



# WHA ENGAGEMENT GUIDE 2018

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# Reader's Guide

Some may argue that the World Health Assembly (WHA) and World Health Organization (WHO) Executive Board are best experienced in-person and that knowledge around it is best passed on by word of mouth. However, we believe that a written guide can add value to the engagement process and to their institutional memory.

## **What this guide is and is not**

This guide is for civil society stakeholders seeking to engage with the WHA and WHO Executive Board. It details the rules and procedures, the schedules and protocols, the practices and precedents. It is not about what is discussed or considered, nor is it a legal document. This guide compiles relevant provisions from the WHO Constitution, WHA Rules of Procedure, the mandates scattered throughout resolutions, and decisions as well as lessons learned from previous attendees. Though the guide aims to be as comprehensive as possible, we acknowledge it prioritizes information relevant to the work of civil society and it leaves out information considered by the authors to be too detailed. It should also be noted, sections of the guide assume the reader is in “official relations” with the WHO, as engaging with the WHA and WHO Executive Board without proper accreditation is very difficult.



# Acknowledgments

This guide started as an internal project to compile World Health Organization (WHO) rules, regulations, practices and customs relevant to the World Health Assembly and World Health Organization Executive Board to support ACTION partner's advocacy campaigns, promote best practices and encourage a collective approach to influencing global health policy.

Compilation of all the research, fact-finding, and writing was the voluntary work of Yanira Garcia-Mendoza (ACTION Secretariat, Global Health Analyst). Special thanks go to Matt Robinson, (PATH/GHTC, Policy and Advocacy Officer) the United Nations Foundation, and the Global Health Council team, Danielle Heiberg (Senior Manager, Policy and Advocacy), Loyce Pace (President and Executive Director), and Elizabeth Kohlway (Senior Manager, External Affairs & Operations). Over time, they have patiently studied and explained all the often-complicated processes and practices of both the UN and the WHO to civil society organizations and facilitated engagement.

The World Health Organization, the United Nations and other agencies that have created, and archived key governance documents and made them publicly available. Furthermore, we recognize the valuable help of Global Health Advocates France, RESULTS UK, RESULTS Canada, RESULTS Australia, and RESULTS for sharing their personal insights and for inspiring the creation of this guide.

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Cover Photo: Tom Page

# An Introduction

## The WHO

The WHO was created in 1946 when its [Constitution](#) was adopted by the International Health Conference held in New York (June 19–July 22) and signed on to by representatives of 61 Member States (July 22). The Constitution entered into force on April 7, 1948, a date now celebrated every year as “World Health Day.” The document outlines the organization’s fundamental principles and established precedents.

The WHO remains firmly committed to the following principles set out in the preamble to the Constitution:

- Health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.
- The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, or economic or social condition.
- The health of all peoples is fundamental to the attainment of peace and security and is dependent on the fullest co-operation of individuals and States.
- The achievement of any State in the promotion and protection of health is of value to all.
- Unequal development in different countries in the promotion of health and control of diseases, especially communicable disease, is a common danger.
- Healthy development of the child is of basic importance; the ability to live harmoniously in a changing total environment is essential to such development.

- The extension to all peoples of the benefits of medical, psychological, and related knowledge is essential to the fullest attainment of health.
- Informed opinion and active co-operation on the part of the public are of the utmost importance in the improvement of the health of the people.
- Governments have a responsibility for the health of their peoples, which can be fulfilled only by the provision of adequate health and social measures.

## THE WHO SECRETARIAT

The WHO secretariat is comprised of the Director-General<sup>1</sup> and technical and administrative staff as the organization requires. It is the duty of the secretariat to receive documents, translate them into the working languages of the Health Assembly<sup>2</sup>, and circulate reports and resolutions of the Health Assembly and its committees. Additionally, the secretariat is responsible for preparing the records of proceedings, and to perform any other tasks required in connection with the activities of the Health Assembly or any of its committees.

## WHO DOCUMENTATION FOR THE WHA

In preparation for WHA, WHO gathers and posts documentation, such as the provisional agenda, daily journals, information, and resolutions on a comprehensive webpage (i.e., the [WHA71 webpage](#); see figure 1). Please visit this webpage frequently throughout the process as the agenda will likely change and documents will be added.

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<sup>1</sup> The Director-General is ex officio Secretary of the Health Assembly and of any subdivision thereof and may delegate these functions. They will provide and supervise secretarial and other staff and facilities as may be required by the Health Assembly.

<sup>2</sup> French, English, Spanish, Chinese, Arabic, and Russian.

Figure 1: WHA71 Webpage



The WHO website (Governance page: <http://apps.who.int/gb/gov/>) provides easy electronic access to documentation, such as the Rules of Procedure of the WHA, and offers options to download documents for the current meetings of the governing bodies and to consult documents of previous sessions and other relevant documentation.

Because documentation is available on the internet and the WHO wishes to economize, there is no paper on-site for printing available during the Health Assembly.

Documentation may also be downloaded by scanning with your smart phone or tablet the QR codes displayed at the documents distribution counter, the Distribution Desk for badges, the entrance to the Assembly Hall, and inside the committee conference rooms.

## GOVERNING BODY DOCUMENTS

These are the “basic documents” of the WHO, and the following is an excerpt from the WHO Constitution.

As noted in rules 13–15 of the WHO Constitution,

*Rule 13.* The Director-General should report to the Health Assembly on the technical, administrative and financial implications of all agenda items submitted to the Health Assembly before they are considered by the Health Assembly in plenary meeting. No proposal will be considered in the absence of such a report unless the Health Assembly decides otherwise in case of urgency.

*Rule 14.* Copies of all reports and other documents relating to the provisional agenda of any session should be available online and sent by the Director-General to Members and Associate Members and to participating intergovernmental organizations at the same time as the provisional agenda or not less than six weeks before the commencement of a regular session of the Health Assembly; relevant reports and documents are also sent to NGOs admitted into relationship with the Organization in the same manner.

*Rule 15.* The Health Assembly should not proceed to the discussion of any item on the agenda (unless it determines otherwise) until at least 48 hours have elapsed after the documents referred to in Rules 13 and 14 have been made available to delegations.

Nevertheless, the President of the Health Assembly, with the consent of the General Committee<sup>3</sup>, may suspend the application of Rule 15. In this case, notice of suspension will be given to all delegations and inserted in the Journal of the Health Assembly.

The WHO Constitution and other relevant documents of a legal nature are contained in the publication entitled [Basic documents](#) (48th edition, 2014), an updated, online version of which is also available on the [Governance page](#) of the WHO website.

3 Jump to Pg. 24 for a definition of the General Committee.



# The Annual World Health Assembly

The WHO was established to promote health and ease the burden of disease worldwide. It is the directing and coordinating authority for health within the United Nations (U.N.) system, and is responsible for providing leadership on global health matters, shaping the health research agenda, setting norms and standards, articulating evidence-based policy options, providing technical support to countries, and monitoring and assessing health trends.

The organization takes direction for its goals and priorities from the 194 Member States it is designed to serve. Each year, more than 3000 delegates—including senior health officials from Member States—travel to Geneva, Switzerland, in late May to participate in the World Health Assembly (WHA)<sup>4</sup>. The WHA is the decision-making body of WHO. Delegations from all WHO Member States attend, and the event focuses on a specific health agenda prepared by the WHO Executive Board.

**The main functions of the WHA** are to determine the policies of WHO and review its work, set new goals, assign new tasks, appoint the Director-General, supervise financial policies, and annually review and approve the proposed program budget. Each year the WHA has a long and complex list of health challenges and responses to review.

## IN BRIEF: THE WHA MEETING STRUCTURE

At the WHA, two main types of meetings are held, each with a different purpose:

1. **COMMITTEES** meet to debate technical and financial matters and approve the texts of resolutions, which are then submitted to the plenary meeting. The committee meetings are run by the Chair and comprise of primarily formal scheduled statements given by Member States on a specific agenda item. Prior to closing out a session, non-State actors are permitted to deliver official statements. If there is much debate around an agenda

item and time does not allow all Member States interested in speaking to do so, the agenda item is pushed to the next morning session for continued discussions.

- Committee A: meets to debate technical and health matters
- Committee B: meets to debate financial and management issues

**PLENARY** is the meeting of all WHA delegates. The Assembly meets in plenary session several times in order to listen to reports and adopt the resolutions transmitted by the committees. The Director-General and Member States also address the delegates in plenary sessions.

Additional events occur during the WHA. The Director-General selects three the topics around which **TECHNICAL BRIEFINGS** are separately organized; these sessions present new developments, provide a forum for debate, and to allow for peer-to-peer information sharing. Member States organize **OFFICIAL SIDE EVENTS** based on the theme of that year's WHA; these also take place in the Palais des Nations, the venue for the WHA. A Member State can submit a joint official side event application with non-State actors and other Member States.

## SEATING FOR NON-STATE ACTORS IN OFFICIAL RELATIONS WITH THE WHO

Non-state actors (NSA) in official relations with the WHO may participate, without right of vote, in the Health Assembly. Seating in the plenary has been reserved in the galleries on the fifth floor, which may be reached by using the lifts close to Doors 13 and 15. For meetings of Committees A and B, NSA seating has been reserved in the wings of the rooms. Each Committee has a “speaker” seat for those NSAs whose requests to speak have been accepted by the Chairman.

<sup>4</sup> The World Health Assembly can be referred to as “WHA” or “Health Assembly”. This guide will use these terms interchangeably.

## INTERPRETATIONS AND STATEMENTS

Interpretation is provided in the official languages (Arabic, Chinese, English, French, Russian, and Spanish) to help delegates to follow the discussions. Delegates are requested to send a copy of statements they plan to make to [interpret@who.int](mailto:interpret@who.int) or to give a paper copy to the conference officers in the room at least 30 minutes in advance. This does not prevent delegates from making changes on delivery but will facilitate clarity and accuracy in all languages. Under “Subject” and at the top of the statement, please state the name of the country/group, the meeting (for example, Plenary, Committee A, Committee B, or Executive Board) and the relevant agenda item number. Statements provided in advance are treated as confidential and checked against delivery for the official record.

## WHO Executive Board

The Executive Board (EB) is composed of 34-member countries, and with consideration for an equitable geographical distribution; EB members are elected for three-year terms. They can be found in the WHO website: <http://apps.who.int/gb/gov/executive-board-members.html>.

Each of these members appoints a representative to the EB with appropriate qualifications in the field of health; they may be accompanied by alternates and advisers. The annual EB meeting is held in January when the members agree upon the agenda for the WHA and the resolutions to be considered by the Health Assembly. A preliminary agenda and decision documents (interchangeably referred to as “resolutions”) are released at the end of this meeting.

A second, shorter meeting takes place in May following the Health Assembly. The main functions of the EB are to implement the decisions and policies of the Health Assembly, and advise and, generally, to facilitate its work.

It is important for non-State actors to watch the relevant recordings of the EB sessions to know in real time the decisions made, the tone and tenor of discussions, how member states feel about certain resolutions—including key points of concern and approval—amendments proposed, and potential allies to engage.

## Influencing the EB

### WHEN TO INFLUENCE

Efforts to influence the Executive Board should focus on the planning leading up to the annual January meeting. Engagement with WHO member states should ideally begin as early as August, especially if you want to work with member states to propose a resolution. Engagement should continue during the meeting as well.



## HOW TO INFLUENCE

Engaging member states is crucial to ensuring that they raise our issues at the January EB meeting. This is when member states can propose resolutions and voice support for and suggest technical briefings. The member states make recommendations for decisions for the WHO to be taken forward at the WHA.

Once the process of identifying your government's representative from the [WHO website](#), a non-State actor can engage by sending an email or letter requesting a call or meeting whereby the non-State actor prepares and presents both specific recommendations such as issues to raise, with accompanying suggested language and/or general principles, including how we hope the representative will respond should a key issue be brought up. For example, prioritizing women and girls, routine immunization, and ensuring sustainable health financing in all of your statements.

We recommend you travel to Geneva to attend the Executive Board meeting in January or, if unable to travel to participate in person, watch the live streaming or recordings of the relevant sessions.

Tasks to support advocacy:

1. Make note of each member's statement for internal mapping of influential targets
2. Draft recommendations for country member state representatives prior to and after the meeting
3. Collaborate on joint civil society ("non-state" actors) statements to be read on the floor of the EB meeting.

## Participation of EB Representatives in WHA Committee and Plenary Meetings

The EB will determine who will represent the EB at the Health Assembly; they may select any person(s) serving on the EB. If any EB representatives are prevented from attending the Health Assembly, the EB chairman will appoint a replacement from amongst the members.

EB representatives may attend plenary meetings and meetings of the General Committee and main committees of the Health Assembly. They may participate without voting privileges in their deliberations upon invitation or with the consent of the president of the Health Assembly or the chairman of the respective committee.

# WHA Agenda

## Regular Session

The Board will prepare a provisional agenda of each regular session of the Health Assembly after consideration of proposals submitted by the Director-General. The provisional agenda will be circulated with a notice of convocation to members and associate members, representatives of the Board, and to all participating intergovernmental and non-governmental organizations (IGOs and NGOs) admitted into relationship with the WHO.

The Board will include in the provisional agenda of each regular session of the Health Assembly:

- (a) the annual report of the Director-General on the work of the WHO;
- (b) all items that the Health Assembly has ordered to be included in a previous session;
- (c) any items pertaining to the budget for the next financial period and to report on the accounts for the preceding year or period;
- (d) any item proposed by a member or by an associate member;
- (e) subject to preliminary consultation as necessary between the Director-General and the Secretary-General of the United Nations, any item proposed by the U.N.;
- (f) any item proposed by any other organization of the U.N. system with which the WHO has entered effective relations.

## Special Session

The Director-General will develop the provisional agenda for any special session of the Health Assembly and circulate it with the notice of convocation to members and associate members, representatives of the Board and to all participating IGOs and NGOs admitted into relationship with the WHO. The provisional agenda for each special session will include only items proposed in any request by a majority of the members and associate members of the WHO or by the Board for the holding of the session.

## Adding an Agenda Item (Resolution)

Non-State actors may consider working to get an agenda item added for a regular or special session as part of its advocacy strategy. The Director-General will enter into consultation with the U.N. or the specialized agencies on items proposed, relating to new activities to be undertaken by the WHO that directly concern such organization(s), and will report to the Health Assembly to achieve coordinated use of the organization's resources.

When proposals are put forward during of a session, a consultation with representatives of the U.N. or specialized agencies attending the session will take place, and the Director-General will draw the attention of the Health Assembly to the full implications of the proposal.

The Director-General will consult the U.N. and the specialized agencies, as well as Member States, on international conventions or agreements or international regulations proposed for adoption in respect of any provision that affects the activities of such organization(s), and will raise the organization's comments to the attention of the Health Assembly with those received from governments.

Unless the Health Assembly decides otherwise, in case of urgency, proposals for new activities to be undertaken by the WHO may be placed in the supplementary agenda of any session. This will only be allowed if the proposals are received **at least six (6) weeks prior** to the

date of the opening of the session or if the proposal should be referred to another organ of the WHO for examination to decide whether action by the Organization is desirable.

New agenda items may also be added under Rule 12 and Rule 12bis. Subject to Rule 11<sup>5</sup> (regarding new activities) and to the provisions of Rule 96<sup>6</sup>, a supplementary item may be added to the agenda during any session if, upon the report of the WHA General Committee (jump to [page 18](#) for a definition] in plenary, the Health Assembly decides to allow it. Additionally, the request for the inclusion of the supplementary item must reach the WHO **within six (6) days from the day of the opening of a regular session or within two (2) days from the day of the opening of a special session** (both time frames include opening day).

Rule 12bis further provides direction to submit new agenda items promptly. “At each session, the provisional agenda and, subject to Rule 12, any proposed supplementary item and the report of the General Committee thereon, will be submitted to the Health Assembly for its adoption as soon as possible after the opening of the session.”

# WHA Meeting Procedures

## President of the Assembly

At each regular session, the Health Assembly elects a president and five vice presidents, who hold office until their successors are elected.

The president declares the opening and closing of each plenary meeting of the session, and they direct the discussions in plenary meetings, ensure observance of these rules, accord the right to speak, poses questions and announce decisions. They rule on points of order, and subject to these rules, control the proceedings at any meeting and shall maintain order. The president may, while discussing any item, propose to the Health Assembly the limitation of the time to be allowed to each speaker or the closure of the list of speakers.

The president, or a vice president acting as president, does not vote, but they may, if necessary, appoint another delegate or alternate delegate from their delegation to act as the delegate of their government in plenary meetings. If neither the president nor any vice president is present at the opening of a session, the Director-General shall preside *ad interim*.

## Voting

Each Member has one vote in the Health Assembly. Decisions of the Health Assembly on important matters/questions shall be made by a 2/3 majority of the Members present and voting. These matters include:

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5 Rule 11 : Unless the Health Assembly decides otherwise in case of urgency, proposals for new activities to be undertaken by the Organization may be placed upon the supplementary agenda of any session only if such proposals are received at least six weeks before the date of the opening of the session, or if the proposal is one which should be referred to another organ of the Organization for examination with a view to deciding whether action by the Organization is desirable.

6 Rule 96 : No proposal for a review of the apportionment of the contributions among Members and Associate Members for the time being in force shall be placed on the agenda unless it has been communicated to Members and Associate Members at least ninety days before the opening of the session, or unless the Board has recommended such review.



(1) the adoption of conventions or agreements; (2) the approval of agreements bringing the organization into relation with the U.N. and inter-governmental organizations and agencies; (3) amendments to the [WHO Constitution](#); (4) decisions on other questions, including the determination of additional categories of questions to be decided by a two-thirds majority, shall be made by a majority of the Members present and voting.

## Amendments and Suspension of Rules of Procedure

Amendments or additions to the rules of procedure may be adopted at any plenary meeting of the Health Assembly, provided that the Health Assembly has received and considered a report by an appropriate committee.

Subject to the provisions of the Constitution, any of the rules may be suspended at any plenary meeting of the Health Assembly, provided that a notice of the intention to propose suspension has been communicated to delegations no less than 24 hours before the meeting at which the proposal is to be made.

# How to Influence the WHA

## Resolutions

WHA resolutions and WHA decisions have the same legal status. WHA resolutions<sup>7</sup> reflect the views of the member states, provide policy recommendations, assign mandates to the WHO Secretariat and the subsidiary bodies of the WHA, and decide on all questions regarding the WHO budget.

Most resolutions are recurrent, i.e., they are adopted every year or in a multi-year rhythm under the same agenda item. WHA decisions are divided into the following categories:

- (a) strategic priority matters
- (b) other technical matters
- (c) program budget and financial matters
- (d) audit and oversight matters
- (e) staffing matters
- (f) management and legal matters
- (g) matters for information

## DRAFTING A RESOLUTION TEXT

Most draft resolutions are initially written by a member state. Upon request, the Director-General may assist member states in the drafting process. The member state initiating and drafting a resolution text is called the “sponsor” of the resolution or the “main sponsor” if there


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<sup>7</sup> All resolution, recommendations, and other formal decisions of the Health Assembly will be made available in the WHA working languages (Arabic, Chinese, English, French, Russian, and Spanish).

are co-sponsors. At times, reports of the Secretary-General or of a subsidiary body contain recommendations for draft resolutions.

## CO-SPONSORING A RESOLUTION

Upon invitation of the main sponsor, member states can formally express their support for a draft resolution by co-sponsoring it. Co-sponsoring is done by signing the official co-sponsor form, available from the main sponsor. All co-sponsors will be included in the verbatim record of the meeting of the adoption. The list of co-sponsors, however, is not part of the final published version of the resolution. To pass a resolution, at least 10-member states must co-sponsor it.

 <b>World Health Organization</b> Seventy-first World Health Assembly / Soixante et onzième Assemblée mondiale de la Santé Palais des Nations May 2018 / Mai 2018		MADAGASCAR	
<b>Side event application / Formulaire de demande de réunion parallèle</b>			
<b>Contact</b>			
Name/Nom: <b>MADAGASCAR</b>		Date of application: <b>06 APRIL, 2018</b>	
TBC - Japan, Canada, Burkina Faso, Chad, Madagascar, Mali, Philippines, Ecuador Partners: ACF, Save the Children, TDH, World Vision, Scaling Up Nutrition Civil Society Network (SUN CSN), Scaling Up Nutrition Secretariat, 1000 Days, Emergency Nutrition Network (ENN), IFE Core Group Alive and Thrive, RESULTS/Action TBC: , UHC2030 CSEM, HKI,			
Telephone, Email/Téléphone, courriel: <b>Dr Hery Harimanitra ANDRIAMANJATO, Directeur du Partenariat Ministère de la Santé Publique Madagascar Phone : +261 34 05 800 02 e-mail: <a href="mailto:mboarah@gmail.com">mboarah@gmail.com</a></b>			
<b>Concept</b>			
Description of proposed side event, including objective, expected results, proposed programme and speakers* / Description de la réunion parallèle proposée, y compris les objectifs, les résultats attendus, l'ordre du jour et les orateurs* : <b>Cette réunion parallèle est liée à l'item de l'agenda « Nutrition maternelle, du nourrisson et du jeune enfant » de l'AMS71.</b> <b>Titre :</b> Nourrir la Couverture santé universelle (CSU) – réussites et leçons apprises sur l'intégration de la nutrition du nourrisson et du jeune enfant dans la santé, avec un accent sur l'allaitement maternel <b>Contexte :</b> La sous-nutrition est un problème multisectoriel qui est la cause profonde de la moitié des décès des enfants de moins de 5 ans. Les interventions nutritionnelles intégrées au paquet minimum des soins reçoivent cependant toujours peu d'attention. Moins de 40% des jeunes enfants sont nourris exclusivement au sein, et moins de 20% des enfants souffrant de malnutrition aiguë sévère reçoivent les soins dont ils ont besoin. La sous-nutrition est de fait un point d'entrée idéal pour les Etats souhaitant promouvoir des approches intégrées, centrées sur les patients, dans le but d'atteindre la CSU.			

## INFLUENCING RESOLUTIONS

What follows are recommendations for how to go about influencing a resolution.

1. Select 1–3 resolutions you are interested in following and influencing (no more than 3 resolutions)
2. Conduct analysis to identify gaps and recommendations; for example:
  - a. Review the resolution up for decision
  - b. Review any existing past versions of the resolution
  - c. Compare and contrast the resolutions throughout the years and draft recommendations and/or amendments to the language based on main objectives
3. Once main language or core messaging is developed, insert this text in civil society and multilateral organization statements and recommendations to Member States and promote it on social media
4. Co-host, organize, or support a side event at WHA on the issues the resolution is focused on to drive attention to the message and place pressure on member states to act

All WHA resolutions relate to the WHA agenda item contain the following contents:

- a title
- several “preamble paragraphs” (informally called “PPs”)
- followed by a number of “operative paragraphs” (informally called “OPs”)

Both the PPs and OPs are numbered. The PPs deal mainly with background information and reference past resolutions, while OPs deal with substance and highlight the actions suggested to be taken by the Director-General and Member States. OPs can “request” action

by the Director-General and “invite,” “urge,” or “encourage” action by member states. The illustrations below show the different elements of a resolution.

## “Agreed Language”

“Agreed language” refers to paragraphs, sentences, or expressions that are part of previously adopted resolutions/decisions. Agreed language is the position if no agreement on new text can be reached. Agreed language from a resolution that has been adopted by consensus from member states carries more weight than language from a resolution that has been adopted by vote.

Figure 2: “Agreed Language” Diagrammed

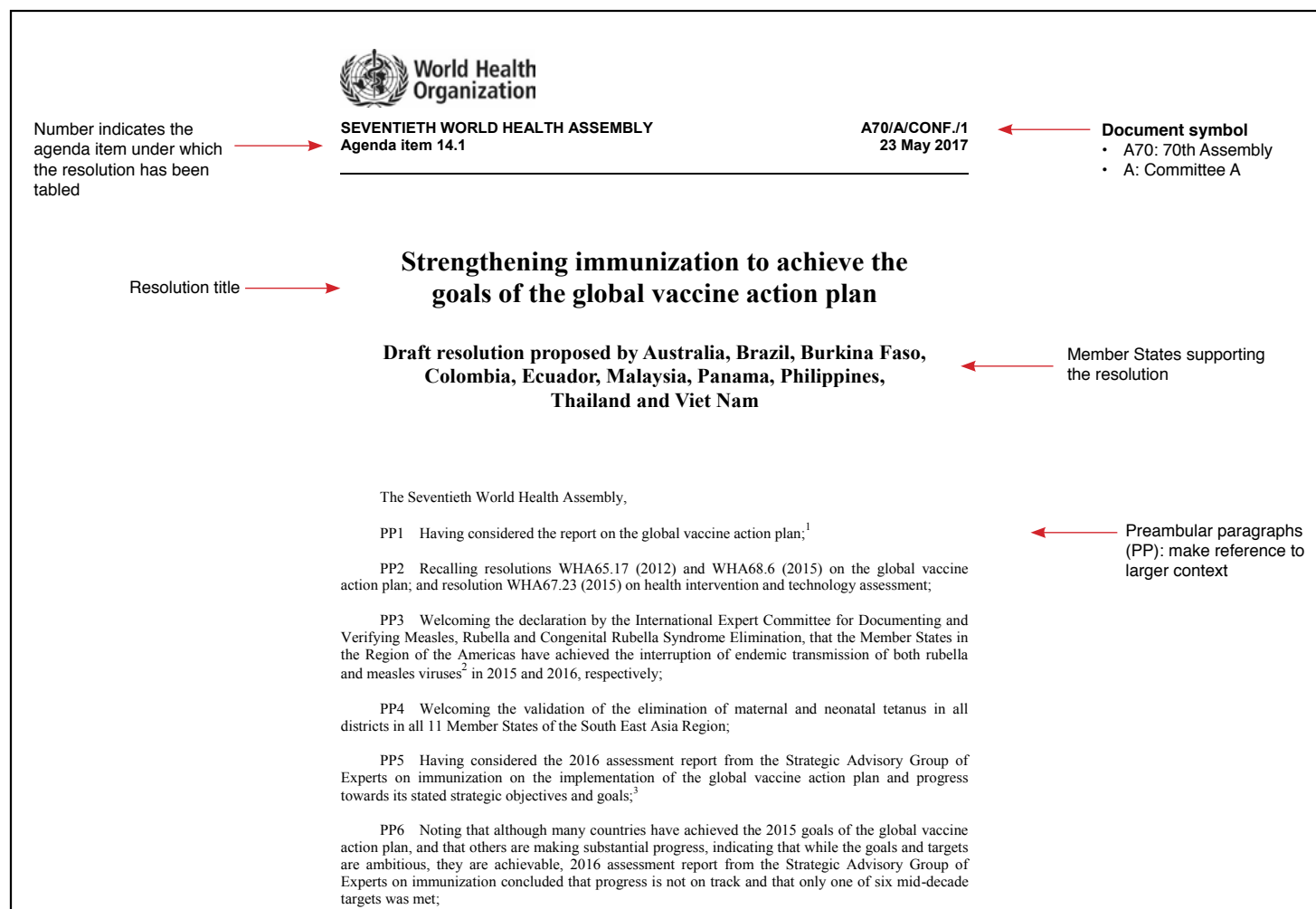




Figure 2, continued

	<p><i>A70/A/CONF/1</i></p> <p>PP7 Noting the progress made on the introduction of new vaccines and the impact that these vaccines have at the individual level and, when high vaccination rates are achieved, at the population level, in reducing morbidity and/or mortality from vaccine-preventable diseases, such as pneumonia, diarrhoea and cervical cancer;</p> <p>PP8 Concerned that at the mid-point of the Decade of Vaccines (2011–2020), progress toward the goals of the global vaccine action plan to eradicate polio, eliminate measles and rubella, eliminate maternal and neonatal tetanus, and increase equitable access to life-saving vaccines is too slow;</p> <p>PP9 Noting that although Member States in all six WHO regions have measles elimination goals, and that three regions have rubella elimination goals, additional efforts should be invested to reach measles and rubella elimination;</p> <p>PP10 Recognizing the important contribution of vaccines and immunization to: improving the health of populations; achieving the ambitious Sustainable Development Goals; outbreak preparedness and response, including in respect of outbreaks involving emerging pathogens; and addressing antimicrobial resistance;</p> <p>PP11 Recognizing that strong health systems and integrated routine immunization programmes that are well coordinated across other relevant sectors contribute to achieving immunization goals and targets, and universal health coverage;</p> <p>PP12 Recognizing the significant progress achieved towards polio eradication and the significant contribution of the polio-related assets, human resources and infrastructure, which should be transitioned effectively, to the strengthening of national immunization and health systems;</p> <p>PP13 Recognizing the need for enhanced international cooperation aimed at in a sustainable manner, strengthening the capacities of developing countries to achieve the goals of the global vaccine action plan,</p> <p>Operative paragraphs (OPs): contain substance “request”, “urge”, “encourage” → (OP)1 URGES Member States:<sup>1</sup></p> <p>(1) to demonstrate stronger leadership and governance of national immunization programmes by:</p> <p>(a) increasing the effectiveness and efficiency of national immunization programmes, as an integrated part of strong and sustainable health care systems;</p> <p>(b) allocating adequate financial and human resources to immunization programmes according to national priorities;</p> <p>(c) strengthening national processes and advisory bodies for independent, evidence-based, transparent advice including on vaccine safety and effectiveness, such as health intervention and technology assessments and/or National Immunization Technical Advisory Groups working in collaboration with national regulatory authorities;</p> <p><sup>1</sup> And, where applicable, regional economic integration organizations.</p> <p>2</p>
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← OPs indicate desired actions  
asked to be taken by MS

Figure 2, continued

A70/A/CONF/1	
Operative paragraphs (OPs) indicate desired actions to be taken by the WHO DG	<p>(OP)2 REQUESTS the Director General:</p> <p>(1) to continue supporting countries to achieve regional and global vaccination goals;</p> <p>(2) to advocate in national and international forums in support of the urgency and value of accelerating the pace of progress toward achieving the goals of the global vaccine action plan by 2020, including, addressing the nine recommendations made by the Strategic Advisory Group of Experts on Immunization in their 2016 assessment mid-term review of the Global Vaccine Action Plan;</p> <p>(3) to ensure that accountability mechanisms for monitoring global and regional vaccine action plans are fully implemented;</p>

## Non-State actors' statements

Non-state actors (NSAs) in official relations with the WHO may submit statements to the WHA to be read from the floor and entered into the official record. (if a non-governmental organization is not in "official relations" with the WHO, but is a member of the Global Health Council, they may submit through them) Statements must be submitted via the NSA delegation. Statements are required to be submitted at least a day before the agenda item is scheduled to be presented on the floor.

**SUBMITTING A STATEMENT THROUGH THE GLOBAL HEALTH COUNCIL (GHC).** GHC is Global Health Council (GHC) is a membership organization supporting and connecting advocates, implementers and stakeholders around global health priorities and actively engages key decision makers to influence health policy worldwide. The organization is the collaborative voice of the global health community on global health issues.

### *Guidelines for Statements*

#### **Format and content:**

- The draft statement must begin with "Global Health Council in collaboration with [NAME OF YOUR ORGANIZATION]"
- Clearly state the position and recommendations being made concerning a specific agenda item

<sup>8</sup> Please note the WHA agenda changes daily; be prepared to wait and/or adjust your schedule accordingly. If you cannot identify a speaker from your organization, let GHC know ASAP, so they may request a volunteer from their delegation.

- Keep your statement to 300 words or less (per WHO requirements)
- Orient the statement in a constructive manner and avoid hyperbole

#### **Process to submit a statement:**

- Draft statements should be submitted to GHC **as early as possible, but no later than May 15th**. Please send statements to the GHC communications and member engagement manager or other person designated at the time of submission
- GHC will review each draft statement to ensure that it is,
  - aligned with GHC vision, principles, and positions (as relevant)
  - constructive in approach; and
  - relevant to GHC's partnership with WHO.
- GHC will make a strong, good-faith effort to work with the member submitting the draft statement to agree on content and message. GHC reserves the right to decline to submit any statement if we are not able to agree on content and message that are aligned with GHC's vision, principles, and positions

#### **Approved Statements:**

- Once your statement has been approved, you must designate one representative from your organization to read the statement on the floor (this individual will gain special permission to access the floor). You must send their name to the designated person at GHC, **at least one (1) day prior** to when the agenda item is scheduled to be discussed<sup>8</sup>. **Things to note:**
- Statements must address a specific agenda item and be aligned with GHC's mission, vision, and values.
- If you wish your statement to be read during the WHA proceedings and recorded in the WHA official record, a representative from

your organization must be present at the time the agenda is being discussed or identify a GHC delegate to read the statement.

- You must check the WHA daily journal on the main WHA site to learn when the agenda item<sup>9</sup> will be discussed. For example, for WHA71: [http://apps.who.int/gb/e/e\\_wha71.html](http://apps.who.int/gb/e/e_wha71.html).
- Submit no more than three statements per organization.
- If there are multiple statements submitted from different GHC member organizations on the same agenda item, GHC will work with those members to produce one collaborative statement.
- You must be part of the GHC delegation to submit a statement.

## SUBMISSIONS BY DELEGATIONS

Delegations wishing to have draft resolutions distributed to participants of the Health Assembly or to one of its committees are requested to hand them to the assistant to the secretary of the Health Assembly (in the case of documents intended for plenary meetings) or to the secretary of the committee concerned (in the case of documents intended for one of the committees). Rule 50 of the Rules of Procedure of the WHA requires circulation of draft resolutions to delegations at **least two days** before the proposal is discussed. Thus, texts should be handed in early enough to allow time for translation and reproduction in the working languages. The Secretariat is available upon request to provide information, logistics and editorial support as required. The conditions in which formal proposals relating to items on the agenda may be introduced in plenary meetings and the main committees can be found in Rules 48 and 50 of the Rules of Procedure of the WHA.

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<sup>9</sup> An agenda with the list of topics for discussion will be released prior to the Assembly. The agenda is not timed, and while the Chair generally proceeds through the list of topics in order, there may be changes to the agenda if so decided by the Chair. Each topic will be discussed for the amount of time it takes to get through it, meaning the timing is very approximate during proceedings.

# Plan a Side Event

## OFFICIAL SIDE EVENTS

Official side events adhere to the theme chosen by the WHO Director-General for that year's WHA. For example, the WHA71's theme is "Health for all: commit to universal health coverage." This means sessions may include topics such as access, equity, health system strengthening, and health emergency, but all must be linked in some way to UHC (universal health coverage). We can expect similarly linked themes throughout Dr. Tedros's tenure (the WHO Director-General). A limited number of spaces will be available, so member states and civil society stakeholders are encouraged to seek broad multi-regional support from member states for proposals and, where possible, consider jointly organizing an event.

To encourage collaboration among member states, the WHO secretariat will, at times, organize a briefing for the Permanent Missions two months prior to the WHA, during which member states may indicate specific topics that they are considering proposing as the subject of a side event. In this way, member states interested in the same or similar topics may more easily explore the possibility of submitting a joint proposal and co-organize the side event with other delegations. More information: <http://apps.who.int/gb/Side-Events/WHA71/>.

## Basic Steps for non-State Actors

### *Preparing a Side Event Proposal*

- Reach out to Geneva-based country missions.
- Gather intel about other NGOs (or NSAs) proposing side events and which member states are supporting them. Note the following:
  - Member states must submit the application, so ensure/confirm country sponsorship early.



- A member state may associate itself (by submitting or co-sponsoring) with a **maximum of two (2) proposals**.
- non-State actors coordinate to fill out a side event application and submit by the deadline. Link to WHA71 side event application: [https://www.dropbox.com/s/rhm4b3tc52ai434/Side%20event\\_application.docx?dl=0](https://www.dropbox.com/s/rhm4b3tc52ai434/Side%20event_application.docx?dl=0)
  - Note: When preparing applications, please note the 2018 rules<sup>10</sup>.
- Member states are invited to submit applications for side events a **month and a half prior** to the WHA based on the theme set out by the Director-General.
- Applications that are incomplete or received after the deadline are not considered.

### *About partnering with NSAs*

- Organizations that are not in official relations with WHO should not be invited to co-organize side events with member states. Those organizations do not have the necessary security clearance to access the Palais des Nations.
- There is a separate application process for side events organized by NSAs in official relations with WHO. For information about that process, contact: [nonstateactors@who.int](mailto:nonstateactors@who.int)
- Side event applications need several co-sponsoring NSAs in official relations with WHO to be successful. The broader the representation of NSAs that are co-hosts, the stronger the application will be.

### *Onboarding Member States as co-Sponsors*

- After the selection process has been completed, member states can co-sponsor events **until May 1, 2018** (date may change from Assembly to Assembly).
- Member states may confirm their co-sponsorship of a side event by sending an email to [cosponsorship@who.int](mailto:cosponsorship@who.int).

- Note: Member states applying for a side event are encouraged to indicate on their application form only those countries which have confirmed their co-sponsorship (not TBC countries) and to copy such countries in the email submitting their application to [hqgoverningbodies@who.int](mailto:hqgoverningbodies@who.int).

### *Running Your Side Event*

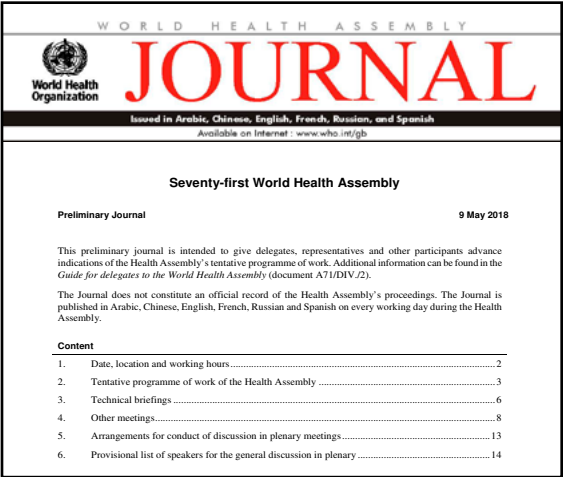
- A total of **10 side events** are scheduled for the WHA, two per day. Side events are scheduled during the lunchtime or in the evening and may last up to 90 minutes.
- While the rooms for the side events will be made available free-of-charge, the event organizer/member state(s) will be responsible for any costs for catering and interpretation services.

### **Unofficial side events**

An alternate option to applying for an official side event at the Palais des Nations is to host an unofficial side event such as a high-level dinner or breakfast panel. It is important to decide early on if you will take this approach, as most restaurants and hotels are booked well in advance and the cost associated is very high.

<sup>10</sup> Please note these rules are updated annually and shared with non-State actors in official relations with the WHO.

# WHA Journals



strategy. The Journal is published in Arabic, Chinese, English, French, Russian, and Spanish each working day during the Health Assembly, but it does not constitute an official record of the Health Assembly’s proceedings.

The “preliminary Journal” (at right) is intended to give delegates, representatives, and other participants an indication, in advance, of the Health Assembly’s tentative program of work.

The daily issues of the Journal gives the time, place and program of meetings; the agenda items for discussion; and the corresponding documents and other relevant information. A document distribution service operates at the counter in the “Concordia” lobby, located between Doors 13 and 15 of the Palais des Nations. See an example of the daily journal in figure 3.

Figure 3: Journal No. 1



11 Verbatim and summary records, the Journal of the Health Assembly will be drawn up in the WHA working languages (Arabic, Chinese, English, French, Russian, and Spanish)

# Technical Briefings

Every year there are three lunchtime technical briefings. The WHO Director-General decides the main topics of these briefings. This is an opportunity to influence the WHA by asking key MS to attend, speak and encourage wider MS attendance to demonstrate support for the issue being discussed. It is also an opportunity to utilize social media to elevate civil society's voices, hold MS and multilaterals accountable, raise concerns, highlight progress made and bring stakeholders into the conversations.

## Actions On-Site

- Ask your WHA representative to attend and engage with a specific technical briefing or side event sponsored by the Director-General.
- Ask your WHA representative to make a statement during a certain official session where your target topic/agenda item will be discussed.
- Ask your WHA representative to help improve the wording of the proposed resolution and endorse it. If the WHA representative is unwilling to propose changes, ask them to highlight what you want that is related to the resolution within their statement.

# The WHA Committees

## The General Committee

The General Committee of the Health Assembly will have 25 members and consist of the following representation:

- (a) the president and vice presidents elected to head up the Health Assembly
- (b) the chairpersons of the Health Assembly Committees A and B established under Rule 32<sup>12</sup>
- (c) 25 delegates to be elected by the Health Assembly; no delegation may have more than one representative on the Committee

The president of the Health Assembly will convene and preside over meetings of the General Committee. Each member of the General Committee may be accompanied by not more than one other member of his or her delegation.

The president or a vice president may designate a member of their delegation as his or her substitute as member during a meeting or any part thereof. The chairperson of a main committee will, in the case of absence, designate a vice chairman of the committee as their substitute, provided that this vice chairperson will not have the right to vote if they are of the same delegation as another member of the General Committee. Each of the elected delegates will be entitled to designate another member of their delegation to act as a substitute in the event of an absence from any meeting of the General Committee.

Meetings of the General Committee will be held in private, unless decided otherwise, and may be attended by no more than one

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<sup>12</sup> The main committees of the Health Assembly are: (a) Committee A – to deal predominantly with program and budget matters; (b) Committee B – to deal predominantly with administrative, financial and legal matters. The Health Assembly may establish other main committees as it considers necessary. The Health Assembly, after considering recommendations of the Executive Board and the General Committee, will allocate items of the agenda to the two main committees in a way that provides an appropriate balance in the work of these committees. The chairpersons of the main committees will be elected by the Health Assembly.



member per delegation to the Health Assembly not represented thereon. These members may participate without voting in the deliberations of the General Committee if invited by the chairperson.<sup>13</sup>

## FUNCTIONS OF THE GENERAL COMMITTEE

- (a) Decide the time and place of all plenary meetings, of the meetings of the main committees, and of all meetings of committees established at plenary meetings during the session. Whenever possible, the General Committee will make known a few days in advance the date and hour of meetings of the Health Assembly and of the committees.
- (b) Determine the order of business at each plenary meeting during the session.
- (c) Propose to the Health Assembly the initial allocation to committees of agenda items, and if appropriate, the postponement of any item to a future Health Assembly.
- (d) Transfer agenda items allocated to committees from one committee to another, if necessary.
- (e) Report on any additions to the agenda under [Rule 12](#).
- (f) Coordinate the work of the main committees and all committees established at plenary meetings during the session.
- (g) Fix the date of adjournment of the session.
- (h) Otherwise facilitate the orderly dispatch of business of the session.

## OFFICIAL RECORDS OF THE EXECUTIVE BOARD

Several documents already considered by the Executive Board at its 139th and 140th sessions are reproduced as annexes to documents [EB139/2016/REC/1](#) and [EB140/2017/REC/1](#) (resolutions and decisions), respectively, and are referred to under the relevant items in both the *Journal* and the provisional agenda (document A70/1).

After either committee A or B or the General committee have reviewed a resolution, report outs are published on the WHO website summarizing the resolution, decisions made and indicating next steps member states, the Director-General or the WHO Secretariat need to take. report outs.

## Committees A and B

The “main committees” of the Health Assembly are,

- **Committee A**, which meets to deal predominantly with program and budget matters
- **Committee B**, which meets to deal predominantly with administrative, financial. and legal manners

## MEMBER STATE REPRESENTATION

Delegations will be entitled to be represented on each main committee by one of its members. They may be accompanied at meetings of the committee by one or more other members, who may be granted permission to speak but will not vote.

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<sup>13</sup> The Eighth World Health Assembly (resolution WHA8.27) adopted the following interpretation: the attendance of members of delegations under Rule 31 [now Rule 30] is limited to delegations not having one of their members serving on the General Committee.

## COMMITTEE FACILITATION

Each main committee will elect two vice chairpersons and a rapporteur<sup>14</sup>. To facilitate the conduct of business, each committee may designate an additional vice chairperson *ad interim* if its chairperson and vice chairpersons are not available.

The chairperson of each main committee will have the same powers and duties in meetings of the committee as the president of the Health Assembly in relation to plenary meetings.

Meetings of the main committees and their sub-committees will be held in public unless the committee or sub-committee concerned decides otherwise.

## SUB-COMMITTEES

The main committee may set up sub-committees or other subdivisions as it considers necessary.<sup>15</sup> The members of each sub-committee will be appointed by the main committee should there be concern upon the proposal of its chairman. A member of a sub-committee who is unable to be present at any meeting may be represented by another member of their delegation. Each sub-committee can elect its own officers.

## INTERVENTIONS OF DELEGATES



WHO/L. Cipriani

Individual statements in Committees A and B are limited to 3 minutes (330 words) and regional statements to 5 minutes (550 words). However, some delegations may require the statements to be 300 words prior to merging with other organization's statements, and a final 285-word count once merged to be submitted.

Delegates are requested to deliver statements at a normal speaking pace. Rapid delivery risks impeding clarity and accuracy in interpretation.

Non-state actors and member states wishing to have their name placed on the list of speakers in Committee A or Committee B, or to have draft resolutions distributed, should contact the Secretary of the Committee concerned (shown below)<sup>16</sup>.

- **Committee A Secretary:** Mr I. Roberts office E.1066, ext. 77123
- **Committee B Secretary:** Dr C. Ondari office E.2070, ext. 78853

<sup>14</sup> Any committee, sub-committee, or other subdivision may appoint from among its members one or more rapporteurs as required.

<sup>15</sup> The Executive Board recommends the establishment of working parties in the Health Assembly be restricted to these purposes:

1. to formulate a conclusion on which substantial agreement has been reached (whether unanimously or by an evident majority);
2. to make clear and state the issues that are before the committee for decision; and
3. to provide a committee with an expert opinion relevant to its discussions.

<sup>16</sup> Please note these are subject to change annually.

# Securing Your Attendance Registration Process

Non-state actors, including civil society, cannot engage with the WHA without online registration, and only organizations with WHO official status can register. For security reasons, all delegates are required to wear photo ID badges to access the Palais des Nations and meeting rooms and to move within the building. For this reason, during the online registration process, the Focal Point will be asked to upload a passport-style photograph of each member of the delegation.

Instructions for online registration, guidance on the nature of the image required, and brief instructions on how to upload and resize an existing image you may have, are all available on the WHO website: <http://www.who.int/governance/registration/en/>.

Inquiries concerning the system can be addressed by email to [supportregistration@who.int](mailto:supportregistration@who.int) or communicated over the telephone by dialing the number: +41 22 791 7111. **Registration should be completed by May 8, 2017.** (This is only applicable to organizations with WHO official status.)

## Credentials

Once the organization is in official relations with the WHO, delegates can apply and obtain credentials to attend the WHA. Each member, associate member, and participating IGOs and invited NGOs should communicate to the Director-General, if possible 15 days before the date fixed for the opening of the session of the Health Assembly, the names of its representatives, including all alternates, advisers, and secretaries.

Delegates of members and of the representatives of associate members will obtain credentials issued by their Head of State, Minister for Foreign Affairs, Minister of Health, or by any other appropriate authority, that

is, Permanent Missions and senior government officials, such as Directors-General for Health. These credentials should be delivered by email to the Director-General, if possible not less than one day before the opening of the session of the Health Assembly.

At the beginning of each session, the Health Assembly president proposes the appointment of a Committee on Credentials consisting of 12 delegates of as many member states. This committee shall elect its own officers. It examines the credentials of delegates of members and of the representatives of associate members and report to the Health Assembly thereon without delay. Any delegate or representative to whose admission a member has made objection will be seated provisionally with the same rights as other delegates or representatives, until the Committee on Credentials has reported and the Health Assembly has given its decision. The Bureau of the Committee shall be empowered to recommend to the Health Assembly, on behalf of the Committee, the acceptance of the formal credentials of delegates or representatives seated on the basis of provisional credentials already accepted by the Health Assembly.

Meetings of the Committee on Credentials shall be held in private.

Member states shall be represented at the Health Assembly by no more than three delegates. Alternates and advisers may accompany delegates. Credentials should include the following information for each participant:

- LAST NAME (in capital letters)
- First name
- Title (Ms., Mr., Dr., etc.)
- Function
- Institution
- City
- Gender (unless indicated in title)

Although you will submit a copy of the credential through the online registration system, member states must deliver the original credentials to the WHO Secretariat (Department of Governing Bodies) before the opening of the session of the Health Assembly. Only original documents are considered “formal credentials” by the Committee on Credentials.

# Travel

## Arrival in Geneva

Delegates, representatives, and other participants travelling by air will arrive at Geneva airport (Cointrin); those travelling by train arrive at Geneva main station (Cornavin). Taxis are available directly outside the airport and station.

Hotel reservations and other arrangements should be made well in advance.

## Visa

Swiss authorities refuse entry to people who do not have the required entry visa. Since December 12, 2008, Switzerland has applied the [Schengen Agreement](#) regulations concerning visas. Thus, participants requiring a visa to enter Switzerland must obtain a Schengen visa from the Swiss Embassy or Consulate General responsible for handling their visa application in their country of residence. In countries where there is no Swiss representation, the visa application might have to be lodged in another country where the competent representation is located.

## WHERE THERE IS NO CONSULATE

Switzerland has signed agreements with certain countries where it is not represented by a diplomatic or consular entity. Under certain conditions, these agreements allow for the issuing of visas by a Schengen State in a country where Switzerland is not represented. It is therefore strongly recommended that all participants check directly with the Swiss Embassy or Consulate General whether such agreements apply in their case. Participants can find the nearest Swiss Embassy or Consulate General responsible for their place of residence in this link: <https://www.eda.admin.ch/eda/en/home/laender-reise-information.html>

## TIMELINE FOR SECURING YOUR VISA

Delivery of a Schengen visa may take up to 20 days, so any visa application should be lodged well in advance of the expected date of travel.

## VISA TYPE

It is recommended that participants apply for a **Schengen Type C visa**, which entitles the holder to visit or transit other Schengen States, including for example, neighboring France. Exceptional cases may arise when this type of visa does not allow entry to all Schengen States. It is, therefore, strongly advised for everyone to check their type of visa before travelling to or transiting through other Schengen States.

Countries that are not required a visa to travel to Switzerland for stays of up to 90 days:

- Canada, Australia, U.S., France, United Kingdom, Italy, and Japan.

Countries that are required a visa to travel to Switzerland for stays of up to 90 days:

- India, South Africa, Zambia, Tanzania, and Kenya.

## VISA SUPPORT LETTER

Applicants must attach a visa support letter to their application. Requests for a visa support letter should be sent, as soon as possible, to [visagbs@who.int](mailto:visagbs@who.int) and include the name of the applicant as stated in the passport, function/title, employer, date of birth, nationality, passport number and details (date and place of issue and validity), and a copy of the delegation's credential.



# What to Know at the WHA

## Tips for First-time Attendees

### THINGS TO CONSIDER

- Focus on no more than 2–3 agenda items
- Track when agenda items of interest will be discussed
- Download the WHO app upon arrival in your mobile device or tablet
- Divide staff on-site to attend side events, stay in committee A and or B (if delivering statement and to track member states statements on key agenda items), attend official sessions, attend side meetings
- Take notes during committee relevant discussion sessions to track what each member state says in support or against each topic
- Have tweets prepared in advance if delivering a statement to be ready to be tweeted out while being read (develop a communications plan)
- Create a cross-cutting messaging document with main asks or things to bring up around priority issues (TB/AMR, nutrition, child health, vaccines, polio, DRM, UHC, etc.) to refer to for meetings with key stakeholders during WHA
- Attend pre-WHA informational side events
- If a technical briefing around priority issues is already being planned, ensure attendance and have key question(s) prepared to ask during the session if the opportunity arises

- Be able to clearly and concisely articulate your organization's mission, objectives and “your” role
- Wear comfortable shoes – the Palais is very large. You will be walking long distances in short time frames, and will be standing for long periods of time
- Arrive to official sessions and plenaries 30–40 minutes before they are scheduled to begin to find a seat. Should the rooms be overcapacity people who remain standing will be asked to leave the room and miss the session.
- Plan to spend time in between session in the Serpent lounge – this is where most delegates and civil society will be, there is wi-fi, water fountains, computers and a snack bar (it is the fastest place to grab something to eat). It is a good place to meet.
  - There are other cafes delegates from different regions prefer (i.e. Europeans like the Serpent Bar, many African Delegations meet in the café where you pick up the daily journal, there is a big meeting room with a café in the Palais through the big hall where the exhibition corridor is)
- Download all relevant WHA documents as they are published online – they tend to be replaced by newer versions or are taken down from the website
- Though the peacocks are lovely, for your own safety please do not get too close to them

### THINGS TO BRING

- Portable battery chargers
- An umbrella
- Laptop to take notes during sessions – typed notes are better in the long-term than handwritten to be able to report back in real time

- A bottle of water (this can be refilled throughout the Palais)
- Cash for the serpent lounge
- Printed map, letter of credential, WHA agenda (annotated)
- Your own printer paper or materials already printed; the computers available near the serpent bar are always taken, not working properly or do not have paper
- Snacks as sometimes you have to work through lunch

## List of Participants

A provisional list of delegates and other participants (document A70/DIV.1) will be distributed at the beginning of the Health Assembly. This is the most useful way to find out the name of the delegates who are attending for member states and acts as a list of key decision makers and advocacy targets.

This list will be issued based on the credentials received by the WHO Secretariat up to 4pm on Sunday, May 21<sup>st</sup>. A revised list is posted later in the WHO website. (See WHA70's list of participants: [http://apps.who.int/gb/ebwha/pdf\\_files/WHA70/WHA70\\_DIV1REV1-en.pdf](http://apps.who.int/gb/ebwha/pdf_files/WHA70/WHA70_DIV1REV1-en.pdf).)

In the event of any official change in delegation membership, delegations are kindly requested to notify the Enquiry Office in writing on form WHO23 WHA, which is available with the participant list. The form should be signed by the chief delegate.

## Visibility and Messaging

### SOCIAL MEDIA

If appropriate, the non-State actor should consider preparing a social media toolkit for use by those attending the WHA.

All participants are encouraged to use the hashtags #WHA71 throughout the duration of the pre-WHA and WHA events.

## MEDIA/NEWS

### WHO Website

Up to date information throughout the Health Assembly can be found in the WHA media center. For example, the WHA70 media center website: <http://www.who.int/mediacentre/events/2017/wha70/en/>

### Newsstand

Newspapers, magazines, books, postcards, and other items are on sale at the main kiosk in the hall near Door 6. It is open Monday to Friday from 8:15am to 5pm.

### WHO Publications

Delegates receive a 50% discount on WHO publications, which can be purchased from the WHO Press sales counter located in the “Concordia” lobby between Doors 13 and 15 at the Palais des Nations and from the WHO Bookshop at the [WHO headquarters](#). WHO souvenirs are also available both at the Palais and headquarters. Hours of operation are 9am to 4:30pm.

## On-site Information

The Health Assembly is held in the Palais des Nations, located near Place des Nations and Avenue de la Paix, and is most easily reached by the entrance gate on Route de Pregny. [See Google Maps](#). Delegates will also need to visit the WHO headquarters.

The Palais des Nations is the home of the United Nations Office at Geneva and is one of the most active centers for multilateral diplomacy in the world. Located in Geneva, Switzerland since 1946 when the Secretary-General of the United Nations signed a Headquarters Agreement with the Swiss authority. It was built between 1929 and 1938 to serve as the headquarters of the League of Nations.

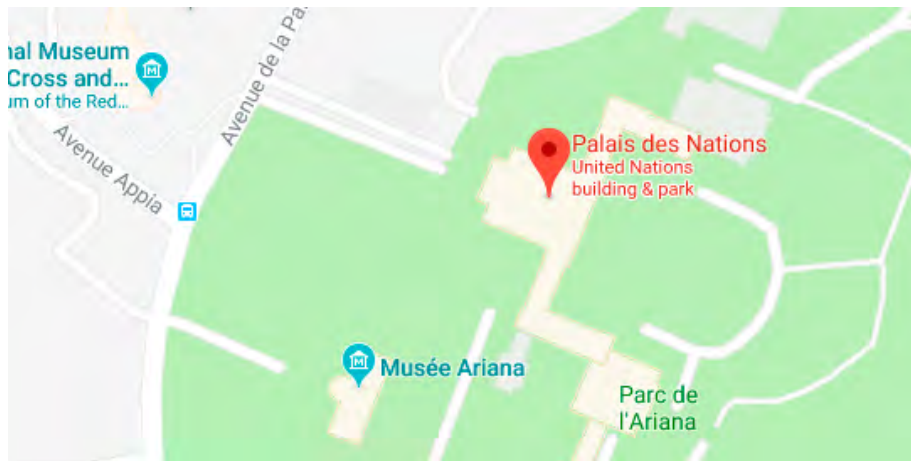
[Guided tours of the Palais des Nations](#) are offered as well as [thematic tours on Art and Architecture](#). They are exciting opportunities to discover

the emblematic building and get a behind-the-scenes perspective of the UN activities in Geneva, the history of the construction and the architectural style of the Palais des Nations, and fine artwork on display.

## IMPORTANT ADDRESSES

### WHA Venue: Palais des Nations

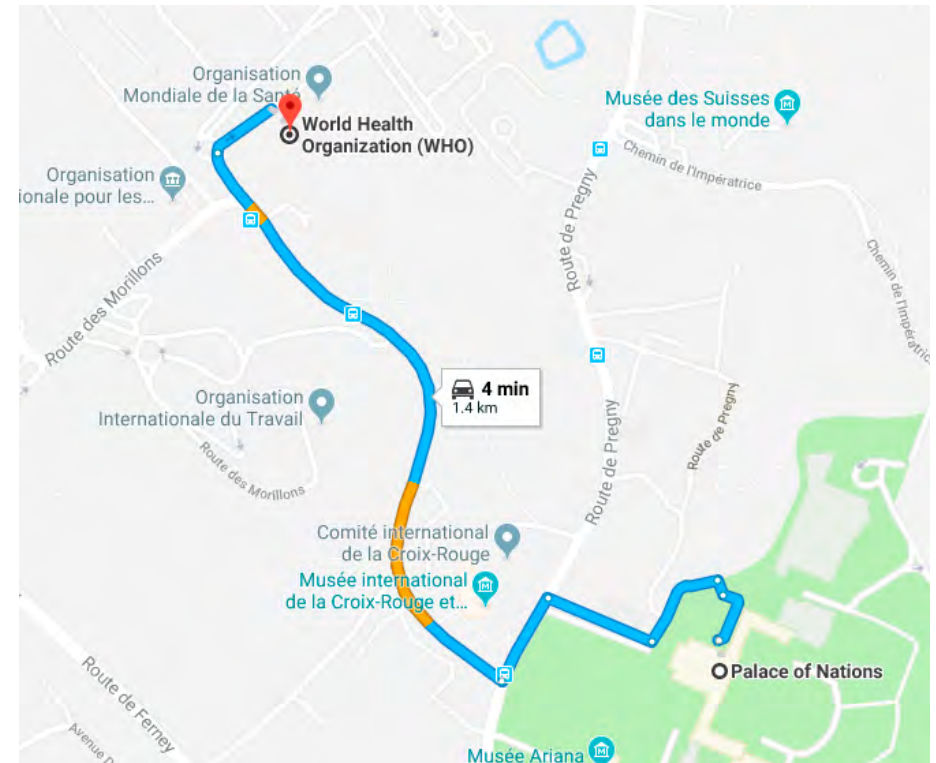
Address: 1211 Geneva, Switzerland



### WHO Headquarters

Avenue Appia 20

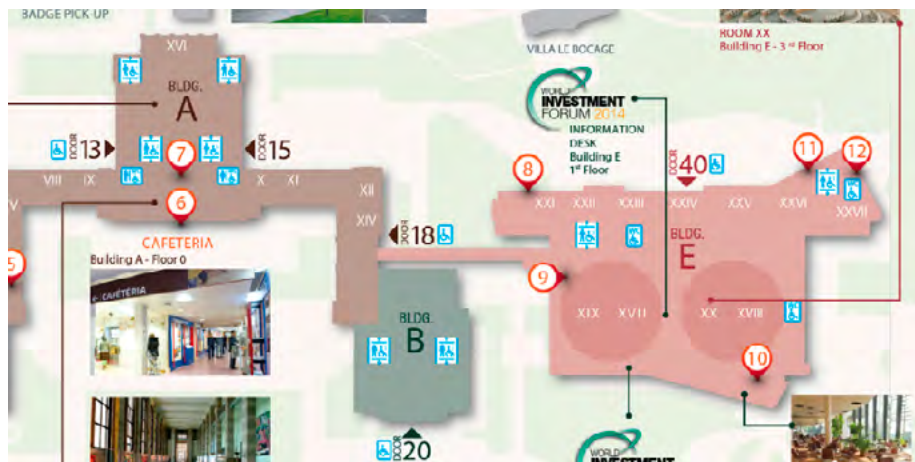
1202 Pregny-Chambésy, Switzerland



## ACCESS TO THE PALAIS DES NATIONS

The Health Assembly will meet in the Assembly block of the Palais des Nations (A Building/ Bâtiment A). The Assembly block is reached by doors 13 and 15 (“portes” in French; see the yellow circle). The plenary meetings will be held in the Assembly Hall (Salle des Assemblées), which can be reached by stairway or lift from door 13 or 15. The two main committees of the Health Assembly will meet in separate conference rooms: Committee A in Conference Room XVIII and Committee B in Conference Room XVII. Both rooms are located on the first floor of the E Building (Bâtiment E, see the blue circle).

## Map of the WHA Venue



To view a higher-res, full-scale map of the Palais des Nations, [click here](#).

## ENTRY BADGES

Delegates and other participants will be able to collect their badges from the Distribution Desk in the main lobby of [WHO headquarters](#) before the opening of the Health Assembly. The Distribution Desk has limited hours of operation; please be sure to check in advance. If a member of a non-governmental organization is attending with another NGO delegation, entry badges will be given at a location and time determined by those organizations delegation leaders (usually prior to the opening of the Assembly); please await confirmation from them.

Please note that only those individuals whose names appear on a valid credential will be issued an access badge, and access to the Palais des Nations and the meeting rooms will be restricted to persons wearing WHA badges. For security reasons, the access badge must be always worn and visible to U.N. Office-at-Geneva security staff. **You must show your WHA badge to get into the grounds (and wear it at all times within the grounds).**

A shuttle service will be available to take delegates from the WHO main entrance to the Palais. The shuttle will run from 7am to 6pm daily and may be used by delegates of member states wearing badges.

## ENQUIRY OFFICE

The Enquiry Office is located in the “Concordia” lobby, situated between doors 13 and 15 (ext. 76300). It provides guidance on a range of matters of interest to participants, and they will direct you to other services such as travel, mail, finance, and communications as needed. Additionally, you can collect personal mail or turn in or claim lost property at this office.

## INTERNET ACCESS/CYBERCAFÉ

Delegates can visit the WHO Cybercafé located in the Serpent Bar (Bar du Serpent) in the E Building (location 10 in the [map above](#)). Workstations are available, providing full access to the internet. The Cybercafé and all the meeting rooms are equipped with wireless hotspots, allowing visitors to connect to the internet with their own wireless-enabled devices. Another Cybercafé catering exclusively to Health Assembly delegates will also be available on the eighth floor of the A Building.

## WHA APP

The World Health Assembly Governing Bodies mobile app is crucial for on-site engagement. By signing in with your email and badge number you can access the daily journals, official agenda and documentation in real time. In addition, you can engage with other WHA participants including MoH and key multilateral stakeholders through the social media section of the app. If you are making statements on behalf of a delegation, it is also helpful in notifying when agenda items are being discussed or up for discussion.

## LIAISON OFFICE

A liaison office for non-State actors in official relations with WHO is set up in room A.235 (ext. 77325) to facilitate the participation of non-State actors in the Health Assembly. The document titled “Practical information for representatives of non-State actors in official relations with the WHO”, transmitted to non-State actors with the invitation letter to the Health Assembly, provides information of relevance to delegates of non-State actors, concerning such matters as registration, document display, and statements by non-State actors.



Room A.817 (ext. 77227) is available for use by non-State actors on a first-come, first-served basis during the Health Assembly. It is equipped with paper, computers, printers, and telephones (for local calls). The computers can be used for word processing and accessing the internet. Photocopying facilities are also available, free of charge, for limited numbers of copies. The room is open from 8:30am to 6:30pm.

## PUBLIC TRANSPORTATION AND TAXIS

### Buses and Trams

The WHO headquarters can be reached by bus (8, F, 5, and 28) and tram (15). Tickets, available from vending machines at main bus stops, must be purchased and validated before entering buses or trams. Electronic cards for multiple trips may be purchased from the Naville kiosk at the Palais des Nations, any news agent in town bearing the “TPG” sign, and at the main railway station (Cornavin).

- From Monday to Friday, bus “8” runs from Veyrier to WHO headquarters on Avenue Appia, passing through Rive (town centre), Place Cornavin (railway station), and Place des Nations (Palais des Nations). During weekends, this bus runs only as far as Avenue Appia.
- Bus “F” runs daily from Rue des Gares (behind the railway station) to Ferney-Voltaire, France, with stops at Place des Nations and Vy-des-Champs, next to the headquarters building.
- Bus “5” runs daily from Thonex to the airport, with stops at Place Cornavin and Place des Nations
- Bus “28” runs from Jardin Botanique with stops at Appia and Vy-des-Champs for WHO headquarters.
- Tram “15” runs daily from Palettes to Place des Nations, passing by Cornavin station.

### Free Public Transportation

Geneva International Airport is offering a free ticket for public transport in Geneva. This **Unireso ticket**, which can be obtained from the machine in the baggage collection area at the Arrivals level, allows 80 minutes’ use of public transport free of charge, including the train service from

the airport to the main railway station.

In addition, a **“Geneva Transport Card”** can be obtained by delegates from the establishment at which they are staying, enabling them to use public transport free of charge during their visit. Further information about this card is available from the Geneva Tourism and Convention Bureau (accessible online at <http://www.geneve-tourisme.ch>).

### Taxis

Geneva taxi drivers know the WHO headquarters building Avenue Appia as “OMS” (French acronym for Organisation mondiale de santé).

There are taxi queues in almost all the main squares in Geneva and outside the Palais des Nations. Taxis can be called by telephone by dialing the following numbers: 022 320 2020, 022 320 2202, and 022 331 4133. Taxis can also be ordered through the security guard on duty at the entrance gate on Route de Pregny.

Caution: taxis are very expensive.

## RESTAURANT, CAFETERIA, AND BAR

**The restaurant on the eighth floor of the Assembly block** is open from 12pm to 2:30pm from Monday to Friday for reservations (ext. 71108). The restaurant can organize private receptions (cocktail parties) and luncheons for a minimum of 25 participants. These services can also be provided on Saturdays and Sundays. Arrangements for dinners should be discussed with Eldora/U.N. (ext. 71108).

**The cafeteria on the ground floor of the Assembly block** is accessed by Lift 29; it is open from 8:15am to 4:45pm, Monday to Friday, and from 11:30am to 2:30pm on Saturday. Hot meals are served from 11:30am to 2pm (or till 2:30 for the grill only).

**The snack bar in the “Concordia” lobby**, between doors 13 and 15, is open from 7:30am to 6pm or until the close of meetings. (On Saturday, May 27<sup>th</sup>, it will be open from 7:30am till only 9am.)

**The Delegates’ Lounge, adjacent to Conference Room VII on the third floor**, is open from 8:30am to 4:45pm, Monday to Friday, and serves snacks.

**The Bar du Serpent, (Serpent Lounge) located on the first floor of the E Building**, is open from 8:30am to 5:30pm, Monday to Friday, or until the close of meetings; it also serves sandwiches (on Saturday, May 27<sup>th</sup>, it will be open from 9am to 12:30pm).

Delegates and other participants in the Health Assembly may also use **the restaurant and cafeteria at WHO headquarters**. They are open from Monday to Friday between 11am and 2:30pm.

## RESERVATION OF ROOMS FOR PRIVATE MEETINGS

To reserve conference rooms at the Palais des Nations for private meetings, address your request to the following offices:

- (a) before the opening of the Health Assembly: Conference Services at WHO (room 9016, ext. 14004)
- (b) from Monday, May 22<sup>nd</sup>: Room Reservation Service (room A.237, ext. 77120) on the second floor of the Palais des Nations

## ARRANGEMENTS FOR RECEPTIONS AT WHO

The WHO restaurant can organize receptions (cocktail parties) and luncheons. To make arrangements contact the following offices:

- (a) before the opening of the Health Assembly: WHO headquarters room 9016, ext. 14090
- (b) from Monday, May 22<sup>nd</sup>: Room Reservation Service (room A.237, ext. 77120) on the second floor of the Palais des Nations

To avoid overlapping, delegations intending to arrange receptions are urged to consult the Department for Governing Bodies.

## TELEPHONES

Telephones are available in the Palais for internal calls only. Calls inside the Palais des Nations

- a. Lift the receiver and wait for the dial tone
- b. Dial the required five-digit extension beginning with 7

### 1. Calls from the Palais des Nations to WHO

#### Either

- a. Lift the receiver and wait for the dial tone
- b. Dial 62
- c. Dial the five-digit extension required (see WHO telephone directory)

#### Or

- a. Lift the receiver and wait for the dial tone
- b. Dial 0 and wait for the second dial tone
- c. Dial 022-79 followed immediately by the five-digit extension required in WHO

### 2. Local calls within the Geneva area

- a. Lift the receiver and wait for the dial tone
- b. Dial 0 and wait for the second dial tone
- c. Dial 022 and the required number within the Geneva area

If the extension number is not known, dial the WHO switchboard number (62-99 or 62-11111).

## BANK

The UBS branch near door 6 is open from 8:30am to 4:30pm from Monday to Friday. An ATM is available on the second floor of the E building near door 41.

## MEDICAL SERVICES

A nurse is on duty from 8am to 6pm, at the WHO headquarters Medical Service (tel. +41 22791 3040) for non-emergency medical consultations. For a medical emergency during the working hours of the U.N. Medical

Service (8am to 5pm), the U.N. medical emergency protocol will be applied. **After 5pm, please call the emergency number 144.**

Delegates requiring urgent medical attention when they are not in the conference buildings are advised to dial 144 for medical or ambulance services.

## SAFETY AND SECURITY

Geneva can generally be regarded as a safe city with a low rate of violent crime. However, pickpocketing and snatching of handbags or mobile phones do occur near, or within, the train and bus stations, the airport, and in public parks.

Delegates are advised to take the following precautions when moving around the city:

- Stay alert: watch your luggage and briefcase
- Avoid walking alone at night and stay near well-lit areas
- Be aware of individuals posing as police: always ask for proper identification before surrendering your passport or complying with any requests
- Be particularly vigilant at the airport, train station, and when checking into your hotel
- Never leave anything on car seats—doing so attracts the attention of thieves—and never leave valuables in a parked car

Geneva emergency telephone numbers are,

- Police 117
- Ambulance service 144
- Fire 118
- Roadside assistance 140

If you face a security-related emergency at WHO headquarters, please contact WHO security at ext. 11117.

If you have a question concerning your security while in Geneva, please contact the WHO security office/duty officer, telephone number: +41 (0) 22 791 1152.

Security screening has increased for both vehicles and pedestrians seeking access to the Palais des Nations. Please ensure that you are in possession of the necessary accreditation to facilitate access. WHO cannot be held responsible for the loss of personal objects left unattended at meetings.

## POST OFFICE

The post office, located near door 6, is open from 8:30am to 5pm, Monday to Friday. It provides normal services including monetary operations such as electronic payments and postal and money orders. There is another post office at WHO headquarters, which is open from 8:30am to 11:30am and 12:30pm to 4:30pm, Monday to Friday.

Delegates who wish to stamp their mail with U.N. Postal Administration stamps should apply to the Administration's office, which is in the entrance hall near door 6.

## LIBRARY

The WHO Library is the world's leading library on public health; it is located in the WHO main hall and provides access to information on WHO, as well as other sources of scientific literature produced around the world in digital and print format. WHO Library resources and expertise also provide scientific evidence and knowledge to low- and middle-income countries through a set of low-cost/high-use initiatives; these are accessible on a 24-hour basis.

Nine computer stations are available—with printing option, internet and intranet access, and access to major WHO applications. Work, study, and informal meeting areas, as well as reference and research expertise are available Monday to Friday from 9am to 4pm. WHO Library guarantees staffing of the information point from 9am to 12pm and from 2pm to 4pm, Monday to Friday. However, do not hesitate to visit the Library Reference area, as library staff are always willing to assist any time between 7am and 7pm, based on staff availability (<http://www.who.int/library>). Appendix I

# Appendix I

## Code of conduct for attendees

### Participation of Representatives: associate Members, IGOs and NGOs, and of observers of non-Member States and Territories

*Rule 44:* Representatives of Associate Members may equally participate with Members in meetings of the Health Assembly and of its main committees, except they will not hold office nor have the right to vote. They may also participate equally with Members in other committees, sub-committees or other subdivisions of the Health Assembly except the General Committee and the Committee on Credentials.

*Rule 45: Observers of invited non-Member States and territories* who have applied for associate membership, may attend any open meetings of the Health Assembly or any of its main committees. They may, upon the invitation of the President, and with the consent of the Health Assembly or committee, make statement on the subjects under discussion. In addition, observers will have access to non-confidential documents and to other documents as the Director-General may see fit to make available. They may submit memoranda to the Director-General, who can determine the nature and scope of their circulation.

*Rule 46:* Subject to the terms of any agreement, **representatives of the United Nations and of other intergovernmental organizations** with which the Organization has established effective relations under Article 70 of the Constitution, may participate without voting rights in the deliberations of meetings of the Health Assembly, and its main committees. These representatives may also attend and participate without vote in the deliberations of the meetings of sub-committees or other subdivisions if so invited.

Moreover, they will have access to non-confidential documents and to other documents as the Director-General may see fit to make available. They may submit memoranda to the Director-General, who can determine the nature and scope of their circulation.

*Rule 47: Representatives of non-governmental organizations* that have consultation and co-operation status, in accordance with Article

71 of the Constitution, may be invited to attend plenary meetings and meetings of the main committees of the Health Assembly, and to participate without voting, when invited to do so by the President of the Health Assembly or by the chairman of a main committee, respectively.

## Plenary Meetings

### Plenary Meetings Conduct of Discussion

In 1997 the Health Assembly approved arrangements for the conduct of the general discussion (**statements**) in plenary meetings, which have the following implications for the 70th WHA.

- Individual statements in plenary meetings are limited to 5 minutes (550 words) and regional statements to 10 minutes (1100 words). Delegates are requested to deliver statements at a normal speaking pace. Rapid delivery risks impeding clarity and accuracy in interpretation.
- Timing will be regulated with a “traffic lights” system, visible to the whole room, which turn orange after 4 minutes and red after 5.
- Statements should focus on the theme of the Assembly
- Delegates wishing to have their names placed on the list of speakers for the general discussion should notify the Department for Governing Bodies by email ([piazzap@who.int](mailto:piazzap@who.int)) or fax +41 22 791 4173. Delegates may opt for group or regional statements in lieu of individual statements.
- Copies of statements to be made in the general discussion should be submitted to the Office of the Assistant to the Secretary of the Health Assembly, by email ([statementsWHA70@who.int](mailto:statementsWHA70@who.int)), or to room A.656 by the morning of Monday, 22 May 2017.



During the discussion of any matter, a delegate or a representative of an Associate Member may:

- move the suspension<sup>17</sup> or the adjournment<sup>18</sup> of the meeting. Such motions will not be debated, but instead be put immediately to a vote.
- move the adjournment of a debate on the item under discussion. One speaker may speak in favor of and against the motion, in addition to the proposer of the motion, after which the debate is adjourned and immediately put to a vote.
- at any time move the closure of the debate on the item under discussion whether or not any other delegate or representative of an Associate Member has signified his wish to speak. If a request is made for permission to speak against closure, it may be accorded to allow no more than two speakers, after which the motion will be immediately put to the vote. If the Health Assembly decides in favor of closure, the President will declare the debate closed and vote only on the one or more proposals moved before the closure.

The motions below will have priority in the following order over all other proposals or motions before the meeting, except a point of order:

- (a) to suspend the meeting;
- (b) to adjourn the meeting;
- (c) to adjourn the debate on the item under discussion; and
- (d) for the closure of the debate on the item under discussion.

## Plenary Meetings Business Conduct

Plenary meetings of the Health Assembly will, unless the Health Assembly decides otherwise, be open to attendance by all delegates,

alternates and advisers appointed by Members<sup>19</sup> by representatives of Associate Members appointed<sup>20</sup>, and the resolution governing the status of Associate Members, by representatives of the Board, by observers of invited non-Member States and territories on whose behalf application for associate membership has been made, and also by invited representatives of the U.N. and of other participating IGOs and NGOs admitted into relationship with the Organization.

In plenary meetings the chief delegate may designate another delegate who can have the right to speak and vote in the name of his delegation on any question. Moreover, upon the request of the chief delegate or any delegate designated by him, the President may allow an adviser to speak on any point.

*Rule 20.* Plenary meetings of the Health Assembly will be held in public unless the Health Assembly decides that exceptional circumstances require the meeting be held in private. The Health Assembly will determine the participation at private meetings beyond that of the delegations of Members (representatives of Associate Members and representative of the U.N.). Decisions of the Health Assembly taken at a private meeting should be announced thereafter at an early public meeting.

*Rule 21:* The Director-General can make arrangements for the admission of the public and of representatives of the Press and other information agencies to the plenary meetings of the Health Assembly.

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17 The temporary postponement of the business of the meeting

18 The termination of all business until another meeting is called

19 In accordance with Articles 10–12 inclusive of the [World Health Organization Constitution](#)

20 In accordance with Article 8 of the Constitution

# Appendix II

## Election Process for the WHO Director-General

### Legal Framework - note by the Legal Counsel [A70/4](#)

*Rule 106:* In fulfilling Article 31 of the WHO Constitution, the Director-General will be appointed by the Health Assembly on the nomination of the Board and on terms determined by the Health Assembly, based on all the provisions of Rules 107 to 110.

Following the rules of procedure of the WHA ([A/520/Rev.18](#)), rule 70bis “The Director-General of the World Health Organization shall be elected by a clear and strong majority of members present and voting as set forth in Rule 108 of these Rules of Procedure.”

*Rule 107:* Whenever the office of Director-General is vacant or notice is received of a pending vacancy, the Board will, at its next meeting, make a nomination which will be submitted to the next session of the Health Assembly. It will be submitted at the same time as a draft contract, establishing the terms and conditions of the appointment, salary and other remunerations attached to the position.

*Rule 108:* The Health Assembly will consider the Board’s nomination at a private meeting and will come to a decision by secret ballot voting. If the Board nominates three people, the following procedure will be followed:

(a) If in the first round of voting a candidate obtains a two-thirds majority or more of the WHO Members present and voting, it will be considered a clear and strong majority and (s) he will be appointed Director-General. If no candidate obtains the required majority, the candidate having received the least number of votes will be eliminated. If two candidates tie for the least number of votes, a separate ballot will be held between them and the candidate that receives the least number of votes will be eliminated.

(b) In the second round of voting, a candidate will be appointed Director-General if (s)he obtains a two-thirds majority or more of the Members present and voting. This will be considered a clear and strong majority.

(c) If no candidate receives the majority indicated in paragraph (b), a candidate will be appointed DG if in the second round, (s) he receives a majority of the Member States or more. This will be considered a clear and strong majority.

(d) If no candidate receives the majority indicated in paragraph (c), a candidate will be appointed DG if (s)he receives in the subsequent ballot a majority or more of the Members present and voting. This will be considered a clear and strong majority.

If the Board nominates two people, the following procedure will be followed:

(a) A candidate will be appointed DG if (s)he obtains a two-thirds majority or more of the Members present and voting, which will be considered a clear and strong majority.

(b) If no candidate receives the majority indicated in the above paragraph, a candidate will be appointed DG if (s)he receives in the subsequent ballot a majority of the Members, which will be considered a clear and strong majority.

(c) If no candidate receives the majority indicated in subparagraph (b), a candidate will be appointed DG if (s)he receives in the subsequent ballot a majority or more of the Members present and voting, which will be considered a clear and strong majority.

Alternatively, if the Board nominates one person, the Health Assembly will decide by a two-thirds majority of the Members present and voting.

*Rule 109:* Should the Health Assembly reject the Board’s nomination, the Board will submit a fresh proposal as soon as possible, based on the desirability to address the matter before the conclusion of the relevant session of the Health Assembly.

*Rule 110:* The contract of appointment will be approved by the Health Assembly and will be signed jointly by the Director-General and the President of the Health Assembly acting in the name of the Organization.

# Appointment of the Director-General

## Candidates' statements

Candidates nominated by the Board will address the Health Assembly on the morning of the second day of the opening of the Assembly, before the lunch break. Each statement will be limited to 15 minutes, the order of the statements will be decided by lot. There will be no questions and answers, and the statements will be webcast on the WHO website in all official WHO languages.

## Private meeting

The Health Assembly will consider the Board's nomination on the afternoon of the second day of the opening of the Assembly, when the session is resumed after the lunch break. It will do so at a private meeting. Accordingly, attendance will be limited to delegations of Member States, the representatives of Associate Members, the representative of the U.N. and the Secretariat. To preserve the serenity of the proceedings, candidates should not attend those meetings even if they form part of the delegation of a Member State.

## Secret ballot

The Health Assembly will reach a decision on the appointment of the Director-General by secret ballot.

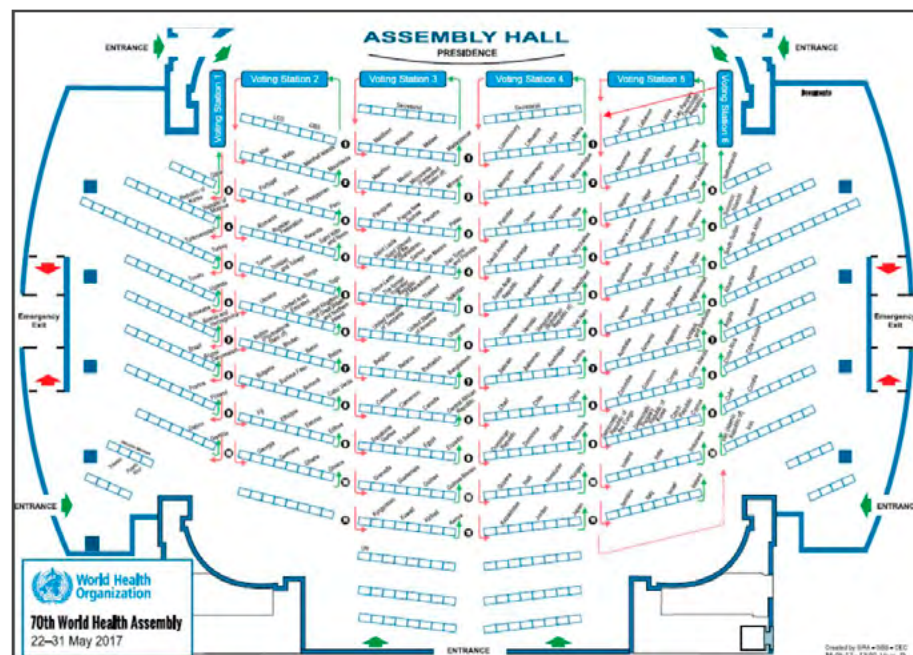
# Guiding principles for the Conduct of Elections by Secret Ballot

## Who can vote?

Each Member has one vote unless its voting privileges have been suspended by the Health Assembly. The Chief Delegates are entitled to vote on behalf of the delegation. (S)he can, however, designate another

Delegate or Alternate to vote.

- Advisers may not be designated to vote



- Chief Delegates', Delegates' and Alternates' **badges marked with two orange stripes**

## Voting Procedures

There are six voting stations at front of the Assembly Hall. Each voting station has:

- One legal officer at a desk
- One ballot box and voting shield pen on a table
- One teller

Delegates vote at the voting station in front of their section. Delegates are called row-by-row, starting with the front row. One Delegate or Alternate from each delegation walks to the voting station in front of their block and go when called as directed by the ushers; there is no need to vote strictly in order.

**BALLOT PAPER**  
**BULLETIN DE VOTE**

☐ Dr Tedros ADHANOM GHEBREYESUS

☐ Dr David NABARRO

☐ Dr Sania NISHTAR

— End of official list / Fin de la liste officielle — EDITION 23 MAY 2017

Please indicate your vote by making an anonymous mark in the appropriate box.

Prrière d'indiquer votre vote par une marque anonyme dans la case appropriée. a

**At the voting station**, delegates present their badges (with two orange stripes), receive a ballot paper, vote behind the shield on the table, fold ballot paper twice and insert into the ballot box. They return to their seats once finished.

**During the voting**, delegates remain seated unless actually voting. If they leave the Hall, they must take their access badge with them. There are no breaks between rounds of voting, nor any interruptions except on a point of order in connection with the actual conduct of voting. Any questions or concerns about the voting must be raised before the result is announced.

Three tables are placed on the podium **when counting the votes**. Two tellers and ballot boxes are placed on each table, plus one legal officer. The ballot boxes are emptied to check the number of votes casted. Then, counting of the votes proceeds and the results are recorded. Afterwards, three tellers collate the results onto one result sheet, the ballot papers are held by a legal officer and the legal Counsel delivers the result to the President.

Once the President announces **the results** of each ballot, the papers are shredded. If there is a winner, the Assembly adopts a resolution of appointment and the contract for the Director-General elect, a public meeting is held to announce the result, swear in the new Director-General and sign the contract. If there is no winner, another ballot is held.

**There can be up to four substantive rounds of voting**. Additional rounds are possible in the event of a tie. A “clear and strong majority” is required – what constitutes a clear and strong majority differs for different rounds (Rule 108).

<p>Round One of Voting</p> <p><b>3 candidates</b></p> <ul style="list-style-type: none"> <li>Two-thirds majority or more of the Members present and voting               <ul style="list-style-type: none"> <li>Excludes abstentions, null and void votes</li> <li>Ex: if 185 valid votes, the majority required is 124</li> </ul> </li> <li>If no candidate obtains the required majority, the candidate with the least number of votes is eliminated</li> </ul>	<p>Round Two of voting</p> <p><b>2 candidates</b></p> <ul style="list-style-type: none"> <li>Two-thirds majority or more of the Members present and voting               <ul style="list-style-type: none"> <li>Excludes abstentions, null and void votes</li> <li>Ex: if 185 valid votes, the majority required is 124</li> </ul> </li> <li>If no candidate obtains the required majority, a third round of voting takes place</li> </ul>
<p>Round Three of Voting</p> <p><b>2 candidates</b></p> <ul style="list-style-type: none"> <li>A majority of the Member States of the WHO or more               <ul style="list-style-type: none"> <li>Ex: if 194 Members the majority required is 98</li> </ul> </li> <li>If no candidate obtains the required majority, a fourth round of voting takes place</li> </ul>	<p>Round Four of Voting</p> <p><b>2 candidates</b></p> <ul style="list-style-type: none"> <li>A majority or more of the Members present and voting               <ul style="list-style-type: none"> <li>Excludes abstentions, null and void votes</li> <li>Ex: if 185 valid votes, the majority required is 93</li> </ul> </li> <li>In the case of a tie, the ballot is re-run (Rule 82)</li> </ul>

## Tellers and Ushers

Following regional consultation, there are six tellers appointed by the President. The tellers are responsible for ballot boxes, and counting the votes. Three of them collate the results onto one record sheet. Ushers, meanwhile direct voters to voting stations and back to their seats.

## Legal Officers

There are six legal officers who check entitlement to vote, and hand out and record ballot papers. Three of them assist tellers with the ballot count. Other legal officers assist and advise as necessary, guard, distribute and shred ballot papers.

Delegates are required to abide by the code of conduct to vote. They are advised to avoid behaviors and actions that could be perceived as aiming at influencing the appointment, refrain from communicating or broadcasting the proceedings through electronic devices, and refrain from publicly announcing in advance an intention to vote for a particular candidate.

## Appointing the new DG

Once the secret ballot is concluded, the Health Assembly considers a draft resolution on the appointment of the new Director-General. In line with the approach of previous Health Assemblies, this could read as follows: *The Seventieth World Health Assembly, on the nomination of the Executive Board, appoints ..... as Director-General of the World Health Organization.*

## Approval of the contract

The Health Assembly will also approve the contract setting out the terms and conditions of the appointment, salary and other remunerations related to the office of Director-General. In doing so, the Health Assembly considers the draft contract and draft resolution submitted to it by the Board. For more information on the approval of the draft contract of the Director-General, see document [A70/5](#).

## Announcement of the new Director-General, taking of the oath of office and signing of the contract

The decision of the Health Assembly is announced at an early public meeting likely to take place immediately following the conclusion of the private meeting that holds the secret ballot and approves the contract. The resolution on the appointment of the DG is read, then the DG elect is invited to take the oath of office. The resolution on the contract is also read and the contract will be signed by the Director-General elect and the President of the Health Assembly, acting in the name of the WHO.

## Term of office

The term of office of the Director-General is five years (beginning in July, post the Health Assembly), and (s)he will be eligible for reappointment once only.

## Resources for Election Process of Director-General

- Documentation, Election Process, Governance: <http://apps.who.int/gb/ep/>
- Handbook on the Election Process for the Director-General: [http://apps.who.int/gb/ep/pdf/Handbook\\_on\\_DG\\_election\\_process-Jan-2017-TOC-en.pdf](http://apps.who.int/gb/ep/pdf/Handbook_on_DG_election_process-Jan-2017-TOC-en.pdf)
- Frequently asked questions: [http://apps.who.int/gb/ep/e/e\\_ep-faqs.html](http://apps.who.int/gb/ep/e/e_ep-faqs.html)



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