

WHO must strengthen partnerships at a global level

Ismail Sallam, a former professor of cardiac surgery, was Egypt's minister of health and population from 1996 to 2001

What will be your priorities on taking office?

As director general my priorities would be driven by a commitment to equity and alleviation of disparities. I believe that the world community genuinely wants to alleviate the true causes of ill health and disease. Public health and primary healthcare systems should be the cornerstones at country and global levels. My priorities would be to focus on:

- Leadership and advocacy—WHO should assert a strong leadership in promoting health so that it is given priority in the complex and highly politicised global development agenda.
- Strengthening partnerships with the industry, academia, research institutions, and non-governmental organisations.
- Developing a strong evidence base to enable WHO policymaking and governing bodies to take

sound decisions and to enable them to improve managerial processes and governance.

● Ascertaining that the health programmes designated by countries and WHO governing bodies as priorities are provided with the best possible technical and managerial support.

● Boosting the morale of WHO staff by ensuring that they are given clear objectives.

What will you do to champion the needs of the developing world?

The director general should focus on strengthening WHO's leadership in promoting global health as an integral component of a global system for human development and security. He has to ensure active participation of countries and regions within the organisation in a collective manner to optimise the reach and the effectiveness of WHO's

global health policies and recommendations. WHO should address the concerns and aspirations of its different members in a democratic manner.

What will you do to change the culture of WHO so that there is greater openness, communication, and internal debate?

Greater transparency calls for improved tools for better planning, sensible resource allocation, and a management information system that truly ties objectives to programmes, to resources, to ongoing and planned implementation, and to formal evaluation and effectiveness auditing. I would strongly welcome a regular, international, independent, expert external audit of WHO's work.

What kind of reform is needed to WHO's regional structure? How will you achieve this?

The performance of WHO personnel cannot be expected to reach a level of excellence unless they are provided with an insightful, supportive leadership and a suitable working atmosphere, as well as performance based incentives. I strongly believe that WHO's major resource as a technical agency is its personnel. WHO's technical successes can be attributed



almost entirely to the quality of the work of its staff.

What new ideas do you have for funding WHO's core activities?

My ideas include:

- Encouraging government healthcare services to cooperate with the private sector and, possibly, non-governmental organisations.
- WHO has to show that it has optimally used its existing financial and other resources. It should put forward concrete examples of such "optimal uses" as part of its fundraising efforts.
- The national political authorities in countries have to be stimulated in order to obtain a major political commitment to health. □

WHO needs a global health alliance, which should be called the Mandela plan

Joseph Williams, a former prime minister of the Cook Islands, is the medical director of Mount Wellington Accident and Family Health Care, in Auckland

What will be your priorities on taking office?

My priority will be to ensure that WHO achieves the aims set out so clearly last year by its commission on macroeconomics and health. The commission says that \$25bn [£16bn; €24bn] a year would pay for 41 essential health interventions that would cover perhaps two thirds of the population of the poorest 46 countries.

My overriding priority would be to achieve that goal of extra financing and to make sure it is spent effectively to solve the key problems identified by the

commission: not just through more government funding from rich donor countries, but by a new global health alliance involving many non-government sectors.

What will you do to champion the needs of the developing world?

My own Cook Islands, I believe, has shown one of the most effective ways of solving developing world health problems: the simple step of setting up, village by village, parenting and early childhood development centres. By teaching pregnant mothers the key elements of child nutri-

tion and sensible child development practice, we were able to reduce child hospital admission in our main island of Rarotonga by 90%. The developing world cannot afford the rich countries' model of almost \$2000 spending per person a year on sickness treatment when the world's poorest nations average \$13.

What will you do to change the culture of WHO so that there is greater openness, communication, and internal debate?

I certainly will promote an administration based on consultation, transparency, and accountability.

What new ideas do you have for funding WHO's core activities?

British Chancellor Gordon Brown has called for "a new Marshall plan" to abolish child poverty and provide decent health care for all the world's children. I support that concept completely but want it to be called "the Mandela plan."

I would specifically like WHO to invite Nelson Mandela and a similar core of the world's most

respected moral leaders to head up a new global alliance to abolish poverty and promote a world culture of peace and unity, strong economic growth, a fully educated population, healthy families, and a world where cooperation replaces hatred and oppression. The world's priorities desperately need to be reversed.

Will you repeat the controversial exercise of comparing health systems worldwide?

The short answer is no. □

