

(3) in the interest of efficiency and cost-effectiveness, to give special attention to the content of the agenda and the method of work of the new Committee and to organize the timetable in such a way that matters of direct reference to UNFPA are “clustered” and taken together.

Hbk Res., Vol. III (3rd ed.), 7.1.6

(Sixteenth meeting, 22 January 1997)

EB99.R24 WHO reform: regional arrangements

The Executive Board,

Considering the fundamental changes in political, social and economic conditions and in telecommunication systems throughout the world since WHO’s regional arrangements were established;

Wishing to ensure that the Organization’s regional arrangements adequately respond to such changes, and to strengthen its unity through better coordination between headquarters and the regions;

Noting the crucial importance to Member States of effective arrangements at regional level;

Recalling that the report of the Working Group on the WHO Response to Global Change established by decision EB89(19) addressed options for nomination and terms of office of the Director-General and Regional Directors;¹

Noting the reference to the regional arrangements in the report of the special group established by decision EB97(11);²

Noting the comments of the Executive Board at its ninety-ninth session on current regional arrangements;³

Recognizing the particular interests of Member States in regional arrangements and the need for further consideration of such arrangements within the framework of the existing Constitution,

DECIDES to broaden the mandate of the special group to include questions relating to WHO regional arrangements within the framework of the existing Constitution, with appropriate mechanisms as specified in Rule 3 of the Rules of Procedure of the Executive Board to ensure the participation and input of Member States, and requests the group, as a matter of priority, to report to the 100th session of the Executive Board on progress achieved and to the 101st session on recommendations for action.

Hbk Res., Vol. III (3rd ed.), 4.3

(Sixteenth meeting, 22 January 1997)

¹ Document EB92/1993/REC/1, Annex 1, paragraph 4.2.2.4.

² See Annex 9, paragraph 10 and Appendix 2.

³ See document EB99/1997/REC/2, summary records of the thirteenth meeting, section 3 (end), the fourteenth meeting, section 1 and the sixteenth meeting, section 2.

EB99.R25 Promotion of chemical safety with special attention to persistent organic pollutants

The Executive Board,

Having considered the report of the Director-General on persistent organic pollutants,¹

1. THANKS the Director-General for his timely and positive contribution to the report produced in response to decision 18/32 of the UNEP Governing Council;
2. RECOMMENDS to the Fiftieth World Health Assembly the adoption of the following resolution:

The Fiftieth World Health Assembly,

Having considered the report of the Director-General on persistent organic pollutants;

Recalling resolutions WHA30.47, WHA31.28 and EB63.R19 on the evaluation of the effects of chemicals on health, and resolutions EB73.R10 and WHA45.32 on the International Programme on Chemical Safety;

Noting that the Director-General established in May 1996 a steering committee on sound management of chemicals to coordinate activities related to chemical safety;

Noting that the Memorandum of Understanding between UNEP, ILO and WHO concerning collaboration in the International Programme on Chemical Safety was renewed in 1996;

Noting that, in response to the call of the United Nations Conference on Environment and Development (UNCED) for improved international cooperation on sound management of chemicals, an Inter-Organization Programme for the Sound Management of Chemicals was established in 1995 with six participating organizations (UNEP, ILO, FAO, WHO, UNIDO and OECD), and that WHO is the administering organization;

Noting that, in response to a recommendation made at UNCED and to resolution WHA46.20, an intergovernmental forum on chemical safety was established in 1994 with WHO as the host agency,

1. ENDORSES the recommendations of the Intergovernmental Forum on Chemical Safety to the Health Assembly on persistent organic pollutants, as presented in the report of the Director-General;
2. CALLS UPON Member States:
 - (1) to involve appropriate health officials in national efforts to follow up and implement decisions of the UNEP and WHO governing bodies relating to persistent organic pollutants;
 - (2) to ensure that scientific assessment of risks to health and the environment is the basis for the management of chemical risk;
 - (3) to continue efforts to establish or reinforce national coordinating mechanisms for chemical safety, involving all responsible authorities as well as the nongovernmental organizations concerned;

¹ Document EB99/24.

- (4) to take steps to reduce reliance on insecticides for control of vector-borne diseases through promotion of integrated pest-management approaches in accordance with WHO guidelines, and through support for the development and adaptation of viable alternative methods of disease vector control;
- (5) to establish or strengthen governmental mechanisms to provide information on the levels and sources of chemical contaminants in all media, and in particular in food, as well as on the levels of exposure of the population;
- (6) to ensure that the use of DDT is authorized by governments for public health purposes only, and that, in those instances, such use is limited to government-authorized programmes and that strong steps are taken to ensure that there is no diversion of DDT to entities in the private sector;
- (7) to revitalize measures for training and for increasing public awareness in collaboration with intergovernmental and nongovernmental organizations, in order to prevent poisonings by chemicals and, in particular, pesticides;

3. REQUESTS the Director-General:

- (1) to participate actively in the intergovernmental negotiating committees on persistent organic pollutants, in the drafting of a legally binding instrument for the "prior informed consent" procedure, and in other intergovernmental meetings on issues requiring health expertise, in particular those relating to the use of pesticides for vector control, in order to ensure that international commitments on hazardous chemicals are realistic and effective and that they protect human health and the environment;
- (2) to support research on integrated approaches to the control of vector-borne diseases, including environmental management;
- (3) to continue to support the acceleration and expansion of WHO's activities for the assessment of chemicals risk as a basis for national decision-making on its management, including the joint FAO/WHO programmes on food additives and contaminants and veterinary drug residues and on pesticide residues;
- (4) to cooperate with Member States in facilitating the exchange of information on chemicals utilizing modern technology, especially in the collation and provision of reliable and comparable data, in particular from developing countries, on human exposure, incidents of poisonings and other adverse health effects;
- (5) to take the necessary steps to reinforce WHO's leadership in undertaking risk assessment as a basis for tackling high-priority problems as they emerge, and in promoting and coordinating related research, for example, on potential endocrine-related health effects of exposure to chemicals and on the possible causal links with cancer and reproductive, neurological and immunological disorders;
- (6) to continue efforts to enhance technical cooperation with Member States for the determination of their capacity-building needs, and for the implementation of programmes for the management of chemicals risk, in collaboration with participants in the Inter-Organization Programme for the Sound Management of Chemicals and with other organizations;
- (7) to report on the outcome of the deliberations at the Health Assembly to the UNEP Governing Council;

- (8) to report to a future Health Assembly on progress in implementing this resolution.

Hbk Res., Vol. III (3rd ed.), 1.14.4

(Sixteenth meeting, 22 January 1997)

EB99.R26 Relations with nongovernmental organizations

The Executive Board,

Having examined the report of its Standing Committee on Nongovernmental Organizations,¹

1. DECIDES to establish official relations with the following nongovernmental organizations:

International Association for Dental Research

World Federation of Chiropractic

Project ORBIS International, Inc., known as ORBIS International

Inclusion International

International Association for the Scientific Study of Intellectual Disabilities;

2. NOTES that the Joint Commission on International Aspects of Mental Retardation is defunct and that, consequently, official relations are discontinued.

Hbk Res., Vol. III (3rd ed.), 7.2.3

(Seventeenth meeting, 22 January 1997)

EB99.R27 World Tuberculosis Day

The Executive Board,

Having considered the report of the Director-General;²

Encouraged by the success of World Tuberculosis Day 1996 in involving a number of new "constituencies", including governments, nongovernmental organizations and other associations and communities in the fight against tuberculosis,

RECOMMENDS to the Fiftieth World Health Assembly the adoption of the following resolution:

The Fiftieth World Health Assembly,

Recalling resolutions WHA44.8 and WHA46.36 on the tuberculosis programme;

Encouraged by the success and the spirit of international collaboration manifested on World Tuberculosis Day, 24 March 1996, commemorating the day in 1882 on which Dr Robert Koch officially informed the scientific community that he had discovered the tuberculosis bacillus,

¹ Document EB99/32.

² Document EB99/42.

REQUESTS the Director-General to coordinate the observance of World Tuberculosis Day on 24 March of each year as an opportunity throughout the world for organizations concerned to raise public awareness of tuberculosis as a major urgent public health problem and for countries to assess progress in tuberculosis control.

Hbk Res., Vol. III (3rd ed.), 1.16.7

(Seventeenth meeting, 22 January 1997)

EB99.R28 Method of work of the Health Assembly and proposed amendments to its Rules of Procedure

The Executive Board,

Having considered the report of the Director-General on the method of work of the Health Assembly,¹

RECOMMENDS to the Fiftieth World Health Assembly the adoption of the following resolution:

The Fiftieth World Health Assembly,

Having considered the report of the Director-General on the method of work of the Health Assembly;

Recalling resolution WHA20.2 concerning arrangements for the conduct of the general discussion in plenary meetings on the reports of the Executive Board and the Director-General, resolution EB71.R3 concerning, *inter alia*, the focus of such discussion, resolution WHA32.36 concerning, *inter alia*, preparation of the provisional agenda of regular sessions of the Health Assembly by the Executive Board and resolution WHA36.16 concerning, *inter alia*, the opening meeting of the Health Assembly;

Recalling also the decision of the Forty-eighth World Health Assembly to transfer resources from governing bodies to priority programmes, and the consequent need to shorten the duration of the Health Assembly;

Noting the proposed programme budget for the financial period 1998-1999 and the provision for sessions of the Health Assembly contained therein,

1. APPROVES the following arrangements for the conduct of the discussion in plenary meetings on the report of the Executive Board and *The world health report* (incorporating the annual report of the Director-General):

- (1) delegates are requested to limit to five minutes their statements in such discussions;
- (2) delegates wishing to do so may submit prepared statements of not more than 600 words for inclusion in the verbatim records of the plenary meetings;
- (3) the statements should focus on the theme of *The world health report*;

2. DECIDES:

- (1) that the Executive Board, when preparing the provisional agenda of each Health Assembly, shall normally include individual technical programme items in the agenda of the Health Assembly

¹ See Annex 7.

as separate items only in the years when the Health Assembly does not undertake a full review of the proposed biennial programme budget, thus allowing more time for such technical items;

(2) that reports on technical programme items which the Director-General has been requested to submit in budget years by previous resolutions of the Health Assembly shall henceforth be submitted in non-budget years;

3. DECIDES also that the opening meeting of the Health Assembly shall be held at 10:00 on the opening day, followed by the meeting of the Committee on Nominations, the second plenary meeting, and the meeting of the General Committee, so as to permit the third plenary meeting to take place as early on the opening day as possible;

4. DECIDES further to amend Rules 24, 25 and 101 of the Rules of Procedure of the Health Assembly to read as follows:

Rule 24

The Committee on Nominations of the Health Assembly shall consist of twenty-five delegates of as many Members.

At the beginning of each regular session the President shall submit to the Health Assembly a list consisting of twenty-four Members, to comprise ~~with the President, ex officio, the~~ Committee on Nominations. Any Member may propose additions to such list. On the basis of such list, as amended by any additions proposed, a vote shall be taken in accordance with the provisions of those Rules dealing with elections.

The President of the Health Assembly shall preside over meetings of the Committee on Nominations. The President may designate a member of his delegation as his substitute in his capacity as member during a meeting or any part thereof.

Meetings of the Committee on Nominations shall be held in private.

Rule 25

The Committee on Nominations, having regard to an equitable geographical distribution and to experience and personal competence, shall propose (a) to the Health Assembly from among the delegates nominations for the offices of the President and five vice-presidents of the Health Assembly, for the offices of chairman of each of the main committees, and for the members of the General Committee to be elected under Rule 31, and (b) to each of the main committees set up under Rule 34, nominations from among the delegates for the offices of the two vice-chairmen and rapporteur. The President shall submit an initial list of proposals as set forth above for consideration by the Committee on Nominations. Any member of the Committee may propose additions to such list. On the basis of such list, as amended by any additions proposed, the Committee shall, in accordance with the provisions of Rule 80, determine its list of nominations which shall be forthwith communicated to the Health Assembly or to the main committees respectively.

Rule 101

At the commencement of each regular session of the Health Assembly the President shall request Members desirous of putting forward suggestions regarding the annual election of those Members to be entitled to designate a person to serve on the Board to place their suggestions before

the General Committee. Such suggestions shall reach the Chairman of the General Committee not later than twenty-four hours after the President has made the announcement in accordance with this Rule.

Hbk Res., Vol. III (3rd ed.), 3.1.2; 3.1.3

(Seventeenth meeting, 22 January 1997)

DECISIONS

EB99(1) Appointment of a representative of the Executive Board at the Fiftieth World Health Assembly

The Executive Board appointed Dr A.Y. Al-Saif as a representative of the Board at the Fiftieth World Health Assembly, in addition to its Chairman, Mr S. Ngedup, *ex officio*, and Professor A. Aberkane and Dr Y.-S. Shin, who were already appointed at its ninety-eighth session.

(First meeting, 13 January 1997)

EB99(2) Reports of the Programme Development Committee and the Administration, Budget and Finance Committee

The Executive Board noted the reports of the Programme Development Committee (PDC)¹ and the Administration, Budget and Finance Committee (ABFC)² and endorsed the conclusions of PDC concerning the programme evaluation process, plans of action, and review and evaluation of specific programmes. The Board also endorsed conclusions concerning review of Health Assembly resolutions and concerning criteria and methods for their evaluation.

(Second meeting, 13 January 1997)

EB99(3) Members in arrears in the payment of their contributions to an extent which would justify invoking Article 7 of the Constitution

The Executive Board, having considered the report of the Director-General on Members in arrears in the payment of their contributions to an extent which would justify invoking Article 7 of the Constitution,³ while agreeing that the provision of services should continue uninterrupted, requested the Director-General to continue his efforts to collect the unpaid arrears of contributions from the Members concerned and to report further on this matter to the Administration, Budget and Finance Committee at its meeting immediately prior to the Fiftieth World Health Assembly, in order to enable the Committee to formulate recommendations to the Health Assembly, on the Board's behalf, based on the provisions of resolution WHA41.7 and the status of the arrears at that time.

(Eighth meeting, 16 January 1997)

¹ Document EB99/3.

² Documents EB99/4 and Add.1.

³ Document EB99/8.

EB99(4) Preparation of *The world health report 1998* and third evaluation of progress in implementation of the Global Strategy for Health for All by the Year 2000

The Executive Board, having considered the report of the Director-General on the world health report and third evaluation of the implementation of the Global Strategy for Health for All by the Year 2000,¹ decided to recommend to the Health Assembly that the global report on the third evaluation and ninth report on the world health situation should be incorporated in *The world health report 1998*, and that there should no longer be separate reports on the world health situation.

(Eleventh meeting, 18 January 1997)

EB99(5) Review of the Constitution of the World Health Organization: report of the special group

The Executive Board, noting the report of the special group on the review of the Constitution of the World Health Organization,² endorsed its recommendations (1) to (4), it being understood that the scope of recommendation (3) would be further considered promptly by the group in the light of the discussions in the Programme Development Committee and in the Board before implementation.

(Fourteenth meeting, 21 January 1997)

EB99(6) Reproductive health

The Executive Board took note of the report of the Director-General on reproductive health³ and approved the renaming of the "Special Account for Maternal Health and Safe Motherhood" as the "Special Account for Reproductive Health Technical Support" under the Voluntary Fund for Health Promotion.

(Fourteenth meeting, 21 January 1997)

EB99(7) Award of the Léon Bernard Foundation Prize

The Executive Board, having considered the report of the Léon Bernard Foundation Committee, awarded the Léon Bernard Foundation Prize for 1997 to Academician E.I. Čazov (Russian Federation) for his outstanding service in the field of social medicine.

(Fifteenth meeting, 21 January 1997)

EB99(8) Award of the Dr A.T. Shousha Foundation Prize and Fellowship

The Executive Board, having considered the report of the Dr A.T. Shousha Foundation Committee, awarded the Dr A.T. Shousha Foundation Prize for 1997 to Professor M.K. Gabr (Egypt) for his outstanding contribution to the improvement of the health situation in the geographical area in which Dr Shousha served the World Health Organization.

¹ See Annex 8.

² See Annex 9.

³ Document EB99/19, section V.

The Board awarded the Dr A.T. Shousha Foundation Fellowship to Dr N.A. El-Ashry (Egypt).

(Fifteenth meeting, 21 January 1997)

EB99(9) Award of the Ihsan Dogramaci Family Health Foundation Prize

The Executive Board, having considered the report of the Ihsan Dogramaci Family Health Foundation Committee, awarded the Ihsan Dogramaci Family Health Foundation Prize for 1997 to Mrs S. Nazarbayeva (Kazakstan) for her service in the field of family health.

(Fifteenth meeting, 21 January 1997)

EB99(10) Award of the Sasakawa Health Prize

The Executive Board, having considered the report of the Sasakawa Health Prize Committee, awarded the Sasakawa Health Prize for 1997 to the Mongar Health Services Development Project (Bhutan) for outstanding innovative work in health development. The Board noted that the Mongar Health Services Development Project would receive US\$ 40 000.

(Fifteenth meeting, 21 January 1997)

EB99(11) Award of the Francesco Pocchiari Fellowship

The Executive Board, having considered the report of the Francesco Pocchiari Fellowship Committee, awarded the Francesco Pocchiari Fellowship for 1997 to Dr M. Kassaye (Ethiopia) in order to enable him to acquire relevant research experience in another country.

(Fifteenth meeting, 21 January 1997)

EB99(12) Award of the United Arab Emirates Health Foundation Prize

The Executive Board, having considered the report of the United Arab Emirates Health Foundation Committee, awarded the United Arab Emirates Health Foundation Prize for 1997 to Dr A.R.A. Al-Awadi (Kuwait) and Dr R. Salvatella Agrelo (Uruguay) for their outstanding contribution to health development. The Board noted that Dr Al-Awadi and Dr Salvatella Agrelo would each receive US\$ 20 000.

(Fifteenth meeting, 21 January 1997)

EB99(13) Report on meetings of expert committees and study groups

The Executive Board considered and took note of the Director-General's report on the meetings of the following expert committees:¹ WHO Expert Committee on Comprehensive School Health Education and Promotion (Promoting health through schools),² WHO Expert Committee on Specifications for Pharmaceutical

¹ Document EB99/28.

² WHO Technical Report Series (in proof).

Preparations, thirty-fourth report,¹ and Joint FAO/WHO Expert Committee on Food Additives, forty-fifth report (Evaluation of certain veterinary drug residues in food).² It thanked the experts who had taken part in the meetings and requested the Director-General to follow up their recommendations, as appropriate, in the implementation of the Organization's programmes, bearing in mind the discussion in the Board.

(Fifteenth meeting, 21 January 1997)

EB99(14) Report of the ad hoc working group on health systems development for the future

The Executive Board endorsed the approach taken by the ad hoc working group on health systems development for the future³ and requested the group to continue its work and submit a final report to the 100th session of the Board; the report should not only highlight the needs of countries in health systems development but also review WHO's current capacity and propose ways in which WHO's efforts at country, regional and headquarters level might be most usefully directed through an expanded international initiative for research, training and action.

The Board recommended that health systems development should be the theme of *The world health report 1999*.

(Fifteenth meeting, 21 January 1997)

EB99(15) Report of the UNICEF/WHO Joint Committee on Health Policy

The Executive Board took note of the report of the UNICEF/WHO Joint Committee on Health Policy on its special session, held in Geneva on 15 and 16 May 1996,⁴ and endorsed the recommendations made by the Committee, stressing the importance of the commitment of political will and resources required to accelerate action for attainment of the health-related goals set by the World Summit for Children for the end of the decade.

(Sixteenth meeting, 22 January 1997)

EB99(16) Reports of the Joint Inspection Unit

The Executive Board, having considered the reports of the Joint Inspection Unit entitled "Accountability, management improvement, and oversight in the United Nations system, Parts I and II", "A review of telecommunications and related information technologies in the United Nations system", "Investigation of the relationship between humanitarian assistance and peace-keeping operations", "United Nations system support for science and technology in Asia and the Pacific", and "Evaluation of the United Nations new agenda for the development of Africa in the 1990s (UN-NADAF) - Towards a more operational approach?", thanked the Joint Inspection Unit for its reports and expressed its agreement with the Director-General's comments thereon.⁵ It

¹ WHO Technical Report Series, No. 863, 1996.

² WHO Technical Report Series, No. 864, 1996.

³ Document EB99/39.

⁴ Document JCHPSS/96.5.

⁵ Document EB99/25.

requested the Director-General to transmit those comments to the Secretary-General of the United Nations, the members of the Administrative Committee on Coordination, the Chairman of the Joint Inspection Unit, and the External Auditor of WHO, for their information and perusal.

(Seventeenth meeting, 22 January 1997)

EB99(17) Review of nongovernmental organizations in official relations with WHO

The Executive Board, having considered the report of its Standing Committee on Nongovernmental Organizations,¹ decided to maintain official relations with 56 of the 63 nongovernmental organizations reviewed at its ninety-ninth session. It welcomed with thanks the contribution of these nongovernmental organizations to the work of WHO in such diverse fields of mutual interest as drugs and biologicals, clinical and laboratory technology, radiation medicine, tropical diseases, immunization, prevention of blindness and deafness, veterinary public health, and noncommunicable diseases.

Relations with the Joint Commission on International Aspects of Mental Retardation and its two constituting bodies, the International League of Societies for Persons with Mental Handicap, now called Inclusion International, and the International Association for the Scientific Study of Mental Deficiency, now called International Association for the Scientific Study of Intellectual Disabilities, are the subject of resolution EB99.R26.

Regarding the remaining four nongovernmental organizations, the Board noted with regret that collaboration and exchanges during the period under review had considerably diminished with the International Federation of Physical Medicine and Rehabilitation and the World Federation of Parasitologists, and that no joint activities had been realized with the International Society for Human and Animal Mycology, and the World Veterans Federation. However, in taking due note of expressions of interest in revitalizing joint collaboration, the Board decided that these nongovernmental organizations be maintained in official relations for a further year in order to permit each nongovernmental organization to develop concrete plans for collaboration with WHO.

The Board also recommended that the nongovernmental organizations in official relations be listed according to the current Classified List of Programmes and accordingly requested the Director-General to inform the nongovernmental organizations, as appropriate, of the implications.

(Seventeenth meeting, 22 January 1997)

EB99(18) Review of overall policy on collaboration with nongovernmental organizations

The Executive Board thanked the Director-General for his report on review of overall policy on collaboration with nongovernmental organizations (1994-1996)² and, in view of the potential importance of a number of issues highlighted in the report for the further enhancement of WHO's relations with nongovernmental organizations, decided to request the Director-General to prepare a further report for consideration by the Board at its 101st session, assessing the present situation, considering the advantages and disadvantages, as well as the financial implications, of broadening WHO's policy on official relations with nongovernmental organizations, and providing possible policy options.

(Seventeenth meeting, 22 January 1997)

¹ Document EB99/32.

² Document EB99/35.

EB99(19) Provisional agenda for and duration of the Fiftieth World Health Assembly

The Executive Board approved the Director-General's proposals, as amended, for the provisional agenda of the Fiftieth World Health Assembly.¹ Recalling its earlier decision² that the Fiftieth World Health Assembly should be held in the Palais des Nations, Geneva, Switzerland and open on Monday, 5 May 1997 at 10:00, the Board decided that it should close no later than Wednesday, 14 May 1997.

(Seventeenth meeting, 22 January 1997)

EB99(20) Date and place of the 100th session of the Executive Board

The Executive Board decided that its 100th session should be convened on Thursday, 15 May 1997 at WHO headquarters, Geneva, Switzerland and should close no later than the following day, Friday 16 May 1997.

(Seventeenth meeting, 22 January 1997)

¹ Documents EB99/37 Rev.1 and EB99/INF.DOC./6.

² Decision EB98(12).

ANNEXES

ANNEX 1

Proposed programme budget for the financial period 1998-1999

Financing of the WHO worldwide management information system through the use of casual income¹

Report by the Director-General

[EB99/5 Add.1 - 6 January 1997]

The Executive Board Working Group on the WHO Response to Global Change recommended that the Organization should possess a wholly supportive and efficient information system based on monitoring and evaluation of programmes and their outcome, as well as other essential information. A development plan for the WHO worldwide management information system (MIS) was submitted to the ninety-sixth session of the Executive Board in May 1995 with the recommendation of the Director-General to the effect that the plan should be implemented as quickly as possible. The Director-General also stated that he would review the "optimum mix" of funding from the regular budget and other possible sources in order to ensure implementation over five years. The Board decided, *inter alia*, to request the Director-General to proceed rapidly with the implementation of the management information system as outlined in the development plan.²

Considerable efforts have already been made to ensure rapid development and implementation of the system; progress has been reported regularly to the Executive Board.

This document proposes that casual income be used to cover part of the development and implementation costs of the system.

INTRODUCTION

1. Since the approval in decision EB96(3) of the development plan for the WHO management information system (MIS) by the Executive Board at its ninety-sixth session in May 1995, the Director-General decided, in response to the urgent need to meet the request of the Health Assembly to monitor and evaluate the activities of WHO in terms of Ninth General Programme of Work targets, that the activity management system (AMS) component should be developed quickly. The work started in September 1995 and the first version of AMS was delivered in March 1996. Some progress with the other two components of MIS, the "WHO policy information

¹ See resolution EB99.R2.

² Decision EB96(3).

retrieval system” (see document EB99/DIV/11) and “Summary information on global health trends” (SIGHT), has also been made (see “Current status and future work” below). Resources have so far mainly been provided through the Director-General’s Development Programme, under the regular budget, and under the Special Account for Servicing Costs. The Director-General seeks the authorization of the Executive Board for the use of casual income to meet immediate needs for part of the initial development and implementation costs of the management information system.

CURRENT STATUS AND FUTURE WORK

Activity management system (AMS)

2. Improvements have been made to the first version of AMS delivered in March 1996; and the enhanced system is being tested, with a trial run in three regional offices and eight headquarters programmes. Improvements will continue as the trial users feed back their experiences to the developers. The system is conceived as a managerial tool to help plan, programme and monitor technical progress as well as resource utilization of WHO’s collaborative activities with Member States, and to collect data for evaluation purposes. The system is flexible enough to cope with the planning, monitoring and reporting requirements of different WHO offices and funding agencies. Training of users is vital and should not be limited to the use of the computer software, but should include the new concept of management as described in the Ninth General Programme of Work, i.e., the “product-oriented” management processes. Successful implementation of AMS in WHO will depend largely on the quality of the training provided to the users, and sufficient resources must be allocated for this purpose. The system was developed using advanced informatics technology, for which the Organization’s staff need to be trained. The upgrading of computer hardware and software may also be needed in some offices, particularly those of WHO Representatives.

3. As many of WHO’s activities take place at the country level, the managerial processes at that level must also be monitored where they differ from the regional office or headquarters levels; it is proposed that a country version of AMS be developed rapidly to allow the WHO Representatives’ offices to be aligned with the rest of the AMS users throughout the Organization. Such a country system will be easier to apply and maintain at country level.

4. Some of the existing systems related to AMS, e.g., the fellowships management system, will have to be modernized to provide sufficient and timely information to AMS.

WHO policy information retrieval system

5. The first version of this system, which will contain *inter alia* all Health Assembly and Executive Board resolutions from 1948, available regional committee resolutions, *Basic documents*, including the WHO Constitution, various numbers in the “Health for all” series and the programme budget for 1996-1997, was to be operational by the end of January 1997. The work to provide access to the system via the Internet using the World Wide Web server will start soon. This will require use of consultants and the acquisition of hardware and software, including the commercial software for the search engine to allow easy searching of the text by words or phrases. As the documents in the Organization were not prepared in a standard format in the past, establishment of the database requires considerable work by experienced temporary personnel. Successive versions are planned for 1997.

Summary information on global health trends (SIGHT)

6. The system will provide synthesized data and textual information on the global health situation, backed up by the relevant databases on specific diseases. A common data structure for the different databases will be developed to ensure a standard data set. This development will require extensive consultations throughout the Organization, which will be followed by development of a prototype.

OVERALL FINANCING OF MIS

7. The initial development of the system has cost approximately US\$ 5 million and further investments of approximately US\$ 5 million per year will be needed until the year 2000. Other priority needs are pressing, and use of the regular budget and the Special Account for Servicing Costs to cover all of the work will present particular difficulties. It is thus proposed that casual income be used to fund certain elements over the next 24 months. The cost breakdown for the amounts to be used from casual income is given in the following section.

COST ESTIMATES FOR THE USE OF CASUAL INCOME

8. The cost of the proposed work is estimated as follows:

Category	Total US \$
Consultants (33 months - for systems analysis, architecture and quality control)	429 000
Temporary staff (160 months - development, roll-out and maintenance of systems)	1 270 000
Training/workshops for approximately 1000 regional office and headquarters staff	780 000
Coordination (travel costs of WHO Representatives and regional office and headquarters staff)	315 000
Hardware and software (limited number of workstations, servers and printers for WHO Representatives, regional offices and headquarters; development software)	1 730 000
Contractual fees (software development and training material)	1 621 000
Total	6 145 000

ACTION BY THE EXECUTIVE BOARD

9. [This paragraph contained a draft resolution which was adopted at the eighth meeting as resolution EB99.R2.]

ANNEX 2

Real Estate Fund¹

Report by the Director-General

PART I

[EB99/12 - 8 November 1996]

I. STATUS OF PROJECTS UNDERTAKEN OR TO BE UNDERTAKEN PRIOR TO 31 MAY 1997

Regional Office for Africa

1. The project for the replacement of the wiring in the print shop in the Regional Office for Africa has been reviewed by a consulting engineer, bids have been received and the contract has been awarded. The work was expected to be completed by the end of 1996 and to remain within the previously estimated amount of US\$ 100 000.²
2. An order has been placed for the replacement of the main passenger lift in the Regional Office, and the costs are not expected to exceed the previously estimated amount of US\$ 130 000.²
3. The specifications for the replacement of the air-conditioning unit for the computer and print rooms in the Regional Office have been confirmed and the work has started. It was expected that the project would be completed in early 1997 within the previously estimated cost of US\$ 120 000.³

Regional Office for the Americas/Pan American Sanitary Bureau

4. The construction of the Caribbean Programme Coordination office in Barbados was under way and was to be completed by the end of 1996. The estimate for this project was made in 1993 for a total cost of US\$ 1 300 000, of which the contribution from the Real Estate Fund was expected to be US\$ 325 000.⁴ The revised estimate was set at US\$ 1 607 445 and the share from the Real Estate Fund accordingly increased to US\$ 401 860.

¹ See resolutions EB99.R6 and EB99.R7.

² Document WHA48/1995/REC/1, Annex 4, p. 70 (see also document WHA49/1996/REC/1, Annex 1, p. 35).

³ Document WHA48/1995/REC/1, Annex 4, p. 71 (see also document WHA49/1996/REC/1, Annex 1, p. 35).

⁴ Document WHA49/1996/REC/1, Annex 1, p. 35.

5. There has been no further major development for the construction of the PAHO/WHO Representative's office in Mexico since the last report to the Executive Board. The cost to the Real Estate Fund should not exceed the previously estimated amount of US\$ 250 000.¹

Regional Office for South-East Asia

6. Negotiations with the local government authorities for the addition of one floor to the Regional Office building are still under way. It is not clear at this stage when final approval will be obtained. The costs of the project should remain within the previously estimated amount of US\$ 145 000.¹

7. The air-conditioning plant for the Regional Office has been installed. As reported earlier, the cost for this project was higher than the initially estimated amount of US\$ 250 000.¹ It has now been completed at a cost of US\$ 300 000.

8. The renovation/restructuring of the Regional Office building commenced and it was expected to complete the project in early 1997 within the previously estimated amount of US\$ 400 000.¹

Regional Office for Europe

9. The project for the improvement of security arrangements in the Regional Office has been completed within the previously estimated amount of US\$ 150 000.¹

Regional Office for the Eastern Mediterranean

10. During the forty-second session of the Regional Committee for the Eastern Mediterranean in October 1995 the Government of Egypt offered to make a plot of land available to WHO in Cairo for the construction of a new Regional Office building. The Administration, Budget and Finance Committee of the Executive Board carefully reviewed this question in May 1996 and it was recommended to the Forty-ninth World Health Assembly that it approve the principle of transfer of the Regional Office from Alexandria to Cairo (see resolution WHA49.8). It was further recommended that a thorough financial analysis of this proposal be made for further review by the Executive Board prior to any final recommendation to the Health Assembly.

11. [The requested analysis was submitted to the Executive Board in the addendum to this report (see Part II below).]

Regional Office for the Western Pacific

12. Work on the renovation of the main conference hall of the Regional Office for the Western Pacific was to start in early 1997 and be completed by the middle of the year within the previously estimated amount of US\$ 406 000.²

Headquarters

13. The work on the new structures and installations of the sub-basement of the headquarters building is progressing satisfactorily. The project was to be completed by the end of 1996 within the previously estimated Swiss franc equivalent of US\$ 1 780 000,² adjusted to reflect Swiss franc/US dollar exchange rate fluctuations.

14. Work on the replacement of the headquarters Local Area Network (LAN) continues to progress satisfactorily. The contract for the hardware components has been adjudicated. The new LAN was to be put into operation in phases starting in autumn 1996, the last phase being foreseen for June 1998. It should be

¹ Document WHA49/1996/REC/1, Annex 1, p. 36.

² Document WHA49/1996/REC/1, Annex 1, p. 37.

completed within the previously estimated Swiss franc equivalent of US\$ 6 765 000,¹ adjusted to reflect Swiss franc/US dollar exchange rate fluctuations.

II. ESTIMATED REQUIREMENTS FOR THE PERIOD 1 JUNE 1997 TO 31 MAY 1998

Regional Office for Africa

15. The Regional Office compound at Djoué, which is about 20 km from Brazzaville, receives its water supply from the city mains. The growth of the city, the distance of the compound and the condition of the pipes together result in a very precarious water supply to the Regional Office and the staff residences surrounding it. There have been serious water-supply interruptions in the recent past, some lasting for over six days.

16. In order to overcome this difficulty, it is proposed to create a 120-m³ reservoir of water on the compound. The estimated cost of this project is US\$ 160 000.

17. The main conference hall of the Regional Office was extended in 1982 to accommodate the increased size of meetings. However, since that time there has been an increase in the number of Member States in the African Region and also a greater participation of organizations of the United Nations system and nongovernmental organizations at regional committee sessions. It is also the intention to hold the regional committee sessions in the Regional Office every year instead of only in alternate years.

18. The present hall was built to accommodate 200 persons; at the last meeting held in it 270 participants had to be accommodated. In addition to the discomfort of the participants, such a situation is not acceptable for reasons of security.

19. It is consequently proposed to extend and renovate the hall a second time. The length will be increased by 8 m and along with some rearrangement of the seating will increase the capacity of the conference hall to 300 places.

20. The cost of this extension is presently estimated at US\$ 400 000.

21. The compound of Djoué, housing the Regional Office and the staff residences, has no access to a public sewerage infrastructure. The compound relies on a series of outdated septic tanks, which must now be changed. It is therefore proposed to create sufficient modern septic tanks with built-in water treatment. The estimated cost of this project is US\$ 313 000.

22. The roofing of the Regional Office has undergone periodic and selective repair since the construction of the building. It is now at a stage that requires complete review and renovation using modern materials that are more suitable to the climate, with excessive heat and torrential rains. In order to preserve the building envelope and structure, it is proposed to replace the water-proofing of the roof at an estimated cost of US\$ 288 000.

23. The Regional Office building has a completely outdated and inadequate security lighting arrangement which is now also no longer up to the statutory standards required for office buildings. In addition, the building has no fire detection equipment. Both factors make adequate insurance conditions difficult to obtain. It is therefore intended to install a modern security lighting system and fire detection equipment at an estimated cost of US\$ 298 000.

24. The present exterior lighting of the Djoué compound is not under WHO control despite the fact that the compound is occupied entirely by WHO staff. The lighting is not maintained and has become defective. For

¹ Document WHA49/1996/REC/1, Annex 1, p. 37.

reasons of security for staff and their families it is important that adequate and reliable lighting be provided on the compound. The estimated cost of this project is US\$ 195 000.

III. SUMMARY

25. To summarize, on the basis of the foregoing considerations the estimated requirements of the Real Estate Fund for the period 1 June 1997 to 31 May 1998 are as follows:

	US \$
- Creation of a reservoir for fresh-water supply for the compound housing the Regional Office for Africa and surrounding residences	160 000
- Extension of the main conference hall of the Regional Office for Africa	400 000
- Creation of septic tanks for waste disposal for the Regional Office for Africa and the residences surrounding it	313 000
- Replacement of the water-proofing of the roof of the Regional Office for Africa	288 000
- Installation of security lighting and fire detection equipment inside the Regional Office for Africa	298 000
- Installation of external lighting in the compound housing the Regional Office for Africa and surrounding residences	195 000
Total estimated requirements	1 654 000
Estimated unencumbered balance of the Real Estate Fund, including accrued interest, as at 31 December 1996 (see Appendix) rounded off at	839 000

IV. ACTION BY THE EXECUTIVE BOARD

26. [The Board adopted as resolution EB99.R6 the text presented in this paragraph, with its recommendation to the Health Assembly.]

Appendix

REAL ESTATE FUND
ESTIMATED SITUATION AS AT 31 DECEMBER 1996

(expressed in US dollars)

	1 January 1970 - 31 December 1993	1994-1995	1996 ^a	Total (from inception)
1. BALANCE AT END OF PERIOD	-	3 160 172	11 875 877	-
2. INCOME				
Balance of Revolving Fund for Real Estate Operations (resolution WHA23.14)	68 990	-	-	68 990
Casual income appropriated (resolutions WHA23.15, WHA24.23, WHA25.38, WHA28.26, WHA29.28, WHA33.15, WHA34.12, WHA35.12, WHA36.17, WHA37.19, WHA39.5, WHA42.10, WHA43.6, WHA44.29, WHA46.22)	23 059 186	-	-	23 059 186
resolutions WHA47.25, WHA48.22	-	9 412 250	-	9 412 250
Transfer from Part II of the Working Capital Fund (resolution WHA23.15)	1 128 414	-	-	1 128 414
Rents collected	7 305 988	734 258	314 000	8 354 246
Interest	5 591 935	620 020	470 000	6 681 955
Other	1 567	-	-	1 567
Total income	37 156 080	10 766 528	784 000	48 706 608
Total funds available	37 156 080	13 926 700	12 659 877	-
3. OBLIGATIONS AND EXPECTED OBLIGATIONS (see Attachment to this Appendix)	33 995 908	2 050 823	11 820 706	47 867 437
4. BALANCE AT 31 DECEMBER	3 160 172	11 875 877	839 171	839 171

^a Estimated.

Attachment

REAL ESTATE FUND
OBLIGATIONS AND EXPECTED OBLIGATIONS FROM INCEPTION
(1 JANUARY 1970) TO 31 DECEMBER 1996

(expressed in US dollars)

Purpose	Relevant authorization (resolution/decision)	Obligations			
		1 Jan 1970-31 Dec 1993	1994-1995	1996 ^a	Total
1. Maintenance, repairs and alterations to houses for staff	WHA23.14, para. 3(i)				
Regional Office for Africa		4 687 557	425 841	292 837	5 406 235
Regional Office for the Eastern Mediterranean		181 055	14 727	5 300	201 082
		4 868 612	440 568	298 137	5 607 317
2. Major repairs, and repairs to the Organization's existing buildings	WHA23.14, para. 3(ii)				
Headquarters:					
Current repairs		903 101	-	-	903 101
Restoration of the structural safety of the eighth floor of the main building	WHA35.12 & WHA36.17	363 193	-	-	363 193
Renovation of the headquarters roofing and the technical installations built thereon	WHA39.5	335 757	-	-	335 757
Remodelling of the headquarters eighth floor	WHA39.5	1 550 363	-	-	1 550 363
Replacement of the telephone exchange	WHA42.10	2 174 135	30 475	14 058	2 218 668
Replacement of the Freon gas in the air-conditioning system	WHA47.25	-	-	-	-
Strengthening of the supporting structure below the access road to the headquarters building	WHA47.25	-	698 993	612 507	1 311 500
Replacement of Local Area Network (LAN)	WHA48.22	-	-	7 100 200	7 100 200
Renovation of sub-basement	WHA48.22	-	102 586	1 680 033	1 782 619
Regional Office for Africa		1 716 220	866	349 134	2 066 220
Regional Office for the Americas		382 720	110 250	-	492 970
Regional Office for South-East Asia		497 528	319 323	432 247	1 249 098
Regional Office for Europe		1 536 921	86 571	131 152	1 754 644
Regional Office for the Eastern Mediterranean		157 816	-	-	157 816
Regional Office for the Western Pacific		892 922	-	406 000	1 298 922
		10 510 676	1 349 064	10 725 331	22 585 071
3. Acquisition of land, construction/extension of buildings	WHA23.14, para. 3(iii)				
Headquarters					
Main building:					
Transfer to Headquarters Building Fund for part settlement of litigation with Compagnie française d'Entreprise	WHA23.18	655 140	-	-	655 140
Acquisition of land	WHA23.17	1 000 095	-	-	1 000 095
Second prefabricated building	WHA24.22	689 791	-	-	689 791
Third prefabricated building	WHA28.26	1 799 575	-	-	1 799 575
Architectural studies for proposed extension of main building	WHA24.22 & WHA25.38	243 832	-	-	243 832
Alterations to "V" building	WHA33.15	102 658	-	-	102 658
Additional car park	WHA33.15	104 564	-	-	104 564
Construction of a building to house the kitchen and restaurant	WHA36.17	2 728 844	-	-	2 728 844

^a Estimated.

Purpose	Relevant authorization (resolution/ decision)	Obligations			
		1 Jan 1970- 31 Dec 1993	1994-1995	1996 ^a	Total
Regional Office for Africa					
Construction of additional staff housing	WHA23.16	936 937	-	-	936 937
First extension of Regional Office building	WHA23.16	751 585	-	-	751 585
Second extension of Regional Office building	WHA28.26	930 588	-	-	930 588
Acquisition of land for additional staff housing	WHA24.24	13 517	-	-	13 517
Conversion of staff housing	WHA34.12	292 955	-	-	292 955
Construction of small office building and staff housing in Malabo, Equatorial Guinea	WHA34.12	599 287	-	-	599 287
Third extension of Regional Office building	WHA37.19	863 552	-	-	863 552
Purchase of five staff houses in Namibia	WHA43.6	354 351	-	-	354 351
Replacement of the telephone exchange	WHA44.29	1 001 197	257 704	1 974	1 260 875
Regional Office for the Americas					
Construction of Zone Office, Brasilia (WHO's contribution)	WHA25.39	100 000	-	-	100 000
Construction of a building for the Caribbean Food and Nutrition Institute (WHO's contribution)	WHA35.12	300 000	-	-	300 000
Construction of an office for the Caribbean Programme Coordination office, Barbados	WHA47.25	-	-	401 860	401 860
Construction of an office for the PAHO/WHO Representative in Mexico	WHA47.25	-	-	250 000	250 000
Regional Office for South-East Asia					
Extension of Regional Office building	WHA24.25	137 331	-	-	137 331
Fire-fighting equipment and emergency generator	WHA28.26	63 172	-	-	63 172
Installation of new telephone exchange	Dec.EB63(8)	120 557	-	-	120 557
Extension of Regional Office building, including new air-conditioning plant and electrical substation	WHA34.12	673 497	-	-	673 497
Additional stand-by generator	WHA35.12	84 791	-	-	84 791
Addition of one floor to the Regional Office building ..	WHA45.9	1 596	-	143 404	145 000
Regional Office for Europe					
Renovation of additional premises:	WHA27.15 &				
39 Strandpromenaden	WHA29.28	93 213	-	-	93 213
33 Strandpromenaden	Dec.EB63(8)	91 546	-	-	91 546
Installation of new telephone exchange	WHA29.28	190 000	-	-	190 000
Preliminary architectural study for extension of Regional Office building	WHA34.12	63 707	-	-	63 707
Lift and toilet facilities for disabled persons in the Regional Office	WHA34.12	38 102	-	-	38 102
Regional Office for the Eastern Mediterranean					
Extension of Regional Office building	WHA25.40	39 634	-	-	39 634
Additional extension of Regional Office building	WHA38.9	190 000	-	-	190 000
Architectural study for the extension of Regional Office building	WHA41.13	10 000	-	-	10 000
Construction of an annex at the Regional Office	WHA43.6	599 813	-	-	599 813
Regional Office for the Western Pacific					
Installation of fire detection and control equipment	WHA27.16	25 097	-	-	25 097
Extension of Regional Office building	WHA29.28	537 437	-	-	537 437
Additional extension of Regional Office building	WHA33.15	1 090 141	-	-	1 090 141
Construction of an annex at the Regional Office	WHA43.6	1 098 518	3 487	-	1 102 005
Total - Acquisition of land, construction/extension of buildings		18 616 620	261 191	797 238	19 675 049
TOTAL OBLIGATIONS AND EXPECTED OBLIGATIONS		33 995 908	2 050 823	11 820 706	47 867 437

^a Estimated.

PART II

Relocation of the Regional Office for the Eastern Mediterranean from Alexandria to Cairo

[EB99/12 Add.1 - 19 December 1996]

[This document had 12 annexes showing, *inter alia*, details of space requirements, cash flows and expected installation expenditures.]

INTRODUCTION

1. The Administration, Budget and Finance Committee of the Executive Board recommended to the Forty-ninth World Health Assembly in May 1996 that:¹
 - (a) the Health Assembly should approve the principle of the relocation of the Regional Office for the Eastern Mediterranean from Alexandria to Cairo;
 - (b) the Executive Board at its ninety-ninth session in January 1997 should be provided with a thorough financial analysis of the proposals;
 - (c) the matter should be brought up again before the Fiftieth World Health Assembly in May 1997, in the light of the Board's recommendation.
2. In accordance with paragraph 1(b) above, the Director-General submits the following report for consideration by the Executive Board, with a view to making a recommendation to the Fiftieth World Health Assembly.

SPACE REQUIREMENTS FOR THE NEW BUILDING IN CAIRO

3. The total space requirement of 6440 m² for the Regional Office for the Eastern Mediterranean for the next 10 years, based on United Nations Joint Inspection Unit norms, represents an increase of 33% over its present accommodation of 4831 m², spread over eight different sites in Alexandria.

ARCHITECTURAL SCHEMATIC DESIGN REPORT

4. On the basis of the above requirements, a group of engineering consultants has produced a schematic design report for construction of a building on the 5000 m² site made available by the Government of Egypt. The design provides for a basement, ground floor and seven higher floor levels with a building height of 37 m above ground level. It is proposed that all floors up to the fourth and part of the fifth should be finished internally immediately in order to provide current space requirements, whereas the sixth and seventh floors should only have the outer shell, for completion at a later date, as required.
5. [A file with the complete building description, preliminary design criteria and floor plans was made available for perusal by members of the Board.]

¹ Document A49/34.

SCHEDULING OF THE CONSTRUCTION PROJECT

6. The consultants have provided two-year and three-year alternative construction projects, with detailed activity description and scheduling for each, and for the preliminary design phase spanning nine months.

PRELIMINARY ESTIMATES OF THE COST OF CONSTRUCTION

7. A preliminary cost estimate based on the design report for the proposed building indicates that construction costs would amount to 29 000 000 Egyptian pounds, which is the equivalent of US\$ 8.6 million at the present official United Nations accounting rate of exchange of 3.37. The estimate takes into account present prices in Cairo and does not include preparation of the final design, tender documents, architect's fees, building supervision costs, etc., or inflation. In recent years construction costs have increased by 6% to 8% per annum in Egypt. A precise figure will only be available once bids are obtained on the basis of a detailed tender document, the establishment of which is a costly procedure that cannot be entered into prior to the Board's recommendation on the project.

8. For the purposes of consideration by the Board, however, and on the basis of the consultants' report, it is estimated that the total cost of the project would be in the order of US\$ 9.89 million, composed of construction costs at 1996 prices (US\$ 8.6 million), a flat cost increase provision of 10% (US\$ 0.86 million) and a flat provision of 5% (US\$ 0.43 million) for fees related to completion of the design and tender documents, evaluation of tender documents, architect's fees, building supervision and related costs. The costs of furnishings, equipment and other non-real-estate expenditure will be met from the regional budget.

PROJECTED CASH FLOW

9. A tabular presentation of monthly disbursements and the month-by-month cumulative projected cash flow of construction costs for the two- and three-year options was made, with charts showing the projected end-quarter cumulative cash flow for each. The charts are based on the assumption that construction starts on 1 January 1998. The two-year option indicates that US\$ 2.8 million would be paid out by the end of 1998, US\$ 7.6 million by the end of 1999 and the remainder from the first quarter of the year 2000. The three-year option indicates a total cash outlay of US\$ 2.5 million by end 1998, US\$ 3.4 million by end 1999, US\$ 7.8 million by end 2000 and the remainder by the first quarter of the year 2001.

10. The cash-flow statements and charts are based on the following assumed payment arrangements:

- (a) an advance payment of 20% of the total contract value would be paid to the selected contractor immediately after the contract award;
- (b) interim payments would be made to the selected contractor one month after approval of payment certificates and would consist of the value of the certificate less a deduction of 20% to offset the advance payment and a further deduction of 10% to be retained and paid over to the contractor one month following the hand-over period;
- (c) prior to awarding the contract the proposed contractor would be required to submit bank guarantees to cover performance security and the advance payment, and would be the subject of a credit rating check.

LEASE/PURCHASE/RENT OPTIONS

11. During its review of the proposal the Administration, Budget and Finance Committee of the Executive Board, in its report to the Forty-ninth World Health Assembly, recommended that WHO also explore other alternatives such as rental and lease/"buy-back" arrangements. Lease arrangements are generally not available

in Egypt and, in any event, are not considered appropriate in the context of the Regional Office building since the plot of land is rented to the Organization for a renewable period of 30 years, at the nominal annual sum of one Egyptian pound per square metre. The text of the decree specifying this was issued by the Prime Minister of Egypt on 13 September 1996. A letter specifies that the period of 30 years is renewable.

12. The possibility of rent rather than purchase has also been considered. There are not many alternatives in Cairo in terms of suitable accommodation for an office of the size and nature of the Regional Office for the Eastern Mediterranean. The cost of renting an appropriate office building with 6500 m² of working area, if available, would be in the range of US\$ 28 million to US\$ 45 million (for a 30-year period) at current prices of US\$ 12 to US\$ 19 per square metre per month. This does not take into account possible yearly rent increases.

POSSIBILITY OF EXTRABUDGETARY SOURCES OF FINANCING

13. The Government of Egypt has pledged a donation of one million Egyptian pounds (approximately US\$ 300 000) towards the start-up costs of construction. At its forty-third session, held in October 1996, the Regional Committee for the Eastern Mediterranean called upon other Member States to follow the example set by the host Government and requested the Executive Board to take appropriate action to secure the funds needed for construction.

MOVING COSTS

14. It is not possible to present a precise figure for the one-time cost of moving staff and offices from Alexandria to Cairo in view of inflation, currency realignments, eventual compensation payments and the like. In view of the unprecedented move of a regional office to another location and with a view to maintaining the efficiency of the office by retaining the institutional memory and experience of long-serving staff, it is proposed to award those general service staff who agree to move to Cairo similar reassignment and installation allowances to those of professional staff. They will none the less maintain their status of locally recruited general service staff. Preliminary estimates, based on certain assumptions, indicate that the one-time additional moving cost might amount to approximately US\$ 2.7 million. The expenditure would be charged to the regional budget.

RECURRENT COSTS

15. As a result of differences in post adjustment between Alexandria and Cairo and in general service salary scales and staff allowances, it is expected that the annual recurrent costs would be approximately US\$ 1.1 million, to be met from the regional budget.

ANNUAL SAVINGS

16. The annual savings on travel between Cairo and Alexandria are estimated at US\$ 278 000.

TEMPORARY EFFECTS OF PARALLEL OPERATIONS IN ALEXANDRIA AND CAIRO OFFICES

17. There would be a transition period of three to six months during which it would be necessary to have some operations running in parallel in the Alexandria and Cairo offices. This is not expected to add substantially to the cost of the move and would also be met from the regional budget.

RECAPITULATION OF COSTS

18. Estimated costs are as follows:

Purpose	Cost US\$	Source of funds
Construction	8 600 000	Real Estate Fund
Cost increase	860 000	Real Estate Fund
Architect's fees	430 000	Real Estate Fund
Furnishings and equipment	not available	Regional budget
Move to Cairo (one-time)	2 700 000	Regional budget
Recurrent costs (per annum)	1 100 000	Regional budget
Parallel operations	not available	Regional budget
Savings in travel (per annum)	(278 000)	Regional budget
Pledge by the Government of Egypt	(300 000)	Regional budget

CONCLUSION

19. The offer by the Government of Egypt to allocate land in Cairo and its pledge of one million Egyptian pounds come after more than a decade of uncertainty over plans to expand the Regional Office for the Eastern Mediterranean in Alexandria. There is no doubt that the relocation of the Office to Cairo would enable WHO, and particularly the Regional Office, to provide more effective and efficient support to Member States. This is the only WHO Regional Office not located in the capital city of the host country. The fact that travel between Cairo and Alexandria adds three to four hours to travel time, in addition to unavoidable overnight stays in Cairo, was a critical factor in the Regional Committee's decision to accept the offer of the Government of Egypt. The presence of the Office in the capital of Egypt would permit close coordination and collaboration with appropriate Egyptian Government offices, embassies of Member States as well as representatives and offices of other international organizations and United Nations agencies which are based in Cairo. Proximity to embassies of donor countries as well as the World Bank and other international institutions, would be more conducive to resource mobilization. The improved functionality of the new building and equipment and opportunity for modern technology will undoubtedly increase the efficiency of the Regional Office. For these reasons it is believed that the capital cost of construction and the one-time and recurring costs are a worthwhile investment and would have substantial long-term benefits for the Member States of the Region and the Organization.

20. At the forty-third session held in October 1996, the Regional Committee for the Eastern Mediterranean requested the Executive Board by resolution EM/RC43/R.3 to recommend the appropriation of funds for the proposed building. In this connection it will be recalled that, as compared with other regional offices, the Regional Office for the Eastern Mediterranean has made little use of the Real Estate Fund over the years. It is also to be noted that an amount of US\$ 2 381 000 was appropriated by resolution WHA43.6 in May 1990 for the construction of an annex in Alexandria. This project was subsequently cancelled and authorization for the use of the unused balance of funds in the amount of US\$ 1 781 187 lapsed.

ACTION BY THE EXECUTIVE BOARD

21. [The Board adopted resolution EB99.R7 along the lines of a text contained in this paragraph, with the addition of the clause qualifying operative paragraph 3.]

ANNEX 3

Quality of biological products moving in international commerce¹

Report by the Director-General

[EB99/29 - 19 November 1996]

The Forty-ninth World Health Assembly recognized and endorsed the aim and intentions of a draft resolution on the quality of biological products moving in international commerce. It recommended to the Director-General that he convene an ad hoc working group to study the technical and legal implications of the draft resolution and to report to the Executive Board at its ninety-ninth session in January 1997.² An ad hoc working group was therefore convened in Geneva on 4 and 5 October 1996. This document reports on the group's findings and recommendations for consideration, and notes that additional funds would be required for implementation of the recommendations and that therefore alternative sources of funding would need to be considered, including fees for services.

1. An ad hoc working group was convened by the Director-General in accordance with decision WHA49(11). Dr F.S. Antezana, Assistant Director-General, acted as Chairman, Dr I. Gust, Australia, acted as Rapporteur and Dr E. Griffiths, Chief, Biologicals, was the Secretary.
2. Dr Antezana described the background of the meeting and explained its purpose of assisting the Director-General to respond to a request from the Forty-ninth World Health Assembly to study the technical and legal implications of a draft resolution on the quality of biological products moving in international commerce.
3. It was also explained that WHO, through its Biologicals unit and the four International Laboratories for Biological Standards, together with the Expert Committee on Biological Standardization, is responsible for:
 - (1) the development, evaluation, establishment and distribution of a range of International Reference Materials for biologicals;
 - (2) the publication of guidelines and requirements for the production and quality control of specific biologicals; these documents guide national health authorities and serve as a basis for deciding on the acceptability of biologicals, thus facilitating their exchange between countries.

¹ See resolution EB99.R22.

² Decision WHA49(11) on quality of biological products moving in international commerce.

4. During a wide-ranging discussion, while there was broad agreement with the concept that many Member States needed independent advice from WHO and other bodies to assist in selecting biological products for local use, differing views were expressed on the mechanism to be used. Although incorporation of WHO requirements into national health regulations had proved useful for many countries, concern was expressed that recent changes in international trade laws could result in the requirements having the status of international standards, perhaps requiring some countries to license products which would not meet the standards set by their own national control authority.

5. The group encouraged the Director-General to seek a solution which would meet the intent of the draft resolution without the danger of inadvertently creating trade disputes, to review potential issues of conflict of interest and confidentiality as they relate to the application of requirements and guidelines published by WHO, and to provide advice on the acceptability of vaccines intended for purchase by organizations of the United Nations system.

6. Many countries find the information contained in guidelines and requirements published by WHO invaluable for the guidance of national control authorities and manufacturers. The group recommended that WHO should continue to publish such guidance but that its documents should focus on principles and essential elements that ensure product safety and efficacy, and that the finer details of specifications, assays and processes be presented as appendices or references. It is important that recipients recognize that such data are intended for guidance and are not prescriptive.

7. Attention was drawn to the difficulties encountered by WHO in continuing to fulfil its mandate in biological standardization at a time when products are being developed at an unprecedented rate. Many new techniques are being introduced and the resources available to the Organization and its collaborators are decreasing. Given that WHO's role concerning biologicals was established almost 50 years ago, the group suggested that it was time to review the role of the responsible unit, the scope of its activities, its mechanisms for establishing priorities, and its links with other bodies having related functions. It was suggested that this could be accomplished by an independent high-level review, perhaps along the lines of the recent scientific review of biological standardization and control conducted on behalf of the National Biological Standards Board of the United Kingdom of Great Britain and Northern Ireland.

8. The group made the following recommendations to the Director-General (the recommendations appear as approved by the group):

- (1) *revise [the] approach to the development of Requirements and Guidelines for Biologicals to ensure that the documents focus on principles and essential elements that ensure product safety and efficacy. Details of specifications, assays and processes could be provided as appendices or references, as appropriate.*
- (2) *review and update existing Requirements and Guidelines for Biologicals and ensure that there is a mechanism to rapidly address and resolve scientific and medical inconsistencies in available documents.*
- (3) *convene an independent review of the remit and operation of BLG¹ including how it interacts with other groups with related functions within the Organization and externally. The review should recommend actions that will assist in the harmonization of standards and requirements and minimize duplication of activities.*
- (4) *maximize its influence by expanding its interaction with other Agencies and increase the use of selected WHO collaborating centres and other organizations in the preparation and review of*

¹ The Biologicals unit in WHO.

documents (including draft guidelines and requirements) and production of WHO International Reference Materials.

- (5) review the relationship between its technical reports, requirements and guidelines and the impact of WTO agreements on international trade of biological medicinal products. In addition, the Group encouraged the Director-General to seek an outcome to decision WHA49(11) which would capture the intent of the draft resolution without the danger of inadvertently creating unnecessary trade disputes.*
- (6) when requested by an NCA,¹ serve as the point of reference for quality, efficacy and safety of biological products. Efforts to upgrade the quality of biological products should focus primarily on increasing the capabilities of NCAs. When requested, WHO should assist in networking of authorities and promoting exchange of information.*
- (7) review issues of potential conflict of interest and confidentiality as they relate to the application of WHO Requirements and Guidelines including advice on the acceptability of vaccines intended for purchase by UN agencies.*
- (8) respond rapidly to new issues affecting the safety and efficacy of biological products and provide balanced reports on specific issues including risk-benefit considerations.*
- (9) note that the spreading of technology and scientific capabilities throughout developing countries will require an enormous resource mobilization which is clearly beyond WHO financial possibilities. However, WHO should set that goal and stress its importance. WHO has an advocacy role in supporting and assisting developing countries in the necessary negotiation process with potential sources of science and technology and resource mobilization.*

ACTION BY THE EXECUTIVE BOARD

9. The Board may wish to consider the above recommendations, bearing in mind that additional funds will be required for implementation. The Board may wish to provide guidance regarding sources of funding, including fees for services.

[After reviewing this report, the Board, at its fifteenth meeting, adopted resolution EB99.R22.]

¹ National control authority.

ANNEX 4

Recruitment of international staff in WHO: geographical representation¹

Report by the Director-General

[EB99/33 - 11 November 1996]

METHODOLOGY

1. Resolution WHA48.28 requested, *inter alia*, that the Director-General report on the recruitment of international staff in WHO to the Executive Board and the Health Assembly in 1998. However, since that time, the Director-General has reviewed the number of posts considered to be geographically distributable and believes that it would be appropriate to revise the figure from 1600 to 1450 in order to take into account the reduction in the number of posts in the Organization that occurred in 1995-1996. The figure of 1450 posts would therefore be used to establish the desirable ranges for the two-year period from September 1996 to September 1998.
2. The present formula for calculating equitable geographical distribution within WHO follows that of the United Nations. However, the number of posts considered geographically distributable is determined by the Health Assembly. Additional Member States are automatically accommodated in the formula. The number of posts to be used in the formula was last determined in 1993 when the Health Assembly, in resolution WHA46.23, requested the Director-General to revise the number of posts used in the calculation of desirable ranges to 1600.
3. For purposes of geographical distribution, the practice in WHO has been to count virtually all non-linguistic professional and higher-graded posts, regardless of their location or source of funding, except those of IARC and PAHO.
4. Consequently, if the new figure of 1450 posts is adopted, the elements of the WHO formula would be as follows:
 - (1) total number of posts: 1450 (previously 1600);
 - (2) membership factor: 3.0208333 posts per country (total 580, previously 640 posts);
 - (3) contribution factor: 7.975 posts for each 1% contributed (total 797.50 posts, previously 880);
 - (4) population factor: 0.0123280 posts for each 1 million population (total 72.50 posts, previously 80; total population 5 880 790 000, previously 5 618 330 000);

¹ See resolution EB99.R9.

(5) upper and lower limits of each desirable range: increase and decrease mid-point by 15% or 2.5781 posts, whichever is greater;

(6) the resulting upper and lower figures are rounded respectively up and down to the nearest whole number, subject to a minimum upper limit of 8 and a minimum lower limit of 1.

5. Sample calculations are shown in Table 1.

6. The ranges are being updated on the basis of the WHO scale of assessments for the financial period 1996-1997 adopted by resolution WHA48.20 and subsequent amendments made by resolution WHA48.19 in respect of the assessment rate of a new Member. The population figures used in the calculation of individual ranges are taken from the same source as that used by the United Nations¹ and reflect the 1997 estimated demographic data. The resulting status of countries is indicated in Table 2.

GEOGRAPHICAL REPRESENTATION: THE POSITION IN SEPTEMBER 1996

7. The evolution of geographical representation is indicated in Table 3, which shows for each Member State (1) the revised desirable range for September 1994 as set out in document EB95/1995/REC/1, Annex 8, Table 5; (2) the number of nationals on the staff in September 1994; (3) the degree of representation in September 1994; (4) the number of appointments of nationals since September 1994; (5) the number of nationals "separated" since September 1994; (6) the number of nationals on the staff in September 1996; and (7) the degree of representation in September 1996.

8. The total number of Members as at 30 September 1996 was 192. This included two Associate Members (Puerto Rico and Tokelau). Since September 1994, there has been one new Member State, Palau.

9. The following table reflects the changes in representation of countries that occurred during the period September 1994 to September 1996.

Unrepresented countries		Under-represented countries		Over-represented countries		Countries within the range	
September 1994	September 1996	September 1994	September 1996	September 1994	September 1996	September 1994	September 1996
48	51	12	16	22	7	109	118

10. Lists of unrepresented countries, under-represented countries, countries within the range and over-represented countries as at September 1996 are contained in Table 4.

11. There has been a marked reduction in the number of nationals of over-represented countries in excess of the upper limits of desirable ranges - from 74 in September 1994 to 22 in September 1996 (a reduction of 70.3%). A detailed breakdown of these figures by country and region is given in Table 5.

¹ *World population prospects, 1994* (revised). New York, United Nations, 1995.

RECRUITMENT TARGETS AND EVOLUTION IN GEOGRAPHICAL REPRESENTATION

12. Resolution WHA48.28 sets a target to ensure that 60% of all appointments to posts subject to geographical distribution should be of nationals of unrepresented or under-represented countries, and those below the mid-point of the desirable range.

13. In the period September 1994 to September 1996, 181 appointments to posts subject to geographical distribution were made (see Table 3), of which 59, or 33%, were of nationals of unrepresented or under-represented countries and 41, or 23%, were nationals of countries within the range below the mid-point, making a total of 56%.

14. The following 18 countries have moved to the adequately represented category (within the range):

three from the unrepresented category (Djibouti, Eritrea, Grenada);

15 from the over-represented category (Argentina, Cameroon, Colombia, Ethiopia, India, Jordan, Myanmar, Nepal, Netherlands, Pakistan, Philippines, Sri Lanka, Sudan, Tunisia, United Kingdom).

15. Conversely, nine countries have moved from the adequately represented category:

six to the unrepresented category (Bhutan, Botswana, Cyprus, Malta, Saint Vincent and the Grenadines, Singapore);

three to the under-represented category (Italy, Mexico, Poland).

DESIRABLE RANGES

16. It is recalled that, as a result of resolution WHA42.12, the formula for establishing desirable ranges is as follows:

(1) 40% of the total number of posts is assigned to the **membership factor** and therefore distributed equally among all Members;

(2) 55% of the total number of posts is assigned to the **contribution factor** and therefore distributed in proportion to the scale of assessments;

(3) 5% of the total number of posts is assigned to the **population factor** and distributed to Member States in direct proportion to their population;

(4) the mid-point of the desirable range for each country is the arithmetical sum of the three factors listed above;

(5) the upper and lower limits of the desirable range for each country are the greater of (a) 15% of the mid-point, or (b) 0.1778% of all posts, above and below the mid-point;

(6) the upper limit of the desirable range is subject to a minimum figure representing 0.51852% of all posts.

SUMMARY AND CONCLUSION

17. The number of professional staff in geographically distributable posts by nationality and grade at September 1996 is given in Table 6.

18. During the period under review, the number of unrepresented countries increased by three owing, in part, to the advent of one new Member State; the number of under-represented countries increased by four; the number of over-represented countries decreased by 15; and the number of countries within the range increased by nine.

19. Although the target of 60% for recruitment from unrepresented and under-represented countries and those below the mid-point of the range is within sight (56%), the Director-General and the Regional Directors are determined to continue to make every effort to recruit suitable staff from unrepresented and under-represented countries and to maintain the following priorities:

- (1) first priority will continue to be given to the intensification of recruitment from unrepresented and under-represented countries;
- (2) second priority will be given to recruitment from countries with representation within the range but below the mid-point;
- (3) third priority will be given to recruitment from adequately represented countries.

ACTION BY THE EXECUTIVE BOARD

20. [This paragraph contained a draft resolution which was adopted at the eleventh meeting as resolution EB99.R9.]

TABLE 1
SAMPLE CALCULATIONS OF DESIRABLE RANGES

A. A country contributing 0.01%, with 187 000 population:

Membership factor		3.0208333
Contribution factor	(7.975 x 0.01)	0.0797500
Population factor	(0.012328 x 0.187)	<u>0.0023053</u>

Mid-point 3.1028886

15% of mid-point is therefore less than 2.5781

Upper limit: add 2.5781 (= 5.6809886, i.e. less than 8) (minimum) 8

Lower limit: subtract 2.5781 (= 0.5247886, i.e. less than 1) 1

Range is therefore 1-8

B. A country contributing 0.21%, with 42 793 000 population:

Membership factor		3.0208333
Contribution factor	(7.975 x 0.21)	1.6747500
Population factor	(0.012328 x 42.793)	<u>0.5275521</u>

Mid-point 5.2231354

15% of mid-point is therefore less than 2.5781

Upper limit: add 2.5781 (= 7.8012354); round up to 8

Lower limit: subtract 2.5781 (= 2.6450354); round down to 2

Range is therefore 2-8

C. A country contributing 0.46%, with 880 560 000 population:

Membership factor		3.0208333
Contribution factor	(7.975 x 0.46)	3.6685000
Population factor	(0.012328 x 880.56)	<u>10.8555437</u>

Mid-point 17.5448770

15% of mid-point is therefore more than 2.5781

Upper limit: add 2.6317316 (= 20.1766086); round up to 21

Lower limit: subtract 2.6317316 (= 14.9131454); round down to 14

Range is therefore 14-21

TABLE 2
COMPARISON OF EXISTING WITH REVISED DESIRABLE RANGES,
AND COUNTRIES' STATUS UNDER EACH

Country	Assessment	Population (millions)	Number of staff September 1996	Desirable range		Status	
				Existing	Revised	Existing range ¹	Revised range ¹
Afghanistan	0.01	22.859	2	001-008	001-008	=	=
Albania	0.01	3.509	0	001-008	001-008	0	0
Algeria	0.16	29.205	3	002-008	002-008	=	=
Angola	0.01	11.865	1	001-008	001-008	=	=
Antigua and Barbuda	0.01	0.067	0	001-008	001-008	0	0
Argentina	0.47	35.405	8	005-012	004-010	=	=
Armenia	0.05	3.690	1	001-008	001-008	=	=
Australia	1.45	18.550	22	013-020	012-018	+	+
Austria	0.85	8.053	6	007-013	007-013	-	-
Azerbaijan	0.11	7.726	0	002-009	001-008	0	0
Bahamas	0.02	0.284	1	001-008	001-008	=	=
Bahrain	0.02	0.592	1	001-008	001-008	=	=
Bangladesh	0.01	125.898	8	002-008	002-008	=	=
Barbados	0.01	0.264	2	001-008	001-008	=	=
Belarus	0.27	10.107	0	004-011	002-008	0	0
Belgium	0.99	10.174	14	009-016	008-014	=	=
Belize	0.01	0.227	1	001-008	001-008	=	=
Benin	0.01	5.742	8	001-008	001-008	=	=
Bhutan	0.01	1.709	0	001-008	001-008	0	0
Bolivia	0.01	7.774	4	001-008	001-008	=	=
Bosnia and Herzegovina	0.01	3.700	0	001-008	001-008	0	0
Botswana	0.01	1.577	0	001-008	001-008	0	0
Brazil	1.59	167.046	27	016-023	015-021	+	+
Brunei Darussalam	0.02	0.296	0	001-008	001-008	0	0
Bulgaria	0.08	8.686	1	001-008	001-008	=	=
Burkina Faso	0.01	10.866	5	001-008	001-008	=	=
Burundi	0.01	6.765	4	001-008	001-008	=	=
Cambodia	0.01	10.808	0	001-008	001-008	0	0
Cameroon	0.01	13.998	7	001-008	001-008	=	=
Canada	3.06	30.101	34	026-036	023-032	=	+
Cape Verde	0.01	0.414	1	001-008	001-008	=	=
Central African Republic	0.01	3.478	2	001-008	001-008	=	=
Chad	0.01	6.731	3	001-008	001-008	=	=
Chile	0.08	14.691	6	001-008	001-008	=	=
China	0.73	1 247.315	11	023-032	020-028	-	-
Colombia	0.10	36.200	8	002-008	001-008	=	=
Comoros	0.01	0.701	1	001-008	001-008	=	=
Congo	0.01	2.740	14	001-008	001-008	+	+
Cook Islands	0.01	0.020	0	001-008	001-008	0	0
Costa Rica	0.01	3.575	3	001-008	001-008	=	=
Côte d'Ivoire	0.01	15.223	6	001-008	001-008	=	=

Country	Assessment	Population (millions)	Number of staff September 1996	Desirable range		Status	
				Existing	Revised	Existing range ¹	Revised range ¹
Croatia	0.09	4.470	2	001-008	001-008	=	=
Cuba	0.05	11.191	6	001-008	001-008	=	=
Cyprus	0.03	0.757	0	001-008	001-008	0	0
Czech Republic	0.24	10.311	1	004-010	002-008	-	-
Democratic People's Republic of Korea	0.05	24.772	1	001-008	001-008	=	=
Denmark	0.71	5.194	10	006-012	006-012	=	=
Djibouti	0.01	0.602	1	001-008	001-008	=	=
Dominica	0.01	0.071	0	001-008	001-008	0	0
Dominican Republic	0.01	8.098	2	001-008	001-008	=	=
Ecuador	0.02	11.937	2	001-008	001-008	=	=
Egypt	0.08	65.445	12	001-008	001-008	+	+
El Salvador	0.01	6.027	2	001-008	001-008	=	=
Equatorial Guinea	0.01	0.420	1	001-008	001-008	=	=
Eritrea	0.01	3.724	1	001-008	001-008	=	=
Estonia	0.04	1.514	0	001-008	001-008	0	0
Ethiopia	0.01	58.414	7	001-008	001-008	=	=
Fiji	0.01	0.808	3	001-008	001-008	=	=
Finland	0.61	5.149	11	005-012	005-011	=	=
France	6.31	58.433	56	047-065	045-063	=	=
Gabon	0.01	1.397	3	001-008	001-008	=	=
Gambia	0.01	1.190	4	001-008	001-008	=	=
Georgia	0.11	5.479	0	002-009	001-008	0	0
Germany	8.90	81.845	34	069-095	063-087	-	-
Ghana	0.01	18.504	9	001-008	001-008	+	+
Greece	0.37	10.512	4	003-010	003-009	=	=
Grenada	0.01	0.093	1	001-008	001-008	=	=
Guatemala	0.02	11.241	3	001-008	001-008	=	=
Guinea	0.01	7.109	3	001-008	001-008	=	=
Guinea-Bissau	0.01	1.119	1	001-008	001-008	=	=
Guyana	0.01	0.854	2	001-008	001-008	=	=
Haiti	0.01	7.482	1	001-008	001-008	=	=
Honduras	0.01	5.981	2	001-008	001-008	=	=
Hungary	0.14	10.037	3	002-008	001-008	=	=
Iceland	0.03	0.274	0	001-008	001-008	0	0
India	0.30	970.230	19	016-023	014-020	=	=
Indonesia	0.14	203.631	9	004-011	004-010	=	=
Iran (Islamic Republic of)	0.44	70.136	7	008-014	004-010	-	=
Iraq	0.14	21.674	3	001-008	001-008	=	=
Ireland	0.21	3.577	11	002-008	002-008	+	+
Israel	0.26	5.854	3	002-009	002-008	=	=
Italy	5.16	57.247	28	035-048	038-052	-	-
Jamaica	0.01	2.483	4	001-008	001-008	=	=
Japan	15.38	125.672	35	095-130	108-147	-	-
Jordan	0.01	5.849	5	001-008	001-008	=	=
Kazakstan	0.19	17.318	0	003-010	002-008	0	0

Country	Assessment	Population (millions)	Number of staff September 1996	Desirable range		Status	
				Existing	Revised	Existing range ¹	Revised range ¹
Kenya	0.01	29.979	4	001-008	001-008	=	=
Kiribati	0.01	0.082	0	001-008	001-008	0	0
Kuwait	0.19	1.572	1	002-009	001-008	-	=
Kyrgyzstan	0.03	4.902	0	001-008	001-008	0	0
Lao People's Democratic Republic	0.01	5.165	1	001-008	001-008	=	=
Latvia	0.08	2.517	0	001-008	001-008	0	0
Lebanon	0.01	3.144	5	001-008	001-008	=	=
Lesotho	0.01	2.162	1	001-008	001-008	=	=
Liberia	0.01	3.242	2	001-008	001-008	=	=
Libyan Arab Jamahiriya	0.20	5.784	2	002-009	002-008	=	=
Lithuania	0.08	3.694	2	001-008	001-008	=	=
Luxembourg	0.07	0.414	1	001-008	001-008	=	=
Madagascar	0.01	15.722	2	001-008	001-008	=	=
Malawi	0.01	11.581	4	001-008	001-008	=	=
Malaysia	0.14	21.018	5	001-008	001-008	=	=
Maldives	0.01	0.271	3	001-008	001-008	=	=
Mali	0.01	11.480	4	001-008	001-008	=	=
Malta	0.01	0.371	0	001-008	001-008	0	0
Marshall Islands	0.01	0.057	0	001-008	001-008	0	0
Mauritania	0.01	2.392	5	001-008	001-008	=	=
Mauritius	0.01	1.141	3	001-008	001-008	=	=
Mexico	0.78	97.245	7	009-016	007-014	-	=
Micronesia (Federated States of)	0.01	0.132	0	001-008	001-008	0	0
Monaco	0.01	0.032	0	001-008	001-008	0	0
Mongolia	0.01	2.508	2	001-008	001-008	=	=
Morocco	0.03	28.092	3	001-008	001-008	=	=
Mozambique	0.01	17.124	3	001-008	001-008	=	=
Myanmar	0.01	48.511	6	001-008	001-008	=	=
Namibia	0.01	1.622	0	001-008	001-008	0	0
Nauru	0.01	0.011	0	001-008	001-008	0	0
Nepal	0.01	23.060	8	001-008	001-008	=	=
Netherlands	1.56	15.697	20	013-020	013-019	=	+
New Zealand	0.23	3.654	5	002-009	002-008	=	=
Nicaragua	0.01	4.731	1	001-008	001-008	=	=
Niger	0.01	9.788	4	001-008	001-008	=	=
Nigeria	0.11	118.369	9	003-010	002-008	=	+
Niue	0.01	0.002	0	001-008	001-008	0	0
Norway	0.55	4.375	11	005-012	004-011	=	=
Oman	0.04	2.342	0	001-008	001-008	0	0
Pakistan	0.06	148.686	5	002-009	002-008	=	=
Palau	0.01	0.018	0	001-008	001-008	0	0
Panama	0.01	2.722	1	001-008	001-008	=	=
Papua New Guinea	0.01	4.500	0	001-008	001-008	0	0
Paraguay	0.01	5.220	2	001-008	001-008	=	=

Country	Assessment	Population (millions)	Number of staff September 1996	Desirable range		Status	
				Existing	Revised	Existing range ¹	Revised range ¹
Peru	0.06	24.691	4	001-008	001-008	=	=
Philippines	0.06	70.375	8	002-008	001-008	=	=
Poland	0.32	38.521	4	005-011	003-009	-	=
Portugal	0.27	9.814	2	002-009	002-008	=	=
Puerto Rico	0.01	3.733	0	001-008	001-008	0	0
Qatar	0.04	0.573	0	001-008	001-008	0	0
Republic of Korea	0.80	45.864	5	007-013	007-013	-	-
Republic of Moldova	0.08	4.460	0	001-008	001-008	0	0
Romania	0.15	22.720	0	002-009	001-008	0	0
Russian Federation	4.20	146.381	39	053-074	032-045	-	=
Rwanda	0.01	8.375	5	001-008	001-008	=	=
Saint Kitts and Nevis	0.01	0.041	0	001-008	001-008	0	0
Saint Lucia	0.01	0.146	0	001-008	001-008	0	0
Saint Vincent and the Grenadines	0.01	0.114	0	001-008	001-008	0	0
Samoa	0.01	0.177	0	001-008	001-008	0	0
San Marino	0.01	0.026	0	001-008	001-008	0	0
Sao Tome and Principe	0.01	0.138	1	001-008	001-008	=	=
Saudi Arabia	0.70	19.072	2	009-015	006-012	-	-
Senegal	0.01	8.762	7	001-008	001-008	=	=
Seychelles	0.01	0.075	1	001-008	001-008	=	=
Sierra Leone	0.01	4.727	6	001-008	001-008	=	=
Singapore	0.14	2.899	0	001-008	001-008	0	0
Slovakia	0.08	5.397	2	001-008	001-008	=	=
Slovenia	0.07	1.948	0	001-008	001-008	0	0
Solomon Islands	0.01	0.404	0	001-008	001-008	0	0
Somalia	0.01	9.772	3	001-008	001-008	=	=
South Africa	0.31	43.325	0	004-011	003-009	0	0
Spain	2.34	39.729	9	017-025	018-026	-	-
Sri Lanka	0.01	18.815	8	001-008	001-008	=	=
Sudan	0.01	29.631	8	001-008	001-008	=	=
Suriname	0.01	0.432	1	001-008	001-008	=	=
Swaziland	0.01	0.904	1	001-008	001-008	=	=
Sweden	1.21	8.862	12	010-016	010-016	=	=
Switzerland	1.19	7.332	12	010-017	010-016	=	=
Syrian Arab Republic	0.05	15.686	5	001-008	001-008	=	=
Tajikistan	0.02	6.444	0	001-008	001-008	0	0
Thailand	0.13	60.046	6	002-008	002-008	=	=
The Former Yugoslav Republic of Macedonia	0.01	2.199	0	001-008	001-008	0	0
Togo	0.01	4.402	8	001-008	001-008	=	=
Tokelau	0.01	0.002	0	001-008	001-008	0	0
Tonga	0.01	0.099	0	001-008	001-008	0	0
Trinidad and Tobago	0.03	1.335	5	001-008	001-008	=	=
Tunisia	0.03	9.218	8	001-008	001-008	=	=
Turkey	0.37	64.293	7	003-010	004-010	=	=

Country	Assessment	Population (millions)	Number of staff September 1996	Desirable range		Status	
				Existing	Revised	Existing range ¹	Revised range ¹
Turkmenistan	0.03	4.279	0	001-008	001-008	0	0
Tuvalu	0.01	0.010	0	001-008	001-008	0	0
Uganda	0.01	22.623	3	001-008	001-008	=	=
Ukraine	1.07	51.219	1	017-024	009-015	-	-
United Arab Emirates	0.19	1.987	0	002-009	001-008	0	0
United Kingdom of Great Britain and Northern Ireland	5.23	58.587	52	040-055	038-053	=	=
United Republic of Tanzania	0.01	31.400	7	001-008	001-008	=	=
United States of America	25.00	268.189	138	193-262	174-237	-	-
Uruguay	0.04	3.221	4	001-008	001-008	=	=
Uzbekistan	0.13	23.846	0	003-009	001-008	0	0
Vanuatu	0.01	0.178	0	001-008	001-008	0	0
Venezuela	0.32	22.777	5	005-011	003-009	=	=
Viet Nam	0.01	77.780	1	001-008	001-008	=	=
Yemen	0.01	15.581	1	001-008	001-008	=	=
Yugoslavia	0.10	10.842	1	001-008	001-008	=	=
Zaire	0.01	46.691	11	001-008	001-008	+	+
Zambia	0.01	9.973	5	001-008	001-008	=	=
Zimbabwe	0.01	11.764	5	001-008	001-008	=	=
Others	-	-	0	000-000	000-000	N/A	N/A

¹ 0 unrepresented; - under-represented; = adequately represented; + over-represented.

TABLE 3
EVOLUTION OF GEOGRAPHICAL REPRESENTATION BETWEEN
SEPTEMBER 1994 AND SEPTEMBER 1996 IN POSTS SUBJECT TO
GEOGRAPHICAL DISTRIBUTION

Country	Desirable range	Number of staff September 1994	Degree of representation September 1994 ¹	Appoint-ments since September 1994	Separations since September 1994	Number of staff September 1996	Degree of representation September 1996 ¹
Afghanistan	001-008	1	=	1	0	2	=
Albania	001-008	0	0	0	0	0	0
Algeria	002-008	5	=	0	2	3	=
Angola	001-008	1	=	0	0	1	=
Antigua and Barbuda	001-008	0	0	0	0	0	0
Argentina	005-012	15	+	1	8	8	=
Armenia	001-008	2	=	0	1	1	=
Australia	013-020	22	+	5	6	21	+
Austria	007-013	5	-	1	0	6	-
Azerbaijan	002-009	0	0	0	0	0	0
Bahamas	001-008	1	=	0	0	1	=
Bahrain	001-008	1	=	0	0	1	=
Bangladesh	002-008	7	=	3	2	8	=
Barbados	001-008	1	=	1	0	2	=
Belarus	004-011	0	0	0	0	0	0
Belgium	009-016	16	=	3	5	14	=
Belize	001-008	2	=	0	1	1	=
Benin	001-008	7	=	2	1	8	=
Bhutan	001-008	1	=	0	1	0	0
Bolivia	001-008	7	=	0	3	4	=
Bosnia and Herzegovina	001-008	0	0	0	0	0	0
Botswana	001-008	2	=	0	2	0	0
Brazil	016-023	28	+	5	6	27	+
Brunei Darussalam	001-008	0	0	0	0	0	0
Bulgaria	001-008	1	=	0	0	1	=
Burkina Faso	001-008	7	=	0	2	5	=
Burundi	001-008	6	=	0	2	4	=
Cambodia	001-008	0	0	0	0	0	0
Cameroon	001-008	13	+	1	7	7	=
Canada	026-036	29	=	13	8	34	=
Cape Verde	001-008	2	=	0	1	1	=
Central African Republic	001-008	2	=	0	0	2	=
Chad	001-008	3	=	0	0	3	=
Chile	001-008	5	=	3	2	6	=
China	023-032	8	-	4	1	11	-
Colombia	002-008	9	+	3	4	8	=
Comoros	001-008	1	=	0	0	1	=
Congo	001-008	15	+	1	2	14	+
Cook Islands	001-008	0	0	0	0	0	0

Country	Desirable range	Number of staff September 1994	Degree of representation September 1994 ¹	Appointments since September 1994	Separations since September 1994	Number of staff September 1996	Degree of representation September 1996 ¹
Costa Rica	001-008	7	=	0	4	3	=
Côte d'Ivoire	001-008	7	=	1	2	6	=
Croatia	001-008	2	=	1	1	2	=
Cuba	001-008	7	=	1	2	6	=
Cyprus	001-008	1	=	0	1	0	0
Czech Republic	004-010	2	-	0	1	1	-
Democratic People's Republic of Korea	001-008	1	=	0	0	1	=
Denmark	006-012	11	=	2	3	10	=
Djibouti	001-008	0	0	1	0	1	=
Dominica	001-008	0	0	0	0	0	0
Dominican Republic	001-008	2	=	1	1	2	=
Ecuador	001-008	3	=	1	2	2	=
Egypt	001-008	14	+	2	4	12	+
El Salvador	001-008	2	=	0	0	2	=
Equatorial Guinea	001-008	1	=	0	0	1	=
Eritrea	001-008	0	0	1	0	1	=
Estonia	001-008	0	0	0	0	0	0
Ethiopia	001-008	10	+	0	3	7	=
Fiji	001-008	1	=	2	0	3	=
Finland	005-012	12	=	1	2	11	=
France	047-065	65	=	9	18	56	=
Gabon	001-008	3	=	0	0	3	=
Gambia	001-008	4	=	1	1	4	=
Georgia	002-009	0	0	0	0	0	0
Germany	069-095	39	-	5	10	34	-
Ghana	001-008	16	+	0	7	9	+
Greece	003-010	3	=	2	1	4	=
Grenada	001-008	0	0	1	0	1	=
Guatemala	001-008	4	=	0	1	3	=
Guinea	001-008	2	=	1	0	3	=
Guinea-Bissau	001-008	2	=	0	1	1	=
Guyana	001-008	3	=	0	1	2	=
Haiti	001-008	1	=	0	0	1	=
Honduras	001-008	2	=	0	0	2	=
Hungary	002-008	6	=	0	3	3	=
Iceland	001-008	0	0	0	0	0	0
India	016-023	26	+	4	11	19	=
Indonesia	004-011	7	=	2	0	9	=
Iran (Islamic Republic of)	008-014	7	-	2	2	7	-
Iraq	001-008	4	=	0	1	3	=
Ireland	002-008	10	+	3	2	11	+
Israel	002-009	3	=	1	1	3	=
Italy	035-048	39	=	2	13	28	-
Jamaica	001-008	5	=	0	1	4	=

Country	Desirable range	Number of staff September 1994	Degree of representation September 1994 ¹	Appointments since September 1994	Separations since September 1994	Number of staff September 1996	Degree of representation September 1996 ¹
Japan	095-130	31	-	11	7	35	-
Jordan	001-008	10	+	0	5	5	=
Kazakstan	003-010	0	0	0	0	0	0
Kenya	001-008	6	=	1	3	4	=
Kiribati	001-008	0	0	0	0	0	0
Kuwait	002-009	1	-	0	0	1	-
Kyrgyzstan	001-008	0	0	0	0	0	0
Lao People's Democratic Republic	001-008	1	=	0	0	1	=
Latvia	001-008	0	0	0	0	0	0
Lebanon	001-008	7	=	0	2	5	=
Lesotho	001-008	2	=	0	1	1	=
Liberia	001-008	5	=	0	3	2	=
Libyan Arab Jamahiriya	002-009	3	=	0	1	2	=
Lithuania	001-008	2	=	0	0	2	=
Luxembourg	001-008	1	=	0	0	1	=
Madagascar	001-008	3	=	0	1	2	=
Malawi	001-008	5	=	0	1	4	=
Malaysia	001-008	6	=	0	1	5	=
Maldives	001-008	2	=	1	0	3	=
Mali	001-008	8	=	1	5	4	=
Malta	001-008	1	=	0	1	0	0
Marshall Islands	001-008	0	0	0	0	0	0
Mauritania	001-008	6	=	0	1	5	=
Mauritius	001-008	7	=	0	4	3	=
Mexico	009-016	10	=	2	5	7	-
Micronesia (Federated States of)	001-008	0	0	0	0	0	0
Monaco	001-008	0	0	0	0	0	0
Mongolia	001-008	2	=	0	0	2	=
Morocco	001-008	2	=	1	0	3	=
Mozambique	001-008	2	=	1	0	3	=
Myanmar	001-008	9	+	1	4	6	=
Namibia	001-008	0	0	0	0	0	0
Nauru	001-008	0	0	0	0	0	0
Nepal	001-008	11	+	1	4	8	=
Netherlands	013-020	21	+	3	4	20	=
New Zealand	002-009	9	=	1	5	5	=
Nicaragua	001-008	2	=	0	1	1	=
Niger	001-008	5	=	0	1	4	=
Nigeria	003-010	9	=	1	1	9	=
Niue	001-008	0	0	0	0	0	0
Norway	005-012	11	=	3	3	11	=
Oman	001-008	0	0	0	0	0	0
Pakistan	002-009	10	+	0	5	5	=
Palau	001-008	0	N/A	0	0	0	0

Country	Desirable range	Number of staff September 1994	Degree of representation September 1994 ¹	Appointments since September 1994	Separations since September 1994	Number of staff September 1996	Degree of representation September 1996 ¹
Panama	001-008	2	=	0	1	1	=
Papua New Guinea	001-008	0	0	0	0	0	0
Paraguay	001-008	2	=	0	0	2	=
Peru	001-008	4	=	2	2	4	=
Philippines	002-008	10	+	2	4	8	=
Poland	005-011	8	=	1	5	4	-
Portugal	002-009	4	=	0	2	2	=
Puerto Rico	001-008	0	0	0	0	0	0
Qatar	001-008	0	0	0	0	0	0
Republic of Korea	007-013	5	-	2	2	5	-
Republic of Moldova	001-008	0	0	0	0	0	0
Romania	002-009	0	0	0	0	0	0
Russian Federation	053-074	46	-	1	8	39	-
Rwanda	001-008	6	=	0	1	5	=
Saint Kitts and Nevis	001-008	0	0	0	0	0	0
Saint Lucia	001-008	0	0	0	0	0	0
Saint Vincent and the Grenadines	001-008	1	=	0	1	0	0
Samoa	001-008	0	0	0	0	0	0
San Marino	001-008	0	0	0	0	0	0
Sao Tome and Principe	001-008	1	=	0	0	1	=
Saudi Arabia	009-015	2	-	1	1	2	-
Senegal	001-008	5	=	2	0	7	=
Seychelles	001-008	1	=	0	0	1	=
Sierra Leone	001-008	5	=	1	0	6	=
Singapore	001-008	1	=	0	1	0	0
Slovakia	001-008	2	=	0	0	2	=
Slovenia	001-008	0	0	0	0	0	0
Solomon Islands	001-008	0	0	0	0	0	0
Somalia	001-008	3	=	0	0	3	=
South Africa	004-011	0	0	0	0	0	0
Spain	017-025	11	-	0	2	9	-
Sri Lanka	001-008	10	+	0	2	8	=
Sudan	001-008	9	+	0	1	8	=
Suriname	001-008	2	=	0	1	1	=
Swaziland	001-008	2	=	0	1	1	=
Sweden	010-016	16	=	1	5	12	=
Switzerland	010-017	13	=	2	3	12	=
Syrian Arab Republic	001-008	3	=	2	0	5	=
Tajikistan	001-008	0	0	0	0	0	0
Thailand	002-008	4	=	2	0	6	=
The Former Yugoslav Republic of Macedonia	001-008	0	0	0	0	0	0
Togo	001-008	8	=	0	0	8	=
Tokelau	001-008	0	0	0	0	0	0
Tonga	001-008	0	0	0	0	0	0

Country	Desirable range	Number of staff September 1994	Degree of representation September 1994 ¹	Appointments since September 1994	Separations since September 1994	Number of staff September 1996	Degree of representation September 1996 ¹
Trinidad and Tobago	001-008	5	=	1	1	5	=
Tunisia	001-008	9	+	0	1	8	=
Turkey	003-010	5	=	2	0	7	=
Turkmenistan	001-008	0	0	0	0	0	0
Tuvalu	001-008	0	0	0	0	0	0
Uganda	001-008	7	=	0	4	3	=
Ukraine	017-024	0	0	1	0	1	-
United Arab Emirates	002-009	0	0	0	0	0	0
United Kingdom of Great Britain and Northern Ireland	040-055	66	+	7	21	52	=
United Republic of Tanzania	001-008	7	=	0	0	7	=
United States of America	193-262	167	-	26	55	138	-
Uruguay	001-008	5	=	0	1	4	=
Uzbekistan	003-009	0	0	0	0	0	0
Vanuatu	001-008	0	0	0	0	0	0
Venezuela	005-011	6	=	1	2	5	=
Viet Nam	001-008	2	=	0	1	1	=
Yemen	001-008	2	=	0	1	1	=
Yugoslavia	001-008	3	=	0	2	1	=
Zaire	001-008	13	+	0	2	11	+
Zambia	001-008	7	=	1	3	5	=
Zimbabwe	001-008	4	=	1	0	5	=
Others	N/A	1	N/A	0	1	0	N/A
TOTAL		1 264		181	374	1 071	

¹ 0 unrepresented; - under-represented; = adequately represented; + over-represented.

TABLE 4
STATE OF REPRESENTATION OF COUNTRIES AS OF SEPTEMBER 1996

1. Unrepresented countries

Albania	Latvia	Saint Vincent and the
Antigua and Barbuda	Malta	Grenadines
Azerbaijan	Marshall Islands	Samoa
Belarus	Micronesia (Federated	San Marino
Bhutan	States of)	Singapore
Bosnia and Herzegovina	Monaco	Slovenia
Botswana	Namibia	Solomon Islands
Brunei Darussalam	Nauru	South Africa
Cambodia	Niue	Tajikistan
Cook Islands	Oman	The Former Yugoslav
Cyprus	Palau	Republic of Macedonia
Dominica	Papua New Guinea	Tokelau
Estonia	Puerto Rico	Tonga
Georgia	Qatar	Turkmenistan
Iceland	Republic of Moldova	Tuvalu
Kazakstan	Romania	United Arab Emirates
Kiribati	Saint Kitts and Nevis	Uzbekistan
Kyrgyzstan	Saint Lucia	Vanuatu

2. Under-represented countries

Austria	Italy	Republic of Korea
China	Japan	Russian Federation
Czech Republic	Kuwait	Saudi Arabia
Germany	Mexico	Spain
Iran (Islamic Republic of)	Poland	Ukraine
		United States of America

3. Countries within the range

3.1 Intermediate category (below the mid-point of the range)

Afghanistan	Central African Republic	Fiji
Algeria	Chad	Gabon
Angola	Comoros	Gambia
Argentina	Costa Rica	Greece
Armenia	Croatia	Grenada
Bahamas	Democratic People's	Guatemala
Bahrain	Republic of Korea	Guinea
Barbados	Djibouti	Guinea-Bissau
Belize	Dominican Republic	Guyana
Bolivia	Ecuador	Haiti
Bulgaria	El Salvador	Honduras
Burundi	Equatorial Guinea	Hungary
Cape Verde	Eritrea	India

Iraq	Mali	Seychelles
Israel	Mauritius	Slovakia
Jamaica	Mongolia	Somalia
Kenya	Morocco	Suriname
Lao People's Democratic Republic	Mozambique	Swaziland
Lesotho	New Zealand	Sweden
Liberia	Nicaragua	Switzerland
Libyan Arab Jamahiriya	Niger	Uganda
Lithuania	Pakistan	Uruguay
Luxembourg	Panama	Venezuela
Madagascar	Paraguay	Viet Nam
Malawi	Peru	Yemen
Maldives	Portugal	Yugoslavia
	Sao Tome and Principe	

3.2 Adequately represented (equal to or above the mid-point of the range)

Bangladesh	Indonesia	Sri Lanka
Belgium	Jordan	Sudan
Benin	Lebanon	Syrian Arab Republic
Burkina Faso	Malaysia	Thailand
Cameroon	Mauritania	Togo
Canada	Myanmar	Trinidad and Tobago
Chile	Nepal	Tunisia
Colombia	Netherlands	Turkey
Côte d'Ivoire	Nigeria	United Kingdom of Great Britain and Northern Ireland
Cuba	Norway	United Republic of Tanzania
Denmark	Philippines	Zambia
Ethiopia	Rwanda	Zimbabwe
Finland	Senegal	
France	Sierra Leone	

4. Over-represented countries

Australia	Congo	Ghana
Brazil	Egypt	Ireland
		Zaire

TABLE 5
NUMBER OF NATIONALS OF OVER-REPRESENTED COUNTRIES
IN EXCESS OF UPPER LIMITS OF THE RESPECTIVE RANGES,
BY REGION AS AT SEPTEMBER 1994 AND SEPTEMBER 1996

Staff in excess of range's upper limit			Staff in excess of range's upper limit		
	1994	1996		1994	1996
Africa			Europe		
Cameroon	5	-	Ireland	2	3
Congo	7	6	Netherlands	1	-
Ethiopia	2	-	United Kingdom of Great Britain and Northern Ireland	11	-
Ghana	8	1	Total	<u>14</u>	<u>3</u>
Zaire	5	3			
Total	<u>27</u>	<u>10</u>			
The Americas			Eastern Mediterranean		
Argentina	3	-	Egypt	6	4
Brazil	5	4	Jordan	2	-
Colombia	1	-	Pakistan	1	-
Total	<u>9</u>	<u>4</u>	Sudan	1	-
			Tunisia	1	-
			Total	<u>11</u>	<u>4</u>
South-East Asia			Western Pacific		
India	3	-	Australia	2	1
Myanmar	1	-	Philippines	2	-
Nepal	3	-	Total	<u>4</u>	<u>1</u>
Sri Lanka	2	-			
Total	<u>9</u>	<u>0</u>			

Staff in excess of range's upper limit: regional summary

	1994	1996
Africa	27	10
The Americas	9	4
South-East Asia	9	0
Europe	14	3
Eastern Mediterranean	11	4
Western Pacific	4	1
Total	<u>74</u>	<u>22</u>

TABLE 6
NUMBER OF STAFF IN GEOGRAPHICALLY DISTRIBUTABLE POSTS
BY NATIONALITY AND GRADE AT SEPTEMBER 1996

Country	UG	D.2	D.1	P.6	P.5	P.4	P.3	P.2	P.1	Total
Afghanistan	-	-	-	-	-	1	1	-	-	2
Albania	-	-	-	-	-	-	-	-	-	-
Algeria	1	-	-	-	1	-	1	-	-	3
Angola	-	-	1	-	-	-	-	-	-	1
Antigua and Barbuda	-	-	-	-	-	-	-	-	-	-
Argentina	-	-	-	-	1	7	-	-	-	8
Armenia	-	-	-	1	-	-	-	-	-	1
Australia	-	2	-	4	9	6	-	-	-	21
Austria	-	-	-	2	2	1	1	-	-	6
Azerbaijan	-	-	-	-	-	-	-	-	-	-
Bahamas	-	-	1	-	-	-	-	-	-	1
Bahrain	-	-	-	-	1	-	-	-	-	1
Bangladesh	-	-	-	-	7	-	1	-	-	8
Barbados	1	-	-	-	-	1	-	-	-	2
Belarus	-	-	-	-	-	-	-	-	-	-
Belgium	-	2	-	4	5	2	1	-	-	14
Belize	-	-	-	-	-	1	-	-	-	1
Benin	-	-	-	-	4	1	3	-	-	8
Bhutan	-	-	-	-	-	-	-	-	-	-
Bolivia	1	-	-	-	2	1	-	-	-	4
Bosnia and Herzegovina	-	-	-	-	-	-	-	-	-	-
Botswana	-	-	-	-	-	-	-	-	-	-
Brazil	-	2	-	-	12	11	-	2	-	27
Brunei Darussalam	-	-	-	-	-	-	-	-	-	-
Bulgaria	-	-	-	-	-	1	-	-	-	1
Burkina Faso	-	-	-	-	2	1	1	1	-	5
Burundi	-	-	1	-	1	1	1	-	-	4
Cambodia	-	-	-	-	-	-	-	-	-	-
Cameroon	-	-	-	1	3	-	3	-	-	7
Canada	-	1	2	2	11	10	7	1	-	34
Cape Verde	-	-	-	-	1	-	-	-	-	1
Central African Republic	-	-	-	-	2	-	-	-	-	2
Chad	-	-	-	-	3	-	-	-	-	3
Chile	-	-	-	-	1	3	-	2	-	6
China	1	-	1	-	5	2	2	-	-	11
Colombia	-	-	-	-	3	4	-	-	1	8
Comoros	-	-	-	-	1	-	-	-	-	1
Congo	-	-	-	-	-	2	4	8	-	14
Cook Islands	-	-	-	-	-	-	-	-	-	-
Costa Rica	-	-	-	-	1	2	-	-	-	3
Côte d'Ivoire	-	-	-	-	1	3	1	1	-	6
Croatia	-	-	-	-	2	-	-	-	-	2

[illegible]

[illegible]

Country	UG	D.2	D.1	P.6	P.5	P.4	P.3	P.2	P.1	Total
Qatar	-	-	-	-	-	-	-	-	-	-
Republic of Korea	1	1	-	2	1	-	-	-	-	5
Republic of Moldova	-	-	-	-	-	-	-	-	-	-
Romania	-	-	-	-	-	-	-	-	-	-
Russian Federation	1	1	-	2	19	15	1	-	-	39
Rwanda	-	1	-	1	1	2	-	-	-	5
Saint Kitts and Nevis	-	-	-	-	-	-	-	-	-	-
Saint Lucia	-	-	-	-	-	-	-	-	-	-
Saint Vincent and the Grenadines	-	-	-	-	-	-	-	-	-	-
Samoa	-	-	-	-	-	-	-	-	-	-
San Marino	-	-	-	-	-	-	-	-	-	-
Sao Tome and Principe	-	-	-	-	1	-	-	-	-	1
Saudi Arabia	1	-	-	-	1	-	-	-	-	2
Senegal	1	-	-	-	4	1	1	-	-	7
Seychelles	-	-	-	-	-	-	-	1	-	1
Sierra Leone	-	-	-	-	3	-	3	-	-	6
Singapore	-	-	-	-	-	-	-	-	-	-
Slovakia	-	-	-	-	-	1	-	1	-	2
Slovenia	-	-	-	-	-	-	-	-	-	-
Solomon Islands	-	-	-	-	-	-	-	-	-	-
Somalia	-	-	-	-	3	-	-	-	-	3
South Africa	-	-	-	-	-	-	-	-	-	-
Spain	-	-	-	1	5	3	-	-	-	9
Sri Lanka	-	-	1	-	5	2	-	-	-	8
Sudan	-	2	1	1	4	-	-	-	-	8
Suriname	-	-	-	-	1	-	-	-	-	1
Swaziland	-	-	1	-	-	-	-	-	-	1
Sweden	-	-	1	1	7	2	1	-	-	12
Switzerland	-	-	-	1	6	1	4	-	-	12
Syrian Arab Republic	-	1	1	-	2	1	-	-	-	5
Tajikistan	-	-	-	-	-	-	-	-	-	-
Thailand	-	1	-	-	1	4	-	-	-	6
The Former Yugoslav Republic of Macedonia	-	-	-	-	-	-	-	-	-	-
Togo	-	1	-	-	4	1	2	-	-	8
Tokelau	-	-	-	-	-	-	-	-	-	-
Tonga	-	-	-	-	-	-	-	-	-	-
Trinidad and Tobago	-	-	-	-	1	2	2	-	-	5
Tunisia	-	-	1	2	4	1	-	-	-	8
Turkey	1	-	-	-	5	1	-	-	-	7
Turkmenistan	-	-	-	-	-	-	-	-	-	-
Tuvalu	-	-	-	-	-	-	-	-	-	-
Uganda	-	-	-	-	3	-	-	-	-	3
Ukraine	-	-	-	-	1	-	-	-	-	1
United Arab Emirates	-	-	-	-	-	-	-	-	-	-
United Kingdom of Great Britain and Northern Ireland	1	-	1	6	22	12	9	1	-	52

Country	UG	D.2	D.1	P.6	P.5	P.4	P.3	P.2	P.1	Total
United Republic of Tanzania	-	1	-	1	3	2	-	-	-	7
United States of America	1	5	3	11	52	47	13	5	1	138
Uruguay	-	-	-	-	3	1	-	-	-	4
Uzbekistan	-	-	-	-	-	-	-	-	-	-
Vanuatu	-	-	-	-	-	-	-	-	-	-
Venezuela	-	-	-	-	1	4	-	-	-	5
Viet Nam	-	-	-	-	1	-	-	-	-	1
Yemen	-	-	-	-	1	-	-	-	-	1
Yugoslavia	-	-	-	-	-	1	-	-	-	1
Zaire	-	-	-	1	6	1	3	-	-	11
Zambia	-	-	-	3	2	-	-	-	-	5
Zimbabwe	-	-	1	1	1	-	2	-	-	5
TOTAL	17	47	34	89	436	283	123	39	3	1 071

ANNEX 5

Personnel matters

Employment and participation of women in the work of WHO¹

Report by the Director-General

[EB99/34 - 23 October 1996]

At its ninety-eighth session the Executive Board considered document EB98/6, which reported on progress made concerning the employment and participation of women as requested in resolution EB97.R12, and on implementation of action relating to the ACC statement on the status of women in the secretariats of organizations of the United Nations system (see document EB97/24).

This document reports on further progress made with regard to the employment and participation of women in the work of WHO, as requested by the Board at its ninety-eighth session.

ACTION RELATED TO DOCUMENT EB98/6

1. The ninety-eighth session of the Executive Board was provided (in document EB98/6) with a framework for action to determine the obstacles to progress in the recruitment, promotion and retention of women in professional posts and to devise strategies to overcome these barriers, outlining the main steps for implementation. Action taken since then is described in the following paragraphs.

- *Review of studies on recruitment of women in the United Nations system and of action undertaken by governmental institutions and multinational companies on recruitment of women in the private and public sector*

Review of policies and procedures of the Organization to determine what factors may inhibit the recruitment of women

2. A volunteer with experience in matters concerning women, who is currently associated with the Office of the Equality Ombudsperson in the Ministry of Social Affairs, Finland, will start an internship in January 1997 to carry out these reviews.

¹ See resolution EB99.R10.

- *Preparation of a questionnaire to establish the reasons why more women are not appointed to posts or as consultants or members of technical groups and advisory panels*

3. As a first step, a series of structured interviews have been carried out with Assistant Directors-General, directors, programme managers, members of the Senior Staff Selection Committee, personnel officers and other selected staff at headquarters in order to establish baseline information on the obstacles to the recruitment, promotion and retention of women in professional posts. This information will be used to identify major issues and to work out appropriate strategies.

- *Designation of contact points (professional groups, networks, institutions and individuals) for information on potential women candidates*

4. WHO collaborating centres, members of expert panels, and nongovernmental organizations in official relation with WHO are being systematically contacted to seek information on potential women candidates. WHO Representatives are also being contacted to seek their assistance in identifying suitable women candidates. Memoranda have been sent to Regional Directors to draw their attention to resolution WHA49.9, which calls for the Director-General and Regional Directors "to invite governments to designate women to serve as members of the Executive Board and ensure that women are represented on delegations to regional committees and the Health Assembly". In addition, direct contacts will be made with people attending the Executive Board, the Health Assembly and technical meetings at headquarters to pursue this effort.

- *Presentation of up-to-date data on pattern and trends of professional employment, promotion, and loss of staff at all levels of the Organization disaggregated by sex*

5. Data were distributed to all staff in an information circular.

- *Preparation of a questionnaire to determine the factors contributing to the departure of professional women from the Organization*

6. A questionnaire on departure has been prepared with an implementation target of April 1997. The questionnaire will be used to gather data on voluntary departures of men and women professional staff other than through retirement. In addition, all staff who left the Organization voluntarily in the past five years are being contacted to provide information on their reasons for departure. An analysis of the responses is expected for December 1997. This will permit matters pertaining specifically to women including the retention of qualified women, and the work environment, to be analysed.

- *Sharing between headquarters and regional office staff of information and material from the questionnaire to ensure implementation of appropriate activities*

7. In an effort to initiate a dialogue and to help devise region-specific strategies, a schedule of visits to regional offices has been established. The Regional Office for South-East Asia was to be visited in December 1996. Visits to the regional offices for Africa, the Eastern Mediterranean and the Western Pacific were scheduled for 1997.

8. It is to be noted that the regional offices for South-East Asia and the Western Pacific each had an item on employment and participation of women in WHO on the agenda of their regional committee sessions in 1996. The recommendations made and resolutions adopted by the regional committees will be reviewed in order to study their applicability at headquarters and other regional offices. Information will be shared on a regular basis between regional offices.

- *Monitor the effect of a reduction-in-force on recent gains in the status of women in the professional category*

9. The impact of a possible reduction-in-force will be systematically monitored. In addition, this subject will be considered in connection with a thorough review of the reduction-in-force procedure.

- *Training*

10. The United Nations and a number of specialized agencies have produced training material on related issues. A subgroup of the Joint Committee on the Employment of Women in WHO reviews such material with a view to initiating suitable activities at global and regional levels.

ACTION RELATED TO ACC POLICY STATEMENT

11. Document EB98/6 also provided a status report on the implementation of action related to the ACC policy statement on the status of women in the secretariats of the United Nations system. Action taken since the ninety-eighth session of the Executive Board is described in the following paragraphs.

- *Treat women staff members of all organizations of the common system as internal candidates when they apply for vacant posts within the system*

12. As of 1 August 1996, WHO's vacancy notices are disseminated on the Internet as part of a trial initiative by the International Civil Service Commission. Staff Regulation 4.4 provides for the consideration of candidates from the United Nations and its specialized agencies as "internal" candidates.

- *Request organizations to use their field presence to prospect for women candidates*

13. In an effort to encourage the search for women candidates during duty travel, guidelines have been drawn up and will be distributed to regional offices, directors and programme managers (in headquarters) for their use by November 1996.

- *In cases where Member States are to submit candidatures, urge governments to submit one or more qualified women candidates for each position*

14. An analysis of the sex ratio of seconded staff indicated that between 1994 and 1996 the average proportion of female staff among all categories of seconded staff to WHO reached 25.3%. Seconded staff may be defined as comprising associate professional officers, those staff detailed to WHO without remuneration (on either a reimbursable or a non-reimbursable basis), and other staff members receiving WHO remuneration who are released by their governments. The proportion of female associate professional officers was 53%. The proportion of female staff without remuneration was 21%. These compare with a figure of 15.3% for the remaining categories in receipt of WHO remuneration. Although there is a relatively high proportion of female associate professional officers, in the other remaining categories the proportion of females seconded by their governments is very low. The results of this analysis will be provided to Member States in order to raise awareness of the need to make special efforts to find more women candidates for vacancies in general, and for secondment and employment under special agreements.

- *Facilitate spouse employment by amending the Organization's Staff Rules*

15. Since the change in the Staff Rules in 1995 allowing the employment by WHO of the spouse of a staff member (Rule 410.3), several spouses have been recruited. Since May 1996, the number has increased from 10 to 12. So far, the spouses of four female and eight male professional staff have found short-term employment at WHO.

- *Encourage further development of spouse employment opportunities, encompassing not only the common system and other governmental and intergovernmental organizations, but also, to the extent possible, nongovernmental organizations and transnational corporations, and introducing relevant provisions in host*

country agreements; organize efforts in each United Nations location to promote spouse employment, led in the field by Resident Coordinators and in each headquarters city by a lead agency

16. Since the introduction of the new policy in Switzerland allowing spouses of international civil servants and unmarried children to enter the Swiss labour market, 14 requests from husbands and 24 requests from wives of staff members for the necessary attestation from the Swiss authorities to be shown to prospective employers have been received (three from husbands and three new requests from wives since the last report contained in document EB98/6).

17. Since the last report, the Department of Labour and Employment of the Republic of the Philippines has revised the regulations concerning the employment of non-nationals associated with the United Nations and the specialized agencies with which the Philippine Government is a cooperating member, by also exempting spouses of staff members from employment permits.

- *Introduce appropriate policies and procedures to combat sexual harassment*

18. The WHO policy on sexual harassment came into effect on 14 May 1996. The composition of informal and formal panels is being determined, and the Joint Committee on the Employment and Participation of Women in WHO will be finalizing a monitoring procedure to record and evaluate its implementation.

- *Pay particular attention to increasing the number of women in senior managerial positions*

19. The total number of women at the highest levels of management increased to four out of 10 with the appointment by the Director-General of a second woman Assistant Director-General.

ACTION BY THE EXECUTIVE BOARD

20. [After reviewing this report, the Board, at its eleventh meeting, adopted resolution EB99.R10.]

ANNEX 6

Confirmation of amendments to the Staff Rules¹

Report by the Director-General

[EB99/41 - 8 January 1997]

Amendments to the Staff Rules to be made by the Director-General are submitted for confirmation by the Board in accordance with Staff Regulation 12.2.²

The amendments in paragraphs 1 to 5 result from decisions taken by the United Nations General Assembly at its fifty-first session on the basis of recommendations made by the International Civil Service Commission.

The Appendix gives the text of the new and amended Staff Rules, the purpose of which is briefly explained below. The effective date of these changes is 1 January 1997.

The budgetary implications of the amendments in the 1996-1997 biennium include a provisionally estimated additional cost of US\$ 1 500 000 under the regular budget, which will have to be met from the appropriate allocations established for each of the regions and for global and interregional activities.

AMENDMENTS CONSIDERED NECESSARY IN THE LIGHT OF DECISIONS TAKEN BY THE UNITED NATIONS GENERAL ASSEMBLY AT ITS FIFTY-FIRST SESSION ON THE BASIS OF RECOMMENDATIONS OF THE INTERNATIONAL CIVIL SERVICE COMMISSION

Schedule of salaries for the professional category and directors' posts

1. The United Nations General Assembly approved, with effect from 1 January 1997, a revised base/floor salary scale for the professional and higher categories reflecting an increase of 5.68%, of which 5.26% constitutes a consolidation of post adjustment on a "no loss - no gain" basis and 0.4% constitutes a real salary increase. Changes will also be required to the schedule of staff assessment rates for professional and higher-graded staff with and without dependants. Amendments to Staff Rules 330.1.1 and 330.2 have been prepared accordingly (see Appendix).

¹ See resolutions EB99.R11 and EB99.R12.

² *Basic documents*, 41st ed., 1996, p. 97.

Salaries of ungraded posts and of the Director-General

2. Following the above decision of the United Nations General Assembly, the Director-General proposes, in accordance with Staff Regulation 3.1,¹ that the Executive Board should recommend to the Fiftieth World Health Assembly modifications in the salaries of the posts of Deputy Director-General, Assistant Directors-General and Regional Directors. Thus the net salary of the post of Deputy Director-General would be revised from US\$ 93 735 to US\$ 99 059 per annum with dependants and from US\$ 84 232 to US\$ 89 069 per annum without dependants; and the net salaries for the posts of Assistant Directors-General and Regional Directors would be revised from US\$ 85 972 to US\$ 90 855 per annum with dependants and from US\$ 77 763 to US\$ 82 245 per annum without dependants.

3. The adjustments to salaries described in paragraph 1 above would call for similar adjustments to the salary of the Director-General, bearing in mind the terms of paragraph III of his present contract.² The modification in net salary to be authorized by the Health Assembly would be from US\$ 113 286 to US\$ 119 722 per annum with dependants and from US\$ 100 525 to US\$ 106 255 per annum without dependants.

Dependants' allowance

4. With respect to the professional and higher categories, the children's allowance will be increased from US\$ 1400 to US\$ 1510 and the secondary dependants' allowance from US\$ 500 to US\$ 540. The allowance for disabled children, being double the normal children's allowance, will be increased from US\$ 2800 to US\$ 3020, all increases coming into effect on 1 January 1997. Rules 340.1, 340.2 and 340.3 have been amended accordingly (see Appendix).

Non-removal element of the mobility and hardship allowance

5. The United Nations General Assembly decided to limit the payment of the non-removal element of the mobility and hardship allowance to a period of five years at the same duty station, with possibility of an extension up to a maximum of seven years. Rule 360.1.3 has been amended accordingly and a new Rule 360.1.4 has been introduced (see Appendix).

BUDGETARY IMPLICATIONS

6. The budgetary implications of the above changes in 1996-1997 are provisionally estimated at an additional cost of US\$ 2 000 000 in funds from all sources, and of US\$ 1 500 000 under the regular budget to be met during 1996-1997 from the allocations established for each of the regions and for global and interregional activities.

ACTION BY THE EXECUTIVE BOARD

7. [This paragraph contained two draft resolutions which were adopted at the eleventh meeting as resolutions EB99.R11 and EB99.R12.]

¹ *Basic documents*, 41st ed., 1996, p. 94.

² Document WHA46/1993/REC/1, p. 52.

Appendix

TEXT OF THE NEW AND AMENDED STAFF RULES

[EB99/INF.DOC./10 - 8 January 1997]

330. SALARIES

330.1 Gross base salaries shall be subject to the following assessments:

330.1.1 For professional and higher graded staff:

Amounts per year	Assessment per cent	
	Rate with dependants*	Rate without dependants*
	(*as defined in Rules 310.5.1 and 310.5.2)	
First US\$ 15 000	9.0	11.8
Next US\$ 5 000	18.1	24.6
Next US\$ 5 000	21.5	27.1
Next US\$ 5 000	24.9	31.7
Next US\$ 5 000	27.5	33.4
Next US\$ 10 000	30.1	35.8
Next US\$ 10 000	31.8	38.2
Next US\$ 10 000	33.5	38.8
Next US\$ 10 000	34.4	40.0
Next US\$ 15 000	35.3	41.3
Next US\$ 20 000	36.1	44.5
Remaining assessable payments	37.0	47.6

330.2 The following schedule of annual gross base salaries and of annual net base salaries shall apply to all professional category and directors' posts:

		STEPS														
Level		I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	XIII	XIV	XV
		US \$	US \$	US \$	US \$	US \$	US \$	US \$	US \$	US \$	US \$	US \$	US \$	US \$	US \$	US \$
P.1	Gross	34 152	35 417	36 710	38 004	39 297	40 590	41 887	43 180	44 473	45 786					
	Net D	28 435	29 341	30 245	31 150	32 054	32 958	33 864	34 768	35 671	36 576					
	Net S	26 825	27 658	28 488	29 319	30 149	30 979	31 811	32 641	33 471	34 296					
P.2	Gross	44 830	46 208	47 586	48 967	50 345	51 726	53 106	54 485	55 889	57 303	58 717	60 134			
	Net D	35 921	36 864	37 804	38 745	39 686	40 627	41 568	42 509	43 451	44 391	45 332	46 274			
	Net S	33 701	34 556	35 408	36 261	37 113	37 966	38 820	39 672	40 534	41 399	42 265	43 132			
P.3	Gross	55 700	57 282	58 866	60 446	62 030	63 612	65 196	66 802	68 405	70 011	71 614	73 218	74 822	76 445	78 073
	Net D	43 326	44 378	45 431	46 482	47 535	48 587	49 639	50 692	51 744	52 797	53 849	54 901	55 953	57 005	58 058
	Net S	40 419	41 387	42 356	43 323	44 292	45 260	46 228	47 191	48 153	49 116	50 079	51 041	52 003	52 958	53 914
P.4	Gross	68 181	69 891	71 597	73 303	75 013	76 743	78 474	80 206	81 938	83 667	85 397	87 132	88 862	90 601	92 355
	Net D	51 597	52 718	53 838	54 957	56 078	57 198	58 318	59 438	60 559	61 678	62 797	63 920	65 039	66 159	67 280
	Net S	48 019	49 044	50 068	51 092	52 118	53 133	54 149	55 166	56 182	57 198	58 213	59 232	60 247	61 249	62 222
P.5	Gross	82 758	84 534	86 310	88 085	89 861	91 655	93 453	95 251	97 047	98 845	100 643	102 439	104 237		
	Net D	61 090	62 239	63 387	64 536	65 685	66 833	67 982	69 131	70 278	71 427	72 576	73 724	74 873		
	Net S	56 664	57 707	58 749	59 791	60 833	61 834	62 832	63 829	64 826	65 824	66 822	67 819	68 817		
P.6/ D.1	Gross	93 810	95 797	97 784	99 767	101 754	103 741	105 728	107 715	109 700						
	Net D	68 210	69 479	70 749	72 016	73 286	74 556	75 825	77 095	78 364						
	Net S	63 030	64 132	65 235	66 336	67 439	68 541	69 644	70 747	71 849						
D.2	Gross	106 053	108 373	110 704	113 056	115 409	117 763									
	Net D	76 033	77 516	78 998	80 480	81 963	83 446									
	Net S	69 824	71 112	72 384	73 616	74 849	76 083									

D = Rate applicable to staff members with a dependent spouse or dependent child.

S = Rate applicable to staff members with no dependent spouse or dependent child.

340. DEPENDANTS' ALLOWANCE

- 340.1 US\$ 1510 per annum for a child, except that in cases where there is no dependent spouse the first dependent child is not entitled to an allowance. The entitlement shall be reduced by the amount of any benefit paid from any other public source by way of social security payments, or under public law, by reason of such child.
- 340.2 US\$ 3020 per annum for a child who is physically or mentally incapacitated subject to the conditions defined in Rule 340.1 except that if the staff member has no dependent spouse and receives the "with dependant" rate of net salary by virtue of such a child, an allowance of US\$ 1510 shall be payable.
- 340.3 US\$ 540 per year for a father, mother, brother or sister.
-

360. MOBILITY AND HARDSHIP ALLOWANCE

- 360.1.3 The non-removal element of the allowance is payable at official stations in categories A to E ~~as long as the staff member is not entitled to a removal of household goods under Rule 855-1~~, irrespective of the staff member's length of service with WHO or other United Nations organizations; it shall not be payable on initial appointment in the country of place of residence.
- 360.1.4 The non-removal element shall cease when a staff member has been in receipt of it for five consecutive years at the same official station. The Organization may authorize extension of the period of entitlement to the non-removal element for a further period not exceeding two years. No further extension shall be granted.
-

ANNEX 7

Method of work of the Health Assembly¹

Report by the Director-General

[EB99/36 - 19 December 1996]

BACKGROUND

1. Authority to determine the place, date and duration of annual sessions of the Health Assembly is vested in the Executive Board, the Health Assembly itself having selected, at each annual session, the country or region in which the next annual session shall be held.² Considering the experience in earlier years of Health Assemblies held elsewhere at the invitation of Member States, the Thirty-eighth World Health Assembly concluded that it was in the interest of all Member States that Health Assemblies should be held at headquarters.³
2. At its ninety-first session, the Executive Board agreed to recommend to the Health Assembly that in years in which the programme budget was discussed the duration of the Health Assembly should be restricted to two weeks, but in years in which the programme budget was not discussed, starting from 1994, the Health Assembly should close at the latest at noon on Thursday of the second week.⁴ Subsequently, the Forty-eighth World Health Assembly, in adopting the programme budget for the financial period 1996-1997, made provision for a five-and-a-half day Health Assembly in 1996.⁵
3. The Forty-ninth World Health Assembly completed its work on schedule (the session closed five-and-a-half days after the opening). This was accomplished by shortening the opening formalities and streamlining the discussion on *The world health report 1996*. The ninety-eighth session of the Executive Board, which met immediately after the Health Assembly, noted the improvement in the Assembly's working methods and the reduced duration, made suggestions for further improvements, and requested the Director-General to prepare a report on the method of work and the experience of the shorter Assembly in 1996 to facilitate discussion on further rationalization by the Board at its ninety-ninth session.

EVALUATION OF THE FORTY-NINTH WORLD HEALTH ASSEMBLY AND PROPOSALS FOR THE FUTURE

4. In order to accommodate the budgetary decision to shorten the duration of the Health Assembly, and in accordance with resolution WHA32.36, the Executive Board at its ninety-seventh session fixed a preliminary timetable for the Assembly's consideration of its agenda. The timetable, which was approved by the General

¹ See resolution EB99.R28.

² Constitution of WHO, Articles 14 and 15, and decision WHA30 (xvi).

³ Decision WHA38(14).

⁴ Document EB91/1993/REC/2, p. 177.

⁵ Programme budget for the financial period 1996-1997, p. 20.

Committee of the Forty-ninth World Health Assembly, rationalized the programme of work so that the procedural items 1 to 9 and the introduction of *The world health report 1996* by the Director-General were completed in plenary on the first day rather than mid-morning on the second day. This was made possible by holding the opening meeting at 10:00, rather than at 12 noon, limiting the interval between the meeting of the Committee on Nominations and the second plenary meeting, convening the General Committee at the beginning of the afternoon, and holding the third plenary meeting at 16:00, rather than the following morning. In order for the agenda of the Health Assembly to be completed, the main committees must begin work early in the session. Both main committees were able to begin work at 9:00 on the second day.

5. The discussion of *The world health report 1996* took place in Committee A, where the time allowed to each speaker was limited to five minutes in accordance with Rule 57 of the Rules of Procedure of the World Health Assembly. (Resolution WHA20.2, which governs arrangements for the conduct of discussions in plenary, allows speakers 10 minutes.) This made it possible to complete the discussion on the item by mid-morning on the third day rather than mid-afternoon on the fifth day.

6. It has been widely suggested that the opening formalities be further rationalized. The following proposals may be considered:

- maintain the practice established at the Forty-ninth World Health Assembly of holding the opening meeting at 10:00;
- shorten the duration of the opening meeting;
- rationalize procedures for nomination of officers of the Health Assembly, consequently shortening the duration of the meeting of the Committee on Nominations and the subsequent interval;
- set the third plenary meeting at a time which, in effect, limits the duration of the first meeting of the General Committee.

Implementation of the proposal relating to the Committee on Nominations would require modification of the Rules of Procedure of the World Health Assembly (Rules 24 and 25), as described below.

7. Rule 24 of the Rules of Procedure concerns the establishment and composition of the Committee on Nominations and the manner in which the Committee meets. Rule 25 concerns the procedures for proposing nominations for the officers of the Health Assembly. The Board may wish to propose that the Health Assembly modify these Rules to allow the President of the Assembly to be a member and Chairman ex officio of the Committee on Nominations and to propose to the Committee a slate of candidates. This procedural change would reduce the duration of the meeting of the Committee and the subsequent interval, allowing the second plenary meeting to be held an hour earlier than at the Forty-ninth World Health Assembly, i.e. at 12 noon. Once the second plenary meeting has elected the officers of the Health Assembly and the General Committee, the General Committee could meet at, say, 13:00 to carry out its functions as described in Rule 33.

8. At the Forty-ninth World Health Assembly, two-and-a-half hours were allowed for the first meeting of the General Committee. The meeting lasted less than half an hour. The Board, therefore, may wish to propose that the Health Assembly set the time for the third plenary in order to limit the time available for the first meeting of the General Committee to approximately one hour. The third plenary meeting could be held at, say, 14:30.

9. With respect to the discussion on *The world health report* (incorporating the annual report of the Director-General), members of the Board at the ninety-eighth session suggested that it should take place in plenary in future and that it should be designed to encourage greater participation of leading health authorities. Several Board members said the statements made on *The world health report* were too long. The time allowed to each speaker in the discussion on *The world health report* in plenary is governed by resolution WHA20.2. This resolution, which "encourages delegates to limit to ten minutes their speeches", was approved in May 1967 when

the duration of the Health Assembly was three weeks. In view of the current shorter duration of the Assembly, it may be considered appropriate to reduce the time allowed to each speaker to, say, five minutes. Statements submitted for inclusion in the verbatim records in lieu of oral statements should be of an equivalent length, say, 600 words.

10. The Executive Board, in resolution EB71.R3, approved a proposal of the Director-General to focus the debate on his report "on issues or topics deemed to be of particular importance". However, since *The world health report* now has a theme each year, it would seem appropriate for the debate to focus on that theme.

11. The proposed programme budget for the financial period 1998-1999 contains a provision for a five-and-a-half day session of the Health Assembly in 1998 and an eight-and-a-half day session in 1999 thus allowing the Health Assembly and the Executive Board to meet in a two-week period. Owing to budgetary constraints, this trend is expected to continue. If the Assembly is to complete its work in fewer working days, the length of the agenda of each session will have to take into account the time available for discussion. In this connection, the Board may wish to recall resolution WHA32.36 which, *inter alia*, refers to the preparation by the Board of the provisional agenda of the Health Assembly:

individual technical programme items shall preferably be included in the agenda of the Health Assembly as separate items only in the years when the Health Assembly does not undertake a full review of the proposed biennial programme budget.

The Board may, therefore, wish to propose to the Health Assembly that the Director-General submit reports on technical subjects only in non-budget (i.e., even-numbered) years, notwithstanding provisions of resolutions that may currently call for reports in budget (i.e., odd-numbered) years.

12. The main committees of the Health Assembly are defined in Rule 34 of the Rules of Procedure (Committee A to deal predominantly with programme and budget matters and Committee B to deal predominantly with administrative, financial and legal matters). Rule 34 also provides that the Health Assembly "shall allocate items of the agenda to the two main committees in such a way as to provide balance in the work of these committees". The experience of the Forty-ninth World Health Assembly shows that, given a shorter duration, greater flexibility is required in the allocation of items to the committees, and decisions regarding reallocation may have to be made very late in the session.

13. Night meetings and overtime negate the savings achieved by shortening the duration of the sessions of the Health Assembly. The Forty-ninth World Health Assembly completed its work during "normal" working hours, and such demonstration of discipline should continue. In order to close on time, the Health Assembly might have to consider postponing one or more items to a later session.

14. Rules 101 to 103 of the Rules of Procedure of the World Health Assembly govern the election by the Health Assembly of Member States entitled to designate a person to serve on the Executive Board. Rule 101 provides for a lapse of 48 hours between the announcement by the President requesting suggestions and the meeting of the General Committee to consider the suggestions. In view of the shorter duration of the Health Assembly, the Board may wish to propose that the Assembly modify Rule 101 to provide for a lapse of 24 hours between the announcement and the meeting of the General Committee.

FINANCIAL CONSIDERATIONS

15. The decision to shorten the duration of the Health Assembly was made for reasons of economy so that resources could be allocated to priority programmes. The resulting savings amounted to US\$ 450 000. In 1996-1997, the volume of pre-session documentation has been adapted to a target of 60% of the 1994-1995 level to achieve additional savings.

16. Significant savings could be achieved by reducing the frequency of the Health Assembly from annual sessions, as currently required under Article 13 of the Constitution of WHO, to biennial sessions. The special group established by the Executive Board to undertake a review of the Constitution of WHO has identified the relevant provision of the Constitution as one which might need further examination with a view to possible revision.¹ The possibility of biennial sessions of other governing bodies has also been raised. The proposed programme budget for the financial period 1998-1999 reports that "the Regional Committee for Africa has requested a review of the possibility of holding biennial sessions, an option which will be studied for other meetings".²

ACTION BY THE EXECUTIVE BOARD

17. [This paragraph contained a draft resolution which was adopted at the seventeenth meeting as resolution EB99.R28.]

¹ Annex 9, Appendix 2, p. 97.

² Document PB/98-99, p. 11.

ANNEX 8

WHO reform

Preparation of *The world health report 1998* and third evaluation of progress in implementation of the Global Strategy for Health for All by the Year 2000¹

Report by the Director-General

[EB99/17 - 11 September 1996]

1. The WHO Constitution (Article 61) stipulates that “each Member shall report annually to the Organization on the action taken and progress achieved in improving the health of its people”.
2. At the explicit request of the Health Assembly since 1956, WHO produced the First report on the world health situation in 1959, the Second in 1963, the Third in 1967, the Fourth in 1971 and the Fifth in 1975. Following a review of the methods followed in preparing these five reports, the Twenty-ninth World Health Assembly decided in 1976 that future reports on the world health situation should be published every six years in accordance with the major programme cycle of the Organization, the General Programme of Work. In the light of the decision of the Thirty-fourth World Health Assembly to monitor progress and evaluate the effectiveness of the Global Strategy for Health for All by the Year 2000, and of further Health Assembly decisions in 1983 and in 1992, the Seventh and Eighth reports of the world health situation were prepared on the basis of the first and second global reports on the evaluation of the strategy for health for all.
3. The Health Assembly also decided in 1975 that, starting in 1977, it would undertake in odd-numbered years “a brief review of the Director-General's report on the work of WHO for the preceding year; and in even-numbered years, a full review of the Director-General's report on the work of WHO for the past biennium” (resolution WHA28.69).
4. In 1994, the Executive Board in decision EB93(6) “endorsed the proposal ... that annual assessment of the world health situation should start in 1994 and the annual reports in 1995, incorporating the Director-General's report on *The work of WHO*”. The first issue of this new report (*The world health report 1995 - Bridging the gaps*), was prepared and was published in May 1995, and the second (*The world health report 1996 - Fighting disease, fostering development*) in May 1996.
5. The next cycle of evaluation of the implementation of the health-for-all strategy is scheduled for 1997, and the regional committees concerned would be reviewing in 1997 the relevant regional reports prepared on the basis of the national reports. It is now proposed that the global evaluation report prepared on the basis of national and regional reports could be incorporated in *The world health report 1998*, which would be released for review by the Health Assembly in May 1998.

¹ See decision EB99(4).

ACTION BY THE EXECUTIVE BOARD

6. [This paragraph contained a draft decision adopted at the eleventh meeting as decision EB99(4).]

ANNEX 9

Review of the Constitution of the World Health Organization¹

Report of the special group

[EB99/14 - 17 October 1996]

1. The Forty-eighth World Health Assembly, in resolution WHA48.14, called on the Executive Board to examine whether all parts of the Constitution of the World Health Organization remain appropriate and relevant. The Assembly noted that the Organization was approaching its fiftieth anniversary and that there had been significant changes in the international system and in the composition and membership of the Organization in recent years. The Assembly also noted the WHO response to global change and that some of its implications may exceed the present legal framework of the Organization. It noted further that the Constitution had not been thoroughly reviewed since its entry into force in 1948. It recognized the need for review of the Constitution to ensure that the Organization remains equal to the international health challenges of the late twentieth century and beyond.

2. The Executive Board in decision EB97(11) established a special group² comprising six members of the Board (one from each region) and its Chairman to undertake an examination of the Constitution, giving priority to consideration of WHO's mission and functions. It requested the special group to report to the Board at its ninety-ninth session, through the Programme Development Committee and the Administration, Budget and Finance Committee, on its deliberations on WHO's mission and functions and to advise on any provisions of the Constitution that may need further examination with a view to possible revision.

3. The special group met on 28 May 1996 and from 9 to 10 October 1996. The list of participants in the two meetings is contained in Appendix 1. At its first meeting held on 28 May, the special group confirmed its terms of reference:

- to consider WHO's mission and functions in the context of global change;
- to undertake an examination of the Constitution and to advise on whether any provision might need further examination with a view to possible revision.

4. At its second meeting, the special group reviewed the mission and functions of WHO, taking into account the health mandate of other organizations of the United Nations system, the status of renewal of the health-for-all strategy, and the current activities of WHO in relation to the 22 functions listed in Article 2 of the Constitution.

5. At the outset, the group acknowledged that the Constitution had served the Organization well for the past 50 years, but that it might need revision in view of the challenges of the twenty-first century.

¹ See decision EB99(5).

² Members of the special group are: Dr A.R.S. Al-Muhailan, Dr J.V. Antelo Pérez, Dr N. Blewett, Dr K. Kalumba, Mr S. Ngedup (Chairman of the Board), Professor Ž. Reiner and Dr B. Wasisto.

6. The group considered that the preamble of the Constitution presented a vision for the Organization that was still valid. It further considered that the mission was expressed in Article 1 of the Constitution, which states that the objective of the Organization “shall be the attainment by all peoples of the highest possible level of health”. The group noted that renewal of the health-for-all policy might give rise to revision of the mission.

7. In connection with its discussion of functions of the Organization, the group adopted the following two recommendations concerning (1) linkage with the renewal of the health-for-all policy and reporting to the Executive Board, and (2) coordination of the United Nations system:

Recommendation (1)

The special group should continue its review of the Constitution in parallel and in coordination with renewal of the health-for-all policy and, informed by that work, prepare perspectives on the constitutional review for the Executive Board in January 1998.

Recommendation (2)

WHO should take appropriate steps to initiate an improved coordination of mandates and operations of relevant organizations of the United Nations system carrying out activities within the health field.

8. The group considered that if it is determined that the functions defined in the Constitution of the World Health Organization need to be revised, the revision should take into account the following, in conformity with the future mission:

- wide range of functions to ensure flexibility and effective implementation
- generic grouping of functions
- organization of functions by priority
- functions to reflect the evolution in health policy since 1948 and the prospect of health for all in the twenty-first century
- functions defined in terms of general principles rather than specific activities.

9. The group felt that any revision of functions would need to take into account a review of the successes and failures of the Organization. In this connection, the group adopted the following recommendation:

Recommendation (3)

The WHO Secretariat should prepare a review of the evolutionary development of WHO from 1948 to date containing an assessment of its work, with analysis of achievements and weaknesses. The analysis should relate to the prospect for the future of the Organization and to its functions as listed in the Constitution.

10. The group prepared a checklist (Appendix 2) of other provisions of the Constitution which might need further examination and possible revision drawn from the report of the Director-General contained in document EB97/9, document EB/Constitution/2/2 and the comments of the regional committees contained in documents EB/Constitution/2/2 Add. 1, 2 and 3.

11. The group underlined that it was necessary to move with caution and to have more information before making decisions on revision of the Constitution. In this connection, the group adopted the following recommendations:

Recommendation (4)

Further consideration should be given to issues of governance related to the Constitution, which would permit development of options in the light of the parallel work being done on the mission and functions of the Organization. This would be carried out on the basis of (1) a further analysis by the Secretariat of the issues raised concerning constitutional governance matters and (2) presentations to the special group by writers on such constitutional governance issues.

Recommendation (5)

If the Executive Board accepts Recommendation (1), the group recommended that the Board should consider whether this constitutional review should be established on a basis permitting greater continuity of membership.

12. The group noted that, if the Executive Board accepts Recommendation (1), a short meeting of the special group could take place in connection with the ninety-ninth session of the Board to discuss the timetable for further work.

ACTION BY THE EXECUTIVE BOARD

13. The Board is invited to consider the recommendations contained in paragraphs 7, 9 and 11.

[After reviewing this report, the Board, at its fourteenth meeting, adopted decision EB99(5).]

Appendix 1**LIST OF PARTICIPANTS****Meeting of 28 May 1996:**

Dr N. Blewett (Chairman)
 Dr A.R.S. Al-Muhailan
 Dr J.V. Antelo Pérez
 Ms A. Kazhingu (alternate to
 Dr K. Kalumba)
 Mr S. Ngedup
 Professor Ž. Reiner
 Dr B. Wasisto

Meeting of 9-10 October 1996:

Dr N. Blewett (Chairman)
 Mr J. Brown (alternate)
 Ms A. Kern (alternate)
 Dr A.A. Al-Awadi (alternate to
 Dr A.R.S. Al-Muhailan)
 Dr J.V. Antelo Pérez
 Mrs M.E. Fiffe (alternate)
 Mr S. Ngedup
 Professor Ž. Reiner
 Dr B. Wasisto

Appendix 2

PROVISIONS OF THE CONSTITUTION IDENTIFIED BY THE SPECIAL GROUP DURING ITS MEETING AS POSSIBLY NEEDING FURTHER EXAMINATION

Provision	Subject	Issues raised
Article 7	Consequences for Members failing to meet financial obligations	- tighter and/or more extensive sanctions
Article 11	Representation of Members at the Health Assembly ("persons most qualified by their technical competence in the field of health")	- broader criteria for choosing delegates
Article 13	Annual session of Health Assembly	- biennial sessions
Article 18	Functions of the Health Assembly	- possible need to revise, if functions of Organization in Article 2 are revised
Article 19	Health Assembly authority to adopt conventions or agreements	- never exercised so far
Article 21	Health Assembly authority to adopt regulations in five specific areas	- extend to new areas, e.g., transplantation, genetic engineering
Article 24	Executive Board membership <ul style="list-style-type: none"> - "equitable geographical distribution" - Member States "designate persons" to serve as members of the Board - persons are to be "technically qualified in the field of health" 	<ul style="list-style-type: none"> - what factors should be considered? - representatives of Member States rather than individual capacity? - need for technical qualifications in the field of health?
Article 25	Election and term of office of members of Executive Board	<ul style="list-style-type: none"> - increase term of office from three to four years to coincide with two programme budget cycles - custom of re-election of permanent Members of Security Council
Articles 44-54	Regional arrangements	<ul style="list-style-type: none"> - concept of regional arrangements - number and distribution of countries in the different regions - role of Executive Board in appointment of Regional Directors
Article 55	Director-General submits budget estimates to Board and Board submits them to Health Assembly with any recommendations	- modification of budget estimates by Board
Article 73	Amendment of Constitution	- is subsequent acceptance by Members necessary after two-thirds of Health Assembly adopts an amendment?

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