Note for the Record

Meeting of the Director-General with the Officers of the Executive Board 6 October 2023

Participants

Dr Tedros Adhanom Ghebreyesus, Director-General Dr Hanan Mohamed Al Kuwari (Qatar), Chair Dr Sabin Nsanzimana (Rwanda), Vice-Chair Dr Kerstin Vesna Petrič (Slovenia), Rapporteur

Observers

Mr Andrej Vujkovac (Slovenia), First Secretary, Permanent Mission, Geneva
Dr Eiji Hinoshita (Japan), Assistant Minister for Global Health and Welfare, Ministry of Health, Labour and Welfare
Dr Theophile Dushime (Rwanda), Chief Technical Advisor, Ministry of Health
Dr A.G. Guntie (Ethiopia), Regional Coordinator for the African Region
Mr A.R. Rubio (Mexico), Regional Coordinator for the Region of the Americas
Mr Sukpuck Barnett (Thailand), Regional Coordinator for the South-East Asia Region

Secretariat

Dr Catharina Boehme, Assistant Director-General, External Relations and Governance Dr Timothy Armstrong, Director, Department of Governing Bodies (GBS) Mr Derek Walton, Legal Counsel Dr Egle Granziera, Senior Legal Officer Mr Jude Osei, Head of Unit, Protocol, GBS Dr Carmen Savelli, Head of Unit a.i., Governance, GBS Mrs Paidamoyo Takaenzana, External Relations Officer, Governance, GBS Mr Gyanendra Ghale, External Relations Officer, Governance, GBS Ms Diana Graf, Assistant to Director, GBS Mr Nicolas Ashforth, Senior Editor, GBS Ms Laurence Vercammen, Protocol Assistant, GBS

1. The Officers of the Executive Board met with the Director-General on 6 October 2023. The meeting was organized using a hybrid format, with some participants physically present in Geneva and others attending virtually by means of video conference technology. The Vice-Chairs from Japan, Timor-Leste and Paraguay were unable to attend.

PURPOSE OF THE MEETING

2. In accordance with Rule 8 of the Rules of Procedure of the Executive Board, the meeting would review the existing draft Provisional agenda of the 154th session of the Board, to be held in January 2024, together with proposals received for additional items, in order to prepare the Provisional agenda.

3. The meeting opened with a welcome from the Director-General to the Chair and other Officers.

4. The Chair of the Executive Board chaired the meeting. In her opening comments, she welcomed the Officers. She also noted that Regional Coordinators had been invited to attend as observers.

5. The Officers agreed to the proposed method of work. At the proposal of the Chair, they also agreed to discuss together the items on (i) the prioritization of proposals for the Provisional agenda of the 154th session of the Executive Board and (ii) the preparation of that agenda.

PROVISIONAL AGENDA OF THE 154TH SESSION OF THE EXECUTIVE BOARD

6. The Chair informed the Officers that 20 proposals for new agenda items had been received by the deadline of 20 September 2023.

7. The Chair reminded Officers of the template, requested by the Executive Board at its 144th session, which invited the Officers to consider several elements, including whether the proposed items addressed a global public health issue, a new subject within the scope of WHO, or an issue representing a significant public health burden.

8. The Chair proposed that, following their review, the Officers should decide between five options:

Option 1: accept the proposal as a new agenda item

Option 2: combine the proposed item with an existing item

Option 3: defer the proposed item to a later session

Option 4: refer the proposal to another governing body, such as the regional committees or the Programme, Budget and Administration Committee of the Executive Board

Option 5: exclude the proposal.

9. The Officers of the Board agreed to make the **recommendations** set forth below:

Pillar 1: One billion more people benefiting from universal health coverage

- notwithstanding the importance of the subject, that the item proposed by the Government of
 the State of Qatar entitled "Sport for health" should be excluded on the basis that the
 Health Assembly in endorsing WHO's global action plan on physical activity 2018–2030,
 through resolution WHA71.6 (2018), had already provided a mandate for work in that area,
 with implementation ongoing and reports on progress due in 2026 and 2030; and that the
 Secretariat would work with the proponents to enable them, should they so wish, to submit a
 draft resolution to the Executive Board at its 154th session under an existing agenda item;
- that the item proposed by the Government of the Federal Republic of Somalia on accelerating towards the Sustainable Development Goal targets for maternal health and child mortality should be **accepted** onto the **provisional agenda of the 154th session of the Board**, bearing in mind that efforts to achieve universal health coverage had fallen behind, with maternal mortality rates rising, in particular;
- that the item proposed by the Government of the Republic of Iraq on nutrition for patients at Iraqi hospitals, which essentially involved the important matter of country-level implementation, should be **referred** to the **regional committees**, noting that implementation would in any case be discussed at the forthcoming Executive Board under existing items;
- that the item proposed by the Government of Malaysia and the Government of the Federal Democratic Republic of Nepal – entitled "Strengthening access to services for refractive error in the health sector and beyond through multisectoral cooperation" – should be **excluded** as mandates for work in that area had already been provided by the Health Assembly in

resolution WHA73.4 (2020) and decision WHA74(12) (2021), with implementation under way, and with a specific report on progress due in 2024, followed by related input as part of wider biennial reporting on the 2030 Agenda for Sustainable Development (resolution WHA69.11 (2016));

- that the item proposed by the Government of the Kingdom of Thailand on behalf of a group of Member States – entitled "Antimicrobial Resistance: accelerating national and global responses" – should be accepted onto the provisional agenda of the 154th session of the Board in view of the fact that efforts in that area were lagging behind;
- that the item proposed by the Government of the Republic of Mauritius entitled "Better Structure Policy/Decision Making Process" – should be excluded as the subject of evidence-based health care planning was already scheduled to be discussed at the Seventy-seventh World Health Assembly in 2024;
- notwithstanding the importance of the subject, that the item proposed by the Government of the Federal Democratic Republic of Ethiopia and the Government of Malaysia – entitled "Request for Global Strategy and Action Plan on Integrated Emergency, Critical and Operative care (ECO)" – should be **excluded** as a mandate for action already existed through resolution WHA76.2 (2023), with reports on progress due in 2024, 2027 and 2029;
- that the item proposed by the Government of the Kingdom of Thailand entitled "Trade and health policy coherence to support universal health coverage and health security" – should be excluded as a broader mandate for action already existed through the Global Strategy and Plan of Action on Public Health, Innovation and Intellectual Property, the timeframe of which had been extended from 2022 to 2030 through resolution WHA75.14 (2022);
- that the item proposed by the Government of the Kingdom of Spain on human cell, tissue and organ transplantation should be **excluded** as the Health Assembly, through decision WHA75(17) (2022), had decided to continue biennial reporting on the implementation of resolution WHA63.22 (2010) on human organ and tissue transplantation;
- that the item proposed by the Government of the Dominican Republic on behalf of a group of Member States on embedding mental health into universal health coverage should be **excluded**, bearing in mind that mental health was currently included in reporting under the mandate for comprehensive annual reporting on noncommunicable diseases in line with decision WHA72(11) (2019);
- that the item proposed by the Government of the Togolese Republic on tackling the burden of skin diseases should be **excluded** as there was already a mandate for action in that area through the roadmap for neglected tropical diseases 2021–2030, endorsed by the Health Assembly in decision WHA73(33), with biennial reports on progress to the Health Assembly through the Executive Board already due in 2024 and 2026, to be followed by reports to the Health Assembly only in 2029 and 2031;
- that the item proposed by the Government of the Kingdom of Morocco on haemophilia and other hereditary coagulation disorders should be **excluded** as the subject could already be discussed under the mandate for comprehensive annual reporting on noncommunicable diseases in line with decision WHA72(11) (2019), while related mandates had been conferred by resolution WHA59.20 (2006) on sickle-cell anaemia and resolution WHA63.12 (2010) on availability, safety and quality of blood products, with reports to the Health Assembly on progress in respect of the latter resolution due in 2024 and every two years thereafter until 2030;

- that the item proposed by the Government of the Kingdom of Morocco on promoting the health of refugees and migrants should be **excluded** as resolution WHA76.14 (2023) had extended the WHO global action plan on promoting the health of refugees and migrants, 2019–2023 to 2030, with reports to the Health Assembly on progress due in 2025, 2027 and 2029;
- that the item proposed by the Government of the Federal Democratic Republic of Ethiopia entitled "Global action plan on self-care interventions for the period 2023–2030" should be excluded as work was already ongoing in that area within the Secretariat (evidenced by the recent updating of guidance on self-care, WHO guideline on self-care interventions for health and well-being, 2022 revision);¹ and since the subject of well-being and health promotion had been discussed at the last two sessions of the Health Assembly and was already on the agendas of the governing bodies in 2024;
- that an item proposed by the Chair on universal health coverage should be **accepted** onto the **provisional agenda of the 154th session of the Board** as efforts to achieve Sustainable Development Goal target 3.8 (Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all) were not on track and there was currently no opportunity for Member States to have a broad discussion of universal health coverage; moreover, the subjects covered by certain proposals excluded from the agenda were linked to universal health coverage, meaning that any related draft resolutions could be tabled and therefore could also be raised under a dedicated item on that subject;
- that the Secretariat's proposal to change the title of existing agenda item 7 to read "Draft global action plan for infection prevention and control," be **accepted** in order to align with the actual title of the document that the Executive Board would be considering;

Pillar 2: One billion more people better protected from health emergencies

• notwithstanding the importance of the subject, and while the Officers highlighted the importance of implementation and country work, that the item proposed by the Government of the Republic of Iraq on emergency medical services should be **excluded** as resolution WHA72.16 on the specific subject had been adopted by the Health Assembly in 2019 with a report on progress submitted to the Seventy-fourth World Health Assembly in 2021, while further related mandates existed on emergency preparedness, through multiple other governing bodies resolutions;

Pillar 3: One billion more people enjoying better health and well-being

- that the item proposed by the Government of the Republic of Guatemala on drinking water, sanitation, hygiene and other aspects of environmental health should be **excluded** as work was already under way in that area as part of the implementation of the WHO water, sanitation and hygiene strategy 2018–2025, which was already slated to be discussed at the Seventy-eighth World Health Assembly in 2025, while a further mandate existed through resolution WHA72.7 (2019), in respect of which progress reports had been submitted recently to the Health Assembly (in 2021 and 2023);
- that the item proposed by the Government of the Kingdom of the Netherlands on behalf of a group of Member States, on climate change and health, should not be a standalone item as it had been discussed recently; but, given the urgency of the matter, that it should be **combined** with the existing item on the impact of chemicals, waste and pollution on human health, with

¹ WHO guideline on self-care interventions for health and well-being, 2022 revision. Geneva: World Health Organization; 2022.

bullets to be added under an overarching title, one on the impact of chemicals, waste and pollution on human health, the other on climate change and health;

- that, while timely, the item proposed by the Government of the Republic of Mauritius entitled "Supporting Countries in the Southern Hemisphere/Africa in their quest to introduce Artificial Intelligence (AI) in the Healthcare Industry" should be **excluded** as broad mandates existed through decision WHA73(28) (2020), in which the Health Assembly had endorsed the global strategy on digital health (2020–2025) and a related report would be considered by the Health Assembly in 2025, at which moment the specific matter could be discussed, while the Secretariat had also issued a publication on the subject, *Ethics and governance of artificial intelligence for health: WHO guidance*,¹ in 2021;
- that the item proposed by the Government of the Republic of Finland on behalf of a group of Member States – entitled "Economics and health for all" – should be accepted onto the provisional agenda of the 154th session of the Board as no specific mandate existed for action in that area and discussion by the governing bodies of this matter could open doors for greater cross-government involvement in health, with the Officers stressing the challenges to health financing in respect of current pandemics and the importance of WHO showing leadership on the matter;

Pillar 4: More effective and efficient WHO providing better support to countries

- that, although the importance of focussing on implementation was recognized, the item proposed by the Government of the Republic of Iraq entitled "Authorizing the country office to implement the health programme budgets according to the country priorities" should be **excluded** as budget and finance matters were already on the agenda of every Executive Board;
- that an item proposed by the Chair on the nomination and appointment of Regional Directors be **accepted** onto the **provisional agenda of the 154th session of the Board**, with the Director-General welcoming the fact that at least two candidates' forums would have been organized as part of the current round of elections.

NEXT STEPS

10. The Secretariat indicated that the draft Note for the Record of the meeting would be shared with the Officers for comment in a timely manner, together with a revised Provisional agenda. Following the Officers' review, the Note for the Record would be communicated to Member States and the Provisional agenda posted on the web. The Secretariat also gave an assurance that, as always, it would liaise with the Member States that had made proposals, on the basis of the Officers' recommendations, and would give them appropriate future support.

11. It was noted that, although the meeting had been productive, further improvements in ways of working could still be made in respect of both the consultations of the Officers of the Executive Board and the sessions of the Board itself. The Officers expressed their willingness to continue supporting such improvements, including through discussions at the forthcoming informal Executive Board in December 2023.

= = =

¹ Ethics and governance of artificial intelligence for health: WHO guidance. Geneva: World Health Organization; 2021.