

## REPORT ON STRATEGIC ISSUES BETWEEN PAHO AND WHO

### Introduction

1. This report has been presented to the Governing Bodies of the Pan American Health Organization (PAHO) since 2018 (Document CD56/INF/3) (1) in response to a request from Member States to review key strategic issues in the relationship between PAHO and the World Health Organization (WHO). The present report provides an update on strategic issues between PAHO and WHO from September 2023 through July 2024. It maintains the focus on high-level strategic issues and opportunities of importance to Member States in the Region of the Americas that are related to leadership and governance as well as to accountability and transparency.
2. In this report reference is made, as applicable, to other documents of the Pan American Sanitary Bureau (PASB) containing additional details, with regard to the implications for Member States of global policy developments. It also highlights results of collaboration between PAHO and WHO with a view to fostering the proactive engagement of Member States from the Region in global forums.

### Leadership and Governance

3. This section provides strategic insight from ongoing deliberations and decisions of the WHO Governing Bodies, along with their implications for the Region and PAHO. It includes matters reviewed by the 77th World Health Assembly, held from 27 May to 1 June 2024, and the 155th session of the Executive Board held from 3–4 June 2024. It also provides updates on the consultations with Member States concerning key global issues related to health emergencies, the evaluation of the 13th General Programme of Work (GPW 13) for the period 2019–2025, the development of WHO's 14th General Programme of Work (GPW 14) for the period 2025–2028 and the WHO Programme budget 2026–2027 (WHO PB26–27), and the WHO investment round. It also contains information on progress with regard to the WHO Secretariat implementation plan on reform, country presence, and efforts to improve engagement and collaboration at all levels.

### ***Strengthening WHO Preparedness and Response to Health Emergencies***

4. The results of the three ongoing Member State-led workstreams have implications for PAHO's technical cooperation with Member States. These three workstreams are *a)* the Standing Committee on Health Emergency Prevention, Preparedness and Response (SCHEPPR) of the Executive Board; *b)* the Intergovernmental Negotiating Body (INB) to draft and negotiate a WHO convention, agreement or other international instrument on pandemic prevention, preparedness and response; and *c)* the Working Group on Amendments to the International Health Regulations (2005) (WGIHR).

5. The INB was established by the Second Special Session of the World Health Assembly through Decision SSA2(5) (2), with a mandate to draft and negotiate a WHO convention, agreement, or other international instrument on pandemic prevention, preparedness, and response (also known as the “WHO CA+”). Much of the work of the INB progressed in its subgroups, which have served as a space for informal dialogue with Member States on clusters of articles, led by the INB Bureau Vice-Chairs and the co-facilitators of the subgroups. The resumed 9th INB meeting was held in hybrid format from 29 April to 10 May and from 20 to 24 May 2024 to enable Member States to discuss the latest iteration of the instrument, the draft WHO Pandemic Agreement (3). In the run up to the 77th World Health Assembly, Member States continued to work towards reaching consensus on critical topics such as: *a*) public health surveillance; *b*) One Health; *c*) preparedness, readiness, and resilience; *d*) sustainable production; *e*) transfer of technology and know-how; *f*) global supply chain and logistics; *g*) access and benefit-sharing; *h*) implementation capacity; and *i*) support and finance.

6. While consensus was not achieved on all topics, the 77th World Health Assembly decided—through Decision WHA77(20) (4)—to extend the mandate of the INB. The outcome of these deliberations is to be submitted for consideration by the 78th World Health Assembly in May 2025, or earlier by a special session of the World Health Assembly in 2024, if possible. The 10th INB meeting was held in hybrid format on 16 and 17 July 2024, and the 11th INB meeting will take place from 9–20 September 2024. Four interactive dialogues will be held in hybrid format the week prior to the 11th INB meeting, regarding issues that are central to the global health architecture. The continued active participation of Member States from the Americas in the ongoing negotiations will be critical to achieve consensus.

7. The bureaus of the INB and the WGIHR held joint meetings to define the content of relevant articles of their respective negotiated instruments to avoid duplication and ensure complementarity. Up to April 2024, the WGIHR had convened a total of eight meetings (6 in 2023 and 2 in 2024). A report thereon was presented to the 77th World Health Assembly, where Member States adopted a strong package of amendments to the International Health Regulations (2005), based on the lessons learned from the COVID-19 pandemic. These amendments to the IHR (2005), adopted through Resolution WHA77.17 (5), aim to strengthen global preparedness, surveillance and response to public health emergencies, including pandemics. Additional information is presented in Document CD61/INF/4, Implementation of the International Health Regulations (6).

8. In close coordination with the Group of the Americas at WHO, PASB convened three regional meetings in Washington, D.C., in 2023, and one meeting in Geneva, on 15 and 16 February 2024. In addition, three information sessions were held virtually on 18 March, 16 April, and 11 July 2024. These meetings and information sessions were aimed at ensuring that the relevant national authorities in the Region were informed of the key components, documents, deliberations, and expected results of the INB and the WGIHR, and at offering background material to Member States to enable meaningful participation, while also working towards regional consensus, where feasible, on these global negotiations. PASB has provided ongoing technical analysis and input for PAHO Member States’ consideration as they participate in these global forums. In view of the mandate of the INB to continue its deliberations, PASB remains committed to providing continued support to Member States throughout the duration of this process.

9. The SCHEPPR presented the report of its fourth meeting held in Geneva on 17–18 April 2024 to the 155th session of the Executive Board (7). The SCHEPPR recognized the importance of WHO's coordination and international cooperation role in supporting countries to respond to health emergencies, such as cholera and dengue outbreaks. It recommended having a better definition of the objectives and revision of the timeframe for conducting extraordinary meetings following the determination of a public health emergency of international concern, providing information on how the WHO Secretariat plans to respond as well as to gain a common understanding on public health emergency of international concern declarations and details concerning temporary recommendations. Finally, the SCHEPPR stressed the need for sustainable funding to implement preparedness, resilience, and response activities. The fifth meeting of the SCHEPPR will be held on 3 and 4 September 2024 (8).

10. In 2023, the Pandemic Fund,<sup>1</sup> one source of funding for pandemic prevention, preparedness, and response, allocated its first round of grants after receiving 179 applications from 133 countries. Across the six WHO regions, grants were awarded for 19 projects covering 37 countries. For the Americas, two single-country projects were approved (Paraguay and Suriname), as well as two multi-country projects covering 19 countries (7 in South America and 12 in the Caribbean). PAHO/WHO is an implementing entity for three of these four approved projects in the Region. In 2024, the Pandemic Fund launched a second call for proposals, with a US\$ 500 million<sup>2</sup> funding envelope, to help eligible Member States to scale up their pandemic preparedness capacities. Priority is once again being given to investments in early warning and disease surveillance systems, laboratory systems, and human resources and public health and community workforce capacity. PASB provided strategic and technical guidance to PAHO Member States for the preparation of proposals, as necessary.

### ***Strategic Planning and Sustainable Financing***

11. During the period covered by this report, the GPW 14 was finalized and approved (9). To operationalize the first WHO investment round, the Director-General was requested by the 76th World Health Assembly, in May 2023, to initiate consultations with Member States on GPW 14 (10). Seven global sessions were held, as well as consultations during the regional committees of WHO (11) and the 154th session of the Executive Board, and four consultation documents were shared with Member States for their input. On 5 April 2024, PASB coordinated with WHO to facilitate a session with Member States in the Caribbean to ensure that the GPW 14 reflected the vision of all Member States, including the special circumstances and health priorities of small island developing States, such as the countries and territories in the Caribbean, many of which do not have missions in Geneva. In addition, PASB staff formed part of the WHO Secretariat 3-level working group to develop the GPW 14, which has thus provided additional opportunities to contribute regional and country experiences from the Americas.

12. The GPW 14 was enriched by an unprecedented level of participation from Member States, partners, stakeholders, and all levels of WHO. These efforts were instrumental in the approval of the document by the 77th World Health Assembly.

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<sup>1</sup> More information is available at: <https://www.thepandemicfund.org/>.

<sup>2</sup> Unless otherwise indicated, all monetary figures are expressed in United States dollars.

13. The GPW 14 sets the way forward for the WHO PB26–27, for which a consultation document is being presented in all regional committees to give Member States the opportunity to provide input ahead of the presentation of the full WHO PB26–27 at the 156th session of the Executive Board in February 2025 (12). The global prioritization process implemented by WHO has been influenced by advocacy on the part of PAHO Member States and the experience of the Region. Throughout the WHO PB26–27 development process, Member States will have the opportunity to provide input as WHO finalizes the GPW 14 outcome indicators and the WHO PB26–27 outputs. Member States are encouraged to continue participating in this process and to exercise their voice early and consistently, advocating for the Region’s fair share of resources, as WHO establishes the budget and priorities for action in the 2026–2027 biennium.

14. The GPW 14 also constitutes an important input into the next PAHO Strategic Plan for the period 2026–2031, as noted in Document CD61/INF/1, Roadmap for Developing the Strategic Plan of the Pan American Health Organization 2026–2031 (13). This is true in terms of not only how the regional response to the global commitments in the GPW 14 is reflected, but also what PAHO can learn from WHO’s experience in preparing the GPW 14 in a way that engages the Organization’s main stakeholders. The experience gained from the implementation of GPW 13 during 2019–2023 and the PAHO Strategic Plan 2020–2025 has shown the importance of having clear alignment between the results frameworks of PAHO and WHO to facilitate planning, implementation, monitoring, and reporting. Joint advocacy by PASB and PAHO Member States focused on creating opportunities to improve such alignment has been consistent, even if full alignment may ultimately not be possible. Consultations on the new PAHO Strategic Plan 2026–2031 began in the second half of 2024 and will also serve to shape the priorities of the WHO PB26–27.

15. The development of the GPW 14 was directly informed by the GPW 13 external evaluation, which took place simultaneously, the findings of which were presented at the 154th session of the Executive Board (14). PASB was represented in the external evaluation reference group and, in addition to the consultations held during the reporting period of this document, Member States had the opportunity to contribute, including through two information sessions as well as interviews, focus groups, and questionnaires.

16. Regarding the WHO investment round, additional consultations were held with Member States, who highlighted the importance of incorporating equity as one of the guiding principles. It was noted that the Region faced considerable health challenges, which should not be overlooked. Member States also inquired about how resources would be allocated from the resulting contributions to the investment rounds and requested that equitable distribution of resources among regions be considered. It was stated that the contributions to the investment rounds should be flexible in terms of their use and allocation in order to be able to respond to the changing environment and emerging challenges. Concerns were raised regarding the short timeline for the investment round and whether this might hinder a successful outcome. It was suggested that focus should be maintained on increasing the efficiency, transparency, and accountability of WHO that Member States have requested.

17. WHO presented its third investment case during the 77th World Health Assembly at a strategic roundtable event held on 28 May 2024 (15) and launched the investment round earlier on the eve of the 77th World Health Assembly at a celebratory event on 26 May 2024, hosted by Germany. During the second half of 2024 WHO, together with the co-hosts of the Investment Round,

will organize events and side discussions at the margins of the WHO regional committee meetings (15). Additionally, the Government of Brazil will host a WHO investment round event during the last quarter of 2024 in the context of the G20. The progress of these discussions was made possible thanks to extensive preparations by WHO, including the hosting, co-hosting, and organization of regional events, with ongoing support from PAHO. Likewise, WHO has been engaging with Member States to further detail the efficiencies expected from the implementation of the investment round, as well as the reporting aspects. These efforts will also help to inform the development of PAHO's own investment case, in alignment with the new PAHO Strategic Plan 2026–2031.

18. Another key aspect of work under the leadership and governance of WHO is the work on the Secretariat implementation plan on reform (16). This plan was endorsed by the 76th World Health Assembly, in May 2023, following the work of the Agile Member States Task Group on Strengthening WHO's Budgetary, Programmatic and Financing Governance. The plan includes actions related to: a) the programme budget; b) transparency; c) prevention of sexual exploitation, abuse, and harassment; d) financing; e) accountability; f) resource mobilization; g) country-level impact; and h) governance. PASB contributed to the consultations and provided input on various components of the plan.

19. An update on actions taken to implement the plan was presented to the 77th World Health Assembly (17). The actions implemented are essential for the continued strengthening of WHO's efficiency, transparency, and accountability, and some of them have been integrated into the GPW 14 document development process, the investment round, country presence, and other connected efforts.

### ***Strengthening the Presence of WHO at Country Level***

20. Country presence continues to be a matter of priority for Member States, WHO, and PASB. In that regard, PASB continued to collaborate closely with WHO to implement the action plan of the Action for Results Group aimed at improving impact at the country level, with active participation from each WHO regional office, including the Regional Office for the Americas (AMRO). As part of this initiative, considerable attention was given to reviewing staffing needs in country offices, in accordance with the WHO typology of countries, while ensuring that key countries in the Region of the Americas were included, in order to guarantee a core predictable country presence. Consequently, a total of \$20 million was approved by WHO to strengthen country offices in the Americas in 2024–2025. With these resources, PASB will be able to fund a total of 41 country positions, of which 39 are new. These additional positions will strengthen technical capacity at the country level.

21. Related to these efforts at the global level, PASB combined internal initiatives with the Action for Results Group recommendations on strengthening country presence as an ongoing effort to ensure that country offices have sufficient capacities to provide technical cooperation. A country presence working group was established by the Director of PASB to prepare a proposal on improving the country presence in key countries, as a first phase, and the rest of the country offices as a second phase. PAHO/WHO country cooperation strategies are a key tool for defining the country presence required to respond to country priorities. Implementation plans were incorporated into the 2024–2025 biennium operational plans, with a gradual approach being taken to cover gaps identified as additional financial resources become available.

22. This joint initiative between WHO and PAHO will serve to significantly improve staffing at the country level and advance the goal of improving country presence. These efforts will ensure that WHO, including AMRO, is strategically and technically positioned to respond to the needs and priorities of Member States.

### ***Regional Consultation on the Nomination and Appointment of Regional Directors***

23. At its 154th session, the WHO Executive Board requested the WHO Director-General to hold informal consultations with Member States on measures to enhance transparency, accountability, and integrity in the nomination and appointment processes for WHO Regional Directors (18). The consultation document presented in the Annex to this document was prepared by WHO for consideration by the regional committees. The document outlines potential measures including establishing specific criteria for candidates, broadcasting interviews, amending codes of conduct, and establishing evaluation groups to assess candidates.

24. The 61st Directing Council is invited to share its comments on these potential measures. Following the consultations in each region, a summary document will be submitted to the WHO Executive Board at its 157th session in 2025. These consultations will inform future WHO Executive Board sessions and shape potential recommendations for the consideration and decision of each region.

### ***Strategic Collaboration and Engagement of PAHO Member States with WHO***

25. Timely and close collaboration and consultations between PASB and Member States provide a foundation for effectively promoting the Region's active participation in and contribution to WHO's governance and its strategic, programmatic, budgeting, and financing activities. PASB will continue exploring avenues for further information-sharing to ensure that WHO global strategic and statutory documents adequately reflect both the situation in and the contributions of the Region and its countries, including with regard to human resources. PASB will continue to facilitate the provision of the necessary information, briefings, and regional consultations, as necessary or as requested by Member States, to ensure that contributions from the Americas at regional and country levels continue to shape and advance the global health agenda. In the spirit of contributing to and influencing the global health agenda, it is also important to continue to foster collaboration among PAHO Member States in order to develop multi-country and regional statements on matters of priority importance to the Region, whenever possible.

### **Accountability and Transparency**

26. In this section, updates are provided on the status of the WHO Programme budget 2022–2023 (WHO PB22–23) and the WHO Programme budget 2024–2025 (WHO PB24–25), including programmatic and financial monitoring and reporting. As of 31 December 2023, the overall funding of the WHO PB22–23 was \$8.4 billion (125% of the overall approved budget), with base programs financed in the amount of \$4.37 billion<sup>3</sup> (88% of the approved budget for base programs). The WHO PB22–23 included a \$292.1 million approved budget for the AMRO base programs, which, as of 31 December

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<sup>3</sup> See WHO Budget Portal, available at: <http://open.who.int/2022-23/budget-and-financing/gpw-overview>.

2023, was financed in the amount of \$182.4 million<sup>4</sup> (62% of the approved budget). Of this amount, \$123.3 million was WHO flexible funds and \$59.1 million was voluntary contributions. Of the share of voluntary contributions, as of 31 December 2023, the Region received \$9.4 million in thematic funding, through the WHO Resource Allocation Committee mechanism, which is more flexible in nature than other voluntary contributions.

27. The WHO PB24–25 (19) included a \$295.6 million approved base budget for AMRO, a 1.2% increase in comparison with the approved WHO PB22–23 (\$292.1 million). While the WHO budget for the Americas is still the least funded when compared with other regions, it is expected that the amount of funding will increase over previous budget cycles. In December 2023, WHO committed to provide \$149.2 million in flexible funds for AMRO in 2024–2025. This amount is \$29 million more than the initial allocation for 2022–2023 and includes \$20 million allocated in the context of the above-mentioned core predictable country presence initiative.

28. As of 31 July 2024, PAHO had received 60% of the total commitment of flexible funds, bringing the total funding for AMRO's base programs to \$143.2 million, or 48% of the approved WHO PB24–25 for the Region. In absolute terms, this represents \$55.1 million more than at the same time in the 2022–2023 biennium.

29. Member States' calls for more equitable funding for the Region are bearing fruit. PASB will continue to monitor and collaborate with WHO to ensure the timely and quality implementation of funds. Ongoing efforts by WHO to mobilize more flexible funds and strengthen internal coordination mechanisms (engaging the regions) are key to improving the financing of the approved WHO PB24–25.

30. An important aspect of WHO's accountability under the Programme budget is its monitoring and assessment through the presentation of annual results reports to the World Health Assembly. Results from the Region, including country success stories, were incorporated in the WHO results report submitted to the 77th World Health Assembly (20). In addition, both Member States and PASB have long advocated for WHO to adopt the joint assessment methodology that has been in use in the Americas since 2014. As recommended in the Secretariat implementation plan on reform (16), WHO piloted a joint assessment with selected countries for the 2022–2023 assessment. Collaboration with PASB based on its own experience has directly contributed to the conceptualization of this process.

### **Action by the Directing Council**

31. The Directing Council is invited to take note of this report and provide any comments it deems pertinent.

### **Annex**

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<sup>4</sup> The Regional Office for the Americas considers Pandemic Influenza Preparedness Framework and Special Programme for Research and Training in Tropical Diseases funds in base programs and not special programs as WHO, which explains the difference reported in financing of base programs between AMRO (\$182.4 million) and WHO (\$173.6 million).

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# **Nomination and appointment of Regional Directors**

## **Review of the process for the election of Regional Directors**

### **Consultation document**

#### **BACKGROUND**

1. At its 154th session in January 2024, the Executive Board discussed document EB154/38, which provided an overview of the existing framework related to the election of Regional Directors, and presented options for possible measures to enhance transparency, accountability and integrity in the nomination process.
2. In decision EB154(14), the Board requested the Director-General to hold informal consultations with Member States, with a view to preparing a consultation document on such measures, for the consideration of the regional committees in 2024. Following consideration by the regional committees, and as requested by the Board, the Director-General will submit a document summarizing the outcome of those consultations, including options for consideration, as appropriate, to the Executive Board at its 157th session in May/June 2025.
3. The Secretariat held an informal consultation with Member States on 19 April 2024, to gather additional Member State guidance on the measures promoting transparency, accountability and integrity on which the consultation document should focus. This document reviews the measures on which Member States expressed openness to further consideration at the regional committees. The outcomes of the regional committee discussions will be the basis for a document to be prepared by the Secretariat for consideration by the Board in May/June 2025.
4. As the regional committees consider the options herein, it is important to underscore that the regions retain autonomy over how they chose to select their nominee for the position of Regional Director. The role of the Executive Board derives from the Constitution of the World Health Organization and involves a degree of procedural oversight. On this basis, it may propose measures to ensure minimum standards and to enhance transparency, accountability and integrity in the nomination process. However, it will be for the regions themselves to decide whether to adopt such measures in the light of their own distinct situation and context. Indeed, in order to take effect any recommendations would need to be adopted by the regional committee and implemented through changes in its rules of procedure or other governance documents.
5. It is also important to note that nothing discussed herein will affect the processes currently under way with respect to nominations for the Regional Director post in the African and European regions.

## **POSSIBLE MEASURES TO ENHANCE THE TRANSPARENCY, ACCOUNTABILITY AND INTEGRITY OF THE NOMINATION PROCESS**

6. Based on the discussion at the 154th session of the Board and the subsequent informal consultation with Member States, regional committees are invited to provide guidance on the measures below to enhance transparency, accountability and integrity in the Regional Director election process.<sup>1</sup> See also the table annexed to this document containing a summary of possible measures and impact.

### **A. Elaboration of more specific standard minimum criteria for the post of Regional Director**

7. All six regional committees have adopted criteria for the assessment of candidates for nomination for Regional Director.<sup>2</sup> These criteria focus mainly on management, leadership experience, sensitivity to cultural, social and political differences, commitment to WHO and physical condition. Consideration could be given to elaboration of the criteria to set minimum requirements in these areas and/or educational qualifications.<sup>3</sup> For example, to be considered for appointment by WHO to a staff position at director level and above (D1/D2), an applicant must have:

- (i) 15 years of relevant work experience and includes experience at the international level – international experience is mandatory and means relevant experience gained outside the applicant’s home country; and
- (ii) an advanced (Master’s) level university degree that must be relevant to the position in question. Only degrees from accredited institutions in the World Higher Education Database (WHED) will be considered.

8. As the successful Regional Director candidate ultimately encumbers a senior WHO staff position, inclusion of such criteria would provide some consistency across the Organization. If Member States wished, this could also become part of the establishment of post descriptions for the position of Regional Director. Moreover, the existing criteria could be subject to additional elaboration, providing further

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<sup>1</sup> Based on the feedback at the 154th session of the Board and the informal consultation with Member States on 19 April 2024, the following possible measures were not included in this document: (1) proposals to broaden the range of actors who may propose candidatures for Regional Director or direct application by individuals; (2) the engagement of a professional recruitment firm; (3) lifting of geographical limitations with respect to candidates; (4) changes to the term of office (extension to seven years with no possibility of renewal); and (5) additional guidance on campaign travel.

<sup>2</sup> The criteria for assessing candidates were adopted through the following resolutions: (1) Regional Committee for Africa resolution AFR/RC48/R7 (1998) ([https://apps.who.int/gb/gr/pdf\\_files/mscp/AFR\\_RC48-R7.pdf](https://apps.who.int/gb/gr/pdf_files/mscp/AFR_RC48-R7.pdf)); (2) Regional Committee for the Americas resolution CD47.R4 (2006) (<https://iris.paho.org/bitstream/handle/10665.2/361/CD47.r4-e.pdf?sequence=1&isAllowed=y>); (3) Regional Committee for South-East Asia resolution SEA/RC65/R1 (Annex C) ([https://apps.who.int/gb/gr/pdf\\_files/mscp/SEA-RC65-R1.pdf](https://apps.who.int/gb/gr/pdf_files/mscp/SEA-RC65-R1.pdf)); (4) Regional Committee for Europe resolution EUR/RC40/R3 (1990) (and subsequently affirmed through resolution EUR/RC47/R5 (1997)) (<https://who-sandbox.squiz.cloud/en/about-us/regional-director/election-process/election-of-regional-director-2014/nomination-process-for-who-regional-director-for-europe/resolution-eurrc40r3> and [https://who-sandbox.squiz.cloud/\\_data/assets/pdf\\_file/0016/245032/EUR-RC47-R5-Eng.pdf](https://who-sandbox.squiz.cloud/_data/assets/pdf_file/0016/245032/EUR-RC47-R5-Eng.pdf)); (5) Regional Committee for the Eastern Mediterranean decision no. 3, document EM/RC59/13 (2012) ([https://applications.emro.who.int/docs/RC\\_Decisions\\_2012\\_14696\\_EN.pdf?ua=1](https://applications.emro.who.int/docs/RC_Decisions_2012_14696_EN.pdf?ua=1)); and (6) Regional Committee for the Western Pacific resolution WPR/RC50.R8 (1999) ([https://iris.who.int/bitstream/handle/10665/359398/WPR\\_RC050\\_Res08\\_1999\\_en.pdf](https://iris.who.int/bitstream/handle/10665/359398/WPR_RC050_Res08_1999_en.pdf)).

<sup>3</sup> Only the Rules of Procedure of the Regional Committee for Africa address educational qualifications; Rule 52(2) requires that proposed candidates possess a “medical background.”

guidance for assessing candidates. In addition, reference could be made to the WHO values charter, reflecting the values to which the WHO workforce is committed.

9. Establishing a more specific set of minimum criteria would support the transparency, accountability and integrity of the election process by seeking to ensure that candidates met an agreed threshold to carry out the functions of Regional Director.

## **B. Formalization of live candidates' forums**

10. At the time the regional committees discuss this consultation document, all regional committees will have had experience of a live candidates' forum. While only the rules of the European Region and the Region of the Americas provide for such forums, in 2023 the Eastern Mediterranean, South-East Asia and Western Pacific regions held ad hoc live candidates' forums prior to the nominations of Regional Directors at the regional committees. In anticipation of the nomination of a new Regional Director at the 74th session of the Regional Committee for Africa, the African region will hold an ad hoc live candidates' forum in July.

11. Consideration may be given to formalizing the holding of live candidates' forums prior to the regional committee nomination of the Regional Director, provided there is more than one candidate.<sup>1</sup> To date, the live forums have consisted of time-limited oral presentations by candidates, followed by a question-and-answer period of a set length at a meeting prior to the regional committee session at which the nomination takes place. Each region has decided whether the candidates should participate virtually or be physically present at the regional office for the forum. As a minimum, the forums are attended and/or broadcast on the website of the regional office concerned, but in most cases have been live-streamed to the public.

12. To establish such forums as a regular part of the nomination process, regional committees – other than those for Europe and the Americas – would need to amend their rules of procedure, as well as adopt modalities for the forums. The modalities could be modelled on the current ones. Alternatively, such forums could follow a different format, for example, a panel discussion whereby all candidates would address the same questions. The latter would provide for a degree of differentiation with the interview of candidates that takes place at a meeting of either an evaluation group or the regional committee.

13. Should regional committees adopt the practice of holding live candidates' forums, consideration could be given to these forums replacing the password-protected web forums foreseen in most of the codes of conduct. Recent experience shows relatively low levels of activity by the Member States and candidates in the web forums,<sup>2</sup> while the human resource and technology costs of implementing and supporting them are relatively high.

14. The establishment of live candidates' forums which are broadcast to the public would support the transparency, accountability and integrity of the election process by providing an opportunity for not only Member States, but also the public and other interested parties to hear directly from candidates on the views and goals that each candidate would bring to the position of Regional Director.

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<sup>1</sup> In the case of the European Region, a live forum is held even where there is only one candidate (Rule 47.8 of the Rules of Procedure of the Regional Committee for Europe). In accordance with Rule 62 of the Rules of Procedure of the Executive Board, candidates' forums for the election of the Director-General only take place if there is more than one candidate. Member States may wish to consider this latter precedent.

<sup>2</sup> For example, during the web forums held for the 2023 Regional Director elections, there were 58 posts for the Eastern-Mediterranean Region, 53 posts for the South-East Asia Region and 20 posts for the Western Pacific Region.

### C. Broadcasting interviews at regional committees

15. Under their respective rules of procedure, most regional committees provide for an interview of Regional Director candidates to take place in a private meeting of the regional committee immediately before the secret ballot for nomination.<sup>1</sup> In the interest of transparency and accountability, where interviews of candidates are held at the regional committee meeting, consideration could be given to amending the rules of procedure to permit the broadcasting of those interviews through a live-stream on the regional office website.

### D. Code of conduct amendments

16. Five of the six regional committees have adopted codes of conduct for the nomination of Regional Directors.<sup>2</sup> Most of the regional committees have called upon Member States to implement the code of conduct, to make it widely known and easily accessible and to bring it to the attention of candidates, and have requested the Regional Director to support implementation and impress upon the Secretariat the importance of complying with the obligations laid out in the Staff Regulations and Rules with regard to the conduct to be observed during the nomination process.

17. Nonetheless, regional committees could consider revisions to their codes of conduct to advance transparency, accountability and integrity in the nomination process. For example:

- *Expanded coverage*: Introduction of provisions on sexual misconduct and other abusive conduct and a disclosure of interests by candidates, including with respect to tobacco and tobacco products and arms.
- *Due diligence*: Provision for reference checks, including ClearCheck and criminal records checks, and due diligence review of qualifications and employment history.
- *Strengthened disclosure of campaign activities*: Requesting nominating Member States to disclose grants or aid funding for candidates during the prior two years and calling on non-nominating Member States to disclose such funding. The Secretariat could provide a template disclosure form to Member States, as it currently provides to candidates.
- *Increased formality*: Requesting undertakings from candidates and nominating Member States regarding strict compliance with the relevant code of conduct.

18. Consideration could also be given to establishing an oversight mechanism to which allegations of breaches of the code of conduct could be reported. Oversight could, for example, be undertaken by an evaluation group (see below) that would receive allegations regarding any breaches of the code of conduct for evaluation and make recommendations on the appropriate steps to be taken, if any, such as bringing a verified breach to the attention of the regional committee or officers thereof. Such a mechanism would, however, likely carry a financial cost, and require the provision of investigative

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<sup>1</sup> The European Region and the Region of the Americas provide for candidates to be interviewed in advance of the regional committee meeting, by the Regional Evaluation Group and at a meeting of the Regional Committee for the Americas held in the margins of the Executive Committee, respectively.

<sup>2</sup> The Directing Council of the Pan American Health Organization/Regional Office for the Americas has not expressly adopted a code of conduct for the nomination of the Director/Regional Director. The nomination guidelines state, however, that candidates should have “sensitivity to and respect for the cultural, social, political, and economic diversity within and among the countries in the Region” (see PAHO/WHO Regional Office for the Americas, Nominating Guidelines, Article I).

services; there could also be difficulties in resolving any allegations within the time frame of the election process. In any event, a mechanism will be needed to address any conflicts of interest or in respect of any candidates who do not pass due diligence checks successfully: this could take the form of reference to the regional committee for decision before drawing up a short list; or it could be considered for delegation to an evaluation group or oversight mechanism.

## E. Evaluation group

19. In the interest of facilitating robust assessment of candidates' suitability and qualifications and in line with decision WHA65(9) (2012) urging a process for the assessment of candidates' qualifications, consideration could be given to the establishment of evaluation groups for each region. Such groups would support the accountability and integrity of the nomination process through a focused and rigorous assessment of candidate qualifications.

20. The Regional Evaluation Group established by the European Region is one model for such a group,<sup>1</sup> but it is not the only approach. Member States may wish to consider the optimal composition of such a group to support the process, as well as the range of tasks the group could usefully undertake.

- **Composition:** The group could be composed exclusively of representatives of Member States or include a mix of Member State representatives and independent experts. It could be limited to persons from the region or could also include representatives of the Executive Board from the region. The evaluation group could seek support from the WHO Secretariat, including the Department of Human Resources and Talent Management and the Office of the Legal Counsel. In addition, even if composed of exclusively of Member States, it could consult with outside experts, if circumstances so required.
- **Methodology:** The group could evaluate the candidates against the criteria set by the regional committee. It could do so through assessment of the information and documents submitted through a standard form for curriculum vitae and through interview of the candidates.
- **Role:** The evaluation group could have an advisory role, providing a non-binding evaluation of candidates for consideration by the regional committee. Alternatively, it could take on the role of establishing a shortlist, with only the shortlisted candidates going forward for consideration by the governing bodies. Possible additional tasks for the evaluation group could include:
  - overseeing implementation of the code of conduct if such an oversight role is agreed (see above); and
  - verifying qualifications of the candidates, and considering declarations of interest of the candidates, with assistance from the Secretariat.

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<sup>1</sup> Under Rules 47.1 and 47.2 of the Rules of Procedure of the Regional Committee for Europe, a Regional Evaluation Group is appointed by the Regional Committee at its session preceding the one at which a person is due to be nominated as Regional Director. The Regional Evaluation Group is composed of six representatives of Regional Committee Members and is tasked with the function of making a preliminary – and non-binding – evaluation of candidates for nomination in the light of the criteria specified by the Regional Committee and to perform related functions.

## **F. Election process**

21. Under the current election process, in most cases, the regional committees establish a shortlist of candidates and hold one or more secret ballots to select a single nominee. The Board then considers that nominee on a yes/no basis. Consideration may be given to whether, in the interest of accountability and the integrity of the nomination process, a regional committee should have the option to reopen the period for submitting proposals, should the regional committee assess that the field of candidates is not sufficiently strong (or representative). Alternatively, this task could be delegated to the evaluation group, or be triggered automatically in the event that a minimum number of candidates are not proposed within the deadline.

### **ACTION BY THE REGIONAL COMMITTEE**

22. The Regional Committee is invited to note the report and to provide guidance on the questions set out below.

(1) Should more specific criteria and/or post descriptions be developed for the post of Regional Director? If so, are there particular aspects the Regional Committee believes should be enhanced? Should criteria used by WHO for director level positions be considered?

(2) Should live candidates' forums that are broadcast publicly be adopted as a standard step in the nomination process; and should interviews of candidates that take place at the regional committees be broadcast publicly?

(3) Would it benefit the nomination process to amend the codes of conduct? If so, what aspects should be considered for amendment, for example:

- expansion of coverage to include provisions on sexual misconduct and other abusive conduct and disclosures of interest?
- provide for due diligence, including reference checks?
- strengthened campaign activity disclosures?
- more formal candidate undertakings?

(4) Should the Regional Committee establish an evaluation group? If so:

- Should the evaluation group be composed solely of Member States of the region or should it also include independent experts? Should one or more representatives of the Executive Board from the region participate in the evaluation group?
- Should the evaluation group evaluate the candidates against the Regional Committee's criteria?
- Should the evaluation group provide a nonbinding evaluation of all candidates to the Regional Committee or should it create a shortlist? Should it verify the qualifications of candidates, evaluate declarations of interest and/or have a role in oversight of the implementation of the code of conduct?

(5) Should the Regional Committee (or evaluation group) be authorized to re-open the period for submitting proposed candidacies? If so, on what grounds?



## ANNEX

### Possible measures to enhance the transparency, accountability and integrity of the nomination process

Measure	Implementation considerations	Transparency	Accountability	Integrity
<b>Elaboration of more specific standard minimum criteria for post of Regional Director</b>	<ul style="list-style-type: none"> <li>• Adopt detailed assessment criteria</li> <li>• Create post description</li> <li>• Clarify any educational requirements</li> <li>• Refer to WHO values charter</li> </ul>	<ul style="list-style-type: none"> <li>• Clear public statement of elements to be considered in assessing candidates</li> </ul>	<ul style="list-style-type: none"> <li>• Ensures agreed threshold criteria for Regional Director positions</li> </ul>	<ul style="list-style-type: none"> <li>• Builds credibility through development and application of predictable criteria</li> </ul>
<b>Formalization of public live candidates' forums</b>	<ul style="list-style-type: none"> <li>• Adopt forum</li> <li>• Modalities: virtual/ hybrid; candidates answer identical questions or those directed to them?</li> </ul>	<ul style="list-style-type: none"> <li>• Broadcast publicly to allow all interested to hear interviews</li> </ul>	<ul style="list-style-type: none"> <li>• Creates public understanding of candidates' visions for the region and plans to implement</li> </ul>	<ul style="list-style-type: none"> <li>• Opportunity for Member States to test campaign claims</li> </ul>
<b>Broadcasting interviews at regional committees</b>	<ul style="list-style-type: none"> <li>• Change rules, as necessary, to permit broadcast of candidate interviews</li> </ul>	<ul style="list-style-type: none"> <li>• Broadcast, at minimum, on regional committee website, accessible publicly</li> </ul>	<ul style="list-style-type: none"> <li>• Permits common understanding of candidates' visions for region and plans to implement</li> </ul>	
<b>Code of conduct amendments</b>	<ul style="list-style-type: none"> <li>• Revise codes of conduct:</li> <li>• Expand to include provisions on sexual misconduct and other abusive conduct and disclosure of interests, including tobacco/tobacco products, arms</li> <li>• Include due diligence, such as reference checks</li> <li>• Strengthen disclosure of campaign activities with Member State disclosure of grants and aid to candidates</li> <li>• Increase formality with candidate compliance undertakings</li> <li>• Consider oversight mechanism or process for alleged breaches</li> </ul>	<ul style="list-style-type: none"> <li>• Statement of standards to be upheld in election process available publicly</li> </ul>	<ul style="list-style-type: none"> <li>• Establishes common standards for behaviour of candidates and Member State support</li> </ul>	<ul style="list-style-type: none"> <li>• Builds credibility for through setting standards applicable with respect to all candidates and the support provided by Member States</li> </ul>

Measure	Implementation considerations	Transparency	Accountability	Integrity
<b>Evaluation group</b>	<ul style="list-style-type: none"> <li>• Create evaluation groups</li> <li>• Composition: Member States or Member States and independent experts, Board representative(s) from region?</li> <li>• Methodology: Evaluation against criteria?</li> <li>• Possible roles: Advisory, establish short list, oversight of code of conduct, verify qualifications, review declarations of interest</li> </ul>		<ul style="list-style-type: none"> <li>• Promotes rigorous objective [and even handed] review of candidates' qualifications by group dedicated to process; could also take responsibility for verification of qualifications and/or oversight of issues related to the code of conduct</li> </ul>	<ul style="list-style-type: none"> <li>• Builds credibility for process through establishment of group dedicated to solely to nomination process, including rigorous review of candidates' qualifications; could also promote trust in process through qualification verification and oversight of code of conduct declarations</li> </ul>
<b>Election process</b>	<ul style="list-style-type: none"> <li>• Authorize regional committee or evaluation group to re-open window for candidate submission if it assesses that the field of candidates not sufficiently strong or representative</li> <li>• Alternatively, establish automatic re-opening if a minimum number of candidates is not met</li> </ul>		<ul style="list-style-type: none"> <li>• Reinforces commitment to ensuring qualified candidates able to perform the role</li> </ul>	<ul style="list-style-type: none"> <li>• Builds credibility by ensuring regional committee has a genuine choice</li> <li>• Promotes diversity</li> </ul>