



EUROPE

**Regional Committee for Europe
Sixtieth session**

Moscow, 13–16 September 2010

EUR/RC60/Conf.Doc./5
23 July 2010
101664
ORIGINAL: ENGLISH

Draft resolution

Governance of the WHO Regional Office for Europe

**Amendments to the methods of work and Rules of Procedure of the Regional
Committee and of the Standing Committee of the Regional Committee**

The Regional Committee,

Recalling the discussion which took place at its fifty-ninth session on governance of health in the WHO European Region, and the ensuing request that further consultations be undertaken by its Standing Committee on that issue;

Noting that, as a consequence, the Seventeenth Standing Committee decided at its session in November 2009 to establish an ad hoc working group on health governance in the WHO European Region;

Further noting that the Standing Committee has fully endorsed the whole set of recommendations regarding the methods of work and amendments to the Rules of Procedure of the Regional Committee and of the Standing Committee of the Regional Committee emanating from the Working Group's reviews and discussions with the Regional Director;

Having itself considered those recommendations, as contained in the report of the Regional Director on this subject (document EUR/RC60/11);

Mindful of the principle that all Member States in the European Region of WHO should have an equitable opportunity over time of participating in the work of both the Executive Board and of the Standing Committee;

Recalling its resolution EUR/RC53/R1 concerning membership of the Executive Board, and especially operative paragraph 5, in which it requested the Standing Committee to assess the experience gained in implementing the resolution and to report its findings to the Regional Committee in 2010;

1. ENDORSES the changes to the methods of work of the Regional Committee and of the Standing Committee of the Regional Committee outlined in document EUR/RC60/11;
2. ADOPTS the amendments to the Rules of Procedure of the Regional Committee and of the Standing Committee of the Regional Committee contained in the annex to document EUR/RC60/11, to be effective from the end of this session;
3. CONFIRMS that, in light of the experience gained in the implementation of resolution EUR/RC53/R1, the periodicity of membership of the WHO Executive Board for those Member States in the European Region of WHO that are permanent members of the United Nations Security Council should remain three out of six years;
4. RECOMMENDS that, in order to ensure an equitable geographical balance of membership, the selection of Member States in the European Region to submit candidatures for membership of the Board and of the Standing Committee should in future be governed by the subregional groupings of countries contained in part 1 of the annex to this resolution;
5. DECIDES that, notwithstanding the provisions of paragraphs 2 and 4 above, the increased membership of the Standing Committee, based on revised subregional groupings, shall take effect as from 2010;
6. CALLS ON Member States in the European Region of WHO to take account of the criteria contained in part 2 of the annex to this resolution when designating persons to serve on the Executive Board and on the Standing Committee;
7. REQUESTS the Standing Committee to initiate a cycle of comprehensive reviews of governance in the WHO European Region and to report back to the Regional Committee on lessons learned in this regard at such intervals as the Standing Committee itself deems appropriate.

Annex

Criteria for membership of the WHO Executive Board and of the Standing Committee of the WHO Regional Committee for Europe

Part 1: Subregional grouping of Member States

Group A: (17 Member States)

Belgium, Czech Republic, Denmark, Estonia, Finland, Germany, Iceland, Ireland, Latvia, Lithuania, Luxembourg, Netherlands, Norway, Poland, Slovakia, Sweden, United Kingdom of Great Britain and Northern Ireland

This group would at all times have four members of the Standing Committee and two seats on the Executive Board, plus a third seat alternating with Group B.

Group B: (17 Member States)

Andorra, Austria, Bulgaria, Croatia, Cyprus, France, Greece, Hungary, Italy, Malta, Monaco, Portugal, Romania, San Marino, Slovenia, Spain, Switzerland

This group would at all times have four members of the Standing Committee and two seats on the Executive Board, plus a third seat alternating with Group A.

Group C: (19 Member States)

Albania, Armenia, Azerbaijan, Belarus, Bosnia and Herzegovina, Georgia, Israel, Kazakhstan, Kyrgyzstan, Montenegro, Republic of Moldova, Russian Federation, Serbia, Tajikistan, The former Yugoslav Republic of Macedonia, Turkey, Turkmenistan, Ukraine, Uzbekistan

This group would at all times have four members of the Standing Committee and three seats on the Executive Board.

Part 2: Criteria for the selection of candidates to serve on the Executive Board and on the Standing Committee

A broad mix of skills and practical experience from public health as well as from national administration is desirable when considering the selection of candidates to serve on the Executive Board and on the Standing Committee.

The following criteria regarding experience and areas of competence are proposed:

- (a) current position in health administration in his/her country (or the position held in the near past) close to the political decision-making level;
- (b) experience of working with international organizations, WHO or other United Nations organizations;
- (c) ability to collaborate, coordinate and communicate within the country and between countries;
- (d) experience of coordinating high-level political and/or technical programmes, nationally (interregional, interministerial) or internationally (bilateral or intercountry);
- (e) availability and commitment;
- (f) gender (female candidates encouraged).