
22 May 2026(Draft) A79/38

Second report of Committee B

(Draft)

Committee B held its third and fourth meetings on 21 May 2026, chaired by Dr Kwabena Mintah Akandoh (Ghana) and Mr Bonanza Perwira Taihitu (Indonesia).

It was decided to recommend to the Seventy-ninth World Health Assembly the adoption of the attached three decisions and three resolutions relating to the following agenda items:

17. Health conditions in the occupied Palestinian territory, including east Jerusalem, and in the occupied Syrian Golan

17.2 Health conditions in the occupied Palestinian territory, including east Jerusalem

One resolution as amended

Power and performance

18. Review of and update on matters considered by the Executive Board and the Programme, Budget and Administration Committee of the Executive Board

Budget and finance matters

- 18.3 Status of collection of assessed contributions, including Member States in arrears in the payment of their contributions to an extent that would justify invoking Article 7 of the Constitution

One resolution as amended

Audit and oversight matters

- 18.7 Report of the External Auditor

One decision

- 18.10 Proposed amendments to the process for the selection of the External Auditor

One decision

Staffing matters

18.15 Amendments to the Staff Regulations and Staff Rules

One resolution entitled:

- Salaries of staff in ungraded positions and of the Director-General

19. Appointment of representatives to the WHO Staff Pension Committee

One decision

Agenda item 17.2**Health conditions in the occupied Palestinian territory, including east Jerusalem**

The Seventy-ninth World Health Assembly,

Having considered the report by the Director-General;¹

Noting the role of WHO within its mandate as the directing and coordinating authority on international health matters;

Expressing grave concern at the catastrophic humanitarian situation in the Gaza Strip, and its vast consequences for the civilian population, and in light of the gravity of the current escalating situation, and the magnitude of the intense damage on the public health sector, that has, to this date, killed and injured thousands of civilians, the majority of them children, women and elderly, including humanitarian and health workers, in addition to thousands of victims who remain under the rubble;

Emphasizing that all civilians, including health and humanitarian aid workers, must be protected, in accordance with international humanitarian law, and deploring in this regard the heavy civilian casualties and widespread destruction;

Expressing further concern at the large-scale destruction of health facilities including hospitals and ambulances, and at the catastrophic humanitarian conditions that have been inflicted on the public health system in the Gaza Strip;

Recognizing that attacks on medical and health personnel result in long-lasting impacts, including the loss of life and human suffering, weaken the ability of health systems to deliver essential life-saving services and produce setbacks for health development;

Expressing also deep concern at the killing of more than one hundred United Nations staff including WHO staff;

Commending WHO, its Director-General and its staff and health cluster partners in the field for remaining and delivering, and for their tireless efforts to address the situation on the ground in the Gaza Strip, early on, despite severe dangers to their lives, and expressing appreciation to all humanitarian agencies and their implementing partners that are delivering life-saving aid to alleviate the impact of the conflict on civilians;

Bearing in mind the appeal for a humanitarian ceasefire by invoking Article 99 of the United Nations Charter;²

Recalling the Geneva Conventions of 1949 and their Additional Protocols, as applicable, as well as relevant customary international law concerned with the protection of the wounded and sick, medical personnel and humanitarian personnel exclusively engaged in medical duties, their means of transport and equipment, as well as hospitals and other medical facilities, and the

¹ Document A79/12.

² Letter dated 6 December 2023 from the United Nations Secretary-General addressed to the President of the Security Council invoking Article 99 of the Charter of the United Nations (UN document S/2023/962).

obligation of all parties to armed conflict to respect and ensure respect for international humanitarian law in all circumstances;³

Recalling further the specific obligations under international humanitarian law to respect and protect, in situations of armed conflict, medical personnel and humanitarian personnel exclusively engaged in medical duties, their means of transport and equipment, and hospitals and other medical facilities, which must not be attacked, and to ensure that the wounded and sick receive, to the fullest extent practicable and with the least possible delay, the medical care and attention required;⁴

Expressing concern at the inadequate humanitarian access to, and its grave impact on, the Palestinian civilian population, and underlining the urgent need for necessary humanitarian measures, including humanitarian pauses, to ensure full, rapid, safe, and unhindered humanitarian access throughout the Gaza Strip;

Expressing concern also at the dire situation of hospitals and other medical facilities and ambulances, and the obstruction of the provision of the fuel necessary for their operation, endangering the lives of the sick and wounded, and preventing the conduct of medical operations and procedures, and the operation of medical equipment including incubators for premature newborn babies and surgical and resuscitation equipment for persons suffering from severe medical conditions;

Expressing further concern at the fact that the civilian population has been exposed to conflict and insecurity, leading to significant mental health and psychosocial needs, underlining the importance of urgently providing mental health and psychosocial support, as well as trauma-related services, to the affected persons, particularly children;

Underlining the disproportionate effect on children, women, elderly, disabled persons and the chronically ill, and recognizing the need to address their specific health needs, including the special health needs of persons with disabilities, bearing in mind the challenges they face in accessing medical services, which are compounded in the current situation, as a result of the destruction of civilian infrastructure and residential buildings, and the resulting additional restrictions to human mobility;

Expressing concern at the public health management implications of the existence of thousands of corpses of victims in the Gaza Strip buried under the rubble, which are exacerbated by the lack of access to water, electricity, and equipment needed to bury the bodies of the dead;

Expressing further concern that intense overcrowding in shelters coupled with disrupted health, water and sanitation systems and lack of fuel pose increasing risks of the spread of infectious diseases, including waterborne, airborne, vector-borne and vaccine-preventable diseases;

Recognizing the interconnectedness between health and other sectors, such as water and sanitation and nutrition, and the need for a comprehensive approach to humanitarian assistance, and stressing that ongoing challenges in the Gaza Strip, including restrictions on the movement of

³ United Nations Security Council resolution 2286 (2016) on protection of the wounded and sick, medical personnel and humanitarian personnel in armed conflict; resolution WHA65.20 (2012) on WHO's response, and role as the health cluster lead, in meeting the growing demands of health in humanitarian emergencies.

⁴ United Nations Security Council resolution 2286.

goods, can impact food availability contributing to malnutrition, while the limited availability of clean water increases the risk of outbreaks and epidemics, and stressing that access to clean water and sanitation facilities is crucial for maintaining public health,

1. CALLS FOR the immediate, sustained and unimpeded passage of humanitarian relief, including the access of medical personnel, the entry of humanitarian equipment, transport and supplies in the occupied Palestinian territory, in particular the Gaza Strip, and the granting of exit permits for patients in need of medical treatment outside the Gaza Strip, and stresses the need for the unhindered and safe passage of ambulances at checkpoints, especially in times of conflict;
2. CALLS UPON all parties to fulfil their obligations under international law, including international humanitarian law and international human rights law to ensure, to the fullest extent of the means available to it, the supply and replenishment of medicine and medical equipment to the civilian population, and reaffirms that all parties to armed conflict must comply fully with the obligations applicable to them under international humanitarian law related to the protection of civilians in armed conflict and medical personnel;⁵
3. DEMANDS that all parties fully comply with their obligations, in particular their obligations under the Geneva Conventions of 1949 and the obligations applicable to them under the Additional Protocols, to ensure the respect and protection of all medical personnel and humanitarian personnel exclusively engaged in medical duties, their means of transport and equipment, as well as hospitals and other medical facilities;
4. FURTHER DEMANDS a sustained, orderly, unimpeded, safe and unobstructed passage for medical personnel and humanitarian personnel exclusively engaged in medical duties, their equipment, transport and supplies, including surgical items, to all people in need, consistent with international humanitarian law,⁶ calls for the passage for ambulances and medical evacuations of critically injured and sick patients as well as respect and protection of the wounded, sick and injured, and ensuring the safety, security and safe movement of all Palestinian patients to receive medical care and treatments, and calls for the humane treatment of all persons deprived of their liberty and their access to medical treatment in compliance with international humanitarian law, including the Geneva Conventions and their Additional Protocols;
5. REQUESTS the Director-General:
 - (1) to report, based on field monitoring and assessment conducted by the WHO emergency teams, on the public health implications of the catastrophic humanitarian crisis in the occupied Palestinian territory, including east Jerusalem, including with respect to acts of violence against the wounded and sick, medical personnel and humanitarian personnel exclusively engaged in medical duties, their means of transport and equipment, as well as hospitals and other medical facilities, and submit recommendations in this regard to the 160th session of the Executive Board, and to the Eightieth World Health Assembly;
 - (2) to coordinate with donors, prior to the Eightieth World Health Assembly, to secure the funding for the immediate health needs as well as the rehabilitation and rebuilding of the health system in the occupied Palestinian territory, including east Jerusalem, and calls on Member States, donors and international humanitarian and development actors to provide

⁵ Article 55 of the Geneva Convention relative to the Protection of Civilian Persons in Time of War (1949); United Nations Security Council resolution 2286.

⁶ United Nations Security Council resolution 2286.

humanitarian assistance to the Palestinian people, and to ensure the allocation of human and financial resources in order to urgently achieve these objectives;

(3) to assess, in full cooperation with relevant United Nations agencies, the extent and nature of psychiatric morbidity, and other forms of mental health and psychosocial support needs and challenges of all affected persons;

(4) to strengthen and to continue providing the necessary technical and material health assistance in order to meet the health needs of the Palestinian people, especially the most vulnerable;

(5) to continue strengthening partnerships with other United Nations agencies such as UNRWA and relevant partners in the occupied Palestinian territory, including east Jerusalem, to enhance humanitarian health response capacities by delivering emergency aid and protection in an inclusive and sustained manner before, during and after the military operations and the humanitarian crisis;

6. CALLS UPON the international community to secure appropriate funding to support the immediate and future needs of the WHO health programmes in the occupied Palestinian territory, including east Jerusalem, and for rebuilding the Palestinian health system, in full cooperation with WHO and relevant United Nations agencies such as UNRWA and partners.

Agenda item 18.3**Status of collection of assessed contributions, including Member States in arrears in the payment of their contributions to an extent that would justify invoking Article 7 of the Constitution**

The Seventy-ninth World Health Assembly,

Having considered the report on status of collection of assessed contributions, including Member States in arrears in the payment of their contributions to an extent that would justify invoking Article 7 of the Constitution of the World Health Organization,⁷ and special arrangements for the settlement of arrears, and having noted the report of the Programme, Budget and Administration Committee of the Executive Board to the Seventy-ninth World Health Assembly;⁸

Noting that, at the time of opening of the Seventy-ninth World Health Assembly, the voting rights of Afghanistan, Dominica, Myanmar, Saint Lucia, Somalia, South Sudan, Sudan, Venezuela (Bolivarian Republic of) and Yemen were suspended, such suspension shall continue until the arrears of the Member States concerned have been reduced, at the present or future Health Assemblies, to a level below the amount that would justify invoking Article 7 of the Constitution;

Noting that Burundi, Côte d'Ivoire, Djibouti, Equatorial Guinea, Nigeria, Panama, Sao Tome and Principe, Timor-Leste, Turkmenistan and the United States of America were in arrears at the time of the opening of the Seventy-ninth World Health Assembly to such an extent that it was necessary for the Health Assembly to consider, in accordance with Article 7 of the Constitution, whether the voting privileges of those countries should be suspended at the opening of the Eightieth World Health Assembly in 2027,

DECIDES:

- (1) that, in accordance with the statement of principles set out in resolution WHA41.7 (1988), if, by the time of the opening of the Eightieth World Health Assembly, Burundi, Côte d'Ivoire, Djibouti, Equatorial Guinea, Nigeria, Panama, Sao Tome and Principe, Timor-Leste, Turkmenistan and the United States of America are still in arrears in the payment of their contributions to an extent that would justify invoking Article 7 of the Constitution, their voting privileges shall be suspended as from the said opening;
- (2) that any suspension that takes effect as set out in paragraph (1) above shall continue at the Eightieth World Health Assembly and subsequent Health Assemblies, until the arrears have been reduced to a level below the amount that would justify invoking Article 7 of the Constitution;
- (3) that this decision shall be without prejudice to the right of any Member to request restoration of its voting privileges in accordance with Article 7 of the Constitution.

⁷ Document A79/17.

⁸ Document A79/28.

Agenda item 18.7**Report of the External Auditor**

The Seventy-ninth World Health Assembly, having considered the report of the External Auditor to the Health Assembly,⁹ and having noted the report of the Programme, Budget and Administration Committee of the Executive Board to the Seventy-ninth World Health Assembly,¹⁰

Decided to accept the report of the External Auditor to the World Health Assembly.

⁹ Document A79/18.

¹⁰ Document A79/29.

Agenda item 18.10**Proposed amendments to the process for the selection of the External Auditor**

The Seventy-ninth World Health Assembly, having considered the report by the Director-General on proposed amendments to the process for the selection of the External Auditor,¹¹

Decided to adopt the revised process for selecting the External Auditor and for renewing for a second term, as set out in paragraph 6 of document EB158/41.

¹¹ Document A79/5.

Agenda item 18.15**Salaries of staff in ungraded positions and of the Director-General**

The Seventy-ninth World Health Assembly,

Noting the recommendations of the Executive Board with regard to remuneration of staff in ungraded positions and of the Director-General,¹²

1. ESTABLISHES the salaries of Assistant Directors-General and Regional Directors at US\$ 217 448 gross per annum, with a corresponding net salary of US\$ 159 016;
2. ESTABLISHES the salary of the Deputy Director-General at US\$ 239 200 gross per annum, with a corresponding net salary of US\$ 173 372;
3. ESTABLISHES the salary of the Director-General at US\$ 298 001 gross per annum, with a corresponding net salary of US\$ 222 101;
4. DECIDES that these adjustments in remuneration shall take effect from 1 January 2026.

¹² Document A79/5.

Agenda item 19**Appointment of representatives to the WHO Staff Pension Committee**

The Seventy-ninth World Health Assembly,

Decided:

- (1) to reappoint Dr Ahmed Shadoul of the delegation of Sudan as a member of the WHO Staff Pension Committee for a three-year term until the closure of the Eighty-second World Health Assembly in May 2029;
- (2) to reappoint Mr Tshering Nidup of the delegation of Bhutan as a member of the WHO Staff Pension Committee for a three-year term until the closure of the Eighty-second World Health Assembly in May 2029;
- (3) to appoint Dr Merle Lewis of the delegation of Trinidad and Tobago as an alternate member of the WHO Staff Pension Committee for a three-year term until the closure of the Eighty-second World Health Assembly in May 2029;
- (4) to appoint Dr Kezia Lorraine H. Rosario of the delegation of the Philippines, the most senior alternate member, as a member of the WHO Staff Pension Committee for the remainder of her term of office until the closure of the Eightieth World Health Assembly in May 2027.
