



PHM daily briefing of the WHO 78th WHA Meeting: Day 2 (May 20, 2025)

Report prepared by PHM's [WHO Watch team](#)

Committee A (morning)

The morning Plenary started in good spirits following the adoption of the Pandemic Accord. This was followed by small inputs by youth delegates from **Thailand, Panama, Norway, Republic of Korea, Ethiopia** and **Morocco**. The delegates voiced the effects of Covid-19 on younger generations and how the long term effects are still unfolding. They commented on the potential for the pandemic accord to lay the foundation to build infrastructure to respond to future global crises. The youth delegates urged member states to encourage and invite active and meaningful youth participation in future negotiations – in the words of **Thailand** “*not as tokens but as partners*”.

The youth urged that the document should not be symbolic, but rather should be implemented with real action, with one delegate from **Ethiopia** asked “*I do not just congratulate you. I challenge you so that this accord must not gather dust in binders. It must be in budgets, in policies, and leadership, and of course, with youth perspectives included.*” They emphasized that the next pandemic is inevitable, but with solidarity, equity, and preparedness, we can respond better. One delegate said, “*the memory of COVID 19 is not just a chapter and takes a book. It is a scar that is still healing*”.

Young leaders called for meaningful youth participation in shaping health systems, fighting misinformation and advancing pandemic education. They stressed the importance of the One Health approach, addressing the interconnection between human, animal, and environmental health. The need for a fair and functional PABS system was repeatedly highlighted, especially for low-resource and crisis-affected regions. The youth demanded that the agreement reflect their lived experiences and secure their future through bold, inclusive, and transparent global health governance.

The historic plenary was suspended with hopeful cheers.



Opera singer to open the high-level segment during the time sensitive schedule of the Assembly

The high-level segment of Item 8 opened with heads of state and government delivering their messages with strong support for WHO and multilateralism amidst the impending financial crisis of the organization. There was a call for equity by many member states. **France**, for example, argued that we cannot defeat a pandemic without “*treating everyone in the same way*”. **Angola** spoke on behalf of the African Union of which 14 countries pledged US\$8 million to WHO.

In the mid-morning of the WHA, the member states strongly emphasized the importance of global cooperation and solidarity in addressing health challenges. However, a notable exception to this spirit of cooperation was the statement made by **Robert F. Kennedy Jr**, the **United States** Secretary of Health and Human Services. He defended the US's withdrawal from the WHO, stating that it did not emerge out of a loss of interest in international cooperation, but rather from a desire for fair, efficient, and transparent global health operations. “*We want a free international health operation from the straightjacket of political interference by corrupting influences of the pharmaceutical companies of adversarial nations, and their proxies,*” he said. He even invited fellow member states to create new institutions, or to revisit existing institutions in the spirit of efficiency, transparency, and accountability.

This statement was met with strong opposition from **China**, which expressed “*solemn protest and bright root opposition*” to the **US's** comments. **China** emphasized that COVID-19 prevention and

control is a scientific issue that should be guided by science and evidence, and that the US should stop *"instrumentalizing the pandemic"* and *"smearing and shifting the blame onto all countries."* **China** called on the **US** to proactively share data and respond to the legitimate concerns of the international community.

Despite the disagreement between the **US** and **China**, member states highlighted their commitment to strengthening health systems and achieving universal health coverage. The President of **Tanzania** noted the progress made in reducing maternal mortality rates and expanding primary healthcare facilities. The President of **Cape Verde** celebrated being certified as a malaria-free country. The President of the **Philippines** emphasized the importance of multilateralism, stating, *"multilateralism is not an option; it's our common obligation."*

The Assembly also discussed the need for investment in health infrastructure and research. The Director-General of WHO mentioned the establishment of the Pandemic Fund and the mRNA technology transfer program. The President of **Croatia** emphasized the importance of empowering healthcare workers, stating, *"strengthening global health begins with empowering those who deliver care."* These initiatives demonstrate the commitment of the global community to improving health outcomes and preparing for future health challenges. The establishment of the Pandemic Fund in 2022, which has mobilized an additional \$6 billion in co-financing to support seven projects across 75 countries, and WHO's investment round, were also mentioned with near-universal support from member countries.

Committee A (afternoon)

For the Afternoon Committee A met to discuss the Proposed programme budget 2026–2027 by seeing the Documents [A78/6](#), [A78/6 Corr.1](#), [A78/6 Add.1](#), [A78/37](#) and [A78/INF./8](#) and being asked to approve the resolution. While no country voiced opposition to the Budget in general many countries took the chance to speak on the matter. Notably the staff of the WHO was thanked and felt for in by many MS.

However, in the subtext of the Budget decisions also, three major topics were becoming more present and thus discussed from different angles.

1. The Budget trimming and reprioritisation inside this process, including the 14th general programme of work GPW 14
2. The general (financial) state of the UN System

3. The greater changes in world politics

The topics were addressed interconnectively. Many countries argued that the first usage of the GPW14 was successful in focussing on primary health care and state sovereignty, with other rather voicing concern that other Budgets will fall under the table. Notably the **American region** stressed the point of being the least funded Region. The concept of Regions could be seen as being left aside in the first two focal points of the GPW 14 stating primary healthcare and national state focus. However the **American Region** highlighted that they are not only a LMCI Region but are also very diverse in geographics and one of the ones most hard hit by climate change (**Ecuador, Grenada**).

Many countries welcomed the fiscal responsibility of the Secretariat with only **Ghana** mentioning the gaps still open in the Budget. Many Countries were positive about the WHO refocussing, which in times of a Budget cut also means reducing its responsibilities. **Switzerland's** statement is exemplary, mapping out that they see the WHO as only a normative and state supportive body, but still not shying away from asking the WHO to continue to be the main body of influence in global health.

The majority of states took the general (financial state) of the UN system as an undisputable truth that has to be dealt with. Many countries asked other MS to invest more, but did not connect this to a certain policy that needs to be implemented or kept.

There was no visionary but more cautious and defensive language.

Standing out was **Germany** that voiced the financial state in the sharp quote of

“the roof is on fire”.

This was followed with a ,battling stereotype, humorous remark of

“I tell you what I want, what I really really want”

while earning laughs in the assembly **Germany** swiftly followed up to list its demands. In style of the new main MS funder it was paternally glad that monthly detailed updates are coming from secretariat and welcomed an AC increase welcome and fully supported. The AC increase was indeed welcomed by many countries, with only **Ghana** asking for a cut to 14% for them. Others asked for the process of how to get to 20% to be adjusted or not having the same percentage as the goal for everybody. Here broadening the donor basis is the goal of the secretariat. The question of how to get to the final AC

increase seems to still be part of negotiations between MS between each other and the Secretariat. This might be connected to the fact that the new developments in world politics including the earlier **USA** statement left its toll on the basis of understanding of multilateralism also within the WHA.

The next Agenda Item was 11.1 governance reform.

As it reads in document A78/5 Annex Point 3 In 2018 and 2020

“United Nations system organizations to develop procedures for investigating allegations of misconduct by the executive heads of those organizations. In its reports, the JIU noted that WHO did not have formal procedures. The WHO [...] affirming that they are relevant and apply to WHO.”

The MS reacted with a mix between voicing trust, hailing transparency and asking for oversight. In general the states did not show major disagreements and the debate was brief. Only **Russia** raised two points that are not already part of the draft as it voiced the need to update the Accountability framework and asked for a formalized process of the DG (evaluation/allegation) that to its opinion is long overdue.

There were also many states emphasizing that this process should be done as efficiently as possible. Keeping the current financial situation in mind, this would free up resources for the core tasks of WHO (**Slovenia and France**). **Germany, Japan and more** seemed to hide the word **control** with their demands for **transparency**. **South Korea** warned that this process could be politicized.