Plenary

The Seventh Plenary started at 09:00 with discussion on agenda item 7. Awards (Document A77/INF./1), followed by agenda item 6. Executive Board election (Document A77/48).

During the meeting, Brunei Darussalam, Bulgaria, Chile, Costa Rica, Israel, Lebanon, Norway, Poland, the Republic of Korea, Somalia, Thailand, and Zimbabwe were elected without objections. However, significant opposition arose concerning Israel's election. Palestine, while respecting the election process, opposed Israel’s inclusion due to its attacks on women and children, urging the selection of another country. Pakistan, on behalf of EMRO, condemned Israel's violations of humanitarian law and human rights, warning of the negative message this election sends. Lebanon shared serious concerns about the Board’s future effectiveness and felt compelled to express reservations despite wishing to avoid politicisation. Algeria regretted Israel’s nomination, highlighting its breaches of the WHO Constitution and international law. Nicaragua joined Pakistan in expressing deep concern and called for a ceasefire in Palestine. In contrast, Israel’s representative, presenting as a doctor and academic, accused other countries of prioritising politics over health and welcomed European support for its election.

Despite reservations about Israel’s nomination, the new formation of the EB was accepted.

Committee A, Morning Session

The Chair opened the meeting to discuss agenda item 16. Financing and Implementation of the Programme Budget for 2024-2025, and agenda item 18. Sustainable Financing, specifically focusing on the WHO Investment Round. The relevant documents for these discussions are A77/14, A77/15, A77/17, A77/35, A77/37.

Funding and Resource Mobilization

Several countries emphasised the need for effective resource mobilisation and sustainable funding for WHO. Australia and Germany highlighted the importance of ensuring key priorities are adequately funded, with Germany criticising the current model’s over-reliance on a small group of contributors and proposing the World Health Summit in Berlin as a platform for garnering more support. Japan and Kenya stressed widening the donor base and achieving better funding predictability and flexibility. Japan also called for equitable distribution of assessed contributions, while Kenya requested member states to support
the WHO Investment Round in November 2024. Switzerland committed to strengthening WHO by ensuring member states’ priorities are reflected in funding. China questioned the optimism of pillar three progress, calling for more country office funding and clarity on financing synergy. Mexico and France advocated for transparency and flexibility in thematic financing, with France emphasising the need for evaluation and accountability procedures.

Regional Concerns
Several nations highlighted specific regional and thematic funding concerns. Bahamas and Brazil stressed the need to address funding inequities, particularly in the Americas, with Bahamas noting the region remains the least funded and Brazil criticising the reliance on voluntary contributions. Senegal linked neglected tropical diseases (NTDs) with climate change, requesting increased and flexible funding for NTDs and universal health coverage. Togo and Malaysia expressed satisfaction with the 11% program budget increase but called for sustainable funding and private sector participation. India advocated for digital initiatives and public-private partnerships. Yemen emphasised a balanced approach to sustainable development, strengthening agreements and local [health] authorities, and supporting national and regional offices. Thailand supported monitoring by WHO or external auditors to ensure transparency.

Committee B, Morning Session
The Chair proceeded with agenda item 14.2. Implementation of resolution WHA75.11 (2022) containing an update of the health emergency in Ukraine. The relevant documents for this discussion are A77/13, A77/A/CONF./6, A77/A/CONF./6 Add.1, A77/A/CONF./9, and A77/A/CONF./9 Add.1.

Member states acknowledged the report A77/13, signalling a stance that neither signifies approval or disapproval; with no objections raised, the report was duly noted.

A roll call was conducted to decide on the document A77/A/Conf./6 titled “Health emergency in Ukraine and refugee-receiving and hosting countries, stemming from the Russian Federation’s aggression”. The draft decision was proposed by a coalition including Ukraine, the USA, EU, and other countries. This decision entailed reporting to the 78th World Health Assembly in 2025, through the 156th session of the Executive Board, on the implementation of resolution WHA75.11 (2022). This included an assessment of the direct and indirect impacts of the Russian Federation’s aggression against Ukraine on the health of the Ukrainian population, as well as related regional and wider-than-regional health impacts, including its adverse effects on the attainment of the objectives and functions of the WHO. The draft decision was accepted with 72 voted in favour of the decision, while 10 voted against it.

“Russia’s unprovoked actions have created humanitarian crises in Ukraine and beyond”

The USA

Another roll call was conducted to decide on the report A77/A/CONF./9 titled “Health emergency in and around Ukraine”. The draft resolution was proposed by Russia, Syria, Democratic People’s Republic of Korea, and Belarus. The report contained decisions to continue supporting health sectors in Ukraine
and neighbouring countries, sustainably procure essential medical supplies, monitor attacks on healthcare facilities, assess psychiatric morbidity resulting from the conflict, and regularly report on WHO’s efforts to the World Health Assembly. The resolution was rejected with a vote of 13 in favour and 54 against. Algeria voted against the resolution, citing concerns about interference and WHO’s impartiality. Russia criticised the politicisation of the issue, alleging NATO’s orchestration, and emphasised practical cooperation. Brazil abstained, highlighting concerns about politicisation and lack of substantive contributions to improving health access. Cuba emphasised transparency and rejected politicisation, urging WHO to maintain its intergovernmental nature. Belarus criticised Western resolution as unbalanced.

Committee B, Afternoon Session

The discussion on agenda item 20, addressing health conditions in the occupied Palestinian territory, including East Jerusalem, and in the occupied Syrian Golan, continued with reference to documents A77/18, A77/B/CONF./1, A77/B/CONF./1 Add.1, A77/B/CONF./3, A77/B/CONF./3 Add.1, A77/B/CONF./4, and A77/B/CONF./4 Add.1.

The legal counsel reviewed the process, noting the withdrawal request by Egypt in the previous meeting on Wednesday, which could not proceed without Israel’s agreement. The chair then mentioned this withdrawal request had been rescinded. Three new amendments outlined in A77/B/CONF./4 are to be addressed first, focusing on paragraph 27. Israel requested a roll call vote on paragraph 27 of document A77/B/CONF/4, which condemns indiscriminate attacks on medical and humanitarian facilities and personnel by the occupying power, in violation of international law. The vote resulted in 97 countries in favour, 19 against, 43 abstaining, and 56 absent.

Another roll call was conducted for paragraph 28, which recalls the provisional measures ordered by the International Court of Justice, requiring Israel to ensure, in cooperation with the United Nations, unhindered provision of urgent basic services and humanitarian assistance to Palestinians in Gaza. The vote for paragraph 28 resulted in 154 in favour, 7 against, 13 abstentions, and 72 absent.

A roll call was conducted for paragraph 29, which recalls the provisional measures ordered by the International Court of Justice, noting the significant casualties, destruction of infrastructure, and mass displacement resulting from Israel’s military operation after October 7, 2023. In the roll call, 84 voted in favour, 51 against, 22 abstained, and 89 were absent.

The committee proceeded to vote on the draft decision outlined in document A77/B/CONF./1 with the amendments. These included paragraph 26 from A77/B/CONF./3, and paragraphs 27, 28, and 29 from A77/B/CONF./4. One hundred and seventy seven members were eligible to vote and the decision received approval with 102 votes in favour and 6 against.

Egypt, speaking for the Arab group, stressed the significance of today’s principled stance regarding the victims in Gaza and occupied Palestinian territories. They presented a draft resolution focusing on health issues in these areas, excluding non-health-related matters within the WHO mandate due to the current crisis. Egypt
denounced Paragraph 26 as a hostile amendment, alleging it distorts facts and disregards international reports condemning the targeting of medical facilities by the occupying power. They declared the Arab Group’s dissociation from Paragraph 26. Colombia reasoned that paragraph 26, while addressing the release of hostages, also mentions armed groups “using health facilities including hospitals and ambulances,” which they view as an attempt to shift responsibility away from Israel. Ireland also expressed regret that the operational decision aimed at addressing the dire health conditions on the ground has become the subject of a politicised debate. Cuba added that the resolution in its original format could have reached a consensus.

Belgium explained their decision to abstain saying that the text fails to adequately acknowledge the applicability of international humanitarian law (IHL) and the protection of health infrastructure to all parties involved in conflicts. Spain emphasised the importance of full compliance with IHL by all parties and the protection of missions providing medical support to the people of Gaza, which was why they supported the amendment proposed by the Arab states.

Austria expressed a differing view, stating support for the amendment proposed by the Israeli delegation to balance the text. They found the inclusion of elements in paragraphs 27 to 29 unusual, if not unprecedented, and rejected the claim of indiscriminate attacks by one party, asserting that the obligation to protect civilians applies to all parties in a conflict. And so they chose to dissociate from these paragraphs. Japan added, regarding paragraph 27, that the WHO’s mandate as a UN specialised agency for health promotion does not extend to the legal assessment of military action. Israel accused the Arab group of “making a mockery of the Assembly” by introducing the new paragraphs.

Countries, one by one, announced their dissociation from paragraphs in the amendments until the meeting adjourned.

The PHM WHO Watch Team was unable to participate in meetings from Friday afternoon onwards, and thus, we regretfully cannot provide a report on subsequent proceedings.