Report of the Executive Board on its 149th and 150th sessions

1. The Executive Board held its 149th session on 2 June 2021 and its 150th session from 24 to 29 January 2022. The 149th session took place virtually, using video conference technology, and the 150th session was held in a hybrid format. Both sessions were coordinated from WHO headquarters, Geneva. This report summarizes their main outcomes.

149TH SESSION (2 JUNE 2021)

2. The Board adopted its agenda containing 14 items and subitems, with 21 accompanying documents. It adopted 11 decisions.

3. In the context of the pandemic of coronavirus disease (COVID-19), the Board decided to adopt special procedures for the virtual meetings of its 149th session.

4. The Board noted the report of the thirty-fourth meeting of the Programme, Budget and Administration Committee and the guidance provided therein.

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

5. The Board noted the report on WHO reform: written statements and concurred with the guidance of the Programme, Budget and Administration Committee. Following discussions, the Board decided that the guidelines shall be applied to written statements submitted by Member States in relation to its sessions, and recommended to the Seventy-fifth World Health Assembly the application of the guidelines to written statements submitted by Member States relating to sessions of the Health Assembly.

6. Having considered and noted the reports on the process for the election of the Director-General of the World Health Organization, the Board decided on dates for the candidates’ forums and on arrangements for the conduct of the interviews of candidates. It also decided to establish a process for determining which contingency arrangements should be pursued for the nomination of candidates in the event of limitations to physical meetings of the 150th session of the Executive Board.

7. After discussions, the Board noted the annual report on evaluation and the report on the evaluation of WHO transformation, concurring with the respective guidance of the Programme, Budget and Administration Committee. It also noted two reports on hosted partnerships.

8. The Board appointed members to fill the seven vacant positions on the Programme, Budget and Administration Committee and one on the Foundation Committees.
9. The Board considered the statement by the representative of the WHO staff associations and noted the report on the meetings of four expert committees.

150TH SESSION (24–29 JANUARY 2022)

10. The Board adopted its agenda containing 45 items and subitems, with 64 accompanying documents. It adopted nine resolutions and 23 decisions.

11. In the context of the ongoing COVID-19 pandemic, the Board decided to adopt special procedures for the hybrid meetings of its 150th session.

12. The Board noted the report of the regional committees.

13. The Board noted the recommendations contained in the report of the thirty-fifth meeting of the Programme, Budget and Administration Committee. It decided to confirm its agreement to the terms of reference of the Independent Expert Oversight Advisory Committee, as amended by the Programme, Budget and Administration Committee.

14. The Board nominated Dr Tedros Adhanom Ghebreyesus for the post of Director-General, for a second term. It adopted two resolutions, submitting to the Health Assembly its nomination and a draft contract of the Director-General.

PILLAR 1: ONE BILLION MORE PEOPLE BENEFITING FROM UNIVERSAL HEALTH COVERAGE

15. After extensive discussions, the Board noted the report on the political declaration of the third high-level meeting of the General Assembly on the prevention and control of non-communicable diseases. Together with its annexes, the report presented a set of recommended approaches reflecting the commitments made by Member States at the United Nations General Assembly and the guidance provided by the Health Assembly to realize these commitments. The Board recommended that the Seventy-fifth World Health Assembly adopt the approaches set out in the report, namely: an implementation road map for the global action plan for the prevention and control of noncommunicable diseases; a global strategy on oral health; a global action plan on epilepsy and other neurological disorders; an action plan to effectively implement the global strategy to reduce the harmful use of alcohol as a public health priority; a workplan for the global coordination mechanism on the prevention and control of noncommunicable diseases; and recommendations on strengthening and monitoring diabetes responses within national noncommunicable disease programmes, on strengthening the design and implementation of policies to treat people living with noncommunicable diseases in humanitarian emergencies, and on the prevention and management of obesity over the life course.

16. After discussing and noting the report on the global health sector strategies on, respectively, HIV, viral hepatitis and sexually transmitted infections, the Board decided that informal consultations on the draft health sector strategies would continue to be facilitated by the Secretariat during the intersessional period prior to the Seventy-fifth World Health Assembly, with a view to enabling the Health Assembly to adopt the strategies for the period 2022–2030.

17. In discussing the global strategy for tuberculosis research and innovation, the Board expressed concern over the impact of the COVID-19 pandemic on tuberculosis indicators and over the continued underfunding of tuberculosis research and development. It called for more resources to be
mobilized in order to accelerate the implementation of the strategy and hasten progress towards global tuberculosis targets. It noted the report.

18. In its consideration of the road map for neglected tropical diseases 2021–2030, the Board noted the report and underscored the importance of integrating services for neglected tropical diseases within national health systems. It called for renewed efforts by Member States in order to maintain progress towards the global targets for neglected tropical diseases.

19. The report on the Immunization Agenda 2030 was considered and noted. In its discussions, the Board drew attention to the importance of harnessing lessons learned from COVID-19 vaccination campaigns and strengthening collaboration for the implementation of immunization strategies in order to regain progress lost during the COVID-19 pandemic.

20. The Board discussed and noted the report on infection prevention and control, drawing attention to the need to strengthen infection and control programmes and scale up efforts to tackle antimicrobial resistance. It called for the development of a global infection prevention and control strategy to accelerate progress in those areas.

21. In its consideration of the global road map on defeating meningitis by 2030, the Board noted the report and expressed support for the establishment of a strategic support group to facilitate the implementation of the road map and to raise the profile of meningitis on the public health agenda.

22. Having considered and noted the reports on standardization of medical devices nomenclature, the Board decided to request the Director-General to continue the mapping and use of the four nomenclature systems in WHO platforms and publications, and agreed to continue discussing the matter during the intersessional period leading up to the Seventy-fifth World Health Assembly.

PILLAR 2: ONE BILLION MORE PEOPLE BETTER PROTECTED FROM HEALTH EMERGENCIES

23. After extensive and in-depth discussions, the Board noted the interim report of the Working Group on Strengthening WHO Preparedness and Response to Health Emergencies and the report on strengthening WHO preparedness and response to health emergencies. It noted that the ongoing work of the Working Group on Strengthening WHO Preparedness and Response to Health Emergencies would include dedicated time to allow for discussions on strengthening the International Health Regulations (2005), and urged Member States to take appropriate measures to consider potential amendments to the Regulations with the understanding that this would not lead to reopening the entire instrument for renegotiation.

24. Having considered and noted the report entitled Standing Committee on Pandemic and Emergency Preparedness and Response, the Board decided to consider establishing a Standing Committee on Health Emergency (Pandemic) Prevention, Preparedness and Response and requested the Director-General to facilitate informal consultations among Member States to finalize the draft terms of reference of the Standing Committee, with a view to submitting them to the Board for consideration at its 151st session.

25. The report on WHO’s work in health emergencies was considered and noted. In its discussions, the Board drew attention to the importance of strengthening surveillance, using both traditional and innovative methods, and of boosting sustainable financing for the WHO Health Emergencies Programme and WHO’s emergency functions. It emphasized the need for WHO to prioritize the
prevention of and response to sexual exploitation, abuse and harassment in all emergencies, and it welcomed the update to WHO’s emergency response framework related to that issue.

26. In discussing the report on influenza preparedness, the Board requested the Secretariat to provide an assessment of the practical, administrative and financial implications for Member States of the proposed expansion of the WHO Global Influenza Surveillance and Response System. It noted the report.

27. The Board noted the report on the Global Health for Peace Initiative and recommended that the Seventy-fifth World Health Assembly request the Director-General to consult with Member States and Observers on the implementation of the possible ways forward proposed in the report and to develop a road map for the initiative on this basis.

28. Having considered and noted the reports on poliomyelitis eradication and polio transition planning and polio post-certification, the Board expressed concern over the situation in Afghanistan and in countries affected by outbreaks due to circulating vaccine-derived polioviruses, as well as over the declining poliovirus immunization rates associated with the challenges brought by the COVID-19 pandemic. It welcomed the roll-out of the new Polio Eradication Strategy 2022–2026 and underscored the importance of securing sustainable funding. With regard to polio transition planning, the Board highlighted the need for a risk-based approach and called for continued international collaboration to maintain a robust and transparent monitoring, surveillance and response framework.

PILLAR 3: ONE BILLION MORE PEOPLE ENJOYING BETTER HEALTH AND WELL-BEING

29. After noting the report on maternal, infant and young child nutrition, the Board recommended that the Seventy-fifth World Health Assembly request the development of guidance on regulatory measures aimed at restricting the digital marketing of breast-milk substitutes, so as to ensure that existing and new regulations designed to implement the International Code of Marketing Breast-milk Substitutes and subsequent Health Assembly resolutions adequately address digital marketing practices.

30. In its discussions of the report on WHO’s implementation framework for Billion 3, the Board considered two draft resolutions: on the outcome of the Small Island Developing States Summit for Health, and on health promotion and well-being. The Board noted the report and decided that consultations on both resolutions should continue in the intersessional period.

31. After considering and noting the report on the WHO global strategy for food safety, the Board decided to recommend that the Seventy-fifth World Health Assembly adopt the updated WHO global strategy for food safety. It also recommended to the Health Assembly the adoption of a decision requesting the Director-General to update the interim guidance on reducing public health risks associated with the sale of live wild animals of mammalian species in traditional food markets.

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

Budget and financing matters

32. The Board noted the reports and concurred with the guidance of the Programme, Budget and Administration Committee in respect of the financing and implementation of the Programme budget 2020–2021, a proposed revision to the Programme budget 2022–2023 and outlook for the financing
of the latter, and extending the Thirteenth General Programme of Work, 2019–2023, to 2025. It recommended that the Seventy-fifth World Health Assembly adopt a resolution approving the extension of the period of the Thirteenth General Programme of Work to 2025.

33. The Board noted the report of the Working Group on Sustainable Financing and concurred with the guidance of the Programme, Budget and Administration Committee, which included extending the mandate of the Working Group on Sustainable Financing with a view to having it report to the Seventy-fifth World Health Assembly.

34. The Board noted the reports of the scale of assessments for the biennium 2022–2023 and the status of collection of assessed contributions: situation in respect of 2020, including Member States in arrears in the payment of their contributions to an extent that would justify invoking Article 7 of the Constitution, and concurred with the guidance of the Programme, Budget and Administration Committee in that respect. It adopted a resolution suspending voting privileges for Member States in arrears in the payment of their contributions to an extent that would justify invoking Article 7 of the Constitution as from the opening day of the Seventy-fifth Health Assembly.

Management matters

35. The Board noted two reports on the prevention of sexual exploitation, abuse and harassment: one by the Secretariat and one by the Subcommittee for the Prevention and Response to Sexual Exploitation, Abuse and Harassment of the Independent Oversight and Advisory Committee for the WHO Health Emergencies Programme. It recognized the measures introduced by the Secretariat to date in response to allegations of sexual abuse and exploitation and underscored the importance of institutional culture change. Concurring with the guidance of the Programme, Budget and Administration Committee with respect to the reports, the Board suggested that the five priority areas identified in the report of the Subcommittee should be integrated not only into WHO’s Management Response Plan, but also into the monitoring framework of the Independent Oversight and Advisory Committee. It decided to temporarily suspend Financial Rule XII, 112.1, in part, in order to enable the Head a.i. Investigations/Adviser to the Director-General to be responsible for all investigations of sexual exploitation and abuse and abusive conduct1 and have the same reporting lines, the same type of access, the same channels for reporting the results of their work, including to the Executive Board, and the same authority currently granted to the Director, Internal Oversight Services in this area.

36. The Board noted the report on evaluation and approved the Organization-wide evaluation workplan for 2022–2023.

Governance matters

37. Having considered and noted the report on the global strategy and plan of action on public health, innovation and intellectual property, set to expire in 2022, the Board recommended that the Seventy-fifth World Health Assembly adopt a resolution extending the time frame of the plan of action until 2030.

38. Following discussion of WHO reform: involvement of non-State actors in WHO’s governing bodies, the Board noted the relevant report and decided to organize annually an informal pre-meeting for interested non-State actors in official relations, Member States and the Secretariat during the four to

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1 As defined in the WHO Policy on Preventing and Addressing Abusive Conduct.
six weeks before the Health Assembly. It also decided to test again constituency statements for three agenda items during the Seventy-fifth World Health Assembly.

39. The report on the implementation of the **Framework of Engagement with Non-State Actors** was noted. After considering the report on the review of one third of the **non-State actors in official relations with WHO**, the Board adopted a decision on the outcome of that review, including the admission into official relations of four bodies and the discontinuance of official relations with two others.

**Committees of the Executive Board**

40. The Board noted the reports on **participation in the Programme, Budget and Administration Committee** and on the **Independent Expert Oversight Advisory Committee**. It concurred with the guidance of the Programme, Budget and Administration Committee in respect of the revised terms of reference of the Independent Expert Oversight Advisory Committee.

41. Five **prizes** and one **award** were conferred by the Board.

**Staffing matters**

42. The Board considered the **statement by the representative of the WHO staff associations** and the **report of the Ombudsman**. It noted the **update on human resources** and the **report of the International Civil Service Commission**, concurring with the respective guidance of the Programme, Budget and Administration Committee.

43. The Board confirmed **amendments to the Staff Rules** concerning both the remuneration of staff in the professional and higher categories and the education grant sliding scale, and in another resolution it recommended to the Seventy-fifth World Health Assembly the adoption of a resolution on the salaries of staff in ungraded positions and of the Director-General.

**Report on meetings of expert committees and study groups**

44. The Board noted the reports on meetings of two **expert committees** and on **expert advisory panels and committees and their membership**.