

PROVISIONAL SUMMARY RECORD OF THE FIRST MEETING

WHO headquarters, Geneva Monday, 30 January 2023, scheduled at 10:00

Chair: Dr K. V. PETRIČ (Slovenia)

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FIRST MEETING

Monday, 30 January 2023, at 10:15

Chair: Dr K. V. PETRIČ (Slovenia)

1. **OPENING OF THE SESSION AND ADOPTION OF THE AGENDA:** Item 1 of the provisional agenda (documents EB152/1 and EB152/1 (annotated))

Opening of the session

The CHAIR declared open the 152nd session of the Executive Board.

Adoption of the agenda

The CHAIR noted that the Secretariat had proposed the deletion of provisional agenda item 24.1, Independent Expert Oversight Advisory Committee, as no proposals for membership had been received. She took it that the Board agreed to that proposal.

It was so agreed.

The agenda, as amended, was adopted.¹

The representative of DENMARK, speaking on behalf of the European Union and its Member States, recalled that, as agreed in an exchange of letters in the year 2000 between WHO and the European Commission on the consolidation and intensification of cooperation, and without prejudice to any future general agreement between WHO and the European Union, the European Union attended sessions of the Board as an observer. He requested that, as at previous sessions, representatives of the European Union should be invited to participate, without vote, in the meetings of the 152nd session of the Board and its committees, subcommittees, drafting groups or other subdivisions that addressed matters failing within the competence of the European Union.

The CHAIR took it that the Board wished to accede to the request.

It was so agreed.

Election of Officers

The CHAIR drew attention to a proposal by the Member States of the Region of the Americas to elect Mr Jaime Hernán Urrego Rodríguez (Colombia) as Vice-Chair of the Executive Board, replacing Mr German Escobar Morales (Colombia), who was no longer able to serve in the role. She also noted a proposal by the Member States of the Western Pacific Region to elect Dr Zaliha Mustafa (Malaysia) as Vice-Chair of the Executive Board, replacing Mr Khairy Jamaluddin (Malaysia), who was likewise unable to continue in the role. Furthermore, she drew attention to a proposal by the Member States of the South-East Asia Region to elect Dr Odete Maria Freitas Belo (Timor-Leste) as Vice-Chair of the

¹ Document EB152/1 Rev.1.

Executive Board, replacing Mr Bonifacio Mau Coli Dos Reis (Timor-Leste), who was also no longer able to serve in the role. She took it that those proposals were acceptable to the Board.

It was so agreed.

The CHAIR drew the attention of the Board to the concerns raised by the Member States of the Region of the Americas regarding the lack of a formal mechanism to replace Officers of the Executive Board during the intersessional period if they were unable to complete their term, until a decision could be made by the Board at its next session. To ensure an informed discussion, and taking into account the ongoing WHO reform process, the Secretariat had proposed that the matter should be considered by the Board at its 153rd session, without prejudice to the possibility of further discussing it at the next Board retreat. She took it that the proposal was acceptable to the Board.

It was so agreed.

Organization of work

The CHAIR noted that constituency statements by non-State actors in official relations with WHO would continue to be trialled at the current session of the Board. Constituency statements would be permitted under four items of the agenda: item 5, Universal health coverage; the first bullet point on strengthening the global architecture for health emergency preparedness, response and resilience under item 12.1, Strengthening WHO preparedness for and response to health emergencies; item 14, Wellbeing and health promotion; and item 16, Social determinants of health.

The representative of GERMANY welcomed the ongoing reform of the Organization to improve governance and to increase transparency, efficiency and accountability. He commended new practices, such as the guiding questions for each agenda item, to ensure a more interactive debate during governing body meetings.

2. **REPORT BY THE DIRECTOR-GENERAL:** Item 2 of the agenda (document EB152/2)

The DIRECTOR-GENERAL said that, although coronavirus disease (COVID-19) remained a global health emergency, the world was now in a much better situation than it had been one year ago during the peak of infections from the Omicron variant of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (B.1.1.529). However, the recent widespread increase in the number of deaths called for further action to address vulnerabilities in populations and health systems. He remained hopeful that hospitalizations and deaths would be reduced to the lowest possible level during the coming year and that health systems would have the capacity to manage COVID-19 in an integrated and sustainable way. Vaccination would remain an essential part of those efforts. Work was under way to determine the most effective mechanism for advising Member States on vaccine composition and vaccination frequency.

The five key priorities of promoting, providing, protecting, powering and performing for health, termed the "five Ps", were aligned with, and would help to reinvigorate progress towards, the objectives of the Thirteenth General Programme of Work, 2019–2025, and its triple billion targets, as well as the health-related Sustainable Development Goals.

With regard to promoting health, efforts were focused on addressing the root causes of disease. Significant progress had been made in the year 2022 in the areas of tobacco control, trans-fat, taxes on tobacco, alcohol, sugar and sugary drinks, maternal and newborn care, road safety, climate change,

ageing and safe listening. In the area of providing health, work was centred on reorienting health systems towards primary health care. The Secretariat had continued to support Member States to strengthen the health workforce and to expand and restore access to essential medicines and health services at the national level. The Secretariat's work on antimicrobial resistance had included supporting the development of new international targets to address the use of antimicrobial agents in humans, animals and agriculture. To date, 170 countries had implemented national action plans to guide the multisectoral response to antimicrobial resistance.

With regard to noncommunicable diseases, notable advances had included the publication of new guidelines on hypertension and the adoption of a set of global targets on diabetes. Countries were being supported to improve access to quality care for cancer and progress was being made on mental health. Although the COVID-19 pandemic had been a severe setback to progress in tackling communicable diseases, there were nevertheless some encouraging signs, including in relation to malaria and tuberculosis. The Secretariat had also recently published new guidelines on the use of long-acting injectables for preventing HIV, particularly for those most at risk. In the year 2022, eight countries had been validated or certified for eliminating a neglected tropical disease, while one country had eliminated measles and rubella, and another had eliminated mother-to-child transmission of HIV and syphilis.

In the area of protecting health, the Secretariat was working to strengthen the global architecture for health emergency preparedness, response and resilience. In the year 2022, WHO had responded to 72 graded emergencies, delivered essential health supplies to 90 countries, launched the first WHO Global Health Emergency Appeal and, through the Contingency Fund for Emergencies, released funding of more than US\$ 87 million to support rapid response. In collaboration with partners, WHO was supporting efforts to build a rapidly deployable health emergency corps for future health emergencies. The Secretariat had also continued to support countries to respond to the COVID-19 pandemic and, through its partnership in the Access to COVID-19 Tools (ACT) Accelerator and the COVID-19 Vaccine Global Access (COVAX) Facility, had supported the provision of more than 1 billion vaccines and procured 320 000 courses of antiviral treatments. It was also continuing to support and scale up global efforts to tackle outbreaks of monkeypox/mpox, Ebola and cholera and eradicate poliomyelitis. Aligning the many activities and initiatives of the Secretariat, Member States and other multilateral stakeholders was critical to strengthening the global health architecture, particularly in view of the forthcoming negotiations on the drafting of a legally binding WHO convention, agreement or other international instrument on pandemic prevention, preparedness and response (pandemic accord), in addition to ongoing discussions on potential amendments to the International Health Regulations (2005) and the outcomes of the Universal Health and Preparedness Review. WHO was also working to foster collaborative surveillance and intelligence and enhance equitable access to medical countermeasures.

On powering health, the Secretariat was harnessing research, innovation, data, digital technologies and partnerships. Initiatives included the establishment of a grant programme for young researchers from low- and middle-income countries, the creation of a behavioural science unit and the fostering of technology transfer. Progress had also been made in the areas of data and digital health. The Secretariat had continued to enhance partnerships with the public and private sectors and civil society, and had recently held the first meeting of the WHO Youth Council.

In the area of performing for health, efforts were directed towards building a stronger WHO that delivered results and was enabled and empowered to play its leading role in global health. In the year 2022, the Secretariat had published 213 global public health goods, including key reports and guidelines. The OpenWHO learning platform and new WHO Academy would play a key role in building the capacity of the global health workforce. The Secretariat was committed to building an even more experienced, qualified and talented WHO workforce and to creating a respectful workplace. The Young Professionals Programme had been launched to give junior professionals from the least developed countries the opportunity to work with WHO for two years and to use the experience gained in their respective countries. Action had also been taken to mainstream gender in WHO's work, and overall gender parity had been achieved among WHO staff for the first time in the Organization's history.

The proposed programme budget for 2024–2025, if approved, would include the first increase in assessed contributions as provided for in decision WHA75(8) on sustainable financing, and would be the first in which more than half of the total budget would be allocated to country offices. Strengthening country offices was a key priority and a number of initiatives had been launched to that end. The Secretariat would also be proposing a new replenishment process. Progress had been made in preventing and responding to sexual misconduct. Thirty-eight of the recommendations issued by the agile Member States task group on strengthening WHO's budgetary, programmatic and financing governance had been completed, and work was ongoing to implement the remaining actions. Highlighting the delicate balance between the governance role of Member States and the management responsibilities of the Secretariat, he asked Member States to give the Secretariat the necessary latitude to carry out its mandate and achieve the priorities and plans agreed at the Health Assembly.

The year 2023 marked 75 years since the establishment of WHO. He expressed his gratitude, admiration and respect for all WHO staff around the world. Although a lot had been achieved over the past 75 years, it would be the next 75 that truly mattered. The lessons of the past would be learned in order to apply them in the future. He thanked Member States for their confidence and trust in the Organization.

The representative of DENMARK, speaking on behalf of the European Union and its Member States, said that the candidate countries North Macedonia, Montenegro, Albania, Ukraine, the Republic of Moldova and Bosnia and Herzegovina aligned themselves with his statement. He strongly condemned the military aggression of the Government of the Russian Federation against Ukraine, including attacks on health care facilities, which was a blatant violation of the Charter of the United Nations. He called on the Government of the Russian Federation to respect its responsibilities under international humanitarian law. The energy and food supply challenges triggered by the military aggression were having a huge impact on the health and well-being of people and societies.

He commended WHO's effective response to new emergencies and supported the inclusion of human rights and non-discrimination perspectives in that work. Continuous monitoring and assessment of the COVID-19 situation was needed, and lessons learned from the pandemic must be applied. He reiterated the need for continued leadership at all levels, as well as multilateral cooperation and an effective international system with well-defined and complementary roles and responsibilities for all stakeholders that fostered inclusive collaboration and countered fragmentation. The European Union and its Member States remained committed to reforming the international system for pandemic preparedness and response and to strengthening the legal and normative framework for pandemic and emergency response through the revision of the International Health Regulations (2005) and the development of a pandemic accord.

The European Union and its Member States were ready to consider and support the "five Ps" but emphasized the importance of delivering the objectives of the Thirteenth General Programme of Work, 2019–2025 in its entirety. The implementation of reforms of WHO's financing and enabling functions, including an increase in assessed contributions, a possible new replenishment mechanism and increased transparency, accountability, compliance and efficiency, would be crucial to enable the Organization to deliver its mandate.

The representative of BOTSWANA, speaking on behalf of the Member States of the African Region, called for WHO to be strengthened as the leading authority on global health governance that was able to deliver results at the country level. The persistent inequities between and within countries hampered progress towards the achievement of the Sustainable Development Goals. Although significant advances had been made in relation to COVID-19, he noted with great concern the recent increase in the number of reported deaths globally and requested continued support in tracking known variants and detecting new ones.

He welcomed the extension of the Thirteenth General Programme of Work, 2019–2025, and the "five Ps", as well as work to monitor progress towards the triple billion targets and the health-related

Sustainable Development Goals. It was essential to strengthen country offices, with a focus on reinforcing national health systems and promoting equitable access to health services. He called on the Secretariat to enhance capacity at the regional and national levels in order to accelerate progress towards universal health coverage. To effectively address countries' needs, the Regional Office for Africa required both technical and financial support.

The proposed increase in the allocation of funding to country offices would enable the Organization to deliver its mandate while fulfilling expectations for transparency, efficiency and accountability. He called on the Secretariat to ensure equitable resource allocation by increasing the programme budget share for countries and regions to 75% in the biennium 2024–2025. Addressing the programme budget imbalance was a key governance reform and a precondition to the increase in assessed contributions.

The representative of BRAZIL said that his Government had made science a central focus of national health initiatives and was fully committed to local and regional production to support its universal health system and reduce health vulnerabilities and global inequities. It stood ready to work with all partners to improve respect for human rights. In that context, his Government intended to propose a draft resolution on the health of indigenous peoples for the consideration of the Seventy-sixth World Health Assembly. He called on Member States, the Secretariat and international partners to give that important and neglected issue due recognition.

The representative of the UNITED STATES OF AMERICA, noting the continued impact of the COVID-19 pandemic, expressed support for efforts to bolster health systems and protect the most marginalized groups. International solidarity was needed to end the acute phase of the pandemic. She outlined some of the measures taken by her Government in relation to the "five Ps" and welcomed in particular WHO's efforts to address the critical links between climate change and health. It was vital to ensure the health and rights of lesbian, gay, bisexual, transgender, queer and intersex people and communities.

Expressing appreciation for WHO's efforts to address health emergencies, she highlighted the important role played by the Intergovernmental Negotiating Body to Strengthen Pandemic Prevention, Preparedness and Response and the working group on amendments to the International Health Regulations (2005) in that regard. She looked forward to discussions on the proposed 20% increase in assessed contributions and welcomed WHO's continued commitment to improving transparency, oversight and accountability. Work to ensure protection from sexual exploitation, abuse and harassment must remain a priority. Lastly, her Government strongly condemned the brutal, unprovoked and unjustified war led by the President of the Russian Federation against Ukraine and would continue to stand with Ukraine and its people.

The representative of the REPUBLIC OF KOREA expressed deep concern about the continued severe disruption caused by the COVID-19 pandemic and called for close collaboration and clearly defined targets to tackle the related challenges. The proposed programme budget for 2024–2025 must be more closely aligned with the Thirteenth General Programme of Work, 2019–2025. In that context, he welcomed the Secretariat's proposed implementation plan on reform to strengthen budgetary accountability and expressed support for the essential role played by a sustainably financed WHO in global health. He looked forward to the forthcoming negotiations of the Intergovernmental Negotiating Body and the complementary discussions on amendments to the International Health Regulations (2005), including the development of guidelines to ensure the movement and delivery of essential health workers and goods during health crises. Overlaps between those two processes should be avoided. Efforts to ensure equitable access to countermeasures, including vaccines and medicines, must be expanded. As the host country of the global biomanufacturing training hub, his Government would scale up the vaccine and biomanufacturing training programme and requested support from the Secretariat and Member States to that end.

The representative of INDIA commended the Director-General for his leadership. The pandemic had demonstrated the urgent need to strengthen the global health architecture and build a resilient global health system, with WHO at the centre of those efforts. He outlined the priorities identified by his Government to deal with health emergencies, strengthen cooperation to ensure access to and availability of safe, effective, quality and affordable countermeasures, and develop digital health solutions. Lessons learned from the pandemic must be applied. Collective momentum should be maintained in order to improve global health emergency preparedness and response. It was important to avoid fragmentation of the global health architecture and to develop research and development and manufacturing networks for medicines, diagnostics and vaccines. A platform for the global coordination of medical countermeasures was also needed, with a specific focus on low- and middle-income countries. Lastly, support should be provided to help Member States to harness new technologies and innovations with a view to ensuring equity and achieving universal health coverage.

The representative of OMAN said that the COVID-19 pandemic had revealed the urgent need for solidarity and a resilient and responsive global health system. He emphasized the importance of placing WHO at the centre of the global health architecture, building on the lessons learned from the pandemic so that challenges could be turned into opportunities. Health systems must be strengthened through global solidarity and partnerships to advance health and ensure equity, equality and affordability. Results should be delivered across the three levels of the Organization, with a particular focus on the country level. With a clearer vision, more sustainable financing mechanism and increased trust in the Organization, now was the time to proceed forward. He acknowledged the need to extend the Thirteenth General Programme of Work, 2019–2025, in order to accelerate progress towards the Sustainable Development Goals.

The representative of MALAYSIA, highlighting the importance of working together to address critical gaps in health emergency prevention, preparedness and response, including through the discussions of the Intergovernmental Negotiating Body, said that the proposed targeted amendments to the International Health Regulations (2005) would enhance global health security. Her Government would continue to work closely with the members of the Standing Committee on Health Emergency (Pandemic) Preparedness and Response. Efforts to prevent and tackle the growing burden of noncommunicable diseases must continue. In that context, she called on Member States to support the adoption of a draft decision on behavioural sciences for better health to be proposed for the consideration of the Board. To ensure equitable access to health care, it was essential to address the social determinants of health and adopt a Health in All Policies approach. Ways must be explored of pooling resources among Member States in order to strengthen surgical care systems; her Government would be willing to host a side event on that issue at the Seventy-sixth World Health Assembly. Lastly, her Government looked forward to extending its in-kind voluntary contribution to host the WHO Global Service Centre in Cyberaja, Malaysia.

The representative of CHINA said that the impacts of the COVID-19 pandemic continued to threaten and undermine national health systems. His Government was in close communication with the Secretariat with regard to the domestic COVID-19 situation and would continue to share information, including on variants of SARS-CoV-2. Expressing support for WHO's leadership role in global health, he said that his Government would work in partnership with others to implement the "five Ps" and would participate in the negotiations of the Intergovernmental Negotiating Body. The Secretariat should focus on Member States' needs in order to strengthen health systems. He expressed the hope that the Secretariat would: continue to make its work more science-based, transparent and impartial; explore ways to increase WHO's financial sustainability; continue to implement governance reforms; and work with Member States to address health emergencies and build global health security.

The representative of BELARUS welcomed the Director-General's efforts to adapt the Organization in line with a changing world and to reinforce its role and ability to prepare for and respond to global health emergencies. He expressed support for WHO's efforts to strengthen the global health architecture and for the Global Health for Peace Initiative. To bolster health systems, access to medical services, medicines and medical equipment must be ensured. Unresolved or emerging health challenges exacerbated negative trends in global politics and hampered sustainable development processes. Thus, it was imperative to coordinate efforts at the global, regional and national levels.

The representative of COLOMBIA expressed appreciation for the Director-General's leadership and thanked the Secretariat for its support, including in relation to his Government's discussions on reforms to guarantee the fundamental human right to health. It was essential to address inequalities and ensure access to health for all. Given the impact of conflicts on health, he welcomed the focus on health for peace and peace for health and highlighted the importance of protecting health workers around the world through a multilateral approach. He reiterated his Government's commitment to climate change adaptation and mitigation and climate justice as part of efforts to ensure public health. Further attention should be given to the need for a paradigm shift in the fight against drugs, with a greater focus on the human rights and public health dimensions of the issue. He looked forward to WHO's continued leadership of efforts to address global health challenges.

The representative of JAPAN acknowledged the hard work and dedication of the Secretariat. The aggression by the Government of the Russian Federation against Ukraine was a clear violation of Ukraine's sovereignty and territorial integrity. He condemned the Russian Federation's attacks on health care facilities and workers in Ukraine and expressed deep concern at the difficulties faced by Ukraine in ensuring an adequate health care environment. His Government would continue to contribute to efforts to strengthen global health security, in particular through the amendments to the International Health Regulations (2005), the new pandemic accord and the development of the proposals to strengthen the global architecture for health emergency preparedness, response and resilience. He welcomed the recommendations of the agile Member States task group on reforming the governance and financial discipline of WHO and the Secretariat's implementation plan on reform and would continue to monitor progress in that area, particularly in the context of the increase in assessed contributions. The pandemic health reaffirmed the importance of focusing attention and resources on achieving universal health coverage. It was essential to generate synergies between the meetings of the G7 and the high-level meetings of the United Nations General Assembly on health in order to maximize their outcomes.

The representative of MOROCCO thanked the Secretariat for its tireless efforts to improve global health. He welcomed in particular WHO's work to strengthen health emergency preparedness and response. Health emergencies and crises, including those triggered by the COVID-19 pandemic, had underscored the need to adopt innovative and effective approaches to accelerate the development of resilient health systems, and to ensure universal access to health care. The pandemic had also demonstrated WHO's leadership role in providing support to Member States, including to achieve universal health coverage and promote health and well-being for all. His Government would continue to work with WHO to improve surveillance and early warning systems and health emergency response, and would be hosting a global consultation on migrant and refugee health in June 2023.

The representative of TIMOR-LESTE applauded the Director-General for his decisive leadership and welcomed WHO's progress over the past year. She emphasized the importance of global health as a key enabler of development and progress and expressed support for the "five Ps". She welcomed efforts to strengthen WHO's sustainable and flexible financing and called for an increased focus on health emergency preparedness, climate change, and the social and behavioural determinants of health. An "all for health" approach was needed in order to achieve health for all. She expressed appreciation for the increased funding allocated by the Regional Office for South-East Asia at the country level and thanked the Secretariat for its continued support and technical assistance.

The representative of CANADA highlighted the importance of engaging in constructive dialogue in order to find solutions and make progress towards the triple billion targets, the "five Ps" and the Sustainable Development Goals. A strong WHO that was efficient, effective, transparent, accountable and sustainably financed was at the core of those efforts. Acknowledging the progress made over the past year in strengthening both the Organization and the global architecture for health emergency preparedness and response, he nevertheless called for a continued focus on building more accessible and resilient health systems that were equipped to withstand current and future health crises. Access to essential services for the most vulnerable and marginalized populations must be ensured, including lesbian, gay, bisexual, transgender, queer, intersex, Two-Spirit and other gender and sexually diverse people. His Government strongly condemned the unjustifiable and unprovoked invasion of Ukraine led by the President of the Russian Federation, including attacks on civilians and on health workers, services and infrastructure.

The representative of the UNITED KINGDOM OF GREAT BRITAIN AND NORTHERN IRELAND said that the report by the Director-General demonstrated the huge breadth of WHO's work and the power of science to transform health. He strongly supported the reforms to governing body meetings implemented by the Secretariat. It was imperative to recognize the huge impact of conflicts on public health. He condemned the appalling situation in Ukraine and underlined the devastating effect of the destruction of health systems and civilian infrastructure on the most vulnerable populations. He also wished to draw attention to the indirect impact of the pandemic on other areas of public health worldwide, including the significant increase in excess deaths, from which it would take several years to recover. He requested clarification on WHO's role in tackling that challenge. Health protection and health improvement went hand in hand.

The representative of the RUSSIAN FEDERATION said that strengthening global health structures was a key challenge in a post-COVID-19 era, which would require cooperation between countries and with international, regional and economic organizations. WHO was the leading authority and coordinating organization in that area. Highlighting the United Nations' principles of neutrality and impartiality, he said that the politicization of WHO's agenda and the global health architecture was unacceptable. That would increase inequitable access to health services and lead to a further deterioration of the situation in developing countries. The global health architecture should be based on the principles of transparency, openness and equal participation, as demonstrated by the negotiations of the Intergovernmental Negotiating Body. It was important to allow sufficient time for those negotiations and to ensure that the draft instrument had a practical focus, including action plans.

His Government was committed to the principle of equal cooperation in global health care as a key element of the protection of human rights. However, it was regrettable that some Member States had recently been unwilling to engage in constructive dialogue. Examples included the cancellation of a WHO technical seminar in December 2022 on substandard and falsified medical products owing to an objection by the delegation of Ukraine to a statement delivered by an expert from the Russian Federation, and the refusal by WHO collaborating centres in the United Kingdom and the United States of America to share samples of influenza strains with the Russian Federation. The Organization must ensure transparent reporting with regard to Member States' projects on health emergency preparedness.

The representative of AFGHANISTAN thanked the Director-General for his leadership and the Secretariat for its commitment and service. Despite international and regional commitments to help to preserve, protect and promote human rights, in particular women's rights, and access to health care in Afghanistan, the situation in the country had deteriorated further. The humanitarian crisis in the country, compounded by the climate crisis, was having a devastating effect on health. Food insecurity,

malnourishment and the lack of a health workforce, especially female health workers, were just some of the challenges being faced in Afghanistan. He thanked donor countries for their efforts and financial contributions and expressed appreciation to the organizations of the United Nations system, including WHO, for providing humanitarian assistance and support for health service delivery. However, without such support, the health system in Afghanistan was at risk of collapse. He called on the international community to shoulder its share of responsibility in providing humanitarian assistance to his country and to use the opportunity available to correct the current situation.

The representative of YEMEN thanked the Director-General and the Regional Office for the Eastern Mediterranean for their support in helping his Government to preserve its health system and access to health services despite the continuing war, the deteriorating situation, the re-emergence of poliomyelitis, the COVID-19 pandemic and other challenges. He expressed support for the Organization's efforts to improve pandemic prevention, preparedness and response and universal health coverage and welcomed the use and distribution of funds at the regional and country levels in accordance with countries' needs.

The representative of the SYRIAN ARAB REPUBLIC underscored the crucial role played by health systems in ensuring universal health coverage and achieving the Sustainable Development Goals. However, the ongoing sanctions in place against his country and the continuing war had had a severe economic, societal, financial and political impact. That situation had also impeded access to health tools and equipment. His Government therefore requested support in developing integrated strategies to overcome those challenges and in dealing with the issues faced by the health system in his country. He thanked the Secretariat for its important role in tackling the recent outbreak of cholera in the Syrian Arab Republic. International cooperation must be strengthened and multilateral declarations and resolutions, as well as the provisions of the Charter of the United Nations, must be implemented. Urgent and effective steps were needed to put a stop to all measures imposed in contravention of international law. It was imperative to urgently lift the sanctions in place and to stop the aggression in the occupied Palestinian territory, including east Jerusalem, and in the occupied Syrian Golan. He thanked the Organization for continually seeking ways of implementing the agenda of the United Nations system.

The representative of DENMARK, speaking on behalf of the Nordic and Baltic countries Denmark, Estonia, Finland, Iceland, Latvia, Lithuania, Norway and Sweden, condemned unprovoked, unjustified and illegal war of aggression by the Government of the Russian Federation against Ukraine, which was a violation of international law and undermined international security and stability. Highlighting the devastating consequences of wars and conflicts on health, including mental health, he stressed the importance of WHO's work in emergencies around the world. Conflicts and wars also severely disrupted access to livelihood opportunities and essential services, including sexual and reproductive health and rights, which exacerbated the conditions for people living in vulnerable situations, in particular women and girls. Sexual and gender-based violence was also pervasive and continued to be underreported. The Organization must step up efforts to meet the Ukrainian people's needs for sexual and reproductive health services. He applauded WHO for its efforts to respond to global health challenges, including COVID-19, Ebola and monkeypox/mpox. Health systems strengthening was vital in order to enhance pandemic preparedness and achieve universal health coverage.

The representative of EL SALVADOR¹ thanked the Secretariat for the support provided to his country. Lessons learned from the COVID-19 pandemic had helped in dealing with emerging viruses and diseases such as monkeypox/mpox. The special session of the Directing Council of PAHO chaired by his Government in August 2022 had enabled a rapid regional response to monkeypox/mpox by

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

ensuring access to vaccines, thereby controlling the outbreak. He expressed support for WHO's vision not only to achieve the Sustainable Development Goals but also to work towards stronger health systems and the overall objective of leaving no one behind.

The representative of HAITI¹ welcomed the 10 proposals to strengthen the global architecture for health emergency preparedness, response and resilience, which would require robust, equitable and resilient heath systems that were centred on quality primary health care services and able to detect, prevent and respond to health emergencies while preserving essential health services. Equity and protection of the most vulnerable groups must be at the centre of discussions. In that context, he requested the participation of Taiwan¹ in the Health Assembly. Progress towards the Sustainable Development Goals had been negatively affected by the COVID-19 pandemic and must be accelerated. A funded recovery plan was therefore needed to get back on track, with a focus on health promotion, primary health care and health security. Noting that the current crises and emergencies had highlighted the need for a new approach, he called for international cooperation and solidarity based on the needs and priorities of countries receiving support.

The representative of TUNISIA¹ said that his Government attached great importance to the development, through constructive negotiations within the Intergovernmental Negotiating Body, of a pandemic accord, which would help to protect future generations. It was important to amend the International Health Regulations (2005) through an effective and transparent process that ensured the equal participation of all Member States and took into account the limited human and financial resources of some States. He called for increased technology transfer, including RNA for vaccines, and expressed support for digital health initiatives in order to ensure continued progress towards development during global crises, including pandemics.

The representative of NEW ZEALAND,² speaking also on behalf of Australia, condemned the Government of the Russian Federation's illegal and immoral invasion of Ukraine and called on it to end its war. He expressed particular concern at attacks on health care facilities, health workers and ambulances and commended WHO for its ongoing response. He welcomed the Director-General's vision for strengthening the global health architecture. Member States must apply the lessons learned from the COVID-19 pandemic in order to enhance the global response to future health threats. Australia and New Zealand would continue to engage closely with WHO and its partners to build a more responsive and agile global health system. He expressed appreciation for WHO's leadership of the ongoing global response to COVID-19 and other health emergencies. The focus on the "five Ps" would help countries to make progress towards the Sustainable Development Goals. He supported the extension of the Thirteenth General Programme of Work to the year 2025 and urged WHO to prioritize its critical normative work, including the development of technical guidance, and country-level support. Lastly, he encouraged the Secretariat to support countries in building climate-resilient health systems and to mainstream a climate perspective in all its work.

The representative of JAMAICA¹ expressed appreciation for the Secretariat's achievements over the past year. The impacts of natural and human-induced hazards, health emergencies, economic shocks and noncommunicable diseases posed a grave threat to the health and sustainable development of small island developing States. She welcomed the timely publication of Countdown to 2023: WHO report on global trans-fat elimination 2022, which would help to ensure that countries maintained momentum in eliminating trans-fat. Action to address mental health was also welcome. The COVID-19 pandemic had underlined the importance of strong and resilient health systems underpinned by universal health

¹ World Health Organization terminology refers to "Taiwan, China".

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

coverage. She thanked WHO, PAHO and other partners for their support during the peak of the pandemic and beyond, and in helping her Government towards achieving its vision of a healthy population and healthy environment.

The representative of BANGLADESH¹ welcomed efforts to build a robust global health architecture, including through the development of a pandemic instrument and effective amendments to the International Health Regulations (2005). The role of science in responding to the pandemic had been crucial, but a more balanced approach was needed by ensuring equitable and unhindered access to vaccines, diagnostics and therapeutics for all. He expressed concern that routine immunization for children was in decline in some countries and called on WHO to enhance efforts to restore those programmes. He welcomed WHO's focus on the impact of climate change and called for the number of participants in the WHO Young Professionals Programme to be increased. Lastly, a possible new replenishment mechanism to fill gaps in financing could help to address WHO's priorities as well as country-level needs.

The meeting rose at 13:05.

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