

Switzerland as a member of the Executive Board of the World Health Organization (WHO)



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Health is becoming an increasingly important issue at the international level. This trend is being driven by the Millennium Development Goals, three of which specifically relate to health, as well as the discussion on health as a global public good. Switzerland's membership of the Executive Board of WHO provides an opportunity to work towards improving world health governance and reinforcing national health systems.

Peter Maurer, State Secretary of Foreign Affairs



In many areas, Switzerland has a profound interest in strong, competent international organizations. This is particularly true of the World Health Organization which, on behalf of its member states, must be able to perform its pivotal role within the complex architecture of global health. We therefore support WHO's commitment to reforms, which will enable the organization to tackle global and regional challenges credibly and effectively. Moreover, membership of the Executive Board gives us the opportunity to play an active role, learn from international experience and ensure the ongoing further development of our health system predicated on the best possible, broad-based evidence.

Pascal Strupler, Director of the Federal Office of Health



The World Health Organization is an essential actor in the developing world. The quality of its analyses as well as the commitment and professionalism of its experts provide indispensable support for many developing countries that are facing chronic health crises and are badly lacking in good-quality infrastructure and trained personnel. In the field, WHO is a valued partner of development agencies: Switzerland works closely with its experts in a number of countries where it runs healthcare support programmes, in areas such as perinatal health, the fight against malaria, or health system management

Martin Dahinden, Director of the Swiss Agency for Development and Cooperation



The World Health Organization (WHO) is a specialized agency of the United Nations with headquarters in Geneva. A founding member of WHO (1946), Switzerland is the host country and, since 26 March 1947, an official member state of this technical UN organization.

1. Switzerland in WHO

The World Health Organization (WHO)

WHO is the directing and coordinating authority for health within the United Nations system. According to its constitution, WHO is responsible for providing leadership on global health matters, shaping the health research agenda, setting norms and standards, articulating policy options based on sound information, providing technical support to countries and monitoring and assessing health trends.

WHO is organized on three levels: the head office in Geneva, six regional offices, and 147 country offices. The six WHO regions are as follows: Africa (AFRO), Americas (AMRO), Eastern Mediterranean (EMRO), Europe (EURO), South East Asia (SEARO) and Western Pacific (WPRO). Switzerland is part of the European Region which consists of 53 nations.

The World Health Assembly is the decision-making body of WHO. It generally convenes in Geneva each May and is attended by delegations from the 193 member states. Its main function is to determine the policies of the organization.

The Executive Board (EB) is composed of 34 members technically qualified in the field of health. Members are elected for three-year terms, representing their six regions proportionately. The main functions of the Executive Board are to give effect to the decisions and policies of the World Health Assembly. The WHO Secretariat comprises around 8,000 staff working at head office, in the six regional offices and in member countries. The organization is headed by the Director-General, who is nominated by the World Health Assembly at the proposal of the Executive Board. The current Director-General is Dr Margaret Chan of China.

2. Switzerland on the WHO Executive Board

Switzerland was last a member of the WHO Executive Board between 1999 and 2002, represented by the then Director of the Federal Office of Public Health (FOH), Prof Thomas Zeltner. For the period between May 2011 and May 2014, Switzerland will again sit on this important WHO decision-making body, this time represented by Dr Gaudenz Silberschmidt, Vice-Director of the FOH and Head of the International Division. Membership of the WHO Executive Board will make Switzerland visible on the global health stage and enable the direct application of its foreign policy on health. Switzerland's concerns can be brought to the Board's attention and Swiss priorities can be addressed.

3. WHO governance / political analysis

Although WHO is a technically specialized organization, the discussions held at meetings of the Executive Board or the World Health Assembly reflect an increasingly complex political reality. Health questions are often linked to political and economic issues. Health diplomacy must be able to address these but has difficulty at times in addressing them coherently. A major challenge in this regard is to avoid being blocked by political interests and to define more clearly the special role of WHO in the international debate, which by its very nature touches on themes other than those purely related to health.

4. Switzerland's role in WHO / Swiss health foreign policy

In view of the globalization and internationalization of health issues, a trans-sectoral approach at the federal administration level is essential. This also provides the basis for Switzerland to act as a convincing partner on the international stage, and to advocate its own interests in the best possible way.

Swiss positions on the various WHO dossiers are consolidated within the framework of Swiss foreign policy with regard to health.

On the one hand, the Interdepartmental Conference on Health Foreign Policy, jointly chaired by the Director of the Federal Office of Health and the State Secretary for Foreign Affairs, defines priorities and strategies. On the other hand, the Interdepartmental Working Group on Health Foreign Policy (IdAG GAP) supervises projects relevant for health foreign policy. Switzerland's positions on the WHA or EB agendas are coordinated within this working group. The positions of the many different offices within the federal administration must also be taken into account in order to optimize the coordination of health foreign policy dossiers with overall foreign policy and with Switzerland's other sectoral foreign policies.

Swiss health foreign policy

An agreement on health foreign policy objectives has existed between the Federal Department of Foreign Affairs (FDFA) and the Federal Department of Home Affairs (FDHA) since 2006¹. Switzerland was one of the first countries to adopt an inter-ministerial national strategy on global health issues. Within the federal administration, this pioneering agreement serves as an internal instrument for defining joint objectives and approaches of the different offices working in the area of health foreign policy.

The 18 medium-term objectives of the Swiss health foreign policy are based on the following five main interests of Switzerland in the health area:

1. Safeguarding the health interests of the Swiss population
2. Harmonization of national health policy with international health policy
3. Improvement of the effectiveness of international cooperation in the field of health
4. Improvement of the global health situation
5. Safeguarding Switzerland's role as the host country and location of leading companies in the health sector

The target agreement on health foreign policy is valid until the end of 2012 and is currently being revised (2011-2012).



5. Switzerland's priorities as a member of the WHO Executive Board

In recent years Switzerland has attended meetings of the WHO Executive Board in the role of an observer. Over the next three years, Switzerland will continue its commitment to WHO and take advantage of the opportunity to play an active role in its capacity as a member of the WHO Executive Board, with the focus on the following institutional, strategic and thematic priorities.

5.1. Global health governance

Since its foundation, the World Health Organization has been a key agency and the leading international platform for health issues, particularly with regard to standards and norms. Over the past ten years, however, health has become an increasingly important international issue. The many new public, private and mixed institutions created during this period have rapidly become very powerful and financially solid players. This has increased the complexity of the global health architecture and to some extent cast doubt on the role of WHO.

a) Strengthening WHO

The discussion concerning the fundamental role of WHO in a globalized world and its sustainable financing is in full swing. Switzerland accords major importance to the reform process in this regard, and supports the Director-General in her bid to adapt the organization to the current global situation. This applies both to issues concerning global health governance as well as to structural and organizational adjustments within the organization itself. Switzerland believes it is essential for the six action areas outlined by Dr Chan (global health governance; programme priorities; results-based planning, budgeting and evaluation; structure of the organization; personnel policy and practice; financing of WHO / sourcing and use of resources) to be addressed in parallel. The question of how to improve the involvement of the many different stakeholders in global health policy in the work of WHO, as envisaged by the new mechanism (referred to in the current WHO proposal as the "Global Health Forum"), is viewed by Switzerland as a core element for governance. As with the entire reform process, Switzerland will actively participate in determining concrete approaches and contribute to their implementation.



¹ <http://www.bag.admin.ch/themen/international/11103/11523/index.html?lang=en>



b) Sustainable WHO financing

The WHO budget is supplied by obligatory contributions (assessed contributions) and voluntary contributions, with the latter accounting for around 80% of the total budget. The total budget for the 2010-2011 period, i.e. assessed and voluntary contributions, amounts to USD 4.54 billion. Switzerland's obligatory financial contribution amounts to 1.2161% of the ordinary budget for the 2010-2011 period or around CHF 5 million. The budget for the forthcoming biennium 2012-2013 has been approved in May 2011 by the World Health Assembly.

At present, WHO is faced with the huge challenge of ensuring sustainable financing. This situation is attributable in particular to the organization's dependence on voluntary contributions, which tend to fluctuate wildly. Switzerland is aware of this funding problem and is committed to improving the situation. For several years, Switzerland's voluntary contributions (CHF 5.5 million per year) have been largely free from conditions or defined targets, and have been made available to WHO as a core voluntary contribution. Switzerland's voluntary contributions are broken down as follows: Joint UNICEF-UNDP-WHO-World Bank programme for Research and Training in Tropical Diseases (TDR): CHF 1.65 million; Joint UNDP-UNFPA-WHO-World Bank joint programme (HRP): CHF 850,000; unearmarked: CHF 3 million).

Switzerland is also committed to an approach that simultaneously addresses the issue of long-term WHO funding alongside the question of the organization's governance. WHO must be able to focus its activities once more on its core competence so as to achieve an improvement in its financial situation.

c) International Geneva and global health

The city of Geneva is not only home to WHO headquarters, but is also an international centre of competence for global health issues. Geneva is changing as the number of actors in the health sector grows. The aim of the "Campus Santé" project, for example, is to better exploit the synergies between responsibilities and geographical relationships within WHO, UNAIDS and the Global Fund to Fight Aids, Tuberculosis and Malaria (GFATM). With its Global Health Programme and numerous events on thematic priorities, the Graduate Institute of International and Development Studies (IHEID) also helps to reinforce Geneva's reputation as an international centre of competence for health-related issues.

As a member of the Executive Board, Switzerland will make every effort to promote Geneva as an international health capital and support the maintenance and renovation of the WHO headquarters, which are to be financed from the regular WHO budget.

5.2. Strengthening health systems

All the countries of this world are aware of the many inequalities and deficiencies concerning access, quality of care and health services. Improving health conditions is largely dependent on good-quality national health systems. Low-income countries in particular face formidable challenges. Building hospitals does not alone improve conditions and the quality of health services. It is also necessary to have trained, professional staff, guaranteed quality of diagnostics and treatments, mechanisms for access, distribution and health financing, and access to medicines. Reinforcing national health systems is therefore an essential criterion for achieving the Millennium Development Goals related to health (MDG 4 – infant health; MDG 5 – maternal and reproductive health; MDG 6 – fight against infectious diseases).

The importance of health systems is an integral part of the WHO global agenda and is an overarching theme of the organization's General Programme of Work, 2006-2015. In keeping with its mandate to define and support the implementation of national policies on public health, WHO has formulated intervention principles to strengthen national health systems in line with the principles and values of the Alma-Ata Declaration (1978). As a member of the Executive Board, Switzerland supports the six action



areas, or „building blocks“, that make up the WHO Framework for Action.

The WHO framework for action for strengthening health systems (2007) identifies six action areas or «building blocks»:

- 1. Service delivery:** improve management capacities at all levels of the health system. Health services include care – prevention, diagnostics, treatment or rehabilitation – and other components which are not specifically designed for patients, such as mass education campaigns and prevention.
- 2. Medical products, vaccines and technologies:** ensure equitable access to essential medical products, vaccines and technologies of assured quality and at a reasonable cost.
- 3. Health workforce:** a sufficiently large health workforce that is available, competent, and productive. Many developing countries face a critical shortage of health workers: the global shortage amounts to four million, of which one million in Africa alone. The situation is critical in 36 countries, where the ratio of doctors, nurses and midwives to inhabitants is 2.3 for every 1,000.
- 4. Financing:** adequate funds to ensure that people have access to needed services and are protected from financial impoverishment as a result of having to pay for them. Social protection and financial management systems are an integral part of this objective.
- 5. Information:** ensure the production, analysis, dissemination and use of reliable and timely health information.
- 6. Leadership and governance:** A national policy that sets out the roles and responsibilities of the public, private and welfare sectors – including civil society – in the provision and financing of healthcare.

Strengthening health systems is therefore a priority of Swiss development cooperation on health. Swiss development cooperation supports numerous programmes that directly aim to strengthen national health systems in several countries in southern Africa, Central Asia and Eastern Europe, with particular emphasis on financing health systems (the efficient use of resources in favour of the poorest sections of the population, implementation of social protection systems) and upscaling local capacities (education and human resources management).

Strengthening health systems is essential not only for developing countries but also for emerging economies and industrialized countries. With this in mind, Switzerland – in its capacity as a member of the Executive Board – is committed to promoting issues that help to strengthen the various aspects of health systems, be they related to the health workforce, financing or access to essential medicines.



Personal closing words of Dr Gaudenz Silberschmidt, ambassador, Head of the Division of International Affairs, Swiss Federal Office of Public Health – Member of the Executive Board of WHO

It is a great honor for me to represent Switzerland in the WHO Executive Board. In addition to my function as head of international affairs of the Swiss Federal Office of Public Health, I am also a member of the teaching staff of the Global Health Program at the Graduate Institute of International and Development Studies in Geneva. This allows me to combine theory and practice with regard to global health policy. As a member of the Standing Committee of the WHO Regional Committee for Europe for the past three years and having negotiated in previous WHO inter-governmental meetings, I look forward to this new challenge in the field of health diplomacy. I am committed to making an active contribution to enhancing the quality of the work of the Executive Board, and in so doing strengthening WHO. My aim is to combine in a coherent way my duties as representative of my country with WHO's global responsibilities and my own voice as a health expert.