Evaluation: annual report

1. The Executive Board approved the amended WHO evaluation policy at its 143rd session in 2018.¹ The policy requires the Secretariat to report annually to the Executive Board on progress in the implementation of evaluation activities. The present annual report: (i) provides information on the progress made in implementing the WHO evaluation policy, including the Organization-wide evaluation workplan for 2020–2021;² and (ii) documents how evaluations inform policy and decision-making.

PROGRESS MADE BY THE SECRETARIAT IN IMPLEMENTING THE EVALUATION POLICY

Strengthening the capacity to implement the corporate³ evaluation function

2. The Evaluation Office continues to implement the framework for strengthening evaluation and organizational learning in WHO⁴ presented to the Programme, Budget and Administration Committee of the Executive Board at its twenty-first meeting in January 2015.⁵ The framework has six key action areas: (i) establishing an enabling environment and governance; (ii) evaluation capacity and resources; (iii) evaluation workplan, scope and modalities; (iv) evaluation recommendations and management response; (v) organizational learning; and (vi) communicating evaluation work.

3. Regarding establishing an enabling environment and governance, the independent Evaluation Office is actively engaged in both corporate evaluations and providing support to decentralized evaluations. With regard to evaluation capacity and resources, both corporate and decentralized evaluations are supported by external expertise, including from a roster of prequalified evaluation experts; and the engagement of regional and cluster focal points of the Global Network on Evaluation in ongoing corporate and decentralized evaluations has enabled greater coordination of evaluation activities at the three levels of the Organization. The ongoing best-in-class study of WHO accountability/business integrity functions is expected to provide further guidance on the budget and resourcing for the Evaluation Office.

¹ Decision EBl43(9) (2018).
² Document EBl46/38, Annex, approved by the Executive Board at its 146th session; see also document EBl46/2020/REC/2, summary records of the third meeting, section 3.
³ Corporate or centralized evaluations are evaluations that are commissioned or conducted by the WHO Evaluation Office.
⁵ Document EBl36/38, noted by the Executive Board at its 136th session; see also document EBl36/2015/REC/2, summary records of the fourteenth meeting, section 4.
4. With regard to the workplan, scope and modalities, the workplan for 2020–2021, which incorporates both the corporate and decentralized planned evaluations, was shared with senior management, discussed with the Independent Expert Oversight Advisory Committee, and reviewed and approved by the Executive Board at its 146th session.¹

5. As for the action areas on evaluation recommendations and management response and organizational learning, the findings and recommendations of completed corporate and decentralized evaluations are continuously being tracked² in order to improve performance and inform key decision-making and planning processes. In recognition of the importance of these areas, a Senior Adviser for Organizational Learning was appointed in July 2020 to ensure follow-up on implementation of recommendations and strengthen organizational learning. Paragraphs 37–44 below provide concrete examples of how evaluations have informed policy- and decision-making.

6. For communicating evaluation work, the webpage of the Evaluation Office³ is regularly updated with evaluation reports and management responses as soon as they become available. Its layout is currently under review to ensure user-friendliness. In addition, a regular newsletter, Evaluation matters, is issued. Furthermore, the Evaluation Office provides briefings on ongoing and completed evaluations to Member States and internal stakeholders. It also organizes webinars for the regional and cluster focal points of the Global Network on Evaluation to share findings of corporate evaluations. Briefings on the evaluation function are also frequently provided, including induction courses for senior management, heads of WHO country offices, and other staff.

7. The Evaluation Office is currently facilitating six reviews by the Joint Inspection Unit of the United Nations, namely: (i) United Nations system support to landlocked developing countries to implement the Vienna Programme of Action; (ii) policies, measures, mechanisms and practices to prevent and address racism and racial discrimination in the United Nations system; (iii) business continuity policies and practices in United Nations system organizations; (iv) management of implementing partners in organizations of the United Nations system; (v) internal pre-tribunal stage appeal mechanisms available to staff members in the United Nations system organizations; and (vi) accountability frameworks in the United Nations system organizations.

8. The Director-General’s report to the Programme, Budget and Administration Committee of the Executive Board at its thirty-fourth meeting in May 2021 on the Reports of the Joint Inspection Unit⁴ provides further details of the implementation of recommendations related to Joint Inspection Unit reviews issued during the period October 2019 to September 2020.

9. WHO is an active member of the United Nations Evaluation Group and participates regularly in its meetings of heads of evaluation offices and its various task forces (in particular the working groups on human rights and gender equality, the Sustainable Development Goals, policy evaluation, and the interest groups on humanitarian evaluation and decentralized evaluation). WHO continues to participate

¹ Document EB146/38, Annex, approved by the Executive Board at its 146th session; see also document EB146/2020/REC/2, summary records of the third meeting, section 3.


⁴ Document EBPBAC34/5.
in the Inter-Agency Humanitarian Evaluation Steering Group,¹ which promotes collective accountability for results in humanitarian settings by ensuring that the lessons generated from evaluations of humanitarian action are captured and used, and by collaborating on inter-agency evaluations commissioned by the Inter-Agency Standing Committee of which WHO is a member.

10. Beyond its main workplan focusing on the evaluation of WHO’s work, the Evaluation Office also partners with evaluation counterparts in other entities, participating in joint evaluations in areas of shared substantive and strategic interest. In addition to contributing to both accountability and strategic learning across the system, these evaluations also represent an example of how WHO seeks to meet its organizational commitments in a cost-efficient, whole-of-system manner wherever opportunities present themselves. Examples of how the Evaluation Office actively contributed to joint evaluation in 2020 included:

(a) serving as a member of the management group of, and providing financial support for, the inter-agency humanitarian evaluation of the response to cyclone Idai in Mozambique, the report of which was delivered in July 2020;² and

(b) leading a 12-member evaluation coalition comprised of the heads of evaluation (or a designated representative) of the signatory agencies to the Global Action Plan for Healthy Lives and Well-being for All to conduct the joint evaluability assessment of the Global Action Plan, the report of which was delivered in July 2020.³ (See also paragraphs 32–36 below).

11. In response to resolution WHA73.1 (2020), the Independent Panel for Pandemic Preparedness and Response was established by the Director-General in July 2020 and the Evaluation Office supported this process, acting as interim secretariat for the Panel during the early phase.

12. At its 147th session (resumed) in November 2020, the Executive Board, based on guidance from its Programme, Budget and Administration Committee, proposed the inclusion of an evaluation of the WHO response to the COVID-19 pandemic in the evaluation workplan for 2021, while ensuring that this does not duplicate ongoing efforts in this regard.⁴ The Evaluation Office will therefore await the outcomes of, and guidance from, the work of: (i) the Independent Panel for Pandemic Preparedness and Response; (ii) the International Health Regulations Review Committee; and (iii) the Independent Oversight and Advisory Committee for the WHO Health Emergencies Programme before proceeding

¹ The Inter-Agency Humanitarian Evaluation Steering Group is chaired by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) and comprises the evaluation directors of FAO, the International Federation of Red Cross and Red Crescent Societies, UNHCR, UNICEF, WFP and WHO with the Active Learning Network for Accountability and Performance in Humanitarian Action, the International Council of Voluntary Agencies and UNFPA as observers.


⁴ Document EB147/2, para. 32; see also document EB147/2020/REC/1, provisional summary record of the first meeting (resumed session), section 3.
with an evaluation in 2021. In the meantime, the Evaluation Office is currently actively engaged with other bodies in the evaluation of the broader COVID-19 response, including:

(a) the evaluation of the COVID-19 Solidarity Response Fund which the Evaluation Office is co-managing together with the UN Foundation, the main fiduciary partner to this significant resource mobilization effort in support of the COVID-19 response;

(b) the system-wide evaluation of the United Nations COVID-19 Response and Recovery Multi-Partner Trust Fund being led by the Executive Office of the United Nations Secretary-General and supported by members of the United Nations Evaluation Group;

(c) the evaluation of the inter-agency COVID-19 response, which has been commissioned by the Inter-Agency Standing Committee and is being coordinated by the United Nations Office for the Coordination of Humanitarian Affairs and co-managed by the Inter-Agency Humanitarian Evaluation Steering Group, focusing on issues of inter-agency coordination in the health and socioeconomic response to COVID-19; and

(d) participation in the OECD-led COVID-19 Global Evaluation Coalition which aims to encourage information-sharing and coordination among its members (that is, United Nations entities, bilateral and multilateral donors, nongovernmental organizations and others) in their COVID-19-related evaluation work and thus minimize duplication and maximize complementarity of efforts.

13. The Evaluation Office is also represented on the Evaluation Reference Group for the synthesis of United Nations system evaluations of SDG 6 (Ensure availability and sustainable management of water and sanitation for all), led by the UNICEF Evaluation Office, the purpose of which is to make evaluative evidence on SDG 6 available for learning and decision-making, and to contribute to the wider body of knowledge on progress towards the achievement of SDG 6 targets.

ORGANIZATION-WIDE EVALUATION WORKPLAN AND OTHER ONGOING WORK

14. The approved evaluation workplan for 2020–2021 provides the basis for current activities. The Annex to this report provides an overview of the status as at March 2021 of the corporate and decentralized evaluations included in the evaluation workplan for 2020–2021 and other ad hoc corporate evaluations that the Evaluation Office was requested to conduct during the biennium.

Corporate evaluations

15. Two roll-over corporate evaluations on the approved evaluation workplan for 2020–2021 were completed and executive summaries of the evaluation reports were presented to the Executive Board at its 146th session in February 2020:¹ (i) initial evaluation of the Framework of Engagement with non-State actors; and (ii) review of 40 years of implementation of primary health care at country level.

¹ Documents EB146/38, EB146/38 Add.1 and EB146/38 Add.2.
16. The following is an update, since the last report to the Executive Board at its 147th session (resumed) in November 2020,\(^1\) on progress of evaluations on the Organization-wide evaluation workplan for 2020–2021 and other ad hoc corporate evaluations.

17. The Evaluation Office completed a formative evaluation of the global strategy and action plan on ageing and health (2016–2020). The purpose of the evaluation was to draw lessons learned from implementation of the global strategy and action plan in order to inform the WHO Secretariat on the developments of the Decade of Healthy Ageing 2020–2030. The evaluation report was delivered in June 2020.\(^2\)

18. Building on the 2017 preliminary evaluation of the global coordination mechanism on the prevention and control of noncommunicable diseases, the objective of the final evaluation of this mechanism was to assess the effectiveness of the mechanism, its added value and its continued relevance to the achievement of the 2025 voluntary global targets, including its possible extension. The scope of the final evaluation involved an assessment of the results derived from the implementation of the workplan covering the period 2018–2019 as well as the workplan for 2020. It also considered the lessons learned and the extent to which the recommendations of the preliminary evaluation were actioned, and to what effect. The report of this evaluation was delivered in November 2020.\(^3\) The executive summary of the report was presented to the 148th session of the Executive Board in January 2021\(^4\) and is presented to the Seventy-fourth World Health Assembly in document A74/10 Add.2.

19. The purpose of the mid-point formative evaluation of the global action plan for the prevention and control of noncommunicable diseases 2013–2030 was to assess the accomplishments of the six objectives of the global action plan, as well as the lessons learned throughout the implementation of the global action plan in Member States, by international partners and at the three levels of the Organization. The evaluation: documented successes, challenges and gaps in the implementation of the global action plan since 2013; provided lessons learned and strategic recommendations to improve the implementation of the global action plan until 2030; and provided inputs for the next WHO global status report on noncommunicable diseases and other relevant reports. The report of this evaluation was delivered in November 2020.\(^5\) The executive summary of the report was presented to the 148th session of the Executive Board in January 2021\(^6\) and is presented to the Seventy-fourth World Health Assembly in document A74/10 Add.1.

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\(^1\) While the report was discussed at the 147th session of the Executive Board (resumed) in November 2020, it was issued on 12 May 2020.


\(^4\) Document EB148/7 Add.2.


\(^6\) Document EB148/7 Add.1.
20. A review of the WHO Centre for Health Development (WHO Kobe Centre) was undertaken by an external task force, supported by the Evaluation Office, to facilitate the alignment of its objectives with the Thirteenth General Programme of Work 2019–2023 and related transformation processes. Since its establishment in 1995, the WHO Kobe Centre has been supported by the Kobe Group through a Memorandum of Understanding. The review covered the time frame since the start of the third Memorandum of Understanding with the Kobe Group (2016–2026) and the related WHO Programme budgets 2016–2017 and 2018–2019. The report and recommendations of the task force were submitted to the Director-General in October 2020.

21. A formative evaluation of WHO’s work with collaborating centres was also conducted by the Evaluation Office at the request of the Chief Scientist, the purpose of which was to examine the relevance, effectiveness and efficiency of the programmatic contribution of collaborating centres to the achievement of WHO objectives and expected results. The evaluation documented successes, challenges and best practices and provided lessons learned and recommendations for future use by management to inform policy and decision-making. The evaluation report was delivered in May 2020.

22. The report of the Myanmar country programme evaluation was finalized in February 2021. The main purpose of country programme evaluations is to identify key achievements, challenges and areas for improvement, and to document best practices and innovations of WHO’s work in a given country. In the medium term, such evaluations are expected to generate a body of evidence that sheds light on systemic issues that require attention at the corporate level. In the case of country programme evaluations, the need for organizational learning has acquired particular emphasis in light of the Organization’s explicit commitment to achieving impact at country level – and to harnessing evidence in helping achieve such impact – in the Thirteenth General Programme of Work 2019–2023. It is within this context that the evaluation workplan for 2020–2021 includes a synthesis of country programme evaluations to generate lessons on key achievements as well as recurrent issues that could be used by WHO management to improve corporate processes and guidance. This synthesis report will be available during the second quarter of 2021.

23. Due to the travel restrictions as a result of the COVID-19 pandemic, it has not been possible to conduct further country programme evaluations to date this biennium. Nor has it been possible to conduct other evaluations that have country visits as an essential methodological component, such as the review of WHO’s normative functions at country level and the evaluation of the utilization of Special Service Agreements.

24. An independent evaluation of WHO transformation is being conducted to assess progress of WHO transformation to date and the status of implementation of the WHO Transformation Plan and Architecture. The evaluation will: (a) document key achievements, best practices, challenges, gaps, and areas for improvement in the implementation of the WHO Transformation thus far; (b) assess whether change management issues and barriers to implementation have been appropriately considered and addressed; and (c) make recommendations as appropriate on the way forward to enable the full and consistent implementation of the WHO Transformation. The evaluation report will be delivered during

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1 The Kobe Group is composed of the Hyogo Prefecture, the City of Kobe, the Kobe Chamber of Commerce and Industry and Kobe Steel, Ltd.

the second quarter of 2021 and the Evaluation Office will submit an executive summary of this evaluation as an Addendum to this report.

25. An evaluation of the integration of gender, equity and human rights in the work of the Organization is also ongoing with the overall objective of assessing the extent to which gender, equity and human rights considerations have been meaningfully integrated into the work of WHO at all levels of the Organization, how effective such integration has been in contributing to health outcomes at country level, and how optimally the Organization has operated (both internally and with key partners) toward the achievement of its objectives in this area. Toward this end, the evaluation will document successes, challenges and best practices, and will provide lessons learned and recommendations for future use by management to inform relevant decision-making processes. With the Organization only embarking on its third year of the implementation of the Thirteenth General Programme of Work, however, and with 10 years remaining in the 2030 Agenda for Sustainable Development, the evaluation will be primarily formative in nature: its ultimate purpose will be to facilitate internal discussion and decision-making for WHO to most meaningfully integrate these critical areas into the work of the Organization moving forward. The evaluation report is expected to be delivered during the second quarter of 2021.

Decentralized evaluations

26. The Evaluation Office has also been providing technical backstopping and quality assurance for decentralized evaluations, including through its participation in evaluation management groups, as appropriate. As successive independent reviews of the evaluation function in WHO have identified its decentralized evaluation practice as an area in need of strengthening, the Evaluation Office is currently elaborating a decentralized evaluation framework in consultation across the Organization.

27. In the African Region, evaluation timelines were revised as a result of the COVID-19 pandemic. The evaluation of the HIV/AIDS framework for action in the WHO African Region, 2016–2020 is expected to be completed by the first quarter of 2021. The evaluation report is currently being reviewed by the technical team to agree on the strategies that would be used in implementing the recommendations. The mid-term evaluation of the project funded by Gavi, the Vaccine Alliance in South Sudan is being revised given that the project was extended to December 2021. The new timeline for the evaluation will be decided with the donor in the second quarter of 2021.

28. In the Region of the Americas, consistent with PAHO’s ongoing commitment to enhanced accountability and transparency, during 2020 the evaluation function was revised to strengthen organizational learning. The PAHO Evaluation Unit is responsible for establishing a framework that provides guidance, quality assurance, technical assistance and expert support to the PAHO evaluation function. Due to the COVID-19 pandemic most evaluations planned for 2020 in the Americas Region were postponed. Specific PAHO evaluations in 2020 included the already completed evaluation of the Integrated Health Systems in Latin America and the Caribbean Project (IHSCLAC) and the evaluations ongoing/carry forward to 2021: the evaluation of the Research Function at PAHO, the evaluation of Human Resources for Health and the final evaluation of the FAO/PAHO/UNDP Joint Programme – Integrated rural development in Ixil and Cuielco in Guatemala.

1 In approving the Organization-wide evaluation workplan for 2020–2021, the Executive Board at its 146th session, requested the Evaluation Office to also conduct an evaluation of the integration of gender, equity and human rights in the work of the Organization (see document EB146/3 and also document EB146/2020/REC/2, summary records of the third meeting, section 3).
29. The Regional Office for the Eastern Mediterranean commissioned an independent evaluation of WHO’s Whole of Syria response to provide a comprehensive, independent and robust assessment of WHO’s emergency response in Syria. The evaluation report is expected to be delivered during the second quarter of 2021. In addition, the Regional Director has established an expert group to undertake a Mid-term Push Forward Review of the regional vision: Vision 2023. The review is expected to be completed by June 2021 and the results will be presented to the Regional Committee for the Eastern Mediterranean in October 2021.

30. The South-East Asia Region continued to focus on implementing its regional evaluation workplan for 2018–20191 as some evaluations were rolled over to 2020-2021. The evaluation of national immunization technical advisory groups in the WHO South-East Asia Region and the evaluation of implementation of Regional Flagship Areas in the WHO South-East Asia Region 2014–2018, which were delayed due to the COVID-19 pandemic, were completed in 2020. The evaluation of adaptation and use of WHO guidelines on reproductive, maternal and newborn health in the WHO South-East Asia Region was also completed.2 Furthermore, the South-East Asia Region is revising its regional framework for strengthening evaluation for learning and development based on the lessons learned in the Region in order to provide robust guidance to strengthen regional and country-level evaluations.

31. In the Western Pacific Region, a review is being undertaken of progress towards implementing the regional vision: For the future: Towards the healthiest and safest Region. For the future was endorsed by the Regional Committee for the Western Pacific in October 2019 as the vision for WHO work with Member States and partners in the Region and it is the Region’s implementation plan for the WHO Thirteenth General Programme of Work 2019–2023.

APPLYING AN EARLY EVALUATIVE LENS TO PROMOTE RAPID LEARNING AND COURSE CORRECTION

Joint evaluability assessment of the Global Action Plan for Healthy Lives and Well-being for All

32. In 2019, the Global Action Plan for Healthy Lives and Well-being for All (SDG3 GAP) was agreed by 12 global organizations engaged in health, development and humanitarian response that are working to advance the targets of the health-related Sustainable Development Goals.3 The partnership is intended to more effectively leverage the 12 agencies’ individual mandates, comparative advantages and capacity for enhanced collective results at country level.

33. In early 2020 a joint evaluability assessment was launched to foster early learning among the signatory agencies on the extent to which the SDG3 GAP partnership has the elements in place to achieve – and demonstrate – the results they wish to achieve together, and thus help improve their coordination, collaboration and overall management toward this end. In this way, the ultimate aim of the assessment was to help the signatory agencies maximize the likelihood that the partnership will

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1 Document SEA/RC70/6-INF.DOC.2, subsequently updated to include three additional evaluations under family health, gender and life course.

2 See all Regional evaluation reports at: https://www.who.int/southeastasia/se-evaluation-reports (accessed 16 March 2021).

3 In February 2021, the partnership expanded to 13 members to include the International Labour Organization (ILO). The other partners are: Gavi, the Vaccine Alliance, the Global Financing Facility, the Global Fund to Fight AIDS, Tuberculosis and Malaria, UN Women, UNAIDS, UNDP, UNFPA, UNICEF, Unitaid, WFP, WHO and the World Bank.
succeed in supporting countries to achieve the ambitious objectives of the health-related Sustainable Development Goals, especially Goal 3.

34. The exercise was overseen by a steering group comprised of the heads of evaluation (or their designated representatives) of all 12 signatory agencies, with WHO serving as lead agency. The evaluability assessment report, issued in July 2020, provided several critical recommendations to help guide the partnership in a more results-oriented direction. The response by the partners was swift, decisive and positive: in an unprecedented move for such a large and diverse multi-stakeholder partnership with no shared governance mechanism, in September 2020 the 12 signatory agencies issued a joint management response, endorsed by their respective heads of agencies, in which they accepted all of the report’s recommendations and produced an action plan for their implementation.

35. In the months since then, the partners have made significant progress in implementing the recommendations. They have jointly reviewed and revisited the core purpose and shared objectives of the partnership; leading to a positioning paper which more sharply articulates what the partners are precisely trying to achieve together, a detailed theory of change that reinforces these shared objectives and serves as a tool for managing the partnership toward its members’ shared goals, and a monitoring framework establishing guideposts for assessing the partners’ progress. Progress has also been made in strengthening accountability within the partnership and reinforcing inter-linkages among its various thematic working groups. Finally, discussions on the resourcing of the partnership began in early 2021 and are ongoing.

36. The joint evaluability assessment not only provides an example of the value that WHO-led evaluations can bring to the work of the Organization and its partners; it also highlights the value that the evaluation lens can offer at the very earliest stages of an organizational initiative – far earlier than when standard evaluations are typically undertaken – when it can raise critical issues that need to be addressed before they become more entrenched, harder-to-address problems later on. Another positive by-product of the exercise is the evaluation partnership that has emerged through it. With the 2030 Agenda underscoring the need for strengthened evaluation partnerships in the decade, the assessment served as a precedent for future evaluation work on the Sustainable Development Goals and beyond – one that is being adapted by other agencies. A joint evaluation of the SDG3 GAP is planned for 2023.

FROM EVALUATIONS TO POLICY AND DECISION-MAKING

37. In accordance with the norms of the United Nations Evaluation Group, in commissioning and conducting an evaluation there should be a clear intention to use the resulting analysis, conclusions or recommendations to inform decisions and actions. The utility of evaluation is manifest through its use in making relevant and timely contributions to organizational learning. In response to the interest of Member States to be kept informed about how evaluations are taken forward, the Evaluation Office produces an annual report which provides this information (Report on corporate and decentralized evaluations: findings, recommendations, actions and learning). This section captures some specific

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examples of how the lessons learned from corporate evaluations have informed policy and decision-making in the Organization.

38. The Thirteenth General Programme of Work 2019–2023 is a notable example of the utility of evaluation, as relevant lessons from corporate evaluations completed in 2017 were taken into account in its elaboration, in particular, the evaluation of WHO reform, third stage (2017), the evaluation of the Secretariat’s contribution to the health-related Millennium Development Goals (2017) and the evaluation of WHO’s normative function (2017).

**Evaluation of the process for the election of the Director-General (2018)**

39. The evaluation of the process for the election of the Director-General was conducted in an open meeting held during the 142nd session of the Executive Board in January 2018. The key findings considered by the Executive Board were related to the code of conduct, the web forum, the candidates’ forum, the selection/voting process, the procedure for nominations of candidates by the Executive Board, the voting process at the Health Assembly, the role of the Secretariat and the overall election process.\(^1\) As a result, the Secretariat was requested to bring forward a proposal for adjustments to the election process for the Director-General and any necessary revisions to the code of conduct.\(^2\) In response to the recommendations of the evaluation and following consultations among Member States,\(^3\) adjustments and clarifications in relation to the election process have been made with respect to the code of conduct, the candidates’ forum, the procedure for nomination of candidates by the Executive Board, the length of the electoral process, the voting system to be used for the nomination and appointment of candidates for the post of Director-General and the organization of the election process.\(^4\) Adjustments and clarifications include:

(a) code of conduct:

(i) the need for Member States and candidates to promptly disclose campaign activities together with the amount and source of funding of such activities, as well as for Member States proposing persons for the post of Director-General to promptly disclose grants or aid funding to other Member States during the campaign period and the previous two years;

(ii) the inclusion of the provision that, while candidates should not combine their official travel with campaigning activities, candidates for the post of Director-General on official travel may participate in the web forum, the candidates’ forums and in campaign activities on the margins of regional committee sessions; and

(iii) the posting by the Secretariat on the WHO website of information on all candidates within the deadline provided in the second paragraph of Rule 62 of the Rules of Procedure of the Executive Board;

(b) candidates’ forum: in future two candidates’ forums will be convened: one preceding the session of the Board at which candidates will be nominated for the post of Director-General and

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\(^1\) See document EB142/26.

\(^2\) Decision EB142(8) (2018).

\(^3\) See document EB146/39.

one prior to the session of the Health Assembly at which the appointment will take place. The first candidates’ forum will consist of interviews with the candidates and the second will consist of a more interactive panel discussion between the candidates and Member States and Associate Members attending the forum; and both forums will be publicly broadcast. No candidates’ forum will be held in the case of only one person being proposed for the post of Director-General;

(c) procedure for nomination of candidates by the Executive Board: interviews of candidates shortlisted for the post of Director-General should be limited to 60 minutes, divided between an oral presentation of no more than 20 minutes and a question-and-answer session of no more than 40 minutes; and the text of Rule 7 of the Rules of Procedure of the Executive Board has been amended for the interviews to take place at a public meeting of the board and therefore be broadcast;

(d) length of the electoral process: in future, the announcement of names of candidates (as well as the dispatch of all proposals, curricula vitae and supporting information received within the required deadline) will be postponed until after the closure of the last Regional Committee session before the session of the Board at which the nomination will take place, provided that this is at least 10 weeks before the opening of that session. In addition, the beginning of Director-General’s contract will be set for mid-August of the year of appointment, and the contract of the incumbent Director-General has been amended accordingly;

(e) voting system: it was decided to continue conducting the nomination and appointment of the Director-General by means of a paper-based secret ballot vote as currently provided for in the Rules of Procedure of the Executive Board and World Health Assembly, respectively;

(f) unit with operational independence: the Director-General was requested to take appropriate steps to ensure that the organization of the election is conducted at arm’s length from any internal candidates by establishing, within the Secretariat, a unit with operational independence.

Evaluation of the WHO Neglected Tropical Diseases Programme (2019)\(^1\)

40. The key recommendations of the evaluation of the WHO Neglected Tropical Diseases Programme included: (i) the need for an updated road map for neglected tropical diseases; (ii) consideration of further integration across the spectrum of neglected tropical diseases within the programme; and (iii) the need for a stronger overall integrated programme management function.

41. The lessons learned from the evaluation have informed the reorganization of the department into a more function- and platform-oriented structure to facilitate integration across neglected tropical diseases, and the development of the new road map for neglected tropical diseases 2021–2030 which was launched in January 2021. As an example of ongoing efforts to strengthen intersectoral cooperation on neglected tropical diseases, a brief on “Mental health of people with neglected tropical diseases – towards a person-centred approach” was jointly released with the WHO Department of Mental Health and Substance Abuse in 2020, and the 2015 water, sanitation and hygiene and neglected tropical diseases global strategy is currently being updated as a companion document to the new road map for neglected tropical diseases. Other companion documents to the new road map include a monitoring and evaluation framework and a sustainability framework, an investment case, a neglected tropical diseases research

blueprint and a brief on One Health. Finally, a programme manager is under recruitment to facilitate a stronger overall integrated neglected tropical diseases programme management function at headquarters level.

Initial evaluation of the Framework of Engagement with Non-State Actors (2019)\(^1\)

42. The Initial evaluation of the Framework of Engagement with Non-State Actors formulated six recommendations in the following areas: communications, capacity-building, proposal review mechanisms, monitoring mechanisms, knowledge exchange, and partnerships. At its thirty-first meeting in January 2020, the Programme Budget and Administration Committee of the Executive Board proposed that the Secretariat proceed promptly to implement the recommendations of the evaluation, paying particular attention to the implementation of the recommendations concerning strengthening of communications and monitoring mechanisms and the development of an engagement strategy.\(^2\)

43. As reported to Member States in January 2021,\(^3\) in order to proceed promptly with implementing the recommendations of the evaluation, the Secretariat has developed a plan, grounded in the WHO Project Management Centre of Excellence, which outlines activities to respond to the six recommendations. A Management response has also been developed and is published on the webpage of the Evaluation Office.\(^4\) Implementation has progressed significantly in the area of communications and capacity-building with tailored tools developed and training sessions conducted across the Organization. Furthermore, a monitoring and evaluation system has been established to undertake regular assessment and monitoring in order to ensure improved implementation of the Framework. In addition, the Framework of Engagement with Non-State Actors (FENSA) Proposal Review Committee has been re-established, reaffirming its role as an arbitration body and demonstrating the strong steer from senior leadership as requested by Member States. The internal network of FENSA focal points has been reactivated in order to ensure a corporate and streamlined approach to implement the Framework. Finally, the Organization at its three levels is in the process of developing an engagement strategy with non-State actors and a plan for its implementation.

Cross-cutting issues

44. As previously reported,\(^5\) a process to anchor organizational learning in the work of WHO was initiated in 2018, in which the directors of the accountability functions identify a shortlist of recurring, systemic cross-cutting issues arising from findings and recommendations from various sources, and potential root causes, and establish a list of issues to embed within ongoing workstreams with key business owners, including their incorporation in ongoing transformation efforts. Five priority issues


\(^{2}\) Document EB146/3, paragraph 57.

\(^{3}\) Document EB148/39.


\(^{5}\) Document EB147/5, paragraph 5.
were identified for follow-up action and some of the actions implemented in taking this forward are highlighted below:

(a) direct financial cooperation: as a result of strong collaboration across the three levels of the Organization, significant progress has been made in reducing the number of overdue direct financial cooperation reports (0.6% in September 2020 against 10% in 2015) and policies have been revised in relation to direct implementation and grant letters of agreement;

(b) strengthening country operations, capacities and impact: regional office-led country reviews were conducted in 2018–2019 in more than 80 countries in four WHO regions and leadership and management capacity-building and team performance initiatives were undertaken in the WHO Regional Office for Africa. In addition, the WHO Academy was launched in 2020;

(c) alignment of planning, budgets and financing: the Secretariat continues to strengthen the implementation of results-based management (including the piloting and use of a new Output Scorecard), and the value-for-money strategy agreed by Member States;

(d) resource mobilization/financing/award management: the end-to-end resource mobilization process has been substantially redesigned resulting in the elaboration of a Resource Mobilization Strategic Framework for 2019–2023 and the design of a new Contributor Engagement Management System;

(e) supply chain/procurement: improvements in supply chain management and procurement processes enabled WHO to massively scale-up its procurement activities in response to the emergence of COVID-19.

ACTION BY THE EXECUTIVE BOARD

45. The Board is invited to note the report.
## ANNEX

### STATUS OF EVALUATIONS ON THE APPROVED ORGANIZATION-WIDE EVALUATION WORKPLAN FOR 2020–2021, AS AT FEBRUARY 2021

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<thead>
<tr>
<th>Evaluation</th>
<th>Start date</th>
<th>2020 Q1</th>
<th>2020 Q2</th>
<th>2020 Q3</th>
<th>2020 Q4</th>
<th>2021 Q1</th>
<th>2021 Q2</th>
<th>2021 Q3</th>
<th>2021 Q4</th>
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<tr>
<td><strong>CORPORATE/CENTRALIZED EVALUATIONS IN APPROVED ORGANIZATION-WIDE</strong></td>
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<td><strong>EVALUATION WORKPLAN 2020-2021</strong></td>
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<td>Review of 40 years of implementation of primary health care at country level</td>
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<td>Initial evaluation of the Framework of Engagement with Non-state Actors</td>
<td>Jun-19</td>
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<td>Evaluation of a Grade 3 emergency – Inter-agency humanitarian evaluation of the response to cyclone Idai in Mozambique</td>
<td>Jul-19</td>
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<td>Country programme evaluations</td>
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<td>Mid-point evaluation of the WHO global action plan for the prevention and control of noncommunicable diseases 2013–2020</td>
<td>Oct-19</td>
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<td>Evaluation of WHO’s normative functions at country level</td>
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<td>Final evaluation of the WHO global coordination mechanism on the prevention and control of noncommunicable diseases</td>
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<td>Evaluation of the WHO Transformation</td>
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<td>Synthesis of country programme evaluations</td>
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<td>Evaluation of the integration of gender, equity and human rights in the work of the Organizationb</td>
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<td>Evaluation of the use of consultants and Agreements for Performance of Work by the Organizationb</td>
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<td>Comprehensive review of the implementation of the global action plan on antimicrobial resistance</td>
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<td>Formative evaluation of the implementation of the Research and Development Blueprint for action to Prevent Epidemics and its plan of action</td>
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<td>Evaluation of the work of 2 departments of the Regional Office for the Eastern Mediterranean: Noncommunicable Diseases and Mental Health, and Science and Information</td>
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<td>Corporate evaluation of WHO’s results-based management framework</td>
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<td>Evaluation of the utilization of Special Service Agreements</td>
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<td>Evaluation of one grade 3 emergencyc</td>
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*Statuses: Completed, Ongoing*
DECENTRALIZED EVALUATIONS IN APPROVED ORGANIZATION-WIDE EVALUATION WORKPLAN 2020–2021

<table>
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<tr>
<th>Evaluation</th>
<th>Start date(^a)</th>
<th>2020</th>
<th>2021</th>
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<tr>
<td></td>
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<td>Q1</td>
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<td>ADDED TRUNK EVAUATION</td>
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<td>Evaluation of WHO’s work with collaborating centres</td>
<td>Sept-19</td>
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<td>Review of the alignment of the work of the WHO Centre for Health Development to the WHO transformation objectives</td>
<td>Oct-19</td>
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<td>Joint evaluability assessment of the global action plan for healthy lives and well-being for all</td>
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</table>

**Q** quarter.

* The start date is included for evaluations that were carried over from the workplan for 2018–2019 and therefore started during the previous biennium. No start date for evaluations that started in 2020–2021.

\(^a\) Additional evaluations requested by the Executive Board in January 2020.

\(^b\) The Evaluation Office regularly contributes to ongoing Inter-Agency Humanitarian Evaluation Steering Group evaluations.