

PROVISIONAL SUMMARY RECORD OF THE FIRST MEETING

**WHO headquarters, Geneva
Monday, 16 November 2020, scheduled at 10:00**

Chair: Dr H. VARDHAN (India)

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FIRST MEETING (resumed)

Monday, 16 November 2020, at 10:15

Chair: Dr H. VARDHAN (India)

- 1. OPENING OF THE SESSION AND ADOPTION OF THE AGENDA:** Item 2 of the agenda (documents EB147/1 Rev.2, EB147/1 Add.1, EB147/1 (annotated), EB147/11 and EB147/13)

Opening of the session

The CHAIR declared open the 147th session of the Executive Board (resumed), which was taking place at the end of a year marked by collaborative action in a time of unprecedented challenge. He saluted the service of health workers during the coronavirus disease (COVID-19) pandemic and asked the members of the Board to join him in a round of applause to mark their gratitude.

The Board applauded the service of health workers during the COVID-19 pandemic.

Since the start of the pandemic, WHO had maintained its technical assistance with a view to enabling Member States to resume uninterrupted health service delivery. It was working with the Member States to identify the lessons learned from the crisis so that, together, they could achieve more robust and resilient health systems able to promote sustained economic recovery and a healthier future for people around the world. He called on all Member States to enhance their cooperation with each other, with other United Nations agencies and with the global community of partners for the efficient and effective discharge of their public health obligations.

He concluded by drawing attention to the draft decision contained in document EB147/13 on special procedures for the resumed session of the Executive Board.

The decision was adopted.¹

Adoption of the agenda

The CHAIR recalled that the Executive Board had adopted the agenda of its 147th session at the virtual *de minimis* meeting in May 2020, at which it had addressed inter alia item 8 (Future sessions of the Executive Board and the Health Assembly). He proposed that the Board return to that item at the present resumed session to discuss whether it should hold physical or virtual meetings in January 2021.

It was so agreed.

Opening remarks by the Director-General

The DIRECTOR-GENERAL said that the COVID-19 pandemic had set back efforts to attain the triple billion targets and the health-related Sustainable Development Goals, and the Secretariat would continue to support Member State efforts to get back on track. The new results framework and triple billion dashboard noted by the Health Assembly would enable the Organization to uphold its

¹ Decision EB147(10).

commitments to all Member States, from those that had not recorded a single case of or death from COVID-19 to those experiencing large outbreaks with sustained transmission.

Progress had recently been made towards the development of an effective COVID-19 vaccine, and public and private donors had contributed generously to the Access to COVID-19 Tools (ACT) Accelerator, but immunization alone would not suffice to bring the pandemic under control. An effective vaccine would only serve to complement other tools and measures, as supply would initially be limited to health workers, older persons and other at-risk groups. Surveillance, testing, contact-tracing and quarantining would remain essential; communities must remain engaged and individuals must remain careful. The work to control the pandemic was far from over, and the Secretariat was counting on the Board to provide guidance and advice on how it could best help Member States to break chains of transmission and save lives.

PILLAR 4: MORE EFFECTIVE AND EFFICIENT WHO PROVIDING BETTER SUPPORT TO COUNTRIES

2. OUTCOME OF THE SEVENTY-THIRD WORLD HEALTH ASSEMBLY: Item 3 of the agenda

The DIRECTOR-GENERAL said that the Seventy-third World Health Assembly had shown that, with the help of modern technology, WHO was able to continue its work even under extreme circumstances. The virtual session had adopted important resolutions, decisions and road maps on a range of topics, including WHO's work in health emergencies, neglected tropical diseases, immunization, healthy ageing, food safety, innovation and intellectual property. The Secretariat had also announced three new initiatives – the Universal Health and Preparedness Review, the Council on the Economics of Health for All, and a proposed biobank for the sharing of pathogens and clinical specimens – about which the Secretariat would soon provide further information.

The representative of GERMANY agreed that the Health Assembly had been highly successful within the limitations of the virtual format. However, it was frustrating that the agenda management plan had been released only one-and-a-half working days before the Health Assembly began. Delegations must know how the agenda would be managed a minimum of four weeks in advance for both physical and virtual meetings, with some flexibility allowed should unforeseen events arise. Moreover, the process for amending draft resolutions and strategies had been extremely unclear and confusing. In future, he encouraged the Secretariat to put information about ongoing consultations on the homepage of the WHO website. The time frame for consultations should also be made available so that it was clear when non-State actors were being consulted. Finalized documents should be explicitly labelled as such. If launch events were held for strategies, the relevant dates should be made known. Lessons learned from the Seventy-third World Health Assembly should be applied at the Executive Board session in January 2021, particularly with regard to agenda management.

The representative of BOTSWANA, speaking on behalf of the Member States of the African Region, said that the success of the Health Assembly had sent a signal to the world that WHO continued to work despite the uncertainty caused by the COVID-19 pandemic. Moreover, the meeting times and management of the session through the virtual platform had allowed for equitable geographical participation. Member States in her Region had nonetheless encountered some challenges. First, the host of briefings held by the Secretariat, the last of which had taken place only four days before the Health Assembly opened, had created confusion. There had also been problems with the registration process, and some observers for non-Member States had been unable to register. Secondly, the grouping of

agenda items had made it difficult to discuss some critical issues fully within the time limits set. Lastly, some Member States had found it difficult to cast their vote through the virtual platform. She was nonetheless confident that those procedures could be improved ahead of future meetings.

The representative of the UNITED KINGDOM OF GREAT BRITAIN AND NORTHERN IRELAND expressed appreciation for the improvements made to the virtual meeting format. She agreed with the representatives of Germany and Botswana, however, that the Secretariat needed to engage fully and in good time with Member States ahead of governing body meetings so that representatives had enough time to prepare and were involved early in planning decisions. The format and plan for the 148th session of the Executive Board should be rapidly decided. The proposal made during the Health Assembly to limit Secretariat responses to three minutes was cause for concern: while excessive responses or lengthy prepared statements were clearly unwelcome, specific responses to Member States' questions about progress were a key function of the governing bodies and should be given priority. She expressed support for the idea of a Board retreat, which would foster creative and productive discussions leading to outcomes and proposals related to the full and proper role of the Executive Board that could be brought back to formal governing body meetings.

The representative of the UNITED STATES OF AMERICA agreed that the Health Assembly had been a success, and expressed appreciation in particular for the absence of evening sessions and for the productive discussions held across the disparate workstreams and technical areas of all four pillars of the Thirteenth General Programme of Work, 2019–2023. He endorsed the suggestions of previous speakers, including that of establishing meeting arrangements early so that Member States had as much time to prepare as possible. He urged the Secretariat to continue to make use of the attaché corps from the permanent missions in Geneva when seeking creative solutions for virtual meetings.

The representative of AUSTRALIA expressed satisfaction overall with the outcome of the Health Assembly, as the Secretariat and Member States had shown flexibility and commitment to ensuring that momentum was maintained on important global health issues in spite of the COVID-19 pandemic. She agreed, however, that consultations on the meeting arrangements were held too late for Member States to be able to prepare and asked the Secretariat to draw on the experiences from 2020 to ensure timely communication and improved preparations for the next cycle of governing bodies meetings. While a workable timetable had eventually been established, representatives in the Western Pacific Region had consistently been obliged to attend meetings that, for them, ran from late at night to early in the morning. With more virtual meetings likely in the future – including for the 148th Executive Board, which had an ambitiously long agenda – greater consideration should be given to time differences and a more balanced approach found that did not disadvantage one particular region. For example, meeting start times could alternate so that some meetings started earlier, and speakers' time zones could be taken into account when deciding the speaking order.

The representative of BRAZIL said that the successful Health Assembly had shown that WHO was committed and able to continue delivering substantive results in the fight against COVID-19 and more. However, limiting Member States to 11 oral statements in total, five of them on managerial issues, had discouraged substantive debate on key public health issues. Representatives had spent more time listening than they had in active discussion with each other and with the Secretariat, which was at odds with WHO's intergovernmental nature. She took note of the Director-General's proposed initiatives and looked forward to transparent and inclusive conversations on their content and implications, and on the two consultations on the global strategy and plan of action on public health, intellectual property and innovation planned before the end of 2020.

The representative of FINLAND said that the Health Assembly had successfully handled a full agenda thanks to participants' flexibility. The adoption of the resolution contained in Executive Board

resolution EB146.R10 on strengthening preparedness for health emergencies: implementation of International Health Regulations (IHR, 2005)¹ was particularly welcome. She agreed with previous speakers that meeting arrangements had to be made early; indeed, preparations for the January 2021 meeting of the Board should start immediately. An Executive Board retreat would provide a sounding board for developing suggestions on which other Member States could then be consulted.

The representative of the REPUBLIC OF KOREA said that close collaboration and communication between the Secretariat and Member States had resulted in effective meeting arrangements for the Seventy-third World Health Assembly. If the next Health Assembly were to be held virtually or as a hybrid meeting, the number of core topics for discussion could be reduced by using the written silence procedure or informal prior consultations. He looked forward to hearing more about the work of the Independent Panel for Pandemic Preparedness and Response, the Review Committee on the Functioning of the International Health Regulations (2005) during the COVID-19 Response and the Independent Oversight and Advisory Committee for the WHO Health Emergencies Programme, but stressed that any evaluation of WHO's response to the COVID-19 pandemic must not duplicate other efforts in that regard.

The representative of the RUSSIAN FEDERATION agreed with the representative of Germany about the time frame for meeting arrangements. The agenda of the next Health Assembly had to be developed taking into account the interests of all participants, starting immediately. He thanked the Director-General for the new initiatives and looked forward to receiving more detailed information about them. He noted the Director-General's commitment to ensuring equitable access to COVID-19 vaccines and stressed that WHO must act swiftly to assess the safety of new vaccines.

The representative of AUSTRIA said that, while virtual meetings could not replace in-person sessions on controversial issues requiring a consensus, the format had worked well. Some aspects could nevertheless be improved, in line with the suggestions made by the representative of Germany. An Executive Board retreat would allow the Board to deliberate on how to improve its guiding and steering capacity.

The representative of SUDAN echoed the procedural concerns raised by other representatives, adding that the limited number of statements and merging of agenda items had resulted in insufficient discussion of issues of particular interest and concern, and that Member States required prior notice to ensure adequate preparation. She applauded the efforts of the Eastern Mediterranean Region to facilitate daily briefings and preparation for the session.

The representative of DJIBOUTI said that the price of the COVID-19 vaccine would hinder access to it in African and low-income countries. He asked what mechanisms the Secretariat or other partners had in place to ensure its availability at an affordable price.

The representative of CHINA agreed with the comments of previous speakers and hoped that the Secretariat would clarify procedural issues, allowing ample time for Member States to prepare their interventions. She endorsed the suggestions made by the representative of Australia and suggested that consideration should be given to time zones in the Western Pacific Region. She requested further information on the new initiatives proposed by the Secretariat.

¹ Resolution WHA73.8.

The representative of CANADA¹ noted the value of having had a discussion on agenda management prior to the opening of the session, and agreed with the comments made by other speakers on agenda management and time frames for receiving the programme of work. Grouping together a small number of agenda items covering closely linked issues could enrich debates and be beneficial in future sessions, particularly if Member States were able to prepare for more than one item being taken up at a time. It was nevertheless important to allow sufficient time for in-depth deliberations and avoid addressing several or loosely related items simultaneously. The approach to agenda management should be discussed with the Secretariat well in advance of governing body meetings. Lastly, Executive Board retreats should be transparent and inclusive.

The representative of NEW ZEALAND² said that the benefits of the virtual Health Assembly included greater efficiency thanks to a more concise agenda, with items grouped under the key pillars of work; increased accessibility for Member States who had previously been unable to participate for reasons of geographical distance or financial cost; and a reduced climate footprint. The Secretariat should find a workable balance that ensured that Member States had enough time to make statements, take account of working hours in other time zones such as the Western Pacific Region, and examine greener methods of working with Member States. It should engage Member States on special procedures at the earliest opportunity.

The EXECUTIVE DIRECTOR (External Relations and Governance) expressed appreciation for the Member States' flexibility in making the World Health Assembly a success, particularly those working in other time zones. The Secretariat had taken careful note of their insightful comments, all of which it would reflect on and address in the run-up to forthcoming sessions.

The DIRECTOR-GENERAL endorsed that pledge. The Secretariat would do its utmost to improve agenda management and prepare the proposed Executive Board retreat to discuss the issues raised. He thanked Member States for their commitment and guidance; the lessons learned from the virtual sessions of the Health Assembly and Executive Board would make future virtual meetings more efficient.

3. REPORT OF THE PROGRAMME, BUDGET AND ADMINISTRATION COMMITTEE OF THE EXECUTIVE BOARD: Item 4 of the agenda (document EB147/2)

The representative of TUNISIA, speaking in his capacity as Chair of the Programme, Budget and Administration Committee of the Executive Board, said that the Committee had requested that, in future, reports provided to it include specific information on the Secretariat's follow-up activities in respect of recommendations it had made at its previous meeting. It had also requested information on the Secretariat's follow-up to recommendations made in the reports of the Independent Expert Oversight Advisory Committee and the Joint Inspection Unit.

The Committee had received an update from the Director-General on the Organization's response to allegations of sexual abuse and exploitation in the Democratic Republic of the Congo and on its financial situation and efforts to continue the transformation process in the face of the COVID-19 pandemic. It had welcomed the Secretariat's moves to strengthen effective risk management and accountability, and had proposed a number of measures aimed at guiding the Secretariat's

¹ Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.

² Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.

implementation of existing mandates in that regard. It had also proposed measures in response to the Director-General's annual report on compliance, risk management and ethics.

Regarding the election of the Director-General, the Committee had agreed with the outcome of the informal consultations on the length of the campaign period and had recommended that the Executive Board adopt the draft decision contained in document EB147/4 Add.1. On the subject of evaluations, it had proposed, *inter alia*, that the Secretariat include an evaluation of the WHO response to the COVID-19 pandemic in the evaluation workplan for 2021.

Lastly, the Committee had commended both the work of hosted partnerships and the dedication and efforts of WHO staff members in the wake of the COVID-19 pandemic. It had formulated a number of proposals intended to serve as guidance for the Secretariat's implementation of existing mandates related to staff well-being.

The representative of SINGAPORE commended the Secretariat for ensuring that work continued on most workplans despite the ongoing pandemic and the current budgetary constraints but expressed concern at the general weaknesses in internal controls and ethics brought to light in audit reports and elsewhere. It was understandable that Member States should respond by requesting more reports, but additional reports were not cost-free and would divert valuable attention and resources away from WHO's operational work. Moreover, as the critical "boots on the ground", WHO employees should be able to respond flexibly according to needs, and not fear having to make lengthy and taxing justifications *post hoc*.

The Secretariat's plans to introduce mandatory training, strengthen controls, oversight and risk management, and increase the Organization's responsiveness and agility were relevant and important. They would provide greater clarity for employees in their work and rationalize Member States' requirements and expectations of WHO.

The representative of INDIA said that WHO and Member State review and reporting mechanisms should be enhanced to focus on efficiency and transparency in financial flows, as global health was a multistakeholder concern that required the proactive participation of all. It was therefore critically important to implement policies and create frameworks that strengthened organizational and financial accountability, and to ensure the involvement of Member States in discussions on budget implementation and spending, and in decision-making. By focusing on enhancing cost efficiencies and value for money, both the Organization and its Member States would significantly improve the efficiency, effectiveness and transparency of health service delivery.

He urged the Secretariat not to neglect essential health care functions in the ongoing battle against COVID-19.

The representative of INDONESIA expressed support for the recommendations made by the Independent Expert Oversight Advisory Committee and for the Committee's proposals to strengthen effective risk management and accountability, and underscored the importance of transparency and accountability when it came to the distribution of budgetary resources. Planning had to involve a bottom-up approach based on country requirements.

She also expressed support for the Secretariat's initiatives to conduct a comprehensive review of the allegations of sexual abuse in the Democratic Republic of the Congo and of broader protection issues in health emergency response settings. The investigations should be conducted as effectively and efficiently as possible so as not to add to the burden on the Organization's resources. Lastly, she expressed support for the Committee's recommendation that the evaluation workplan for 2021 include an evaluation of the WHO response to the COVID-19 pandemic.

The representative of GHANA, speaking on behalf of the Member States of the African Region, commended the Committee for having included specific instructions to the Secretariat on follow-up to the Committee's recommendations. He welcomed the Director-General's update on the Secretariat's

response to allegations of sexual abuse and exploitation in the Democratic Republic of the Congo. Internal policy in that regard should be finalized and implemented without delay, and a holistic review carried out of existing mechanisms relating to sexual abuse cases in all work settings.

He expressed support for the reinforcement of hosted partnerships to support the Organization's technical work and global health agenda, and the call for Member States to be informed about the outcomes of the working group on flexible working arrangements and the associated contractual modalities. In conclusion, he expressed appreciation for the hard work and dedication of WHO staff during the COVID-19 pandemic.

The representative of GERMANY said that the new discussion and report format introduced by the Committee in 2020 would be a useful tool for oversight and guidance, but only if the clear recommendations made by the Committee were explicitly followed up by the Secretariat. For example, the Secretariat should provide information on the follow-up to the 2020 recommendations at the Committee's 2021 meetings. That information could be provided in an overall report, or each report to the Committee could explicitly state how any related recommendations had been implemented.

The representative of the UNITED KINGDOM OF GREAT BRITAIN AND NORTHERN IRELAND also expressed appreciation for the new discussion and report format, which had resulted in clear recommendations to the Secretariat. The Committee should maintain that approach going forward, so as to maximize its role and streamline the Executive Board's work, and the Secretariat should provide information on the follow-up to the 2019 and 2020 recommendations at the Committee's meeting in January 2021.

The representative of CHINA expressed appreciation for the Secretariat's work to improve efficiency and transparency at all levels, to promote gender equality and to prevent harassment and misconduct. The Secretariat should devise a strategy to address staff shortages and country representation at the regional level.

The representative of AUSTRALIA expressed full support for the Committee's recommendations on all items and endorsed the suggestion that the Secretariat should routinely report back on the progress made on Committee recommendations. She looked forward to hearing from the Secretariat at the thirty-third session of the Programme, Budget and Administration Committee in January 2021 about its follow-up activities in respect of the Committee's recommendations made at its previous meetings in 2020.

The CHEF DE CABINET thanked the Member States for their comments during the Committee meeting and the current Board session. He had taken careful note of all the points made and would incorporate them into the Organization's work, in particular the establishment of a system for regularly reporting back to the Committee on progress on its decisions and recommendations.

The Board noted the report.

4. MANAGERIAL, ADMINISTRATIVE AND FINANCIAL MATTERS: Item 5 of the agenda**Review of entitlements of members of the Executive Board:** Item 5.1 of the agenda (document EB147/3)

The representative of the UNITED STATES OF AMERICA welcomed the proposals to raise the threshold for travel-related reimbursements for Board members and to limit the entitlement to first-class air travel to the Chair. The latter proposal was important not only for reasons of cost-effectiveness but also to demonstrate consistency with the Organization's mission to promote the highest attainable standards of health for vulnerable populations. The Secretariat should use Member State funds to subsidize travel for Member States requiring support to participate, while pursuing its efforts to reduce travel-related expenditures.

The representative of GABON, speaking on behalf of the Member States of the African Region, said that the revised travel-related entitlements for the Chair and other Board members ensured that the Organization's internal practices were aligned with each other and with the practices of other United Nations agencies.

The representative of the UNITED KINGDOM OF GREAT BRITAIN AND NORTHERN IRELAND expressed support for alignment across United Nations agencies and for a rigorous approach to value for money. She therefore endorsed the revised travel-related entitlements.

The Board noted the report.

The CHAIR took it that the Board wished to recommend to the Seventy-fourth World Health Assembly, that with effect from 1 July 2021, the maximum reimbursement of travel expenses of members of the Executive Board should be based on the travel entitlements of WHO staff members.

It was so decided.¹

Evaluation of the election of the Director-General of the World Health Organization: Item 5.2 of the agenda (documents EB147/4, EB147/4 Add.1 and EB147/4 Add.2)

The CHAIR invited the Board to consider documents EB147/4 and EB147/4/Add.2, and to consider the draft decision contained in the annex to document EB147/4/Add.1. He drew the Board's attention to paragraphs 26 to 30 of the report of the Programme, Budget and Administration Committee of the Executive Board, set out in document EB147/2.

The representative of SINGAPORE said that there was no need for a legally binding code of conduct for the election of the Director-General and the candidates' forums; monitoring and enforcement of the code would divert valuable resources, and the development of related disciplinary actions could be time-consuming. In view of resource constraints, his Government did not support bringing forward the date of the announcement of candidates, which would lengthen the campaign period. Technology should be leveraged to allow Member States to get to know candidates in the forums without the need for travel, and adherence to the relevant guidelines should be encouraged to guarantee a fair and successful election.

¹ Decision EB147(11).

The representative of the UNITED KINGDOM OF GREAT BRITAIN AND NORTHERN IRELAND welcomed the decisions taken to improve the process of electing a Director-General, including the changes to the code of conduct, and supported proposals to improve the functionality of the web forum in order to increase the accessibility of candidates to Member States and vice versa. It was important to continue to look for ways to use new technology to improve voting processes. He was aware that the COVID-19 pandemic had impeded studies on the use of optical scanners for voting, but he nevertheless hoped to see more studies, including a cost-benefit analysis, at the 149th Board session.

The representative of AUSTRALIA supported the Board endorsing the outcomes of the informal consultations on the agenda item by adopting the proposed amendments to Rule 62 of the Rules of Procedure. She did not consider further work to be warranted on compliance mechanisms or the use of optical scanners for voting, but looked forward to receiving further information on the enhanced web forum in due course.

The representative of the UNITED STATES OF AMERICA expressed support for the statements made by the representatives of Australia and Singapore. The evaluations and consultations that had been carried out were leading to agreement on measures to promote efficiency, increase transparency and improve meaningful engagement between Member States and the candidates for Director-General throughout the electoral process. He welcomed the code of conduct as a guide for candidates, but did not support further exploration of an enforcement mechanism. His Government recommended no further analysis of the use of voting machines with optical scanners and proposed the continued use of a paper ballot system. It supported the draft decision.

The representative of GHANA, speaking on behalf of the Member States of the African Region, said that, in view of the decisions adopted by the Board at its 146th session and by the resumed session of the Seventy-third World Health Assembly, the African Region supported the adoption of the draft decision and the continued evaluation of the use of voting machines with optical scanners.

The representative of CANADA¹ said that, given that other international organizations had no codes of conduct and that there were few options for mechanisms to monitor compliance, there did not appear to be a practical way to develop any such monitoring mechanism. The Secretariat could nonetheless explore alternative ways to enhance the code's visibility, emphasize its importance and underline the expectation that candidates would honour its provisions. Her Government remained unconvinced that optical scanners were the best means.

The representative of the OFFICE OF THE LEGAL COUNSEL said that, in the light of the feedback from Member States, there would be no further work at present on the code of conduct or measures to make it legally binding, including a compliance mechanism. During the last election process, almost every communication sent about the election had included a reference to the code; the Secretariat would henceforth look for other ways to make the code more visible. A paper-based system would be used for the election of the next Director-General, in line with the informal consultations endorsed by the Assembly; the IT department would determine whether optical scanners should be used for counting ballots.

The Board noted the reports and adopted the draft decision.²

¹ Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.

² Decision EB147(12).

Evaluation: annual report: Item 5.3 of the agenda (document EB147/5)

The CHAIR invited the Board to consider document EB147/5 and drew the Board's attention to paragraphs 31 and 32 of the report of the Programme, Budget and Administration Committee of the Executive Board, set out in document EB147/2.

The representative of KENYA, speaking on behalf of the Member States of the African Region, said that evaluation was vital to performance management and organizational learning. He welcomed the efforts of the Evaluation Office to partner with its counterparts in other entities and participate in joint evaluations in selected areas of shared substantive and strategic interests. In view of the Evaluation Office's human resources capacities and the use of prequalified external evaluators, it would be helpful for the Secretariat to confirm whether current staffing levels were adequate for planned activities. It was hoped that the directors of the accountability functions would continue to jointly review cross-cutting issues, with the Board made aware of any such collaborations. He welcomed attempts to define the evaluation parameters for the Global Action Plan for Healthy Lives and Well-being for All. It would also be useful to know how the COVID-19 pandemic would influence the scope and modalities of the Evaluation Office's future workplan. The Secretariat should make provision for the strengthening of evaluation functions at the regional and country levels when it finalized the budget for the next biennium. It should also provide an assessment of the interrelation between the centralized and decentralized evaluation systems for missions managed outside WHO headquarters.

The representative of BANGLADESH said that the engagement of WHO with the United Nations Evaluation Group and the Inter-Agency Humanitarian Evaluations Steering Group would likely broaden the scope for accountability and strategic learning, while improving the Organization's response to communities in need. In view of the disruption caused in all sectors by the COVID-19 outbreak, WHO should evaluate the impact on health and the economy, and assess the efficiency and effectiveness of its actions and initiatives to prevent and control COVID-19. In so doing, it should avoid duplicating the independent evaluation of the Independent Expert Oversight Advisory Committee and the Independent Panel for Pandemic Preparedness and Response on the global response to COVID-19. It was hoped that WHO would use the lessons learned and recommendations emerging from the evaluations to develop future policies in order to improve its performance.

The representative of the UNITED KINGDOM OF GREAT BRITAIN AND NORTHERN IRELAND said that the Evaluation Office would play a key role in learning lessons from the COVID-19 pandemic. It was vital that it filled gaps in existing work and did not duplicate efforts. It might consider suggestions to investigate the impact of the pandemic on business continuity and governance. He welcomed the increased capacity in organizational learning and evaluation, and emphasized the importance of disseminating the lessons learned from evaluations throughout the Organization to maximize their impact on culture and processes.

The REPRESENTATIVE OF THE DIRECTOR-GENERAL (Evaluation and Organizational Learning) said that the Programme, Budget and Administration Committee had requested that an evaluation of the WHO response to the COVID-19 pandemic be included in the evaluation workplan. To ensure that the evaluation did not duplicate ongoing efforts, the Evaluation Office would wait for the outcomes of the work of the Independent Panel for Pandemic Preparedness and Response, the Review Committee on the Functioning of the International Health Regulations (2005) during the COVID-19 Response and the Independent Expert Oversight Advisory Committee before proceeding with an evaluation in 2021.

Regarding capacity, a position for a new staff member to work on decentralized evaluations had been established and a senior advisor recently appointed for organizational learning. The Office of the Director-General was undertaking a broader study on accountability functions, which should provide further guidance on the capacity and resources of the Evaluation Office. Collaboration had started across accountability functions and the Senior Advisor for Organizational Learning would play a key role. Efforts would be made to ensure lessons were learned and applied consistently throughout the Organization.

The work of the Evaluation Office had largely continued despite the COVID-19 pandemic, but work at the country level had been disrupted, including planned evaluations of normative functions. He took on board the recommendation that the evaluation functions of regional and country offices should continue to be strengthened, including their budgetary capacities.

Regarding the relationship between centralized and decentralized evaluation functions, regional offices submitted workplans containing both kinds of evaluation, which were then included in the evaluation workplan discussed and approved by the Executive Board at the start of each biennium. There was also a global network on evaluation, enabling the different evaluation focal points at the regional and country levels and in the different WHO divisions to work with the Evaluation Office.

The Board noted the report.

Hosted partnerships: Item 5.4 of the agenda

- **Report on hosted partnerships** (document EB147/6)
- **Review of hosted partnerships** (document EB147/7)

The CHAIR invited the Board to consider the reports contained in documents EB147/6 and EB147/7, and drew the Board's attention to paragraph 33 of the report of the Programme, Budget and Administration Committee of the Executive Board, set out in document EB147/2.

The representative of BURKINA FASO, speaking on behalf of the Member States of the African Region, welcomed the progress made by the Alliance for Health Policy and Systems Research, which had facilitated work to strengthen health systems, develop research and health policies, and achieve the objectives of the Declaration of Astana on Primary Health Care. The European Observatory on Health Systems and Policies continued to act as a knowledge broker, producing and disseminating factual data to meet the policy needs of Member States and ensure decision-makers were informed. The Observatory's work had greatly benefited the Member States of the African Region, as had efforts to share its knowledge-broker model with other regions. The Partnership for Maternal, Newborn and Child Health had contributed significantly to improving health indicators in the African Region, reducing levels of maternal, child and adolescent mortality, and the strong involvement of civil society in efforts to improve and preserve the health and well-being of women, children and adolescents and to achieve the Sustainable Development Goals was welcome. He congratulated the Director-General and Unitaïd for helping to reduce prices and improve access to medicines, diagnostic products and other basic quality products for the treatment of HIV/AIDS, malaria and tuberculosis. The African Region hoped to continue to benefit from the support of its technical and financial partners to improve the lives of its populations. Member States should work further to preserve and improve the health of women, children and adolescents, and define better policies, projects and programmes to improve access to health products and to support and encourage research, with the allocation of the necessary resources.

The representative of INDIA said that the COVID-19 pandemic had highlighted the importance of the digital health agenda as the new normal in health service delivery, yet optimal use had not previously been made of data-driven insights on digital health interventions, owing to teams working in silos. As hosted partnerships were significant in the arena of digital health, she recommended that WHO should strengthen partnerships for health with the support of academia and technical experts from Member States, and thus help expedite implementation of the global strategy on digital health 2020–2025. A new hosted partnership on digital health within WHO would enable the creation of a global forum to strengthen the digital health agenda and provide optimal support to Member States. Hosted partnerships could also facilitate the simpler and faster dissemination and implementation of cutting-edge digital technologies, such as artificial intelligence, blockchain and the Internet of Things, all of which could have a global impact.

The representative of OMAN commended the Partnership for Maternal, Newborn and Child Health for having brought its 10 constituencies together to strengthen efforts to achieve universal health coverage, contribute to discussions and align efforts to improve and protect the health of women, children and adolescents in humanitarian and fragile settings. The weaknesses and gaps noted in the report should be considered by those responsible for the Partnership's role, mandate, functions, governance and internal accountability. He confirmed that the Partnership's teamwork, experience-sharing and collaboration were needed and benefited the most vulnerable people in Oman. In addition, the Partnership had adapted its interventions for implementation in the country, resulting in improved performance of relevant national programmes. It was hoped that the Partnership's 2021–2025 strategy would enable further evaluation of its role and thereby ensure its suitability and contribute to achieving the relevant Sustainable Development Goals.

The representative of MADAGASCAR said that the activities of the Partnership for Maternal, Newborn and Child Health aligned with WHO activities related to the Sustainable Development Goals. The Partnership had contributed to the updating of the Global Strategy for Women's, Children's and Adolescents' Health (2016–2030), and facilitated the prioritization of primary health care provision and universal health coverage. It was important for the general conditions for hosting the Partnership within WHO to respect the applicable WHO norms, guidelines and technical procedures. Further attention should be paid to improving information-sharing in decision-making processes to optimize good governance; redefining the role of the Partnership and demonstrating its added value; and reaching consensus on the Partnership's level of engagement at the country level. The Partnership could learn from the evaluations conducted and the reports issued to improve its effectiveness, results and impact.

The representative of BRAZIL¹ said that the partnership between WHO and Unitaïd had been productive and of mutual benefit, and, in view of its focus on scalability and agility, low- and middle-income countries could play a pivotal role in ensuring the long-term sustainability of projects supported by Unitaïd. Unitaïd had made significant progress towards expediting its procedures for assessing and approving new ideas for innovation. Its new agility mechanism was promising, as was the potential expansion of Unitaïd's portfolio to areas such as Chagas disease. It was positive that Unitaïd was working closely with WHO and other health institutions in the global response to COVID-19, as its expertise in the public health arena could be decisive for combating the pandemic.

¹ Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board

The DIRECTOR (Health and Multilateral Partnerships) said that the 2021–2025 strategy of the Partnership for Maternal, Newborn and Child Health had been published online. Regarding the proposal for a new hosted partnership on digital health, he noted that any such partnership would require further consultations and would have to be formally proposed to the Board in order to be established.

The Board noted the reports.

The meeting rose at 13:00.

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