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Membership of WHO bodies and committees

In accordance with rules 14.2.2 and 14.3 of the WHO Regional Committee for Europe's rules of procedure, the Regional Director, by circular letter of 10 January 2020, invited all Member States of the European Region to submit, by 13 March 2020, nominations for membership of the:

- Executive Board; and
- Standing Committee of the Regional Committee for Europe.

As insufficient proposals were received in response to the call for nominations by the indicated deadline, the deadline for submission of nominations was extended until 31 March 2020.

This document contains, for each of the above bodies, the terms of reference, an overview of the membership of the body in question, and the curricula vitae of the candidates and letters of intent (where applicable) received by the Secretariat in accordance with the aforementioned deadline.

This document has been updated following the change in the nomination of the individual candidate by the Republic of Kazakhstan.

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I. Executive Board of the World Health Organization

Functions

- 1. Article 28 of the Constitution of the World Health Organization (WHO) stipulates that the functions of the Executive Board shall be:
- (a) to give effect to the decisions and policies of the Health Assembly;
- (b) to act as the executive organ of the Health Assembly;
- (c) to perform any other functions entrusted to it by the Health Assembly;
- (d) to advise the Health Assembly on questions referred to it by that body and on matters assigned to the Organization by conventions, agreements and regulations;
- (e) to submit advice or proposals to the Health Assembly on its own initiative;
- (f) to prepare the agenda of meetings of the Health Assembly;
- (g) to submit to the Health Assembly for consideration and approval a general programme of work covering a specific period;
- (h) to study all questions within its competence;
- (i) to take emergency measures within the functions and financial resources of the Organization to deal with events requiring immediate action. In particular it may authorize the Director-General to take the necessary steps to combat epidemics, to participate in the organization of health relief to victims of a calamity and to undertake studies and research the urgency of which has been drawn to the attention of the Board by any Member or by the Director-General.
- 2. The Rules of Procedure of the Executive Board can be found in *Basic documents*, ¹ together with the WHO Constitution and other official documentation, and can be accessed on the Governance pages of the WHO website at http://www.who.int/gb/bd/.

Present membership from the European Region

- 3. The European Region has eight seats on the Executive Board of WHO, which from May 2020 will be filled by persons designated by Austria, Finland, Germany, Israel, Romania, Russian Federation, Tajikistan and United Kingdom of Great Britain and Northern Ireland. Four seats will become vacant in May 2021, when the terms of office of the members designated by Finland, Germany, Israel and Romania will expire.
- 4. In a letter dated 10 January 2020, Member States were requested to inform the Regional Director whether they wished to submit candidatures for election at the Seventy-fourth World Health Assembly in May 2021.
- 5. It will be recalled that the Regional Committee at its 63rd session in 2013 adopted resolution EUR/RC63/R7, which prescribes the criteria for and selection of candidatures for membership of the Executive Board.

¹ Basic documents – 49th edition. Geneva: World Health Organization; 2020.

6. The following nominations were received at the Regional Office by 31 March 2020 and curricula vitae in standard format and the letters of intent are contained in pages 7 to 40.²

Belarus (Dr Vladimir Stepanovich Karanik)

Bulgaria (Prof Dr Petko Salchev)

Denmark (Dr Søren Brostrøm)

France (Prof Jérôme Salomon)

Slovakia (Mr Jozef Šuvada)

Slovenia (Dr Kerstin Vesna Petrić)

Switzerland (Dr Nora Kronig Romero)

Overview of membership

7. Table 1 shows those countries of the European Region that designated members of the Executive Board during the period 1995–2021.

² The curricula vitae and letters of intent are presented as submitted by the candidates without any amendment nor editing of the content by the Secretariat.

Table 1. Executive Board of the World Health Organization – overview of memberships^a of the European Region from 1995 to 2021

| | WHA | | | | WHA | | | | | | | | | | | | | | | | | | | | | | |
|------------------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|
| Country | 48 1995 | 49 1996 | 50 1997 | 51 1998 | 52 1999 | 53 2000 | 54 2001 | 55 2002 | 56 2003 | 57 2004 | 58 2005 | 59 2006 | 60 2007 | 61 2008 | 62 2009 | 63 2010 | 64 2011 | 65 2012 | 66 2013 | 67 2014 | 68 2015 | 69 2016 | 70 2017 | 71 2018 | 72 2019 | 73 2020 | 74 2021 |
| Albania | | | | | | | | | | | | | | | | | | | Х | XXX | XXX | Χ | | | | | |
| Andorra | • | | | | | | | | | | | | | | | | | | Х | XXX | XXX | Χ | | | | | |
| Armenia | | | | | | | | | | | | | | | | Х | XXX | XXX | Χ | | | | | | | | |
| Austria | | | | | | | | | | | | | | | | | | | | | | | | | Х | XXX | XXX |
| Azerbaijan | | | | | | | | | | | Х | XXX | XXX | Χ | | | | Х | XXX | XXX | Χ | | | | | | |
| Belarus | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Belgium | | | | | Х | XXX | XXX | Χ | | | | | | | | | | Х | XXX | XXX | Χ | | | | | | |
| Bosnia and Herzegovina | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bulgaria | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Croatia | Х | XXX | XXX | Χ | | | | | | | | | | | | | | Х | XXX | XXX | Χ | | | | | | |
| Cyprus ^b | | | | | | Х | XXX | XXX | Χ | | | | | | | | | | | | | | | | | | |
| Czech Republic | | | | | | | | | Х | XXX | XXX | Χ | | | | | | | | | | | | | | | |
| Denmark | | | | | | | | | | | | Х | XXX | XXX | Χ | | | | | | | | | | | | |
| Estonia | | | | | | | | | | | | | | | Х | XXX | XXX | Χ | | | | | | | | | |
| Finland | XXX | XXX | Χ | | | | | | | | | | | | | | | | | | | | | Х | XXX | XXX | X |
| France | XXX | XXX | Χ | Х | XXX | XXX | Χ | | Х | XXX | XXX | Χ | | | Х | XXX | XXX | Χ | | | Х | XXX | XXX | Χ | | | |
| Georgia | | | | | | | | | | | | | | | | | | | | | | | Х | XXX | XXX | Χ | |
| Germany | | | Х | XXX | XXX | Χ | | | | | | | | | Х | XXX | XXX | Χ | | | | | | | XXX | | X |
| Greece | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Hungary | | | | | | | | | | | | | | Х | XXX | XXX | Χ | | | | | | | | | | |
| Iceland | | | | | | | | | Х | XXX | XXX | Χ | | | | | | | | | | | | | | | |
| Ireland | Х | XXX | XXX | Χ | | | | | | | | | | | | | | | | | | | | | | | |
| Israel | XXX | Χ | | | | | | | | | | | | | | | | | | | | | | Х | XXX | XXX | X |
| Italy | | | | | | Х | XXX | XXX | Χ | | | | | | | | | | | | | | Х | XXX | XXX | Χ | |
| Kazakhstan | | | | | | | Х | XXX | XXX | Χ | | | | | | | | | | | Х | XXX | XXX | Χ | | | |
| Kyrgyzstan | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Latvia | | | | | | | | | | | | Х | XXX | XXX | Χ | | | | | | | | | | | | |
| Lithuania | | | | | | Х | XXX | XXX | Χ | | | | | | | | | Х | XXX | XXX | Χ | | | | | | |
| Luxembourg | | | | | | | | | | Х | XXX | XXX | Χ | | | | | | | | | | | | | | |
| Malta | | | | | | | | | | | | | | | | | | | | | Х | XXX | XXX | Χ | | | |
| Monaco | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Montenegro | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Netherlands | | | X | XXX | XXX | Χ | | | | | | | | | | | | | | | | X | XXX | XXX | Χ | | |
| North Macedonia | | | | | | 1 | 1 | 1 | | ļ | 1 | | | | 1 | 1 | | | 1 | | | 1 | | 1 | | | |
| Norway | | | Х | XXX | XXX | Χ | | | | | | | | | | Х | XXX | XXX | Χ | | | | | | | | |
| Poland | | Х | XXX | XXX | Χ | | | | | | | | | | | | | | | | | | | | | | |
| Portugal | Χ | | | | | | | | | | Х | XXX | XXX | Χ | | | | | | | | | | | | | |

| | WHA | WHA | WHA | WHA | WHA | WHA | WHA | WHA | WHA | WHA | WHA | WHA | WHA | WHA | WHA | WHA | WHA | WHA | WHA | WHA | WHA | WHA | WHA | WHA | WHA | WHA | WHA |
|---------------------------------|------------|------------|-----|-----|------------|-----|-----|-----|------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|------------|-----|-----|-----|
| Country | 48 1995 | 49 1996 | 50 | 51 | 52 1999 | 53 | 54 | 55 | 56 2003 | 57 | 58 | 59 | 60 | 61 | 62 | 63 | 64 | 65 | 66 | 67 | 68 | 69 | 70 | 71 2018 | 72 | 73 | 74 |
| Republic of Moldova | 1000 | | | | | | | | | | | | | | XXX | | | | | | | | | | | | |
| Romania | | | | | | | | | | Х | XXX | XXX | Χ | | | | | | | | | | | Х | XXX | XXX | Χ |
| Russian Federation ^c | XXX | XXX | Χ | Х | XXX | XXX | Χ | Х | XXX | XXX | Χ | | | Х | XXX | XXX | Χ | | | Х | XXX | XXX | Χ | | | Х | XXX |
| San Marino | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Serbia ^d | | | | | | | | | | | | | | | Х | XXX | XXX | Χ | | | | | | | | | |
| Slovakia | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Slovenia | | | | | | | | | | | | Х | XXX | XXX | Χ | | | | | | | | | | | | 1 |
| Spain | | | | | | | | Х | XXX | XXX | Χ | | | | | | | | | | | | | | | | 1 |
| Sweden | | | | | | Х | XXX | XXX | Χ | | | | | | | | | | | | Х | XXX | XXX | Χ | | | |
| Switzerland | | | | | Х | XXX | XXX | Χ | | | | | | | | | Х | XXX | XXX | Χ | | | | | | | 1 |
| Tajikistan | | | | | | | | | | | | | | | | | | | | | | | | | Х | XXX | XXX |
| Turkey | XXX | Χ | | | | | | | | | | Х | XXX | XXX | Χ | | | | | | | Х | XXX | XXX | Χ | | 1 |
| Turkmenistan | | | | | | | | | | | | | | | | | | | | | | | | | | | 1 |
| Ukraine | | | | | | | | | | | | | | | | | | | | | | | | | | | i |
| United Kingdom | X | Х | XXX | XXX | Χ | | Х | XXX | XXX | Χ | | | Х | XXX | XXX | Χ | | | | X | XXX | XXX | Χ | | | Х | XXX |
| Uzbekistan | | | | | | | | | | | | | | | | | X | XXX | XXX | Χ | | | | | | | |

Shading indicates years prior to becoming a Member State.

^a In accordance with Rule 105 of the Rules of Procedure of the World Health Assembly, "The term of office of each Member entitled to designate a person to serve on the Board shall begin immediately after the closing of the session of the Health Assembly at which the Member concerned is elected and shall end immediately after the closing of the session of the Health Assembly during which the Member is replaced".

^b Reassigned from the WHO Eastern Mediterranean Region to the WHO European Region as per resolution WHA56.16 in May 2003.

^c Membership of the former USSR has been continued by the Russian Federation.

^d Formerly Serbia and Montenegro.

NOMINATION FOR MEMBERSHIP OF THE EXECUTIVE BOARD OF WHO

CURRICULUM VITAE

Member State making nomination: BELARUS Family name: First/Other names: **KARANIK** Vladimir Stepanovich Gender: Date of birth: 8 January 1973 Male Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively (mark the relevant boxes below; leave other boxes blank) Speak Read Write X **English** \boxtimes П П French П German П П X X Russian \boxtimes **Professional education:** name the most important professional degrees gained (up to 5), most recent first **Grodno Medical Institute** 1996 **Professional career:** list current post first, followed by up to 4 of the most important positions held (please give priority to senior positions in the national health administration close to the political decision-making level) Year (start-end) Minister of Health of Belarus 2019 to date Chief physician, Minsk City Clinical Oncologic Dispensary 2011-2019 Physician, N.N. Aleksandrov National Research-to-Practice Centre for Oncology and 1996-2011 Medical Radiology **International experience (please complete the following three items):** 1) Participation as a member of a national delegation in the governing bodies of WHO or other international/supranational organizations (up to 8 examples), in chronological order, most recent first Year (start-end) Head of delegation to the session of the WHO Regional Committee for Europe 2019 2) Experience as chairperson of a governing body or international negotiating body (up to 8 examples), in chronological order, most recent first (please provide details of the body, meeting and year or session) Year (start-end) Deputy Chair of the Interagency Council on the Promotion of Healthy Lifestyles, 2017 to date Control of Noncommunicable Diseases and on Prevention of the Harmful Use of Alcohol, Substance Abuse and Tobacco Use, Council of Ministers of Belarus Chair of the Interagency Coordination Council on Mental Health Protection 2017 to date Deputy Chair of the National Committee on Population, Council of Ministers of Belarus 2017 to date Deputy Chair of the National Interagency Council on People with Disabilities 2017 to date

3) Work in international organizations as an official or independent expert (up to 8 examples), in chronological order, most recent first (please provide details on the organization, position

Work in the Health Council of the Commonwealth of Independent States

Year (start-end)

2019

taken and period of service)

Proven ability to coordinate, collaborate and communicate at national and international level (up to 8 examples), in chronological order, most recent first (please provide details of coordination of national or international high-level technical or political programmes and other relevant experiences) Year (start-end) Coordination of the implementation of the State programme on public health and 2019 to date demographic security in the Republic of Belarus (2016–2020) Coordination of the collaboration with the Global Fund to Fight AIDS, Tuberculosis 2019 to date and Malaria in implementing the grants for the control of HIV/AIDS and TB Coordination of the collaboration with the Joint United Nations Programme on 2019 to date HIV/AIDS (UNAIDS) Coordination of the State programme for the development of the pharmaceutical 2019 to date industry in the Republic of Belarus (2016–2020) Coordination of the implementation of the project on the strengthening of the health 2019 to date system of the Republic of Belarus, based on the loan agreement between Belarus and the International Bank of Reconstruction and Development (25 November 2016)

Title, name and position of person making the nomination

D.L. Pinevich First Deputy Minister of Health of the Republic of Belarus WHO National Counterpart

Letter of intent

Declaration of intent

The Ministry of Health of Belarus nominates Dr Vladimir Karanik, Minister of Health, as a candidate for the WHO Executive Board.

WHO provides support to the Government of Belarus in the relevant priority areas. Belarus, in turn, is entirely committed to WHO's initiatives and is actively implementing them.

Belarus continuously implements WHO guidance on public health development, including planning and making predictions regarding human resources for health, efficient distribution and use of any resources (e.g. financial), and strengthening knowledge and skills in the provision of integrated health services with person-centred and patient-centred approaches to prevention, diagnostics, treatment and rehabilitation.

For Belarus, the most important areas for collaboration with WHO are prevention of noncommunicable diseases (NCDs); reproductive, mother and child health; and elimination of communicable diseases, including HIV, TB and hepatitis C. Belarus is also making efforts to improve access to high-quality, affordable and effective antiretroviral and TB drugs.

The current State programme on public health and demographic security in the Republic of Belarus (2016–2020) is a national policy, which requires comprehensive actions to control major chronic conditions throughout the life course by creating favourable conditions for disease prevention.

Belarus is fully committed to implementing the 2030 Agenda, and a number of major steps in its support are being undertaken nationally. In particular, the country has prepared the national strategy for sustainable socioeconomic development, identified the major targets to be achieved by 2030, and created national platforms for accelerating progress towards the Sustainable Development Goals (SDGs). Today our country is reporting on most SDG indicators.

With its focus on social welfare, Belarus considers the issues of public health and healthy lifestyles to be of paramount importance. Significant progress has been collaboratively achieved in implementing the WHO Framework Convention on Tobacco Control in Belarus.

Belarus is further committed to supporting WHO policies, strategies and reform efforts on reducing health inequities, strengthening public health and developing systems for the provision of equitable and high-quality health services throughout the life course, starting from the early years.

Belarus can meaningfully contribute to this process by sharing its experience and knowledge in maintaining a welfare-focused health system, providing universal access to health services, and supporting mother and child health, as well as in the area of environment and health.

Belarus is willing to accelerate, support and facilitate activities in the following areas:

 Consolidation of efforts to implement the Health 2020 policy framework and achieve the goals of the 2030 Agenda for Sustainable Development in the WHO European Region.

- 2. Promotion of efficient, affordable and cost-effective technologies, best practices and initiatives on NCD prevention as a key element for reducing inequities in health and closing the gap in life expectancy between men and women.
- 3. Strengthening of the promotion of mother and child health, as well as antenatal and neonatal care and healthy early childhood development, and promotion of safe pregnancy and childbirth assisted by qualified health workers.
- 4. In the context of globalization and migration, Belarus is willing to help strengthen Member States' commitment to eradicating HIV/AIDS and TB by 2030 and implementing the 90-90-90 strategy of the Joint United Nations Programme on HIV/AIDS and the End TB global strategy.
- 5. Contributing to the protection of the environment and strengthening the response to public health emergencies.
- 6. Promotion of the WHO initiative on the digitalization of national health systems as a key element of strengthening people-centred health systems.
- 7. Contributing to containment of the tobacco epidemic and reduction of tobacco-related harm.

As a member of the WHO Executive Board, Belarus will support the global initiatives and contribute to the implementation of the decisions of the World Health Assembly, aiming at improving health and well-being for all people in the WHO European Region.

V.S. Karanik, Minister of Health

NOMINATION FOR MEMBERSHIP OF THE EXECUTIVE BOARD OF WHO

CURRICULUM VITAE

Member State making nomination: BULGARIA

Family name: SALCHEV First/Other names: Petko

Gender: Male Date of birth: 14 April 1961

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively (mark the relevant boxes below; leave other boxes blank)

| | Speak | Read | Write |
|---------|-------------|------|-------------|
| English | \boxtimes | | \boxtimes |
| French | | | |
| German | | | |
| Russian | \boxtimes | | \boxtimes |

| | - C . X |
|---|------------------|
| Professional education: name the most important professional degrees gained (up to 5), most r | <u> </u> |
| Professor of Social Medicine and Healthcare Management | 2012 |
| Doctor of Social Medicine and Health (PhD) | 2003 |
| Master of Finance and Economics | 2003 |
| Master of Public Health | 1991 |
| Master of Medicine | 1984 |
| Professional career: list current post first, followed by up to 4 of the most important positions held (please give priority to senior positions in the national health administration close to the political decision-making level) | Year (start-end) |
| Governor of the National Health Insurance Fund | 2020-present |
| Deputy Executive Director of the Medical Supervision Executive Agency | 2019–2020 |
| Director of Division "Classification Systems, Standards and Innovation", National Centre of Public Health and Analysis | 2011–2019 |
| Head of Department of Social Medicine and Health Management, Faculty of Medicine, Medical University-Sofia | 2008–2011 |
| Deputy Minister of Health of the Republic of Bulgaria | 2003–2005 |
| International experience (please complete the following three items): | |
| 1) Participation as a member of a national delegation in the governing bodies of WHO or other international/supranational organizations (up to 8 examples), in chronological order, most recent first | Year (start-end) |
| Head of the Bulgarian Delegation for the WHO Global Conference on Primary Health Care, Astana, Kazakhstan | 2018 |
| Head of the Bulgarian Delegation for the 48th session of the Commission on Narcotic Drugs, UN, Vienna | 2005 |
| Head of the Bulgarian Delegation for the 58th session of the World Health Assembly, Geneva | 2005 |
| Head of the Bulgarian Delegation for the SEE Health Network Forums in Banja Luka and Chisinau | 2004–2005 |

| Head of the Bulgarian Delegation for the 57th session of the World Health Assembly, Geneva | 2004 |
|---|------------------|
| Head of the Bulgarian Delegation for the Informal meeting of the EU Health Ministers, Kork, Ireland | 2004 |
| Head of the Bulgarian Delegation for the Fifty-third session of the WHO Regional Committee for Europe, Vienna | 2003 |
| Head of the Bulgarian Delegation for the 56th session of the World Health Assembly, Geneva | 2003 |
| 2) Experience as chairperson of a governing body or international negotiating body (up to 8 examples), in chronological order, most recent first (please provide details of the body, meeting and year or session) | Year (start-end) |
| Chairperson of the National Branch Council to the Ministry of Health of the Republic of Bulgaria | 2003–2005 |
| Deputy Chairperson of the Transperency Commission to the Ministry of Health of the Republic of Bulgaria | 2003–2005 |
| Deputy Chairperson of the National Council of Pharmacy to the Ministry of Health of the Republic of Bulgaria | 2003–2005 |
| Chairperson of the Commission on Medical Standards, Council of Ministres of the Republic of Bulgaria | 2003–2004 |
| Chairperson of the Commission for Drugs' Prices Regulation, Council of Ministers of the Republic of Bulgaria | 2003–2005 |
| 3) Work in international organizations as an official or independent expert (up to 8 examples), in chronological order, most recent first (please provide details on the organization, position taken and period of service) | Year (start-end) |
| TAIEX-Eurfopean Commission - expert missions - Hospital Reform in Albania and Public Health Law in Kosovo | 2019 |
| Bulgarian Representative in the European Health Technology Assessment Network according to Article 15 of Directive 2011/24/EU), European Commission | 2013-present |
| Member of the Working Party on Health Systems, European Commission | 2018-present |
| Member of the Working Party on the Assessment of the Functioning of the Health Systems, European Commission | 2018-present |
| Focal point of Bulgaria on Longterm Care to the WHO | 2012-present |
| Member of the Permanent Committee for Health Promotion, WHO | 2003-present |
| Expert FP7-HEALTH-2007-B-EC | 2007 |
| Member of the UNESCO Chair in Bioethics | 2002–2011 |
| Proven ability to coordinate, collaborate and communicate at national and international level (up to 8 examples), in chronological order, most recent first (please provide details of coordination of national or international high-level technical or political programmes and other relevant experiences) | Year (start-end) |
| Expert - Establishing an European Network on Long-term Care and Cost Effectiveness and Dependancy Prevention - project of the Center for Social and Economic Research | 2016–2018 |
| WHO National Focal Point on Integrated People-Centered Health Services | 2016-present |
| National Coordinator - QUALICOPC - Evaluating Primary Care in EuropeWHO | 2011 |
| National Expert - Analytical Support on the Socio-Economic Impact of Social Protection Reforms (ASISP) http://www.socialprotection.eu | 2010-present |
| National Coordinator - PHAMEU European Primary Care project | 2010 |
| | |

| External expert - PHEA - Public Health | 2010 |
|---|-----------|
| WHO Project "Health in Transition" - Bulgaria | 2004–2006 |
| Political Coordinator for the Stability Pact for SE, Council of Ministers | 2003–2005 |

Title, name and position of person making the nomination

Mr. Kiril Ananiev Minister of Health of the Republic of Bulgaria

Letter of intent

Nomination for the membership of the WHO Executive Board

Dear Sir Regional Director,

On behalf of the Ministry of Health of the Republic of Bulgaria, I have the honor to submit the candidature of my country for the Executive Board.

Since the creation of the World Health Organisation Bulgaria, being among the first countries to join it in 1948, has fervently supported the Organisation as a leading authority in international health. The WHO ultimate goal - the attainment by all peoples of the highest possible standard of health, unites efforts in various fields, with the overarching role of the health sector at global, regional and national level. The most cherished value of human beings is health. We believe that WHO makes a difference in global health, through collaboration with all Member-States. Bulgaria is strongly committed to be part of these endeavours as a stable, reliable and resourceful partner. A potential representation in the EB for us is an opportunity to contribute with national capacity and expertise for the implementation of WHO global and regional policies.

Bulgarian support for WHO strategic goals and governance can be demonstrated through diverse activities from the grassroots level on everyday health concerns to the highest political engagement of its Government. The last several years my country has shown firm will to put health high on its political agenda, hosting various international health fora, organizing high-level ministerial meetings, actively participating in the whole spectrum of sessions of the WHO governing bodies – Executive Board, World Health Assemblies and Regional Committees.

Bulgaria has strongly endorsed the Regional Office activities for technical support and practical guidance and tools with the aim to achieve all the health-related SDGs that have Universal Health Coverage at its core, providing the operational framework for their implementation.

This is evident in the new Biennial Collaborative Agreement 2020-2021 which sets the venue for further intensive collaboration between Bulgaria and WHO Regional Office for Europe in the light of GPW 13 based on national priorities and challenges, yet fully aligned with Agenda 2030 and its SDGs.

We strongly support and will contribute to the implementation of the Regional Office initiatives for grasping new opportunities, anticipating and managing trends and threats for reconciliation of the increased health expenditure with limited economic growth. We consider that successive steps should be undertaken to bring disease prevention and action on the determinants of health to the forefront of the national policy. We believe that the citizens' engagement in the development of the national health policies aimed at improving the health and well-being of society is of crucial importance.

We resolutely support the transformation initiatives to put health in all policies in place and create enabling conditions for people to live healthy lives. We are determined to get actively involved in the development of joint initiatives raising health literacy and empowering people in health policy developments.

In addition, going beyond regional limitations, WHO as a global health leader has to boost its support in monitoring, early warning and contriving measures to tackle cross-border health threats as they arise. Although infectious diseases levels in Europe have fallen or remain stable in recent years, the outbreaks of Ebola virus in 2014, Zika in 2016, and Coronavirus 2019-nCov indicate that new infections may occur at any time and need an adequate and timely response. Further actions are required to strengthen national capacity of the countries for prevention, preparedness, response and recovery using an all-hazards, all-health and intersectoral approach in accordance with the capacity requirements of the International Health Regulations to answer global challenges in a sustainable manner.

Antimicrobial resistance, as a growing public health problem, also calls for an ample level of preparedness and response. Another important issue becoming critical for guaranteeing Universal Health Coverage is "Equity, social determinants, gender equality and human rights" and a robust input in this area will address barriers to accessing quality health services across the continuum.

These are but a few priorities, which our candidate, if elected, will further advocate in order to make substantial progress at global level and I kindly ask you to consider the candidature of Prof. Dr. Petko Salchev for a member of the Executive Board.

Prof. Dr. Petko Salchev, who currently holds the position of Governor of the National Health Insurance Fund, has extensive long-term national and international experience in the field of health.

The last 30 years, Prof. Salchev has been working in the field of Public Health, Health Policy, Health Economics and Health Epidemiology. Occupying various positions in our healthcare system - from General Practitioner, Assistant, Chief Assistant, Professor in Social Medicine and Health Management and Head of Health Management Department, he has proven his broad expertise in health research and teaching through training of undergraduate, graduate and postgraduate students. Since 2011 he has been a researcher at the Institute of Economic Research of the Bulgarian Academy of Sciences and has participated in several projects on health assessment, regional inequalities and demographic challenges.

He has demonstrated his competences at senior level as Director of the Regional Center for Public Health, Director of one of the largest university hospitals in the country - "Queen Joanna" University Multidisciplinary Hospital for Active Treatment, Deputy Executive Director of the Medical Supervision Executive Agency and Deputy Minister of Health during the reform of our healthcare system. Prof. Salchev has actively participated in the introduction of new forms of health system financing, development of methodology for diagnostic-related groups and introduction of methods for Health Technologies Assessment (HTA).

Prof. Salchev was involved in the negotiation process of Bulgaria for EU accession and the complete alignment of the Bulgarian legislation to the EU acquis. He has made a significant contribution to the development of the National Health Strategies in the period 2000-2020, as well as to the evaluation of their implementation in the annual reports on Bulgarian citizens' health status. In the 2002-2005 reform period, Prof. Salchev was one of the authors of the Health Act, the Transplantation Act and the Blood and Transfusion Act. At international level, Prof. Salchev is a member of the HTA Network to the EC and of the working groups on health systems assessment. He is the Bulgarian focal point for primary care and for

coordinated and long-term care. He is also the WHO National Focal Point on Integrated People-Centered Health Services.

Prof. Salchev has been involved in many international projects in the field of public health - Health Insurance, Long-Term Care Investments in Public Health, HTA, to mention few.

He has numerous publications on Social Medicine, Health Management, Health Policy, Investments in Health, as well as the Assessment of Healthcare System Risks.

The last 20 years he has been an authority in the public health sector in Bulgaria with major interests in Public Health, Health Policy, Health Management, Health Economics, Epidemiology and Biostatistics, Health Promotion and Disease Prevention, Health Technology Assessment. His broad and diverse international experience as a coordinator, consultant and researcher will additionally facilitate his tribute as a member of EB. He will strive to find workable solutions not only in the priority areas already mentioned, but also for every case posing a health challenge on broader scale.

It is my firm belief that Bulgaria nominates a highly motivated candidate who has the experience, competence and potential to contribute significantly to the work of the Executive Board and make a difference for the Organization and its achievements.

Dear Dr. Kluge, proposing this solid candidature, we are looking forward to an active, engaging and empowering collaboration in the future shaping more reliable responses in the health policy domain both for Europe and the world through "united action for better health".

Sincerely,

Kiril Ananiev Minister of Health of the Republic of Bulgaria

NOMINATION FOR MEMBERSHIP OF THE EXECUTIVE BOARD OF WHO

CURRICULUM VITAE

Member State making nomination: DENMARK Family name: First/Other names: **BROSTRØM** Søren Gender: Date of birth: 4 June 1965 Male Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively (mark the relevant boxes below; leave other boxes blank) Speak Read Write X **English** \boxtimes M French П П German П П Russian П **Professional education:** name the most important professional degrees gained (up to 5), most recent first Senior Managers in Government (SMG), Harvard Kennedy School of Government 2019 Master's degree in Public Administration, Copenhagen Business School 2011 Specialist in obstetrics and gynaecology, Danish Health Authority 2007 Doctor of Philosophy (PhD), Faculty of Health Science, University of Copenhagen 2003 Doctor of Medicine (MD), University of Copenhagen 1995 **Professional career:** list current post first, followed by up to 4 of the most important positions held (please give priority to senior positions in the national health administration close to the political decision-making level) Year (start-end) Director General, Danish Health Authority 2015 to date Director, Hospital Services & Emergency Management, Danish Health Authority 2011-2015 Associate Professor, Department of Obstetrics and Gyneacology, Faculty of Health 2007-2011 Science, University of Copenhagen Senior Consultant, Herlev Hospital 2009-2011 International experience (please complete the following three items): 1) Participation as a member of a national delegation in the governing bodies of WHO or other international/supranational organizations (up to 8 examples), in chronological order, most recent first Year (start-end) 2016-2020 Head of Delegation, Executive Board (EB) of WHO Member of Delegation, UN General Assembly and UHC High Level Meeting 2019 Head of Delegation, WHO Regional Committee for Europe 2016 to date Head of Delegation and Member of Delegation, World Health Assembly 2016 to date 2) Experience as chairperson of a governing body or international negotiating body (up to 8 examples), in chronological order, most recent first (please provide details of the body,

Year (start-end)

2019 to date

2018-2019

meeting and year or session)

Chair, WHO Standing Committee of the Regional Committee for Europe

Vice-chair, WHO Standing Committee of the Regional Committee for Europe

| Vice-chair, WHO World Health Assembly Committee A | 2018 |
|---|--|
| 3) Work in international organizations as an official or independent expert (up to 8 examples), in chronological order, most recent first (please provide details on the organization, position taken and period of service) | Year (start-end) |
| Member, Health Security Committee, European Union | 2012–2015 |
| Secretary-General, International Urogynaecology Association (IUGA) | 2010–2012 |
| Member, Scientific Committee, International Urogynaecology Association (IUGA) | 2008–2011 |
| President, Nordic Urogynaecology Association (NUGA) | 2008–2011 |
| Board Member, European Board and College of Obstetrics and Gynaecology (EBCOG) | 2003–2006 |
| President, European Network of Trainees in Obstetrics and Gynaecology (ENTOG) | 2003–2005 |
| level (up to 8 examples), in chronological order, most recent first (please provide details of coordination of national or international high-level technical or political programmes and other relevant experiences) | |
| | Vear (start-end) |
| Led the reorganisation of the Danish Health Authority to regain a high degree of public | Year (start-end) 2015 to date |
| Led the reorganisation of the Danish Health Authority to regain a high degree of public confidence and reputation | 2015 to date |
| Led the reorganisation of the Danish Health Authority to regain a high degree of public | T |
| Led the reorganisation of the Danish Health Authority to regain a high degree of public confidence and reputation Led large national initiatives on e.g. cancer, hospital planning, diabetes, dementia, | 2015 to date |
| Led the reorganisation of the Danish Health Authority to regain a high degree of public confidence and reputation Led large national initiatives on e.g. cancer, hospital planning, diabetes, dementia, prevention, radiation protection, mental health and elderly care. Chief Executive of the supreme national health authority, Executive officer in the | 2015 to date 2011 to date |
| Led the reorganisation of the Danish Health Authority to regain a high degree of public confidence and reputation Led large national initiatives on e.g. cancer, hospital planning, diabetes, dementia, prevention, radiation protection, mental health and elderly care. Chief Executive of the supreme national health authority, Executive officer in the Ministry of Health, tasked with development and execution of national health policy | 2015 to date 2011 to date 2015 to date |
| Led the reorganisation of the Danish Health Authority to regain a high degree of public confidence and reputation Led large national initiatives on e.g. cancer, hospital planning, diabetes, dementia, prevention, radiation protection, mental health and elderly care. Chief Executive of the supreme national health authority, Executive officer in the Ministry of Health, tasked with development and execution of national health policy Advisory role to Cabinet and Parliament | 2015 to date 2011 to date 2015 to date 2015 to date |
| Led the reorganisation of the Danish Health Authority to regain a high degree of public confidence and reputation Led large national initiatives on e.g. cancer, hospital planning, diabetes, dementia, prevention, radiation protection, mental health and elderly care. Chief Executive of the supreme national health authority, Executive officer in the Ministry of Health, tasked with development and execution of national health policy Advisory role to Cabinet and Parliament Chair, National Task Force on Cancer and Heart Disease | 2015 to date 2011 to date 2015 to date 2015 to date 2014 to date |

Title, name and position of person making the nomination

Mr. Magnus Heunicke Minister of Health and Senior Citizens

Letter of intent

As one of the signatories to the founding constitution of 1946, Denmark is a longstanding and devoted supporter of multilateralism and the World Health Organization (WHO).

Since 1957, Denmark has proudly hosted the WHO Regional Office for Europe. Our government remains strongly committed to strengthening WHO at all levels.

The COVID-19 outbreak highligts the fact that international cooperation is essential in preparedness and response to global health challenges, and WHO is the global organization to lead our efforts.

Denmark highly values the close cooperation with WHO in important areas, such as non-communicable diseases, antimicrobial resistance, vaccines and immunization and health emergencies.

The right to the highest attainable standard of physical and mental health is a fundamental human right and WHO plays a crucial leadership role in the global efforts to achieve health and well-being for all at all ages. Denmark will continue to push for a rights-based approach to all of WHO's work, including equity, gender equality and sexual and reproductive health and rights.

For WHO to maintain this strong position, the organisation must continuously strive to uphold its legitimacy and relevance. This calls for a clear emphasis on the core mandate. The normative role of WHO serves as the cornerstone of this mandate, and provides a solid foundation for the development of sustainable health systems in Member States.

Through several successive reform processes, the effectiveness, agility and transparency of WHO has improved. Denmark will continue to support the process of ensuring good governance, sound financial management and an efficient, effective and accountable WHO.

Denmark prioritizes the implementation of the 13th General Programme of Work (GPW13) and achieving its triple billion goals. As member of the Executive Board, Denmark will stay committed to promoting the triple billion goals with a focus on achieving universal health coverage, reducing health inequalities, strengthening public health and ensuring peoplecentred health systems that are universal, equitable and sustainable and of high quality.

With strong health systems, we will be more resilient to health emergencies, such as the COVID-19 outbreak. WHO is a vital leading partner in the global response and Denmark will work to support timely and focused preparedness for and response to health emergencies, including the full implementation of the International Health Regulations and taking into account the core competencies of WHO.

Antimicrobial resistance is one of the greatest threats to global health today. Significant progress has been made, but transforming policy into action remains a challenge. Denmark is fully committed to this agenda and strongly supports the One Health approach.

Denmark will encourage WHO to provide knowledge and evidence on the health impact of climate change and environmental factors and to develop recommendations regarding environmentally sustainable and climate friendly practices in healthcare.

By pursuing the above-mentioned priorities, Denmark intends to advance on a broad range of health issues with the aim of improving health and well-being for all.

Mr. Regional Director, I have the honour of nominating Danish national Dr. Søren Brostrøm as Denmark's candidate to the Executive Board of the World Health Organisation for the term 2021-2024.

Dr. Brostrøm has served on the Standing Committee of the Regional Committee for Europe since 2017, currently as chair of the committee. Dr. Brostrøm is a highly qualified health professional with a longstanding career in the Danish health system, practicing as chief physician for many years. Since 2011, Dr. Brostrøm has been with the Danish Health Authority serving as Director General for the past five years.

Dr. Brostrøm is devoted to strengthening global public health and will strive to promote synergies and cooperation within the board.

Yours sincerely,

Magnus Heunicke Minister for Health and Senior Citizens

NOMINATION FOR MEMBERSHIP OF THE EXECUTIVE BOARD OF WHO

CURRICULUM VITAE

Member State making nomination: FRANCE

Family name: SALOMON First/Other names: Jérôme

Gender: Male Date of birth: 26 April 1969

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively (mark the relevant boxes below; leave other boxes blank)

| | Speak | Read | Write |
|---------|-------------|-------------|-------------|
| English | \boxtimes | | \boxtimes |
| French | \boxtimes | \boxtimes | \boxtimes |
| German | | | |
| Russian | | | |

| Professional education: name the most important professional degrees gained (up to 5), most | recent first Year |
|--|---------------------------------|
| Accreditation as Research Manager, University of Versailles Saint-Quentin | 2012 |
| PhD in Clinical Epidemiology at University of Paris VI | 2009 |
| Degree in Specialized Complementary Studies (DESC) on infectious and tropical diseases | 2002 |
| Postgraduate degree (DES) in Public Health | 1999 |
| MD, University of Paris V | 1996 |
| Professional career: list current post first, followed by up to 4 of the most important positions held (please give priority to senior positions in the national health administration close to the political decision-making level) Director-General for Health at the Ministry of Solidarity and Health (Paris) | Year (start-end) 8 January 2018 |
| University professor for Hygiene and Security, National Conservatory of Arts and Crafts | to date 2012–2015 |
| Hospital practitioner, Raymond Poincaré Hospital, Garches (92) – university professor (PUPH) since 2015, Public Hospitals Paris, University of Versailles Saint-Quentin, first class since 2020 | 2002– January 2018 |
| Head physician, Hôpitaux de Paris | 1999–2002 |
| Specialist junior doctor, Hôpitaux de Paris, Île-de-France | 1994–1998 |
| T. 4 | |

International experience (please complete the following three items):

1) Participation as a member of a national delegation in the governing bodies of WHO or other international/supranational organizations (up to 8 examples), in chronological order, most recent first

| Year | (start-end) |
|-------|---------------|
| I cui | siui i-ciiu / |

| | · |
|---|------|
| French delegation to the World Health Assembly, May 2019 | 2019 |
| French delegation, bilateral framework agreement France/WHO | 2019 |
| French delegation to the World Health Assembly | 2018 |

| 2) Experience as chairperson of a governing body or international negotiating body (up to 8 examples), in chronological order, most recent first (please provide details of the body, meeting and year or session) | Year (start-end) |
|---|------------------|
| Executive director, Pasteur International Network | 2012 |
| Director, International projects, Pasteur Institute | 2010–2012 |
| 3) Work in international organizations as an official or independent expert (up to 8 examples), in chronological order, most recent first (please provide details on the organization, position taken and period of service) | Year (start-end) |
| Proven ability to coordinate, collaborate and communicate at national and international level (up to 8 examples), in chronological order, most recent first (please provide details of coordination of national or international high-level technical or political programmes and other relevant experiences) | Year (start-end) |
| Member, National Steering Committee, COREB-Emergences, Coordination against epidemic and biological risks | |
| Defence and security officer, University of Versailles Saint-Quentin | 2016 to date |
| Health security advisor to Marisol Touraine, Minister of Social Affairs, Health and Women's Rights | 2013–2015 |
| Health security technical adviser, Office of Bernard Kouchner, Minister of Health | 2001–2002 |

Title, name and position of person making the nomination

Dr Olivier Veran Minister of Solidarity and Health

Letter of intent

Letter of intent from France for submission of its nomination for membership to the Executive Board of the World Health Organization

For many years, France, as a founding member of the World Health Organization (WHO), has been committed to developing a high level of collaboration with WHO.

This commitment to a strengthened strategic partnership is reflected first of all in France's regular presence in WHO's various governing bodies: in the Executive Board (last term: 2015–2018) and in the Standing Committee of the Regional Committee for Europe (last term: 2013–2016); and in technical programmes such as the Special Programme of Research, Development and Research Training in Human Reproduction (HRP).

It is also reflected in the development of specific cooperation initiatives with WHO headquarters, WHO's regional offices (in particular WHO's Regional Office for Europe) and WHO's specialized offices (in particular WHO's Lyon Office), and in the facilitation of expertise sharing, in particular through the various WHO collaborating centres in France.

As an example, France is working with WHO within the Universal Health Coverage Partnership to promote and support the implementation of UHC. Through the French Muskoka Fund, France and WHO are also collaborating to reduce maternal and child mortality rates and improve access to sexual and reproductive health services and quality nutrition in several countries in western and central Africa.

Lastly, this collaboration has been founded on the formalization of several successive multiannual framework agreements since 2003, which make this partnership part of a programmed global strategy. The 2020–2025 framework agreement highlights, in full alignment with WHO's General Programme of Work and the Global Action Plan for SDG 3, several priorities that France will continue to support during its term of office.

Following on from its presidency of the G7 in 2019, France wishes to continue its action on addressing health inequalities by strengthening health systems, and especially primary health care, in order to achieve UHC.

It also intends to continue bringing to the fore issues of international health security and the fight against epidemics and pandemics, which are particularly important in the current context of managing the COVID-19 crisis. To this end, it will support missions by the WHO Lyon Office on strengthening surveillance and response systems, and will focus on implementation of the IHR in the European Region and beyond.

The issues of prevention, health promotion (particularly in the field of mental health), reduction of risk factors (especially environmental risks), health education and literacy will also be priorities, in line with France's strong involvement in the work of the European Environment and Health Process (EHP) and the Transport, Health and Environment Pan-European Process (THE PEP) of WHO/Europe, as well as in the co-piloting of a multicountry action network on nutrition labelling.

Lastly, the creation and development of the WHO Academy, an ambitious continuing health education project that France fully supports, will be particularly closely monitored by France.

By nominating Professor Jérôme Salomon, Director-General for Health of the Ministry of Solidarity and Health, for membership to the WHO Executive Board as France's representative, France wishes to give concrete expression to these priorities. This nomination is also a way of reiterating France's commitment to WHO and our support for the Organization's essential role in providing a coordinated response to global health challenges, at the international level as well as in our Region.

NOMINATION FOR MEMBERSHIP OF THE EXECUTIVE BOARD OF WHO

CURRICULUM VITAE

Member State making nomination: SLOVAKIA

Family name: ŠUVADA First/Other names: Jozef

Gender: Male Date of birth: 13 August 1980

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively (mark the relevant boxes below; leave other boxes blank)

| | Speak | Read | Write |
|---------|-------------|-------------|-------------|
| English | \boxtimes | | \boxtimes |
| French | | | |
| German | | \boxtimes | \boxtimes |
| Russian | | | |

| Professional education: name the most important professional degrees gained (up to 5), most re- | ecent first Year |
|---|------------------|
| Professor, Social Medicine and Social Work, St. Elisabeth University of Health and Social Sciences, Bratislava | 2019 |
| Professor, Health Aministration and Healthcare Leadership, University of Scranton, USA | 2017 |
| Specialization in: Childen Heamotolgy and Oncology (2014), Pediatric Palliative Medicine (2012), Pediatrics (2011), Infectious Diseaes and Tropical Medicine (2009), Postgradual diploma in: Executive MBA - Leadership in Health (2015), Master of Science (M.Sc.) (2010), Master of Public Health (MPH) (2010), Tropical Public Health (2009) | 2015 |
| PhD in: Social Medicine (2012), Public Health (2010), St. Elisabeth University of Health and Social Sciences, Bratislava | 2012 |
| General Medicine, Comenius University Bratislava, M.D. | 2006 |
| Professional career: list current post first, followed by up to 4 of the most important positions held (please give priority to senior positions in the national health administration close to the political decision-making level) | Year (start-end) |
| Chief Guarantor, National Public Health and Clinical Guidelines development, Ministry of Health of the Slovak Republic | 2017-till now |
| Special advisor of the Minister of Health on health policy, advocacy, health science; leader of COVID-19 National Standard; WHO National Focal Point for UHC Indicators, Ministry of Health of the Slovak Republic | 2017–till now |
| Dean, Public Health and Social Science Faculty, St. Elisabeth University of Health and Social Sciences, Bratislava | 2014-till now |
| Vice-Chairman, SIOP-PODC - Pediatric Oncology in developing countries International Society (2010-2018); Pediatric Hematology and Oncology, Children's Teaching Hospital, Bratislava (2014-2015) | 2010–2018 |
| Chief of National Comprehensive Pediatric, Cancer and Palliative Care, Ministry of Health, Uganda | 2010–2014 |

International experience (please complete the following three items):

| 1) Participation as a member of a national delegation in the governing bodies of WHO or other international/supranational organizations (up to 8 examples), in chronological order, most recent first | Year (start-end) |
|---|------------------|
| WHO Executive Board, Geneva, Member of delegation and team leader | 2018–2020 |
| WHO World Health Assembly, Geneva, Member of delegation and team leader | 2018–2019 |
| WHO 69 th Regional Committee, Copenhagen, Member of delegation and team leader | 2019 |
| Slovak Presidency of Visegrad Group, Meeting of Deputy Ministers of Health and WHO EURO Regional Director, High Tatras, Slovakia, member of Slovak Delegation, team leader of panel "V4 and WHO "Universal Health Coverage and Sustainable Development Goals in the V4 region" | 2019 |
| UN General Assembly 73rd Session High-Level Meeting on NCDs, Member of delegation of the Slovak Republic and speaker in "Scalling up multi-stakeholder and multisectoral responses for the prevention and control of NCDs in the context of the 2030 Agenda for sustainable development" panel discussion | 2018 |
| UN General Assembly 73rd Session Side Event, NY, WHO EURO and IOM, team leader and speaker of panel that resulted in UN Regional Common position on Ending HIV, Tuberculosis and Viral Hepatitis through Intersectoral Collaboration in Europe and Central Asia | 2018 |
| WHO 68 th Regional Committee, Roma, Member of delegation, and sub-regional team leader of first Visegrad Group Countries common statement on Sustainable Development Agenda Joint Monitoring Framework Indicators | 2018 |
| 2) Experience as chairperson of a governing body or international negotiating body (up to 8 examples), in chronological order, most recent first (please provide details of the body, meeting and year or session) | Year (start-end) |
| WHO European Health Information Initiative (EHII) sub-group on indicators co-leader from V4 sub-region with participants from WHO, 6 Mb States, OECD, EC, EUROSTAT, ECDC | 2018–2019 |
| Chairperson of Ministers of Health Slovak Presidency of the Visegrad Group Countries Working Group on Innovative Standard Tools and Procedures in Health (infectious, oncological, cardio-vascular, endocrinological, metabolic, neurodegenerative, psychiatric and pulmonary diseases) | 2018–2019 |
| Member of the core negotiation team, Global Summit on Patient Safety, Tokyo | 2018 |
| Vice-Chair, International Chemotherapy and Catastrophic Medicine | 2012-till now |
| Director of Board of Governours at St. Charles Lwanga Buikwe Hospital (2012-2013), Health Initiatives Association (Development and Humanitarian Aid Public - NGO Partnership for HIV/ AIDS children, refugees, palliative care needs in Uganda, South Sudan, Burundi, Ethiopia, Kenya, Lebanon; focused on health interventions, education, literacy, advocacy for marginalised vulnerable individuals and communities) | 2011-till now |
| Vice-Chair, SIOP-PODC - pediatric oncology in developing countries International Society | 2010–2018 |
| CDC/WHO and ITT Evaluation Team of National HIV/ AIDS Situation and Program development in Kyrgyz Republic (on invitation of Government in collaboration with UN, CDC, WHO) | 2011 |
| Chairperson, National Development Program - negotiation between conflict parties of Dinka and Gura tribe and Health care implementation, Mapuordin, South Sudan | 2008–2009 |

| 3) Work in international organizations as an official or independent expert (up to 8 examples), in chronological order, most recent first (please provide details on the organization, position taken and period of service) | Year (start-end) |
|---|--|
| International Tropic Team, Vice Chairman for research in communicable diseases (HIV, TB) neglected diseases and refugees, in collaboration with Slovak Aid, UN organisation in humanitarian and development agenda (UNHCR, Unicef, OIM, UNFDP and WHO | 2006–till now |
| WHO International Children Cancer Initiative (WHO ICCI), working in 6 ICCI WG (patient safety, guidelines, accessibility of innovative medical products, diagnostic and treatment for low-income countries) | 2018–till now |
| Member of MOCHA Project (under EPA - European Pediatric Association) as country representative | 2018–till now |
| SIOP -International Society for Pediatric Cancer, introduction of palliative and pediatric cancer diagnosis and treatment in developing countries, Joint Program of Education in Pediatric Oncology, St Jude's Hospital, USA | 2009–till now |
| CDC Uganda, Medical Director (Monkeypox epidemics in Uganda; ebola and yellow-fever epidemics in South Sudan; TB and National HIV Progran in Uganda; Humanitarian and Health crisis 4th Degree in Burundi) | 2012–2017 |
| IOM, Medical Director in refugee camps in Mapuordit, South Sudan and Dbaye, Beyrut, Lebanon | 2013–2014 |
| Physician at Medecins Sans Frontieres center in South Sudan (Mapuordit) and Burundi (Rutovu) development of local health care facility and HIV program and training center | 2008–2009 |
| Coordinator of medical and social project in refugee camp in Dbayeh, Beurith, Lebanon (focused to consult, advocate and coordinate health and social services) | 2012-till now |
| | |
| Proven ability to coordinate, collaborate and communicate at national and international level (up to 8 examples), in chronological order, most recent first (please provide details of coordination of national or international high-level technical or political programmes and other relevant experiences) | Year (start-end) |
| level (up to 8 examples), in chronological order, most recent first (please provide details of coordination of national or international high-level technical or political programmes | Year (start-end) 2020 |
| level (up to 8 examples), in chronological order, most recent first (please provide details of coordination of national or international high-level technical or political programmes and other relevant experiences) COVID-19 national leading expert medical standards in cooperation with WHO HQ | |
| level (up to 8 examples), in chronological order, most recent first (please provide details of coordination of national or international high-level technical or political programmes and other relevant experiences) COVID-19 national leading expert medical standards in cooperation with WHO HQ and EURO Region Guarantor for National Projects Initiative in field of Preventive, Public Health and | 2020 |
| level (up to 8 examples), in chronological order, most recent first (please provide details of coordination of national or international high-level technical or political programmes and other relevant experiences) COVID-19 national leading expert medical standards in cooperation with WHO HQ and EURO Region Guarantor for National Projects Initiative in field of Preventive, Public Health and Clinical Guidelines Development at Ministry of Health of the Slovak Republic WHO National Focal Point for Universal Health Coverage Indicators In cooperation with WHO EURO coordinated, collaborated and communicated several regional initiatives including two examples: | 2020 2017–till now 2017–till now |
| level (up to 8 examples), in chronological order, most recent first (please provide details of coordination of national or international high-level technical or political programmes and other relevant experiences) COVID-19 national leading expert medical standards in cooperation with WHO HQ and EURO Region Guarantor for National Projects Initiative in field of Preventive, Public Health and Clinical Guidelines Development at Ministry of Health of the Slovak Republic WHO National Focal Point for Universal Health Coverage Indicators In cooperation with WHO EURO coordinated, collaborated and communicated | 2020 2017–till now 2017–till now |
| level (up to 8 examples), in chronological order, most recent first (please provide details of coordination of national or international high-level technical or political programmes and other relevant experiences) COVID-19 national leading expert medical standards in cooperation with WHO HQ and EURO Region Guarantor for National Projects Initiative in field of Preventive, Public Health and Clinical Guidelines Development at Ministry of Health of the Slovak Republic WHO National Focal Point for Universal Health Coverage Indicators In cooperation with WHO EURO coordinated, collaborated and communicated several regional initiatives including two examples: (1) in cooperation with Division of NCDs and Promoting Health through the Life-Course contributed to the initative that led to the Series of Consultations on the | 2020 2017–till now 2017–till now |
| level (up to 8 examples), in chronological order, most recent first (please provide details of coordination of national or international high-level technical or political programmes and other relevant experiences) COVID-19 national leading expert medical standards in cooperation with WHO HQ and EURO Region Guarantor for National Projects Initiative in field of Preventive, Public Health and Clinical Guidelines Development at Ministry of Health of the Slovak Republic WHO National Focal Point for Universal Health Coverage Indicators In cooperation with WHO EURO coordinated, collaborated and communicated several regional initiatives including two examples: (1) in cooperation with Division of NCDs and Promoting Health through the Life-Course contributed to the initative that led to the Series of Consultations on the Effectiveness of Screenings in Health in the WHO European Region from 2018 (2) in cooperation with Division of Information, Evidence, Research and Innovation (DIR) contributed to Digital Health and JMF Indicators WHO EURO agenda as well | 2020 2017–till now |

| Member of Expert Councils and Projects in number of medical and humanitarian organisations (see above) plus Private Medical Practitioners Association in Uganda, East Africa Health Care Federation, ECCO, ESMO, American Oncological Association, International AIDS society, International Society for Disease Surveillance, Ugandan Medical Council, Association of Medical Genetics, Association of Infectious Diseases, Slovak Medical Association, Slovak Medical Council, Slovak Association of Children Hematology and Oncology, International Society of Antimicrobial Chemotherapy | 2006-till now |
|--|---------------|
| Member of evaluation team with CDC and ITT Evaluation of National HIV/ AIDS Situation and Program development in Kyrgyz Republic | 2011 |

Title, name and position of person making the nomination

Mr Peter Pellegrini Prime Minister Interim Minister of Health

Letter of intent

Candidature of the Slovak Republic to the Executive Board

Overview of the relations between Slovakia and the WHO

Since its membership in the WHO, the Slovak Republic has been consistently committed to the achievement of the WHO goals, mandate and mission. This first candidature of the Slovak Republic to the Executive Board brings along the opportunity and challenge to move ahead the health issues on national and global level.

The involvement of the Slovak Republic in the regional and global health agenda has had a growing tendency with a few examples to mention:

- 1. In 2016, the Slovak Presidency of the Council of the European Union developed and upgraded cooperation with WHO, particularly in the field of Access to Medicines, Tuberculosis, AMR, Immunization and Non-Communicable Diseases. Slovakia successfully led WHO FCTC COP7 and COP8 negotiations on FCTC budgetary issues and vice chaired the FCTC COP8 Committee B.
- 2. In the course of the years 2016-2019, Slovakia held an active membership in the SCRC for Europe and, alongside, vice chaired the Committee B during the 70th World Health Assembly. As of 2018, Slovakia was an active member of the SCRC Regional Evaluation Committee. In 2018, Slovakia also joined the European Health Information Initiative (EHII).
- 3. In the period July 2018 June 2019, Slovakia held its fifth Presidency of the Visegrad Group and also initiated the process of regular V4&WHO meetings.
- 4. In September 2018, Slovakia in close cooperation with WHO EURO and IOM organized Side event on Ending HIV, Tuberculosis and Viral Hepatitis at the 73rd Session of the UNGA HLM on TB in New York.
- 5. In February 2019, multi-stakeholder event V4&WHO for Health: Fighting TB took place in Slovakia in order to contribute to global TB elimination efforts.
- 6. Slovakia is also a member of the European Advisory Committee for Health Research.

The WHO priorities of particular relevance and the role of Slovakia

Slovakia can bring to the EB agenda its experience as well as new ideas and considers the priorities stated below to be of particular relevance:

- 1. Tackling major health challenges: Non-communicable and communicable diseases
 - Focus on health promotion and prevention. At the initiative of the Minister of Health, Slovakia declared the year 2019 as the year of prevention, putting the major emphasis on the medical examinations and the citizen's responsibility for own health and awareness.
 - Since 2019, Slovakia has been participating in health literacy initiative and WHO
 National Health Literacy Demonstration Projects Program (NHLDP) for the
 Control and Management of NCDs.

2. Resilient Health systems and Universal Health Coverage

As a country where health services have been traditionally accessible and affordable, Slovakia has recently expanded the range of preventive medical insurance coverage and perceives further progress towards the UHC in implementing such measures that would respond to the ever-growing health needs, namely:

- Availability of quality health care by making use of standardized preventive, diagnostic and therapeutic procedures;
- Availability of prevention, health promotion, early diagnosis and treatment for all;
- Patient safety and the introduction of quality indicators of the health care.

3. Tuberculosis and vulnerable communities

The long history of intensive collaboration in the Tuberculosis field was reflected in the joint meeting of V4 countries and the WHO on 21 February 2019, during which the recognition of the National Institute for TB, Lung Diseases and Thoracic Surgery in Vysne Hagy as the WHO Collaborative Center was pronounced. The institute offers model solutions for those working with vulnerable marginalized communities in the Central Europe.

Regarding the personal representation of the Slovak Republic in the WHO Executive Board, the Slovak government considers Jozef Šuvada to be suitable candidate for the execution of this membership.

Mr Šuvada poses an extensive public health management experience at both national and international level, what makes his profile a full-scale fit for the position. Even more, his ability to act in a constructive manner makes him an effective negotiator what the binding role in the WHO Executive Board requires.

Signature of the nominating authority

Peter Pellegrini Prime Minister Interim Minister of Health

NOMINATION FOR MEMBERSHIP OF THE EXECUTIVE BOARD OF WHO

CURRICULUM VITAE

| Member State | e making nomination: | SL | OVENIA | | |
|-------------------------------|--|--------------------|--------------------|---------------------|------------------|
| Family name: | PETRIČ | Firs | st/Other names: | Kerstin Vesna | |
| Gender: | Female | Dat | e of birth: | 30 September | 1959 |
| | ties: please indicate in whi ctively (mark the relevant b | | | | nominee is able |
| | | Speak | Read | Write | |
| | English | \boxtimes | \boxtimes | | |
| | French | | | | |
| | German | | \boxtimes | | |
| | Russian | | | | |
| Professional ed | lucation: name the most in | nportant professio | nal degrees gained | l (up to 5), most r | ecent first Year |
| Public Health Ljubljana (Slov | Post Graduate Course, L /enia) | Jniversity of Ljub | oljana, Faculty of | Medicine, | 2001 |
| Master Degree | Public Health and Clinic Institute of Psychiatry, | | | sity of London, | 1997 |
| | Medicine, University of Lj | | | ıbljana | 1994 |
| | reer: list current post first, e priority to senior position n-making level) | | | | Year (start-end) |
| Acting Directo | r-General in Directorate t | for Public Health | , Ministry of Hea | alth of Slovenia | 2020-present |
| | on for Health Promotion ctorate for Public Health, | | | cable | 2004–2020 |
| | for WHO relations at the Health Organization (Wh | | alth of Slovenia a | ınd Liaison | 1998–2004 |
| Policy Advisor | at the Department of Dr | ug Addiction, Mi | nistry of Health | of Slovenia | 1994–1998 |
| Freelance tran | slator (Translating from | the English, Swe | edish and Spanis | sh) | 1984–1994 |
| International e | xperience (please comple | te the following t | hree items): | | |
| | as a member of a national opranational organizations (| | | | Year (start-end) |
| Meeting on NO | ovenian High-level delega CDs and High-level Meet United Nations General | ing on the fight a | against tuberculo | | 2018 |
| | nian delegation to the W | | | | 2017 |

attaining SDG target 3.4 on NCDs by 2030, Montevideo, Urugvaj

Regional Director in Slovenia

Member of National High-level delegation in occasion of official visit of the WHO

2015, 2016

| since 1998 – present | Member of Slovenian delegation to the World Health Organization | | |
|-------------------------|---|--|--|
| since 1998– present | Member of Slovenian delegation to the WHO Executive Board | | |
| since 1998– present | Member of Slovenian delegation to the Regional Committee for Europe | | |
| since 1998– present | Member of Slovenian High-level delegation to the WHO Ministerial conferences and other international High-level events (Tallin, Estonia 2008, Moscow, Russia 2010, Minsk, Belarus 2015; Sitges, Spain 2018, Tallin 2018 ect.) | | |
| 2001 | Member of Slovenian delegation to Special High Level session at the United Nations General Assemblyn on HIV/AIDS in New York in 2001 | | |
| Year (start-end) | 2) Experience as chairperson of a governing body or international negotiating body (up to 8 examples), in chronological order, most recent first (please provide details of the body, meeting and year or session) | | |
| 2019 | Chair, Sub-group on leadership for the development of a "non-paper" on leadership for discussion at the 2019 Regional Committee,Standing Committee of Regional Committee for Europe (SCRC), WHO EURO | | |
| 2019-present | Vice-Chair, Steering Committee, European Observatory on Health Systems and Policies (and member since 2006), WHO | | |
| 2019 | Vice-Chair of External Advisory Working Group to the High-level Conference on Health Equity – Accelerating Progress Towards Healthy and Prosperous Lives for all in the WHO European Region in Ljubljana, Slovenia | | |
| 2018–2019 | Chair, Board of the National Institute for Public Health, Slovenia | | |
| 2017–2019 | Chair, Sub-group on WHO's country presence (Countries at the centre: the strategic role of country offices in the WHO European Region), Standing Committee of Regional Committee for Europe (SCRC), WHO EURO | | |
| 2013–2018 | Deputy Chair, Bord of Slovenian Agency for safety in traffic, Slovenia | | |
| 2014–2018 | Co-chair, Global network of WHO national counterparts for implementing the WHO Global strategy to reduce the harmful use of alcohol, WHO HQ Geneva | | |
| 2010-present | Chair, National coordinating group for the implementation of National Diabetes Plan, Ministry of Health, Slovenia | | |
| Year (start-end) | 3) Work in international organizations as an official or independent expert (up to 8 examples), in chronological order, most recent first (please provide details on the organization, position taken and period of service) | | |
| 2018–2019 | Member of the WHO Regional Evaluation Group for the election of Regional Director, WHO EURO | | |
| 2018-present | Member of Steering Group on Health Promotion, Disease Prevention and Management of Non-Communicable Diseases, European Commission | | |
| 2017-present | Member of Board, European Health Forum Gastein | | |
| 2016–2019 | Member of Standing Committee of Regional Committee for Europe (SCRC), WHO EURO | | |
| 2016–2019 | Member of SCRC Sub-group on Governance, WHO EURO | | |
| 2016-present | National expert of the Coalition of Partners to Strengthen Public Health Capacities and Services in the WHO European Region, WHO EURO | | |
| 2006-present | Member, Committee for national alcohol policy and action (CNAPA), European Comission | | |
| 2004-present | Member of Management board of European Monitoring Centre for Drugs and Drug | | |

Proven ability to coordinate, collaborate and communicate at national and international level (up to 8 examples), in chronological order, most recent first (please provide details of coordination of national or international high-level technical or political programmes and other relevant experiences) Year (start-end) Member of informal Expert Group on the role of the EU in Global Health within EU 2019-present Presidencies (Finland, Germany, Croatia, Portugal, Slovenia, France, Romania), EU Coordinator for preparation of the National Health Care Plan 2016 to 2025, Ministry of 2014-2016 Health, Slovenia Coordinator for the side event on "Alcohol, NCDs and Sustainable Development -2018 Where do we stand and where do we go?" during the 73rd session of the United Nations General Assembly in New York Main coordinator and Member of Scientific committee for the preparation of 7th 2016 European Alcohol Policy Conference Deputy-President of Project Board for the Health System Review analysis in Slovenia 2015-2016 and Chair of working group for Optimizing service delivery within the Health System Review in Slovenia, Collaboration between WHO, European Observatory for Healty System and Policies and Slovenia Chair, National coordinating group for the implementation of National Diabetes 2010-present Plan, Slovenia Chair, EU coordination at WHO in relation to Slovenian Presidency of the Council of 2008 the EU, WHO Geneva

2004-present

Title, name and position of person making the nomination

Slovenian National counterpart for overall strategic cooperation with WHO

Mr Aleš Šabeder Minister of Health of Republic of Slovenia

Letter of intent

Letter of intent – candidature of the Republic of Slovenia to the WHO Executive Board (EB)

Since its membership in WHO in 1992, Slovenia has established successful, active and mutually supportive relations with WHO. Over the years, Slovenia has been strongly committed to the achievement of WHO programmes, initiatives, goals and mandate.

In 1996, Slovenia hosted the 1st Ministerial conference on health system reforms for the WHO European Region where the Ljubljana Charter on Reforming Health Care in Europe was adopted. The values of Ljubljana Charter have informed the people-centred health system approach and set the direction for future efforts which resulted also in the Tallinn Charter.

In 2012, Slovenia hosted a meeting of the European Environment and Health Task Force and was presiding over the European Environment and Health Ministerial Board (EHMB) in 2011 and 2012.

In 2016, Slovenia hosted the 7th European Alcohol Policy Conference and meeting of the Global network of WHO national counterparts for implementing the WHO Global strategy to reduce the harmful use of alcohol.

The main purpose of technical collaboration for Slovenia is to contribute to the WHO Regional Office's work in the area of social determinants, health equity and investment for health. To increase capacities and develop know-how to align policies for health equity with global policies for development, SDGs, Health 2020 and WHO's 13th General Programme of Work 2019–2023, the Memorandum of understanding between Slovenia and WHO Regional Office for Europe was signed in 2016. In June 2019, Slovenia hosted the first WHO Highlevel conference on health equity. The event set the European action agenda on increasing equity in health for the next 10 years. The Ljubljana Statement on Health Equity has supported adoption of the Resolution on health equity (EUR/RC69/R5) at the 69th session of the WHO Regional Committee for Europe.

Slovenia is partner of the European Observatory for Health System and Policies (Observatory) since 2006. In this partnership Slovenia among others promoted and contributed to analysis in the area of public health and tackling cancer and in 2016 hosted the meeting of Steering Committee of Observatory.

Slovenia is also supporting the South-eastern Europe Health Network (SEEHN) as a donor country and hosted several events. WHO Collaborating Centre for Cross Sectoral Approaches to Health and Development from Murska Sobota, Slovenia is in collaboration with WHO European Office for Investment for Health and Development, Venice, Italy organizing events for this part of the region.

Slovenia is a pilot country in many areas of WHO's work, among others in the WHO Evidence-Informed Policy Network (EVIPNet), and has performed several commonly agreed activities and project with WHO, such as Self-assessment tool for the evaluation of Essential Public Health Operations (EPHO); Joint External Evaluation of International Health Regulations (IHR) core capacities; Assessment of the quality of institutional care for adults with psychosocial and intellectual disabilities in the WHO European Region; Assessment of

health information systems (HIS) to development and strengthen health information strategies.

As a member, Slovenia is also actively engaged and fully supports good practice exchange in various health related platforms and networks among Member States and civil society, such as European Health Information Initiative (EHII); WHO Action Network on Measuring Population and Organizational Health Literacy (M-POHL); WHO Small-Countries Initiative; WHO Coalition of Partners to strengthen public health services etc.

At global level, on the 73rd UN General Assembly and 3rd UN High-level Meeting on NCDs in 2018 in New York, Slovenia with WHO, some other like-minded countries and NGOs soorganized a side-event on NCDs Alcohol, NCDs and Sustainable Development where WHO introduced "SAFER" - a new WHO-led global initiative to reduce the harmful use of alcohol.

Furthermore, Slovenia allocated financial contribution to WHO for assistance to the Nuba population in Sudan in eliminating leprosy and is also leading coordinated joint action with WHO and international NGOs to establish systematic leprosy control in the Nuba population in Sudan.

Slovenia in WHO represents countries in transition with limited human resources and could through best practices and lessons learned validly represent in the EB the interests of other countries that are facing similar challenges.

Slovenia's long and successful experiences with dealing with inequalities in health and focusing on vulnerable groups when dealing with NCDs could be valuable in advising in implementation of Agenda 2030 and its SDGs.

As a partner and the donor country in the SEEHN, Slovenia would represent this part of region and would continue to offer Government's political, financial and technical support for the Network. Supporting platforms, networks, initiatives, partnerships and other alliances for sharing experiences among Member States, international organizations and Non-state actors will continue to be one of priorities of cooperation with WHO.

In the spirit of the Ljubljana Charter and the Tallinn Charter, Slovenia will continue to support the process of strengthening health systems, in particular primary health care, and emphasising the importance of including access to preventive services and health promotion throughout the life course as one of the key components of universal health coverage (UHC).

Slovenia will hold the presidency of the Council of EU between 1 July and 31 December 2021. As a member of the EB, Slovenia would contribute to a more coordinated political commitment on global health international flora and support the WHO Secretariat in implementation of agreed strategic documents and international commitments in EURO WHO Region and globally.

We are convinced that Dr Kerstin Vesna Petrič, a high quality expert with a knowledge in several areas of health, including public health, experiences in leadership in politically demanding areas such as tobacco and alcohol control and health system reform, long experience of work with WHO and other international organizations, experiences with cooperation with civil society and holding a certificate of appreciation by WHO 2009 for

contribution in tobacco control, will bring valuable experience to the discussions of EB and will contribute to knowledge based decisions.

NOMINATION FOR MEMBERSHIP OF THE EXECUTIVE BOARD OF WHO

CURRICULUM VITAE

Member State making nomination: SWITZERLAND

Family name: KRONIG ROMERO First/Other names: Nora

Gender: Female Date of birth: 23 June 1980

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively (mark the relevant boxes below; leave other boxes blank)

| | Speak | Read | Write |
|---------|-------------|------|-------------|
| English | \boxtimes | | \boxtimes |
| French | | | \boxtimes |
| German | \boxtimes | | |
| Russian | | | |

| Professional education: name the most important professional degrees gained (up to 5), most re- | ecent first Year |
|---|------------------|
| Master's degree in economics (lic. oec.), University of St. Gallen | 2005 |
| Diplomatic training, Federal Department of Foreign Affairs | 2007 |
| Professional career: list current post first, followed by up to 4 of the most important positions held (please give priority to senior positions in the national health administration close to the political decision-making level) | Year (start-end) |
| Ambassador, Vice-Director, member of senior management of the Federal Office of Public Health, and Head of the Division of International Affairs, Federal Office of Public Health, Federal Department of Home Affairs, Bern | since 2017 |
| Deputy Head of the Multilateral Division and Head of the Office of Specialized Institutions, Permanent Mission of Switzerland to the United Nations and the other international organisations in Geneva | 2016–2017 |
| Chief of Staff of Secretary of State Yves Rossier, Federal Department of Foreign Affairs, Bern | 2012–2016 |
| Diplomat and member of staff of Secretary of State Peter Maurer, responsible for sectorial issues, including participation in the development of the first foreign health policy of Switzerland | 2010–2012 |
| Diplomat (bilateral relations with the Americas, Mexico) | 2006-present |

International experience (please complete the following three items):

| 1) Participation as a member of a national delegation in the governing bodies of WHO or other international/supranational organizations (up to 8 examples), in chronological order, most recent first | Year (start-end) |
|---|------------------|
| Standing Committee of the Regional Committee for Europe | since 2019 |
| Head of the Swiss delegation to the WHO Executive Board and the WHO Regional Committee for Europe | since 2017 |
| Head of the Swiss delegation to numerous ministerial health conferences (WHO conference on tuberculosis in Moscow; Health Systems for Prosperity and Solidarity: Leaving No One Behind, Tallin, 2018; Global Conference on Primary Health Care, Astana, 2018) | since 2017 |

| Member of the Swiss delegation to the World Health Assembly | since 2018 |
|---|------------------|
| Chief negotiator of a bilateral agreement in the area of public health between Switzerland and the European Union | since 2017 |
| Head of the Swiss delegation to the High-level Meeting of the United Nations General Assembly on Ending Tuberculosis | 2018 |
| Member of the Swiss delegation to the High-level Meeting of the United Nations General Assembly on the Prevention and Control of Non-communicable Diseases | 2018 |
| Head of the Swiss delegation to the 61st and 62nd sessions of the United Nations Commission on Narcotic Drugs | 2018–2019 |
| 2) Experience as chairperson of a governing body or international negotiating body (up to 8 examples), in chronological order, most recent first (please provide details of the body, meeting and year or session) | Year (start-end) |
| Co-chair of the "Geneva Group" Buildings Focal Group – in particular providing guidance relating to the renovation strategy for WHO headquarters in Geneva. The Geneva Group comprises the largest contributors to the United Nations system and holds regular high-level and expert meetings. | 2016–2017 |
| 3) Work in international organizations as an official or independent expert (up to 8 examples), in chronological order, most recent first (please provide details on the organization, position taken and period of service) | Year (start-end) |
| Representative of Switzerland in the Steering Committee of the European Observatory on Health Systems and Policies | 2017/2019 |
| Proven ability to coordinate, collaborate and communicate at national and international level (up to 8 examples), in chronological order, most recent first (please provide details of coordination of national or international high-level technical or political programmes and other relevant experiences) | Year (start-end) |
| Member of senior management of the Federal Office of Public Health | since 2017 |
| Co-chair of the interdepartmental working group on health, innovation and intellectual property | since 2017 |
| Co-chair of the strategic committee on Swiss foreign health policy | since 2017 |
| Coordination of the foreign policy responsibilities of the Secretary of State (foreign policy strategy, human resources management and budget) | 2010–2016 |
| | |

Title, name and position of person making the nomination

Alain Berset Federal Councillor Head of the Federal Department of Home Affairs

Letter of intent

Letter of Intent – Nomination for Membership of the Executive Board of the World Health Organization 2021–2024

Dear Regional Director,

I have the honour to submit herewith the candidature of Switzerland for membership of the Executive Board of the World Health Organization (WHO) for the period 2021–2024.

Relations between Switzerland and WHO

The close collaboration between Switzerland and WHO has always been a priority of our foreign health policy. This manifests itself not only financially, but also and in particular through our active engagement in the governing bodies as well as through various partnerships and activities. Together with WHO as the lead agency, Switzerland actively contributes to regional and global health policies within the framework of its bilateral and multilateral cooperation.

Switzerland has strongly advocated for WHO's Thirteenth General Programme of Work and actively promotes the attainment of the triple billion targets as well as WHO's transformative agenda.

Emphasis and priorities of our commitment

With regard to its commitment within the Executive Board, Switzerland will focus on the six priority action areas of its foreign health policy in the period 2019–2024: (1) health protection and humanitarian crises; (2) access to medicines; (3) sustainable health care and digitalization; (4) determinants of health; (5) global health governance; (6) addiction policy.

Switzerland therefore sets the following priorities for its membership of the Executive Board:

- Promoting international collaboration to keep populations safe from global health risks; in light of recent events, this applies especially to controlling COVID-19.
- With regard to tackling antibiotic resistance, Switzerland intends to set a new course to improve international cooperation.
- Achieving universal health coverage by 2030: strengthening international cooperation in the areas of patient safety and sustainable health systems financing, as well as further developing the initiative launched with Afghanistan and the Central African Republic, among others, to ensure the continuity of health care in emergencies.
- Promoting evidence-based discussions at international level to improve access to safe, effective, affordable and high-quality medicines and vaccines. Furthermore, Switzerland will focus on establishing better international collaboration to promote the exchange of information regarding the prices of medicines.
- Strengthening global health governance and supporting the efficient and multisectoral work of WHO are key concerns of the Swiss Government. In this regard, it is important to us that WHO's activities are aligned and complementary at the regional and global levels.

- Based on Swiss foreign health policy, Switzerland intends to promote the health-development-humanitarian nexus in the context of its cooperation with WHO.
- Switzerland's development cooperation has included years of active involvement in WHO's special programmes in its focus countries (e.g. the Special Programme for Research and Training in Tropical Diseases, reproductive health and research, and health systems governance and financing). It will continue to commit to these areas of action in the future.

The candidature of Switzerland

The discussions within the Executive Board and during the World Health Assembly reveal the complex political and economic factors affecting global health. In the light of the current challenges posed by COVID-19 and Ebola, a coherent health diplomacy is of the utmost importance. However, in this context, WHO's role must remain clearly defined. Against this background, as a member of the Executive Board Switzerland will actively contribute as a bridge builder and ambassador of global health.

I have the honour to present Ms Nora Kronig Romero, Ambassador and Vice-Director in the Federal Office of Public Health, as the Swiss candidate for the WHO Executive Board. Ambassador Kronig Romero is an experienced and recognized diplomat with proven experience at the multilateral level. She has an in-depth understanding of the contexts and challenges of global health. As the head of the Swiss delegation to the Executive Board and to the WHO Regional Committee for Europe, and as a member of the Swiss delegation to the World Health Assembly, she has extensive knowledge of the workings of the agency. Since 2019 Ambassador Kronig Romero has been representing Switzerland as an active member of the Standing Committee of the Regional Committee for Europe. In this context she is also involved in the working groups on governance and country work. She is known for her constructive and inclusive manner and will bring valuable experience to the Executive Board.

I would be delighted if Switzerland were to be nominated to the Executive Board on the occasion of the 70th session of the Regional Committee in September 2020 in Tel Aviv and were thus given the opportunity to further strengthen its commitment to global health.

Yours sincerely,

Alain Berset Federal Councillor

II. Standing Committee of the Regional Committee for Europe

Functions

- 8. Rule 14.2.10 of the Rules of Procedure of the Regional Committee for Europe stipulates that the functions of the Standing Committee of the Regional Committee shall be:
- (a) to act for and represent the Regional Committee and to ensure that effect is given to the decisions and policies of the Regional Committee, especially with regard to its supervisory functions as per Article 50 (b) of the WHO Constitution;
- (b) to advise the Regional Committee on questions referred to it by that body, and to counsel the Regional Director as and when appropriate between sessions of the Regional Committee;
- (c) to submit advice or proposals to the Regional Committee and to the Regional Director on its own initiative;
- (d) to propose items for the agenda of meetings of the Regional Committee;
- (e) to submit to the Regional Committee for consideration and approval the regional component of WHO's general programme of work;
- (f) to perform any other functions entrusted to it by the Regional Committee;
- (g) to report to the Regional Committee on its work;
- (h) to examine credentials of delegates of Members, by establishing a subdivision of three members, and report thereon to the Regional Committee.
- 9. Further information can be found in the Rules of Procedure of the Regional Committee for Europe and of the Standing Committee of the Regional Committee for Europe,³ which are accessible on the Governance pages of the Regional Office for Europe's website at http://www.euro.who.int/en/about-us/governance/rules-of-procedure-of-the-regional-committee-for-europe-and-of-the-standing-committee-of-the-regional-committee-for-europe.

Present membership

- 10. In Rule 14.2.1 of its Rules of Procedure, the Regional Committee agreed, when electing the membership of the Standing Committee, to take into account the need for equitable geographical distribution, adequate representation of the interests of the Region, the opportunity for all Member States of the Region to participate over time in the work of the Standing Committee and other considerations relevant to maximizing the effectiveness of its work.
- 11. The terms of office of members from Denmark, Hungary, Lithuania and Uzbekistan will expire at the 70th session of the Regional Committee in September 2020. The Regional Committee will therefore be requested to elect four new members of the Standing Committee, each having a three-year term of office, from September 2020 to September 2023.

³ Rules of procedure of the Regional Committee for Europe and of the Standing Committee of the Regional Committee for Europe, Copenhagen: WHO Regional Office for Europe; 2019.

12. The terms of office of the remaining eight members will continue as follows:

Croatia

(Ms Iva Pejnović Franelić) Member until September 2021

Poland

(Ms Katarzyna Karolina Rutkowska) Member until September 2021

Republic of Moldova

(Ms Silvia Radu) Member until September 2021

Russian Federation

(Professor Veronika Igorevna Skvortsova) Member until September 2021

Armenia

(Dr Arsen Torosyan) Member until September 2022

Belgium

(Dr Tom Auwers) Member until September 2022

Bulgaria

(Dr Plamen Dimitrov) Member until September 2022

Switzerland

(Dr Nora Kronig Romero) Member until September 2022

13. It will be recalled that the Twenty-eighth Standing Committee of the Regional Committee for Europe shall consist of the Deputy Executive President of the 70th session of the Regional Committee as ex-officio Chairperson from September 2020 to September 2021 and the representatives of Member States of the Region duly elected by the Regional Committee to serve on the Standing Committee.

Nominations

14. The following nominations were received at the Regional Office by 31 March 2020, and curricula vitae in standard format and the letters of intent are contained in pages 45 to 64.⁴

Belarus (Mr Anatoli Nikolaevich Hrushkouski)

Czech Republic (Dr Alena Šteflová)

Kazakhstan (Dr Valikhan Isaevich Akhmetov) (Note: New candidate communicated by the Acting Minister of Health care of the Republic of Kazakhstan on 4 September 2020.)

Norway (Ms Tone Wroldsen)

United Kingdom of Great Britain and Northern Ireland (Ms Clara Swinson)

Overview of membership

15. Table 2 gives an overview of those countries of the European Region that have provided members of the Standing Committee since 2009, and Table 3 shows Committee office holders from 1994 to the present.

⁴ The curricula vitae and letters of intent are presented as submitted by the candidates without any amendment nor editing of the content by the Secretariat.

Table 2. Standing Committee of the Regional Committee for Europe – overview of membership^a from September 2009 to September 2021

| Countries | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 |
|---------------------|----------|--|-------|--|--|--|--|------|------|-------|------|--|------|
| Albania | | | | | | | | | | | | | |
| Andorra | XXX | XXX | Χ | | | | | | | | | | |
| Armenia | | | | | | | | | | | Х | XXX | XXX |
| Austria | | | | Х | XXX | XXX | Χ | | | | | | |
| Azerbaijan | Х | XXX | XXX | Х | | | | | | | | | |
| Belarus | | | | | Х | XXX | XXX | Х | | | | | |
| Belgium | | | Х | XXX | XXX | X | | | | | Х | XXX | XXX |
| Bosnia and | | | , | 7001 | 7001 | | | | | | | 7001 | 7001 |
| Herzegovina | | | | | | | | | | | | | |
| Bulgaria | | Х | XXX | XXX | XXX | Х | | | | | Х | XXX | XXX |
| Croatia | | X | XXX | XXX | X | | | | | Х | XXX | XXX | X |
| Cyprus | | | 7001 | 7001 | | | | | | | 7000 | 7001 | |
| Czech Republic | | | | | | | | | | | | | |
| Denmark | | | | | | | | | Х | XXX | XXX | Х | |
| Estonia | | | | | Х | XXX | XXX | Х | | ХХХ | XXX | | |
| Finland | | | | Х | XXX | XXX | X | ^ | | | | | |
| | + | 1 | | _ ^ | | | | Х | 1 | 1 | | 1 | |
| France | - | - | | - | X | XXX | XXX | | VVV | Χ | | - | |
| Georgia | Х | | | | | | X | XXX | XXX | ^ | | - | |
| Germany | 1 | - | 1 | - | - | X | XXX | XXX | X | V//// | V | 1 | |
| Greece | | | | | | | | Х | XXX | XXX | X | ., | |
| Hungary | | | | | | | | 1001 | X | XXX | XXX | Х | |
| Iceland | | | | | | | X | XXX | XXX | Х | | | |
| Ireland | | | | | | | | | | | | | |
| Israel | | | | X | XXX | XXX | Х | | | | | | |
| Italy | | | | | | | X | XXX | XXX | Χ | | | |
| Kazakhstan | | | | | | | | | | | | | |
| Kyrgyzstan | Χ | | | | | | | | | | | | |
| Latvia | | | | | X | XXX | XXX | Χ | | | | | |
| Lithuania | XXX | XXX | Χ | | | | | | X | XXX | XXX | Χ | |
| Luxembourg | | | | | | | | | | | | | |
| Malta | | | Х | XXX | XXX | Χ | | | | | | | |
| Monaco | | | | | | | | | | | | | |
| Montenegro | XXX | XXX | Χ | | | | | | | | | | |
| Netherlands | | | | | | | | | | | | | |
| North Macedonia | XXX | Х | | | | | | | | | | | |
| Norway | Х | | | | | | | | | | | | |
| Poland | | Х | XXX | XXX | Х | | | | | Х | XXX | XXX | Х |
| Portugal | | | | | | Х | XXX | XXX | Х | | | | |
| Republic of Moldova | | | | Х | XXX | XXX | X | | | Х | XXX | XXX | Х |
| Romania | | | | | 7001 | X | XXX | XXX | Х | | 7001 | 7001 | ,, |
| Russian Federation | | | Х | XXX | XXX | Х | 7001 | 7001 | | Х | XXX | XXX | Χ |
| San Marino | | | | 7001 | 7001 | | | | | | 7000 | 7001 | |
| Serbia ^b | | | | | | | | | | | | | |
| Slovakia | XXX | Х | | | | | | Х | XXX | XXX | Х | | |
| Slovakia | ^^^ | ^ | | | | | | X | XXX | XXX | X | | |
| Spain | + | Х | XXX | Χ | 1 | 1 | 1 | | ^^^ | ^^^ | ^ | 1 | |
| Sweden | X | XXX | XXX | X | - | - | - | - | - | - | | - | - |
| Switzerland | XXX | X | ^^^ | ^ | - | - | - | - | - | - | Х | VVV | VVV |
| | | | | | | | | VVV | VVV | - V | Λ. | XXX | XXX |
| Tajikistan | + | | V//// | V/\/\ | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | - | X | XXX | XXX | X | V | - | |
| Turkey | <u> </u> | X | XXX | XXX | Х | | 1000 | X | | XXX | Х | | - |
| Turkmenistan | 1 | | | ļ., | - | Х | XXX | XXX | Χ | - | | - | |
| Ukraine | X | XXX | XXX | X | | | | | | | | | |
| United Kingdom | | X | XXX | XXX | Х | | | | | L | | L | |
| Uzbekistan | | | | | | | | | X | XXX | XXX | Χ | |

^a For the purpose of this table, each term of office of a member of the Standing Committee starts with the session of the Regional Committee in the year in which the member is elected and ends at the Regional Committee of the year indicated.

^b Formerly Serbia and Montenegro.

Table 3. Office holders of the Standing Committee of the Regional Committee for Europe from 1994 to 2020

| Term (from one session of the Regional Committee to the next session) | Chairperson (Deputy Executive President of the Regional Committee as member ex-officio) | Vice-Chairperson |
|--|---|--|
| 1994–1995 | Dr Niall Tierney, Ireland | Dr Anthony Vassallo, Malta |
| 1995–1996 | Professor Jean-François Girard, France | Dr Mikhail N. Saveliev, Russian Federation |
| 1996–1997 | Dr Marta di Gennaro, Italy | Professor Vilius J. Grabauskas, Lithuania |
| 1997–1998 | Professor Vilius J. Grabauskas, Lithuania | Dr Jeremy M. Metters, United Kingdom |
| 1998–1999 | Dr Danielle Hansen-Koenig, Luxembourg | Dr Jeremy M. Metters, United Kingdom |
| 1999–2000 | Dr Jeremy M. Metters, United Kingdom | Professor Ayşe Akin, Turkey |
| 2000–2001 | Professor Ayşe Akin, Turkey | Professor Frantisek Kölbel, Czech Republic |
| 2001–2002 | Dr James Kiely, Ireland | Dr Jacek Antoni Piatkiewicz, Poland (first and second sessions) |
| | | Dr Alamhon Akhmedov, Tajikistan (third, fourth, fifth and sixth sessions) |
| 2002–2003 | Dr Jarkko Eskola, Finland | Dr Božidar Voljč, Slovenia |
| 2003–2004 | Dr Božidar Voljč, Slovenia | Dr Godfried Thiers, Belgium |
| 2004–2005 | Dr Godfried Thiers, Belgium | Dr Jens Kristian Gøtrik, Denmark |
| 2005–2006 | Dr Jens Kristian Gøtrik, Denmark | Dr Hubert Hrabcik, Austria Dr David Harper, United Kingdom |
| 2006–2007 | Dr David Harper, United Kingdom | Ms Annemiek van Bolhuis, Netherlands |
| 2007–2008 | Ms Annemiek van Bolhuis, Netherlands | Dr Bjørn-Inge Larsen, Norway |
| 2008–2009 | Dr Bjørn-Inge Larsen, Norway | Dr Vladimir Lazarevik, the former Yugoslav Republic of Macedonia ^a |
| 2009–2010 | Dr Vladimir Lazarevik, the former Yugoslav Republic of Macedonia ^a | Dr Josep Casals Alís, Andorra |
| 2010–2011 | Dr Josep Casals Alís, Andorra | Dr Lars-Erik Holm, Sweden |
| 2011–2012 | Dr Lars-Erik Holm, Sweden | Ms Dessislava Dimitrova, Bulgaria |
| 2012–2013 | Dr Daniel Reynders, Belgium | Dr Raymond Busuttil, Malta |
| 2013–2014 | Dr Raymond Busuttil, Malta | Ms Taru Koivisto, Finland |
| 2014–2015 | Ms Taru Koivisto, Finland | Professor Benoît Vallet, France |
| 2015–2016 | Professor Benoît Vallet, France | Ms Dagmar Reitenbach, Germany |
| 2016–2017 | Ms Dagmar Reitenbach, Germany | Professor Amiran Gamkrelidze, Georgia |
| 2017–2018 | Professor Amiran Gamkrelidze, Georgia | Mr Ioannis Baskozos, Greece |
| 2018–2019 | Mr Ioannis Baskozos, Greece | Dr Søren Brostrøm, Denmark |
| 2019–2020 | Dr Søren Brostrøm, Denmark | Dr Iva Pejnović Franelić, Croatia |

^a North Macedonia as of 14 February 2019.

NOMINATION FOR MEMBERSHIP OF THE STANDING COMMITTEE OF THE REGIONAL COMMITTEE FOR EUROPE OF WHO

CURRICULUM VITAE

| 3 | | | | | |
|----------------------------|--|---------------------|--------------------|----------------------|------------------|
| Member State | e making nomination: | BE | LARUS | | |
| Family name: | HRUSHKOUSKI | Firs | evich | | |
| Gender: | Male | Dat | e of birth: | 4 February 198 | 32 |
| | ties: please indicate in whi ctively (mark the relevant b | | | | nominee is able |
| | | Speak | Read | Write | |
| | English | | | | |
| | French | | | | |
| | German | | | | |
| | Russian | \boxtimes | | | |
| Professional ed | lucation: name the most in | nportant profession | nal degrees gained | l (up to 5), most re | ecent first Year |
| Presidential A | cademy of Governance o | of Belarus | | | 2009 |
| | ate Medical University | | | | 2005 |
| | reer: list current post first, e priority to senior position n-making level) | | | | Year (start-end) |
| Head of the In | ternational Relations De | partment, Minist | ry of Health of B | elarus | 2012-to date |
| | of the Department of Hyg | | | | 2009–2012 |
| Head of the Fo | ood Safety section, Natio | nal Centre for H | ygiene, Epidemi | ology and | 2009 |
| | physician, Food Safety se and Public Health | ection, Minsk Re | gional Centre fo | r Hygiene, | 2005–2009 |
| International e | xperience (please comple | te the following t | hree items): | | |
| | as a member of a national operanational organizations (| | | | Year (start-end) |
| Participant in s | sessions of the World He | alth Assembly | | | 2012–2019 |
| Participant in s | sessions of the WHO Re | gional Committe | e for Europe | | 2012–2019 |
| Participant in s | 2017–2019 | | | | |
| Participant in r Europe | nmittee for | 2013–2016 | | | |
| | s chairperson of a governin chronological order, most | | | | |

Chair of the 16th session of the Board of Health at the Integration Committee of the

meeting and year or session)

Eurasian Economic Community

Year (start-end)

2014

| 3) Work in international organizations as an official or independent expert (up to 8 examples), in chronological order, most recent first (please provide details on the organization, position taken and period of service) | Year (start-end) |
|---|------------------|
| Activities in the CIS Council for Health Cooperation | 2012–2019 |
| Proven ability to coordinate, collaborate and communicate at national and international level (up to 8 examples), in chronological order, most recent first (please provide details of coordination of national or international high-level technical or political programmes and other relevant experiences) | Year (start-end) |
| Coordination of cooperation with the Global Fund to Fight AIDS, Tuberculosis and Malaria on the implementation of the HIV/AIDS and TB grants | 2012-to date |
| Coordination of cooperation with the Joint United Nations Programme on HIV/AIDS | 2017-to date |
| Coordination of the implementation of the European Union's Programme of Action for Belarus on international accreditation of testing laboratories for medical products and support to healthcare in Belarus (BELMED) | 2013-to date |

Title, name and position of person making the nomination

Minister of Health of the Republic of Belarus V.S.Karanik

Letter of intent

The Ministry of Health of Belarus hereby nominates Mr Anatoli Nikolaevich Hrushkouski, Head of the International Relations Department of the Ministry, as a candidate for the Standing Committee of the Regional Committee for Europe.

The WHO Regional Office for Europe and Belarus have established effective and successful cooperation on a broad scale.

Belarus highly values cooperation in such areas as planning and forecasting of human resources for health, promoting efficient distribution of funding, prioritizing primary health care strengthening, and provision of integrated health services.

A focus area for cooperation with WHO is the prevention and control of noncommunicable diseases (NCDs), from the review of clinical guidelines for prevention, early detection and management of NCDs to the organization of a wide-scale study of NCD risk factors and their prevalence (using the STEPS methodology) and population screening for cervical cancer and breast cancer.

Another major area for cooperation is the prevention and control of communicable diseases, including HIV, TB, and hepatitis C, and improving access to high-quality and affordable antiretroviral and TB medicines. With the support of WHO, Belarus introduced the Treat All policy for HIV. We also appreciate our cooperation in the area of emergency response.

We acknowledge the important role of the WHO Regional Office for Europe in strengthening the health system of our country, in particular through monitoring and evaluation of performance indicators related to health system inputs and outcomes.

Belarus is fully committed to the national implementation of the 2030 Agenda: the country has undertaken major steps towards the Agenda's goals at the national level. In particular, the national strategy for sustainable socioeconomic development was adopted, major targets established, strategic priorities for health introduced, innovative actions for health promotion and NCD prevention developed, cooperation in creating health-promoting environments facilitated, and platforms for accelerating progress towards the SDGs identified.

Belarus is fully committed to WHO's initiatives and contributes, as much as possible, to their implementation.

As a member of the Standing Committee of the Regional Committee for Europe, Belarus would like to prioritize the following activities and tasks.

- 1. Consolidated action towards the achievement of the goals of the 2030 Agenda for Sustainable Development in the WHO European Region. This task would require effective mechanisms, and sufficient resources and measures specific to the country context.
- 2. Promoting and strengthening universal health coverage. Belarus advocates reducing expenditures for inefficient health interventions, focusing instead on improving access to integrated primary health care services.
- 3. Joint efforts by countries to promote and protect mother and child, newborn and reproductive health across the life-course. These actions will both address current needs

- and serve as an investment for the future. Belarus believes that prenatal, perinatal and neonatal care services must be provided at the level where they are most efficient in saving lives and improving health outcomes.
- 4. Promoting efficient, affordable and cost-effective technologies, best practices and initiatives for NCD prevention as a key element for the reduction of the NCD burden in Europe. We acknowledge that prevention programmes, including gender-responsive policies, would help reduce health inequities and close the gap in life expectancy between men and women.
- 5. Europe is the only region where the number of new HIV cases is increasing, and it also has the highest incidence of multidrug-resistant TB in the world. Therefore, Belarus will support the most effective and sustainable regional cooperative approaches to promote universal access to HIV/AIDS and TB prevention and treatment services, with the aim of ending the AIDS and TB epidemics by 2030. In 2019, the first WHO collaborating centre on the introduction of new TB medicines was established in Belarus.
- 6. Advocating for the alignment of digital health systems in the European Region, to implement the strategic public health priorities of Health 2020, the European health policy, and of the 2030 Agenda for Sustainable Development, by establishing the basic infrastructure and services for e-health, as well as a harmonized regulatory framework for digital health services, including personal data protection and harmonized data standards and processes for e-health.

As a member of the Standing Committee of the Regional Committee for Europe, Belarus will work in the above-mentioned priority areas to support WHO's regional initiatives for reduction of health inequities, prevention of impoverishment due to poor health, and provision of equitable, affordable and high-quality health care for all people in the European Region.

V.S. Karanik Minister of Health Republic of Belarus

NOMINATION FOR MEMBERSHIP OF THE STANDING COMMITTEE OF THE REGIONAL COMMITTEE FOR EUROPE OF WHO

CURRICULUM VITAE

| Member State making nomination | CZECH REPUBLIC |
|--------------------------------|----------------|
|--------------------------------|----------------|

Family name: ŠTEFLOVÁ First/Other names: Alena

Gender: Date of birth: Female 4 October 1955

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively (mark the relevant boxes below; leave other boxes blank)

| | Speak | Read | Write |
|---------|-------------|-------------|-------|
| English | \boxtimes | | |
| French | | | |
| German | | \boxtimes | |
| Russian | \boxtimes | | |

| Professional education: name the most important professional degrees gained (up to 5), most r | ecent first Year |
|---|------------------|
| MPH, Master of Public Health, Slovak Health Academy, Bratislava | 2012 |
| Ph.D. in Preventive Medicine, Charles University, Prague | 2007 |
| Postgraduate Training, Medical Postgraduate Institute, Prague | 2000 |
| Fellowship in Environmental and Occupational Health, Health Care Management, University of Iowa, Iowa | 1998 |
| M.D., Charles University, Prague | 1981 |
| Professional career: list current post first, followed by up to 4 of the most important positions held (please give priority to senior positions in the national health administration close to the political decision-making level) | Year (start-end) |
| Deputy Minister of of Health, Czech Republic | since 2017 |
| Member of the Committee for Human Rights and Biomedicine, Government Council for Human Rights | 2010–2017 |
| Head of WHO Country Office in the Czech Republic | 2003–2017 |
| Member of the Government Council for Sustainable Development, Czech Republic | 2003–2017 |
| Head of Department of Education and Research, Secretary to the Chief Medical Officer responsible for Health Care Policy, Ministry of Health, Czech Republic | 1991–2003 |
| T. 4 | |

International experience (please complete the following three items):

1) Participation as a member of a national delegation in the governing bodies of WHO or other international/supranational organizations (up to 8 examples), in chronological order, most

| recent first | Year (start-end) |
|--|------------------|
| 69 th Regional Committee for Europe | 2019 |
| High-Level Conference on the Economy of Wellbeing, | 2019 |
| WHO European High-level Conference on Noncommunicable Diseases | 2019 |
| Global Conference on Primary Health Care | 2018 |
| 71st World Health Assembly | 2018 |

| General Meeting of the WHO Global Coordination Mechanism on the Prevention and Control fo Noncommunicable Diseases, WHO | 2018 |
|---|-------------------|
| 68th Regional Committee for Europe | 2018 |
| 2) Experience as chairperson of a governing body or international negotiating body (up to 8 examples), in chronological order, most recent first (please provide details of the body, meeting and year or session) | Year (start-end) |
| V4 Expert Group: Personal stabilization and recruitment of health care personnel | September 2019 |
| 3) Work in international organizations as an official or independent expert (up to 8 examples), in chronological order, most recent first (please provide details on the organization, position taken and period of service) | Year (start-end) |
| WHO Europe Health Literacy Advisory Group currently under establishment, member | since 2020 |
| The action network for measuring population and organizational health literacy (M-POHL), member | since 2017 |
| Head of WHO Country Office in the Czech Republic | 2003–2017 |
| EU workshops: patient rights (Copenhagen); primary care (Budapest); health workplaces promotion (Bonn, Helsinki, Lisbon), contemporary advisor | 1999–2001 |
| DG SANCO: Health Promoting Workplaces Programme, official representative of the Czech Republic | 1999–2004 |
| Safety Community, Injury Prevention, Karolinska Institutet, certified lecturer | 1994–2003 |
| Proven ability to coordinate, collaborate and communicate at national and international level (up to 8 examples), in chronological order, most recent first (please provide details of coordination of national or international high-level technical or political programmes and other relevant experiences) | Year (start-end) |
| Health 2030 Strategic Framework, leader | since 2018 |
| Working group: Personal stabilization and recruitment of health care personnel, Ministry of Health, chair | since 2018 |
| 6th Ministerial Conference on Environment and Health, coordinator | 2016–2017 |
| Establishment of Health Promoting Hospitals and Health Services in the Czech Republic, coordinator | since 2006 |
| PHARE, Development of Primary Care and Integrated Care Projects, coordinator | 1996–2001 |
| Establishment and development of Czech Healthy Cities Network, coordinator | 1992–2003 |
| Czech-Dutch project MATRA focused on Mental Health, member of project team | 1992–1995 |
| Formulation of national health strategies based on WHO methodology, policy and technical documents (Health for All, Health 21, Health 2020), leader | 1991–2020 |
| | |

Title, name and position of person making the nomination

Mr Adam Vojtěch Minister of Health of the Czech Republic

Letter of intent

To Whom It May Concern,

The Czech Republic is a long-standing member of the World Health Organization and it is fully committed to the priorities and tasks of the Organization. The Czech Republic fulfils its member state obligations, engages in and contributes to meetings of the governing bodies and regularly participates in WHO technical conferences, online consultations, surveys and the provision of data, as it is fully aware of shared responsibility in addressing global health emergencies.

The Czech Republic prides itself on an institutionalized cooperation with the WHO through the Perinatal Centre of the Institute for the Care of Mother and Child, a designated WHO Collaborating Centre. Moreover, the Head of the Perinatal Centre is a Czech representative in the Policy and Coordination Committee of HRP.

In the spirit of our membership, I would like to present my candidacy as a nominee of the Czech Republic to the Standing Committee of the Regional Committee for Europe. I believe I am a highly qualified candidate as my duties of Deputy Minister of Health range from policy and decision making in areas of primary and secondary prevention, including oncological screening, mental health reform, AMR, e-health, risk factors of NCDs, to prevention of violence and injuries as well as community-based programmes such as Health Promoting Hospitals, Health Promoting Schools and Healthy Cities.

Taking into consideration the WHO priorities as well as the health profile of the Czech Republic, reducing NCDs burden is of the utmost importance. We realize the significant role of health promotion and prevention and especially of health literacy. This is the reason why the Czech Republic contributed to the draft WHO European roadmap for implementation of health literacy initiatives through the life course during the 69th RC and why it is keen on the elaboration of an action plan on health literacy, which will be submitted to the 71st RC. In this context, I believe that my membership in the WHO Europe Health Literacy Advisory Group, which is currently under establishment, represents a strong commitment to attain this goal.

In 2018 when we commemorated the 40th anniversary of the Alma-Ata Declaration, the Czech Republic began with a reform of its primary care. As a member of the ministerial working group I could provide the European Region with our experience in system transformation and interconnection together with public health domain, which many countries in the Region could draw inspiration from and use for their own policy development.

In the context of SDGs, the Czech Republic hosted the 6th Ministerial Conference on Environment and Health in Ostrava in 2017. As a former Head of WHO Country Office, I had an honour to coordinate the preparatory and negotiating process as well as the Conference itself, during which I put emphasis on intersectoral cooperation between ministries of health and environment. The whole-of-government approach is one of the leading principles in my professional career. The Czech Republic tends to be a leader in the implementation of the "Ostrava Commitments" and actively encourages other member states to develop national portfolios.

I believe I am a suitable candidate to the Standing Committee of the Regional Committee for Europe, as I bring together the long-term experience of the WHO team member and of the

national healthcare expert being a member of the Board of the Czech Medical Association of Jan Evangelista Purkyně.

Thank you for considering my candidacy.

Yours sincerely,

Dr Alena Šteflová, Ph.D., MPH Deputy Minister of Health

Nomination for Membership of the Standing Committee of the Regional Committee for Europe of WHO

CURRICULUM VITAE

| Member State making nomination: | | KAZAKHSTAN | | | |
|--|---|--------------------|--------------------|---------------------|------------------------|
| Family name: | NURGOZHAYEV | Firs | st/Other names: | Ali | |
| Gender: | Male | Dat | e of birth: | 20 June 1986 | |
| | ties: please indicate in whi ctively (mark the relevant b | | | | nominee is able |
| | | Speak | Read | Write | |
| | English | \boxtimes | \boxtimes | \boxtimes | |
| | French | | | | |
| | German | | | | |
| | Russian | \boxtimes | \boxtimes | \boxtimes | |
| Professional ed | lucation: name the most in | nportant professio | nal degrees gained | l (up to 5), most r | ecent first Yea |
| | University, Faculty for Clathematics, Software Er | | athematics and I | nformatics, | 2009 |
| | reer: list current post first, e priority to senior position n-making level) | | | | Year (start-end |
| CEO of Med In | nvest First LLP (consultin | ng in healthcare) | | | 2017 to date |
| Advisor to Pre | sident, Eurasian Medical | Association (ph | arma and medic | al equipment) | 2017–2020 |
| | Center for Economic Re of the Ministry of Healtho | | | | 2011–2012 2014–2016 |
| | er of Medical IT Systems airs Administration of the | | | enter of | 201: |
| International e | xperience (please comple | te the following t | hree items): | | |
| | as a member of a national opranational organizations (1 | | | | Year (start-end |
| | s chairperson of a governin chronological order, most in ar or session) | | | | Year (start-end |
| | rnational organizations as a l order, most recent first (pl d of service) | | | | Year (start-end |
| | he subcontracted local colling in Kazakhs | | | | 2019 to date |

| WHO National Health Accounts Trainer | 2018 |
|--|------------------|
| Staff on loan, Organization for Economic Co-operation and Development (OECD), in the frame of the Agreement between the Government of the Republic of Kazakhstan and the OECD, Government Decree #350, April 2015. Activities: OECD Review of the National Health Accounts of the Republic of Kazakhstan, OECD Health System Review of the Republic of Kazakhstan (Agnes Couffinhal, Antonio Duran) | 2016 |
| Short-Term Consultant of the World Bank on Social Health Insurance calculations issues (Mitchell Wiener, Aparnaa Somanathan) | 2016 |
| Proven ability to coordinate, collaborate and communicate at national and international level (up to 8 examples), in chronological order, most recent first (please provide details of coordination of national or international high-level technical or political programmes and other relevant experiences) | Year (start-end) |
| Coordination of activities of the subcontracted local consultants team, World Bank "Introduction of the Social Health Insurance in Kazakhstan" contract, #SHIP-1-CS-01, executed by KPMG Kazakhstan, including communication with international experts. During the implementation of the project, the regulatory legal acts were developed for the functioning of the SHIF (in terms of actuarial calculations, planning and budgeting, procurement, tariff setting, volumes of guarantees, drug supply, technical audit of medical organizations and external assessment of the quality of medical care) | 2019 to date |
| Coordination of financial assessment and planning of infrastructure and healthcare system development long-term plan for Satpayev city (industrial monocity) in collaboration with international experts for Kazakhmys JSC (one of the largest mining companies in the RoK) | 2020 |
| Coordination of the consulting activites on the RoK's medical devices market (neurosurgery, cardiac surgery) assessment for Liva Nova LLP (global medical devices manufacturer Italy / Lebanon / UAE) | 2019 |
| Coordination of implementation of the set of consulting projects on PPP (including equipping National Scientific Oncology Center and the regions of the RoK with the Varian Linear Acceleartors and Proton Therapy System, etc.) | 2018–2019 |
| Development of documents for the city application to the European WHO Network "Healthy Cities" for Astana City Center for Healthy Lifestyle Promotion | 2018 |
| Elaboration of the Program for City Healthcare System Development for 2019-2023 for the Astana City Public Health Department | 2018 |
| Coordination of professional development training courses for medical workers of 5 regions, National-level Research Centers and the Hospital of the Medical Center of the Presidential Administration of the Republic of Kazakhstan abroad (including internships and master classes) in partnership with Israeli, German and Turkish leading clinics (Chaim Sheba Medical Center, Schneider Children's Center, Ichilov Hospital, Assuta Hospital, Schneider Cancer Center, University Hospital Munich and others) | 2017 to date |
| Development of the National Healthcare Actuarial Model in collaboration with international experts for the Oxford Policy Management Ltd. (Tata Chanturidze, Denis Garand) | 2015 |

Title, name and position of person making the nomination

Gulnara Mukhanova

Department of International cooperation and integration, Ministry of Healthcare of the Republic of Kazakhstan

Letter of intent

Letter of intention to support application for Standing committee membership

It is a great honor and privilege for me to apply for Standing Committee membership at European office for the World Health Organization based on nomination by the Acting Minister of Healthcare of the Republic of Kazakhstan, Dr. Marat Shoranov.

Public healthcare has gained new attention of top politicians and overall public globally with the current pandemic of COVID-19. The importance and deep ramifications of public health decisions to countries' economies, social and political ties, culture and virtually all sectors have been better understood by people beyond healthcare. The role of the World Health Organization as the professional UN agency that is the key source of policy decisions in healthcare for countries globally, is supported by people who work for WHO, as well as advisers and committee members who constitute its broad and complex work. So, I fully acknowledge the great responsibility I shall bear if selected to serve for the Standing committee membership.

Of course, in addition to the fight with infectious diseases, taking place right now with the pandemic, many areas of health systems and public health deserve due attention for further improvement, such as noncommunicable diseases and primary healthcare. As a representative of Kazakhstan – the country that committed to promote strengthening of PHC globally and hosted the 40th Anniversary conference of Alma Ata Declaration – I am ready to further enhance understanding that PHC is an influential and powerful component of a health system, or a cornerstone, to achieve universal health coverage in the framework of sustainable development goals. It is worth to consider that five out of ten main functions of Public Health are within the PHC sector. I also recognize the growing importance of programs for digital health development to enhance community involvement into public health activities. It is not possible to list all priority areas that WHO will work on involving all Member States, staff and its committees, so we must all give due attention to new information, to countries' needs and global as well as local trends.

I will devote my keen attention and take full responsibility for implementation of important priorities to improve cooperation with Ministries of Health of EURO-WHO region as a WHO Standing Committee member for this area. I hope for fruitful joint work ahead.

Ali Nurgozhayev

NOMINATION FOR MEMBERSHIP OF THE STANDING COMMITTEE OF THE REGIONAL COMMITTEE FOR EUROPE OF WHO

CURRICULUM VITAE

Member State making nomination: NORWAY

Family name: WROLDSEN First/Other names: Tone

Gender: Female Date of birth: 2 January 1981

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively (mark the relevant boxes below; leave other boxes blank)

| | Speak | Read | Write |
|---------|-------------|------|-------------|
| English | \boxtimes | | \boxtimes |
| French | | | \boxtimes |
| German | | | |
| Russian | | | |

| Professional education: name the most important professional degrees gained (up to 5), most r | ecent first Year |
|---|------------------|
| Master's degree in European Political and Administrative studies, College of Europe, Brugge | 2006 |
| Master Studies in Comparative Politics, University of Bergen, Norway | 2004 |
| Bachelor Studies in Comparative Politics, University of Bergen, Norway | 2003 |
| Professional career: list current post first, followed by up to 4 of the most important positions held (please give priority to senior positions in the national health administration close to the political decision-making level) | Year (start-end) |
| Deputy Director General, Section for Internation Cooperation, Ministry of Health and Care Services | 2019– |
| Senior Advisor, NATO Coordinator, Ministry of Foreign Affairs | 2015–2019 |
| Embassy Secretary, Norwegian Embassy in Hanoi | 2012–2015 |
| Senior Advisor, Ministry of Health and Care Services | 2006–2010 |
| Advisor, Ministry of Petroleum and Energy | 2006 |

International experience (please complete the following three items):

| 1) Participation as a member of a national delegation in the governing bodies of WHO or other international/supranational organizations (up to 8 examples), in chronological order, most recent first | Year (start-end) |
|---|------------------|
| Member of Norwegian delegation to the WHO Executive Board (EB146, EB143, EB128, EB126) | 2020 |
| Member of Norwegian delegation to United Nations General Assembly | Sept 2019 |
| Member of the Norwegian delegation to WHO EURO Regional Committee Meeting (RC69, RC59, RC58, RC57) | 2007–2019 |
| Member of Norwegian delegation to the World Health Assembly (WHA72, WHA62, WHA61, WHA60) | 2007–2019 |
| Norwegian CSR to the Northern Dimension Partnership in Public Health and Well-Being | 2019– |

| Member of Norwegian delegation to NATO Heads of States and Government Summit | 2018 |
|--|------------------|
| Member of Norwegian delegation to NATO Foreign Ministers Meeting | 2015–2018 |
| Member of the Norwegian delegation to the International Working Group on public health, innovation and intellectural property rights | 2008 |
| 2) Experience as chairperson of a governing body or international negotiating body (up to 8 examples), in chronological order, most recent first (please provide details of the body, meeting and year or session) | Year (start-end) |
| 3) Work in international organizations as an official or independent expert (up to 8 examples), in chronological order, most recent first (please provide details on the organization, position taken and period of service) | Year (start-end) |
| Proven ability to coordinate, collaborate and communicate at national and international level (up to 8 examples), in chronological order, most recent first (please provide details of coordination of national or international high-level technical or political programmes and other relevant experiences) | Year (start-end) |
| Head of International Section in the Ministry of Health and Care Services, responsible for coordinating the international work of the Ministry, including global health, with demonstrated ability to lead processes across several Ministries. | 2019– |
| NATO coordinator in the Ministry of Foreign Affairs, including responsibility for coordinating national policy making and collaboration with international partners, requiring skills in communcation, collaboration and leadership. | 2016–2019 |
| Responsible for coordination of the Norwegian Prime Minister's visit to Vietnam in 2015, requiring extensive skills in coordination, planning, and execution. | 2015 |
| Successfully coordinating and leading the Group of Four (G4) consisting of the Embassies from Canada, New Zealand, Norway and Switzerland, working together in Vietnam since 2001 on several issues of common interest concerning human rights, especially the rights of women, vulnerable groups, and ethnic minorities. Demonstrating abilities in communication, collaboration and coordination with partner countries. | 2013 |
| Coordinated the development of the Norwegian WHO Strategy for Norway's Executive Board Membership 2010-2013, demonstrating abilities to develop knowledge based strategies and leadership support. | 2010–2013 |

Title, name and position of person making the nomination

Mr Bent Høie Minister of Health

Letter of intent

Norway's SCRC candidacy 2020

Norway is a strong supporter of WHO as the directing and coordinating actor in international health work. Norway has a long tradition of deep involvement with WHO technically, financially as well as politically, including through work in governing bodies. This carries with it considerable institutional knowledge.

As member of the SCRC, Norway will draw on this experience to ensure that policies and decisions of the SCRC are aligned with the principle of "One WHO" and in keeping with UN reform.

Norway's global health priorities are fully aligned with WHO's 13th General Programme of Work (GPW 13) and are applicable to the work of the regional office for Europe:

- The right of all people to the highest attainable standard of health. Universal health coverage (UHC) is the best strategy for realizing this right globally. This includes having safe and affordable access to essential health services, delivered by qualified personnel. It also means ensuring that the pharmaceutical industry has sufficient incentive to innovate, while underlining that fair pricing is necessary for patient access to innovations.
- Tackling main drivers of the disease burden is necessary for realizing the right to health and reducing overall stress on health services, as well as meeting the demands of an ageing society. This requires effective policies both within the health sector as well as cross-sectorally and also collaboration across borders.
- Nowhere is the need for strong international collaboration more evident than in health security. Norway actively supports strengthening WHO's role in preparing for, and leadership in responding to, international health crises.

Norway's contribution to WHO is diverse and includes:

- Seven active WHO collaborating centres.
- Hosting of meetings: the 2009 meeting *Health in times of global economic crisis, implications for the WHO European Region* and the follow-up meeting in 2013.
 In 2020 Norway will host a WHO EURO meeting on sub-regional collaboration for increased transparency in the market for medicines.
- Norway is a major financial contributor, including flexible funding which allows for improved alignment between priorities in GPW 13 and programmatic work carried out across the organization, including in the European region.
- Consistent political support: Norway consistently supports WHO's unique role in global health.

Norway's focus as member of the SCRC will be to support and promote UHC, primary health care including public health, and health security, and to sustain WHO's ability to fulfil its global health mandate. Special attention will be given to the following priorities in the three years to come:

- Promoting fair pricing and access to medicines through i.a. increased transparency in the medicines market, following up on resolution WHA72.8 at regional as well as global level.
- Promoting cross-sectoral action at country level to reach sustainable development goal 3.4 on reducing premature mortality from NCDs, as well as promoting mental health and well-being.
- Continue to support implementation of core capacities of the International Health Regulations (2005) and supporting WHO's leadership in health crises.
- Strengthen WHO's governance, including its ability to engage relevant external partners in efforts to improve health in line with the Framework of Engagement with Non-State Actors.

Nomination for Membership of the Standing Committee of the Regional Committee for Europe of WHO

CURRICULUM VITAE

| Member State | e making nomination: | | ITED KINGDO D NORTHERN | | BRITAIN |
|--------------------------------|--|----------------------------------|---------------------------|----------------------|-------------------------|
| Family name: | SWINSON | Firs | st/Other names: | Clara | |
| Gender: | Female | Dat | e of birth: | 19 April 1975 | |
| | ties: please indicate in whi ctively (mark the relevant b | | | | nominee is able |
| | | Speak | Read | Write | |
| | English | \boxtimes | \boxtimes | \boxtimes | |
| | French | | | | |
| | German | | | | |
| | Russian | | | | |
| Professional ed | ucation: name the most in | nportant profession | nal degrees gained | l (up to 5), most re | ecent first Year |
| | y BA, Balliol College, Ox | | | | 1996 |
| | reer: list current post first, e priority to senior position n-making level) | | | | Year (start-end) |
| department's p programmes b | ral for Global and Public public health teams cove oth bilateral and multilat uding Covid-19 response | ring; population eral, emergency | health, internation | onal | 2016-present |
| • | ılt Social Care Policy | | | | 2014–2016 |
| Director of Hea | alth Protection | | | | 2010–2013 |
| Deputy Directo | or, Cross Government, C | besity Team | | | 2008–2010 |
| Principal Priva | te Secretary to the Secre | etary of State for | · Health | | 2005–2007 |
| International e | xperience (please comple | te the following t | hree items): | | |
| | as a member of a national | | | | |
| international/suprecent first | oranational organizations (| up to 8 examples), | , in chronological | order, most | Year (start-end) |
| Head UK Dele | gation WHO Europe Reg | gional Committe | е | | 2018-present |
| Deputy Head l | JK Delegation to WHO E | xecutive Board | and WHA | | 2016-present |
| Senior respons | sible officer for UK input | into G7 and G20 |) health tracks | | 2016-present |
| | s chairperson of a governing chronological order, most a ar or session) | | | | Year (start-end) |
| | I Health Security Initiativ | | | | 2019 |

terrorism threats.

| 3) Work in international organizations as an official or independent expert (up to 8 examples), in chronological order, most recent first (please provide details on the organization, position taken and period of service) | Year (start-end) |
|---|------------------|
| Proven ability to coordinate, collaborate and communicate at national and international level (up to 8 examples), in chronological order, most recent first (please provide details of coordination of national or international high-level technical or political programmes and other relevant experiences) | Year (start-end) |
| Demonstrable successful coordination and collaboration across UK government departments, UK devolved administrations and other countries in the delivery of a wide health policy portfolio including most recently the ongoing UK COVID-19 response. | 2016–present |
| Global Health Oversight Group Chair – providing senior oversight and coordination of the cross-government global health objectives, encouraging a one health approach and alignment of global health programmes across Government. | 2019-present |
| Senior member of both Department of Health & Social Care Executive Committee and Departmental Board, the decision making bodies of the Health Department, which oversee strategy, finance, performance and core departmental business. | 2016-present |
| Head of Policy Profession - driving improvements in policy design and delivery through the setting and communicating of professional expectations and standards including encouraging the sharing of best practice and improved use of evidence. | 2016-present |

Title, name and position of person making the nomination

Mrs Catherine Houlsby Head of International, Department of Health and Social Care

Letter of intent

United Kingdom of Great Britain and Northern Ireland - nomination to the Standing Committee of the Regional Committee in 2020

Dear Regional Director,

I am pleased to present the United Kingdom nomination to membership of the Standing Committee of the Regional Committee from 2020 to 2023.

The UK would like to reaffirm its continuing commitment to the WHO in fulfilling its global health leadership role. UK support to WHO goes beyond our significant financial commitment, to a broader partnership of expertise and exchange, which includes a large number of collaborating centres, secondment of experts, and technical provision, not least through the emergency response teams.

The UK recognises the importance of the WHO European region, as part of this one WHO approach. A strong regional office provides tailored support to governments in the region to enable them to deliver health systems that meet the diverse needs of their populations. To support this the regional office encourages the sharing of experience, expertise and best practice, and developing relevant and impact focused relationships with countries. We therefore welcome the new European regional plan which shares this vision and the ambition for an agile and responsive regional office which is needed to fulfil this important role. The UK believes the SCRC is a significant facilitator in this role and we stand ready to support the Regional Director and his leadership team in its realisation.

Our priorities are aligned with the work of the region and we recognise the need to work together to tackle our shared issues and challenges. The UK is a strong defender of the WHO governance and has a track record of being proactive in this area both at the global and regional level. We would be an active member of the SCRC as we were when we were previously on the Committee. WHO reform, and the region's leadership in this area, remains a UK priority. When previously on the SCRC we were founding members of the governance reform sub-group and would look to continue to drive this forward. As a member state led organization, we value and support the primacy of WHO's governing body functions and would work hard on the SCRC to support the effective and fruitful Regional Committee meetings.

Global health security, including AMR, is an ongoing priority for the UK. We firmly believe that public health threats can only be effectively identified, addressed and responded to through close collaboration with international partners and organisations at regional as well as global levels. The current outbreak of Covid-19 demonstrates the impact of such cross-border threats, particularly pertinent at a European level due to our interconnected systems. We therefore value the crucial role of the regional office in health security.

Inequalities is another regional challenge and we welcome its inclusion in the new regional vision, including the recognition of the need to ensure that digital and technical developments decrease rather than increase inequality. We also share the view that we need to adapt to the changing demographic landscape as issues such as supporting ageing populations, the growing non-communicable disease burden and vaccine complacency force us to reconsider

how we deliver health services and information. The UK would like to work together with our regional office and fellow member states to find ways to tackle these shared challenges.

I therefore have the honour to propose Clara Swinson, Director General for Global and Public Health, for membership of the SCRC for the period 2020-2023. Clara has demonstrated significant international and domestic policy leadership, expertise and commitment during her 15 years working in health. She has extensive experience of domestic policy development and implementation in a range of areas including public health. Clara also oversees the Department of Health and Social Care's international relations portfolio including; WHO HQ, WHO Europe, PAHO, G7, G20, Commonwealth and bilateral relationships. I believe Clara will bring this highly relevant and valuable leadership experience to the Standing Committee of the Regional Committee.

Yours sincerely,

Catherine Houlsby Head of International, Department of Health and Social Care

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