

## 162nd SESSION OF THE EXECUTIVE COMMITTEE

Washington, D.C., USA, 18-22 June 2018

---

Provisional Agenda Item 7.21-  
A

CE162/INF/21  
30 May 2018  
Original: English

### A. SEVENTY-FIRST WORLD HEALTH ASSEMBLY

1. The Seventy-first World Health Assembly of the World Health Organization (WHO) was held 21-26 May 2018 in Geneva, Switzerland, and attended by representatives and delegates of 191 Member States. The President of the Assembly was Zimbabwe, represented by Dr. Pagwesese David Parirenyatwa. Five countries served as vice-presidents: Djibouti, Dominican Republic, Kazakhstan, Maldives, and the Philippines, in representation of their respective regions.
  2. The Dominican Republic, represented by Dr. Rafael Sánchez Cárdenas, Minister of Public Health, served as Vice President of the Assembly, representing the Region of the Americas, and in that capacity had the opportunity to lead the plenary session of the Assembly on several occasions. Ecuador served as Vice President of Committee A and El Salvador as Rapporteur of Committee B. The Americas was represented at the General Committee by Argentina, Barbados, Cuba, and the United States of America, as well as Dominican Republic in its role as Vice President of the Assembly; and in the Committee of Credentials by El Salvador and Jamaica.
  3. In his opening remarks, Dr. Tedros Adhanom Ghebreyesus, Director-General of WHO, praised those that dedicated their lives in *pro* of the health of all and dedicated his speech to Dr. Carlo Urbani, the first to identify severe acute respiratory syndrome. The Director-General spoke of the responsibility that falls upon WHO and expressed his pride in the swift response regarding the most recent Ebola outbreak in the Democratic Republic of the Congo, noting that at this time the Organisation was in a much better place to deal with an outbreak than in 2014. Dr. Tedros enumerated several initiatives aimed at strengthening health systems in which WHO is involved, including: the High-Level Commission on Noncommunicable Diseases, the initiative on climate change and health in small island developing States, the Stop TB Partnership, an aggressive new initiative to jumpstart progress in the fight against malaria, a call to action to eliminate cervical cancer, and a new initiative to eliminate trans-fats from the global food supply by 2023, among others.
-

4. The Director-General addressed what he believed were the keys to success in order to deliver an impact in countries and make a measurable difference in the lives of the people served by WHO. One such key was the need for a stronger, transformed WHO, with the following as its foundation: *a*) the General Programme of Work (GPW); *b*) a transformation plan to make WHO more efficient and effective; *c*) a strong senior leadership team from all over the world; and *d*) the development of a new investment case that describes what a fully-funded WHO could achieve. In order to execute the GPW, the Director-General urged all countries to support WHO with high-quality, flexible funds, which some countries had already started doing.

5. Dr. Tedros spoke of the importance of political commitment, addressing his priority of engaging with leaders all over the world to advocate for political action on health, particularly on universal health coverage. Taking into account every country's unique journey toward universal health coverage, Dr. Tedros believed the key was "primary care that delivers the services that people say they need, rather than the services someone else decides they should have" (1). The Director-General believed the upcoming Global Conference on Primary Healthcare in Kazakhstan in October would be a vital step and a second chance to deliver on the promise and commitment of Alma-Ata in 1978, which had failed to deliver thus far as a result of a lack of political commitment. The Director-General expressed that partnerships must be even deeper and stronger and noted the myriad other organizations from around the world with the same vision as WHO, which possess additional knowledge, skills, resources, and networks.

6. Dr. Tedros closed by noting the stories of triumph and hope encountered in his first year as Director-General, expressing that each experience is a reminder that targets, plans, strategies, guidelines, and meetings are not the foundation of WHO. Rather, the reason the Organisation exists is people: "to promote health, keep the world safe, and serve the vulnerable" (1).

7. The President of Rwanda, Paul Kagame, was a special guest at the opening session of the Assembly. In his keynote address, President Kagame emphasized that universal health coverage is the world's priority and that strong political leadership would be necessary at every stage, and stressed the need to be reminded of the transformational nature of universal health coverage.

8. President Kagame continued his speech by signaling the reasons to strive for universal health coverage and highlighted: *a*) the affordability for countries at all income levels, as shown by examples throughout Africa; *b*) the early emphasis on primary healthcare as an effective strategy for rebuilding trust between citizens and government; and *c*) the forward-looking and entrepreneurship that is inspired by universal health coverage, allowing people to think of their future.

9. President Kagame closed by praising Dr. Tedros and WHO staff for the rapid and effective response to serious health emergencies in Africa over the past year, most recently the Ebola outbreak in the Democratic Republic of Congo.

10. During the Assembly, there was active participation and involvement from countries of the Region of the Americas in engaging in negotiations regarding resolutions and sponsoring side events. Speaking at the plenary of the Assembly, close to 30 Member States of the Americas reaffirmed their commitment to achieving, or strengthening, universal health. In a ceremony held during the Assembly, the Pro Palliative Care Unit Foundation of Costa Rica was awarded WHO's Sasakawa Health Prize for its contribution to the rights of children with terminal illnesses.

11. The agenda of the Assembly included general items, some related to technical and health issues, as well as administrative, budgetary, and institutional items. As on previous occasions, these matters were dealt with in committees A and B, and in plenary sessions.

12. The documents related to this report can be consulted at the WHO website: [http://apps.who.int/gb/e/e\\_wha71.html](http://apps.who.int/gb/e/e_wha71.html).

13. A list of the resolutions and decisions adopted by the World Health Assembly that are of interest to the Region, the related PAHO resolutions, and some of the implications that the WHA resolutions have for the Region can be found in the Annex.<sup>1</sup>

#### **Other Matters: Executive Board**

14. The 143rd Session of the Executive Board was held on 28-29 May 2018. The Chair of the Executive Board was Ambassador Maria Nazareth Farani Azevêdo, of Brazil. With Canada's and the Dominican Republic's term coming to an end, Chile and the United States of America were elected to join Brazil, Colombia, Jamaica, and Mexico in occupying the six seats of the Board that represent the Region of the Americas. Furthermore, with the end of term of Dominican Republic, Brazil will occupy the second seat of the Americas in Programme, Budget and Administration Subcommittee. The region has two seats in the PBAC and the other is occupied by Mexico.

15. The agenda of the 143rd Session of the Executive Board included 14 items, including three on governance reform, one on hosted partnerships, and the statement by the representative of the WHO Staff Association, among others. In matters for information two items were discussed: the report on a meeting of expert committees and study groups, and the international classification of diseases.

16. Finally, the Board took note of the reports submitted and approved the date and location of the Seventy-second World Health Assembly. The Executive Board decided that the Seventy-second World Health Assembly be held at the Palais des Nations, in Geneva, starting on 20 May 2019 and ending no later than 28 May 2019. The Board also decided that its 144th Session would begin on 24 January 2019, at WHO headquarters in Geneva, and would end no later than 1 February 2019; that the Programme, Budget and

---

<sup>1</sup> A more exhaustive analysis of the implications of the WHO Resolutions for the Region will be presented during the 56th Directing Council to be held 24-28 September 2018.

Administration Committee of the Executive Board would hold its 29th meeting on 21-23 January 2019, at WHO headquarters in Geneva.

17. The full versions of these reports, as well as other related documents, can be consulted at the WHO website: [http://apps.who.int/gb/e/e\\_eb143.html](http://apps.who.int/gb/e/e_eb143.html).

#### **Action by the Executive Committee**

18. The Executive Committee is invited to take note of the resolutions in the Annex, consider their implications for the Region of the Americas, and provide any comments it deems relevant.

#### **References**

1. World Health Organization. Opening address by Tedros Adhanom Ghebreyesus, WHO Director-General [Internet]. 71st World Health Assembly; 21 May 2018; Geneva, Switzerland. Geneva (Switzerland): WHO; 2018. Available at: <http://www.who.int/dg/speeches/2018/opening-world-health-assembly/en/>.

## Annex

**Table 1. Resolutions Adopted by the 71st World Health Assembly, Documents of Reference, and Implications for the Region of the Americas**

Resolution	Items and Reference Documents	PAHO Resolutions and Documents	Implications for the Region <sup>1</sup> Progress in the Region
<a href="#">WHA71.1</a> Thirteenth General Programme of Work, 2019–2023 <sup>1</sup>	Draft thirteenth general programme of work 2019-2023 Documents <a href="#">A71/4</a> , A71/4 Add.1 and EB142/2018/REC/1, resolution <a href="#">EB142.R2</a>	<a href="#">CE162/INF/2</a> Proposed Process for Development of the PAHO Strategic Plan 2020-2025	<p>The 13th General Programme of Work (GPW) sets the strategic vision and direction for the Organization for the next five years. A results framework defining the impact and outcome goals and targets of the 13th GPW is under development and is expected to be finalized by August 2018.</p> <p>The implications for the Region include programmatic, budget and chronological aspects. There will be an overlap in the final year (2019) of the implementation of the current PAHO Strategic Plan 2014-2019 and approved Program and Budget (PB) 2018-2019 (any changes require Member States approval). Given the timing of the approval of the 13th GPW in May 2018, it is not possible to introduce changes in time for meaningful implementation in 2019.</p> <p>Member States of the Americas Region will have an opportunity to consider new programmatic priorities in the PAHO Strategic Plan 2020-2025 (SP 20-25) and corresponding PBs. The new PAHO Strategic Plan will respond to both the 13th GPW and the priorities set for the Region by Member States in the Sustainable Health Agenda for the Americas 2018-2030 (SHAA2030). PAHO does not anticipate major issues aligning with the 13th GPW at the impact and outcome levels. It will be also necessary to ensure budgetary alignment of the PB 20-21 and 22-23.</p>

<sup>1</sup> A more exhaustive analysis of the implications of the WHO Resolutions for the Region will be presented during the 29th Pan American Sanitary Conference.

Resolution	Items and Reference Documents	PAHO Resolutions and Documents	Implications for the Region <sup>1</sup> Progress in the Region
<p><a href="#">WHA71.2</a> Preparation for the third High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases, to be held in 2018</p>	<p>Preparation for the third High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases, to be held in 2018 Documents <a href="#">A71/14</a> and <a href="#">A71/14 Add.1</a></p>	<p><a href="#">CSP29/11</a> (2017) Strategy and Plan of Action to Strengthen Tobacco Control in the Region of the Americas 2018-2022</p> <p><a href="#">CD55/INF/12-C</a> (2016) Plan of Action for the Prevention and Control of Noncommunicable Diseases: Midterm Review</p> <p><a href="#">CD53/INF/4, Rev. 1</a> (2014) Report on the United Nations General Assembly High-level Meeting on the Progress Achieved in the Prevention and Control of Noncommunicable Diseases</p> <p><a href="#">CD52.R9</a> (2013) Plan of Action for the Prevention and Control of Noncommunicable Diseases</p> <p><a href="#">CSP28.R13</a> (2012) Strategy for the Prevention and Control of Noncommunicable Diseases</p>	<p>This report describes the global NCD situation, progress in and barriers for reaching national NCD commitments, and actions needed by WHO and Member States in preparing for the High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases, to be held in 2018.</p> <p>In January 2018, the President of the United Nations General Assembly will appoint two co-facilitators who will lead a consultation with Member States to agree on the scope, dates, format and level of participation of the HLM.</p> <p>The HLM in 2018 will provide an opportunity to showcase progress in our Region on the four time-bound commitments of establishing national NCD plans, implementing risk factor reduction policies, improving health systems for NCD management, and surveillance.</p> <p>PAHO will continue to support its Member States on NCDs, as they prepare for participation in the HLM.</p>
<p><a href="#">WHA71.3</a> Preparation for a high-level meeting of the General Assembly on ending tuberculosis</p>	<p>Preparation for a high-level meeting of the General Assembly on ending tuberculosis Documents <a href="#">A71/15</a>, <a href="#">A71/16</a>, <a href="#">A71/16 Add.1</a> and EB142/2018/REC/1, resolution <a href="#">EB142.R3</a></p>	<p><a href="#">CD54.R10</a> (2015) Plan of Action for the Prevention and Control of Tuberculosis</p> <p><a href="#">CD46.R12</a> (2005) Regional Strategy for Tuberculosis Control for 2005-2015</p>	<p>Documents A71/15 and A71/16 provide reports on the background and preparations for the high-level meeting of the General Assembly on ending tuberculosis, to be held in September 2018. It aims to galvanize the political commitment needed to step up the implementation of the End TB strategy and help accelerate progress towards ending the TB epidemic. The Moscow Declaration to End TB of 2017 provides commitments and calls to action to advance the TB response within the Sustainable Development Agenda; ensuring sufficient and sustainable</p>

Resolution	Items and Reference Documents	PAHO Resolutions and Documents	Implications for the Region <sup>1</sup> Progress in the Region
			<p>financing; pursuing science, research and innovation; and developing a multi-sectoral accountability framework.</p> <p>The resolution adopted urges Member States to support the preparations of the high-level meeting and pursue the implementation of all the commitments of the Moscow Declaration to End TB. It also requests the Director General of WHO to support the implementation of the Moscow Declaration in countries and to continue providing guidance and assistance to Member States on this matter.</p> <p>Member states of the Americas adopted the End TB Strategy through the current Plan of Action for the Prevention and Control of Tuberculosis and several of them have endorsed the Moscow Declaration. The UNGA high-level meeting will allow for more political commitment for TB, wider participation of stakeholders, better accountability and a push to all countries in the continent to move forward towards eliminating TB as a public health problem and be the first Region in the world to do so.</p>
<a href="#">WHA71.4</a> Cholera prevention and control			<p>The approved resolution urges Member States to strengthen national policies and plans regarding the prevention and management of cholera among others. The resolution also requests the Director-General to increase capacity to support countries to scale up their ability to implement and monitor interventions for cholera prevention, control and elimination.</p>
<a href="#">WHA71.5</a> Addressing the burden of snakebite envenoming	Global snakebite burden Documents <a href="#">A71/17</a> and EB142/2018/REC/1, resolution <a href="#">EB142.R4</a>	<a href="#">CD55/15</a> and <a href="#">CD55.R9</a> (2016) Plan of Action for the Elimination of Neglected Infectious Diseases and Post-Elimination Actions 2016-2022  <a href="#">RIMSA 15</a> (2008) Mentioned by the	<p>The document offers a situation analysis of the issues around snakebite, such as poor availability and accessibility of appropriately manufactured and quality-assured products. Market weakness that hinders investment in research and development, particularly in relation to improving current treatments and developing the next generation of biotherapeutics to reduce cost, improve safety and increase effectiveness.</p>

Resolution	Items and Reference Documents	PAHO Resolutions and Documents	Implications for the Region <sup>1</sup> Progress in the Region
		ministers of health and agriculture.	<p>WHO has included snakebite envenoming as part of the Organization’s wider efforts to overcome the global impact of neglected tropical diseases, a diverse group of communicable and zoonotic diseases that prevail mainly under tropical and subtropical conditions. The Assembly is invited to note the report and provide further guidance on the Organization’s response to the global snakebite burden.</p> <p>This issue is of health importance for PAHO member countries because it is a neglected health problem in our Region, from the perspective of the epidemiological situation of accidents by venomous animals, as well as the distribution of sera and antivenoms.</p>
<p><a href="#">WHA71.6</a> WHO global action plan on physical activity 2018–2030</p>	<p>Physical activity for health Documents <a href="#">A71/18</a> and EB142/2018/REC/1, resolution <a href="#">EB142.R5</a></p>	<p><a href="#">CE162/INF/20-B</a> (2018) Plan of Action for the Prevention of Obesity in Children and Adolescents: Midterm review</p> <p><a href="#">CD53.R13</a> (2014) Plan of Action for the Prevention of Obesity in Children and Adolescents</p>	<p>The document is a draft global action plan on physical activity. It contains four strategic objectives aiming at achieving a concrete 15% relative reduction on the global prevalence of physical inactivity by 2030: 1) changes on social norms and attitudes; 2) creating/(re)shaping active environments; 3) creating access to opportunities and programs to help people engage in regular physical activity; 4) application of a systems approach to strengthen/enable better governance of all physical activity related policies and its respective policy makers and leading sectors.</p> <p>All current and previous PAHO action plans and strategies on the prevention of obesity, NCDs, healthy cities, etc., are aligned with this global action plan on physical activity. The plan will help strengthening the policies and actions that had been put in place by PAHO and its Member States, and mainly, improve the governance of the required actions, as many of the structural actions to reduce the prevalence of physical inactivity are led by other sectors of the government.</p>

Resolution	Items and Reference Documents	PAHO Resolutions and Documents	Implications for the Region <sup>1</sup> Progress in the Region
<a href="#">WHA71.7</a> Digital health	mHealth Document <a href="#">A71/20</a>	<a href="#">CD51/13</a> (2011) eHealth Strategy and Plan of Action (2012-2017)  <a href="#">CD55/INF/12-A</a> (2016) Strategy and Plan of action on eHealth: Midterm review	<p>The report looks at increase Member States' capacity to implement digital health technologies in order to accelerate progress towards achieving universal health coverage.</p> <p>This report is pertinent and it is aligned with PAHO's priorities on this topic. According to the International Telecommunication Union (ITU), the Americas Region has a penetration of 108 mobile lines per 100 inhabitants, which presents an opportunity for the Region to take advantage of this kind of technology for improving health.</p> <p>This resolution puts focus on the integration and scale-up of digital technologies within existing health system infrastructures; address health system barriers and promote opportunities, as appropriate, through the use of digital technologies; build capacity for human resources for digital health; and to develop national regulations around issues such as data ownership, sharing, consent, security, privacy and interoperability.</p> <p>This mandate will be aligned with PAHO's work on e-Health and health information systems, through the initiative Information Systems for Health (IS4H), that introduces a framework of action and a common understanding of the specific components of information systems for health. It is aimed at improving decision and policy making mechanisms in the countries through health systems that will ensure universal, free and timely access to quality and open data, and strategic information using the most cost-effective ICT tools.</p>
<a href="#">WHA71.8</a> Improving access to assistive technology	Improving access to assistive technology Documents <a href="#">A71/21</a> and EB142/2018/REC/1, resolution <a href="#">EB142.R6</a>	<a href="#">CD53.R12</a> (2014) Plan of Action on Disabilities and Rehabilitation	<p>This resolution on Assistive technology (AT), includes devices such as wheelchairs, hearing aids, eye glasses and communication software which help people with difficulties in functioning to maintain or increase their independence and optimize well-being.</p> <p>The resolution calls on Members States to increase policies and programmes</p>

Resolution	Items and Reference Documents	PAHO Resolutions and Documents	Implications for the Region <sup>1</sup> Progress in the Region
			<p>ensuring access to AT. It also calls for increased research, data and international and regional collaboration. There is a request for a global report on AT in 2021.</p> <p>This is an important issue for the Americas. With the rise of aging populations and NCDs, more and more people are likely to become reliant on assistive devices in order to maintain functioning and independence. Furthermore, the Region's susceptibility to natural disasters means strategies to manage the provision of assistive devices in emergency situations needs to be addressed. Thirty-one countries in the Region have ratified the UN Convention on the Rights of Persons with Disabilities, which includes ensuring access to assistive technology.</p>
<p><a href="#">WHA71.9</a> Infant and young child feeding</p>	<p>Maternal, infant and young child nutrition Comprehensive implementation plan on maternal, infant and young child nutrition: biennial report Document <a href="#">A71/22</a> Safeguarding against possible conflicts of interest in nutrition programmes Document <a href="#">A71/23</a></p>	<p><a href="#">CD53.R13</a> (2014) Plan of Action for the Prevention of Obesity in Children and Adolescents</p> <p><a href="#">CSP28.R20</a> (2012) Strategy and Plan of Action for Integrated Child Health</p> <p><a href="#">CD51/12</a> and <a href="#">CD51.R12</a> (2011) Plan of Action to Accelerate the Reduction in Maternal Mortality and Severe Maternal Morbidity</p> <p><a href="#">CD50.R11</a> (2010) Strategy and Plan of Action for the Reduction of Chronic Malnutrition</p> <p><a href="#">CD48.R4, Rev. 1</a> (2008) Regional Strategy and Plan of Action for Neonatal Health within the Continuum of Maternal, Newborn, and Child Care</p>	<p>Document A71/22 describes the progress made in carrying out the comprehensive implementation plan on maternal, infant and young child nutrition. It also provides information on the status of the national measures to give effect to the International Code of Marketing of Breast Milk Substitutes, adopted in resolution WHA34.22 (1981) and updated through subsequent relate WHA resolutions and describe the progress made in drawing up technical guidance on ending the inappropriate promotion of food for infants and young children, as welcome with appreciation by the WHA resolution WHA69.9 (2016).</p> <p>The document can strengthen PAHO's work on protecting food and nutrition policies from industry interference. The document offers a thorough decision-making process, so another implication of the document for the Americas is that PAHO will be able to use the document as a reference to produce concrete tools that will help government officials and also PAHO focal points to establish safeguards against conflicts of interest in nutrition policies and programs at country and subregional level.</p>

Resolution	Items and Reference Documents	PAHO Resolutions and Documents	Implications for the Region <sup>1</sup> Progress in the Region
<a href="#">WHA71.13</a> Reform of the global internship programme			The resolution calls for continued improvements to the internship programme. It urges Member States to support WHO in mobilizing resources for the programme, among others.
<a href="#">WHA71.14</a> Rheumatic fever and rheumatic heart disease	Rheumatic fever and rheumatic heart disease Documents <a href="#">A71/25</a> and EB141/2017/REC/1, resolution <a href="#">EB141.R1</a>		<p>This is a report to the 71st World Health Assembly that describes the global situation on rheumatic fever and rheumatic heart disease, the public health strategies for its prevention, control and potential elimination, challenges to reduce the burden of RHD, and recommended actions for Member States and WHO to improve the public health response to RHD.</p> <p>In the Americas, there are approximately 12,846 deaths from RHD per year, representing 0.19% of all deaths. People in marginalized communities, including indigenous populations are disproportionately affected by this disease. If the document is approved in the WHA, PAHO would promote the recommended actions contained in the report and support Member States to implement the primary prevention interventions, as part of cardiovascular disease prevention programs.</p>

**Table 2. Decisions Adopted by the 71th World Health Assembly, Documents of Reference, and Implications for the Region of the Americas**

Decision	Items and Reference Documents	PAHO Resolutions and Documents	Implications for the Region <sup>2</sup> Progress in the Region
<a href="#">WHA71(8)</a> Addressing the global shortage of, and access to, medicines and vaccines	Addressing the global shortage of, and access to, medicines and vaccines Documents <a href="#">A71/12</a> and EB142/2018/REC/1, decision <a href="#">EB142(3)</a>	<a href="#">CSP29/16</a> (2017) Situation Update on the Challenges of Supplying Inactivated Polio Vaccine to Maintain Eradication of the Disease in the Region of the Americas  <a href="#">CD55/10, Rev. 1</a> and <a href="#">CD55.R12</a> (2016) Access to and rational use of strategic and high-cost medicines and other health technologies	The new global strategy on access to medicines will build on previous WHO Medicines Strategies, integrate existing resolutions, and lay the foundation for the future work.  Member States can avail of the PAHO Strategic Fund to resolve, in so far as possible regional shortage of medicines. The Strategic Fund can pool demand, identify potential suppliers, and work with NRAs of Regional Reference in ensuring quality. Very positive experience in this area has been achieved with Benzimidazole and Benzathine Penicillin.
<a href="#">WHA71(9)</a> Global strategy and plan of action on public health, innovation and intellectual property: overall programme review	Global strategy and plan of action on public health, innovation and intellectual property Documents <a href="#">A71/13</a> and EB142/2018/REC/1, decision <a href="#">EB142(4)</a>	<a href="#">CD55/10, Rev. 1</a> and <a href="#">CD55.R12</a> (2016) Access to and rational use of strategic and high-cost medicines and other health technologies  <a href="#">CD48.R15</a> (2008) Public Health, Innovation and Intellectual Property: A Regional Perspective	The document reports the activity of the expert review panel approved by resolution <a href="#">WHA 68.18</a> to conduct an overall program review of the global strategy and plan of action, its aims and objectives, and recommend a way forward, including details of what elements or actions should be added, enhanced or concluded until 2022.  The report includes recommendations for each of the 8 elements of GSPOA for the period of 2018-2022 and with an estimated budget of US\$31.5 million (US\$ 16.3 million for the high priority actions). The budget is not covered within existing resources.  The priority actions include many important measures that would be very useful in the Region.

---

<sup>2</sup> A more exhaustive analysis of the implications of the WHO Resolutions for the Region will be presented during the 56th Directing Council.