



**European Union
Statement**

WHO

142nd Executive Board

(22 January – 27 January 2018)

Item 3.1 - Draft thirteen general programme of work 2019 - 2023

Geneva, 22 January 2018

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EU Statement

Mr. Chairman,

I am speaking on behalf of the European Union and its Member States. The Candidate Countries Turkey, Montenegro* and Albania*, the country of the Stabilisation and Association Process and potential candidate Bosnia and Herzegovina, as well as Ukraine and the Republic of Moldova, align themselves with this statement.

We welcome the updated text and proposed priorities that reflect a stronger alignment with the SDGs, strengthens WHO's normative and standard setting function, the enhanced recognition of the importance of the WHO working in partnership with all other relevant actors, and the One UN approach. We expect WHO to be a committed player in the implementation of the UN reform process.

We appreciate the new emphasis on the WHO's aim of strengthening its public voice to advocate for action to tackle barriers to improve global health outcomes.

As currently framed, the three "1 billion goals" seem to imply that their attainment will be principally driven by WHO. It should be stressed that these goals can only be attained through a collaborative effort between WHO, its Member States and other donors; funds such as GFATM and Gavi will act as catalysts alongside WHO. We therefore suggest to set out more clearly how WHO will measure its contribution to reaching the three goals, particularly in countries that are in transition from external funding to domestic funding for health.

* Montenegro and Albania continue to be part of the Stabilisation and Association Process.

The EU and its Member States welcome that the role of WHO regional offices is outlined with regards to UHC. WHO's main role will be to support countries in achieving better health outcomes through health system strengthening for their populations. We request further detail with regards to regional collaboration on other health areas

We are inspired by the vision to reshape the operating model to drive country, regional and global impact. It is important that such a reform is accompanied by a needs based analysis of the country offices as well as of the implications for entities where resources would be shifted from. WHO should not only demonstrate how its interventions have impact but also to transform its interventions to have more impact on populations.

We remain concerned about the 'platforms', how they fit within the strategic priorities, how they will be implemented across the organisation avoiding duplication or siloed working and how accountability will be maintained.

The EU and its Member States support a strong role for WHO, including at country level, and recognise that in the area of donor coordination country-specific solutions are needed. These solutions should build on the comparative advantages of in-country actors and take into account the efficiency of existing donor coordination mechanisms. The link between WHO HQ and country offices should be strengthened, in order to oversee the implementation of WHO's strategy worldwide.

We are concerned, that the GPW lacks an adequate focus on robust, transparent and independent accountability mechanisms needed to implement the GPW strategy. We strongly recommend to include a reference to the creation of an independent oversight and accountability mechanism, which we understood was also a DG priority.

We welcome the development of an impact and accountability framework by the Secretariat of WHO Such a framework will increase trust toward WHO and is a prerequisite for more flexible financing.

We welcome the references to value for money in this draft and the additional financial estimate provided. We must stress, however, the importance of the ambition within the GPW being deliverable based on realistic financial assumptions particularly in light of the possibility that current funding for polio may cease during this period. We hope to have these concerns allayed in the forthcoming investment case.

In a similar vein we want to address the assertion in paragraph 109. A significant proportion of WHO's finances from voluntary funding are from NSAs which is outside of MS control, and therefore, the MS approval of the programme budgets does not constitute an implicit commitment to ensure full financing of these budgets.

The EU and its Member States look forward to collaboratively engaging on all of these issues as we move forward with the approval process of this next GPW. In this spirit, we are open to the adoption of a resolution along the broad lines of the draft circulated in document EB 142/3 Add.1, but the precise wording of such a resolution still needs to be discussed in detail.

Thank you