

# WOMEN IN GLOBAL HEALTH

## 75<sup>TH</sup> WORLD HEALTH ASSEMBLY REPORT

22-28 May 2022



**WGH** | WOMEN IN  
GLOBAL HEALTH

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# WELCOME MESSAGE

Every May, for about ten days, Geneva dresses up for its key role as a major global health hub. It is the time of the World Health Assembly (WHA), the largest, most important, and most unique annual gathering of the highest health policy decision-makers. Representatives of the 194 member states that constitute the World Health Organization (WHO) meet in Geneva to shape public health policies and strategies that impact the health of populations, worldwide.

Unlike in previous years, the 2022 WHA had particular meaning.

Firstly, it was the first in-person meeting of WHA after the devastating impact of COVID-19, which had presented a global crisis of unprecedented levels.

Secondly, Member States were meeting for the 75th time since the establishment of the WHO following World War II. Even today, WHO and its constituents are still grappling with health problems like those affecting the world about 25 years before it was established.

Thirdly, Europe was in the third month of a war in its own backyard, the outcomes of which are far from certain but whose consequences will undoubtedly have a negative impact for global health. The theme of the 75th WHA could not be more purposeful: "Health for Peace, Peace for Health".

Fourthly, the first African elected as WHO Director General in 70 years of the organization, was standing for re-election for his second term in office.

It was amidst these important landmarks that Women in Global Health (WGH) led its inaugural and historic official delegation to the WHA, after gaining Non-State Actor status with WHO in January 2022, approved by the Executive Board.

WGH's attendance of the WHA was impactful. Its four-pronged strategic positioning for the WHA was seasoned by the professionalism, excitement, passion, and dedication of its delegation, which comprised some of its core team members and representatives from its country Chapters.

The four pillars of our participation consisted of about more than fifty meetings with Member State delegations, and Heads, and representatives from health organizations; two well received virtual side-events; delivery of two statements on critical agenda items (health workforce and pandemic preparedness and response) and a strong presence and engagement on social media.

But not all achievements for women in global health was positive. Principally was a backsliding on the proportion of women leading WHA delegations, the lowest in almost a decade.

Overall, it was a WHA with a mix of déjà vu and new events. A war and a pandemic for the former and the first African to lead a 75-year-old organization and a brand-new Non-State Actor (NSA) in official relations with the WHO entering the ecosystem, on the latter.

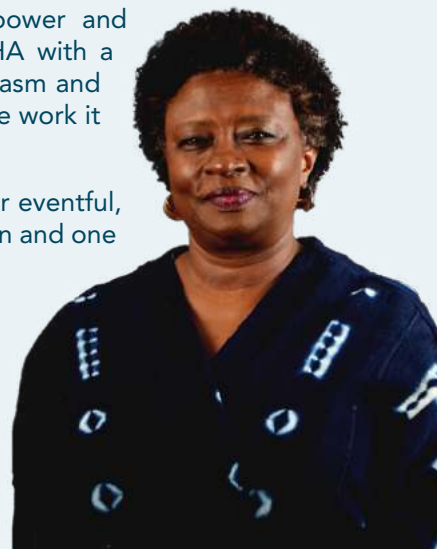
WGH went to Geneva with its determination to challenge power and privilege for gender equity in global health. WGH left the WHA with a boosted resolve to strengthen the battle, spurred by the enthusiasm and appreciation demonstrated by member states and partners for the work it is doing.

In the next pages of this report, we bring you the summary of our eventful, historic participation in the 75th WHA, our first official participation and one of many more to come.

Enjoy the reading.

Best wishes,

**Dr. Magda Robalo**  
Global Managing Director  
Women in Global Health



# ACKNOWLEDGEMENTS

We thank all delegates for their contribution to WGH's first official delegation to the World Health Assembly. Delegates contributed by: informing WGH policy, preparations and messaging; attending, taking notes and analysis of side-events and WHA plenaries; engaging on social media to disseminate advocacy messages; translating documents into key languages; compiling information and materials for this report and contributing diverse country perspectives to enrich WGH advocacy. We thank the WGH Switzerland chapter for hosting delegates in Geneva and supporting on-the-ground logistics. Report design was by Marie Prevot.

# ABOUT WOMEN IN GLOBAL HEALTH

Women in Global Health (WGH) is an organization built on a global movement that brings together all genders and backgrounds to achieve gender equality in global health leadership. We believe that everyone has the right to attain equal levels of participation in leadership and decision-making regardless of gender. WGH creates a platform for discussions and collaborative space for leadership, facilitates specific education and training, garners support and commitment from the global community, and demands change for Gender Transformative Leadership.

[Click here to learn more about WGH](#)



# WGH AT THE 75TH WORLD HEALTH ASSEMBLY

In 2022, after seven years of engagement with the WHA, WGH was granted Official Relations status with the WHO. Official Relations is a privilege that the WHO Executive Board can grant to international organizations (such as NGOs, business associations and philanthropic organizations) that are recognised to have had a sustained and systematic engagement in the interest of the WHO. WGH therefore became one of less than 200 organizations entitled to send an official delegation to this year's WHA, offering new opportunities for WGH to advance gender equality in global health.



*Member States and other stakeholders in one of the Committee Sessions during the 75th WHA*

# MEET THE WHA 75 DELEGATION TEAM

A diverse and inspiring group of WGH members represented our collective movement at the WHA. The contribution, time, and effort of each delegate, whether in-person in Geneva or virtually, played a vital role in WGH's work in calling for gender-transformative action in health.

## Head of Delegation

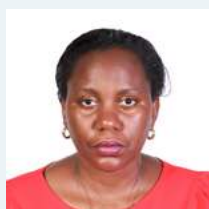


**Dr. Magda Robalo**  
WGH Global  
Managing Director

## Delegation members



**Dr. Deepika Saluja**  
WGH India



**Ms. Doreen Tuhebwe**  
WGH Uganda



**Ms. Fatima Al-Shimari**  
WGH Seattle



**Ms. Gabrielle Landry Chappuis**  
WGH Switzerland



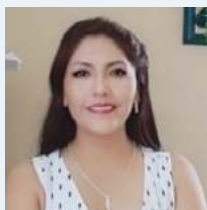
**Ms. Habibou Ouedraogo**  
WGH Burkina Faso



**Ms. Ingeborg K. Haavardsson**  
WGH Norway



**Dr. Jocelyn Clark**  
WGH Canada



**Ms. Loida V. Huayta Paucar**  
WGH Bolivia



**Dr. Luana Fiengo Tanaka**  
WGH Brazil



**Ms. Lynnell Alexie Ong**  
WGH Philippines



**Dr. Mariam Dahir**  
WGH Somalia



**Ms. Merette Khalil**  
WGH Egypt



**Dr. Nicole Atchessi**  
WGH Benin



**Prof. Salome Maswime**  
WGH South Africa



**Dr. Raichou Agali Zibin**  
WGH Niger



**Ms. Venus Mushininga**  
WGH Zimbabwe

## Coordination Team



**Ms. Ana Gutierrez**  
WGH  
Communications  
Coordinator



**Ms. Ann Keeling**  
WGH Senior  
Fellow



**Ms. Becca Reisdorf**  
WGH Policy  
Associate



**Dr. Charlotte  
O'Leary**  
WGH Consultant



**Dr. Kalkidan Lakew**  
WGH Policy  
Associate



**Ms. Molly Grubb**  
Policy Intern



**Dr. Shubha Nagesh**  
WGH Chapter  
Development  
Manager



**Ms. Susan Brown**  
WGH Director of  
Global Policy and  
Advocacy



*Ms. Ana Gutierrez (left), working as part of the WGH Delegation, meets with Uruguayan Health Minister HE Dr. Daniel Salinas (right) outside the Palais des Nations*

# GENERAL OUTCOMES OF THE 75TH WORLD HEALTH ASSEMBLY

## Dr. Tedros' Re-election

The Member States of the WHO re-elected Dr. Tedros Adhanom Ghebreyesus to serve a second five-year term as Director-General. WGH welcomes his commitment towards equal representation of women in decision-making and leadership at the highest level of the WHO.



## Global Health Leaders Awards

One million Accredited Social Health Activist female community health workers in rural India were given a collective **award** for their contribution to health during the COVID-19 pandemic. ASHAs carried out essential work throughout the pandemic to inform communities, trace COVID cases and contacts and later to deliver vaccines but at the start of the pandemic they were sent into communities without adequate personal protective equipment (PPE) and were not recognized or paid as formal sector employees. In 2020 ASHAs went on strike to demand PPE, standardized wages, better working conditions and representation in leadership. The recognition of their service, though undoubtedly hard-earned, has not resulted in decent work and formal sector, securely paid employment. It is time to move from applause to action for a new social contract for women health and care workers based on equal, safe, fairly paid and decent work.



“

*“The WHA75 was a great experience for me, and I am proud to be one of the delegates of this historic event. It was a delight working with women all across the globe who share the same mission and passion towards advocating for gender equality in health. The dedication and concerted effort of each WGH member definitely made this movement possible.”*

- Ms. Lynn Ong, WGH Philippines



# OUTCOMES ON WGH'S AGENDA ITEMS



The overarching themes of WGH's WHA advocacy are women's voice in decision-making and leadership in global health. This theme is at the heart of everything the WGH does. Key messaging on the advocacy themes and agenda items of relevance can be found here:

[Click here to learn more](#)

WGH followed five key advocacy focus areas for the 75th World Health Assembly:

- Gender Equity and the Health Workforce
- Gender Responsive Universal Health Coverage
- Gender Responsive Pandemic Preparedness and Response
- Prevention of Sexual Exploitation, Abuse and Harrassment in Health (PSEAH)
- Gender Equity in Leadership

[Click here to see what Member States said about them](#)



*The WGH Delegation joins the International Federation of Medical Students Association to discuss their joint agenda towards gender equity in health*



## Agenda Item 15: Human Resources for Health

- **Working for Health Action Plan 2022–2030**

- The draft Action Plan approved by the WHA recognizes the vital contributions of the health and care workforce to health systems, while highlighting the need for mainstreamed policy action to address gender inequality in the health and care workforce.
- It highlights gender equity issues such as occupational segregation, pay inequality and underrepresentation of women in leadership and decision-making. It also places equity at the center of the Working for Health agenda.

[Click here to learn more](#)

- **Global Health and Care Worker Compact**

- The Compact approved by WHA states that health and care workers require the skills, resources, employment security, adequate and regular remuneration and safe, healthy, and supportive environments that enable them to deliver respectful quality care to all people.
- It acknowledges the need for a gender-transformative approach, recognizing concerns of discrimination, safety, and equal benefits that exclusively or disproportionately affect women health and care workers.

[Click here to learn more](#)

- **WHO Global Code of Practice on the International Recruitment of Health Personnel**

- The importance of the Code of Practice was recognized, and there was a request from Member States for continued reporting by the Director General.

[Click here to learn more](#)

- **Another Draft Resolution** was proposed by Botswana, Colombia, Croatia, Eswatini, Ethiopia, Jamaica, Namibia and Norway and makes mention of the importance of advancing gender equity in the health workforce and creating employment opportunities for women in the sector.

[Click here to view Dr. Deepika Saluja and Dr. Shubha Nagesh's blog on Community Health Work](#)

## Agenda Item 16.1: The Independent Oversight and Advisory Committee for the WHO Health Emergencies Program

- The Independent Oversight and Advisory Committee for the WHO Health Emergencies Program (IOAC) was established in 2016. The IOAC is mandated to provide oversight and monitoring of WHO's work in health emergencies, to guide the activities of the WHO Health Emergencies Program, to offer advice to the Director General within its mandate and to report to the Health Assembly.
- The need for gender experts to provide technical guidance for WHO to effectively lead a global pandemic and other emergencies is included in the report.

[Click here to learn more](#)

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*"I had an opportunity to work closely with experienced delegates and I learned how they were leading, interacting and being activists at the same time as being diplomats, this will help me in my future participation. The delegates were determined to advocate for women health professionals by reaching many member states in the WHA."*

- Dr. Mariam Dahir, WGH Somalia



## Agenda Item 16.2: Strengthening WHO Preparedness for and Response to Health Emergencies

- The pandemic treaty was not formally on the agenda, however it came up in other topics (e.g. International Health Regulations [IHR]). There was general support for the Intergovernmental Negotiating Body (INB) process, but discontent about feeding into process or inputting was present. In addition, the INB process' connection with IHR was unclear.
- The Director General presented the report on **"Strengthening the global architecture for health emergency preparedness, response and resilience"**. The report presents proposals that are grouped into three main pillars: equity, inclusivity and coherence.

[Click here to access the synthesis of Member State recommendations](#)

- Member States agreed to create a Working Group on amendments to the International Health Regulations (2005) (WGIHR) and to be considered at WHA77 in 2024.

[Click here for more information on the outcomes](#)

- A **resolution on strengthening clinical trials to provide high-quality evidence on health interventions and to improve research quality and coordination** was proposed by Argentina, Peru, United Kingdom of Great Britain and Northern Ireland and welcomed by Member States.

## Agenda Item 16.4: Implementation of the International Health Regulations

- Member States agreed that implementation of IHR should be swifter in the future, with a reduction to a 12-month period.

[Click here to learn more](#)

## Agenda Item 21.4: Preventing and Responding to Sexual Exploitation, Abuse and Harassment (PRSEAH)

- This agenda item was widely discussed among Member States, however non-state actors (NSAs) were not permitted to deliver statements. Various calls were made for WHO to lead a sector-wide reform; pursue a policy of zero tolerance; continue transparent reporting of and follow-up to allegations; and ensure that sufficient resources are allocated to PRSEAH. The importance of strengthening efforts for a better gender balance and for diversity, equity and inclusion within the organization to prevent SEAH is also included in the report.

[Click here to learn more](#)

- The program budget to ensure strengthening of leadership, accountability, compliance and risk management in relation to the PRSEAH in health can be found here:

[Click here to learn more](#)



*WGH team hard at work on preparing briefings, making contributions, and tracking progress on our advocacy areas*

# WGH IMPACT AT THE WHA75

WGH worked to move the needle on gender equity in global health by delivering statements, and meeting with Member States and NGOs to discuss our joint agenda. We advocated on each of our five key areas in numerous bilateral meetings and events on the ground, and through our campaigns on social media.

## Statements

WGH delivered two statements at the WHA. Our first statement on public health emergencies: preparedness and response, was delivered by Becca Reisdorf, Policy Associate at WGH. Two points were presented to ensure we build back better and equal from the current pandemic and adequately prevent and prepare for the next one:

### 1. Decision making bodies must:

- a. Have 50% women members, including in leadership, prioritizing women from the Global South
- b. Apply gender risk assessment and generate, analyze and use sex disaggregated data

### 2. Governments must ensure:

- a. Availability of PPE in all shapes and sizes so it will fit women
- b. Equitable pay and safe and decent work, free from violence and harassment
- c. No reduction or diversion of resources from health to other sectors, and prevent discontinuation of essential health services



*Becca Reisdorf delivering our first statement on Public health emergencies: preparedness and response.*

[Click here to watch the video](#)



*"Being part of the historical delegation was an invaluable experience for me. It was very inspiring to see Women in Global Health mobilizing stakeholders, spreading our universal message and making an impact. I have learned a lot and will implement the gained knowledge into my chapter's activities. I would recommend this experience to fellow chapter members."*

- Dr. Luana Fiengo Tanaka, WGH Brazil



Dr. Raichou Agali, WGH delegate from Niger, delivered a constituency statement on behalf of AMREF, IntraHealth International, March of Dimes, The World Organization of Family Doctors (WONCA), Women Deliver and WGH on Human Resources for Health. Together, we called for an enabling environment where women in all their intersecting identities can harness their expertise and play an equal role in health decision-making and leadership.

**“The pandemic has reinforced the critical importance of health workers to strengthen health systems and global health security. It has highlighted women’s central role in delivering health services.”**

- Dr. Raichou Agali Zibin, WGH Niger



*Dr. Raichou Agali Zibin delivering a constituency statement during the Human Resources for Health session.*

[Click here to watch the video](#)

## Meetings with Member States and NGOs

- WGH **met with gender champions** from around the world and attended more than 20 events where we interacted with governments and organizations. WGH also delivered 700 WGH pins to gender advocates, delegates and health ministers who support our movement and were willing to #WalktheTalkonGender with us.

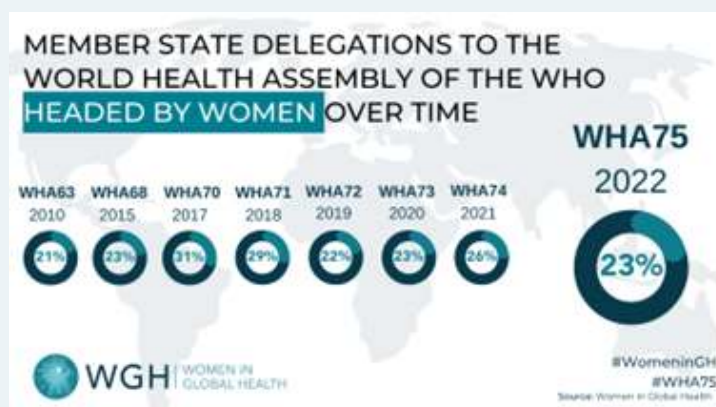
## Social Media

Our online campaign throughout the WHA enjoyed outstanding success with more than **210,000 impressions** across our social media channels. We were named in the top three Twitter influencers tracking #WHA75, next in line with the official WHO account and the personal account of Director General Dr. Tedros Adhanom Ghebreyesus.



# OUR ANNUAL GENDER PARITY COUNT

Less than a quarter of the 194 governments of the world sent delegations headed by women to this year's WHA, continuing a trend of health being a sector delivered by a majority of women but largely led by men. Our annual count of gender parity revealed a critical imbalance of representation with the number of women-headed member state delegations to WHA at 23%, with no change for women since 2010.



*Dr. Magda Robalo, Managing Director of WGH, commenting on the results of this year's count*

These results for women mean that we have lost ground by a margin of 3% in a single year. More disturbing still is the fact that women are in this position despite commitments from the WHO—during the Generation Equality Forum just last year—to promote and encourage gender parity in WHA delegations, WHO panels and advisory groups.

We are calling on Member States and WHO to do the following as a matter of urgency:

- Ensure that WHA delegations have equal representation of women, who make up 70% of the health workforce and 90% of frontline health and care positions, and ensure WHO do the same for WHO panels and advisory groups
- WHO to publish sex (and other social identities)-disaggregated data on delegation representation to further commit to monitoring progress

Help us in advocating with your national governments by sharing our [press release](#) with your contacts, and let's exert some pressure to help turn around this crisis in leadership for women working in global health using the [WHA toolkit](#).

# WHA 75 SIDE EVENTS

## Introduction to the 75th World Health Assembly: Charting a Path to the Triple Billion Targets in a Pandemic Era

The Global Health Centre of the Graduate Institute and the United Nations Foundation co-hosted their annual briefing to preview the key issues being considered at the 75th WHA and explain WHA modalities for delegates, non-state actors, the media, and general audiences. Dr. Magda Robalo, WGH, highlighted how the pandemic has exposed and deepened gender inequality, and advocated for women health workers around the world. She called for an end to Sexual Exploitation, Abuse and Harassment in global health and spotlighted the role of gender equal leadership as critical to ensuring gender-responsive policies that contribute towards tackling systemic SEAH.



*Dr. Magda Robalo (right) had a fireside chat with Lori Sloate (left), Senior Director, Global Health at the United Nations Foundation*

[Click here to watch the recording](#)

## WGH Hosted Side Events

WGH hosted two well-received side events:

**SAFE AND DECENT WORKING CONDITIONS FOR WOMEN HEALTH AND CARE WORKERS IN TIMES OF CRISIS**  
MAY 25, 2022 | 8:00-9:30 EST | 14:00-15:30 CET

**SPEAKERS:**

 <b>Dr. Lia Tedesse</b> Minister of Health, Ethiopia	 <b>Dr. Jean-Jacques Mbangi Mbande</b> Minister of Health, Democratic Republic of Congo	 <b>Loyce Pace</b> Assistant Secretary for Global Affairs, Office of Global Affairs, US	 <b>Mx Stéphanie Snydoux</b> Ambassador for Global Health, France	 <b>Dr. Magda Robalo</b> Global Managing Director, Women in Global Health	 <b>Dr. Saleema Rahman</b> 2021 Regional Winner for Area of the UNHCR Nansen Refugee Award, UNHCR
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More than 170 people attended or viewed this event.

[Click here for the key messages and the recording](#)

**GENDER AND UHC: POLICY PRIORITIES FOR  
EQUITABLE AND RESILIENT HEALTH SYSTEMS**

May 26, 2022 | 12:00-13:15 EST | 18:00 -19:15 CET



<b>Ms. Taru Koivisto</b> Director, Ministry of Social Affairs and Health, Finland	<b>Mrs. Mirielle Batamulla</b> Permanent Secretary at the Ministry of Gender and Family Promotion, Rwanda	<b>Mr. Kughoon Reuben China</b> Program Director, Organisation for health in sustainable development	<b>Dr. Veloshnee Govender</b> Scientist, Department of Sexual and Reproductive Health and Research, WHO	<b>Ms. Gabriela Cuevas Barron</b> Co-Chair, UHC 2030	<b>Ms. Eleanor Blomstrom</b> Senior Manager, Policy and Advocacy, Women Deliver	<b>Deepa</b> Senior Research Group for Women and Health, India	<b>Habibou Ouedraogo</b> WGH Burkina Faso
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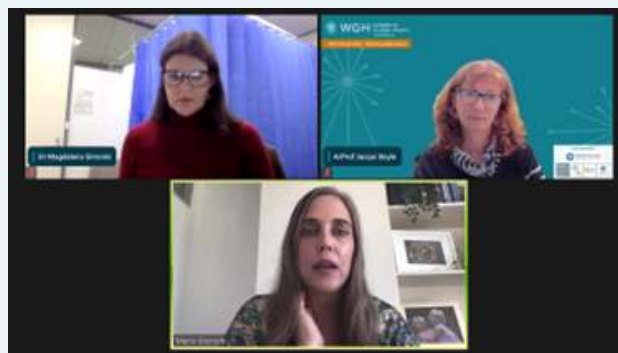



A total of 165 people attended or viewed this event.

[Click here for the key messages and the recording](#)

## Other Side Events

Our in-person and virtual delegates attended various side events that were hosted alongside the main WHA. Gender equality was mentioned in most side events, with specific focus on the gendered impact of the COVID-19 pandemic, decent and safe work conditions for women, the burden of unpaid care on women, obstetric violence, provision of reproductive health services in conflict areas, and the role of women in climate change. Other key advocacy focus areas that WGH followed at the WHA were also mentioned: health workforce, pandemic gender responsiveness, and Prevention of SEAH.



During the WGH Australia: Unequal Burdens for Women in Healthcare event, Prof. Marie Bismark shared how the gendered impact of the pandemic was felt by many women across Australia and across the world:

***“What we’re really seeing is this cascade of disparities that’s disproportionately affecting women and healthcare, and the consequences of these are profound.”***

“

*“My experience was extraordinary. The solidarity and team work was unlike anything I’ve experienced before - smart, sharp, clear, collaborative. The delegation organization and operations were very efficient and our work was impactful. WGH and our advocacy aims were highly visible at WHA. I’m really grateful to have been involved.”*

- Dr. Jocalyn Clark, WGH Canada



# WALK THE TALK ON GENDER

#WalkTheTalkOnGender was the challenge proposed by WGH to kick off the 75th WHA on the morning of May 22, 2022. The WGH delegation proposed an important amendment (“Walk the Talk ON GENDER”) to the t-shirt, taking big strides forward next to global health leaders and gender champions.



A collection of photos from our #WalkTheTalkOnGender challenge from across the globe!





# DELEGATES' EXPERIENCES

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“The WHA is a forum where you can advocate for change and get real mileage as political leadership gathers ready to listen and debate on issues. How delegates package their Asks is critical. Asks have to be short and precise because of the strict timelines when speaking.”

- Ms. Venus Mushininga, WGH Zimbabwe



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“I am delighted to have been part of WGH’s (virtual) delegation to the WHA75 and to have contributed to advocacy for UHC and women’s leadership in global health. I realized how powerful it is to work together as a team and engage country representatives to embrace our vision for health equity.”

- Dr. Nicole Atchessi, WGH Benin

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“It was truly an honor for me to be the first WGH Delegate to represent the organization from North America, at the first historic World Health Assembly delegation. Thank you so much for the opportunity!”

- Ms. Fatima Al-Shimari, WGH Seattle



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“It was an amazing experience as a delegate for WHA75, following up the important discussions throughout the Assembly sessions, and seeing the contagious energy and super impactful efforts of the WGH delegation team were very encouraging, to even follow remotely. We also wrote a reflective advocacy piece on ASHA’s recognition at the WHA75. Look forward to more such (in-person) engagement opportunities.”

- Dr. Deepika Saluja, WGH India

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“Being a delegate was really amazing and inspiring for me. Because it wasn’t just about attending, it was a structured programme, with a timetable, and tasks, and responsibilities. Meaning that I gained so much more out of the experience. It was an invaluable introduction to global health diplomacy.”

- Prof. Salome Maswime, WGH South Africa



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“Being a delegate was enriching on many levels. We were able to engage in many events simultaneously, sending key points back to the core team who mastered an impressive social media campaign. This way of driving change, this way of mobilizing our team was effective and impressive at the same time.”

- Ms. Ingeborg K. Havvardsson, WGH Norway



“The World Health Assembly taught me a lot. My participation is a great experience as a health worker. Being with the delegation is just amazing. I met women leaders, who guided me. And with the youngest each time I tell myself that I am the least useful, they were all so brilliant, intelligent and dynamic. We attended several interesting presentations listening to representatives of different countries from all over the world and talked about everything that weakens health systems, others also talked about the diseases they have eradicated. Many spoke of their plan to improve our health systems globally and locally.”

- Dr. Raichou Agali, WGH Niger



“WHA side events, the live plenary sessions and the bilateral meetings also played an important role. This experience gave me ideas on global health diplomacy, learning how these negotiations can integrate equality and equity agendas so no one is left behind. I hope WGH will facilitate short courses in leadership and diplomacy as it's crucial to our agenda.

This was my first time to attend the WHA, it was a great opportunity as a junior professional to access decision making platforms, as we know women and young professionals from the global south have challenges with access.”

- Dr. Mariam Dahir, WGH Somalia



“For me, being a delegate at WHA#75 meant being part of a group of phenomenal women leaders advocating for gender equity and women’s representation. It also meant representing my country (Burkina Faso) and having a seat at the table to ensure women’s voices are heard particularly those from French-speaking countries.”

- Ms. Habibou Ouedraogo, WGH Burkina Faso



“It was a privilege to be a WGH delegate for the WHA75. I learnt a lot through the assignments I took on, attending the WHA plenary sessions and from the WGH team who demonstrated passion, teamwork and professionalism in advancing the gender equality agenda. I am excited to continue my advocacy journey in global health and leadership.”

- Ms. Tuhebwe Doreen, WGH Uganda



“Being part of the first WHA delegation and having the privilege of traveling to Geneva was an unforgettable experience. Not only did I get to meet inspiring leaders in global health but the highlight for me was to work with the amazing WGH team and incredibly dedicated delegation both in-person and online.”

- Ms. Becca Reisdorf, WGH Policy Associate