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WORLD HEALTH ORGANIZATION

CURRICULUM VITAE*

Family name (surname): Kluge First names: Hans Other names: Henri Marcel Paul	
Gender: male	
Place and country of birth: Roeselare, Belgium	Date of birth (Day/Month/Year): 29/11/1968
Citizenship: Belgium	
If you have ever been found guilty of the violation of any law (except minor traffic violations) give full particulars: None.	
Address to which correspondence should be sent: Dr Hans Kluge, WHO Regional Office for Europe, UN City, Marmorvej 51, 2100 København, Denmark.	E-mail: klugeh@who.int

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Degrees/Certificates obtained:

(Please indicate here the principal degrees/certificates obtained with dates and names of institutions starting from the latest, additional pages may be added)

Institution:

Degree:

Institute of Tropical Medicine Prince Leopold, Antwerp (Belgium)	Diploma in tropical medicine (with distinction)	31 March 1995
Katholieke Universiteit (Catholic University), Leuven (Belgium)	Diploma in medicine, surgery, and obstetrics (with distinction)	29 June 1994

Certificates

Cybersecurity (refresher)	14 January 2024
Safe and Secure Approaches in Field Environments (Gaziantep, Türkiye)	5-7 November 2023
WHO Ethics Empowerment	02 August 2023
Certificate of appreciation from SEE Health Network: <i>For substantial contribution and dedication to the development of the SEE Health Network and for boosting the regional cooperation in health</i> (2023)	2023
United to Respect: Preventing sexual harassment and other prohibited conduct for managers	04 April 2022
WHO Risk Management	05 March 2022
Prevention of sexual exploitation and abuse	04 March 2022
UNBSAFE	18 January 2022
Cybersecurity Essentials and Preventing Phishing (refresher)	06 March 2020
Cybersecurity Essentials and Preventing Phishing	13 January 2019
UN Multilingual Course on Prevention of Harassment, Sexual Harassment and Abuse of Authority	8 July 2018
GB UN To Serve with Pride - Zero Tolerance	2 August 2018

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Emotional Intelligence 2.0 - Level 2 certification, Talent Smart	31 January 2018
Emotional Intelligence 2.0 - Level 1 certification, Talent Smart	1 February 2017
Certificate Conference dedicated to the 30th anniversary of the Vienna Declaration on Nursing, Certificate by the Federal Research Institute for Health Organization, and Informatics of Ministry of Health (Moscow, Russian Federation)	16-17 October 2018
WHO Flagship Course on Health Systems Development for the Countries of Central Asia and the Caucuses, WHO Regional Office for Europe (Bishkek, Kyrgyzstan)	26 October- 6 November 2009
Workshop on Resource Mobilization. WHO Regional Office for South-East Asia and WHO Country Office Myanmar (Yangon, Myanmar)	August 2005
UN Team Building and CCA/UNDAF Workshop, United Nations Development Programme (Moscow, Russian Federation)	September 2000
"Populations in Emergency Situations" training course certificate, Médecins sans Frontières	14-28 January 1996
Training course "Electrocardiography for General Practitioners", Katholieke Universiteit (Catholic University). Faculty of Medicine, Internal Medicine, Cardiology (Leuven, Belgium)	2 January 1995
Practical course: 6 months apprenticeship in approved hospitals and 6 months practical training in General Medicine, Katholieke Universiteit (Catholic University), Academic Centre for General Medicine (Leuven, Belgium)	31 August 1994
Training thesis: Microvascular angina, a practical approach in diagnosis of chest pain with unknown aetiology, Katholieke Universiteit (Catholic University). Faculty of Medicine (Leuven, Belgium)	25 June 1993
Certificate of Secondary Education, Institute "Klein Seminarie" (Roeselare, Belgium)	4 September 1986
Certificate of Proficiency for Higher Education, Institute "Klein Seminarie" (Roeselare, Belgium)	4 September 1986

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LANGUAGE SKILLS		Speak	Read	Write
<p>Enter appropriate number from code below to indicate level of your language knowledge of the official languages of the European Region. If no knowledge, please leave blank.</p> <p>CODE: 1. Limited conversation, reading of newspapers, routine correspondence.</p> <p>2. Engage freely in discussions, read and write more difficult material</p> <p>3. Fluent</p>	English	<input type="text" value="3"/>	<input type="text" value="3"/>	<input type="text" value="3"/>
	French	<input type="text" value="3"/>	<input type="text" value="3"/>	<input type="text" value="3"/>
	German	<input type="text" value="2"/>	<input type="text" value="2"/>	<input type="text" value="2"/>
	Russian	<input type="text" value="2"/>	<input type="text" value="2"/>	<input type="text" value="2"/>
<p>Other language skills:</p> <p>Please indicate additional language skills you possess</p>	Dutch (native)			

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Professional experience

Please describe in detail, in reverse chronological order, positions held, functions performed and other relevant experiences during your professional career (excluding international experience). For each entry, provide dates, and a description of the main duties and responsibilities and outline the principal results, outcomes and achievements, giving concrete examples.

1994-1996 Family doctor in the cities of Lombardsijde, Nieuwpoort and Hasselt (Belgium).

Clinical practice, paediatrics, emergency medicine, community medicine, nursing, and midwifery.

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International experience

Please describe in detail, in reverse chronological order, positions held, and functions performed and other relevant experiences of an international nature. Please include all experience in international organizations' governing bodies and secretariats. For each entry, provide dates, and a description of the main duties and responsibilities and outline the principal results, outcomes and achievements, giving concrete examples.

02/2020–to date WHO Regional Director for Europe - following nomination by the WHO Regional Committee for Europe and appointment by the WHO Executive Board

Since I was elected in 2020, I have been entrusted by 53 Member States of the WHO European Region with the responsibility of delivering my vision of "United action for better health". This entails *inter alia* leading and managing a team of almost 1000 dedicated staff at the Region's head office in Copenhagen (Denmark), in 7 Geographically Dispersed Offices and 32 Country Offices, and overseeing a biennial budget of 1 billion USD. Through strategic partnerships, my focus is on achieving Universal Health Coverage, addressing health emergencies, and promoting healthier populations leaving no one behind.

Some notable achievements during my tenure include:

- Establishment of the Pan-European ('Monti') Commission on Health and Sustainable Development, which spearheaded investments and reforms to enhance the resilience of health and social care systems, including G-20 Joint Task Force Health and Finance under Italy G-7 Presidency (2021).
- Operationalization of the European Network for Disease Control, emphasizing One Health principles through a quadripartite action plan and regional adaptation guide (2024).
- Establishment of the WHO Country Office in Cyprus (2022); WHO Office on Quality of Care and Patient Safety in Athens (2021), and WHO European Centre for Preparedness for Humanitarian and Health Emergencies in Istanbul (September 2020).
- Formation of a Pan-European Mental Health Coalition and adoption of the Athens Declaration on mental health and COVID (2021).

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- Leadership in the European Immunization Agenda, facilitating the administration of 1.7 billion doses of COVID-19 vaccine and saving over 2.1 million lives in the WHO European Region, and keeping the Region polio-free.
- Adoption of the Budapest Declaration on Environment and Health, around the triple crisis of climate change, air pollution, and biodiversity (2023).
- Advisory Council on innovation for noncommunicable diseases with 6 initiatives leading to advances in childhood obesity, reducing alcohol affordability, protecting young people from unhealthy marketing online.
- Initiation of Trans-Atlantic Partnerships (EURO/US Department of Health and Human Services/PAHO) on indigenous population health (2023) and climate change and health (2024).
- Pioneering behavioural and cultural insights action plan (world's first) and establishment of a 48-Member State network.
- Crafting of the Bucharest Declaration on health workforce, focusing on investment in workforce development, education, and protection (2023).
- Implementation of the Oslo Medicines Initiative and Novel Medicines Platform, fostering partnerships for patient access to medicines.
- Engagement with youth through platforms like the WHO Young People and Young Professionals Forum (since 2020) and the WHO/Europe's Youth for Health Forum (since 2022), focusing on immunization, mental health, and sexual and reproductive health.
- Launching of a Digital health flagship programme, resulting in the development of 44 national digital health strategies/plans (since 2020).
- Inauguration of the Pan-European Leadership Academy in 2020, with 10-country cohorts completed to date.
- Implemented reforms in governing body management and processes to enhance accountability and transparency, and promoted participatory governance.
- Successfully led the comprehensive realignment of WHO EURO structures to the European Programme of Work, shifting resource allocation to Country Offices from 33% to 50%.
- Achieved clean audits of regional and country offices.
- Established the new Enabling Hub in Istanbul to support country focus, service agility and financial clean sheet.

09/2010-01/2020 Director, Division of Health Systems and Public Health & Special Representative of the Regional Director to Combat Multi/Extensively Drug Resistant Tuberculosis, WHO Regional Office for Europe, Copenhagen, Denmark.

- Development of the New WHO European Vision on Health Systems for Prosperity and Solidarity: Include, Invest, and Innovate (2018).
- Conducting a regional study on Universal Health Coverage (financial protection) (2018).
- Organization of the WHO Barcelona training course on health financing and health system strengthening to address noncommunicable diseases and multidrug-resistant tuberculosis (held annually).
- Establishment of the WHO European Coalition of Partners to jointly scale up public health (2017).

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- Establishment of the WHO European Centre of Excellence on Primary Health Care in Almaty, Kazakhstan. Developing the 40th Anniversary of the Alma-Ata Declaration “New global vision on integrated Primary Health Care” (2018).
- Providing country guidance to address the impact of the economic crisis on health and health systems (2013).
- Spearheading regional initiatives on access to both old and new high-cost medicines and ensuring a sustainable workforce.
- Facilitating the rollout of modern primary health care and health systems in both EU and non-EU countries.

08/2009-09/2010 Acting Director Country Health Systems (2010). Unit Head, Country Policies and Systems, WHO, Regional Office for Europe, Copenhagen, Denmark.

- Development of National Health Plans and Health Sector Strategies.
- Conducting health system performance assessments.
- Facilitating countries' self-assessment on public health capacities and services.
- Assessing the quality management of primary health care.
- Strengthening capacity in national child and adolescent strategies across 7 countries.
- Conducting multi-disciplinary assessments of country crisis management capacity.
- Translating evidence on social determinants, gender, and equity into actionable national health strategies.
- Operational improvements in performance management and team building within my unit.

03/2004-08/2009 Medical Officer TB and Team Leader Diseases Unit (AIDS, TB, malaria), WHO Country Office for Myanmar, Yangon. Consultant to the Democratic People's Republic of Korea on Tuberculosis (Global Drug Facility).

- Development of 5-year National Strategies and 3-year National Operational Plans for Tuberculosis (TB), TB-HIV, HIV/AIDS, and malaria, focusing on high-risk groups such as border populations, migrants, and prisoners.
- Meeting Global TB Control Targets (MDG 6, Target 8) of achieving a 70% case detection rate and an 85% treatment success rate by 2005.
- Implementation of results-based performance management policies and practices for the new multi-million-dollar 3 Diseases Fund (AIDS, TB, malaria).
- Establishment of multi-sectoral Country Coordinating Bodies (AIDS, TB, malaria) and Technical Working Groups comprising government and non-government/civil society representatives, donors, and People Living with The Disease.
- Successful fundraising efforts for the WHO Country Office, Ministry of Health, and national professional associations in a resource-constrained context, securing support from organizations such as the Global Fund, UNITAID, USAID, CIDA, UN Central Emergency Response Fund, EC, DFID, SIDA, Norway, Netherlands, AusAID, and TOTAL oil company (private sector) through collaborations with the International Union Against TB and Lung Diseases.
- Leadership of the Staff and Development Learning Committee, overseeing initiatives such as staff questionnaires on work environment and motivation.

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2/1999-03/2004 TB and TB-HIV Project Manager, WHO Country office for the Russian Federation, Moscow.

- Securing a new Executive Order by the Ministry of Health and Justice on TB, TB-HIV, and MDR-TB Control, aligned with the WHO Strategy.
- Establishment of an Inter-Ministerial High-Level Working Group to revise TB and TB-HIV control policies.
- Formation of an International Inter-agency Coordination Committee and Country Coordinating Mechanism.
- Successfully overseeing the implementation, monitoring, and evaluation of the WHO TB and MDR-TB demonstration program across 26 oblasts.

09/1998-10/1999 Regional TB Advisor for the former Soviet Union Countries. Médecins sans Frontières (MSF) International. Moscow, Russian Federation.

- Implementation of TB, TB-HIV, and MDR-TB control projects in both civilian and prison populations the former Soviet Union countries.
- Contribution to the formulation of MSF International policy on TB, MDR-TB, and TB-HIV control in the former Soviet Union.
- Motivation and training of a cadre of national and international health staff.

07/1996-08/1998 Prison TB and MDR-TB Coordinator. Médecins sans Frontières (MSF) Belgium. Kemerovo, Siberia, Russian Federation

- Establishment of a sustainable DOTS and MDR-TB control program in prisons across West Siberia.
- Conducting research on TB epidemiology and multi-drug resistance.
- Successful mobilization of resources for TB and MDR-TB control in prison settings.
- Motivation and training of a cadre of national and international prison health staff.
- Raising international awareness on TB in prison populations.

02/1996-06/1996 Medical Coordinator. Médecins sans Frontières (MSF) Belgium, Nimba, Liberia.

- Re-establishment of medical and public health services in conflict zones at the rural district level.
- Implementation of successful vaccination and nutrition campaigns.
- Enhancement of clinical practice standards in internal medicine and obstetrics.

06/1995-01/1996 TB Coordinator. Médecins sans Frontières (MSF) Belgium. Kismayu, Somalia.

- Implementation of the DOTS program for South Somalia in war zones.
- Development of Standard National Guidelines on Clinical Care in Paediatrics.
- Training of national staff at the district level in infectious disease management.
- Delivery of culturally appropriate health education and case management at both community and individual levels.

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Further achievements and awards

Please state any other relevant facts which might help to evaluate your application for example achievements, awards and accomplishments in light of the criteria adopted by the Regional Committee in resolutions EUR/RC40/R3 and EUR/RC47/R5.

2024	Grand Cross of the Equestrian Order of Saint Agatha, San Marino.
2024	Honorary Fellowship Award of the Faculty of Nursing and Midwifery at the Royal College of Surgeons Ireland.
2023	Kazakh Award “Altyn Shipager” (“Golden Healer”).
2023	Doctor Honoris Causa of the Medicine University of Thessaloniki, Greece.
2023	Certificate of appreciation from SEE Health Network: For substantial contribution and dedication to the development of the SEE Health Network and for boosting the regional cooperation in health.
2023	Letter of appreciation from Minister of Health of Greenland, Mimi Karlsen, thanking RD for visiting Greenland in 2023.
2022	Erepenning (Medal of Honour) Katholieke Universiteit (Catholic University) of Leuven, Belgium.
2022	Honorary Professor by the National Scientific Center of Phthisiopulmonology of the Republic of Kazakhstan (in recognition of outstanding contribution in the field of medicine and health policy).
2022	Letter of appreciation from First Lady of Ukraine, Olena Zelenska, for the WHO and RD support to Ukraine, national mental health programme, incl. support towards Ukraine’s collaboration with Queen of Belgium.
2022	Honorary Fellowship of the Faculty of Public Health, UK.
2021	National Order for Merit in the Rank of Commander by the President of Romania.
2021	Plaque of Honour from the Ministry of Health of Greece.
2021	Aristotles Gold Medal for Life-time Achievement in Mental Health from the International Society of Neurobiology and Psychopharmacology, Thessaloniki, Greece.

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2021	Doctor Honoris Causa of the Semmelweis University, Medicine and Health Sciences, Budapest, Hungary.
2020	Honorary Professor of Astana Medical University, Republic of Kazakhstan.
2020	Award of excellent worker of healthcare by the Ministry of Health of the Republic of Uzbekistan.
2020	Visiting Professor, London School of Hygiene and Tropical Medicine.
2020	Visiting Professor, London School of Economics.
2018	Oorkonde Fonds Christoffel Plantin. Certificate of the prestigious Antwerp/Belgium based Plantin Foundation, in recognition of the many years of strong commitment to the cause of primary health care, especially for the most vulnerable communities.
October 2018	Letter of appreciation from the Minister of Health of the Republic of Bulgaria for "invaluable role and highly professional engagement" on the future of healthcare system and health insurance model in Bulgaria.
September 2018	Letter of appreciation from the Minister of Health of the Republic of Slovenia, for "excellent collaboration and valuable support".
August 2014	Letter of appreciation by the Minister of Health of the Republic of Cyprus for "skills and passion " in the context of the collaboration between the Ministry of Health and WHO to accelerate the implementation of Cyprus's health sector reform programme.
November 2012	Letter of appreciation by the Minister for Health of Ireland for the "Report on Health system responses to financial pressures in Ireland: policy options in an international context".
2003	"Honorary Award" from the Minister of Justice of the Russian Federation as recognition for work in the Russian prisons on TB and MDR-TB.
2001	"Outstanding young person of the year 2001" from the Junior Economic Chamber in Belgium.

Throughout my career, I've gained extensive experience as a resource person, facilitator, and chairperson at both international and national conferences, training courses, and workshops focusing on various aspects of health systems, public health, as well as communicable and noncommunicable diseases.

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Publications

Please list here a maximum of ten publications - especially the main ones in the field of public health, with names of journals, books or reports in which they appeared. (Please feel free also to attach a complete list of all publications.) Do not attach the publications themselves.

1. **Kluge HHP**, Barr B, Muscat NA, Brown C.
Time is running out to meet the Sustainable Development Goals as health inequities widen and trust in government falls
BMJ 2023;19;382:2018.
2. **Kluge H**, Azzopardi-Muscat N.
The health workforce crisis in Europe is also a gender equality crisis
BMJ. 2023 Mar 8;380:554. doi: 10.1136/bmj.p554. PMID: 36889795.
3. **Kluge HHP**, Azzopardi Muscat N, Lazëri L.
Mental health in the European region since the WHO 2001 report
Lancet Psychiatry. 2023 Nov;10(11):828-829. doi: 10.1016/S2215-0366(23)00337-1. Epub 2023 Oct 9. Erratum in: Lancet Psychiatry. 2024 Jan;11(1):e1. PMID: 37827178.
4. **Kluge H**, Forman R, Azzopardi Muscat N, Berdzuli N, Mossialos E.
Environmental sustainability of health systems: time to act
Lancet 2023; 401(10388): 1552-1554.
5. **Kluge HHP**, Azzopardi-Muscat N, Novillo-Ortiz D.
Leveraging digital transformation for better health in Europe
Bulletin World Health Organ. 2022 Dec 1;100(12):751-751A. doi: 10.2471/BLT.22.289132. PMID: 36466211; PMCID: PMC9706350.
6. **Kluge H**, Ammon A.
Monkeypox in Europe and beyond - tackling a neglected disease together
Euro Surveill. 2022 Jun;27(24):2200482. doi: 10.2807/1560-7917.ES.2022.27.24.2200482. PMID: 35713025; PMCID: PMC9205161.
7. **Kluge H**, McKee M.
COVID-19 vaccines for the European region: an unprecedented challenge
Lancet. 2021;397(10286):1689-1691.
8. **Kluge H**, Azzopardi-Muscat N, Figueras J, McKee M.
Trust and transformation: an agenda for creating resilient and sustainable health systems
BMJ. 2023 Mar 20;380:651. doi: 10.1136/bmj.p651. PMID: 36940935.
9. **Kluge HHP**, Wickramasinghe K, Rippin HL, Mendes R, Peters DH, Kontsevaya A, Breda J.
Prevention and control of non-communicable diseases in the COVID-19 response
Lancet. 2020;395(10238):1678-1680.
10. **Kluge H**, Kelley E, Swaminathan S, Yamamoto N, Fisseha S, Theodorakis PN, Kristensen S, Anderson M, Mossialos E.
After Astana: building the economic case for increased investment in primary health care
Lancet 2018; 392(10160): 2147-2152.

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Conflict of interest declaration

Please list any interest, financial or professional, or views publicly expressed, that could create or appear to create a conflict of interest in light of the work and functions of the Regional Director of the Regional Office for Europe, if you were to be elected.

None

I certify that the statements made by me on this form are true, complete and correct. I understand that any false statement or required information withheld may provide grounds for the withdrawal of any offer of appointment or the cancellation of any contract of employment with the Organization.

Date and place: 18 April 2024, Copenhagen.

Signature: Hans Kluge

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WRITTEN STATEMENT

Please see the "Criteria for candidates for the post of Regional Director" (on attached sheet). Your statement should address the following points and must be **no longer than 2.500**

words.

1. Describe your management and leadership qualities and what would make you a successful Regional Director.
2. Set out your vision for the Region, identifying the key challenges facing the Region and how you would propose to address them.
3. Explain how you would engage key stakeholders in order to achieve the goals of the Regional Office.
4. Describe how you envisage that the Regional Office's work will relate to ongoing processes in WHO and the UN, such as the 2030 Agenda for Sustainable Development and the WHO transformation process.

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1. My management and leadership qualities and what would make me a successful Regional Director. (553 words)

My leadership qualities and management approach has evolved significantly as I navigated and adapted to the extraordinary complexity of serving 53 diverse Member States through a period of confluent crises. The clarity of vision I advocated for as a Regional Director, emphasizing inclusivity, investment, and innovation, has supported the region through unprecedented challenges, responding to health emergencies while equitably extending health system delivery, for all at all ages.

To manage this complexity, I have trusted my instinctual and passionate belief that there is no better place to draw strength and inspiration than on-the-ground, in the countries, regions, rural and urban communities with the health workforce, patients and decision-makers. I am convinced that co-creation is the ingredient to assure no-one is left behind and equity sits at the core of everything we do. This avid approach has resulted in strong uptake of our normative, technical and scientific guidance, and a higher valuation of WHO across the Region.

Health investment is a political choice, a choice that often-times sits beyond the domain of a Ministry of Health. Here, I fervently strengthened my skills in advocacy to support my immediate constituency, the Ministers of Health, in promoting investment in health cultivating relationships with Heads of Government/State and Ministers other than health. My multilingual skills further facilitated nuanced dialogues and fostered cooperative relationships essential for Health in All Policies.

The permacrisis in our Region has reinforced the value of collaboration with various stakeholders, from government entities to civil societies, professional- and patient-organizations, the youth constituency and academic institutions, again, ensuring that our strategies are evidence-based and inclusive. I revitalized and upgraded the formidable network of the nearly 300 WHO collaborating centers in our Region.

I pursued a vigorous process of enhancing the office's ability to deliver, while paying attention to the workforce composition, equality, representation and country-focus. Females represent 55% of all staff and 51% of staff at the P4 level and above; a staff comprised of 83 nationalities. The newly established European leadership Academy provided unique skills and opportunities for junior and mid level public health specialists especially from under-represented countries in WHO (10 cohorts completed successfully). Resource allocation to Country Offices shifted from 33% to 50% and we achieved consistently clean audits of regional and country offices.

Furthermore, I implemented reforms in governing body management and processes to enhance accountability and transparency, and promoted participatory governance. To sustainably drive our ability to deliver at the country-level, with improved capacity and efficiency, I undertook a considerable restructure and partially relocated enabling functions to a newly established Enabling Hub in Istanbul.

Leading by example, I am committed to maintain an environment of learning, innovation, and collaboration, ensuring that WHO Europe remains agile and responsive to the needs of each of the 53 Member States. I consider progress made and lessons learned on staff health and wellbeing as invaluable in the years ahead. A strengthened relationship with the staff association and my respectful workplace initiative, serve the organization well in positioning WHO Europe as an employer of choice. An employer that walks-the-talk, applying an absolute zero tolerance for any form of harassment and fosters a spirit of psychological safety across its entire workforce.

As I seek another term as WHO Regional Director, my goal is to build on but go beyond what we have achieved together so far.

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2. My Vision for the Region, identifying the key challenges facing the Region and how I propose to address them. (969 words)

I have an ironclad commitment to confronting the devastating impact of war and conflict in our remarkable Region. I will continue visiting Ukraine on the regular basis to support the Ministry of Health and its workforce, including trips to the frontline, to support in response, recovery and reform. WHO will remain at the helm of the health cluster, operationalizing the humanitarian-development-peace nexus in Ukraine in the field of health.

Amidst the devastating conflict between Israel and Gaza, I will continue to advocate for all hostages to be released immediately, for them to have access to medical care during captivity, for an immediate ceasefire and for a drastic scale up of humanitarian assistance to the people of Gaza by all means. WHO Europe will continue to support the Ministry of Health of Israel in its work on mental health and gender-based violence and we will continue to work as a One WHO to bring relief to the people in Gaza, including medical evacuations of wounded and sick children.

If re-appointed, I will ask Member States to lay the foundations for the generational shifts needed to achieve a European Region that is secure in the face of emergencies, including infectious disease outbreaks, and that is NCD-resilient, carbon neutral, and at peace.

Drawing on my ongoing discussions with Ministers of Health and senior health officials in all 53 Member States, I propose 4 overarching priorities (*to be finetuned after formal consultation with all Member States, should I be re-appointed as WHO Regional Director*):

- 1) **National health security**, including investment in capacity strengthening to tackle chemical, biological, radiological and nuclear threats. This will take forward the forthcoming WHO European Preparedness 2.0 framework, adopting an all-hazards approach. This will ensure that our health systems are resilient, capable of responding to emergencies, and better prepared for future health threats, with strengthened primary health care playing a key role. This approach will be ably supported by the newly established pan-European Network for Disease Control.
- 2) My second priority is to address the **unfinished NCD and mental health agenda**. The European Region is an unfortunate frontrunner regarding smoking, alcohol use, overweight and childhood obesity. While cardiovascular disease mortality has been declining, deaths from cancer far exceed what can be prevented or avoided. Diabetes is an increasing challenge, not at least in humanitarian settings. Conflict, pandemics, insecurity, disasters, addictions, and increasingly digital and disconnected lives have exacerbated the mental health challenges and social exclusiveness faced by our populations.
I will seek maximizing the co-benefits of action on NCDs and the climate crisis including measures that address issues such as the double impact of the food system on carbon emissions and the quality of the European diet. We need to recognize the value of lifelong action to reduce the burden of NCDs and mental illness, starting before birth and throughout childhood and adolescence, while adding life to years among our older populations. As we have shown in our work with the European Observatory, such investment are crucial if we are to achieve financially sustainable health systems.
- 3) The **climate and antimicrobial resistance (AMR) crises** present existential threats. The Budapest Declaration, adopted at the 7th Ministerial Conference on the Environment and Health, highlights the commitment of countries across the region to address the impacts of climate change on health and health systems. I intend to strengthen our ability to tailor support to Member States to mitigate and/or adapt to climate change, including assistance in preparing for climate induced or amplified emergencies. Here I plan to mainstream climate and health across all policy domains.

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I remain committed to reducing the burden arising from AMR, promoting and strengthening our multidisciplinary and multisectoral One Health approach, accelerating application of the Regional Committee-endorsed Roadmap on antimicrobial resistance for the WHO European Region 2023–2030.

- 4) **Healthy longevity** – which links very much with the above mentioned priority of NCDs and mental health. The regional demography is that of plunging fertility rates and a rapidly ageing population. Our health systems are not coping and will collapse unless countries adopt an approach of prevention, health literacy, improved selfcare and healthy ageing throughout life, starting pre-natal. This approach can only materialize if we strongly encourage Governments and society alike to place people's wellbeing at the core of all policies and political priorities, an economy of wellbeing.

Addressing these challenges also means confronting the underlying scandal of **inequity** and rising healthcare costs. The COVID-19 pandemic laid bare the divides between the haves and have-nots, highlighting the importance of health equity. Success will only be obtained if we can achieve universal health coverage and financial protection, not at least to ensure affordable essential and innovative medicines for all who need them. I am particularly concerned about our region's current and projected shortfalls of health workers so I will continue to emphasize the need to invest in the health workforce, with an emphasis on retention, lifelong learning, working conditions, and digital health support.

Overall, my vision for the WHO European region is to build more resilient health systems across all 53 Member States, systems that can not only respond to current challenges but also anticipate and prepare for future threats. This requires a holistic dual track approach to building healthy communities – an environment where social participation is prioritized. It is a vision that adopts the outcomes of the Tallinn Charter 15th Anniversary Health Systems Conference on the theme of Trust and transformation held in Estonia in December 2023, and the Alma-Ata and Astana Declarations on Primary Health Care which call on health authorities to engage actively with those on the frontline, to garner behavioral and cultural insights, with a greater focus on **prevention and health promotion**, creating situations where advances in science and medicine and the potential of digital health technologies are fully harnessed and leveraged for better health and wellbeing.

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3. How will I engage key stakeholders in order to achieve the goals of the Regional Office. (351 words)

Partnership has been at the core of the current European Programme of Work. Given the evolving global health landscape and the persisting challenges we face, exacerbated by recent crises, strategic engagement with key stakeholders remains pivotal for sustainable development, as set out in SDG17.

To engage key stakeholders I will:

- make further progress on participatory governance of the WHO Regional Office for Europe. I will maintain my close and specific contacts with each of the 53 Member States of the region who are my primary ‘stakeholders’, and I will strengthen the sub-regional *modus operandi* that I have ushered-in;
- continue to seek regular counsel from the Standing Committee of the Regional Committee and the European Executive Board members;
- strengthen WHO Country Offices to increase their responsiveness and adaptability to local needs, bolstering their technical and operational capacities;
- work collaboratively with partners to optimize the use of limited resources, ensuring that activities are complementary and aligned with national health strategies, including through the European Observatory;
- establish clear mechanisms and adopt innovative methodologies for assessing impact and monitoring progress towards shared goals, thereby increasing mutual accountability;
- increase the involvement of people with a wide range of lived experiences and professional bodies in policy development and program implementation;
- further strengthen meaningful engagement of the youth constituency; institutionalizing my special initiative *Youth For Health*;
- initiate early dialogues with EU Presidencies to align health objectives and strengthen collaborations with the European Commission and agencies including ECDC, HERA and EMA;
- build on successful public health exchange with CIS countries, the Eurasian Economic Union, the Small Countries, Organization of Turkic States, the Arctic Council and the Shanghai Cooperation Organisation;
- foster interregional collaborations to tackle global health challenges that transcend regional boundaries, such as climate change, infectious diseases, and migration;
- implement the recommendations of my recent review of the generation of use, and engagement of the Office with evidence from research, working with WHO Collaborating Centres and others to influence European public health research agenda and support the public health innovation ecosystem, especially in countries with limited capacity, to enable faster dissemination and adoption of country-specific solutions across the Region.

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4. How I envisage that the Regional Office's work will relate to ongoing processes in WHO and the UN, such as the 2030 Agenda for Sustainable Development and the WHO transformation process. (372 words)

Despite the progress made, no Member State is fully on track to achieve all health-related SDGs. Explicit political commitments to health are falling down country, regional and global agendas. Consequently, I will reinforce the focus of the Regional Office and its partnerships on supporting Member States to achieve their own development goals, consistent with the SDG agenda, through a Health-for-All-Policies approach that leverages not only all of WHO's resources but those of the UN system as a whole.

At the global level, I will support European Member States as they engage in the health discourse at UN High Level Meetings, such as the upcoming UN Summit for the Future which will take into account the conclusions of the Wellbeing Economy Forum in Iceland in June 2024. Likewise, I will promote European and Central Asian perspective in other relevant global and regional fora such as COP29 in Azerbaijan and DAVOS 2025.

I have taken WHO's global transformation agenda to the country level through the 2023 Regional Country Collaboration Strategy, strengthening our country offices. A country focus was at the core of the GPW13-inspired European Programme of Work and closely aligned with the priorities of the Director General and the WHO Global Policy Group, and now informs WHO's 14th Global Programme of Work 2025-2029 and WHO's continued global transformation. If requested by Health Ministries, WHO will support their efforts within government, including action to leverage the resources of the UN system as a whole to increase the visibility of health as a contribution to other policies, coordinating with the Sustainable Development Frameworks and encouraging health to become a priority for UN Resident Coordinators. WHO will support countries in strategic dialogues and mid-term strategic Country Collaboration Strategies to operationalize this leadership-for-health approach as part of the broader UN system.

I will strengthen the role of the UN issue-based Coalition on health to position health as a driver and as a measure of progress of all the SDGs, and advocate for a more effective UN, in the spirit of UN Secretary General António Guterres' "Our Common Agenda".

Finally, I will continue to promote Europe's interests, experiences, and concerns on the global health agenda.

Annex 1

CRITERIA FOR CANDIDATES FOR THE POST OF REGIONAL DIRECTOR

The following criteria were adopted by the Regional Committee at its fortieth session (resolution EUR/RC40/R3) and affirmed and supplemented at its forty-seventh session (resolution EUR/RC47/R5)

(a) The candidate must have a commitment to WHO's mission

The candidate should be committed to the values, role and policies of WHO and notably the goal of health for all. There should be clear evidence of his/her personal involvement in furthering that commitment.

(b) The candidate must have proven leadership qualities and integrity

The candidate must be dynamic and must have demonstrated long-term and consistent leadership qualities. A commitment to outcomes and effective results - as opposed to merely a concern about processes - is essential. Ability to communicate in a clear and inspiring way is an important requirement. Such communication skills need to be effective with widely different target groups, including the mass media, and involve direct personal contact with political and other leaders in the public health field, health personnel, a wide range of academic and other professional groups outside the health sector, and WHO staff, etc. In view of the high goals of WHO and its impartial international character, the personal integrity of the candidate and the ability to withstand pressures from official or private sources contrary to the interests of the Organization are essential.

(c) The candidate must have proven managerial ability

The person should have demonstrated clear ability to manage a complex organization in the health field. His/her performance in that role should have demonstrated a determination to make a thorough analysis of the problems and possibilities for solving them; the setting of clear goals and objectives; the design of appropriate programmes for optimal use of the total resources; the efficient use of those resources; and a careful process for monitoring and evaluation. Importance should be attached to the candidate's skills in fostering teamwork - with appropriate delegation of responsibility - and in creating a harmonious working environment. In view of the need for the work of the Region to interact with and actively support the efforts of other regions and headquarters, the candidate's ability to work effectively with leaders, at both national and international levels, in health and other sectors, is an important element.

(d) The candidate should be a person professionally qualified in the field of health and having a sound knowledge of public health and of its epidemiological basis

This type of qualification and background would greatly assist the candidate in the performance of his/her duties, and in contacts with national health administrations.

(e) The candidate must have a broad understanding of the health problems and social, political, cultural, ethnic and other sensitive issues in the Region

In view of the above, it follows that the candidate would normally be a national of one of the Member States of the Region. The candidate should be fluent in at least one of the working languages of the Regional Committee, and knowledge of others would be an asset.

(f) The candidate must be sufficiently healthy to carry out the duties of the post

It is acknowledged that being sufficiently healthy to carry out the duties of the post would not preclude a physically handicapped person from being considered.