
PROVISIONAL SUMMARY RECORD OF THE SEVENTEENTH MEETING

WHO headquarters, Geneva
Tuesday, 7 February 2023, scheduled at 10:00

Chair: Dr K. V. PETRIČ (Slovenia)

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SEVENTEENTH MEETING

Tuesday, 7 February 2023, at 10:10

Chair: Dr K. V. PETRIČ (Slovenia)

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

1. STAFFING MATTERS: Item 25 of the agenda (continued)

Statement by the representative of the WHO staff associations: Item 25.2 of the agenda (document EB152/INF./2)

Report of the Ombudsman: Item 25.3 of the agenda (documents EB152/INF./3 and EB152/INF./4)

The CHAIR invited the Board to consider the statement contained in document EB152/INF./2 and the reports contained in documents EB152/INF./3 and EB152/INF./4. She drew attention to the report of the Programme, Budget and Administration Committee of the Executive Board contained in document EB152/4, paragraphs 64–71.

The representative of the WHO STAFF ASSOCIATIONS, speaking on behalf of the staff associations of WHO, PAHO, IARC and UNAIDS, highlighted the fundamental elements of a respectful workplace, and said that all policies, initiatives and strategies pertaining to WHO's Code of ethics and professional conduct, particularly those on the prevention of abuse, would be established under the umbrella of the Respectful Workplace initiative. The Organization's internal justice system must be transparent, equitable and accountable and must not give preference to high-level staff members. There should be absolute transparency with regard to the work of the Global Board of Appeal. He welcomed the call for staff legal provision in each regional office, and said that WHO should invest in training staff members on the functioning of the internal justice system. The efforts of the internal and external legal counsellors should be complementary, without prejudice to their independence and sense of trust.

The agreed flexible working arrangements should be implemented in all Member States. He looked forward to the report and recommendations of the Task Force on Contractual Modalities. Generic post descriptions and the forthcoming short-term development policy, as well as managed mobility and global rosters, should be implemented. He welcomed the introduction of staff counsellors and looked forward to similar initiatives, particularly for staff members working in countries affected by health emergencies. The recent amendments to the WHO Staff Health Insurance rules related to mental health benefits were welcome. He noted that the Staff Health Insurance contributions would not increase in the year 2023. The Board should continue exploring ways to expand recognition of the Staff Health Insurance card.

Lastly, he drew attention to the devaluation of local currencies in a number of duty stations. In that context, the Board should review its methodology for determining salaries or distribute part of the salary in a foreign currency. The Organization must ensure that staff members received salaries equal to comparable employers.

The OMBUDSPERSON, speaking on behalf of all WHO ombudspersons, reiterated that informal resolution should be seen as the first and best option for solving problems. She acknowledged, however, that some staff members still believed informal resolution to be less effective than formal resolution. The informal resolution process was only credible if staff members felt supported and the accountability

of all parties was assured. Constructive dialogue, through mediation, was one way to ensure accountability without fear of retaliation. However, staff members' trust in mediation must be reinforced and the facilitator was crucial to that process. All the Organization's support mechanisms should be used together to tackle individual and systemic problems. Delays in resolving cases had negative consequences. She therefore suggested that the Organization explore ways to expand and decentralize its decision-making capacity to more managers in order to reduce such delays.

All members of the WHO workforce deserved care, respect and adherence to their contractual terms. She highlighted that non-staff members faced a number of challenges; and the Organization must review its approach to supporting them, for example through the establishment of dedicated administration focal points. She welcomed the decision to make the Respectful Workplace initiative a formal programme. She urged the Organization to listen to staff members' suggestions regarding the actions required to establish a respectful workplace at WHO in which the Organization's values could be seen in action.

The representative of the UNITED KINGDOM OF GREAT BRITAIN AND NORTHERN IRELAND commended the tireless efforts of all WHO staff members. He looked forward to hearing more from WHO leadership on the issues raised by the representative of the staff associations and the Ombudsperson, with particular regard to the internal justice system and mental health and well-being.

The representative of the UNITED STATES OF AMERICA expressed gratitude for the staff associations' work to listen to, coordinate and share the views of WHO staff members. Senior management should continue to work collaboratively with the staff associations. She expressed appreciation for the role of the Office of the Ombudsman and Mediation Services in providing recommendations on ways to address challenges affecting staff across the Organization. She commended efforts to implement the Ombudsperson's recommendations, which were contained in documents EB152/INF./3 and EB152/INF./4.

The representative of CHINA emphasized the importance of a respectful workplace. The Secretariat should continue to place value on diversity and inclusivity, treat all staff members fairly and equitably, prevent abusive conduct and apply a zero-tolerance policy to all forms of discrimination, and sexual exploitation, harassment and abuse.

The representative of JAPAN reiterated that for all WHO staff members to reach their full potential, the workplace must not only protect their physical and mental health, but also guarantee their psychological safety. She expressed the hope that Organization would take into consideration regional mental health initiatives.

The DIRECTOR-GENERAL, recognizing that the strength of any health system was dependent upon the strength of its health workforce, said that the Secretariat was committed to making WHO an inclusive, safe and respectful workplace by actively engaging with the workforce in five key areas.

The first was to ensure that staff members were heard. Senior management must continue to engage with all staff members and respond to their needs and ideas. His open-door sessions were an example of successful practice. He agreed to the regional staff associations' request to meet more frequently. The staff associations had been integral to the establishment of the Respectful Workplace initiative. Highlighting improvements already made to the Organization's internal justice system, he took note of the recommendations produced following its review, many of which the Secretariat would implement.

The second key area of work was to address issues of importance to staff members. Consultations between the staff associations and the Secretariat had led to improvements in family reunification and discussions on flexible working arrangements, contractual modalities, mobility and career pathways. Under the Global Staff/Management Council, dialogue with staff members had improved and issues

were being addressed in a more timely fashion. Regional representatives had proposed recommendations on how to better position the Organization to deliver its mandate at the country level. He expressed the hope that many of those recommendations would be achieved over the next one hundred days, as part of the recently launched 100-day challenge.

The third key area of work was to enable staff members to reach their full potential. The Secretariat continued to invest in career development through the WHO Academy, the Pathways to Leadership Programme, the United Nations System Staff College, the Global Language Programme, the Global Learning and Development Committee and the global internship programme. The Secretariat had updated and rolled out mandatory training on the prevention and response to sexual exploitation, abuse and harassment and would launch the WHO Ethics Empowerment mandatory training in the year 2023.

The fourth key area of work was to increase diversity, equity and inclusion. The Secretariat had increased opportunities for young health professionals, in particular from low- and middle-income countries. To increase engagement with young people, the Organization had launched the WHO Youth Council and the Global Model WHO. He highlighted the Organization's achievements in gender parity across the whole workforce and in parental leave, which demonstrated the Secretariat's commitment to cultural change within WHO.

The fifth key area of work was to protect the safety, health and well-being of the workforce. WHO was applying the WHO Guidelines on mental health at work, harnessing in-house technical expertise to support the workforce. WHO was leading work to strengthen professional health and safety across the United Nations System. The Organization had enhanced the staff health insurance provision; and further improvements were expected later in the year 2023. The coronavirus disease (COVID-19) pandemic had led to permanent policy changes, including more flexible working arrangements, psychosocial counselling, wellness programmes and peer support groups. He drew attention to the WHO Platform on Mental Health and the 24/7 counselling service, which had been launched in the year 2022.

However, the lack of predictable and flexible financing lead to continued reliance on consultants and short-term contracts which did not provide job security. The agreed increase in assessed contributions should help to address that challenge, but Member States' support was also necessary. Member States' should also support the Secretariat's work to address the effects of currency devaluation on salaries. Another challenge was the accessibility of offices, particularly country offices, for persons with disabilities. In the year 2022, WHO had revised its policy on employment of persons with disabilities and developed standard operating procedures for reasonable accommodation. Member States were encouraged to invest in WHO premises at the country level to ensure the inclusion of all members of the workforce.

Human resources: Item 25.4 of the agenda (documents EB152/47, EB152/47Add.1, EB152/48 Rev.1, EB152/48 Rev.1 Add.1 and EB152/55) (continued)

Amendments to the Staff Regulations and Staff Rules: Item 25.5 of the agenda (documents EB152/49 and EB152/49 Add.1)

The CHAIR drew attention to the draft resolution on a housing allowance for the Director-General, contained in document EB152/47, the financial and administrative implications of which were contained in document EB152/47 Add.1. She also drew attention to the two draft resolutions, contained in document EB152/49, on the remuneration of staff in the Professional and higher categories, dependants for family reunification purposes and parental leave, and on the remuneration of staff in ungraded positions and the Director-General. The financial and administrative implications of the two draft resolutions were contained in document EB152/49 Add.1. Lastly, she drew attention to the report of the Programme, Budget and Administration Committee of the Executive Board contained in document EB152/4, paragraphs 72–84.

The representative of the MALDIVES, speaking in her capacity as Chair of the Programme, Budget and Administration Committee of the Executive Board, read out the action recommended by that Committee, contained in document EB152/4, paragraph 84.

The representative of the RUSSIAN FEDERATION asked why only workforce data as at July 2022 was available on the Member States Portal, despite data being available from December 2022. The Secretariat should provide monthly workforce statistics, such as those provided by the United Nations Secretariat. He requested clarification on the outcomes of the work done by the Task Force on Contractual Modalities. He asked whether the Secretariat would collaborate with the International Civil Service Commission with regard to that work. He further requested that the Secretariat should explain how fraud prevention was being carried out within the Organization. WHO should work with other organizations within the United Nations system in that regard and a unified strategy should be developed.

WHO's dependency on consultants was alarming, did not enable staff members to reach their potential and had a negative impact on the Organization's budget. While gender parity was important, recruitment should be based on candidates' skills and the need to ensure fair geographical representation. With regard to the amendments to the Staff Rules, he welcomed the Secretariat's commitment to align with recommendations made by the United Nations General Assembly, including the introduction of unified parental leave. However, he did not support the use of the term "birthing mother/parent" in the amendments proposed to Staff Rules 760.2 and 760.4, as it was not in line with the terminology used in the Report of the International Civil Service Commission for 2022. He proposed that the original term, "mother", should be retained. Finally, he said that the failure to translate the amendments to the Staff Rules into Russian undermined the principle of multilingualism.

The representative of DENMARK, speaking on behalf of the European Union and its Member States, said that the candidate countries North Macedonia, Montenegro, Serbia, the Republic of Moldova and Bosnia and Herzegovina, as well as the European Free Trade Association country Norway, aligned themselves with her statement. She welcomed the work done so far towards a respectful workplace. WHO should reform the Human Resources Management System and improve the management of staff performance. There should be clear targets and indicators relating to such reform. The extensive use of short-term contracts should be avoided. There should be a mechanism to ensure that staff members were not unduly affected by the devaluation of local currencies. The recruitment and management of WHO Representatives should be further improved. Staff members working in country offices should have international expertise as well as national knowledge and should be deployed on a long-term basis. Country offices should support Member States' efforts to develop health policies and systems. In that regard, she highlighted the joint strategy between the WHO Regional Office for Europe and Member States in the European Region, entitled Delivering United Action for Better Health. The Secretariat should provide more information in governing body meetings on efforts undertaken to ensure that WHO had a greater impact at the country level. Technical work should be more efficient, and avoid silos and duplication. WHO should enhance reporting, especially on sensitive topics, such as abusive conduct and sexual harassment.

The representative of AFGHANISTAN said that WHO's success was a product of the quality of its workforce, particularly during emergencies. However, he asked whether any evaluation had been undertaken to ensure that the online system for tracking staff applications facilitated, rather than prevented, progress towards a diverse WHO workforce.

The representative of SENEGAL, speaking on behalf of the Member States of the African Region, welcomed the initiatives to strengthen human resources, particularly the Young Professionals Programme. He commended the Organization for its achievements in bridging the gender gap overall. However, little progress had been made in recruiting women from States currently underrepresented on

the workforce and fewer women than men were leading country offices and held P6, D1 or D2 positions. Therefore, more focus should be placed on gender parity. WHO should raise more awareness of its online training courses for the public, which were free of charge. He expressed support for the ongoing reform of the enterprise resource planning system.

Turning to the amendments to the Staff Rules, he accepted the new term “unified parental leave”. However, the use of the term “birthing mother/parent” was not in line with the terminology used in the Report of the International Civil Service Commission for 2022. Therefore, he suggested that it should be replaced by “biological mother”, which was in line with the Commission’s Report.

The representative of the UNITED STATES OF AMERICA expressed support for the amount proposed for the Director-General’s housing allowance and the process of updating his contract, as set out in document EB152/47. She supported the adoption of the amendments to the Staff Rules on parental leave. She appreciated WHO’s work to update the rules to establish unified parental leave, provide for increases in the duration of such leave, and to modernize the language relating to parental leave in order to reflect an inclusive and diverse workforce.

The representative of TIMOR LESTE commended the contribution of WHO’s workforce to the response to COVID-19. She said that mental health, mandatory training on the prevention and response to sexual exploitation, abuse and harassment, and the well-being of the WHO workforce had a considerable impact on the workplace. The Secretariat should continue its efforts in those areas. She expressed support for the draft resolutions.

The representative of OMAN expressed support for the comments made by the representative of Senegal. She supported the use of the terms “maternal leave” and “paternal leave” but expressed her Government’s reservation regarding the use of the term “birthing parent”.

The representative of ETHIOPIA emphasized the need to ensure consistent language and expressed support for the use of the term “birth mother”. WHO’s governing bodies should not make any decision until the United Nations General Assembly had endorsed agreed language on the subject.

The DIRECTOR (Human Resources) said that the Secretariat routinely presented to the Board at its January meeting the workforce data as at July of the preceding year, and presented to the Health Assembly the workforce data as at December of the preceding year. However, she had provided a verbal update to the Board on certain aspects of the workforce data as at December 2022, as they had already been available. The Secretariat would consider how it could align its approach to workforce data with that of other United Nations agencies. Concerning the outcomes of the Task Force on Contractual Modalities, a report and recommendations had been delivered in December 2022. More information on the actions to be implemented would be provided at the Seventy-sixth World Health Assembly. All the actions were in line with the provisions, entitlements and benefits promulgated by the International Civil Service Commission. The Secretariat would engage with unrepresented and underrepresented Member States, in particular, to improve geographical representation among its workforce. The Secretariat would work to include clear targets and indicators relating to improvements to Human Resources Management in future reports. Efforts would be made to avoid the extensive use of short-term contracts. The Secretariat would consider how to better assess its recruitment system and provide the results thereof, with particular regard to diversity and accessibility.

The ASSISTANT DIRECTOR-GENERAL (Business Operations) said that a central business intelligence unit had been established to provide transparent access to detailed workforce data. Those sensitive data would be available on the Member States Portal once the adequate data security provisions were in place. Member States must also ensure data confidentiality. The Task Force on Contractual Modalities was collaborating not only with the International Civil Service Commission, but also with

the High-level Committee on Management. The Secretariat would ensure that its work was aligned with best practices in the United Nations system. However, WHO must continue to be a leader of change, for example in the terminology used in the Staff Rules.

The Secretariat had implemented a new fraud prevention policy, which included a network of trained compliance officers and mandatory fraud prevention training. Further information could be provided during the intersessional period. The Secretariat was seeking to address – in a systemic manner – the dependency on consultants and temporary contracts. In that regard, ensuring sustainable financing was key. Concerning currency devaluation, representatives of Member States must discuss how to determine local salaries during meetings of the International Civil Service Commission and United Nations General Assembly; WHO could not act alone. The Secretariat was considering the recruitment and management process for WHO Representatives and would keep Member States informed of progress.

The representative of the OFFICE OF THE LEGAL COUNSEL said that from a legal perspective, the Staff Rules applied to staff members. Therefore, “staff member giving birth” would be the ideal term to be used, in order to reflect the intent of the Rules in question. If that were not possible, she recognized that several alternatives had been proposed. Any term chosen must be able to be translated into all WHO official languages without ambiguity; and she said that she was unsure whether “biological mother” met that requirement.

The Board noted the reports contained in documents EB152/47, EB152/48 and EB152/49 and concurred with the Programme, Budget and Administration Committee’s guidance.

The CHAIR took it that the Board wished to adopt the draft resolution on a housing allowance for the Director-General, contained in document EB152/47.

The Board adopted the resolution.¹

The CHAIR invited the Board to adopt the draft resolution on the remuneration of staff in the Professional and higher categories, dependants for family reunification purposes and parental leave, contained in document EB152/49.

The representative of the RUSSIAN FEDERATION, supported by the representative of ETHIOPIA, requested clarification as to the exact wording that would be used in Staff Rules 760.2 and 760.4 relating to parental leave, if the draft resolution under discussion was adopted.

The representative of the OFFICE OF THE LEGAL COUNSEL said that, if the draft resolution was adopted, the terminology used in relation to parental leave in Annex 2 to document EB152/49, would be “birthing mother/parent”. She emphasized that the Board had to agree on a term, as the current term could not be retained. She recalled that several alternatives had been proposed: “birthing mother”, “birth mother”, “biological mother” and “staff member giving birth”. The Board could also agree to another alternative.

The representative of the RUSSIAN FEDERATION said that he did not support “birthing mother/parent” or “staff member giving birth”, as neither solved the issue at hand. Further consultations would be necessary if Member States could not reach a consensus.

¹ Resolution EB152.R5.

The representative of ETHIOPIA wished to use terminology consistent with that used by the International Civil Service Commission and United Nations General Assembly. Therefore, “birthing mother” could not be used. Furthermore, WHO should not pre-empt decisions that were yet to be made by the United Nations General Assembly. She recommended using the term “birth mother”, which was aligned with the terminology used by the International Civil Service Commission.

The representative of the UNITED STATES OF AMERICA supported the use of “staff member giving birth”, which provided the necessary clarity. She also supported the original proposed amendment, “birthing mother/parent”, and agreed that the Staff Rules should be updated to ensure inclusivity of all WHO staff members.

The representative of the UNITED KINGDOM OF GREAT BRITAIN AND NORTHERN IRELAND supported using the term “birthing mother/parent”. However, if consensus could not be reached in that regard, his Government would accept the term “staff member giving birth”.

The ASSISTANT DIRECTOR-GENERAL (Business Operations) recognized differing opinions on whether to use approved terminology or forward-leaning language. He proposed retaining the existing terminology “birth mother” in the current draft resolution, and then update the Staff Rules at a later date, pursuant to any updated language approved by the United Nations General Assembly. The goal of the Secretariat was to ensure that the Staff Rules used terminology that was as inclusive and neutral as possible.

The representative of ETHIOPIA agreed with the approach proposed by the Secretariat.

The representative of the UNITED STATES OF AMERICA agreed to use the terminology approved by the International Civil Service Commission. However, she proposed that the draft resolution should be amended to reflect that the wording used therein would be further amended in order for the Organization to align itself with the terminology agreed upon by the forthcoming United Nations General Assembly.

The ASSISTANT DIRECTOR-GENERAL (Business Operations) requested that the Secretariat should propose an amendment to the draft resolution to ensure that the Staff Rules would be updated pursuant to terminology agreed by the United Nations General Assembly or the International Civil Service Commission.

The representative of the OFFICE OF THE LEGAL COUNSEL said that the proposed amendments to the Staff Rules would be changed such that “birth mother” would replace “birthing mother/parent” in Staff Rules 760.2 and 760.4. Thus, the draft resolution could be adopted.

The representative of the UNITED STATES OF AMERICA, supported by the representatives of DENMARK, FRANCE, CANADA and COLOMBIA, reiterated that the wording of the draft resolution should also provide for further modifications to the terminology used therein.

The representative of SLOVAKIA expressed agreement with the emerging consensus position.

The representative of ETHIOPIA requested the Secretariat to read out the draft resolution as amended.

At the request of the CHAIR, the representative of the OFFICE OF THE LEGAL COUNSEL read out the revised proposed draft resolution on the remuneration of staff in the Professional and higher

categories, dependants for family reunification purposes and parental leave, contained in document EB152/49, which would read:

The Executive Board,

Having considered the report on amendments to the Staff Regulations and Staff Rules,

CONFIRMS, in accordance with Staff Regulation 12.2, the amendments to the Staff Rules that have been made by the Director-General with effect from 1 January 2023 concerning the remuneration of staff in the Professional and higher categories, dependants for family reunification purposes and parental leave, as amended, considering that the wording may be reviewed in the future as necessary.

The representative of the RUSSIAN FEDERATION said that while the Board had agreed to maintain the terminology used by the International Civil Service Commission and to amend the draft resolution to note that the wording could be reviewed subsequently, it seemed to him that the draft resolution still included the original proposed wording to which he had not agreed.

The representative of the LEGAL COUNSEL reiterated that the term “birthing mother/parent” would be replaced by “birth mother”, and that the draft resolution would provide for the wording to be reviewed in the future, as necessary.

The representative of the RUSSIAN FEDERATION thanked the Secretariat for the clarification.

The representative of the UNITED STATES OF AMERICA welcomed the proposed amendment read out by the Secretariat. She requested that the summary record of the meeting should reflect that the term “birth mother” was of particular importance to Board members.

The representative of ETHIOPIA proposed adding “and in accordance with agreed language” after “in the future as necessary” in the final paragraph of the revised draft resolution.

The representative of the UNITED STATES OF AMERICA understood the spirit of the proposal by the representative of Ethiopia. However, the term “agreed language” was unclear and she said that she would prefer to retain the wording of the revised draft resolution.

The CHAIR took it that the Board wished to adopt the draft resolution, as amended, on the remuneration of staff in the Professional and higher categories, dependants for family reunification purposes and parental leave, contained in document EB152/49.

The resolution, as amended, was adopted.¹

At the request of the CHAIR, the representative of the OFFICE OF THE LEGAL COUNSEL read out the draft resolution on the remuneration of staff in ungraded positions and the Director-General, contained in document EB152/49.

The CHAIR took it that the Board wished to adopt the draft resolution.

¹ Resolution EB152.R6.

The resolution was adopted.¹

Report of the International Civil Service Commission: Item 25.6 of the agenda (document EB152/50)

Reform of the global internship programme: Item 25.7 of the agenda (document EB152/51)

Implementation of the United Nations Disability Inclusion Strategy, including the WHO policy on disability: Item 25.8 of the agenda (document EB152/52)

The CHAIR invited the Board to consider the reports contained in documents EB152/50 and EB152/51. She drew attention to the report of the Programme, Budget and Administration Committee of the Executive Board contained in document EB152/4, paragraphs 74–84. She also invited the Board to consider the report contained in document EB152/52, in particular the guiding questions set out in paragraph 15.

The representative of the RUSSIAN FEDERATION asked how many days it took, on average, to select candidates for the global internship programme. He also asked whether the Secretariat was taking into account the recommendations provided by the Joint Inspection Unit in that regard, which were set out in the Unit's 2018 Review of internship programmes in the United Nations System, contained in document JIU/REP/2018/1. As noted in recommendation 6 of that Review, voluntary contributions could provide a basis for the further development of the global internship programme.

He took note of the need for the Health Assembly to adopt any amendments to the International Civil Service Commission Statute. The Secretariat should ensure that all employees received the mandatory training on the prevention of and response to sexual exploitation, abuse and harassment. It should regularly carry out training programmes to prevent fraud and corruption, particularly in higher risk areas of work, such as procurement. He expressed support for a briefing to be held on fraud prevention, as proposed by the Secretariat earlier in the meeting.

The representative of GHANA, speaking on behalf of the Member States of the African Region, welcomed the Secretariat's robust efforts to guarantee transparency and accountability in the application process of the global internship programme. Country offices should be equipped to raise awareness of the internship programme among academic institutions. All interns should be provided with the conditions necessary for them to make the most of their internship. The global internship programme should be seen by Member States as a capacity-building tool. She called for the establishment of systems to ensure that workers in health ministries were involved in the global internship programme. The programme's eligibility criteria should be revised to include candidates who were not enrolled in, nor had just completed, an academic programme. The COVID-19 pandemic had hindered the implementation of resolution WHA71.13 (2018), and she called for 75% of interns in the global internship programme to be accepted from low- and middle-income countries.

The continued implementation of the United Nations Disability Inclusion Strategy and the WHO policy on disability would strengthen the capacity of staff members across the three levels of the Organization. She endorsed the recommendations of the International Civil Service Commission to revise the unified base salary scale and update the pay protection points for the Professional and higher categories.

The representative of BRAZIL commended the progress made towards the targets of the United Nations Disability Inclusion Strategy accountability framework. Nevertheless, she expressed concern regarding those indicators that had not been reached. WHO should implement systematic steps to make meetings and events accessible. She noted that WHO was expected to approach the requirements for the

¹ Resolution EB152.R7.

indicator on procurement in the year 2023. Considering that the indicators on consultation with persons with disabilities and on reasonable accommodation had remained unchanged since the year 2019, she requested further information on the actions being taken to meet the requirements for those indicators.

The representative of CANADA welcomed the progress made by WHO in implementing the United Nations Disability Inclusion Strategy, notably under the indicators related to leadership and institutional set-up. She encouraged WHO to strengthen its efforts to consult with organizations of persons with disabilities to ensure that the indicator on consultation with persons with disabilities met the requirements and to take action on indicators where gaps persisted. Recognizing the cross-cutting nature of work on disability inclusion, she said that efforts should be better coordinated at all levels of the Organization. Close collaboration at the country level would ensure that existing resources were systematically and efficiently invested. She asked how WHO would encourage its country and regional offices to work more closely with United Nations country teams and resident coordinators to fully implement the United Nations Disability Inclusion Strategy on the ground. Information on such collaboration should be included in future progress reports.

The representative of BOTSWANA welcomed the progress made to strengthen the global internship programme since its relaunch. The programme enabled public health workers to experience global health and its governance. As the Organization had not met its target of ensuring that at least 50% of accepted interns originated from least developed and middle-income countries by 2022, and the COVID-19 pandemic had further widened the gap between low- and middle-income countries and developed countries, she proposed that at least 70% of accepted interns should originate from least developed and middle-income countries. Thus, the capacities of such Member States to implement WHO programmes would be strengthened. The eligibility criteria for the global internship programme should be revised. Regarding the United Nations Disability Inclusion Strategy, she urged the Secretariat to build Member States' capacities to ensure its full implementation.

The representative of COLOMBIA, welcoming WHO's implementation of the United Nations Disability Inclusion Strategy, said that the technical support provided to Member States should be streamlined in order to address disability inclusion in health system strengthening and to meet the requirements of the indicators set out in the Strategy. She emphasized the importance of the work towards the indicators on consultation with persons with disabilities and on conferences and events. The disability-inclusive health services toolkit and its complementary training packages, identified in paragraph 10(c) of document EB152/52, and the Global standard on accessibility of telehealth services, identified in paragraph 10(e) of document EB152/52, should be translated into the Organization's six official languages and widely distributed.

The representative of ISRAEL¹ said that the ambitious implementation of the United Nations Disability Inclusion Strategy would achieve visible results. While WHO had made progress on the indicators of the Strategy's accountability framework, much work remained to be done. She noted with satisfaction that WHO was implementing the United Nations guidelines on consulting with persons with disabilities. Partnerships should be established in all Regions. She asked what steps were being taken to develop a systematic process to ensure the active involvement of organizations of persons with disabilities across technical and enabling functions. Commending the Secretariat on its efforts to attract, recruit and retain persons with disabilities, she asked which policies had been developed in that regard and how many persons with disabilities were working for WHO. The Secretariat should accelerate its

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

efforts to increase access to all WHO premises and to provide guidelines for the accessibility of all in-person and online WHO events.

The representative of JAMAICA¹ said that while work had been done to increase access to the global internship programme, there was room for improvement. It was understandable that the COVID-19 pandemic had affected the progress of reforms, but she said that the lack of geographical diversity of interns was discouraging. She urged WHO to extend the target date for having at least 50% of accepted interns on the programme originating from least developed and middle-income countries to the year 2025. The Secretariat should clarify the mechanisms used to ensure a fair application process and adherence to guidelines on gender balance and geographical diversity. The Organization should be intentional about building leaders in public health, as envisaged in resolution WHA71.13 (2018). Therefore, she asked how WHO would improve its training curriculum for interns to ensure the attainment of that goal.

The DIRECTOR (Human Resources) said that the length of time taken to recruit interns for the global internship programme was aligned with the timeline used for the recruitment of WHO staff members: 80 working days or 112 calendar days. Overall, the global internship programme was in compliance with guidance from the Joint Inspection Unit. However, she said that some of the Unit's recommendations had not yet been implemented, notably on diversity of participants' universities and sustainable financing. With regard to the target of 50% of accepted interns from least developed or middle-income countries, she clarified that there was an absence of data on the global internship programme because it had been suspended during the COVID-19 pandemic. Nevertheless, the Secretariat was taking measures to improve the outreach of the programme and achieve its targets and was applying lessons learned from the Young Professionals Programme. She noted Member States' requests to review the eligibility criteria for the global internship programme. The Secretariat would consider the various related mechanisms for talent acquisition and capacity building, and ensure that any review met the objectives of Member States.

The ASSISTANT DIRECTOR-GENERAL AD INTERIM (Universal Health Coverage/Communicable and Noncommunicable Diseases) thanked Member States for holding the Secretariat accountable to the United Nations Disability Inclusion Strategy. Since the launch of the WHO policy on disability, progress towards achievement of the Strategy's indicators had been driven by the establishment of the United Nations Disability Inclusion Strategy steering committee, working group and secretariat, as well as the establishment of the WHO action plan on the United Nations Disability Inclusion Strategy, which had been funded through flexible funds. She acknowledged, however, that more must be done to systematically integrate disability into all programme areas at all levels of the Organization. She recognized the efforts of the voluntary staff group, Embracing Disability Affinity – Resource Group, in driving discussions on organizational culture. The Secretariat would do more to build staff members' capacities on disability inclusion.

The ASSISTANT DIRECTOR-GENERAL (Business Operations) said that disability inclusion was implemented through the recently launched United Nations Disability Inclusion Strategy steering committee, which would inform representatives across the regions of challenges and expectations, based on technical expertise. He sought support from Member States to address accessibility challenges faced by country offices. The Secretariat would publish policies and guidelines on accessibility at in-person, hybrid and virtual conferences and events prior to the Seventy-sixth World Health Assembly. He highlighted that the Organization had already made great strides in ensuring that persons with disabilities could more actively and fully participate in deliberations. The Secretariat expected an improvement in

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

the rating of the accountability framework indicator on procurement, given that, among others, its policies were accessible, bidding documents were being translated for persons with disabilities.

The CHAIR took it that the Board wished to note the report of the International Civil Service Commission, contained in document EB152/50, and the report on the reform of the global internship programme, contained in document EB152/51, and concur with the recommendations of the Programme, Budget and Administration Committee of the Executive Board contained in paragraphs 74–84 of document EB152/4.

The Board noted the reports contained in documents EB152/50 and EB152/51 and concurred with the Programme, Budget and Administration Committee’s guidance. The Board also noted the report contained in document EB152/2.

2. GOVERNANCE MATTERS: Item 23 of the agenda (continued)

WHO Reform: Item 23.3 of the agenda (continued)

- **Involvement of non-State actors in WHO’s governing bodies** (documents EB152/38 and EB152/38 Add.1) (continued)

The CHAIR drew attention to the draft decision contained in document EB152/38 and the amendments to the draft decision proposed by the representatives of Canada and Oman, which read:

The Executive Board, having examined and noted the report on WHO governance reform: Involvement of non-State actors in WHO’s governing bodies,¹

Decided:

- (1) that the constituency statements will continue to be implemented during all WHO governing body meetings, in accordance with the modalities outlined in paragraphs 15 to 17 of document EB152/38;
- (2) to include the two UN Observer States in this process without any prejudice to the new way of work; [OMAN]
- (3) the Secretariat regularly consults Member States and non-State actors in official relations with a view to improving these modalities based on such consultations, and that the results of the first consultation be presented for consideration to the 156th session of the Executive Board. [CANADA]

The financial and administrative implications for the Secretariat of the draft decision were contained in document EB152/38 Add.1.

She invited the representative of Oman to clarify his proposal.

¹ EB152/38.

The representative of OMAN said that, while the Member States of the Eastern Mediterranean Region welcomed the Executive Board's ongoing efforts to improve the way in which statements were delivered, and to raise recognition of the vital role of non-State actors in the improvement and delivery of health care globally, the active role Palestine played in the Region must also be recognized. He expressed concern that, under the new modalities for the delivery of statements, Palestine had been relegated to always being the last to address the Board. He proposed that the draft decision contained in document EB152/38 should be amended to add the wording, "and to include the Observer Palestine in this process without any prejudice to the new way of work".

The representative of the UNITED STATES OF AMERICA welcomed the proposed amendment to the draft decision made by the representative of Canada. However, she did not understand why the proposal made by the representative of Oman gave precedence to only one observer. She did not support the amendment proposed by the representative of Oman that had been circulated previously, nor the updated version that had just been read out.

The representative of the UNITED KINGDOM OF GREAT BRITAIN AND NORTHERN IRELAND concurred with the comments made by the representative of the United States of America.

The CHAIR took it that the Board wished to postpone the adoption of the draft decision to allow for further consultations among Member States.

It was so agreed.

(For continuation of the discussion and adoption of a decision, see the summary record of the eighteenth meeting, section 1.)

3. REPORT ON MEETINGS OF EXPERT COMMITTEES AND STUDY GROUPS: Item 26 of the agenda

- **Expert advisory panels and committees and their membership** (documents EB152/53 and EB152/53 Add.1)

The CHAIR invited the Board to consider the reports contained in documents EB152/53 and EB152/53 Add.1.

The representative of SLOVAKIA sought clarification on the term "membership" in the subheading "Expert advisory panels and committees and their membership" in the report on meetings of expert committees and study groups, contained in document EB152/53 Add.1. He requested that future reports clearly state how members had been selected and the eligibility criteria for membership.

The CHIEF SCIENTIST said that the composition of the expert advisory panels and committees was agreed by the Executive Board and the World Health Assembly and documented. The Secretariat welcomed the proposal to include information in individual reports on membership selection in future reports.

The Board noted the reports contained in documents EB152/53 and EB152/53 Add.1.

4. COMMITTEES OF THE EXECUTIVE BOARD: Item 24 of the agenda (continued)**Foundation committees and selection panels:** Item 24.2 of the agenda (document EB152/44)**His Highness Sheikh Sabah Al-Ahmad Al-Jaber Al-Sabah Prize for Research in Health Care for the Elderly and in Health Promotion**

Decision: The Executive Board, having considered the report of the State of Kuwait Health Promotion Foundation Selection Panel, awarded the State of Kuwait Health Promotion Foundation's His Highness Sheikh Sabah Al-Ahmad Al-Jaber Al-Sabah Prize for Research in Health Care for the Elderly and in Health Promotion for 2023 to the National Center for Chronic and Noncommunicable Disease Control and Prevention of China and Dr Abla Mehio Sibai from Lebanon for their outstanding contribution to research in the areas of health care for the elderly and in health promotion. Each laureate would receive a plaque and US\$ 20 000.¹

Sasakawa Health Prize

Decision: The Executive Board, having considered the report of the Sasakawa Health Prize Selection Panel, awarded the Sasakawa Health Prize for 2023 to the Nick Simons Institute of Nepal and Professor Vichai Tienthavorn from Thailand for their outstanding innovative work in health development. Each laureate would receive a statuette and US\$ 20 000.²

Nelson Mandela Award for Health Promotion

Decision: The Executive Board, having considered the report of the Nelson Mandela Award for Health Promotion Selection Panel, awarded the Nelson Mandela Award for Health Promotion for 2023 to Dr Mariam Athbi Al Jalahma from Bahrain for her significant contribution to health promotion. The laureate would receive a plaque.³

Dr LEE Jong-wook Memorial Prize for Public Health

Decision: The Executive Board, having considered the report of the Dr LEE Jong-wook Memorial Prize Selection Panel, awarded the Dr LEE Jong-wook Memorial Prize for Public Health for 2023 to Dr Jorge Francisco Meneses from Guatemala for his outstanding contribution to public health. The laureate would receive a plaque and US\$ 100 000.⁴

¹ EB152(24).

² EB152(25).

³ EB152(26).

⁴ EB152(27).

United Arab Emirates Health Foundation Prize

Decision: The Executive Board, having considered the report of the United Arab Emirates Health Foundation Prize Selection Panel, awarded the United Arab Emirates Health Foundation Prize for 2023 to Dr Maria Asuncion Silvestre of the Philippines for her outstanding contribution to health development. The laureate would receive US\$ 20 000.¹

The meeting rose at 12:50.

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¹ EB152(28).