

SIXTY-SIXTH WORLD HEALTH ASSEMBLY

A66/DIV/3 28 May 2013

Decisions and list of resolutions

I. DECISIONS

WHA66(1) Composition of the Committee on Credentials

The Sixty-sixth World Health Assembly appointed a Committee on Credentials consisting of delegates of the following Member States: Afghanistan, Canada, Cook Islands, Malawi, Mali, Mongolia, Nicaragua, Republic of Moldova, Romania, Sri Lanka, Turkey, Uganda.

(First plenary meeting, 20 May 2013)

WHA66(2) Election of officers of the Sixty-sixth World Health Assembly

The Sixty-sixth World Health Assembly elected the following officers:

Vice-Presidents:	Dr José V. Dias Van-Dúnem (Angola)
	Dr Ahmed bin Mohamed bin Obaid Al Saidi (Oman)
	Mr Vidyadhar Mallik (Nepal)
	Dr Raisa Bogatyryova (Ukraine)
	Dr Florence Duperval Guillaume (Haiti)

(First plenary meeting, 20 May 2013)

WHA66(3) Establishment of the General Committee

The Sixty-sixth World Health Assembly, after considering the recommendations of the Committee on Nominations, elected the delegates of the following 17 countries as members of the General Committee: Chile, China, Cuba, Fiji, France, Honduras, Iraq, Ireland, Kazakhstan, Namibia, Russian Federation, Rwanda, Sao Tome and Principe, South Africa, Thailand, United States, Yemen.

(First plenary meeting, 20 May 2013)

WHA66(4) Adoption of the agenda

The Sixty-sixth World Health Assembly adopted the provisional agenda prepared by the Executive Board at its 132nd session, with the deletion of two items and the transfer of one item from Committee B to Committee A and the transfer of six items from Committee B.

(Second plenary meeting, 20 May 2013 and eighth plenary meeting, 24 May 2013)

WHA66(5) Election of officers of the main committees

The Sixty-sixth World Health Assembly elected the following officers of the main committees:

Committee A:	Chairman	Dr Walter T. Gwenigale (Liberia)
Committee B:	Chairman	Mrs Kathryn Tyson (United Kingdom of Great Britain
		and Northern Ireland)

(First plenary meeting, 20 May 2013)

The main committees subsequently elected the following officers:

Committee A:	Vice-Chairmen	Dr Lester Ross (Solomon Islands) Dr Sania Nishtar (Pakistan)
	Rapporteur	Dr Victor Cuba Oré (Peru)
Committee B:	Vice-Chairmen	Dr Daisy Corrales Diaz (Costa Rica) Dr Poonam Khetrapal Singh (India)
	Rapporteur	Mr Jilali Hazim (Morocco)
		(First meetings of Committees A and B

(First meetings of Committees A and B, 20 and 22 May 2013, respectively)

WHA66(6) Verification of credentials

The Sixty-sixth World Health Assembly recognized the validity of the credentials of the following delegations: Afghanistan; Albania; Algeria; Andorra; Angola; Antigua and Barbuda; Argentina; Armenia; Australia; Austria; Azerbaijan; Bahamas; Bahrain; Bangladesh; Barbados; Belarus; Belgium; Belize; Benin; Bhutan; Bolivia (Plurinational State of); Bosnia and Herzegovina; Botswana; Brazil; Brunei Darussalam; Bulgaria; Burkina Faso; Burundi; Cambodia; Cameroon; Canada; Cape Verde; Central African Republic; Chad; Chile; China; Colombia; Comoros; Congo; Cook Islands; Costa Rica; Côte d'Ivoire; Croatia; Cuba; Cyprus; Czech Republic; Democratic People's Republic of Korea; Democratic Republic of the Congo; Denmark; Djibouti; Dominican Republic; Ecuador; Egypt; El Salvador; Equatorial Guinea; Eritrea; Estonia; Ethiopia; Fiji; Finland; France; Gabon; Gambia; Georgia; Germany; Ghana; Greece; Grenada; Guatemala; Guinea; Guinea; Guinea-Bissau; Guyana; Haiti; Honduras; Hungary; Iceland; India; Indonesia; Iran (Islamic Republic of); Iraq; Ireland; Israel; Italy; Jamaica; Japan; Jordan; Kazakhstan; Kenya; Kiribati; Kuwait;

Lao People's Democratic Republic; Latvia; Lebanon; Lesotho; Liberia; Libya; Lithuania; Luxembourg; Madagascar; Malawi; Malaysia; Maldives; Mali; Malta; Mauritania; Mauritius; Mexico; Monaco; Mongolia; Montenegro; Morocco; Mozambique; Myanmar; Namibia; Nepal; Netherlands; New Zealand; Nicaragua; Niger; Nigeria; Norway; Oman; Pakistan; Panama; Papua New Guinea; Paraguay; Peru; Philippines; Poland; Portugal; Qatar; Republic of Korea; Republic of Moldova; Romania; Russian Federation; Rwanda; Saint Kitts and Nevis; Saint Lucia; Samoa; San Marino; Sao Tome and Principe; Saudi Arabia; Senegal; Serbia; Seychelles; Sierra Leone; Singapore; Slovakia; Slovenia; Solomon Islands; Somalia; South Africa; South Sudan; Spain; Sri Lanka; Sudan; Suriname; Swaziland; Sweden; Switzerland; Syrian Arab Republic; Tajikistan; Thailand; The former Yugoslav Republic of Macedonia; Timor-Leste; Togo; Tonga; Trinidad and Tobago; Tunisia; Turkey; Turkmenistan; Tuvalu; Uganda; Ukraine; United Arab Emirates; United Kingdom of Great Britain and Northern Ireland; United Republic of Tanzania; United States of America; Uruguay; Uzbekistan; Vanuatu; Venezuela (Bolivarian Republic of); Viet Nam; Yemen; Zambia; Zimbabwe.

(Sixth plenary meeting, 22 May 2013)

WHA65(7) Election of Members entitled to designate a person to serve on the Executive Board

The Sixty-sixth World Health Assembly, after considering the recommendations of the General Committee, elected the following as Members entitled to designate a person to serve on the Executive Board: Albania, Andorra, Argentina, Brazil, Democratic People's Republic of Korea, Egypt, Japan, Namibia, Republic of Korea, Saudi Arabia, South Africa, Suriname.

(Eighth plenary meeting, 24 May 2013)

WHA66(8) Financing of WHO

The Sixty-sixth World Health Assembly decided to establish a financing dialogue, convened by the Director-General and facilitated by the Chairman of the Programme, Budget and Administration Committee of the Executive Board, on the financing of the programme budget, with the first financing dialogue on the Programme budget 2014–2015 to take place in 2013, in accordance with the modalities described in document A66/48.

(Eighth plenary meeting, 24 May 2013)

WHA66(9) Strategic resource allocation methodology

The Sixty-sixth World Health Assembly decided to request the Director-General to propose, for consideration by the Sixty-seventh World Health Assembly, in consultation with Member States, a new strategic resource allocation methodology in WHO, starting with the programme budget for 2016–2017, utilizing a robust, bottom-up planning process and realistic costing of outputs, based on clear roles and responsibilities across the three levels of WHO.

(Eighth plenary meeting, 24 May 2013)

WHA66(10) Substandard/spurious/falsely-labelled/falsified/counterfeit medical products

The Sixty-sixth World Health Assembly, having considered the report on substandard/spurious/ falsely-labelled/falsified/counterfeit medical products,¹ decided to recommend that the chairmanship of the Steering Committee on the Member State mechanism on substandard/spurious/falsely-labelled/ falsified/counterfeit medical products operate on the basis of rotation, on an interim basis, without prejudice to the existing terms of reference for the mechanism.

(Ninth plenary meeting, 27 May 2013)

WHA66(11) Appointment of representatives to the WHO Staff Pension Committee

(1) The Sixty-sixth World Health Assembly nominated Dr Viroj Tangcharoensathien of the delegation of Thailand as a member for a three-year term until May 2016 and the most senior alternate member, Mrs Palanitina Tupuimatagi Toelupe of the delegation of Samoa, as a member for the remainder of her term of office until May 2014.

(2) The Sixty-sixth World Health Assembly nominated Dr Mahmoud N. Fikry of the delegation of United Arab Emirates and Mr Alejandro Henning of the delegation of Argentina as alternate members of the WHO Staff Pension Committee for three-year terms until May 2016.

(Ninth plenary meeting, 27 May 2013)

WHA66(12) Follow-up of the report of the Consultative Expert Working Group on Research and Development: Financing and Coordination

(1) The Sixty-sixth World Health Assembly requested the Director-General, in order to take forward action in relation to monitoring, coordination and financing for health research and development, and in line with resolution WHA66.22, to convene a technical consultative meeting over two to three days in order to assist in the identification of demonstration projects that:

(a) address identified research and development gaps related to discovery, development and/or delivery, including promising product pipelines, for diseases that disproportionally affect developing countries, particularly the poor, and for which immediate action can be taken;

(b) utilize collaborative approaches, including open-knowledge approaches, for research and development coordination;

(c) promote the de-linkage of the cost of research and development from product price; and

(d) propose and foster financing mechanisms including innovative, sustainable and pooled funding;

¹ Document A66/22.

(2) The demonstration projects should provide evidence for long-term sustainable solutions;

(3) The technical consultative meeting will be open to all Member States.¹ The Director-General shall invite experts from relevant health research and development fields and experts with experience in managing funds for research and development while safeguarding WHO and public health from undue influence by any form of real, perceived or potential conflicts of interest;

(4) The Director-General shall consult with regional directors in accordance with established WHO practice in order to ensure regional representation and diversity of expertise and experience;

(5) The meeting will be in two parts: firstly a technical discussion among the experts followed by a briefing to and discussion by Member States;

(6) The meeting should be held by the end of 2013 and should be complementary to the regional consultations referred to in operative paragraphs 2(6) and 4(4) of resolution WHA66.22;

(7) A report of the meeting will be presented by the Director-General to the Executive Board at its 134th session.

(Ninth plenary meeting, 27 May 2013)

WHA66(13) Selection of the country in which the Sixty-seventh World Health Assembly would be held

The Sixty-sixth World Health Assembly, in accordance with Article 14 of the Constitution, decided that the Sixty-seventh World Health Assembly would be held in Switzerland.

(Ninth plenary meeting, 27 May 2013)

II. RESOLUTIONS

- WHA66.1 Twelfth General Programme of Work, 2014–2019
- WHA66.2 Programme budget 2014–2015
- WHA66.3 Amendments to the Financial Regulations and Financial Rules
- WHA66.4 Towards universal eye health: a global action plan 2014–2019
- WHA66.5 Health conditions in the occupied Palestinian territory, including east Jerusalem, and in the occupied Syrian Golan

¹ And, where applicable, regional economic integration organizations.

WHA66.6	Financial report and audited financial statements for the period 1 January 2012–31 December 2012
WHA66.7	Implementation of the recommendations of the United Nations Commission on Life-Saving Commodities for Women and Children
WHA66.8	Comprehensive mental health action plan 2013–2020
WHA66.9	Disability
WHA66.10	Follow-up to the Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases
WHA66.11	Health in the post-2015 development agenda
WHA66.12	Neglected tropical diseases
WHA66.13	Status of collection of assessed contributions, including Member States in arrears in the payment of their contributions to an extent that would justify invoking Article 7 of the Constitution
WHA66.14	Special arrangements for settlement of arrears: Tajikistan
WHA66.15	Scale of assessments for 2014–2015
WHA66.16	Foreign exchange risk management
WHA66.17	Report of the External Auditor
WHA66.18	Follow-up of the report of the Working Group on the Election of the Director-General of the World Health Organization
WHA66.19	Real estate
WHA66.20	Agreement between the World Health Organization and the South Centre
WHA66.21	Reassignment of South Sudan from the Eastern Mediterranean Region to the African Region
WHA66.22	Follow-up of the report of the Consultative Expert Working Group on Research and Development: Financing and Coordination
WHA66.23	Transforming health workforce education in support of universal health coverage
WHA66.24	eHealth standardization and interoperability