Eleventh General Programme of Work: monitoring process

Report by the Secretariat

1. The Eleventh General Programme of Work, 2006–2015 provides a global health agenda for WHO – Member States and Secretariat – and the international community; it summarizes WHO’s strengths and core functions.\(^1\) The main challenges for WHO and its future priorities have been further developed in the draft Medium-term strategic plan 2008–2013 being submitted to the Board at its present session. As set out in the General Programme, the Secretariat will monitor progress in implementation.\(^2\) Monitoring will focus on the global health agenda in order to assess the adequacy of international responses; and on WHO’s core functions in order to review the quality and balance of the Organization’s work, and to clearly define its role.

Monitoring the global health agenda

2. Assessing the adequacy of international responses to the global health agenda contained in the General Programme will involve use of existing mechanisms, including the indicators and expected results of the strategic objectives set out in the Medium-term Strategic Plan, and the targets and goals agreed by the Health Assembly, many of which are linked to internationally agreed health-related development goals, including those contained in the Millennium Declaration (hereinafter “Millennium Development Goals”). Responses to selected priorities will be analysed more thoroughly each year.

3. **Investing in health to reduce poverty.** Investment will primarily be tracked through progress in achieving the Millennium Development Goals, as reported by the United Nations and the World Bank, for which WHO, UNICEF and UNAIDS produce statistics on the health-related Goals. These data will be complemented by the inclusion of areas not covered by the Goals but which have a major impact on poverty, in particular control of noncommunicable diseases and better reproductive health. Biennial reports will be submitted to the Health Assembly, the next one being due at the Sixty-first World Health Assembly.

4. **Building individual and global health security.** The world health report 2007 on health as a security issue provides a mechanism to report on health and security. The status of a number of major communicable diseases, including human cases of avian influenza, HIV/AIDS, tuberculosis, malaria

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\(^1\) Document A59/25, Annex 2.

and poliomyelitis, was recently reported to the United Nations General Assembly.\(^1\) Progress in emergency preparedness and response,\(^2\) and application of the International Health Regulations (2005)\(^3\) is being reported to the Board at its present session.\(^4\) Six-monthly progress reports on preparations for a possible pandemic are being prepared by the Secretariat.

5. **Promoting universal coverage, gender equality and health-related human rights.** Progress in achieving wider and more equitable coverage of essential public health interventions will be monitored through the regular use in WHO of disaggregated data covering sex, age, ethnicity, place of residence, and socioeconomic status. Monitoring of improvements in women’s health will be complemented by tracking broader commitments of the United Nations System to gender equality and women’s empowerment through the interagency network on this subject and the United Nations Gender and Development Working Group. A draft strategy for the integration of gender analysis and actions into the work of WHO is being submitted to the Board at its present session.\(^5\) In order to strengthen its activities in health and human rights, WHO is drawing up a workplan with the Office of the United Nations High Commissioner on Human Rights.

6. **Tackling the determinants to health.** A progress report on the work of the Commission on Social Determinants of Health is being submitted to the Board at its present session.\(^6\) Also submitted for the Board’s consideration is a draft resolution on health promotion which includes a provision for monitoring, evaluating and reporting on progress.\(^7\) Progress in addressing key behavioural determinants of health will be assessed on the basis of WHO’s work on tobacco control through its Framework Convention,\(^8\) implementation of the Global Strategy on Diet, Physical Activity and Health,\(^9\) sexual and reproductive health, in particular through the Global Strategy for the Prevention and Control of Sexually Transmitted Infections,\(^10\) and prevention of violence, including reporting back on the United Nations General Assembly resolution on road safety.\(^11\) Monitoring of changes in the physical environment as related to health will stem from WHO’s involvement in the implementation of the United Nations Framework Convention on Climate Change, and its participation in the United Nations Commission on Sustainable Development, Strategic Approach to International Chemicals Management, WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation, and FAO/WHO Codex Alimentarius Commission. A draft global plan of action on workers’ health is being submitted to the Board at its present session.\(^12\)

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1 Document A/61/383.
2 Resolution WHA59.22.
3 Resolution WHA59.2.
4 See documents EB120/35, Section D, and EB120/16, respectively.
5 See document EB120/6.
6 See document EB120/35, section B.
7 See document EB120/12.
8 See resolution WHA56.1.
9 Endorsed by resolution WHA57.17.
10 Resolution WHA59.19.
11 United Nations General Assembly resolution 60/5.
12 See document EB120/28.
7. **Strengthening health systems and equitable access.** This domain is central to much of WHO’s work, and progress in implementation of various related programmes will be monitored globally. Monitoring of health systems and their essential components such as governance, financing, human resources, information and service delivery is conducted through health observatories in WHO’s regions and a global synthesis of regional and country statistics. The effectiveness of international aid in strengthening national health systems will be assessed jointly by WHO, the World Bank, and other bodies, as part of the harmonization and coordination process among development Partners in health, using systems linked to the monitoring of the Paris Declaration on Aid Effectiveness.

8. **Harnessing knowledge, science and technology.** Progress in fulfilling commitments to improve investments and capacities for health systems research will be considered again by the Ministerial Summit on Health Research, next to be convened in Bamako in 2008. The recommendations of the Commission on Intellectual Property Rights, Innovation and Public Health are being taken forward by the Intergovernmental Working Group on Public Health, Innovation and Intellectual Property, which will submit a global strategy and plan of action to the Sixty-first World Health Assembly, after a report on progress to the present Board and the Sixtieth World Health Assembly.

9. **Strengthening governance, leadership and accountability.** This area is important at national level, as well as globally. Efforts are needed to improve the international oversight of health. WHO will monitor the strengthening of its own function in this area, in part through its close engagement in reform of the United Nations system. It will also monitor progress in addressing the impact of trade and trade agreements on health, reporting on progress to the Sixty-first World Health Assembly.

10. Major trends in global health will be formally reviewed when the Medium-term strategic plan 2008–2013 comes into effect. They will be further reviewed when the Secretariat reports on relevance and use of the Eleventh General Programme of Work to the Sixty-third and Sixty-seventh World Health Assembly.

**Monitoring WHO’s core functions**

11. WHO’s core functions, as defined in the Eleventh General Programme of Work, need to be monitored in order:

   - to ensure that WHO is constantly striving to improve the quality of its work, across the three levels of the Organization;
   - to assess whether WHO resources are being used in a way that allows an appropriate balance of core functions to be conducted throughout the Organization;

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1 See document EB120/38.
2 See Document EB120/35 Add.1, section F.
4 Resolution WHA59.4.
5 See document A59/25, Annex 2, section D.
12. **Focusing on core functions to strengthen quality-improvement systems in WHO.** Many of the existing management systems and ways of working can strengthen the quality of the Organization’s output, for example results-based management, peer reviews, performance monitoring, independent evaluations, improved work environment, and competency-based selection of staff. In addition, systems based on the core functions are being developed specifically to improve the quality of work across the three levels of the Organization. The specific approaches and staff involved will be different for each of the core functions, but the principles will be the same: quality will be more clearly defined, assessed and analysed, with systems put in place for its sustainable improvement. Processes will be subject to external scrutiny in order to ensure their soundness and transparency.

13. **Mapping core functions across the Organization.** In order to analyse the balance of core functions throughout the Organization, the new Global Management System, once in operation, will track work by core function. Mapping will be used to assess the level of resources being mobilized and used by core functions in each office, and will provide basic data that can be used as the starting point for more detailed analysis.

14. **Creating a better understanding of WHO’s role.** Views on the role of WHO vary widely. The Secretariat has embarked on a communications strategy in order to ensure that the core functions are better known and understood.

15. **Clarifying responsibility for quality improvement.** The Director-General will ensure that senior managers take on the responsibility for developing and maintaining systems to improve the quality of the Organization’s work. The designated managers will be responsible for developing, monitoring and reporting on quality standards. These efforts will build on existing responsibilities wherever possible, with some central facilitation as required.

**Progress by core function**

1. **Providing leadership on matters critical to health and engaging in partnerships where joint action is needed**

16. WHO acts as a convener for collective action, engages in various working arrangements with partners, and ensures that health remains a major component of international development and humanitarian policy. The Organization leads the response of the United Nations system to health problems in major emergencies. It is formulating a policy for collaborative arrangements and partnerships, and has strengthened its commitment to reform of the United Nations system. It will become more strategic in its engagements with other organizations of the system, with international financing institutions, and with the foundations that are working to strengthen country health systems. WHO is considering hosting a regular international forum for partners and Member States in order to consolidate views and review its overall performance.

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1 In the Regional Office for the Americas this function will be part of the American Region Planning and Evaluation System (AMPES).

2 See document EB120/31.
2. Shaping the research agenda and stimulating the generation, translation and dissemination of valuable knowledge

WHO will strengthen its efforts by drafting a strategy on management and organization of research activities within WHO. ACHR will continue to provide external scrutiny and advice. Terms of reference and ways of working will continue to be reviewed in order to enhance performance throughout the Organization. A report on WHO’s publications policy is being submitted to the Committee.

3. Setting norms and standards, and promoting and monitoring their implementation

WHO’s mechanism of expert advisory panels works well in many areas, but needs to be kept under review in others. Some panels are no longer in use, and a considerable amount of external expertise originates outside this mechanism. In order to improve the preparation of normative guidance, a guidelines review mechanism is being set up. It will maintain a database of WHO guidelines, establish a network of WHO staff skilled in drafting guidelines, keep abreast of methodological developments, maintain a web site to communicate its work, and have measurable outcomes to monitor its own performance. Further work is required to ensure that the entire Secretariat benefits from this mechanism, and to monitor the use of WHO’s guidance.

4. Articulating ethical and evidence-based policy options

Member States are provided with reviews of policy options to consider in different settings, and their adaptation is facilitated through intercountry and in-country work. WHO will assess whether it adequately addresses feasibility in different social and economic environments, and considers issues of cost-effectiveness, ethics and equity. Formal mechanisms for improving quality have yet to be agreed, and will require further consultation with Member States and partners.

5. Providing technical support, catalysing change and building sustainable institutional capacity

Providing technical support, building capacity and catalysing change are essential aspects of work in Member States, and are closely linked to application of WHO’s tools and guidelines and their related policy options. Building of institutional capacity in countries focuses mainly on strengthening government and allied national institutions. A consultation will be conducted with external partners and throughout the Secretariat in order to gain an understanding of, and reach consensus on, the most cost-effective models and ways in which the Organization’s strengths may be used to the best advantage.

6. Monitoring the health situation and assessing health trends

The Organization provides standards for health information, links networks of epidemiologists, biostatisticians and public health specialists, monitors health trends and builds more effective systems for surveying and comparing country health situation and trends. It will continue to harmonize its activities in this area, both internally and with other agencies, in order to work more efficiently and

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1 See document EB120/14.
2 Document EBPBAC5/3.
with less demand on Member States. Mechanisms are in place that ensure the quality and transparency of estimates produced, with strong involvement of technical partners through reference and expert groups. WHO recently set up an advisory committee on health monitoring and statistics in order to provide external scrutiny and advice on scientific and technical matters related to its health statistics, including the indicators to be used to monitor the strategic objectives set out in the Medium-term strategic plan.

22. A report on WHO’s implementation of its core functions will be provided regularly.

**ACTION BY THE PROGRAMME, BUDGET AND ADMINISTRATION COMMITTEE**

23. The Committee is invited to note the above report.