

**PROVISIONAL SUMMARY RECORD OF THE THIRD MEETING**

**WHO headquarters, Geneva  
Friday, 25 January 2019, scheduled at 09:00**

**Chairman: Ms M.N. FARANI AZEVÊDO (Brazil)**

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### THIRD MEETING

Friday, 25 January 2019, at 09:15

**Chairman:** Ms M.N. FARANI AZEVÊDO (Brazil)

**1. MANAGERIAL, ADMINISTRATIVE AND GOVERNANCE MATTERS:** Item 7 of the agenda (continued)

**WHO reform processes, including the transformation agenda, and implementation of United Nations development system reform:** Item 7.1 of the agenda (documents EB144/31, EB144/32, EB144/33, EB144/33 Add.1, EB144/34, EB144/34 Add.1 and EB144/INF./4) (continued)

The CHAIRMAN recalled that the Board had agreed to address item 7.1 of the agenda through two separate debates. During the second such discussion, she invited the Board to consider the implementation of the United Nations development system reform.

The representative of ROMANIA, speaking on behalf of the European Union and its Member States, said that the candidate countries Montenegro, Serbia and Albania, the country of the stabilization and association process and potential candidate Bosnia and Herzegovina, as well as Ukraine aligned themselves with his statement. He wished to see a stronger link between the reform of WHO and of the United Nations development system, and the position of WHO reform within the wider process of reform more clearly reflected in the documents. A separate report on how the United Nations reform concerned WHO should be presented to the Seventy-second World Health Assembly and the thirtieth meeting of the Programme, Budget and Administration Committee. The Secretariat should keep the Executive Board informed on implementation of the reform process at WHO.

The representative of AUSTRALIA said that the United Nations reform presented an opportunity for WHO to share costs and enhance efficiency and effectiveness. More information should be provided before the Seventy-second World Health Assembly on the operational, administrative and financial implications for WHO; WHO's role and footprint at the country and regional levels; its cost-sharing contribution to the United Nations Resident Coordinator system; and the management of the 1% coordination levy.

The representative of GERMANY said that the link between WHO reform and the United Nations reform should be strengthened. It should be made clear how the transformation agenda would help WHO to deliver on its mandate, and how the Organization would achieve efficiency gains in line with United Nations General Assembly resolution 72/279 (2018) on repositioning of the United Nations development system. He asked whether WHO planned to review its reporting processes to ensure effective collaboration in delivering results and implementing the Sustainable Development Goals. The Secretariat should elaborate on how it planned to enhance collaboration, coordination and efficiency, in particular at the regional level, and should also clarify whether the Thirteenth General Programme of Work, 2019–2023 required adjustment in the light of General Assembly resolution 72/279.

The representative of FINLAND said that clear roles and responsibilities at the country level would be important as the reform processes continued. She was pleased that WHO would clarify the accountability of WHO representatives to Resident Coordinators and establish a process for receiving relevant performance input. She would also welcome further information on potential common business

operations and efficiency gains, and on WHO's involvement in the discussions on the United Nations funding compact.

The representative of ESWATINI, speaking on behalf of the Member States of the African Region, trusted that the United Nations reform would catalyse WHO reform instead of adding a layer of bureaucracy, and ultimately facilitate and accelerate the achievement of the Sustainable Development Goals. The Resident Coordinator system should be properly managed at the country level to ensure coherence and accountability.

The representative of SWITZERLAND<sup>1</sup> said that the transformation process must enable WHO to focus more on its mandate and core activities. To function as efficiently as possible, the Secretariat should ensure that the timeline of the general programme of work coincided with the planning cycles of other United Nations organizations as from 2026, and that the budget cycle was clearly reflected in the general programme of work. WHO should participate fully in the Resident Coordinator system, and ensure that its country cooperation strategies and biennial collaborative agreements were harmonized and aligned with the United Nations Development Assistance Framework. WHO should also work in closer proximity with other organizations of the United Nations system in countries by sharing premises and administrative services. The three levels of the Organization should be better aligned.

The representative of NORWAY<sup>1</sup> said that the transformation agenda would strengthen WHO's ability to improve health impacts at the country level, and requested more information on how WHO intended to strengthen its country offices. The head of the WHO country office should report directly to the Resident Coordinator, and relations should be based on the new United Nations Development Assistance Framework guidance and the management and accountability framework. WHO should provide an assessment of which internal guidelines and regulations would have to be changed to follow up on United Nations General Assembly resolution 71/243 (2017), on the quadrennial comprehensive policy review of operational activities for development, and resolution 72/279 (2018), and specify a time frame for implementation.

The representative of ZIMBABWE<sup>1</sup> said that it was important to avoid adding unnecessary bureaucratic processes to the work of WHO country offices, and to continue to respect established reporting lines. Inadequate resources for the health sector already presented a challenge, which could be worsened if the responsibility for allocating resources was removed from WHO at the country level. Country offices should be strengthened according to country-specific contexts and requirements with a view to achieving universal health coverage.

The ASSISTANT DIRECTOR-GENERAL (External Relations) said that WHO was striving to be a leader in the United Nations development system reform at the country level and make health a key priority. In its work under Sustainable Development Goal 3 (Ensure healthy lives and promote well-being for all at all ages), including the development of a global action plan for healthy lives and well-being for all, WHO was working with global partners to strengthen the global health architecture. The more practical elements of the United Nations reform were being completely integrated in WHO's transformation process, and steps were being taken to ensure alignment at all three levels of the Organization. WHO would build on the United Nations reform to put countries at the centre of its strategy, and to make health a more visible and integrated priority area.

The SENIOR ADVISER TO THE DIRECTOR-GENERAL (Organizational Change) assured Member States that the Secretariat was working to align the transformation agenda with the United Nations

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reform, including by cooperating closely with the transition team to better understand the timelines, priorities and actions of individual agencies. While WHO was fully committed, in principle, to a strengthened role for the Resident Coordinator, and to alignment with the United Nations Development Assistance Framework, many discussions, such as on the management and accountability framework, had yet to be completed. Once those issues had been finalized, WHO would be able to address concerns and take more concrete action. The Secretariat was also looking at its accountability under Sustainable Development Goal 3 in the context of the broader United Nations reform agenda, and was confident that more information would be available by the time of the Seventy-second World Health Assembly.

The DEPUTY DIRECTOR-GENERAL (Corporate Operations) said that a number of issues were still being refined, and further information would be provided for the Seventy-second World Health Assembly. WHO had increased its contribution to the new Resident Coordinator system. Although the guidance had yet to be finalized, it was also implementing a 1% coordination levy on earmarked contributions to development activities; more flexibility in funding would therefore be beneficial for the Secretariat and donors. The funding compact was a Member State-led process, and although the WHO Secretariat had no official role in the initiative, it had been contributing to inter-agency discussions. It should be pointed out that the allocation of 15% of non-core development funding to joint activities referred to in document EB144/31 would involve combined budgeting, not the exchange of funds. Work on common business operations was advancing, and WHO had signed statements of mutual recognition in that regard. Further information on common premises and back-office functions was likely to be available by the Seventy-second World Health Assembly.

(For continuation of the discussion, see the summary record of the fourteenth meeting, section 1.)

## **2. STRATEGIC PRIORITY MATTERS:** Item 5 of the agenda

**Proposed programme budget 2020–2021:** Item 5.1 of the agenda (documents EB144/5, EB144/6 and EB144/7)

The CHAIRMAN invited the Board to take up documents EB144/5 and EB144/6. She also drew attention to paragraphs 8–20 of the report of the Programme, Budget and Administration Committee of the Executive Board, set out in document EB144/4.

The representative of IRAQ, speaking on behalf of the Member States of the Eastern Mediterranean Region, said that it was unclear how the transformation agenda would be translated into concrete action and how such action would be measured. To use its resources rationally and effectively, and strengthen impact at the country level, WHO must analyse gaps in its capacity and assess how to reorient its human resources and work at the three levels of the Organization. He sought clarification as to how the draft proposed programme budget 2020–2021 would help countries to achieve the targets of Sustainable Development Goal 3 (Ensure healthy lives and promote well-being for all at all ages) and trusted that the departure from a disease- or condition-specific approach would not undermine any key areas of WHO's work. The additional resources provided should be used to address critical gaps and give priority to country support. Parts of the draft proposed programme budget, including on how WHO would deliver, were too general.

Furthermore, he noted that the Secretariat might better address the underfunding affecting certain programmes by reconsidering how the programme budget was designed and examining why donors were reluctant to fund certain programmes. The issue of underfunding should be addressed in the draft proposed programme budget 2020–2021, in order to increase donors' trust in WHO and its activities.

The representative of ROMANIA, speaking on behalf of the European Union and its Member States, said that the candidate countries of Montenegro and Albania and the country of the stabilization and association process and potential candidate Bosnia and Herzegovina, as well as Ukraine aligned themselves with his statement. While the new format of the draft proposed programme budget was welcome, further discussion and details of the monitoring framework might be required. Regarding polio eradication and transition, the Director-General should produce a document, in collaboration with Gavi, the Vaccine Alliance and the Global Polio Eradication Initiative, setting out all sources of financing, fundraising responsibilities and intended uses of funds, prior to the Seventy-second World Health Assembly. He requested additional information on how WHO would achieve further efficiency gains, and on its provision of financing under the United Nations Sustainable Development Group cost-sharing arrangement. It would be useful to know how WHO had estimated the cost of strengthening its capacity to deliver in countries. To approve such a substantial financial shift, the governing bodies should hold a well-informed discussion on WHO's current role and function in countries.

The Secretariat should elaborate on the significant increase in financing to address health emergencies in respect of the other "triple billion" goals and explain how WHO intended to allocate the additional resources. Emergencies should be considered in terms of their link to preparedness, and the Secretariat should clarify how it would balance the resourcing of specific emergency response with supporting countries to strengthen preparedness and compliance with the International Health Regulations (2005). Programme budgets in organizations of the United Nations system should not be increased to take into account projected inflation rates. He wished to know how much of the funding for the draft proposed programme budget could already be projected, and how an uneven distribution of funds between major offices and programme areas would be prevented.

The representative of CHILE, speaking on behalf of the Member States of the Region of the Americas, expressed concern about the continued lack of funding for her Region. The Secretariat should provide additional information before the Seventy-second World Health Assembly explaining how the transition from previous budgets would affect resource allocation and existing programmes at headquarters and in regional and country offices.

The representative of VIET NAM welcomed the report on the proposed programme budget for 2020–2021, which had been developed using a bottom-up approach based on country priorities. The Organization's efforts to increase the proposed programme budget so as to invest in the base segment thereof were appreciated.

The representative of BAHRAIN said that it was necessary to have a clear sustainable plan for the financing of all the proposed activities. A further update on the eight initiatives of the strategy and implementation plan for value for money in WHO would be appreciated.

The representative of the NETHERLANDS requested further clarification of the timeline for the completion of the WHO Impact Framework for the Thirteenth General Programme of Work, 2019–2023. He wished to know whether WHO would be able to raise enough to finance the budget increase and expressed concern about the availability of adequate data to ensure sufficient accountability for the budget. With the increased shift to the country level, he asked who would be held accountable for value for money. Further details on the funding of WHO's standard-setting function, and the corresponding deliverables and indicators, would be welcome, and he trusted that the Secretariat would provide relevant information and a timeline clarifying the steps to be taken before the Seventy-second World Health Assembly.

The representative of MEXICO said that organizational priorities should be properly financed and that resources should be allocated taking into account the greatest impact on global public health. The draft proposed programme budget should indicate the degree of progress expected to be made on

the targets for 2023. Regarding the WHO Impact Framework, it was necessary to consider the capacity of countries to provide the information required for the indicators. The assessment methodology should include short-, medium- and long-term results to determine the level of compliance per biennium, and the activities to be carried out to achieve the Organization's goals.

The representative of TURKEY said that the universal health coverage index should include one or more indicators to measure the quality of services beyond coverage, and that greater emphasis should be placed on equity in the delivery of health services. Steps should be taken to ensure the availability and quality of the data required for the WHO Impact Framework.

The representative of BRAZIL requested further clarification on how WHO planned to allocate limited resources to programmatic areas, to ensure that the priorities set by Member States were achieved during the Thirteenth General Programme of Work; the chronic lack of funding for noncommunicable diseases was a particular concern. More information on the connection between resources and outcomes would be welcome. He invited the Secretariat to examine the new priority-setting methodology employed by PAHO.

The representative of INDONESIA said that her Government had finalized its priority-setting process at the country level, which it hoped would contribute to the achievement of the "triple billion" goals.

The representative of ISRAEL, welcoming a number of the approaches proposed, said that further priority should be given in the draft proposed programme budget to noncommunicable diseases. More detail and greater focus on specific principles and impacts for the biennium were required. The programme budget web portal would become an important tool for Member States to follow the budget flow. Accurate and timely data were essential to achieve the goals on universal health coverage, health emergencies and health populations.

The representative of CHINA asked the Secretariat to provide further information, prior to the Seventy-second World Health Assembly, on the implementation of the draft proposed programme budget, the distribution of resources, and the connection between the new WHO Impact Framework and the Organization's existing work.

The representative of AUSTRALIA said that several information and system gaps needed to be addressed to operationalize the budget, including the completion of the output framework to measure the Secretariat's work. The Secretariat should specify the action to be taken at each level of the Organization to reach the proposed target for savings, and provide assurance that key WHO functions would not be compromised. More information was needed to reassure Member States that the increased budget target could be met, particularly given the reliance on voluntary contributions, and to demonstrate how funding allocations would be prioritized in the event of a budget shortfall. The Secretariat should also guarantee the continued protection of WHO from unacceptable influences, in line with the Framework of Engagement with Non-State Actors.

The representative of the UNITED STATES OF AMERICA said that, with the transition of some polio functions to the base segment, it was important to ensure that the draft proposed programme budget did not duplicate the polio-related functions financed through the 2019–2023 budget of the Global Polio Eradication Initiative, and was used to support the main priorities identified by that Initiative. Further information on the financial implications of the United Nations reform would be welcome, as would additional details on the transition from the previous budget to enable clear tracking and accountability for resources. Efficiency savings should be applicable at other levels of WHO.

The representative of ITALY said that consultation and cooperation with Member States were crucial to increase the efficiency of WHO and allocate resources.

The representative of COLOMBIA said that the efforts of countries and WHO should be better aligned, and that functions and value added should be more clearly identified. It was fundamental to continue disseminating the methodology used in developing the draft proposed programme budget, to help Member States better understand the changes. He noted with concern that the budget increase for the Region of the Americas was smaller than that for other Regions. He also asked whether an indicator existed to assess the impact of the reduction in the base segment allocation for regional offices on the activities and objectives of those offices. WHO should improve the design and implementation of the different programmes with a focus on countries. It was important to guarantee the optimal use of resources, prevent administrative costs from placing a burden on the budget, and create a culture that favoured the strengthening of country capacity and the effective achievement of WHO's objectives.

The representative of JAPAN said that the budget, organizational arrangements and monitoring were interdependent and should be presented in full detail. He would appreciate further information, including on the base component of the draft proposed programme budget, funding for the standard-setting function, and the increased investment for polio transition.

The representative of FINLAND said that, until the Secretariat had made the design of the draft proposed programme budget comprehensible to Member States, the Board would be unable to proceed with the decision-making process. The Secretariat should provide further information on: budget operationalization; the organizational chart of the new operating model; the mapping of global goods and planning for standard-setting work; funding for enabling functions; the country support framework; efficiency measures across the Organization; budgeting for the polio transition; the move towards more flexible funding; implementation of the United Nations reform including the 1% levy; and the financial impact of new ideas. Clarification of the timeline and process for decision-making by the governing bodies would also be welcome.

The representative of ZAMBIA, speaking on behalf of the Member States of the African Region, said that sustainable solutions should be identified for underfunded regions and programmes. Noting the amount of US\$ 42 million proposed to support the United Nations Resident Coordinator system, she said that the draft proposed programme budget should be used to influence the direction and speed of transformation and reform. The Secretariat should support Member States in collecting crucial data, applying the value-for-money approach in technical programmes, mobilizing resources and managing programmes. Regional and country offices should continue to assist Member States in translating global standards into national strategies, plans and guidelines.

The representative of GERMANY said that savings through efficiencies offsets should not be confined to WHO headquarters, and sought clarification of possible implications for human resources and normative functions. With the anticipated increase in the voluntary share of the budget, the Secretariat should indicate the level of funding foreseen for normative and enabling functions. Funding should be tailored to meet the needs of the Organization and redress imbalances. To facilitate the submission of a draft of the programme budget to the Seventy-second World Health Assembly, the Secretariat should provide further information on: operationalization of the budget; the US\$ 99 million savings target; and the financing of global goods. Figures to facilitate comparison with the Programme budget 2018–2019 would also be useful.

The representative of BELGIUM<sup>1</sup> said that he was not entirely convinced that the base segment increase was realistic. He requested further information about the assessment of regional needs used to calculate the strategic distribution of budgetary space among the six WHO regions in the draft proposed programme budget. With a 50% increase in health emergencies since the previous biennium, the risk existed that, even with full financing, WHO's role would shift from that of a technical, normative and coordinating health organization to that of a humanitarian agency. Regarding the WHO Impact Framework, the Secretariat needed to reflect on how it could better showcase the Organization's impact on high-income countries, as it was essential to show that WHO was still relevant there.

The representative of URUGUAY<sup>1</sup> said that further information should be provided on the resources allocated to various programmes and to the Region of the Americas. The requests from Member States for more technical assistance and capacity-building for noncommunicable diseases had not been appropriately reflected in the draft proposed programme budget, and she called on the Secretariat to duly reflect that priority area. It was important to ensure that WHO allocated the resources necessary to continue strengthening its normative role.

The representative of MONACO<sup>1</sup> welcomed the new structure of the draft proposed programme budget and echoed the comments expressed on behalf of the European Union and by Finland, Germany and the Netherlands. A number of questions and requests for clarification had yet to be addressed, including with respect to: noncommunicable diseases, the shift to the new operating model, polio transition, access to high quality medicines and health care, and potential cost implications of some of the initiatives proposed such as the WHO academy, foundation and museum and the creation of new posts. WHO's normative function must be properly financed, and a matrix was needed to show how the Organization would move from the old to the new operating model. If Member States were to make a fully informed decision, such information must be provided prior to the Seventy-second World Health Assembly.

The representative of SINGAPORE<sup>1</sup> noted that the budget share of strategic priority B2 (One billion more people better protected from health emergencies) now included polio transition and the Pandemic Influenza Preparedness Framework for the sharing of influenza viruses and access to vaccines and other benefits. Strategic priority B3 (One billion more people enjoying better health and well-being) should be prioritized and further funded in line with Member States' priorities; WHO could supplement its resources by using its normative and technical expertise and intellectual and social capital. Although increased investment in data collection and innovation was timely, WHO should be prepared to move forward using the data currently available.

The representative of PANAMA<sup>1</sup>, having highlighted the need for a set of evaluation indicators, noted with satisfaction that the Secretariat would be providing further information on the draft proposed programme budget. That information should focus on impact and outcomes and include the explanations provided by the Secretariat to the twenty-ninth meeting of the Programme Budget and Administration Committee, which would answer many of the questions raised. Further information on the distribution of funding by function, region and country would be useful, as would details of how savings at headquarters and resource mobilization targets would be achieved. A clear explanation of the gradual decrease in the budget allocated to the Region of the Americas over the previous four biennia would be appreciated. She expressed concern about inefficiencies in expenditure, which meant that spending by programme and region was continually less than the allocated amount and she urged the Secretariat to address that problem.

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<sup>1</sup> Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.



The representative of ARGENTINA<sup>1</sup> sought clarification regarding funding for the Region of the Americas, which continued to be reduced. Before the Board could approve the draft proposed programme budget, further explanations were needed, especially on operationalization. She noted that the proposed funding for strategic priority B3 was much less than that proposed for the other strategic priorities; the Secretariat might wish to examine the budget for strategic priority 4 (More effective and efficient WHO providing better support to countries) in seeking to increase the budget for strategic priority B3.

The representative of SLOVENIA<sup>1</sup> welcomed the focus of the draft proposed programme budget on outputs and outcomes, including by investing in multisectoral action and partnerships. Referring to output 3.2.2, she expressed concern that implementation of the WHO global strategy to reduce the harmful use of alcohol could be hindered by engaging with economic operators in alcohol production and trade. The Secretariat should reformulate relevant text to reflect concerns about conflicts of interest and lobbying on labelling, marketing and retail sales practices. Noting the limited human resources dedicated to implementing the aforementioned global strategy, she highlighted the importance of earmarking predictable funding to support programme implementation.

The representative of NIGERIA<sup>1</sup> welcomed the results-based focus of the Thirteenth General Programme of Work and urged the Secretariat to ensure alignment to countries' contexts and plans.

The representative of SWITZERLAND<sup>1</sup> said that, although she supported the overall direction of the draft proposed programme budget, issues concerning the nature and flexibility of funds and the responsibility of the Secretariat had yet to be resolved. She welcomed the intention of WHO to participate fully in the Resident Coordinator system, which should be fully financed. Synergies, rather than additional instruments, should be used to evaluate outcomes and impact.

The representative of the ISLAMIC REPUBLIC OF IRAN<sup>1</sup> said that it was important to ensure that fragile and low- and middle-income countries received relatively higher levels of funding. High-income countries in each region should collaborate with low-income countries in achieving the targets of the Thirteenth General Programme of Work. He welcomed the collaboration between WHO and the Global Fund to Fight AIDS, Tuberculosis and Malaria, and appreciated the Secretariat's efforts to strengthen capacity to develop value-for-money approaches. United Nations Development Assistance Framework targets at the country level must be aligned with those of the Thirteenth General Programme of Work. WHO should support capacity-building for resource mobilization in countries.

The representative of SWEDEN<sup>1</sup> said that her country was concerned about the lack of information in the draft proposed programme budget on estimated costs, expected outcomes and outputs, which should be reviewed to ensure that they were measurable. She supported the strengthening of WHO's work at the country level, but would appreciate a discussion on the operating model in countries. More information about the principles for budget allocation within WHO would be useful, as would the Secretariat's views on assessed contribution levels for future biennia, given the anticipated increase in the share of voluntary contributions.

The representative of NORWAY<sup>1</sup> said that his country recognized the need to strengthen the impact of WHO at the country level and for enhanced accountability on the use of resources. Prior to the Seventy-second World Health Assembly, the Secretariat should confirm that the estimated efficiency savings at WHO headquarters would not compromise the Organization's leading role and normative function. It should also provide further information on the US\$ 227 million increase for polio transition

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and on how the decision to extend the Polio Eradication and Endgame Strategic Plan until 2023 would affect WHO's work on transition. He recognized the importance of allocating sufficient resources to oversight and risk management functions. While the proposed budget increase for the Resident Coordinator system was welcome, the impact of the United Nations reform on WHO country offices should be clarified. His Government had decided to provide a larger portion of its allocation to WHO as unearmarked funds following the Director-General's call for increased flexible funding.

The representative of the REPUBLIC OF KOREA<sup>1</sup> said that difficulties persisted in obtaining funding for certain programmes. It was important to provide funding for capacity-building on health information systems, health data and eHealth, which could play an important role in strengthening access to health in the future.

The representative of INDIA<sup>1</sup> said that country prioritization of the outcomes in the Thirteenth General Programme of Work should be taken into account in planning, resource allocation and engagement with countries. His Government supported the WHO Impact Framework and the updated universal health coverage index and would work with the Secretariat in using the related indicators. The proposals concerning flexible financing and assessed contributions were welcome. Voluntary contributions should be unearmarked in order to prevent undue influence on programme prioritization. He welcomed the focus on WHO's normative role and highlighted the importance of ensuring access to safe, effective and affordable medicines and vaccines.

The representative of ZIMBABWE<sup>1</sup> welcomed the focus on country priorities, country support plans, and the strengthening of country and regional offices. The absence of crucial data was a challenge in some regions; the Secretariat should ensure that accurate data was used and that data collection did not place additional obligations on Member States.

The representative of THAILAND<sup>1</sup> said that innovative resource mobilization must not include resources from economic operators involved in harmful health products, and conflicts of interest should be managed efficiently and transparently. WHO country offices should be tasked with mobilizing additional social, intellectual and financial resources. Given that impact depended significantly on national commitment and resources, WHO should focus on identifying support from national champions for each of the "triple billion" goals.

The representative of the RUSSIAN FEDERATION<sup>1</sup> welcomed the focus in the draft proposed programme budget on outcomes and impacts at the country level. However, key information was missing from the section on the budget, which focused on programmatic aspects. Additional information should be provided, including on items of expenditure compared with indicators from the current biennium and an indication of growth or reduction. More details should also be given on staffing and posts. The proposal in the draft proposed programme budget to decrease regional offices' and headquarters' budgets in comparison with the 2018–2019 base segment was misleading. In absolute terms, there was growth in the case of the regional offices, while spending at headquarters, which his country had expected would decrease, remained the same. He trusted that the Secretariat would provide all relevant financial information to facilitate proper analysis.

The representative of the UNITED KINGDOM OF GREAT BRITAIN AND NORTHERN IRELAND<sup>1</sup> said that she would welcome a timeline of next steps and further details, including on the proposed target of US\$ 99 million for savings. She sought assurances that increased accountability would be a prerequisite for country offices to receive increased funding. It was a concern that the

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proposed base programme budget was at the lower end of the estimated cost of implementing the Thirteenth General Programme of Work; while it was important to be realistic about the financing that could be raised, activities should be prioritized or fundraising increased to ensure that the strategy and implementation plan for value for money in WHO, and a fundable budget were evenly matched. She welcomed the initiatives set out in document EB144/6, which would hopefully lead to tangible outcomes.

The representative of CANADA<sup>1</sup> trusted that the country-level focus would strengthen WHO's role in the development of global public goods. Further information on the draft proposed programme budget should be provided, including on: the operating model; quantitative and qualitative indicators to measure Secretariat results; the effect of the transition from previous budgets on regional and country offices and existing headquarters programmes; polio transition figures; and cost efficiencies, which should be identified throughout the Organization. The 13% increase in the base component of the proposed budget was ambitious. Although the Secretariat's more strategic approach to resource mobilization was welcome, the best way to mobilize resources was by delivering on results, including at the country level. He asked how the Secretariat would integrate gender equality, equity and human rights issues into the draft proposed programme budget, in line with WHO's commitments under the United Nations System-wide Action Plan on Gender Equality and the Empowerment of Women.

The representative of BOTSWANA<sup>1</sup> expressed satisfaction with the Secretariat's efforts to ensure progress on the strategy and implementation plan for value for money in WHO. He trusted that the US\$ 42.4 million proposed to strengthen the Resident Coordinator system would support WHO's normative and enabling role at the country level and influence the transformation and reform. The Secretariat should note the concerns raised by Member States during the twenty-ninth meeting of the Programme, Budget and Administration Committee, and provide additional clarification as requested.

The representative of FDI WORLD DENTAL FEDERATION, speaking at the invitation of the CHAIRMAN, welcomed the inclusion of two oral health indicators in the WHO Impact Framework, but asked the Secretariat to address the lack of a budget to support the monitoring of those indicators. Her organization was working on resources to bridge the oral health data gap, including a mobile app to analyse the oral health care needs of patients, and could assist Member States with monitoring additional indicators.

The representative of the GLOBAL HEALTH COUNCIL, INC., speaking at the invitation of the CHAIRMAN, commended the draft proposed programme budget 2020–2021 and overall investment case, noting WHO's commitment to measurable outcomes and a more holistic approach to programmes. She welcomed the WHO Impact Framework; it was important to track the efficient use of resources through accountability mechanisms. Further emphasis should be given to the importance of strengthening health systems and strategic investment to deliver the critical services and health workforce needed to achieve universal health coverage. She urged Member States to provide flexible funding that could be used as part of a health systems-oriented approach and for emerging priorities or emergencies.

The representative of the WORLD HEART FEDERATION, speaking at the invitation of the CHAIRMAN, expressed appreciation for the increased focus on impact, support for national activities, and improved monitoring through a more integrated health systems-oriented approach; it was important to demonstrate accountability by monitoring progress towards the “triple billion” goals and the health-related Sustainable Development Goals. Noting the high proportion of deaths caused by

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noncommunicable diseases, she called on WHO to adopt a person-centred approach; secure adequate resources to meet the corresponding rise in demand for technical assistance; support the roll-out of technical packages and evidence-based interventions; and engage with donors to increase support for improved data collection and analysis.

The representative of IOGT INTERNATIONAL, speaking at the invitation of the CHAIRMAN, commended the emphasis on measures to support countries in developing pro-poor and pro-health fiscal policies, which should be an important element in public health policy-making, domestic resource mobilization, and cost-effective investments in health promotion. WHO should ensure adequate resource allocation to meet the increasing demand for technical assistance in that area. She expressed concern that the draft proposed programme budget assigned the private sector, specifically the alcohol industry, a role in reducing the risk factors it created. Engagement with the alcohol industry should remain confined to that provided for in the WHO global strategy to reduce the harmful use of alcohol. The Secretariat should reconsider those elements of the draft proposed programme budget and ensure that the correct technical terminology was used.

The representative of the INTERNATIONAL ASSOCIATION FOR HOSPICE AND PALLIATIVE CARE INC., speaking at the invitation of the CHAIRMAN, expressed concern that the draft proposed programme budget was overly focused on disease eradication, health emergencies and the redirection of resources to the country level, to the detriment of the integration of palliative care into primary health care in line with the Declaration of Astana on primary health care. Given the new emphasis on devolving resources to countries, palliative care service delivery should be a priority for country offices and included in country collaboration strategies. She encouraged Member States to include a palliative care expert in their national delegations to the World Health Assembly to report on the implementation of related services in their national health systems.

The ASSISTANT DIRECTOR-GENERAL (General Management) said that the proposed US\$ 99 million in efficiencies and reallocations was aimed at creating a more efficient, economical organization, and was an ambitious, but achievable, goal. If the efficiencies were to be sustainable, they had to be implemented carefully. The Secretariat would not introduce draconian cuts across the board, but seek to perform core functions more efficiently. Initial work had focused on business processes and functions within the purview of General Management, and efficiencies totalling 20% of the 2021 target had already been achieved. Next steps included rethinking the Organization's approach to meetings, both at headquarters and elsewhere. Further meaningful economies across the Organization would then need to be identified and carefully implemented, without compromising WHO's ability to perform its enabling functions and normative work. An analysis of programmatic, technical and administrative work was under way to determine where activities could be performed more efficiently and where savings could be made without diminishing core capabilities. In addition, efforts were being made through the transformation agenda to determine how WHO could be more efficiently organized at all three levels to deliver results. The Secretariat remained committed to preserving and strengthening WHO's enabling functions and normative work and to introducing carefully tailored measures to deliver a more efficient Organization. An update on progress would be provided before the Seventy-second World Health Assembly.

The DIRECTOR (Planning, Resource Coordination and Performance Monitoring) thanked participants for their support and constructive suggestions. Responding to points raised, he drew attention to Table 4 in document EB144/5 showing the strategic budget space allocation for segment 1. Allocations had been affected by polio transition, which pertained primarily to certain countries and accounted for half of the proposed budget increase, and had not originally been included in the strategic allocation formulae. The Secretariat understood that the United Nations reform levy would be paid at source by donors; accordingly the relevant element would be removed from the next version of the

budget. The increase in the budget share for strategic priority B2 (One billion more people better protected from health emergencies) was largely due to the additional US\$ 227 million for polio transition. It had also been strengthened by the incorporation of US\$ 37 million for the Pandemic Influenza Preparedness Framework, and of US\$ 130 million for other programmes, relating to health systems strengthening, essential health services in fragile, conflict and vulnerable settings, antimicrobial resistance, routine immunization and emergency vaccination. The internal funding allocation for the Region of the Americas was not related to the draft proposed programme budget 2020–2021, but the Secretariat would look into the issue. It would also review the terminology used in the document.

The draft proposed programme budget document needed to be strengthened prior to its submission to the World Health Assembly, notably by finalizing the output measurements and providing additional information on the global goods, which should be linked to the programme budget outputs. The Secretariat had noted the request to sharpen the focus of the outputs and provide more details on delivery, and to further integrate some elements of the WHO Impact Framework into the draft proposed programme budget. It would also provide an information document on operationalization, setting out further details of the new budget structure, more clearly identifying differences with respect to the previous budget structure, and explaining the implications of the new approach for donors that continued to earmark funds. A separate document would be provided on the polio transition figures. Provision of an organizational chart and information on the country support model would be better addressed under the appropriate agenda items.

The DEPUTY DIRECTOR-GENERAL (Corporate Operations), thanking participants for their comments, said that the Secretariat would make specific proposals on how to proceed following the discussion of the WHO Impact Framework.

The DIRECTOR-GENERAL said that the number of questions asked by Member States confirmed that the Secretariat had succeeded in initiating a significant shift towards a more results-oriented, country-focused way of working. It was not surprising that certain details were lacking, since they were in entirely new territory. He welcomed the general support expressed, but recognized Member States' need for more information. A list of recommendations would be produced for follow-up before the Seventy-second World Health Assembly.

The CHAIRMAN took it that the Board wished to defer further consideration of document EB144/5 pending discussion of the WHO Impact Framework, contained in document EB144/7.

**It was so agreed.**

The CHAIRMAN took it that the Board wished to note the report contained in document EB144/6.

**The Board noted the report.**

**The meeting rose at 12:00.**

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