



WORLD HEALTH ORGANIZATION

FIFTY-EIGHTH WORLD HEALTH ASSEMBLY
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Proposed programme budget 2006-2007

Implementing the normative and statutory functions of WHO

BACKGROUND

1. Limited growth in the regular budget in recent years, together with a proposal to maintain the budget of WHO headquarters for 2006-2007 at the same levels as in the previous biennium, has prompted questions concerning the adequacy of funding to maintain normative and statutory functions.

2. The term “normative” relates to the development and promulgation of norms and standards. Most technical activities of WHO have normative elements, and these continue to be the core work of the Organization. Statutory functions are regular activities that are constitutionally required, including meetings of governing bodies, planning and budgeting, administrative functions relating to the financial and staff rules and regulations, and audit and legal functions.

WHO'S FUNCTIONS

3. Two documents currently define the functions of the Organization; the Constitution of WHO, and the General Programme of Work 2002-2005.¹

4. Article 2 of the Constitution lists 22 functions, of which some are generic in nature, for example, research, and others are programme specific, such as mental health or child health. The functions most closely identified with normative roles appear in Article 2(k) on conventions, agreements, regulations and recommendations, and Article 2(o), (s), (t), and (u) on classifications, diagnostic procedures, and establishment and promotion of international standards.

5. The General Programme of Work 2002-2005 lists six core functions, each of which has a normative component:

- articulating consistent, ethical and evidence-based policy and advocacy positions;

¹ Document GPW/2002-2005.

- managing information by assessing trends and comparing performance; setting the agenda for, and stimulating, research and development;
- catalysing change through technical and policy support, in ways that stimulate cooperation and action and help to build sustainable national and intercountry capacity;
- negotiating and sustaining national and global partnerships;
- setting, validating, monitoring and pursuing the proper implementation of norms and standards;
- stimulating the development and testing of new technologies, tools and guidelines for disease control, risk reduction, health-care management, and service delivery.

6. These core functions are required to develop, implement and monitor health policies or interventions. The stream of functions may be summarized as follows, and will be further elucidated in the process of drafting the eleventh General Programme of Work:

catalysing **research** to generate evidence for determining **policies, norms and standards**, adopted by Member States which are promoted through **advocacy and communication** in the context of **technical cooperation** (with support provided, in limited instances, for **implementation**), and progress being tracked by **monitoring, surveillance and evaluation**; all the above functions being carried out in **partnership and coordination** with Member States, communities, and other organizational partners.

7. As noted in the current General Programme of Work, normative work has often been perceived as a function implemented at headquarters, whereas technical support has been seen as the responsibility of WHO's regional and country offices. This categorization and division of responsibilities conceals a different and complex situation. In reality, all functions are necessarily carried out at all levels of the Organization. A particular function may be emphasized more at one level than another, depending on where it is best implemented. The distribution of functions also varies considerably by area of work; some have a greater emphasis on "upstream" functions such as research and framing of policy, others focus on "downstream" functions such as monitoring, surveillance and implementation.

FUNDING NORMATIVE AND STATUTORY FUNCTIONS

8. The Organization is funded from assessed and voluntary contributions.¹ The proportion of assessed contributions in the overall budget is diminishing, yet they allow for:

- relative predictability in amount and timing, which is particularly important for financing statutory functions
- increased efficiency in management, as they have lowest overheads for resource mobilization and reporting

¹ Assessed contributions, together with miscellaneous income, comprise the regular budget.

- complete alignment with the Programme budget
- pooling of resources and the unspecified nature of assessed contributions avoids the perception of any conflict of interest or any influence with regard to important normative functions.

They also demonstrate the shared responsibility of all Member States for financing the Organization.

9. Voluntary contributions come with varying degrees of specificity concerning the terms of their use, depending on the policy of the donor. Some donors make unspecified voluntary contributions to WHO. Such contributions are fully reconcilable with the Programme budget and provide greater flexibility than specified contributions. Currently, only a small proportion of voluntary contributions are unspecified. The programme support costs levied on voluntary contributions are pooled and used to support the additional administrative costs associated with the management of such contributions. They have similar flexibility and provide some of the same advantages as assessed contributions.

10. In the early years of WHO, all functions were financed from the regular budget, as this was the only source of funding. The introduction of voluntary contributions came to be associated with technical cooperation and development activities, and led to a somewhat artificial distinction, with the regular budget often viewed as limited to funding normative and statutory activities. In reality, normative and statutory functions are not funded solely from the regular budget. The impact of limited regular budget growth combined with rising costs and currency fluctuations has meant that in real terms, the purchasing power of WHO's regular budget is much reduced compared with the past. As the volume of work relating to normative and statutory functions continues to grow, voluntary contributions, where appropriate, are increasingly used for carrying out some normative and statutory functions. As WHO becomes increasingly dependent on voluntary contributions, the development of a long-term financing strategy is of great importance.

11. In order to assure impartiality, normative and statutory functions are funded to the greatest extent possible by the regular budget and unspecified voluntary contributions, including programme support costs. Some differences exist concerning funding of specific functions:

- framing of policy related to norms and standards is typically carried out through meetings of expert committees, study groups and other scientific and expert groups; such meetings are usually funded from the regular budget or unspecified voluntary contributions; specified voluntary contributions are occasionally used
- drafting of conventions, agreements and regulations which involve intergovernmental processes (such as the WHO Framework Convention on Tobacco Control, and revision of the International Health Regulations), are financed primarily from the regular budget, with some funds from programme support costs used to cover administrative functions
- meetings of governing bodies and audit functions are financed from the regular budget or with funds available from programme support costs, as they cannot be subject to uncertainty. Although most administrative functions are financed from the regular budget, some are supported through unspecified voluntary contributions and programme support costs. As the costs of statutory functions have increased, while the regular budget has remained static, there is an increasing difficulty in financing them adequately.

MEASURES TO MAINTAIN THE INTEGRITY OF NORMATIVE AND STATUTORY FUNCTIONS

12. The following steps are being taken to assure the integrity of normative and statutory functions:

- a long-term financing strategy is to be drawn up in consultation with Member States
- the Organization has established mechanisms to deal with the risk of conflict of interest and undue influence when external parties are involved in activities of the Organization, which are also relevant for normative activities funded by voluntary contributions, and include declarations of interest by external experts and review of contractual arrangements by the Office of the Legal Counsel
- an inventory of normative activities within WHO will be carried out as a contribution to preparation of the eleventh general programme of work and a medium-term strategic plan and budget, and will be made available to Member States. The inventory will set out ways in which normative work is implemented, at which level of the Organization, and indicative costs. In the Proposed programme budget 2006-2007 it is expected that the necessary normative and standard-setting work of the Organization will be able to be completed in accordance with the expected results outlined
- a review of strategic direction and competencies will be undertaken in each area of work during 2005 in order to ensure that planned activities are matched to products at the appropriate level of the Organization, that staff have the competencies required to achieve the expected results, and that use of the available budget is prioritized.

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