ORGANIZAÇÃO MUNDIAL DE SAÚDE ESCRITORIO REGIONAL AFRICANO

REGIONAL COMMITTEE FOR AFRICA

AFR/RC53/5

6 August 2003

<u>Fifty-third session</u> Johannesburg, South Africa, 1–5 September 2003

ORIGINAL: ENGLISH

Provisional agenda item 7.3

METHOD OF WORK AND DURATION OF THE WORLD HEALTH ASSEMBLY

Report of the Regional Director

This document is designed to facilitate the work of the Fifty-seventh World Health Assembly, in accordance with the relevant decisions of the Executive Board and the World Health Assembly concerning the method of work and duration of the Health Assembly. The Regional Committee is hereby invited to examine the document and advise on the draft procedural decisions. Decisions taken will be transmitted to the Director-General.

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FIFTY-SIXTH WORLD HEALTH ASSEMBLY

1. The Fifty-sixth World Health Assembly lasted nine days.

Outcome of the Health Assembly

- 2. The agenda of the 56th session of the World Health Assembly, covered among other things, the review and approval of WHO's proposed programme budget for 2004-2005, the appointment of Dr. J. W. Lee as Director-General, and the adoption of the WHO Framework Convention on Tobacco Control which is the first international treaty negotiated under the auspices of WHO.
- 3. The Director-General, in her opening address, called attention to the outbreak of the severe acute respiratory syndrome (SARS) and called it the first new epidemic of the 21st century, adding that the last major new disease of the 20th century, HIV/AIDS, was still present, devastating lives and communities. She emphasized that a secure future for all peoples depended on cooperation across borders and between institutions and that the sharing of information, expertise and resources was crucial for the fight against disease outbreaks in the world.
- 4. She declared that there would be no sustainable development and no international security if the diseases that drive and are driven by poverty were not tackled. She stressed the fact that health was central to development, adding that poor people would remain disadvantaged and deprived of fundamental freedom until governments regard health as a fundamental right.
- 5. The Health Assembly adopted resolutions on issues which included:
 - (a) Global health-sector strategy for HIV/AIDS. Delegates stressed the need for innovative training as a preventive measure, enhanced maternal and child health services and reproductive health services, and respect for human rights as a guiding principle;
 - (b) *Traditional medicine*. The resolution is intended to respect and preserve traditional medical knowledge, while enhancing the safety and efficacy of its use;
 - (c) Strategy for child and adolescent health and development. Delegates strongly endorsed the strategy, while emphasizing the need for further research on the nature and determinants of risk behaviour in adolescents, such as obesity, smoking, alcohol consumption, use of substances and sexual behaviour. WHO was requested to increase its budget allocation to the coverage of child and adolescent health services.
 - (d) International conference on Primary Health care, Alma-Ata: twenty-fifth anniversary. The resolution calls on the Director-General to convene a meeting that will, among other things, review definitions and strategies, identify future directions and continue to incorporate the principles of primary health care into the activities of all WHO programmes. Participants stressed the importance of renewing commitment to providing primary health care services, especially to poor and disadvantaged people.

Ministerial Round Tables

6. Four ministerial round-table discussions on healthy environments for children were held concurrently during the 56th World Health Assembly. Despite some progress made in many countries to improve the health of children, participants felt that children's environmental health still remained a cause for great concern as could be seen from the many examples of possible risks to children's health in different countries.

- 7. As regards the way forward, Member States were encouraged to give priority to a number of activities which include:
 - (a) Developing strategic plans for healthy environments for children in countries;
 - (b) Undertaking needs assessment, identifying priorities and mapping health and environmental risks to children;
 - (c) Establishing regional centres working on healthy environments for children and creating regional networks;
 - (d) Preparing training and educational materials;
 - (e) Mobilizing resources for movements involved in creating healthy environments for children.

METHOD OF WORK AND DURATION OF THE FIFTY-SEVENTH WORLD HEALTH ASSEMBLY

- 8. It is proposed to convene the Fifty-seventh World Health Assembly on Monday 17 May 2004 at the *Palais des Nations*, Geneva, and to close the Assembly no later than Tuesday, 22 May 2004.
- 9. In line with Resolution WHA52.21 on the reform of the World Health Assembly by which the Director-General is requested to make appropriate arrangements for a shortened plenary meeting, delegates at the Health Assembly will be:
 - (a) requested to limit, to five minutes, their statements in such debates;
 - (b) encouraged to make group or regional statements;
 - (c) invited to submit written statements of not more than 600 words for inclusion in the verbatim records of the plenary meeting in lieu of taking the floor.
- 10. Delegates wishing to have their names placed on the list of speakers for the general discussion should notify the WHO Governing Bodies Department in advance, sending their notification to fax number 41 22 791 4173.
- 11. Copies of statements to be made during the general discussion should be submitted to the Office of the Assistant to the Secretary of the Health Assembly by the morning of Monday, 17 May 2004.
- 12. The theme for World Health Day 2004 will be decided later.

Credentials

13. The credentials of delegates, alternates and advisers should be delivered to the Secretariat (Governing Bodies Department) by 1st May 2004. Credentials shall be issued by the Head of State, the Minister for Foreign Affairs, the Minister of Health, or any other appropriate authority. Member States shall be represented at the Assembly by not more than three delegates. Alternates and advisers may accompany delegates. Only original documents are examined and considered for formal credentials by the Committee on Credentials. Faxes and e-mails are not considered as formal credentials but may be sent to the Governing Bodies Department (fax: + 41 22 791 41 73; e-mail: credentials@who.int) for advance information prior to delivery of the original document. Credentials

should include the following information for each participant: LAST NAME (in capital letters) first name, title, function, institution, city, gender (unless indicated in title).

Reimbursement of travel expenses

14. Resolution WHA 50.1 provides that only Member States that are classified as least developed countries by the United Nations shall be reimbursed for the actual travel expenses of one delegate each and, in accordance with WHO policy, only for travel by the most direct route.

Vice-President of the World Health Assembly

15. The African Region will designate a candidate for the post of Vice-President of the Fifty-seventh World Health Assembly. In accordance with Decision 5 (3) of the thirty-third session of the Regional Committee, the Chairman of the fifty-third session of the Regional Committee will be proposed to hold the office of Vice-President of the fifty-seventh World Health Assembly.

Member States entitled to designate persons to serve on the Executive Board

- 16. Following the usual English alphabetical order, Guinea-Bissau designated a representative to serve on the Executive Board starting from its 112th session which took place immediately after the fifty-sixth World Health Assembly. Guinea-Bissau thus joined Eritrea, Ethiopia, Gabon, Gambia, Ghana and Guinea from the African Region.
- 17. The term of office of Eritrea and Ethiopia will expire with the closure of the fifty-seventh World Health Assembly. They will be replaced by Kenya and Lesotho who will attend the 114th session of the Executive Board in May 2004.
- 18. Member States entitled to designate persons to serve on the Executive Board as from its 114th session should confirm their availability at least six weeks before the Fifty-seventh World Health Assembly.
- 19. The Fifty-first World Health Assembly, by its Resolution WHA51.26, decided that Member States entitled to designate a representative to serve on the Executive Board should designate them as government representatives technically qualified in the field of health.

MAIN COMMITTEES OF THE WORLD HEALTH ASSEMBLY

- 20. The Thirty-first World Health Assembly, by its resolution WHA31.1 decided that:
 - (a) the terms of reference of Committee A shall be:
 - (i) to deal primarily with programme and budget matters;
 - (ii) to review the proposed programme budget and the Executive Board's report thereon;
 - (iii) to recommend the budget level and the appropriation resolution;
 - (iv) to consider the tentative budgetary projections for the following biennium and study such other items as shall be referred to it by the World Health Assembly (Rule 34);
 - (b) the terms of reference of Committee B shall be:
 - (i) to deal primarily with administrative, financial and legal matters;
 - (ii) to review WHO's financial position including: the Financial Report and the Report of the External Auditors; the status of contributions and advances to the Working

- Capital Fund; the status of any funds that have a bearing on WHO's financial position; and consideration of the amount of available casual income to be used to help finance the budget;
- (iii) to recommend the scale of assessment; and
- (iv) to study such other items as shall be referred to it by the World Health Assembly.
- 21. The Chairmen of these Main Committees shall be elected by the World Health Assembly after consideration of the Report of the Committee on Nominations.
- 22. Each Main Committee shall, after consideration of the report of the Committee on Nominations, elect two Vice-Chairmen and a Rapporteur.
- 23. Annex 3 to this report prepared for the information of members of the Committee on Nominations, shows the distribution by country of office-bearers at earlier Health Assemblies.
- 24. The Director-General, in consultation with the Regional Director shall, if necessary, consider before the Fifty-seventh World Health Assembly, delegates of Member States of the African Region who may serve effectively as:
 - (a) Chairmen of the Main Committees A or B; and
 - (b) Vice-Chairmen and Rapporteurs of the Main Committees.

Informal meeting of the Regional Committee

- 25. Before the opening of the Fifty-seventh World Health Assembly, the Regional Director will convene an informal meeting of the Regional Committee on Monday, **17 May 2004, at 8.30** a.m. at *the Palais des Nations*, Geneva. Information regarding the committee room where the meeting is to be held will be communicated in due course.
- 26. The informal meeting will confirm the decisions of the Regional Committee regarding Member States that will serve on the different committees of the World Health Assembly.

TECHNICAL ISSUES

27. In accordance with Executive Board resolution EB99.R28, the World Health Assembly, by its Resolution WHA50.18, operative paragraph 2(1), decided that the Executive Board, when preparing the provisional agenda of each World Health Assembly, shall normally include individual technical programme items in that agenda as separate items only in the years when the World Health Assembly does not undertake a full review of the proposed biennial programme budget, thus allowing more time for discussing such technical items.

Annex 1

PRESIDENTS OF THE WORLD HEALTH ASSEMBLY

Thirtieth World Health Assembly (May 1977)	Dr S. TAPA (Tonga)	Forty-second World Health Assembly (May 1989)	Professor Minzhang CHEN (China)
Thirty-first World Health Assembly (May 1978)	Mr Kamaluddin MOHAMMED (Trinidad and Tobago)	Forty-third World Health Assembly (May 1990)	Dr P. NARANJO (Equador)
Thirty-second World Health Assembly (May 1979)	Professor P. TUCHINDA (Thailand)	Forty-fourth World Health Assembly (May 1991)	Dr P. NYMADAWA (Mongolia)
Thirty-third World Health Assembly (May 1980)	Dr A.R. AL-AWADI (Kuwait)	Forty-fifth World Health Assembly (May 1992)	Mr A. AL-BADI (United Arab Emirates)
Thirty-fourth World Health Assembly (May 1981)	Dr Neropi VIOLAKI- PARASKEVA (Greece)	Forty-sixth World Health Assembly (May 1993)	Mr C. ORTENDAHL (Sweden)
Thirty-fifth World Health Assembly (May 1982)	Mr M. DIOP (Senegal)	Forty-seventh World Health Assembly (May 1994)	Mr B.K. TEMANE (Botswana)
Thirty-sixth World Health Assembly (May 1983) (Malaysia)	Mr TANSRI CHONG HONNYAN	Forty-eighth World Health Assembly (May 1995)	Dato Dr H. JOHAR NOORDIN (Brunei Darussalam)
Thirty-seventh World Health Assembly (May 1984)	Dr G Soberon ACEVEDO (Mexico)	Forty-ninth World Health Assembly (May 1996)	Dr A.J. MAZZA (Argentina)
Thirty-eighth World Health Assembly (May 1985)	Dr S SURJANINGRAT (Indonesia)	Fiftieth World Health Assembly (May 1997)	Mr Saleem I. SHERVANI (India)
Thirty-ninth World Health Assembly (May 1986)	Dr Z. HAMZEH (Jordan)	Fifty-first World Health Assembly (May 1998)	Dr F.R. AI-MOUSAWI (Bahrain)
Fortieth World Health Assembly (May 1987)	Dr J. VAN LONDEN (The Netherlands)	Fifty-seond World Health Assembly (May 1999)	Mrs Maria de Belem ROSEIRA (Portugal)
Forty-first World Health Assembly (May 1988)	Dr NGANDU-KABEYA DIBANDALA (Zaire)	Fifty-third World Health Assembly (May 2000)	Dr Libertina AMATHILA (Namibia)
		Fifty-fourth World Health Assembly (May 2001)	Dr Hong Sun Huot (Cambodia)
		Fifty-fifth World Health Assembly (May 2002)	Dr J.F. López Beltrán (El Savador)
		Fifty-sixth World Health Assembly (May 2003)	Dr Kandaker Mosharraf Hossain (Bangladesh)

ANNEX/ANNEXE 2

LIST OF MEMBER STATES OF THE AFRICAN
REGION OF THE WORLD HEALTH ORGANIZATION SHOWING
MEMBERS WHO ARE, OR WHO HAVE BEEN, ENTITLED TO
DESIGNATE PERSONS TO SERVE ON THE EXECUTIVE BOARD¹

LISTE DES ETATS MEMBRES DE LA REGION AFRICAINE DE L'ORGANISATION MONDIALE DE LA SANTE QUI SONT OU ONT ETE HABILITES A DESIGNER DES PERSONNES DEVANT FAIRE PARTIE DU CONSEIL EXECUTIF¹

LISTA DOS ESTADOS-MEMBROS DA REGIAO AFRICANA DA OMS QUE ESTAO OU ESTIVERAM HABILITADOS A DESIGNAR PESSOAS PARA O CONSELHO EXECUTIVO¹

¹In accordance with Rule 105 of the Rules of Procedure of the Health Assembly, "The term of office of each Member State 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 State concerned is elected and shall end immediately after the closing of the session of the Health Assembly during which the Member State is replaced".

Conformément B l'Article 105 du R∏glement intérieur de l'Assemblée, "Le mandat de chaque Membre habilité B désigner une personne devant faire partie du Conseil commence immédiatement apr∏s la clôture de l'Assemblée de la Santé au cours de laquelle ce Membre est élu, et prend fin immédiatement apr∏s la clôture de la session de l'Assemblée de la Santé au cours de laquelle ce Membre est remplacé."

Nos termos do artigo 105º do Regulamento Interno da Assembleia da Saúde, "O mandato de cada Membro habilitado a designar uma pessoa para o Conselho Executivo começará imediatamente a seguir ao encerramento da Assembleia da Saúde no decorrer da qual esse Membro é eleito, e cessará logo após o encerramento da sessao da Assembleia no decurso da qual esse Membro é substituído".

MEMBERS ENTITLED TO DESIGNATE PERSONS TO SERVE ON THE EXECUTIVE BOARD REGION AND MEMBRES HABILITIES A DESIGNER DES PERSONNES DEVANT FAIRE PARTIE DE CONSEIL EXECUTIF COUNTRIES MEMBROS HABILITADOS A DESIGNAR PERSSOAS PARA O CONSELHO EXECUTIVO REGION ET PAYS YEAR OF ELECTION AND TERM OF OFFICE - ANNEE D'ELECTION ET DUREE DU MANDAT AFRICA - AFRIQUE WHA43 WHA4 WHA4 WHA4 WHA4 WHA48 WHA49 WHA50 WHA51 WHA52 WHA53 WHA54 WHA5 WHA56 WHA5 WHA58 WHA5 1990 1995 1996 1997 1998 1999 2000 2001 2003 2005 5 9 1991 1992 1993 1994 2002 2004 2006 XXX Algeria XXX X XXXXAngola X Benin X XXXXBotswana X XXXXX Burkina Faso X XXXXX Burundi \mathbf{X} XXXXX Cameroon X XXXX X Cape Verde X XX XXX Central African Republic X XXXXX XXXXChad X Comoros * XXXX \mathbf{X} * Congo, Republic of XX XXX XXX Côte d=Ivoire XX XXXXEquatorial Guinea XXXXEritrea X Ethiopia XXXXX Gabon XXXXXXGambia XXXXGhana XXGuinea XXGuinea Bissau Kenya Lesotho Liberia Madagascar Malawi X Mali X X Mauritania Mauritius X XXX Mozambique Namibia XXXXX Niger XXXXX Nigeria X XXX Rwanda XXXX Sao Tome & Principe X XXX X XXXX X Senegal Seychelles X XXXXX Sierra Leone XX X South Africa XXSwaziland XXX X

X

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X

X = Served/Serving Members

Togo Tanzania

Uganda

Zambia

Zimbabwe

Congo Democratic

^{* =} Likely to be elected at WHA

ANNEX/ANNEXE 3

DISTRIBUTION BY COUNTRY OF FUNCTIONS DURING PRECEDING HEALTH ASSEMBLIES

REPARTITION PAR PAYS DES FONCTIONS EXERCEES AU COURS DES ASSEMBLEES PRECEDENTES

The attached table provides information, by type of function, for each of the previous Health Assemblies.

Le tableau ci-joint donne les informations par type de fonctions, pour chacune des Assemblées précédentes.

TABLE/TABLEAU

	WHA47 47IIme Assemblée 1994	WHA48 48П Assemblée 1995	WHA49 49∏me Assemblée 1996	WHA50 50Πme Assemblée 1997
Président President	Botswana	Brunei Darussalam	Argentina	India
Vice-Présidents Vice-Presidents	Lao People's Demo. Rep. Egypt Thailand Slovenia Argentina	Burkina Faso Mexico Iran Belarus Myanmar	Gabon Qatar Bulgaria Sri Lanka Fiji	Algeria Venezuela Libya Portugal China
Chairmen of Main Committees Présidents des commissions principales	Indonesia, Com. "A" Saudi Arabia, Com. "B"	Tanzania, Com. "A" Poland, Com. "B"	Netherlands, Com. "A" South Africa, Com. "B"	Belize, Com "A" Kiribati, Com "B"
Other members of the General Committee Autres membres du Bureau de l'Assemblée	Bahrain Burkina Faso Cape Verde China Cuba France Gabon Guatemala Guinea Iran Israel Japan Nigeria Russian Federation U.K. of Great Britain and Northern Ireland United States of America Venezuela	Bolivia Botswana China Cuba France Indonesia Japan Kenya Malawi Morocco Mozambique Oman Panama Russian Federation United Arab Emirates U.K. of Great Britain and Northern Ireland United States of America	Australia Canada China Croatia Cuba Ecuador France Lebanon Mali Nigeria Oman Russian Federation Thailand U.K. of Great Britain and Northern Ireland United States of America Zaçre Zambia	Argentina Bulgaria Côte d'Ivoire Cuba Eritrea France Japan Morocco Mozambique Myanmar Russian Federation Seychelles South Africa Sweden United Arab Emirates U.K. of Great Britain and Northern Ireland United States of America
Vice-Chairmen of Main Committees	Belgium Com. "A" Singapore	Morocco Com."A" Solomon Islands	El Salvador Com. "A" Philippines	Tunisia Com. "A" Mauritius
Vice-Présidents des Commissions principales	Mexico Com."B" Central Africa	India Com. "B" Honduras	Bangladesh Com. "B" Kuwait	Russian Fed. Com. "B" Nepal
Rapporteurs of Main Committees Rapporteurs des Commissions principales	Iraq, Com. "A" Papua New Guinea, Com. "B"	Luxembourg, Com. "A" Egypt, Com. "B"	Bhutan, Com. "A" Hungary, Com. "B"	Switzerland, Com. "A" Lebanon, Com. "B"

Annex/Annexe 3

TABLE/TABLEAU

			TABLE/TABLE	2.10		
	WHA51 51ème Assemblée 1998	WHA52 52ème Assemblée 1999	WHA 53 53ème Assemblée 2000	WHA 54 54ème Assemblée 2001	WHA 55 55ème Assemblée 2002	WHA 56 55ème Assemblée 2003
Président President	Bahrain	Portugal	Namibia	Cambodia	El Salvador	Bangladesh
Vice-Présidents Vice-Presidents	South Africa Dominican Republic Azerbaijan Bhutan Federated States of Micronesia	Bangladesh Jamaica Libyan Arab Jamahiriya Samoa Zimbabwe	Australia Haiti Kuwait India Uzbekistan	Burkina Faso Nicaragua Pakistan Belarus Dem. People's Rep. of Korea	Botswana Ukraine Nepal Kiribati Oman	Cameroon Bolivia Jordan Germania
Chairmen of Main Committees Présidents des commissions Principales	New Zealand, Com. "A" Sri Lanka, Com. "B"	Oman. Com. "A" Mexico Co. "B"	Bangladesh Com. "A" Lebanon Com. "B"	Kenya Com. "A" Iceland Com. "B"	Ireland Senegal	Canada Fidji
Other members of the General Committee Autres membres du Bureau de l'Assemblée	Argentina Belarus Burundi China Cuba Cyprus France Guinea Bissau Jamaica Lebanon Niger Russian Federation Sierra Leone Spain Uganda U.K. of Great Britain and Northern Ireland United States of America	Argentina Benin Burkina Faso Cape Verde China Cuba France Israel Japan Kenya Lebanon Lithuania Russian Federation Sri Lanka U.K. of Great Britain and Northern Ireland United States of America Zambia	Bosnia and Herzegovina Burkina Faso Cape Verde Canada China Cuba France Germany Ghana Lesotho Oman Palau Russian Federation South Africa U.K of Great Britain and Northern Ireland United States of America Uruguay	Bahrain Bhutan Bolivia China Cuba D.R. of Congo Dominica France Guinea Bissau Iran (Islamic Republic of) Japan Mali Niger Russia Federation Sweden United Kingdom of Great Britain and Northern Ireland United States of America	Barbados China Cote d'Ivoire Cuba Democratic People's Republic of Korea France Japan Mexico Morocco Russian Federation Rwanda Sao Tome and Principe Sierra Leone Spain United Arab Emirates United Kingdom of Great Britain and Northern Ireland and United States of America	Algeria Bahrain Burundi China Cuba France Ghana Greece India Iran (Islamic Republic) Jamaica Lesotho Poland Russian Federation United Kingdom of great Britain and Nothern Ireland United republic of Tanzania United States of America
Vice-Chairmen of Main Committees Vice-Présidents des Commissions principales	Denmark Com. "A" Nepal Equat. Guinea Com. "B" Venezuela	Ghana, Malaysia Com. "A" Bhutan Finland Com. "B"	Nicaragua Com. "A" Malta Algeria Com. "B" Fiji Com. "B"	United Arab Emirates Com. "A" Palau Bahamas Com. "B" Thailand	Brazil India Tunisia Viet Nam	Benin Morocco Romania Democratic People's Republic of Korea
Rapporteurs of Main Committees Rapporteurs des Commissions Principales	Pakistan, Com. "A" Czech Rep., Com. "B"	Kazakhstan Com. "A" Chad Com. "B"	Madagascar Com. "A" Thailand Com. "B"	Swaziland	Comoros Indonesia	Czech republic Venezuela

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