

Report on financial and administrative implications for the Secretariat of resolutions proposed for adoption by the Executive Board or Health Assembly

1. Resolution Child injury prevention

2. Linkage to programme budget

Strategic objective:

3. To prevent and reduce disease, disability and premature death from chronic noncommunicable diseases, mental disorders, violence and injuries and visual impairment.

Organization-wide expected result:

3.1 Advocacy and support provided to increase political, financial and technical commitment in Member States in order to tackle chronic noncommunicable diseases, mental and behavioural disorders, violence, injuries and disabilities together with visual impairment, including blindness.

3.2 Guidance and support provided to Member States for the development and implementation of policies, strategies and regulations in respect of chronic noncommunicable diseases, mental and neurological disorders, violence, injuries and disabilities together with visual impairment, including blindness.

3.3 Improvements made in Member States' capacity to collect, analyse, disseminate and use data on the magnitude, causes and consequences of chronic noncommunicable diseases, mental and neurological disorders, violence, injuries and disabilities together with visual impairment, including blindness.

3.5 Guidance and support provided to Member States for the preparation and implementation of multisectoral, population-wide programmes to promote mental health, and to prevent mental and behavioural disorders, violence and injuries, together with hearing and visual impairment, including blindness.

3.6 Guidance and support provided to Member States to improve the ability of their health and social systems to prevent and manage chronic noncommunicable diseases, mental and behavioural disorders, violence, injuries and disabilities together with visual impairment, including blindness.

<p align="center">(Briefly indicate the linkage with expected results, indicators, targets, baseline)</p> <p>The resolution provides a framework that will contribute to the achievement of the expected results in terms of the planned indicators, targets and baseline.</p>
<p>3. Budgetary implications</p> <p>(a) Total estimated cost for implementation over the life-cycle of the Secretariat's activities requested in the resolution (estimated to the nearest US\$ 10 000, including staff and activities).</p> <p>It is estimated that this resolution will have a life-cycle of 10 years (2011–2021). The estimated cost of the Secretariat's activities in support of implementation is US\$ 10 million.</p> <p>(b) Estimated cost for the biennium 2010–2011 (estimated to the nearest US\$ 10 000 including staff and activities, and indicating at which levels of the Organization the costs will be incurred, identifying specific regions where relevant)</p> <p>If the resolution is adopted by the Health Assembly in May 2011, the estimated cost during the biennium 2010–2011 of the relevant Secretariat activities would be US\$ 500 000. It would be incurred at all levels of the Organization.</p> <p>(c) Is the estimated cost noted in (b), included within the existing approved Programme budget for the biennium 2010–2011?</p> <p>Yes.</p>
<p>4. Financial implications</p> <p>How will the estimated cost noted in 3(b) be financed (indicate potential sources of funds)?</p> <p>Existing extrabudgetary sources are insufficient to support this cost fully. The Secretariat will investigate additional sources of funding.</p>
<p>5. Administrative implications</p> <p>(a) Implementation locales (indicate the levels of the Organization at which the work will be undertaken, identifying specific regions where relevant).</p> <p>All WHO regions and countries.</p> <p>(b) Can the resolution be implemented by existing staff? If not, please specify in (c) below.</p> <p>No.</p> <p>(c) Additional staffing requirements (indicate additional required staff – full-time equivalents – by levels of the Organization, identifying specific regions where relevant and noting necessary skills profile).</p> <p>At headquarters, an additional staff member would be required at P.4 level to coordinate follow-up activities.</p> <p>(d) Time frames (indicate broad time frames for implementation of activities).</p> <p>2011–2021.</p>

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