SEVENTY-SEVENTH WORLD HEALTH ASSEMBLY
Provisional agenda item 21.1

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Results Report 2023 and Financial report and audited financial statements for the year ended 31 December 2023

Results Report 2023 (Programme budget 2022–2023: performance assessment)

Report by the Director-General

INTRODUCTION

1. In May 2022, the Seventy-fifth World Health Assembly adopted resolution WHA75.5[1] on the revision of the Programme budget 2022–2023 to incorporate recommendations from multiple reviews of the impacts of and response to the pandemic of coronavirus disease (COVID-19). The total revised Programme budget was US$ 6726.1 million.

2. The end-of-biennium report of the assessment of the Programme budget 2022–2023 presents:

(a) country progress towards impact through the 12 outcomes and triple billion targets;

(b) country impact case studies on a health outcome, highlighting the Secretariat's contribution; and

(c) an assessment of the Secretariat's contribution using the outputs scorecard methodology on 42 outputs, including budget financing and implementation.

3. This report provides an overview of the full results report, which will be available online in May 2024.[2]

ASSESSMENT OF RESULTS

4. The output scorecard has been enhanced and also simplified to better suit its purpose of measuring and improving the Secretariat's performance in countries, pursuant to the recommendations of the results

[1] See resolution WHA75.5 (2022).

[2] End-of-biennium assessment of Programme budget 2022–2023. Geneva: World Health Organization; 2024 (https://www.who.int/about/accountability/results).

report audit, results-based management evaluation and the Secretariat Implementation Plan. As at 2 April 2024, 96% of country offices have reported their performance though the output scorecard for the Programme budget 2022–2023 (excluding the Regional Office for the Americas/Pan American Health Organization). The output scorecard tool has been enhanced to focus on the immediate benefit of self-reflection in organizational learning that leads to making changes and adaptations to current plans and practices. This internal reflection is clearly differentiated from the narrative reporting that accompanies the scoring of each output.

5. Equivalent simplifications and enhancements were available to regional office and headquarters budget centres – as well as output delivery teams – for technical as well as enabling outputs. The scoring on the timely development of global public health goods/technical products by headquarters, maintaining quality standards and availability for use has remained centralized to reflect the planning process for the biennium 2022–2023.

6. In addition, a pilot process has been introduced to jointly validate the output scorecard assessment with national counterparts in some WHO country offices, including Bhutan, Maldives, Nepal, Timor-Leste, Jordan and Egypt. Based on experience and feedback, the methodology for joint assessments will be further refined and standardized for use across the Organization.

PROGRESS TOWARDS THE TRIPLE BILLION TARGETS AND SUSTAINABLE DEVELOPMENT GOALS

7. The world is off track to reach most of the triple billion targets and the health-related Sustainable Development Goals. However, with concrete concerted action to accelerate progress, a substantive subset of them could still be achieved.

HIGHLIGHTED ACCOMPLISHMENTS

Healthier populations

8. The outcome indicators for healthier populations are influenced by multisectoral policy actions to address the determinants of health. **The current trajectory indicates that the target of 1 billion more people enjoying better health and well-being will likely be met by 2025**, driven primarily by improvements in air quality and access to water, sanitation and hygiene measures (e.g. with respect to the particulate matter 2.5 standard, clean household fuels, safely managed sanitation). **However, progress will be insufficient to reach all the health-related targets of the Sustainable Development Goals by 2030, with only one target projected to be met (target 3.a. on tobacco use)**.

9. For the first time**, a day was dedicated to health at the 2023 United Nations Climate Change Conference (COP28)**. However, more ambitious action is needed and the WHO Secretariat will provide support by guiding countries in reducing air pollution and implementing the COP26 commitments to build a climate-resilient, low-carbon and sustainable health system.

10. WHO reported that **45 countries reduced their road traffic deaths by 30% or more**, despite a proliferation of motor vehicles, during the Decade of Action 2011–2020. However, the decline in road traffic deaths falls far short of what is needed to halve road traffic fatalities by 2030 and the WHO Secretariat is working with 30 high-mortality countries to stabilize and then reduce road traffic death rates by 2025.

11. Another **13 countries implemented best practice policies to eliminate industrially produced trans-fatty acids in the food supply** during the biennium, bringing the total to 53 countries. However, more than half of the world's population are still not covered by trans-fatty acids best practices and the WHO Secretariat has started to validate whether countries have a framework with a best practice policy as well as robust monitoring and enforcement mechanisms.

12. **Tobacco use is declining in 150 countries**, 56 of which are on track to achieve the global target for reducing tobacco use by 2025. However, the relative reduction in global tobacco use projected for 2025 falls short of the 30% target and the WHO Secretariat is working with more than 40 countries to strengthen tobacco control policies at the highest level in order to reduce tobacco use.

13. **An additional 29 countries developed multisectoral national action plans on antimicrobial resistance during the biennium 2022–2023, bringing the total to 178 countries,** while the number of countries reporting data on resistant infections has more than tripled in the last seven years. However, only 11% of countries have dedicated national budgets for implementing their national action plans, highlighting the need for enhanced commitments at the United Nations General Assembly high-level meeting on antimicrobial resistance to be held in September 2024.

Universal health coverage

14. **The world is off track to meet the target of 1 billion more people benefiting from universal health coverage by 2025 and to meet the related Sustainable Development Goals by 2030.** However, 30% of countries have bucked the global trend and are making progress on both the coverage of essential health services and the provision of financial protection. The overall measures of progress are largely driven by increased HIV service coverage. The disruptions caused by the COVID-19 pandemic to many indicators, such as those on routine childhood vaccination and tuberculosis, are recovering but still require concerted effort to close the gaps and accelerate action towards the Sustainable Development Goals.

15. A study has shown a **34% to 50% reduction in mortality from acute conditions in hospitals in Nepal, Uganda and Zambia following the implementation of WHO emergency care tools and the Basic Emergency Care course** that was developed by the World Health Organization, the International Committee of the Red Cross and the International Federation for Emergency Medicine. The study period ranged from 10 to 24 months and the results suggest that implementing the toolkit will contribute to multiple Sustainable Development Goals targets. The Basic Emergency Care 25x25 initiative for nurses and midwives will bring this intervention to scale in 25 more countries by 2025.

16. In 2022, **the first-ever all-oral treatment regimens for multidrug-resistant tuberculosis were made available**, greatly reducing treatment times and improving the quality of life for people with multidrug- and rifampicin-resistant tuberculosis. WHO introduced guidelines recommending the use of the new all-oral treatment regimens, contributing to uptake in 109 countries. More than 7.5 million people with tuberculosis received access to diagnosis and treatment – the highest since monitoring began almost 30 years ago. However, incidence remains high and off-target. The WHO Secretariat supported 16 of the countries most disrupted by the COVID-19 pandemic to get back on track towards the End TB Strategy targets. During 2023, a Member States high-level meeting at the United Nations General Assembly political declaration gave a commitment to ensure that at least 90% of those who develop tuberculosis will be treated and at least 90% of those at risk of the disease will be provided with preventive treatment.

17. During the biennium, the **world's first malaria vaccine, RTS,S/AS01, was administered to 2 million children in Ghana, Kenya and Malawi**, resulting in a vaccine-attributable 13% drop in all-cause mortality among children who are age-eligible for vaccination. WHO also recently issued prequalification approval for a second vaccine, R21/Matrix-M, and recommended its use in children. For its part, the WHO Secretariat is working to support 26 high-burden malaria countries to be on track for achieving the health-related Sustainable Development Goals targets by 2025.

18. **More than 75% of people living with HIV globally are receiving antiretroviral therapy** and almost all of those who are receiving treatment are achieving viral suppression, in part due to the strong uptake of WHO guidance. We are beginning to see a path towards meeting the Sustainable Development Goals target of ending the HIV epidemic: six countries have achieved the "95-95-95" goals for the control of HIV and an additional 16 countries are close to doing so, while Botswana became the first high-burden country to be certified by WHO for achieving an HIV case rate of fewer than 500 per 100 000 live births. This demonstrates that an AIDS-free generation is possible.

19. **A total of 14 countries eliminated at least one neglected tropical disease during the biennium 2022–2023.** This brings to 50 the number of countries acknowledged by WHO as having eliminated a neglected tropical disease, marking the halfway point towards the 100-country target set for 2030. Sustained political commitment remains critical to achieving the target.

20. **The 2022 rounded estimates indicate a reduction in the projected global health workforce shortage from the earlier estimate of 18 million to 10 million by 2030.** However, there are several regional variations – for example, the African and the Eastern Mediterranean regions will have an increasing share of the total health workforce shortage in 2030 – and the WHO Secretariat is working to support countries, particularly those that will bear an increasing share of the total health workforce shortage in 2030, to stimulate investments in workforce education and employment.

21. **An additional seven million people are under treatment for hypertension through application of the WHO HEARTS' simple, algorithmic approach**. However, more efforts are needed to reach the 1 in 3 adults worldwide affected by hypertension.

22. Since 2017, **more than 142 000 WHO noncommunicable disease kits have been distributed to 28 countries, territories and areas affected by conflicts and/or natural disasters** and placed in humanitarian hubs – including South Sudan, Ukraine and the West Bank and Gaza Strip – making it one of the most purchased emergency kits. However, people affected by humanitarian emergencies are at increased risk of noncommunicable diseases, with 1 in 23 of the world's population in need of humanitarian assistance in 2023.

Health emergencies protection

23. **Global progress is not on track to reach the target of 1 billion more people better protected from health emergencies by 2025**. Improvements in preparedness, as measured through core capacities related to the International Health Regulations (2005), made a positive contribution in 2022–2023. Although the coverage of vaccinations for high-priority pathogens shows improvement relative to the COVID-19 pandemic-related disruptions in 2020–2021, it has not yet returned to pre-pandemic levels.

24. **The Intergovernmental Negotiating Body (INB**) advanced its work on drafting a WHO Pandemic Agreement, while the Working Group on Amendments to the International Health Regulations (2005) focused on key amendments to the existing Regulations. The aim is for the outcomes of these negotiations to be submitted for consideration by the Seventy-seventh World Health Assembly.

25. **The Pandemic Fund made its first round of disbursements – amounting to US$ 338 million – to 37 countries in 2023.** The WHO Secretariat is working to increase preparedness for emergencies in all countries, as measured through International Health Regulations (2005) States Parties self-assessment annual reporting, and to support countries through the grant management process for the Pandemic Fund.

26. **There has been a 62% increase (from 103 to 167) in the proportion of Member States with genomic sequencing capability for SARS-CoV-2** between February 2021 and December 2023. Further collaborative investments in foundational laboratory and surveillance systems are needed by WHO Member States and partner organizations.

27. In 2023, **62 million persons were protected for life from yellow fever**; **1.4 million people were vaccinated against meningitis in Niger and Nigeria**; **and 36 million of the 74 million doses of the oral cholera vaccine requested by 14 countries were provided.** The WHO Secretariat anticipates that the production of the oral cholera vaccine could rise if a simplified formulation is prequalified, which would contribute to completing the restoration of vaccine coverage of at-risk groups for epidemic- and pandemic-prone diseases to pre-COVID-19 pandemic levels.

28. **Intensified polio eradication efforts are reaching the remaining unvaccinated children in a handful of districts in Pakistan and Afghanistan** – the only areas with endemic wild polio in the world. The WHO commitment of US$ 33.2 million funding from the core voluntary contributions account has been catalytic to sustaining the essential polio functions through integration and ensuring their long-term sustainability in more than 50 countries that transitioned their crucial infrastructure from a reliance on resources through the Global Polio Eradication Initiative. Gender analysis is a fundamental practice of the WHO Secretariat in formulating tailored, gender-responsive plans. Female health workers play a crucial role in facilitating access to households and raising awareness among female caregivers.

29. **The Contingency Fund for Emergencies released US$ 79 million, in as little as 24 hours, to 22 graded emergencies in 2023.** There has been a steep increase in humanitarian health needs on a global scale, driven by overlapping and interacting aggravating factors, including the accelerating effects of climate change, increased conflict and insecurity, increasing food insecurity, weakened health systems in the wake of the COVID-19 pandemic, economic downturns and new infectious disease outbreaks.

Effective and efficient WHO

30. The launch of the World Health Data Hub improved data availability through deeper partnerships with countries, experts, and organizations to **reduce data fragmentation and improve timeliness, usability, and efficiency**. The World Health Data Hub is becoming the central location for global, regional, and country data on the health-related Sustainable Development Goals. A Country Portal is simplifying country reporting and facilitating efficient communication among all levels of WHO.

31. The Delivery for Impact approach is bringing a new approach to efficiency and accountability, **accelerating progress toward the Sustainable Development Goals and the Triple Billion targets using structured planning and rigorous stock-takes.** More than 50 countries have used the delivery for impact approach to set priorities and accelerate progress by implementing evidence-based policy solutions.

32. **More than 70 countries at all levels of income are connected to the Global Digital Health Certification Network.**[1] While over 120 Member States have established digital health strategies aligned with the WHO global strategy on digital health 2020–2025,[2] challenges remain with respect to the financing and implementation of those strategies. To address this, the Global Initiative on Digital Health[3] was launched with the aim to amplify and align resources toward country-led digital health transformation that strengthens digital public infrastructure, governance and institutional capacity.

33. **Member States agreed on a path towards a sustainably financed WHO**. In 2022, through decision WHA75(8), the Health Assembly adopted the recommendation to develop budget proposals for an increase of assessed contributions with a view to reaching a level of 50% of the 2022–2023 base budget by the biennium 2030–2031. In 2023, Member States requested the Director-General to go ahead with planning of the first WHO investment round, which aims to safeguard the political commitment to global health and to WHO, and seeks commitments to fully fund the draft GPW 14 by increasing the flexibility and predictability of WHO's financing.

34. Following the Director-General's "call to action" to eliminate cervical cancer, **an additional 25 countries have introduced the human papillomavirus vaccine, bringing the total to 58 countries that have introduced the vaccine since WHO launched the initiative in 2020**. A total of 37 countries adopted the single-dose policy, thereby simplifying vaccine delivery and reducing resource needs for both introducing and sustaining the vaccination process. In the biennium 2024–2025, WHO will continue working with countries to improve vaccination, screening and treatment coverage.

35. **A threefold increase in reports of sexual misconduct and massive engagement of the workforce in discussing this topic** resulted from WHO's efforts to transform the silence around the topic to a speak-up culture during the biennium 2022–2023. While global standards currently focus on processes, WHO is working with the United Nations to define and deliver meaningful results for lasting institutional change.

36. WHO's performance in meeting or exceeding the requirements for indicators in the **United Nations system-wide action plan for gender equality and the empowerment of women** (UN-SWAP) increased from 47% in 2021 to 81% in 2023. The Organization has also made progress on the indicators of the **United Nations Disability Inclusion Strategy**. In 2023, WHO's performance was mainly considered to approach or meet the requirements for disability inclusion indicators, although performance in respect of those for leadership, policy/strategy, institutional setup and joint initiatives exceeded requirements.

PROGRAMME BUDGET FINANCING AND IMPLEMENTATION

37. The biennium 2022–2023 saw high levels of financing of both the total revised Programme budget 2022–2023 (US$ 8.4 billion (see Table 1), US$ 0.5 billion higher than in 2020–2021) and the base segment of the budget (US$ 4.4 billion, US$ 0.6 billion higher than in 2020–2021). The funds available in the biennium 2022–2023 at country office level exceeded the amounts received in the biennium 2020–2021, both for the total Programme budget and for the base segment. The country office

[1] https://www.who.int/initiatives/global-digital-health-certification-network (accessed 29 April 2024).

[2] https://www.who.int/publications/i/item/9789240020924 (accessed 29 April 2024).

[3] https://www.who.int/initiatives/gidh (accessed 29 April 2024).

level received the largest share of the three levels of Organization in all types of funds (voluntary specified, voluntary thematic and flexible).

Table 1. Programme budget 2022–2023 and its financing and expenditures, by segment, as at 31 December 2023 (US$ million)[1]

Segment	Approved Programme budget 2022–2023 (US$ million)	Financing (US$ million)	Financing as % of approved budget	Expenditures (US$ million)	Expenditures as % of approved budget
Base programmes	4 968	4 390	88%	3 905	79%
Polio eradication	558	1 098	197%	1 050	188%
Special programmes	199	153	77%	122	61%
Emergency operations and appeals	1 000	2 755	275%	2 312	231%
Total	**6 726**	**8 395**		**7 390**	

CHALLENGES AND LOOKING FORWARD

38. In the new biennium for 2024–2025, the Secretariat will continue to balance its investment in the normative functions of the Organization with the criticality of strengthening country office capacities, specifically by funding 80% of the planned budget of high-priority outputs, thereby accelerating progress towards meeting the triple billion targets of the GPW 13.

ACTION BY THE HEALTH ASSEMBLY

39. The Health Assembly is invited to note the report and to provide guidance to the Secretariat, including on its full version (available at https://www.who.int/about/accountability/results), in respect of the following questions:

(a) to what extent does the report meet Member States' expectations regarding accountability?

(b) what further details would be needed to improve the usefulness of the report for Member States?

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[1] The totals may not always add up due to rounding.