Collaboration within the United Nations system and with other intergovernmental organizations

Report by the Secretariat

1. The year 2015 was marked by a huge mobilization across the United Nations system to accelerate the achievements of the Millennium Development Goals and create a new sustainable development paradigm that addresses all three pillars of sustainable development and identifies means of implementation of the 2030 Agenda for Sustainable Development.

2. Throughout the year, four major conferences on disaster risk reduction, financing for development, climate change, and sustainable development galvanized unprecedented mobilization and public engagement in comprehensive preparation processes that contributed to the shaping of a new sustainable development agenda.

3. While completing and taking forward the unfinished agenda of the Millennium Development Goals, the United Nations system promoted cross-sectoral and cross-institutional action to accelerate progress and develop new approaches for the implementation of the Sustainable Development Goals.

4. This report will present WHO engagement in the processes aiming at strengthening United Nations support to Member States in achieving the 2030 Agenda for Sustainable Development.

Country-level implications of the United Nations system wide engagement at the highest level

5. With the 2015 deadline to meet the Millennium Development Goals, the United Nations System Chief Executives Board for Coordination intensified its engagement in catalysing action across the system for the implementation of the Millennium Development Goals, with the purpose of identifying bottlenecks, fostering cross-sectoral collaboration, scaling up successful initiatives and ultimately strengthening support to countries experiencing difficulties in accelerating progress in achieving one or more of the Millennium Development Goals.

6. Out of 16 countries from across the world and one subregion that took part in the reviews of their Millennium Development Goal acceleration frameworks, eight focussed on the health-related Millennium Development Goals. Progress towards improving maternal health was reviewed in El Salvador, Ghana, Indonesia, Kyrgyzstan, and the Philippines, and different aspects of Millennium

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1 The following took part in this review: Bangladesh, Benin, Burkina Faso, Colombia, Democratic Republic of the Congo, El Salvador, Ghana, Indonesia, Kyrgyzstan, Lao People’s Democratic Republic, Nepal, Niger, Pakistan, Philippines, United Republic of Tanzania, Yemen, and the Pacific Island countries.
Development Goal 6 (Combat HIV/AIDS, Malaria and other diseases) were reviewed in another three countries: reducing incidence and prevalence of and mortality from tuberculosis in Bangladesh; combating HIV/AIDS and malaria in the Democratic Republic of the Congo; and noncommunicable diseases in the Pacific Island countries.

7. WHO was fully involved in and contributed to these discussions with active participation at all three levels of the Organization. Closer collaboration among the United Nations agencies and the World Bank at country level spearheaded by the Principals helped to achieve some concrete progress in health outcomes. Examples include:

- **In Kyrgyzstan**, WHO initiated strengthened collaboration of several United Nations agencies within the mother and child health component of the Den Sooluk National Health Reform Programme 2012–2016. The United Nations organizations came together to develop an information and data analysis tool for electronic collection of data from health facilities on maternal deaths using the confidential enquiry into maternal deaths (e-CEMD) system. The tool, which is being finalized, will also be used to conduct statistical analysis after the initial project. WHO, the United Nations Children’s Fund (UNICEF) and the United Nations Population Fund (UNFPA) regularly hold joint discussions on each other’s plans and initiatives.

- **In the United Republic of Tanzania**, WHO contributed to the programme on reduction of hunger and poverty by promoting the integration of a routine nutrition surveillance and information system within the health management information system. To boost implementation, a quarterly scorecard was developed (using nutrition surveillance data) to serve as a policy report and to monitor the progress of performance on key indicators. The Health and Nutrition Working Group under the United Nations Development Assistance Plan continues to meet every month.

- **In the Pacific Islands**, the Secretariat supported Member States to develop Healthy Islands indicators. Collaboration and coordination among the United Nations agencies were improved within the framework of the Pacific Regional United Nations Thematic Group on Noncommunicable Diseases.

- **In El Salvador**, focused messages delivered by the United Nations system beyond the health sector helped mobilize communities in tackling gender inequalities and strengthening community-based delivery facilities. An integrated approach encompassed enhancement of the health service, improved nutrition and protection of women, as security concerns were identified as impeding the ability of women and girls to access health centres.

- **In Yemen**, WHO collaboration with the United Nations team helped reinforce the status of the United Nations with the government and strengthened coordinated support for priority actions, especially in rural areas. WHO contributed to joint efforts to promote employment for youths and women and improve rural livelihoods in fragile and conflict situations, and to address the health of women and children through increased access to education in rural areas.

- **Joint United Nations engagement in Bangladesh and Indonesia** led to recognition of the need to increase the public budget for health at both national and subnational levels. In addition, the community network of health providers was strengthened with support from the government, United Nations agencies and development partners.
WHO involvement in the quadrennial comprehensive policy review

8. The new resolution on the quadrennial comprehensive policy review, to be adopted by the end of 2016, has the potential to significantly influence and provide a framework for the way the United Nations system as a whole engages in planning, budgeting, implementation, monitoring and evaluation, and reporting as it strives to support Member States in implementing the 2030 Agenda for Sustainable Development, especially at country level.

9. In order to understand better the challenges of a truly integrated response, Member States of the United Nations Economic and Social Council have initiated a “dialogue on the longer-term positioning of the United Nations development system”. The main purpose of the dialogue is to look into seven interlinked components: functions, funding, governance, organizational arrangements, capacity, impact and partnership approaches.

10. In its own internal reform process, WHO is aligning itself with the initiative to make United Nations entities more agile, nimble, flexible and able to respond to the increasingly diversified expectations that are being applied to the United Nations system.

11. During the first phase of the dialogue, Member States recognized that new drivers of change posed significantly different challenges and required higher levels of ambition for the United Nations development system than the earlier Millennium Development Goal agenda. In order to sustain development gains, organizations within the United Nations system will need to move beyond the traditional understanding of their roles and business models.

12. The main recommendations so far reaffirm the importance of ensuring that all organizations within the United Nations system make progress in tandem. Recognizing the need to increase core resources, a dialogue with Members States on an appropriate funding model, accompanied by a transparent reporting system on the use of resources, should take place. In its convening role, the United Nations system can promote and strengthen partnerships and bring together governments, civil society, the private sector and other actors for attainment of the Sustainable Development Goals.

13. WHO’s involvement in the process is geared towards ensuring convergence of the WHO reform process and that of the United Nations system as a whole, in order to increase coherence with partners in achieving better health outcomes. Examples from different levels of the Organization in implementing this new approach include:

   • Programmatic reform accompanied by a clear results chain and allocation of resources approved by Member States has allowed WHO to better define its priorities and strengthen its capacity to deliver results. The WHO financing dialogue was presented in the report of the Secretary-General as an example that could be considered by other United Nations entities of

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a structured dialogue to improve the alignment, flexibility, predictability and transparency of core resources.

• In Ethiopia, WHO is promoting intersectoral efforts to address environmental determinants of health. WHO partnered with the Ministry of Water, Irrigation and Energy to develop the Climate-Resilient Water Safety Strategic Framework, with differentiated guidelines for urban and rural areas.

• Support to countries in emergency situations will continue to be a core function of the United Nations. In Malawi, WHO responded to the 2015 floods using its Emergency Response Framework. As part of the United Nations humanitarian response, WHO reprogrammed its own funds and mobilized additional resources through the United Nations Central Emergency Response Fund and the Africa Public Health Fund to support response activities and service provision, including mobile clinics, cholera case management, active disease surveillance and measles campaigns.

• WHO also has well-established collaborative links with middle-income and high-income countries. In Romania, WHO facilitated partnership between national authorities, health professionals and civil society to focus on vulnerable groups of children during European Immunization Week.

• WHO has long experience in bringing together partners to contribute to the achievement of health goals, for example in the prevention and control of noncommunicable diseases. In Sri Lanka, WHO hosted a joint mission in October 2015 that brought together 11 United Nations agencies to engage in a dialogue with the Ministry of Health, other ministries involved in activities related to noncommunicable diseases, senior officials of the government, and representatives of the private sector, academia and civil society.

• WHO is taking advantage of broad experience from across the United Nations system to further the reform of its work in disease outbreaks and emergencies with health and humanitarian consequences. To that end, the Director-General established an advisory group that included high-level experts from senior leadership positions in several United Nations agencies. The advisory group was chaired by the current United Nations Special Adviser to the Secretary-General on the 2030 Agenda for Sustainable Development, the former Special Envoy on Ebola, and included senior officials from UNICEF and the World Food Programme (WFP), as well as the former Emergency Relief Coordinator.

Strengthening the capacity of the United Nations system to support implementation of the 2030 Agenda


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15. WHO is strengthening its internal capacity to be a strong member of United Nations country teams in all regions. Coherent and coordinated support is provided by all major offices:

- At global level, WHO continues to support the Resident Coordinator System financially, managerially and with technical expertise. For the biennium 2016–2017, WHO will continue to contribute US$ 5.2 million under the centralized cost-sharing agreement to fund the system’s functioning at all levels. WHO actively participates in the development of all relevant guidance and policy documents within the United Nations Development Group and continues to harmonize its business practices, especially within the High-Level Committee on Management and its workstreams.

- WHO is one of the 20 agencies that have implemented the requirements of the management and accountability framework of the Resident Coordinator System, for example by recognizing the role of the United Nations Resident Coordinator at country level in the terms of reference of the heads of WHO offices in countries, territories and areas.

- The updated 2014 WHO Country Cooperation Guide fosters better alignment with United Nations programmatic instruments at country level, such as the United Nations Development Assistance Frameworks.

- Heads of WHO offices in countries, territories and areas receive regular training and support at global and regional level in participating in the “delivering as one” initiative in countries that have decided to adopt that approach.

- At regional level, WHO has a long history of collaboration and participation in the regional United Nations Development Group teams. WHO regional offices took the initiative to mobilize United Nations agencies at regional level to comprehensively address the prevention and control of noncommunicable diseases in a coordinated manner. Most recently, in order to ensure a coordinated approach at regional level to address the new health emergency in the form of the Zika virus outbreak, WHO regional offices provided information on the challenges presented by the outbreak and the actions undertaken by WHO.

- Normative work at regional level is promoted through regional coordination mechanisms. The Regional Office for the Americas, jointly with the United Nations Economic Commission for Latin America and the Caribbean and the Organization of American States, called upon Member States to implement the Inter-American Convention on Protecting the Rights of Older Persons, approved by the General Assembly of the Organization of American States in June 2015, which strengthens protection of the civil, political, economic, social and cultural rights of older persons, including the right to health.

- In the Europe and Central Asia region, a retreat on the implementation of the 2030 Agenda for Sustainable Development was held jointly with the regional United Nations Development Group team and the Regional Coordination Mechanism for Europe and Central Asia. The Regional Office for Europe proposed establishment of an issue-based coalition for the health-related Sustainable Development Goals in the Region, and is developing appropriate terms of reference.
• At country level, WHO contributes to the coherence, relevance and efficiency of the United Nations country teams by providing its expertise and human resources while serving as acting Resident Coordinator ad interim, and reporting on WHO contributions to the United Nations Development Assistance Framework.

ACTION BY THE HEALTH ASSEMBLY

16. The Health Assembly is invited to note the report.

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