

Table 1. Budget by strategic objective

Strategic objective	Africa	The Americas	South-East Asia
1. To reduce the health, social and economic burden of communicable diseases	316 203	32 387	134 742
2. To combat HIV/AIDS, malaria and tuberculosis	242 912	48 673	80 979
3. To prevent and reduce disease, disability and premature death from chronic noncommunicable conditions, mental disorders, violence and injuries and visual impairment	20 723	9 848	17 679
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	115 695	27 414	50 614
5. To reduce the health consequences of emergencies, disasters, crises and conflicts, and minimize their social and economic impact	66 021	19 931	24 356
6. To promote health and development, and prevent or reduce risk factors for health conditions associated with use of tobacco, alcohol, drugs and other psychoactive substances, unhealthy diets, physical inactivity and unsafe sex	25 566	13 862	14 590
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	9 116	6 937	4 838
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	18 749	12 057	13 827
9. To improve nutrition, food safety and food security throughout the life-course and in support of public health and sustainable development	39 778	14 608	13 939
10. To improve health services through better governance, financing, staffing and management, informed by reliable and accessible evidence and research	142 093	37 462	57 829
11. To ensure improved access, quality and use of medical products and technologies	22 592	8 940	14 290
12. To provide leadership, strengthen governance and foster partnership and collaboration with countries, the United Nations system, and other stakeholders in order to fulfil the mandate of WHO in advancing the global health agenda as set out in the Eleventh General Programme of Work	48 966	16 559	14 304
13. To develop and sustain WHO as a flexible, learning organization, enabling it to carry out its mandate more efficiently and effectively	125 526	29 823	49 551
TOTAL	1 193 940	278 501	491 538

and location, 2008-2009 (US\$ thousand)

Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
29 925	101 095	53 525	226 166	894 043
35 926	53 769	59 332	185 341	706 932
15 909	19 808	21 735	52 402	158 104
14 418	39 815	25 216	86 661	359 833
20 914	40 912	16 722	29 557	218 413
9 959	24 809	31 729	41 542	162 057
5 975	11 975	2 496	24 568	65 905
17 951	16 358	12 364	39 150	130 456
5 975	8 938	19 273	24 423	126 934
48 567	66 206	46 607	115 290	514 054
6 971	16 763	9 989	54 488	134 033
25 341	26 482	15 636	67 056	214 344
36 932	38 040	33 214	229 286	542 372
274 763	464 970	347 838	1 175 930	4 227 480

Table 2. Budget by strategic objective, location and source of financing, all levels, 2008-2009 (US\$ thousand)

Strategic objective	GRAND TOTAL			Regions		Headquarters
				Country	Regional	
	Assessed contribution ^a	Voluntary contribution	All financing	All financing	All financing	All financing
1. To reduce the health, social and economic burden of communicable diseases	85 368	808 675	894 043	378 634	289 243	226 166
2. To combat HIV/AIDS, malaria and tuberculosis	48 996	657 936	706 932	344 780	176 811	185 341
3. To prevent and reduce disease, disability and premature death from chronic noncommunicable conditions, mental disorders, violence and injuries and visual impairment	45 215	112 889	158 104	68 316	37 386	52 402
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	55 909	303 924	359 833	159 034	114 138	86 661
5. To reduce the health consequences of emergencies, disasters, crises and conflicts, and minimize their social and economic impact	17 631	200 782	218 413	137 926	50 930	29 557
6. To promote health and development, and prevent or reduce risk factors for health conditions associated with use of tobacco, alcohol, drugs and other psychoactive substances, unhealthy diets, physical inactivity and unsafe sex	39 077	122 980	162 057	73 864	46 651	41 542
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	14 427	51 478	65 905	26 300	15 037	24 568
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	32 736	97 720	130 456	56 585	34 721	39 150
9. To improve nutrition, food safety and food security throughout the life-course and in support of public health and sustainable development	23 054	103 880	126 934	54 781	47 730	24 423
10. To improve health services through better governance, financing, staffing and management, informed by reliable and accessible evidence and research	139 630	374 424	514 054	255 267	143 497	115 290
11. To ensure improved access, quality and use of medical products and technologies	31 244	102 789	134 033	52 666	26 879	54 488
12. To provide leadership, strengthen governance and foster partnership and collaboration with countries, the United Nations system, and other stakeholders in order to fulfil the mandate of WHO in advancing the global health agenda as set out in the Eleventh General Programme of Work	139 448	74 896	214 344	90 077	57 211	67 056
13. To develop and sustain WHO as a flexible, learning organization, enabling it to carry out its mandate more efficiently and effectively	286 105	256 267	542 372	113 369	199 717	229 286
TOTAL	958 840	3 268 640	4 227 480	1 811 599	1 239 951	1 175 930

^a Includes miscellaneous income.

**Table 3. Budget by strategic objective, location and source of financing,
2008-2009 (US\$ thousand)**

Strategic objective	Africa				
	Total			Country	Regional
	Assessed contribution ^a	Voluntary contribution	All financing	All financing	All financing
1. To reduce the health, social and economic burden of communicable diseases	20 049	296 154	316 203	130 422	185 781
2. To combat HIV/AIDS, malaria and tuberculosis	11 364	231 548	242 912	144 179	98 733
3. To prevent and reduce disease, disability and premature death from chronic noncommunicable conditions, mental disorders, violence and injuries and visual impairment	9 869	10 854	20 723	11 958	8 765
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	18 748	96 947	115 695	49 461	66 234
5. To reduce the health consequences of emergencies, disasters, crises and conflicts, and minimize their social and economic impact	4 172	61 849	66 021	47 502	18 519
6. To promote health and development, and prevent or reduce risk factors for health conditions associated with use of tobacco, alcohol, drugs and other psychoactive substances, unhealthy diets, physical inactivity and unsafe sex	10 118	15 448	25 566	12 926	12 640
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	6 128	2 988	9 116	4 995	4 121
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	5 857	12 892	18 749	9 324	9 425
9. To improve nutrition, food safety and food security throughout the life-course and in support of public health and sustainable development	5 162	34 616	39 778	17 994	21 784
10. To improve health services through better governance, financing, staffing and management, informed by reliable and accessible evidence and research	23 059	119 034	142 093	84 072	58 021
11. To ensure improved access, quality and use of medical products and technologies	6 411	16 181	22 592	13 217	9 375
12. To provide leadership, strengthen governance and foster partnership and collaboration with countries, the United Nations system, and other stakeholders in order to fulfil the mandate of WHO in advancing the global health agenda as set out in the Eleventh General Programme of Work.	35 704	13 262	48 966	37 372	11 594
13. To develop and sustain WHO as a flexible, learning organization, enabling it to carry out its mandate more efficiently and effectively	56 701	68 825	125 526	42 935	82 591
TOTAL	213 342	980 598	1 193 940	606 357	587 583

^a Includes miscellaneous income.

**Table 3. Budget by strategic objective, location and source of financing
2008-2009 (US\$ thousand)**

Strategic objective	The Americas				
	Total			Country	Regional
	Assessed contribution ^a	Voluntary contribution	All financing	All financing	All financing
1. To reduce the health, social and economic burden of communicable diseases	9 631	22 756	32 387	11 754	20 633
2. To combat HIV/AIDS, malaria and tuberculosis	2 955	45 718	48 673	31 618	17 055
3. To prevent and reduce disease, disability and premature death from chronic noncommunicable conditions, mental disorders, violence and injuries and visual impairment	3 549	6 299	9 848	6 260	3 588
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	6 662	20 752	27 414	16 797	10 617
5. To reduce the health consequences of emergencies, disasters, crises and conflicts, and minimize their social and economic impact	1 599	18 332	19 931	16 137	3 794
6. To promote health and development, and prevent or reduce risk factors for health conditions associated with use of tobacco, alcohol, drugs and other psychoactive substances, unhealthy diets, physical inactivity and unsafe sex	3 211	10 651	13 862	9 117	4 745
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	1 468	5 469	6 937	5 387	1 550
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	5 656	6 401	12 057	8 791	3 266
9. To improve nutrition, food safety and food security throughout the life-course and in support of public health and sustainable development	2 153	12 455	14 608	6 019	8 589
10. To improve health services through better governance, financing, staffing and management, informed by reliable and accessible evidence and research	17 182	20 280	37 462	22 214	15 248
11. To ensure improved access, quality and use of medical products and technologies	1 393	7 547	8 940	6 004	2 936
12. To provide leadership, strengthen governance and foster partnership and collaboration with countries, the United Nations system, and other stakeholders in order to fulfil the mandate of WHO in advancing the global health agenda as set out in the Eleventh General Programme of Work	10 276	6 283	16 559	9 434	7 125
13. To develop and sustain WHO as a flexible, learning organization, enabling it to carry out its mandate more efficiently and effectively	15 766	14 057	29 823	10 366	19 457
TOTAL	81 501	197 000	278 501	159 898	118 603

^a Includes miscellaneous income.

**Table 3. Budget by strategic objective, location and source of financing,
2008-2009 (US\$ thousand)**

Strategic objective	South-East Asia				
	Total			Country	Regional
	Assessed contribution ^a	Voluntary contribution	All financing	All financing	All financing
1. To reduce the health, social and economic burden of communicable diseases	8 342	126 400	134 742	105 178	29 564
2. To combat HIV/AIDS, malaria and tuberculosis	7 479	73 500	80 979	65 974	15 005
3. To prevent and reduce disease, disability and premature death from chronic noncommunicable conditions, mental disorders, violence and injuries and visual impairment	7 479	10 200	17 679	13 753	3 926
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	11 314	39 300	50 614	37 621	12 993
5. To reduce the health consequences of emergencies, disasters, crises and conflicts, and minimize their social and economic impact	3 356	21 000	24 356	18 197	6 159
6. To promote health and development, and prevent or reduce risk factors for health conditions associated with use of tobacco, alcohol, drugs and other psychoactive substances, unhealthy diets, physical inactivity and unsafe sex	4 890	9 700	14 590	9 364	5 226
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	1 438	3 400	4 838	3 463	1 375
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	4 027	9 800	13 827	11 368	2 459
9. To improve nutrition, food safety and food security throughout the life-course and in support of public health and sustainable development	3 739	10 200	13 939	9 684	4 255
10. To improve health services through better governance, financing, staffing and management, informed by reliable and accessible evidence and research	22 629	35 200	57 829	45 135	12 694
11. To ensure improved access, quality and use of medical products and technologies	4 890	9 400	14 290	10 931	3 359
12. To provide leadership, strengthen governance and foster partnership and collaboration with countries, the United Nations system, and other stakeholders in order to fulfil the mandate of WHO in advancing the global health agenda as set out in the Eleventh General Programme of Work	6 904	7 400	14 304	7 490	6 814
13. To develop and sustain WHO as a flexible, learning organization, enabling it to carry out its mandate more efficiently and effectively	17 451	32 100	49 551	19 506	30 045
TOTAL	103 938	387 600	491 538	357 664	133 874

^a Includes miscellaneous income.

**Table 3. Budget by strategic objective, location and source of financing,
2008-2009 (US\$ thousand)**

Strategic objective	Europe				
	Total			Country	Regional
	Assessed contribution ^a	Voluntary contribution	All financing	All financing	All financing
1. To reduce the health, social and economic burden of communicable diseases	1 725	28 200	29 925	17 955	11 970
2. To combat HIV/AIDS, malaria and tuberculosis	1 726	34 200	35 926	21 556	14 370
3. To prevent and reduce disease, disability and premature death from chronic noncommunicable conditions, mental disorders, violence and injuries and visual impairment	2 109	13 800	15 909	9 943	5 966
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	1 918	12 500	14 418	9 269	5 149
5. To reduce the health consequences of emergencies, disasters, crises and conflicts, and minimize their social and economic impact	2 014	18 900	20 914	12 947	7 967
6. To promote health and development, and prevent or reduce risk factors for health conditions associated with use of tobacco, alcohol, drugs and other psychoactive substances, unhealthy diets, physical inactivity and unsafe sex	959	9 000	9 959	4 979	4 980
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	575	5 400	5 975	2 490	3 485
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	1 151	16 800	17 951	10 471	7 480
9. To improve nutrition, food safety and food security throughout the life-course and in support of public health and sustainable development	575	5 400	5 975	2 888	3 087
10. To improve health services through better governance, financing, staffing and management, informed by reliable and accessible evidence and research	7 767	40 800	48 567	29 039	19 528
11. To ensure improved access, quality and use of medical products and technologies	671	6 300	6 971	4 481	2 490
12. To provide leadership, strengthen governance and foster partnership and collaboration with countries, the United Nations system, and other stakeholders in order to fulfil the mandate of WHO in advancing the global health agenda as set out in the Eleventh General Programme of Work	15 341	10 000	25 341	10 136	15 205
13. To develop and sustain WHO as a flexible, learning organization, enabling it to carry out its mandate more efficiently and effectively	26 752	10 180	36 932	12 465	24 467
TOTAL	63 283	211 480	274 763	148 619	126 144

^a Includes miscellaneous income.

**Table 3. Budget by strategic objective, location and source of financing,
2008-2009 (US\$ thousand)**

Strategic objective	Eastern Mediterranean				
	Total			Country	Regional
	Assessed contribution ^a	Voluntary contribution	All financing	All financing	All financing
1. To reduce the health, social and economic burden of communicable diseases	7 107	93 988	101 095	79 865	21 230
2. To combat HIV/AIDS, malaria and tuberculosis	5 383	48 386	53 769	44 138	9 631
3. Prevent and reduce disease, disability and premature death from chronic noncommunicable conditions, mental disorders, violence and injuries and visual impairment	4 476	15 332	19 808	12 772	7 036
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	4 305	35 510	39 815	29 986	9 829
5. To reduce the health consequences of emergencies, disasters, crises and conflicts, and minimize their social and economic impact	2 050	38 862	40 912	33 190	7 722
6. To promote health and development, and prevent or reduce risk factors for health conditions associated with use of tobacco, alcohol, drugs and other psychoactive substances, unhealthy diets, physical inactivity and unsafe sex	4 451	20 358	24 809	17 520	7 289
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	579	11 396	11 975	8 384	3 591
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	3 308	13 050	16 358	9 007	7 351
9. To improve nutrition, food safety and food security throughout the life-course and in support of public health and sustainable development	1 451	7 487	8 938	6 035	2 903
10. To improve health services through better governance, financing, staffing and management, informed by reliable and accessible evidence and research	20 831	45 375	66 206	44 887	21 319
11. To ensure improved access, quality and use of medical products and technologies	3 192	13 571	16 763	12 171	4 592
12. To provide leadership, strengthen governance and foster partnership and collaboration with countries, the United Nations system, and other stakeholders to fulfil the mandate of WHO in advancing the global health agenda as set out in the Eleventh General Programme of Work.	12 070	14 412	26 482	17 128	9 354
13. To develop and sustain WHO as a flexible, learning organization, enabling it to carry out its mandate more efficiently and effectively	22 367	15 673	38 040	16 834	21 206
TOTAL	91 570	373 400	464 970	331 917	133 053

^a Includes miscellaneous income.

Table 3. Budget by strategic objective, location and source of financing, 2008-2009 (US\$ thousand)

Strategic objective	Western Pacific				
	Total			Country	Regional
	Assessed contribution ^a	Voluntary contribution	All financing	All financing	All financing
1. To reduce the health, social and economic burden of communicable diseases	8 039	45 486	53 525	33 460	20 065
2. To combat HIV/AIDS, malaria and tuberculosis	6 241	53 091	59 332	37 315	22 017
3. To prevent and reduce disease, disability and premature death from chronic noncommunicable conditions, mental disorders, violence and injuries and visual impairment	6 185	15 550	21 735	13 630	8 105
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.	4 295	20 921	25 216	15 900	9 316
5. To reduce the health consequences of emergencies, disasters, crises and conflicts, and minimize their social and economic impact	1 813	14 909	16 722	9 953	6 769
6. To promote health and development, and prevent or reduce risk factors for health conditions associated with use of tobacco, alcohol, drugs and other psychoactive substances, unhealthy diets, physical inactivity and unsafe sex	6 323	25 406	31 729	19 958	11 771
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	101	2 395	2 496	1 581	915
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	3 161	9 203	12 364	7 624	4 740
9. To improve nutrition, food safety and food security throughout the life-course and in support of public health and sustainable development	2 947	16 326	19 273	12 161	7 112
10. To improve health services through better governance, financing, staffing and management, informed by reliable and accessible evidence and research	15 222	31 385	46 607	29 920	16 687
11. To ensure improved access, quality and use of medical products and technologies	2 574	7 415	9 989	5 862	4 127
12. To provide leadership, strengthen governance and foster partnership and collaboration with countries, the United Nations system, and other stakeholders in order to fulfil the mandate of WHO in advancing the global health agenda as set out in the Eleventh General Programme of Work	8 468	7 168	15 636	8 517	7 119
13. To develop and sustain WHO as a flexible, learning organization, enabling it to carry out its mandate more efficiently and effectively	14 790	18 424	33 214	11 263	21 951
TOTAL	80 159	267 679	347 838	207 144	140 694

^a Includes miscellaneous income.

**Table 3. Budget by strategic objective, location and source of financing,
2008-2009 (US\$ thousand)**

Strategic objective	Headquarters		
	Total		
	Assessed contribution ^a	Voluntary contribution	All financing
1. To reduce the health, social and economic burden of communicable diseases	30 475	195 691	226 166
2. To combat HIV/AIDS, malaria and tuberculosis	13 848	171 493	185 341
3. To prevent and reduce disease, disability and premature death from chronic noncommunicable conditions, mental disorders, violence and injuries and visual impairment	11 548	40 854	52 402
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	8 667	77 994	86 661
5. To reduce the health consequences of emergencies, disasters, crises and conflicts, and minimize their social and economic impact	2 627	26 930	29 557
6. To promote health and development, and prevent or reduce risk factors for health conditions associated with use of tobacco, alcohol, drugs and other psychoactive substances, unhealthy diets, physical inactivity and unsafe sex	9 125	32 417	41 542
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	4 138	20 430	24 568
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	9 576	29 574	39 150
9. To improve nutrition, food safety and food security throughout the life-course and in support of public health and sustainable development	7 027	17 396	24 423
10. To improve health services through better governance, financing, staffing and management, informed by reliable and accessible evidence and research	32 940	82 350	115 290
11. To ensure improved access, quality and use of medical products and technologies	12 113	42 375	54 488
12. To provide leadership, strengthen governance and foster partnership and collaboration with countries, the United Nations system, and other stakeholders in order to fulfil the mandate of WHO in advancing the global health agenda as set out in the Eleventh General Programme of Work	50 685	16 371	67 056
13. To develop and sustain WHO as a flexible, learning organization, enabling it to carry out its mandate more efficiently and effectively	132 278	97 008	229 286
TOTAL	325 047	850 883	1 175 930

^a Includes miscellaneous income.

Table 4. Major WHO partnerships¹

Partners	TOTAL (US\$ thousand)
Alliance for Health Policy and Systems Research	8 000
Global Alliance for Vaccines and Immunization (GAVI)	67 933
Global Alliance against Chronic Respiratory Diseases	1 500
Global Health Workforce Alliance	7 490
Global Polio Eradication Initiative	381 306
Health Metrics Network	25 000
Intergovernmental Forum on Chemical Safety	1 000
Partnership for Maternal, Newborn and Child Health	41 400
Roll Back Malaria Partnership	18 700
UNICEF/UNDP/World Bank/WHO Special Programme for Research and Training in Tropical Diseases	98 000
International Food Safety Authorities Network	500
United Nations System Standing Committee on Nutrition	200
United Nations Road Safety Collaboration	400
UNDP/UNFPA/WHO/World Bank Special Programme of Research, Development and Research Training in Human Reproduction	39 000
Initiative for Vaccine Research	1 600
Violence Prevention Alliance	400
Vision 2020: The Right to Sight	1 500
WHO alliance for the global elimination of trachoma	1 350
TOTAL	695 279

¹ Partnerships that contribute to achievement of the strategic objectives within the budget of US\$ 4227 million. The Secretariat of WHO's Framework Convention on Tobacco Control and the Stop TB Partnership Global Drug Facility though not included within the budget also supporting the achievement of the strategic objectives.

Table 5. Links between strategic objectives 2008-2009 and areas of work 2006-2007

Strategic objectives 2008-2009	Total 2008-2009 (US\$ thousand)	Share of 2008-2009 budget %	Areas of work 2006-2007	Total 2006- 2007 (US\$ thousand)	Increase/ decrease %
1. To reduce the health, social and economic burden of communicable diseases			Child and adolescent health	4 925	
			Communicable disease prevention and control	148 932	
			Communicable disease research	54 331	
			Epidemic alert and response	229 635	
			Immunization and vaccine development	479 668	
Total	894 043	21		917 491	-3
2. To combat HIV/AIDS, malaria and tuberculosis			Essential health technologies	706	
			Child and adolescent health	4 925	
			Communicable disease research	54 331	
			HIV/AIDS	273 552	
			Immunization and vaccine development	10 542	
			Malaria	136 751	
			Making pregnancy safer	3 048	
			Nutrition	1 354	
			Reproductive health	5 457	
			Tobacco	383	
			Tuberculosis	233 492	
Total	706 932	17		724 541	-2
3. To prevent and reduce disease, disability and premature death from chronic noncommunicable conditions, mental disorders, violence and injuries and visual impairment			Health promotion	27 180	
			Violence, injuries and disabilities	22 388	
			Mental health and substance abuse	21 154	
			Surveillance, prevention and management of chronic, noncommunicable diseases	31 373	
			Tobacco	7 654	
Total	158 104	4		109 749	44
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			Child and adolescent health	81 751	
			Making pregnancy safer	51 816	
			Nutrition	2 708	
			Reproductive health	70 163	
Total	359 833	9		206 438	74

Strategic objectives 2008-2009	Total 2008-2009 (US\$ thousand)	Share of 2008-2009 budget %	Areas of work 2006-2007	Total 2006- 2007 (US\$ thousand)	Increase/ decrease %
5. To reduce the health consequences of emergencies, disasters, crises and conflicts, and minimize their social and economic impact			Essential health technologies	706	
			Communicable disease prevention and control	1 551	
			Emergency preparedness and response	110 589	
			Food safety	2 694	
			Mental health and substance abuse	1 923	
			Making pregnancy safer	3 048	
			Nutrition	1 354	
			Health and environment	8 893	
Total	218 413	5		130 758	67
6. To promote health and development, and prevent or reduce risk factors for health conditions associated with use of tobacco, alcohol, drugs and other psychoactive substances, unhealthy diets, physical inactivity and unsafe sex			Child and adolescent health	1 970	
			Health promotion	27 180	
			Mental health and substance abuse	8 975	
			Surveillance, prevention and management of chronic, noncommunicable diseases	31 373	
			Reproductive health	780	
			Tobacco	30 231	
Total	162 057	4		100 509	61
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			Policy-making for health in development	15 782	
			Reproductive health	1 559	
			Gender, women and health	17 612	
Total	65 905	2		34 953	89
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			Health and environment	80 033	
Total	130 456	3		80 033	63
9. To improve nutrition, food safety and food security throughout the life-course and in support of public health and sustainable development			Child and adolescent health	4 925	
			Communicable disease prevention and control	4 654	
			Food safety	24 242	
			Nutrition	21 666	
Total	126 934	3		55 487	129

Strategic objectives 2008-2009	Total 2008-2009 (US\$ thousand)	Share of 2008-2009 budget %	Areas of work 2006-2007	Total 2006- 2007 (US\$ thousand)	Increase/ decrease %
10. To improve health services through better governance, financing, staffing and management, informed by reliable and accessible evidence and research			Policy-making for health in development	26 303	
			Health systems policies and service delivery	133 232	
			Making pregnancy safer	3 048	
			Health information, evidence and research policy	91 200	
			Knowledge management and information technology	44 105	
			Human resources for health	94 348	
			Health financing and social protection	40 109	
			Immunization and vaccine development	5 271	
Total	514 054	12		437 616	17
11. To ensure improved access, quality and use of medical products and technologies			Essential health technologies	26 846	
			Essential medicines	71 180	
			Immunization and vaccine development	31 627	
Total	134 033	3		129 653	3
12. To provide leadership, strengthen governance and foster partnership and collaboration with countries, the United Nations system, and other stakeholders in order to fulfil the mandate of WHO in advancing the global health agenda as set out in the Eleventh General Programme of Work			Policy-making for health and development	5 739	
			Planning, resource coordination and oversight	5 203	
			Direction	41 230	
			Governing bodies	15 898	
			Knowledge management and information technology	29 404	
			External relations	23 083	
			WHO's core presence in countries	95 980	
Total	214 344	5		216 537	-1
13. To develop and sustain WHO as a flexible, learning organization, enabling it to carry out its mandate more efficiently and effectively			Planning, resource coordination and oversight	23 705	
			Budget and financial management	42 270	
			Governing bodies	20 233	
			Human resources management in WHO	51 498	
			Infrastructure and logistics	127 900	
			Knowledge management and information technology	73 509	
			External relations	9 893	
			WHO's core presence in countries	95 981	
			Information technology fund	24 954	
			Exchange rate hedging	19 932	
			Security fund	22 986	
			Real estate fund	13 535	
Total	542 372	13		526 396	3

**Table 6. Strategic objectives: proposed budget 2008-2009,
estimates 2010-2011 and 2012-2013**

Strategic objective	Budget 2008- 2009	Estimates 2010-2011	Increase over 2008- 2009 %	Estimates 2012-2013	Increase over 2008- 2009 %
1. To reduce the health, social and economic burden of communicable diseases.	894 043	944 000	6	1 002 000	12
2. To combat HIV/AIDS, malaria and tuberculosis.	706 932	680 000	-4	740 000	5
3. Prevent and reduce disease, disability and premature death from chronic noncommunicable conditions, mental disorders, violence and injuries and visual impairment.	158 104	196 000	24	230 000	45
4. To reduce morbidity and mortality and improve health during key stages of life, including pregnancy, childbirth, the neonatal period, childhood and adolescence, while improving sexual and reproductive health and promoting active and healthy ageing for all individuals.	359 833	551 000	53	702 000	95
5. To reduce the health consequences of emergencies, disasters, crises and conflicts, and minimize their social and economic impact.	218 413	257 000	18	278 000	27
6. To promote health and development, prevent and reduce risk factors for health conditions associated with tobacco, alcohol, drugs and other psychoactive substance use, unhealthy diets, physical inactivity and unsafe sex.	162 057	206 000	27	263 000	62
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.	65 905	77 000	17	85 600	30
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.	130 456	146 000	12	161 000	23
9. To improve nutrition, food safety and food security throughout the life-course and in support of public health and sustainable development.	126 934	160 000	26	155 000	22
10. To improve health services through better governance, financing, staffing and management, informed by reliable and accessible evidence and research.	514 054	596 000	16	637 000	24
11. To ensure improved access, quality and use of medical products and technologies.	134 033	165 000	23	182 000	36
12. To provide leadership, strengthen governance and foster partnership and collaboration with countries, the United Nations system, and other stakeholders in order to fulfil the mandate of WHO in advancing the global health agenda as set out in the Eleventh General Programme of Work.	214 344	240 000	12	265 000	24
13. To develop and sustain WHO as a flexible, learning Organization, enabling it to carry out its mandate more efficiently and effectively.	542 372	590 000	9	640 000	18
TOTAL	4 227 480	4 808 000	14	5 340 600	26

WHA60.11 Medium-term strategic plan 2008–2013

The Sixtieth World Health Assembly,

Recalling resolution WHA59.4 on the Eleventh General Programme of Work 2006–2015;

Recognizing that the Eleventh General Programme of Work sets forth a global health agenda and charts the broad strategic framework and direction for the work of WHO;

Noting that the Medium-term strategic plan 2008–2013 provides a flexible multibiennial framework to guide and ensure continuity in the preparation of biennial programme budgets and operational plans over three bienniums in line with the global health agenda established in the Eleventh General Programme of Work;

Acknowledging that more specific priorities are set out in the Medium-term strategic plan, defined as strategic objectives, and in the biennial programme budget, as expected results;

Noting that the programme budgets 2010–2011 and 2012–2013 will be submitted to the Sixty-second World Health Assembly and Sixty-fourth World Health Assembly, respectively, for decision;

Welcoming the cross-cutting nature of the strategic objectives that create synergies and promote collaboration between different programmes by capturing the multiple links among determinants of health, health outcomes, health policies, systems and technologies;

Acknowledging that the Medium-term strategic plan, by moving away from narrowly defined areas of work to strategic objectives, provides a more strategic and flexible programme structure that better reflects the needs of countries and regions, and facilitates more effective coordination and collaboration across the Organization and with Member States, organizations of the United Nations system and other stakeholders,

1. ENDORSES the Medium-term strategic plan 2008–2013;
2. CALLS UPON Member States to identify their role and actions to be taken in order to achieve the strategic objectives contained in the Medium-term strategic plan;
3. INVITES concerned organizations of the United Nations system, international development partners, and agencies, international financial institutions, nongovernmental organizations and private-sector entities to consider their contribution in supporting the strategic objectives contained in the Medium-term strategic plan;
4. DECIDES to review the Medium-term strategic plan 2008–2013 every two years in conjunction with the programme budget, with a view to revising the Medium-term strategic plan, including its indicators and targets, as may be necessary;
5. REQUESTS the Director-General:
 - (1) to use the Medium-term strategic plan in providing strategic direction for the Organization during the period 2008–2013 in order to advance the global health agenda contained in the Eleventh General Programme of Work;
 - (2) to use the Medium-term strategic plan to guide preparation of the programme budgets 2008–2009, 2010–2011 and 2012–2013 and operational plans through each biennium;

- (3) to collaborate with concerned organizations of the United Nations system, international development partners and agencies, international financial institutions, nongovernmental organizations and private-sector entities in implementing the Medium-term strategic plan;
- (4) to recommend to the Health Assembly through the Executive Board, in conjunction with the programme budgets 2010–2011 and 2012–2013, revisions to the Medium-term strategic plan as may be necessary;
- (5) to report to the Sixty-second World Health Assembly through the Executive Board at its 124th session on implementation of this resolution, and to report biennially thereafter on progress.

(Ninth plenary meeting, 21 May 2007 –
Committee A, second report)
