

Report on financial and administrative implications for the Secretariat of resolutions proposed for adoption by the Executive Board or Health Assembly

1. Resolution: Global burden of epilepsy and the need for coordinated action at the country level to address its health, social and public knowledge implications

**2. Linkage to the Programme budget 2014–2015 (see document A66/7
http://apps.who.int/gb/ebwha/pdf_files/WHA66/A66_7-en.pdf)**

Category: 2. Noncommunicable diseases

Programme area(s): Mental health and substance abuse

Outcome: 2.2. Increased access to services for mental health and substance use disorders

Output: 2.2.2. Mental health promotion, prevention, treatment and recovery services improved through advocacy, better guidance and tools on integrated mental health services

How would this resolution contribute to the achievement of the outcome(s) of the above programme area(s)?

The review and evaluation of actions for epilepsy prevention and control, which WHO has been leading, coordinating and supporting, will establish a set of best practices to Member States, and especially to low- and middle-income countries. In addition, the introduction and implementation of national epilepsy programmes and services will provide technical and, wherever possible, financial support to Member States for epilepsy prevention and control. Most importantly, the implementation of actions as proposed in the resolution – strengthening of leadership, governance and implementation of policies and plans for epilepsy prevention and control; integration of epilepsy management in primary health care; increased awareness; investments in research; monitoring of the progress of Member States' coordinated country-level actions for epilepsy prevention and control and the establishment of international partnerships – will altogether increase access to services for mental health and substance use disorders (Outcome 2.2).

Does the Programme budget already include the outputs and deliverables requested in this resolution? (Yes/no)

Yes.

3. Estimated cost and staffing implications in relation to the Programme budget

(a) **Total cost**

Indicate (i) the lifespan of the resolution during which the Secretariat's activities would be required for implementation and (ii) the cost of those activities (estimated to the nearest US\$ 10 000).

(i) Five and a half years (covering the period July 2015 – December 2020, in accordance with the duration of the comprehensive mental health action plan 2013–2020).

(ii) Total: US\$ 25 million (staff: US\$ 11 million; activities: US\$ 14 million).

(b) Cost for the biennium 2014–2015

Indicate how much of the cost indicated in 3(a) is for the biennium 2014–2015 (estimated to the nearest US\$ 10 000).

Total: US\$ 700 000 (staff: US\$ 200 000; activities: US\$ 500 000).

Indicate at which levels of the Organization the costs would be incurred, identifying specific regions where relevant.

Headquarters.

Is the estimated cost fully included within the approved Programme budget 2014–2015? (Yes/no)

Yes.

If “no”, indicate how much is not included.

(c) Staffing implications

Could the resolution be implemented by existing staff? (Yes/no)

No.

If “no”, indicate how many additional staff – full-time equivalents – would be required, identifying specific regions and noting the necessary skills profile(s), where relevant.

No additional staff will be required for the biennium 2014–2015. WHO staff will lead the conceptualization and introduction and formulate the timeline of the epilepsy programme for which implementation will begin in 2016. From January 2016, the following staff additions will be required:

At headquarters: 1.5 staff members (one international expert in public health and neurology (100% full-time equivalent) at grade P.4, and one secretary (50% full-time equivalent) at grade G.5).

In each of the six regions: 0.5 staff members (six international experts in public health and neurology with knowledge of the needs in their respective regions (50% full-time equivalent; grade P.4)).

4. Funding

Is the estimated cost for the biennium 2014–2015 indicated in 3(b) fully funded? (Yes/no)

No.

If “no”, indicate the funding gap and how the funds would be mobilized (provide details of expected source(s) of funds).

US\$ 500 000 needs to be mobilized to cover the implementation of activities on the prevention and control of epilepsy from July to December 2015 through the Organization’s coordinated resource mobilization plan for dealing with funding shortfalls in the Programme budget 2014–2015. WHO collaborating centres and a network of experts and civil society stakeholders will be utilized for taking forward the activities. For the second half of 2015, implementation will be with existing staff, and additional qualified staff will be recruited from January 2016.

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