

MTSP/2008-2013
PPB/2008-2009

Original: English

DRAFT MEDIUM-TERM STRATEGIC PLAN 2008-2013

DRAFT PROPOSED PROGRAMME BUDGET 2008-2009

The designations employed and the presentation of the material in this document do not imply the expression of any opinion whatsoever on the part of the Secretariat of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.

Geneva, November 2006

... I want us to be judged by the impact we have on the health of the people of Africa, and the health of women.

All regions, all countries, all people are equally important. This is a health organization for the whole world. Our work must touch on the lives of everyone, everywhere. But we must focus our attention on the people in greatest need.

... Our commitment to results is only relevant if we can demonstrate an impact in these two populations.¹

I said these words in my acceptance speech to the special session of the World Health Assembly on being elected as Director-General, to demonstrate my personal commitment to making our work even more relevant and significant. All people benefit from the work of WHO. We must do our utmost to maximize these broad benefits, while never losing sight of those who need us most.

I have stressed the importance of knowing our strengths and concentrating on those activities that WHO is uniquely well suited to perform. To meet the increasing demands and challenges in international health requires reviewing ever more critically which expected results and core functions are the most important for WHO and the people we serve. By being selective, we can be more effective.

This commitment to “attaining results for health” is reflected throughout the proposed medium-term strategic plan for 2008–2013, which provides the strategic direction for the Organization for the six-year period. This direction is based on the global health agenda and core functions identified in the Eleventh General Programme of Work. I view our global health agenda as especially important, as it brings cohesion to the work of our many partners implementing programmes within countries.

The six areas for results that I emphasized in my acceptance speech are clearly reflected in this proposed strategic plan: health development, health security, capacity, evidence, partnership, and performance.

Within the strategic objectives, several specific areas important to WHO during the coming six-year period are reflected as priorities in the plan. These respond both to emerging health concerns and to the priorities of Member States, as expressed in recent resolutions adopted by the Health Assembly. These areas include:

- implementing the International Health Regulations (2005) in order to respond rapidly to public health emergencies of international concern (including those caused by outbreaks of emerging and epidemic-prone diseases), building on eradication of poliomyelitis to develop an effective surveillance and response infrastructure
- addressing the epidemic of chronic noncommunicable diseases, with an emphasis on measures to reduce risk factors such as tobacco consumption, improper diet, and physical inactivity
- addressing the broader aspects of health and its interaction with other sectors, through use of the future report of the Commission on Social Determinants of Health
- reducing maternal mortality, by scaling up activities aimed at universal access to, and coverage with, effective interventions, and strengthening health services
- improving health systems, focusing on human resources, financing and health information.

¹ Document SSA1/DIV/6.

The resources needed to achieve the expected results set out in the Proposed programme budget 2008–2009 amount to US\$ 4263 million, an increase of 16% over the expected expenditures in the previous biennium. This increase is a reflection of higher expectations of the Organization and corresponding demands arising from our governing bodies and from the growing number of partners working to make this world a healthier place.

I am proposing changes in the way the programme budget is financed. A substantial part of the programme budget needs to be financed by assessed contributions, in order to demonstrate the shared commitment and responsibility of all Member States. By the end of the six-year period, a third of the budget should be financed by assessed contributions, a third by negotiated core voluntary contributions (non-earmarked), and a third by specified voluntary contributions. The changes will improve alignment between voluntary contributions and budgetary needs, promote efficiency, and enhance the integrity of the Organization's work. Management reform will continue, with results-based management at its core.

The fact that two thirds of the programme budget continues to be financed by voluntary contributions reflects the confidence and commitment of Member States and other partners. I sincerely appreciate this support and recognize its importance as we strive to attain results for health.

I am pleased to submit this Medium-term strategic plan 2008–2013 and Proposed programme budget 2008–2009 to the Executive Board.

A handwritten signature in black ink, appearing to read "M. Lehan". The signature is fluid and cursive, with a prominent initial "M" and a long, sweeping tail.

Director-General elect

DRAFT MEDIUM-TERM STRATEGIC PLAN 2008-2013

CONTENTS

	Page
I. Challenges, gaps and future needs	1
II. Lessons learnt.....	3
III. Strategic direction for 2008–2013.....	5
IV. WHO’s framework for results-based management.....	9
V. Effective financing of the Medium-term strategic plan	12
VI. Monitoring and evaluation	17
VII. Strategic objectives	18
1. To reduce the health, social and economic burden of communicable diseases	18
2. To combat HIV/AIDS, tuberculosis and malaria.....	27
3. To prevent and reduce disease, disability and premature death from chronic noncommunicable conditions, mental disorders, violence and injuries.....	35
4. To reduce morbidity and mortality and improve health during key stages of life, including pregnancy, childbirth, the neonatal period, childhood and adolescence, and improve sexual and reproductive health and promote active and healthy ageing for all individuals.....	41
5. To reduce the health consequences of emergencies, disasters, crises and conflicts, and minimize their social and economic impact.	48
6. To promote health and development, prevent and reduce risk factors for health conditions associated with use of tobacco, alcohol, drugs and other psychoactive substances, unhealthy diets, physical inactivity and unsafe sex	53
7. To address the underlying social and economic determinants of health through policies and programmes that enhance health equity and integrate pro-poor, gender-responsive, and human rights-based approaches	60
8. To promote a healthier environment, intensify primary prevention and influence public policies in all sectors so as to address the root causes of environmental threats to health.	65
9. To improve nutrition, food safety and food security throughout the life-course and in support of public health and sustainable development.....	73
10. To improve the organization, management and delivery of health services.....	79
11. To strengthen leadership, governance and the evidence base of health systems	83
12. To ensure improved access, quality and use of medical products and technologies...	88
13. To ensure an available, competent, responsive and productive health workforce in order to improve health outcomes.....	92
14. To extend social protection through fair, adequate and sustainable financing.	98
15. To provide leadership, strengthen governance and foster partnership and collaboration with countries in order to fulfil the mandate of WHO in advancing the global health agenda as set out in the Eleventh General Programme of Work.	104
16. To develop and sustain WHO as a flexible, learning organization, enabling it to carry out its mandate more efficiently and effectively.....	109

	Page
Figure 1. Medium-term strategic plan	9
Figure 2. Biennial programme budget	10
Figure 3. Budget distribution between regional offices and headquarters.....	16
Figure 4. Monitoring and evaluation instruments.....	17
Table 1. Financing of the Proposed programme budget: evolution during the period of the Medium-term strategic plan	14
Table 2. Proposed programme budget 2008-2009 compared to Programme budget 2006–2007, by office and main source of funding	15
Table 3. Budget distribution between regional offices and headquarters.....	16