Plenary Morning

The WHA77 opening included some fanfare, with singing and videos showcasing arts and young people dancing. These performances were also featured in the WHO investment round presentation yesterday.

The President of WHA77 should be chosen by the African region as per regional rotation; Botswana’s Minister of Health and Wellness, Dr. Edwin G. Dikoloti was elected.

Special guest of honour, president of Mauritania and chairperson of the African Union, Mr. Mohamed Ould Cheikh Al-Ghazouani, was invited to give a keynote speech.

Dr. Tedros, in his opening speech, emphasised once again the imbalance in WHO’s budget, in which the amount of flexible Assessed Contributions are still dwarfed by Voluntary Contributions, making it difficult for WHO to run projects and attract and keep necessary personnel that are required to implement the institution’s mandates.

Nobel Prize winners Prof. Katalin Karikó and Prof. Drew Weissman were presented with the Director-General’s Award for Global Health for their scientific work enabling the development of effective mRNA vaccines against COVID-19.

The devastating Landslides in Papua New Guinea were mentioned by the DG, and others. No mention was made of Palestine during the plenary, except by Malaysia. There was no acknowledgement whatsoever during the Assembly’s first day of the massacre in Rafah’s apparent “safe zone” camp last night.

Plenary afternoon

The General Committee, following informal consultations and the release of a white paper, recommended not including Taiwan-related discussions on the WHA agenda. This recommendation received support from China, highlighting WHA’s historical stance of not encouraging such requests. They noted that more than 100 countries support the One China principle. However, Belize and St. Vincent & the Grenadines voiced their support for Taiwan. In the end, the General Committee’s recommendation on Taiwan was approved.
The President then announced the removal of items 4, 5, 21.2, 21.4, 21.5, and 21.6 from the provisional agenda, followed by the scheduling of evening sessions from 18:00 to 21:00 for each day of the Assembly beginning tomorrow.

Committee A

The work of Committee A began late in the afternoon of the first day of the Assembly with Item 17, the discussion on the draft fourteenth general programme of work, 2025-2028, presented in Document A77/16. The GPW 14 was welcomed by most Member States and regional groupings.

Funding and Financing

Belgium, speaking for the European Union, welcomed the draft report and emphasised the importance of adequate sustainable and predictable funding of the WHO budget for 2025-2028. Bhutan, speaking on behalf of the Southeast Asian region, and who endorsed the draft report, together with Lebanon (on behalf of the Eastern Mediterranean Region) encouraged Member States to support WHO with flexible, predictable, and sustainable financing.

Prevention and Results-Based Management

Canada welcomed GPW14 and its renewed focus on prevention. They applauded the focus on "results-based management," and encouraged evidence-based, data-driven and transparent reporting. Canada “reiterate[d] the importance of WHO’s normative role, providing timely and accurate and appropriate products [emphasis added].”

Health Equity and Social Determinants

Participating for the first time in Committee A, Brazil stated its consistent engagement with the discussions about GPW14, reiterating that Lula’s position is highlighted on refusing to treat health as commodity: “health is not a commodity to be bought [...] nowhere is inequality more offensive than in health”. While recognizing social determinants of health and the centrality of primary care, Brazil refrains from mentioning the participation of the private sector in its statement.

Continuity and Indicators

China emphasised the importance of continuity between GPW 13 and GPW 14, urging WHO to resist the temptation to introduce new indicators to replace older ones, which would make it difficult to track progress over time. This was also one of the proposals of Ethiopia in their 5 considerations.

The discussion on Item 17 was cut short at 17:30 with only a few MS able to speak. It will continue on Tuesday morning at 9:00.