WORLD HEALTH ORGANIZATION

CURRICULUM VITAE

Family name (surname): Menabde

First/other names: Nata (Natela)



Attach recent photograph

Gender: Female

Place and country of birth: Riga, Latvia

Date of birth (Day/Month/Year):

27/05/1960

Citizenship: Georgia

If you have ever been found guilty of the violation of any law (except minor traffic violations) give full

particulars: No

Address to which correspondence should be sent :

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^{*}This form, along with the written statement required (see page 9), should be submitted along with the proposal of the candidate, to the Director General, not later than 18:00 CET on 15 February 2019.

Degrees/Certificates obtained:

(Please indicate here the principal degrees/certificates obtained with dates and names of institutions, additional pages may be added)

- 1. Ph.D. (Pharmacology)
 - 1987, Diploma by Supreme Certification Commission of the USSR Council of Ministers. In conjunction with Scientific-Research Institute of Pharmacology, USSR Academy of Medical Sciences, Moscow, (1983-1986)
- 2. M.Sc. Pharmacy
 - Honour's Diploma, 1983, Tbilisi State Medical Institute, Georgia, (1978-1983)
- 3. Leadership for Health Care Leaders, Certificate
 - The Global Health Action Programme, USA, (1993)
- 4. International Health Management, Certificate
 - USAID, Washington, D.C.USA, College of Health Sciences, Georgia State University, Atlanta, Georgia, USA, (1993)
- 5. Health Care Economics for CCEE/NIS, Certificate
 - Centre for Health Economics, University of York, UK, (1994)
- 6. Great Leaders. Great Teams. Great Results, Certificate
 - Franklin Covey the Ultimate Competitive Advantage, Bali/UK, (2014)
- 7. Emergency Medical Service System, Certificate
 - All India Institute of Medical Sciences, New Delhi India, (2013)
- 8. Strategic Media Skills for UN Leaders Certificate
 - The Centre for Development Communications, New Delhi, India, (2013)
- 9. Managing individuals; Finance; Project management;

Certificates

- ESADE, Spain, (2000)
- 10. Managing Negotiations for Health Development Certificate
 - Conflict Management Group, (USA), Copenhagen, (2001)
- 11. Nordic School of Public Health Certificates, Gothenburg, Sweden (1999-2003)
 - Accomplished modules listed below (part of MSc Degree programme in Public Health), total 47.5 ECTC-credits:
 - a. Public Health Sciences: 1999

15.00 ECTC credits

- Foundations of Public Health;
- Qualitative Methods in Public Health (epidemiology);
- Quantitative Methods in Public Health (epidemiology);
- Management in Public Health;
- b. Multidisciplinary teamwork and intersectoral collaboration, 2000;

3.75 ECTC credits

c. Managing change, 2000;

3.75 ECTC credits

d. Clinical Epidemiology/Evidence Based Medicine, 2000;

3.75 ECTC credits

e. Health Evaluation and Health Economics, 2001;

3.75 ECTC credits

f. Pharmaco-epidemiology, 2001;

3.75 ECTC-credits

g. Health Systems and Services Research, 2002;

3.75 ECTC-credits

2.5 ECTC-credits

h. Current topics in Nutritional Epidemiology, 2002;

7.5 ECTC-credits

Empowerment, 2003;

12. United Nations Language Proficiency Certificates:

• English; Russian; New York, (1995)

13. United Nations Language Course: French - Levels 1,2 and 3 certificates. New York, 2016, 2017

LANGUAGE SKILLS		Speak	Read	Write
Enter appropriate number from code below to indicate level of your language knowledge of the official languages of the European Region. If no knowledge, please leave blank CODE: 1. Limited conversation, reading of newspapers, routine correspondence.	English	3	3	3
	French	1	1	1
	German			
	Russian	3	3	3
Engage freely in discussions, read and write more difficult material				
3. Fluent, (nearly) as in mother tongue				

Please indicate additional language	Consideration Device (force)
skills you possess	Georgian (fluent), Danish (basic)

Professional experience

Please describe in detail, in reverse chronological order, positions held, functions performed and other relevant experiences during your professional career (excluding international experience). For each entry, provide dates, and a description of the main duties and responsibilities and outline the principal results, outcomes and achievements, giving concrete examples.

Period:

1992-1993

Employer:

Ministry of Health, Tbilisi, Georgia

Position:

Head, Department of Clinical Trials. Georgian Drugs, Food & Health

Technologies Regulatory Authority

Duties:

- Development of national policies and regulations for pharmaceuticals, food products & health technologies, regulatory oversight over conduct of clinical trials in Georgia. Administering marketing authorizations on medicines and food products.
- Managing humanitarian operation of the Ministry of Health to ensure uninterrupted access to essential medicines and health technologies in time of crises and poverty
- Coordinating resource mobilization and partnership activities of the Ministry for humanitarian operations in health
- Managing collaboration with Ministries of Finance, Foreign Affairs, Social Affairs and Labor on behalf of the Ministry of Health
- Team supervision

Results & accomplishments:

- Established and set in motion first Georgian Drugs, Food and Health Technologies regulatory authority after dissolution of Soviet Union
- Developed and enforced legislative base and policies on pharmaceuticals, food products & health technologies. Coordinated conduct of clinical trials in Georgia. Contributed to setting up the process of issuing marketing authorizations for pharmaceuticals and health technologies in Georgia and implemented privatization of pharmaceutical supply system nationwide
- Managed humanitarian assistance operations (public sector supply of essential pharmaceuticals) in time of crises and poverty (civil war), including for refugees and displaced people.
 Coordinated resource mobilization and multisectoral partnerships for humanitarian operations in health across sectors through international loans and donations. Mobilized assistance of 10 mil USD value.
- Managed cross sectoral collaboration with Ministries of Finance, Foreign Affairs, Social Affairs and Labour on behalf of the Ministry of Health.

Period:

1990-1992

Employer:

Ministry of Health, Tbilisi, Georgia

Position:

Deputy Head, Health Care Organization Department

Duties:

- Support Health System Restructuring and Institutional Reform in the context of collapse of the Soviet Union
- Coordinating development of health protection law of Georgia

- Setting up disaster preparedness and rehabilitation services
- External relations of the Ministry with local and international partners
- Monitoring implementation of public health programmes of the Ministry of Health
- Assessing performance of health system in Georgia and providing recommendations to the Minister on necessary reforms

Results & accomplishments:

- Co-chaired the committee on Health System Restructuring and Institutional Reform in Georgia. Implemented institutional reform and restructuring of health care system, including health insurance and service provision, and new financing schemes
- Developed a national plan for human resources for health in public sector
- Coordinated development of new health protection law of Georgia with multiprofessional team, which was passed by the Parliament
- Established a national disaster preparedness and post-conflict rehabilitation programme
- Contributed to establishment of disaster preparedness and rehabilitation national service in Georgia.
- Facilitated external relations of the Ministry with local and newly emerged international partners. Monitored implementation of public health programmes of the Ministry of Health.
- Supported health system performance assessment in Georgia and provided recommendations on needed changes and reforms.

Period: 1990-1992

Employer: State Medical Institute, Central Research Laboratory, Tbilisi, Georgia Position: Head, Republican Research & Teaching Centre for Pharmacokinetics (part time) Duties:

- Management of clinical pharmacology research in a newly established National Centre
- Teaching pharmacology course to medical students at the State Medical Institute

Results & accomplishments:

- Established the new Centre and made it fully operational, obtained grants, managed the operation, recruited and supervised staff and established laboratory base
- Initiated and conducted several research projects, published research findings in peer reviewed journals
- Developed training materials and introduced training programmes, conducted teaching of medical students.

Period:

1989-1990

Employer:

Ministry of Health, Tbilisi, Georgia

Position:

Lead Specialist/Deputy Head, Department of Science

Duties:

- Coordination of National research programmes in public health
- Provision of Strategic advice to the Minister of Health on priority programmes and funding, evaluation of National research programmes and grants of all research institutes under the auspices of the Ministry of Health.

Results & accomplishments:

- Introduced improved requirements for evaluation. Ensured successful evaluation of National research programmes in public health for 21 health research institutes and produced final report.
- Provided Strategic recommendations to the Minister of Health on priority programmes and funding, evaluation of National research programmes and grants for research institutes under the auspices of the Ministry of Health. Eliminated outdated and ineffective programmes
- Ensured improved funding for priority programmes and mobilized additional resources and grants
- Managed competition for award on best research programme of the year

Period:

1986-1989

Employer:

Clinical and Experimental Therapy Research Institute, Tbilisi, Georgia

Position:

Researcher, Clinical Pharmacology Department

Duties:

- Clinical pharmacology research, clinical trials.

Results & accomplishments:

- Conducted clinical pharmacology research in the context of my ongoing PhD study. Optimized pharmacotherapy for patients with cardiovascular diseases
- Contributed to conduct of international clinical trials
- Published research findings in journals and reported at scientific conferences

International experience

Please describe in detail, in reverse chronological order, positions held and functions performed and other relevant experiences of an international nature. Please include all experience in international organizations' governing bodies and secretariats. For each entry, provide dates, and a description of the main duties and responsibilities and outline the principal results, outcomes and achievements, giving concrete examples.

Period:

May 2015 - present

Employer:

World Health Organization, HQ

Position:

Executive Director, WHO Office at the United Nations, New York

Duties:

- Leading WHO's engagement with the UN system and other stakeholders to anchor health in the Sustainable Development Agenda 2030, towards coherent and effective UN system at global, regional and country levels. By creating and sustaining effective networks and coalitions with broad range of stakeholders, leading WHO's efforts in insuring place for health in the deliberations and decisions of UN inter-governmental bodies, promoting and strengthening WHO's effectiveness and leadership role in health as part of the UN humanitarian system, and mobilizing multisectoral partnerships for health across Sustainable Development Goals for global priorities such as universal health coverage and resilient health systems, disaster preparedness and crises response, noncommunicable diseases, health security, communicable diseases (TB, Malaria and others), noncommunicable diseases, maternal and child health, antimicrobial resistance and others.

Results & accomplishments:

WHO's engagement with the United Nations: I have promoted and achieved more strategic organization-wide engagement with the UN and multisectoral stakeholders in WHO's 13th General Programme of Work (GPW13) priority areas such as Universal Health Coverage, Antimicrobial Resistance, Health Systems Strengthening and Financing, TB, NCDs, humanitarian issues/disaster response, health security, migration, nutrition, climate change and others, and ensured effective corporate participation in UN processes related to post 2015 development agenda. This included engagement with the UN Sustainable Development Group, UN General Assembly, ECOSOC, Security Council and their subsidiary bodies, resulting stronger place for health in relevant resolutions and outcome documents. The 2030 agenda for sustainable development adopted in 2015 features health as not only very well positioned with several targets in a stand-alone goal, but an additional 13 sustainable development goals include health specific targets. WHO's visibility has increased markedly during my tenure. Understanding of and support for WHO's priorities have also improved as measured by high level attendance of our events and opportunities to contribute to events organized by our partners and stakeholders. Overall, WUN has continued and consolidated its strategic repositioning in New York and within the WHO and optimized its opportunities to advance WHO's GPW13 and DG's agenda.

Increased scope for health in UN General Assembly Resolutions: Annual Global Health and Foreign Policy resolution, adopted in 2015, firmly recognized the lead role of WHO in health emergencies, building in country capacities to deal with outbreaks and the key role of strong health systems in post-emergency recovery and development. The resolution also established a reporting line on health security between the WHA and the General Assembly, emphasized the growing importance of a stronger global health workforce and set in motion preparations for a high level meeting of the UN General Assembly on Antimicrobial Resistance (AMR), which has successfully concluded with adoption of a high level political outcome document by UN General Assembly Resolution. The Global Health and Foreign Policy resolution of 2016 clearly acknowledged WHO leadership in global public health and assigned a key role to WHO in the preparation of a high level meeting of the General Assembly on Tuberculosis, and NCDs, convened in 2018 as well as requested to organize UNGA High Level meeting on UHC in 2019.

I have led and coordinated team efforts in preparations and political aspects of intergovernmental negotiations for UNGA 2018 High Level meetings on NCDs and TB. This included celebration of World TB Day at the UN, Civil Society and Parliamentary hearings on TB, civil society hearings on NCDs organized with the President of the General Assembly and other related events.

Strategic engagement in the UN Development System Reform: I have supported WHO Director General's chairing of the UN Secretary General's High Level Committees on Programmes and participation in Chief Executive Board and ensured effective WHO engagement in the Quadrennial Comprehensive Policy Review process, coordinated WHO participation in the High Level Political Forum (HLPF) in New York in 2016-18, as well as other intergovernmental processes and ensured clear articulation of WHO interests in the relevant political outcome documents. I have promoted WHO's internal awareness and engagement with UN reform and its implications for WHO transformation as background for the Global Policy Group discussions and internal policies decisions in this regard. I have also contributed to updating WHO Country offices and of colleagues across WHO on progress in UN reform.

WHO's visibility in humanitarian agenda improved: I have explicitly promoted WHO emergency reform across UN as effective key component of a broader humanitarian crises response. WHO's

leadership in health during humanitarian emergencies has been highlighted through participation in Security Council as well as ECOSOC and other relevant meetings within and outside the UN. I have engaged in political and diplomatic efforts related to Security Council resolutions on Ebola outbreak response, on attacks on healthcare facilities and supported WHO's engagement at the SG's High-level meeting on Counter-terrorism. In the area of migration I have led team's political advocacy and negotiations efforts with Member States on the Global Compact for Migration.

Increased WHO outreach: I have facilitated a notable outreach of the celebration of WHO's 70th anniversary during the commemoration of World Health Day 2018 on UHC at the UN. The occasion featured the launch of the UN World Health Day commemorative stamps. 2019 UNGA will feature a health for all walk/run event in New York's Central Park during the UNGA High level week in collaboration with the Mayor's office and office of the President of the General Assembly. Universal Health Coverage got positioned as central to all health targets in this agenda through continued work with member states and non-state actors and strong political advocacy. Importantly, not least due to WUNs intense diplomacy efforts in New York, UNGA passed a resolution proclaiming 12 December as official UHC day.

Other: I have led team's diplomacy efforts in support to: 1) Establishment of the UN SG high level commission on health employment and economic growth which has submitted its report to the SG in September 2016; 2) 2016 UN General Assembly special session on the world drug problem elevated the role of public health approaches; 3) Work of UN inter-agency task force on NCDs, successfully concluded the current work plan and initiated the roadmap for 2016 and 2017. ECOSOC acknowledged the work of the taskforce and for the first time called on member states to step up financial support for its work and explore taxation of harmful products to finance national NCDs responses. My team has supported organization of two Ministerial conferences on NCD (Montevideo) and TB (Moscow).

Period:

September 2010 - May 2015

Employer:

World Health Organisation, Regional Office for South East Asia

Position:

Head of Mission and WHO Representative to India

Duties:

- Leading and managing a large WHO team thousands of dedicated professionals across India –
 in all aspects of strategic and operational work of WHO's largest country office. Vision
 formulation, planning, resource mobilization, execution of programmes, administration and
 financial management of the entire operation, monitoring and evaluation as well as performance
 management of all WHO-India programmes and staff.
- Implementation of WHO's country cooperation strategy with the Government of India.
- Supporting the governments' efforts in tacking health and health systems challenges, such as eradication of polio and saving lives from vaccine preventable diseases, promoting universal health coverage for sustainable development, combatting TB, reversing growing trend of noncommunicable diseases, amongst others.
- Delivery of policy and technical advice to the central (Union) Ministry of Health and Family Welfare and other Ministries (transport, environment, labor, finance, education, rural development, water and sanitation and others), and state governments (36) as well as Chief Ministers of the states, Planning Commission, parliament and others
- Mobilizing resources and executing operational annual budget of USD 150 mil, and Human Resource capacity (over 2500 staff) spread across 350 locations in India.

- Effective membership of UN Country Team and promoting health in other sector policies. Diplomatic representation of WHO in all settings.

- Building partnerships/external relations with UN agencies, civil society, academia, private sector associations and philanthropies, politicians, donors, diplomatic community and, and other influential players.

Results & accomplishments:

Strengthened WHO's role: Successfully managed WHOs largest operation at country level in all aspects of work and led WHO reforms at country level – this was recognized as an exemplary accomplishment by external evaluation and audit. Introduced and implemented WHO's results and accountability framework. Mobilized over \$500 mil from various donors and partners for programme implementation and consistently delivered results. Overhauled and transformed WHO's collaboration with India towards achieving measurable impact on health and social well-being of Indian people, introduced performance management culture in collaboration, strengthened technical excellence of WHO, improved working conditions of the staff, promoted collective leadership. During my assignment to India WHO has become: technically stronger, more strategic, more credible, better anchoring the work of regional and global levels of the Organization, more decentralized and empowered at all levels, more equitable in the way it operates, strongly positioned as a leader amongst partners, better integrated in terms of technical and operational functions, more efficient and effective, more visible and communicating better, more relevant and an agency whose counsel is sought, both at the Union and State levels. WHO's work has been central for UN Country Team's multisectoral efforts on Health. I have periodically served as acting UN Resident Coordinator.

India eradicated polio and eliminated other diseases: This period saw one of the biggest achievements in the annals of public health – India eradicated polio - to which I have contributed through leadership of WHO India Office and its National Polio Surveillance Project (NPSP). This resulted in certification of South East Asia Region, including India, as polio-free in 2014; My contribution was recognized by the Government Award. Similarly, in 2014, India was validated with the "nil" status of yaws, and in 2015 India achieved the goal of validation of maternal and neonatal tetanus elimination.

Universal Health Coverage policy: My tenure in India was marked with substantial progress in the area of Health System Strengthening and introduction of Universal Health Coverage (UHC) concept - UHC has become a central policy discourse.

India's strengthened its contribution to Global Health: I have contributed to successful outcome of Indian Drug regulatory Authority's international assessment on vaccines, which resulted in declaring it functional, as measured against internationally set indicators. This was a key precondition of continued supply of India-manufactured high quality low cost essential generic medicines and vaccines to more than 150 countries globally through international procurement mechanisms such a Global Fund for TB, HIV/AIDS and Malaria, GAVI alliance, WHO, World Bank and others. Furthermore, due to exemplary efforts of WHO, as well as effective collaboration with the government and private sector, which I facilitated, large number of medicinal products manufactured in India were successfully prequalified by WHO, bringing the total number of Indian manufactured products on WHO list, and therefore easily accessible to all countries, to 350. 75% of medicines for TB and HIV/AIDS on WHO prequalification list were from India.

Multisectoral actions to combat non-communicable Diseases: India was a first country globally to adopt global monitoring framework for noncommunicable diseases and to set national targets and

objectives - part of WHO results. Major progress was made in implementing the Framework Convention for Tobacco Control (FCTC) – I have led WHO's evidence-based advocacy to an increase in taxes on tobacco products in the Union and State budgets. Notably, India became one of the first countries to implement the restrictions of tobacco display in movies and television and progressive bans on smoke free tobacco use got implemented in 30 (out of 35) Indian states.

Led **WHO** normative support to legislative changes in health and related areas - Clinical Establishment Act was passed by the Parliament and ratified by 12 states, Mental Health and Disability Act was passed by the Parliament, Motor Vehicle act was revised for parliamentary approval. Launched health equity watch in India and promoted gender equity and human rights.

Addressing global burden of Tuberculosis: Of the very many developments on the tuberculosis (TB) front that WHO India has contributed to during my tenure, the one that stands out is the Standards for TB Care in India - a path-breaking initiative to introduce uniform standards for TB care in both, public and private sectors. Other achievements in the area include, making TB a notifiable disease and the ban on serological testing and introduction of a national award winning web-based case notification system (NIKSHAY), regulatory changes on sale of all anti-TB drugs, which prohibits their sale over the counter, and significant increase of coverage for Drug Resistant-TB and reduction/reversal of growing trend of TB incidence. I have facilitated WHO efforts for successful roll-out of WHO recommended new Antiretroviral Therapy and multidrug PMTCT regimens across the country. India's National AIDS, as well TB control programmes were recognized as the largest and the best globally due to accomplishments and public health outcomes.

Ebola crises response: Significant advancements have been made by India during the Ebola crises in West Africa, with WHO support, to augment preparedness and response at points of entry. Surveillance, laboratory and risk communication capacities were strengthened in view of MERS-CoV and Ebola virus disease (EVD) threats and capacity to respond to IHR-related threats and an all hazard approach was addressed through multi-sectoral mechanisms.

Achieving the MDGs: Importantly, India has achieved most of the MDGs by the end of my tenure. WHO accompanied the Government's efforts on all MDGs.

Period:

April 2006 - September 2010

Employer:

World Health Organization, Regional Office for Europe, Copenhagen

Position:

Deputy Regional Director

Duties:

- Executive leadership of WHO European office in all areas of work according to policies and goals set by the Regional Director, including providing intellectual leadership, directing and overseeing WHO Regional office's work in public health and health systems areas, ensuring coherence with Global policies and strategies, and partners; Overseeing external relations and partnerships of WHO European Office
- Managing political relationships with WHO governing bodies (World Health Assembly, Executive Board, Regional Committee, Standing Committee for the Regional Committee)
- Leading work of WHO/EURO's management team to ensure high institutional performance, including financial and human resource mobilization and management;

- Overseeing WHO's country operations in the European region (35 county offices with 350 staff);
- Leading staff development and learning to enhance professional excellence and developing and implementing appropriate staffing strategies, recruitment, training and skill deployment
- Promoting transparency, communication and information sharing culture
- Building stronger relationships and effective engagement in the WHO global management processes
- Chairing of WHO/EURO's Emergency Steering Committee to ensure adequate institutional response to crises situations including the pandemic flu;
- Deputising for the Regional Director as necessary

Results & accomplishments:

Managed WHO/EURO: Ensured well functioning and efficient executive management of WHO/EURO (700 staff in 36 countries) including financial (around 300 mil USD biennial budget) and human resource management. Led reform in the WHO European region and contributed to WHO reform at global level. Produced first organizational Strategic Human Resources Plan for 2008-2009. Achieved gender equity in all categories of posts. Coordinated resource mobilization of the office (around 200 mil USD per biennium). Ensured good financial management as proven by regular financial management reports to governing bodies. Improved WHO/EURO's overall performance as measured by key performance indicators and as documented in the Regional Committee Reports. Chaired the work of WHO/EURO's Emergency Steering Committee and ensured adequate response to emergencies and disasters in the European Region. Coordinated WHO European actions of the Global response to pandemic influenza. Contributed to improved transparency, accountability, evaluation, communication and information sharing culture in the office through promotion of horizontal functions, regular management review meetings etc.

Putting countries at the centre: Ensured sustainable progress in implementation of EURO country strategy. Improved functioning of WHO country operations in the European region and ensured effective monitoring system through proper reporting and evaluation. Achieved improved implementation of biennial collaborative programmes with member states. Scaled up WHO/EURO's partnerships with major stakeholders at regional and country levels.

Relations with Governing bodies: Coordinated successful conduct of Regional Committee and other sessions of Governing bodies, ensured EURO's effective participation in World Health Assembly and Executive Board. Improved satisfaction of the Member States with WHO/EURO's work as proven by Regional Committee reports and client satisfaction survey results.

Aligned with corporate policies: Contributed to improved policy coherence within WHO through membership in the Global Financial Advisory Group at HQ, of the Deputy Regional Directors/Directors of Programme Management Group, of the Global Country Focus policy implementation group, of the Global Primary Health Care group, of the Global working group on response to Economic Crises. Articulated WHO/EURO's specific interests as part of WHO's corporate objectives. Ensured EURO's contribution in the Global Medium Term Strategic Planning exercise for 2008-13 and in the strategic planning for 2008-09 and 2010-2011.

High level policies: Ensured successful conduct of the Ministerial conference on TB, on Health Systems in Tallinn in 2008 and preparation of the 5th Ministerial Conference on Environment in 2010.

Strengthened health security in the WHO European Region and ensured adequate response to global pandemics.

Period:

2002-2006

Employer: Position World Health Organization, Regional Office for Europe, Copenhagen

Director, Division of Country Support

Duties:

Leading WHO's work on health policies and system reforms in the WHO European region (53 Member States), including Primary Health Care and Disaster Preparedness and Response; Intellectual leadership and management of the Division in all areas of work (including financial and human resources) and of WHO European country offices in 30 member states, as well as directing bilateral political and technical collaboration with 53 countries of the European Region. Ensuring coherence with WHO global policies and strategies in Health Systems and Country Support areas. Collaboration and liasing with multiple external partners such as the World Bank, EC, UK DFID, ECDC, The Global Fund, GAVI etc. to strengthen health systems and health security response capacity in the European region,

Results & accomplishments:

Strengthened health systems: Provided intellectual leadership in development of Health Systems strengthening Strategy of WHO European office, improved evidence base for policy making and knowledge management, promoted quality assurance in WHO/EURO's health systems work and strengthened partnerships. Led successful implementation of WHO European Country Strategy. Led successful preparation of the Ministerial Conference on Health Systems in Tallinn with emphases on health systems performance appraisal. Championed horizontal integration of health systems approaches in public health programmes, especially at country level. Ensured adequate technical and policy support of WHO to health policy and system reforms in member states. Provided strategic leadership and managerially supported work of European Observatory on Health Systems and Policies (a Partnership arrangement with World Bank, EBRD, and other partners). Organized effective WHO response to emergencies and disasters in the European region and chaired Emergency Steering Committee in EURO, strengthened WHO capacity at country level in disaster preparedness and response, integrated this work with health systems strengthening at country level, promoted renewed WHO Health Action in Crises strategy and strengthened partnerships with key stakeholders at country level. Upgraded intellectual and policy advise capacity of WHO in health financing area.

Impact at country level: Strengthened and developed WHO country offices including competitive recruitment for WHO country presence staff. Supervised staff of the division including WHO country offices and centres (250 staff). Developed a general work methodology for WHO EURO work in and with countries and aligned operational planning to new approach to country support. Ensured regular reporting to the Regional Committee and other Governing bodies on progress in country support and health systems areas. Ensured successful implementation of Biennial Collaborative Agreements Member States. Trained all country based staff in health policies and systems, general management and working with the UN.

Period:

1996-2001

Employer:

World Health Organization, Regional Office for Europe, Copenhagen

Position:

Manager - WHO Special Project on Pharmaceuticals in Newly

Independent States

Duties:

Development of a multi-donor funded Special project on pharmaceuticals for NIS to assist FSU-countries in restructuring their pharmaceutical sector by linking a new market oriented system with health system reforms. Proposals, strategies, technical assistance in rational drug use, quality, access issues. Country contacts, fundraising, management, reporting, maintaining stakeholder relations. Collaboration between the WHO Regional Office for Europe and WHO headquarters (Geneva). Major donors: UK Know How Fund, EU Echo, USAID.

Pharmaceutical sector reforms in Europe (privatisation, financing, access and affordability, rational use, quality, human resources). Rationalizing Hospital Drug Management Systems in transition countries. Design, development and pilot-implementation of drug management system; common formularies; prescribing monitoring, pharmaco-economics. Institutional restructuring and promotion of family medicine concept in primary care. Managing an in-house project team and a large pool of consultants. Monitoring and evaluation of project progress and results.

Results & accomplishments:

Strategy "The Patient in Focus" developed for pharmaceutical sector reform in Newly Independent States. National health policies incorporates pharmaceutical policies in 10 countries. Pharmaceutical legislation and drug regulatory authorities in place in 11 countries. Health insurance initiatives developed (community based pilots in drug financing and reimbursement, hospital drug management & procurement). Health systems reform projects initiated in selected countries with focus to ensuring access to essential pharmaceuticals; Pilot sites developed in selected countries on hospital drug management and collaboration ensured with health insurance programmes.

Period:

1994-1996

Employer: Position:

World Health Organization, Regional Office for Europe, Copenhagen Technical adviser, Programme for Pharmaceuticals in CCEE/NIS

Duties:

Initiating WHO assistance to Central and Eastern European countries and Newly Independent States of the Former Soviet Union in pharmaceutical sectors reform. Support National pharmaceutical policy development to ensure access to essential medicines and technologies. Contribution to National health policy development; implementation, monitoring and evaluation of programmes; national drug formularies' and clinical guidelines development, guidance on implementation. Development of an indicator set for performance management in pharmaceutical sector. Promotion of international policies and standards in a close collaboration with other partners in the international health development field. Mobilization of resources.

Results & accomplishments:

Initiated policy development process for pharmaceutical sector reform in Newly Independent States. Accomplished establishment of Pharmaceutical regulatory Authorities in 10 countries of the Former Soviet Union. Supported development of Pharmaceutical legislation in 7 countries. Initiated, led and accomplished Health systems reform projects in selected countries with focus to ensuring access to essential pharmaceuticals and technologies including in the situation of crises. Pilot projects in selected countries on hospital drug management. Collaboration with health insurance and procurement and supply systems. Mobilized over 20 mil USD.

Further achievements and awards

Please state any other relevant facts which might help to evaluate your application for example achievements, awards and accomplishments in light of the criteria adopted by the Regional Committee in resolutions EUR/RC40/R3 and EUR/RC47/R5.

Memberships at various stages of my professional carrier:

- Member of Expert Advisory Group for UN Secretary General's High Level Panel on Access to Medicines
- South East Asia Regional Journal of Public Health Member of Editorial Board
- European Observatory of Health Policies and Systems Member of Steering Committee
- EURO Observer Member of Editorial Board
- FIP, International Pharmaceutical Federation
- Nordic Dimension Partnership in Public Health and Social Well-Being: member of the Board
- American Public Health Association
- Georgian Society of physicians, member of council
- UN Country Team, India: Chair of UN Development Action Framework Task Team on Universal Health Coverage
- Member of the Advisory Council for All Indian Institute of Hygiene and Public Health, Kolkata
- Member of Steering Committee of the India's Country Coordination Mechanism for Global Fund for AIDS, Tuberculosis & Malaria
- Member of the Steering Committee to formulate the National Health Policy, Government of India Member of the Steering committee National Technical Advisory Group on Immunization of India Co-chair of India Expert Advisory Group on Polio Eradication
- Member of Jury British Medical Journal 2014 on 20th September, 2014, New Delhi
- Co-chair of the WHO Taskforce on Programme Reform
- Member of the WHO Global Task Force on Primary Health Care
- Member of the WHO Global Task Force on Health Systems
- Chair of WHO/EURO's Emergency Steering Committee: 2003-2010
- Member of Global Financial Advisory Group at WHO-Headquarters
- Member of WHO Deputy Regional Directors/Directors of Programme Management Group
- Co-Chair of the Global Country Focus Policy Implementation Group
- Member of the WHO Global Working Group on Response to Economic Crises
- Chair of the Organising Committee for the European Ministerial Conference on Health Systems, Health and Wealth, Tallinn, Estonia 2008

- Chair of the Organising Committee for the 5th Ministerial Conference on Environment and Health, 2010
- Executive Secretary (on behalf of the Ministry of Health) of Intersectoral Task Force on Health with Ministries of Finance, Foreign Affairs, Social Affairs and Labour in Georgia
- Co-Chair of Humanitarian Assistance Operations Coordinating Committee in Georgia
- Co-chair of the Committee on Health System Restructuring and Institutional Reform in Georgia

Other relevant facts:

For outstanding contribution to health development in Georgia, in 1997 the President of Georgia has awarded me with a **highest national award in the field of health**— a Golden Medal in the name of Zaza Panaskerteli.

In recognition of outstanding leadership and advocacy advancing significant progress in health care and mental health I was awarded by the NGO Committee on Mental Health (in consultative status with the United Nations) a **2018 Mental Health Award for Excellence**.

NGO Committee on the Status of Women at the UN presented me the **Woman Ambassadors Award** for leadership, 2018.

During the three years of my post-graduate study I was **teaching** clinical pharmacology at the Georgian State Medical University. Later on, during my work with WHO I have been a visiting lecturer at the Nordic School of Public Health in Gothenburg, Sweden and have provided ad hoc lectures on public health topics in various Schools of Public Health across the world.

I have been an invited **key note speaker and a chair** in a broad range of high level international events and conferences organised by European Public Health Association (EUPHA), Association of Schools of Public Health in Europe (ASPHER), European Health Forum in Gastein (Austria), European Union Presidency, European Commission, World Bank, Asian Development Bank, Global Symposium on Health Systems Research, Nuffield trust (UK), National Geographic, Economic Times, British Medical Journal Awards, Oxford India Summit, and others national and international institutions and events.

Hobbies:

In my spare time, I play piano and guitar. I like classical music and jazz. Such passion for music is also a salient feature in my volunteer work. For few years I have served as singing teacher in community choral ensembles in my hometown of Tbilisi, Georgia. I am also an avid reader of history and Russian literature. Thanks to my language skills, in early years of my professional life I have volunteered in providing translation and interpretation services to various public projects and institutions in Georgia. I like water sports, and I am especially fond of swimming.

Publications

Please list here a maximum of ten publications - especially the main ones in the field of public health, with names of journals, books or reports in which they appeared. (Please feel free also to attach a complete list of all publications.) Do not attach the publications themselves.

Selected publications:

"Strengthening health systems for universal health coverage and sustainable development" - in coauthorship with Marie Paule Kieny, Henk Bekedam, Delanyo Dovlo et al., Bulletin of the WHO, 2017; 95:537–539;

"BRICS and global health": co-authorship with Shambhu Acharya, Sarah-Louise Barber, Daniel Lopez-Acuna et al., Bulletin of the WHO: Special theme edition on BRICS and Global Health, June 2014

"A health system response to cancer in India": Elsevier/The Lancet Oncology Vol. 15, No. 5, P 485-487, April 2014

"Polio-Free Certification and Lessons Learned — South-East Asia Region, March 2014" — in coauthorship with Sunil Bahl, Rakesh Kumar et al., Centers for Disease Control and Prevention (CDC), US Department for Health and Human Services publication, MMWR / October 24, 2014 / Vol. 63 / No. 42

"Why tobacco needs to be taxed more " - Business Line (Hindu) print edition, June 12, 2014;

"Universal coverage challenges require health systems approaches; the case of India" Elsevier/Health Policy Journal Vol 114, Issues 2-3, p269-277, February 2014

"Measles Case Fatality Rate in Bihar, India, 2011–12, "Co-authorship with Manoj V. Murhekar, Mohammad Ahmad, Hemant Shukla et al., PLOS ONE | www.plosone.org 1 May 2014 |Volume 9| Issue 5 | e96668

"Social and Economic Implications of noncommunicable diseases in India"- In co-authorship with Thakur J1, Prinja S, Garg CC, Mendis S. Indian J Community Med 2011 Dec, 36 (suppl 1):S13-22

"Health Systems, health and wealth: a European perspective": co-authorship with Martin McKee, Marc Suhrcke, Ellen Nolte et al., The Lancet, vol 373, January 2009, pp.349-351.

"New Charter puts social well-being at the centre of health systems, health and wealth interactions", BMJ, 337, July 2008

"Health systems, health and wealth: Assessing the case for investing in health systems": co- authorship with Josep Figueras, Martin McKee, Suszy Lessof, Antonio Duran; WHO Regional Office for Europe 2008.

"The road to reform": Josep Figueras, Nata Menabde, Reinhard Busse, BMJ editorial, 2005; 331; 170-

"Introducing a complex health innovation—Primary health care reforms in Estonia (multimethods evaluation)": co-authorship with Rifat Atun, Katrin Saluvere, Maris Jesse et al.; Journal of Health Policy vol 79 (2006) 79–91, Elsevier.

"Health systems and systems thinking" in the book "Health systems and the challenge of communicable diseases", with Rifat Atun, ISBN 13 978 0 335 23366 3 (pb), (2008), Open University Press, pp 121-140

"Minding the East-West gap in health in Europe": in "European Union 2007 - EU anniversary publication", International Systems and Communications Limited, p 58-61.

"Access to Medicines in the Former Soviet Union", International Pharmacy Journal, Vol 14, No 2, 2000, Special Edition; and "Access to pharmaceuticals in the Newly Independent States", editorial, International Pharmacy Journal, Vol 13, No 5, 1999

In addition, during recent years of work I have directed and wrote forward to various books, (published with corporate authorship) such as:

"Evaluation of Immunization Training of Medical Officers, Cold Chain Handlers and Technicians"-UNICEF, WHO India Office and Government of India joint publication 2011

"WHO Country Cooperation Strategy for India 2012-2017", WHO Country Office for India, ISBN:978-92-9022-416-17, 2012

India UN Country Team MDG Report "Securing India's Future Accelerating MDG achievement and beyond", 2015

Vector-born diseases in India: analyses from health systems approach, WHO Country Office for India, 2014

"Performance Measurement of Health Systems" - foreword, Cambridge University Press, September 2009

"Protecting health in Europe from Climate Change" (contribution to) – WHO Regional Office for Europe, Copenhagen, 2008, ISBN 978 92 890 7187 1

"The European Health Report 2002" (contribution to) – WHO Regional Office for Europe, Copenhagen, 2002, ISBN 92 890 1365 6

"Health targets in Europe. Learning from experience" 2008 (ISBN 978 92 890 4284 0);

"Mosquitoes of the genus Anopheles in countries of the WHO European Region having faced a recent resurgence of malaria (Regional research project 2003-2007)" 2008 (ISBN E92010);

"Correcting gender inequities in prison health - WHO conference on women's health in prison" 2008 (ISBN EUR/08/5086974);

"Progress on implementing the Dublin Declaration on Partnership to Fight HIV/AIDS in Europe and Central Asia" 2008;

"Human resources for health in the WHO European Region", 2006 (ISBN E88365);

"HBSC - Inequalities in young people's health. Health behaviour in school-aged children" 2008 (ISBN 978 92 890 7195 6);

"Towards health security. A discussion paper on recent health crises in the WHO European Region" 2007 (ISBN 978 92 890 2198 2);

"HIV/AIDS treatment and care. Clinical protocols for the WHO European Region" 2007 (ISBN 978 92 890 7298 4);

"National health workforce. Assessment of the past and agenda for the future" 2006, (ISBN 2-9500440-1-8);

"Healthy minds, healthy communities" 2004.

Conflict of interest declaration

Please list any interest, financial or professional, or views publicly expressed, that could create or appear to create a conflict of interest in light of the work and functions of the Regional Director of the Regional Office for Europe, if you were to be elected.

N/A

I certify that the statements made by me on this form are true, complete and correct. I understand that any false statement or required information withheld may provide grounds for the withdrawal of any offer of appointment or the cancellation of any contract of employment with the Organization

Date and place: 10 February, 2019, New York, USA

Signature: Melle

WRITTEN STATEMENT

Please see the "Criteria for candidates for the post of Regional Director" (on attached sheet).

Your statement should address the following points and must be no longer than 2.500 words.

- 1. Describe your management and leadership qualities and what would make you a successful Regional Director.
- 2. Set out your vision for the Region, identifying the key challenges facing the Region and how you would propose to address them.
- Explain how you would engage key stakeholders in order to achieve the goals of the Regional Office.
- Describe how you envisage that the Regional Office's work will relate to ongoing processes in WHO and the UN, such as the 2030 Agenda for Sustainable Development and the WHO transformation process.

During 24 years of service with the World Health Organization, I have shown unwavering commitment to the goal of Health for All and the values and mission of the Organization.

I am professionally qualified in the field of health, with extensive knowledge of public health, epidemiology, health economics and management.

With a solid public health academic background and over 30 years of professional experience (15 of which within the WHO European Region) in global health, health diplomacy and health systems, I have built an unblemished track record as a global health leader.

Having worked in three WHO Regions, and at **country, regional and global levels**, I fully understand the health challenges the Member States are facing. I have led significant accomplishments while maintaining the **integrity and independence** of the WHO's scientific and evidence-based advice.

My unique experience is routed in both East and West of the European Region, in South-East Asia, and most recently in the United States, where I serve as Executive Director of the WHO Office at the United Nations in New York, and lead WHO's engagement with the UN system and a broad range of stakeholders to anchor health in the 2030 Agenda for Sustainable Development.

Prior to my current role, as **Head of Mission and WHO Representative to India**, I have led a large team – thousands of dedicated professionals and over 250 offices—supporting governments' efforts in tackling health challenges. Most notably, my leadership during this period saw one of the biggest achievements in public health, India's eradication of polio.

Preceding this, I served as **Deputy Regional Director at the WHO Regional Office for Europe (WHO EURO)** and, among other initiatives, successfully led the region's work on health systems and their relationships with health and wealth, which culminated in the adoption of the European Tallinn Charter in 2008. During that period I was also in charge of WHO's extensive operations in 35 European countries, including emergency response and post-conflict recovery and rehabilitation.

As a leader, I have proven my ability to instill a clear vision and forge strategic partnerships. My managerial ability is proven over substantive years of experience of promoting a corporate culture of solidarity and performance, as well as human and financial resource management, and a steady increase in resource mobilization. I am known for strict application of principles of equity, transparency, efficiency, and accountability for results in my work.

I humbly believe that I have a broad understanding of the global health context as well as of the **social**, **political**, **cultural and ethnic issues** that affect the WHO European Region. I am Georgian by nationality and have Russian and Latvian ethnic roots. Fluent in English and Russian, I am a motivating speaker.

I have lived, trained, and worked in the diverse settings. As a result, I can play a crucial role in bridging the health gap within and across countries in the WHO European Region, and in its relationship with the rest of the world.

Perhaps just as importantly, I am fortunate to be in strong health and hold the necessary enthusiasm and energy as to meet the exciting challenges associated with the position.

VISION:

2030 and Beyond: Innovation for Impact on People's Health
Health as a driving force for the achievement of the Global Goals and yielding
sustainable results in a post-SDG world

The health and prosperity of populations has never existed in silos. Health is a precondition, indicator, and outcome of Sustainable Development and human wellbeing, but also a driver of Europe's social and regional harmony. While great advancements have been made in the WHO European region in health, growth has been uneven across countries and if current efforts do not scale up, we will not be on track to achieve all goals and targets set out in the 2030 Agenda.

In order to face the evolving challenges of an increasingly interdependent world, we must build on progress on Health 2020 and support countries in accelerating their efforts in achieving the SDGs, and innovate for impact on the health and wellbeing of populations beyond the SDG-era.

As Regional Director, I pledge to **put people at the center** of WHO's work in the European Region. My approach, mutually reinforcing and closely aligned with *WHO's 13th General Programme of Work* (GPW13) and the UN Sustainable Development Goals will be focusing on three interconnected priorities:

1. Stand for Equity above all

Gearing up leadership to support countries towards achieving universal health coverage (UHC), with equal access to quality services in order to leave no-one behind.

2. Deliver health gains across the life-course

Promoting healthy environments and lifestyles to ensure the highest attainable standard of health at every stage of life.

3. Enhance health security

Strengthening regional, national and local capacities for strong, resilient health systems in a globalised world.

This speedier transition toward greater social equity in the Region requires bold and strategic political leadership, engagement of all stakeholders and a whole-of-society approach. Going beyond business as usual and championing innovation is the way forward.

1. Standing for Equity above all

Although health status has dramatically improved in the WHO European Region, health gains are not evenly distributed across countries or across social groups within the same country. Affordability and long waiting times are the most common reasons why people do not seek medical care.

Guided by the WHO's 13th General Programme of Work I will prioritize protection against financial risks and equity in coverage with quality health services; we will support the WHO European Member States towards attaining the SDGs through extending health coverage, as a way of reducing inequalities and tackling social exclusion.

I will prioritize equity in coverage with quality health services, so that WHO EURO can contribute to the GPW13 strategic commitment of 1 billion more people benefitting from UHC.

In a constantly evolving global landscape, looking ahead is imperative. A case in focus is the changing world of work in Europe: some jobs may be made obsolete by technology resulting in unemployment, anxiety and societal disruption. Social protection systems should be prepared to support this evolution, and I will work to make the health sector a beneficiary as well as the driver for change.

Innovation and Action for impact:

- Stepping up the Region's s role as global health leader to champion the case for UHC through mobilizing collective action for investing in health.
- Driving the **health systems** agenda guided by **dignity, equity, access and human rights** by **supporting member states** in implementing the Tallinn Charter; Modern health-system governance and financing, with a strong health workforce, will be drivers for economic growth.
- Tackling the **social determinants of health**, placing special importance on **employment**, **age** and **gender** and on those most **vulnerable**;
- Improving population health via a concerted public health effort throughout the Region with emphases on re-invented primary health care, health promotion, and patient safety; access to essential services and affordable and effective medicines and vaccines; quality of care and health system performance.
- Producing evidence-informed monitoring and evaluation of progress towards UHC and achievement of SDG3 and beyond.

Together with partners, we will explore new path for delivering on health outcomes, particularly with technological advancements such as digital health technologies, to improve access to health services, reduce costs, enhance system efficiency, and ultimately reduce inequalities in health.

2. Delivering health gains across the life-course

WHO EURO carries the highest burden of NCDs, yet we know steps which can be taken to prevent them. This includes mental health disorders, which are a leading public health challenge. Advocacy and political engagement will make the difference, focusing on human rights and dignity.

Another intervention pathway would be to curb the number-one environmental cause of death in Europe: air pollution, labeled as the new tobacco.

Impact will stem from innovative use of existing and upcoming evidence that instill healthy habits and lifestyles in early child development, adolescence, and the ageing population, and promoting healthy environments.

I pledge to put this knowledge into practice to help achieve WHO's transformative goal of 1 billion more people enjoying better health and well-being.

Innovation and Action for impact:

- As part of a *global* movement, set and pursue ambitious goals to substantially reduce premature NCDs mortality: implementation of the regional action plan will bring political commitment, intersectoral governance, and all-inclusiveness, and address the socio-economic dimensions of NCDs.
- Promote the WHO European Region as a champion to turn the tide on the silent epidemic of **mental health disorders** globally. Reduce stigma and raise awareness, address root causes and risk factors, and build supportive environments, also within our own Organization, as aligned with the Secretary-General's UN System Workplace Mental Health and Well-Being Strategy.
- Carry out a thorough **evaluation of achievements** and of lessons learnt from health promotion interventions that address all **risk factors** (tobacco, alcohol, etc.), as well as the impact of the environment on our health (energy, urbanization, etc).
- Leverage the Region's wealth of knowledge to yield growth across its Member States, and globally.

3. Enhancing health security

Humanitarian crises progressively affects the health and well-being of the population, political and economic stability in the Region. Conversely, the attainment of health contributes to peace and security. Sustainable health systems require improved capacities for implementation the International Health Regulations (IHR) at country level.

My vision is to enhance WHO European Region's leadership role in anticipating the public health agenda for the next decade. This will include implementing IHR and discussing with Member States precise public health goals, such as striving to eliminate measles and rubella and addressing communicable diseases such as HIV and TB. In a globalized world, threats such as Antimicrobial Resistance (AMR) do not recognize geographic or even human-animal borders. A frontrunner on this issue, the European Region can fast-track their AMR efforts in order to continue setting the standard globally.

With the increase in climate-induced disasters and emerging patterns of migration, national and global systems need to effectively deal with risk as a prerequisite to ensure that no-one is left behind.

At the core of approaching the challenge of ensuring 1 billion more people are better protected from health emergencies, as Regional Director I will be committed to ensure people are at the center of all policies.

Innovation and Action for impact:

- Coordinate national and international responses to the **growing health challenges stemming from migration**, in countries of transit or destination. WHO EURO will guide the health sector's response, involving neighboring and countries of origin to address root causes.
- Ensuring **Health protection** through support to development and implementation of **national emergency preparedness and response strategies**, incorporating the complex needs of the affected

populations, promoting an agreed mechanism for data sharing and facilitating the long-term integration and cross-border health care strategies.

- Applying innovations in modernizing health infrastructure: Scaling up country guidance to make health systems resilient to address outbreaks as well as the detrimental effects of conflicts and violence.
- Advocating for greater public and private sector support to **research**, **development and the promotion of vaccines and medicines**.
- Promoting a stronger **One Health approach** to tackle communicable threats such as **antimicrobial resistance** (**AMR**), including working more closely within the UN family and with external partners to facilitate a coordinated and multi-sectoral effort.

A Transformed WHO & a Forward-looking WHO European Region: Working Together to Bring Sustainable Solutions for All

WHO is in the midst of a corporate transformation where leadership and staff are jointly shaping an Organization that aspires to create a better future, promote health, and serve the vulnerable.

If elected, I will lead WHO EURO to scale up the organizational transformation, strengthen partnerships and communication, and create space for innovation and integrate these in our work.

A vital commitment I am declaring is to **invest in staff**, our unique asset, developing skills, offering career advancement and providing support mechanisms to help them embrace change and ensure talent is retained.

If elected, I will prioritize working modalities which deliver greater impact at country level. WHO's communication and crisis response capabilities will be boosted. Transparency and accountability will cut across all activities and offices.

WHO EURO has a wealth of experience to share with its neighbors and global partners. I will champion scaling up knowledge, sharing good practices and promoting policy dialogue within and between countries, with supplemented WHO advice to boost country impact. Networks of designated Centres of Policy Excellence and Regional Experts proposed by countries will facilitate such exchange and WHO Europe will serve as a clearing house in selected fields.

Meeting the public health needs in the Region will require **bringing together the wider development and political communities with the health sector** and strengthening **partnerships**. As a health diplomat and WHO Representative at the UN, I know a strategic approach which emphasizes our comparative advantages and produces the greatest outcomes.

Transformation also means being much more creative and ground-breaking with our value-for-money policy options, with great potential for return of investment. Private sector engagement may help develop new approaches to mobilizing, allocating and spending resources.

I will promote inclusive, transparent and impactful partnerships with the European Union, G7, G20, the African Union, ASEAN and other regional-global players, to drive a common agenda and enhance the political impetus for health.

To lead WHO Europe towards 2030 and beyond:

- A new, results-focused and agile way of collaborating will be applied at country level in the context of a reformed, coherent, and more strategic UN development system.
- Foster constructive and fruitful partnerships, to ensure access to innovative funding mechanisms while refraining from restricting the actions of partners. I will explore options to engage the private sector and entrepreneurs, especially in technology and digital innovation. This includes involving youth to participate in and shape the political and economic lives in our Region.
- **Augment the global health leader role of WHO EURO**, by anticipating and shaping the public health agenda for the next decade.
- Embrace a **reformed UN development system** which provides an opportunity to showcase how stakeholders and partners can work collectively in countries.
- Support digitalization of health systems, which will help WHO European Region deliver on GPW13 and the SDGs through telemedicine, accessible quality health information, healthy behaviours promotion and support for patients' networks as well as data gathering and disaggregation to ensure better policies and accountability.
- Showcase health as a pioneer and innovator of choice for all countries. I will strive to collaborate with any partner who can help create supportive environments to attain health and well-being in the European Region.

After three decades as United Nations civil servant, at the country, regional and global levels in challenging managerial and leadership capacities, I will be humbled to offer my knowledge, skills and experience for the position of Regional Director of the WHO European Region. As Regional Director, I will serve the Member States, I will visit, I will listen and I will continue to learn from the wealth of good practices around the Region. I truly believe that this is a unique time to seize all opportunities to reinvent the way we promote and protect health to change the lives of people of the region and on the planet.