FIFTY-NINTH WORLD HEALTH ASSEMBLY Provisional agenda item 19

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Collaboration within the United Nations system and with other intergovernmental organizations, including United Nations reform process

Report by the Secretariat

INTRODUCTION

1. The present report provides an overview of WHO's collaboration within the United Nations system and with other intergovernmental organizations. It includes an interim report on progress in implementing resolution WHA58.25 on the United Nations reform process and WHO's role in harmonization of operational development activities at country level.

UNITED NATIONS GENERAL ASSEMBLY SIXTIETH SESSION AND UNITED NATIONS ECONOMIC AND SOCIAL COUNCIL

Gathered in New York in September 2005 as part of a high-level plenary meeting of the United Nations General Assembly, world leaders adopted the 2005 World Summit Outcome, in which they resolved to continue finding ways to implement the outcome of the Millennium Summit, including in the area of the strengthening of the United Nations. Among the health-related provisions of the resolution are quick-impact initiatives, such as the distribution of malaria bednets and antimalarial treatments, and, where appropriate, the elimination of user fees for health-care services. In relation to HIV/AIDS, malaria, tuberculosis and other health issues, world leaders also committed themselves to increasing investment in order to improve health systems in developing countries and in countries with economies in transition; to developing and implementing a package for HIV prevention, treatment and care; to fully implementing all commitments established by the Declaration of Commitment on HIV/AIDS; to ensuring the full implementation of their obligations under the International Health Regulations (2005); to working actively to implement the "Three Ones" principles; and to achieving universal access to reproductive health by 2015. Focusing on the special needs of Africa, world leaders resolved to provide assistance in order to come as close as possible to achieving the goal of universal access by 2010 to HIV/AIDS treatment in African countries. Three further resolutions adopted by the United Nations General Assembly at its sixtieth session are of particular relevance to WHO: resolution 60/5, Improving global road safety; resolution 60/35, Enhancing capacity-building in

¹ Expressed in United Nations General Assembly resolution 60/1 (accessible on line at http://www.un.org/summit2005/). Copies are available upon request from the WHO Secretariat.

global public health; and resolution 60/221, 2001-2010: Decade to Roll Back Malaria in Developing Countries, Particularly in Africa.

3. The substantive session of the United Nations Economic and Social Council took place in New York from 29 June to 27 July 2005. Throughout the general debate, the fight against HIV/AIDS, malaria and tuberculosis was highlighted by speakers as an opportunity to improve health-care systems. Taking note of the Commission on Human Rights resolution 2005/24, the Council approved the Commission's decision to extend for a period of three years the mandate of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health. As part of the 2005 session, WHO organized a joint round table dialogue on health with UNFPA and UNAIDS, and a ministerial round table entitled "Beyond money: health workers to achieve the Millennium Development Goals". The Organization also participated in two panel discussions, one on achieving the internationally agreed development goals and the other on reforming United Nations operations through a more coordinated, coherent and effective United Nations presence at country level.

INTERAGENCY COORDINATION AND UNITED NATIONS SYSTEM-WIDE COHERENCE

- 4. As part of its work programme, CEB has asked the **Inter-Agency Network on Women and Gender Equality** to review progress on gender mainstreaming with a view to developing a system-wide policy and strategy on the subject, together with mechanisms to ensure accountability. Both contributing to and building on its participation in these United Nations system-wide efforts, WHO is currently developing an Organization-wide strategy and action plan for gender mainstreaming for submission to its governing bodies. WHO places great importance on its participation and role in CEB and its subsidiary organs, the High Level Committee on Programmes and the High Level Committee on Management, and the Organization holds the vice-chairmanship of the latter body for the biennium 2006-2007.
- 5. WHO is exploring a more strategic approach to its participation in the **United Nations Development Group**. The Organization continues to chair the United Nations Resident Coordinator Issues Group and co-chair the Working Group on OECD/Development Assistance Committee, Harmonization and Alignment. In order to improve the effectiveness and efficiency of United Nations coordination mechanisms, WHO has been working with partner organizations to develop proposals for streamlining activities between CEB and the United Nations Development Group. It is intended that this will strengthen the coherence and complementarity of the two coordination mechanisms, while ensuring that their individual work programmes have a clearer strategic orientation.
- 6. As a member of the **Inter-Agency Standing Committee**, WHO participated in the Humanitarian Response Review, which resulted in a cluster approach to tackle weaknesses in humanitarian response capacity. Designated in 2005 as lead organization for the Humanitarian Health Cluster, WHO works with other Standing Committee organizations on improving capacity, preparedness, effectiveness and accountability in the health sector through a Joint Initiative to Improve Humanitarian Health Outcomes. WHO also co-chairs two of the Standing Committee's task forces, one on mental health and psychosocial support in emergency settings and the other on gender and

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¹ United Nations Economic and Social Council decision 2005/261.

humanitarian assistance. Aiming at mainstreaming disaster management, including a public health dimension, into efforts to strengthen countries' resilience to natural hazards and related technological and environmental disasters, WHO interacts with the International Strategy for Disaster Reduction and is a member of the Inter-Agency Task Force on Disaster Reduction. The Organization also participates in the United Nations Executive Committee on Humanitarian Affairs.

- 7. In September 2005, the Secretary-General appointed a WHO public health expert as Senior United Nations System Coordinator for Avian and Human Influenza. WHO works in close collaboration with the United Nations Secretariat and relevant partner agencies such as FAO, UNDP, UNICEF, UNHCR, WFP, OIE and the World Bank on determining policy and guidance for a coordinated response to an influenza pandemic. The Organization also participates in the United Nations agencies' Technical Working Group on managing the coordinated response, and in the Resident Coordinator system and the United Nations Country Team on preparing concerted response and support activities at country level.
- WHO continues to provide leadership in a number of United Nations system initiatives. The Organization was invited by the United Nations General Assembly to act as a coordinator on road safety issues within the United Nation system;1 it was also requested by the Health Assembly to collaborate with organizations of the United Nations system in order to develop capacity for injury prevention.² In this connection, WHO has facilitated the development of a group of over 40 United Nations and other international road safety organizations, referred to as the United Nations Road Safety Collaboration. United Nations General Assembly resolution 60/5 invited the United Nations regional commissions and the World Health Organization to organize jointly the first United Nations Global Road Safety Week. The Week will run from 23-29 April 2007 and the theme will be "Young road users". Modelled on World Health Day 2004, it will provide a major opportunity to draw attention to road safety. Member States will be encouraged to create multisectoral committees to organize national events. A global event – which will include a "youth assembly" and other activities - will be organized in Geneva. Chaired by WHO, the United Nations Ad Hoc Inter-Agency Task **Force on Tobacco Control** brings together 17 agencies and two nongovernmental organizations. Both interagency mechanisms provide, through the Secretary-General, an annual report to the General Assembly. As part of the Interagency Pharmaceutical Coordination Group, WHO collaborates with UNAIDS, UNICEF, UNFPA, UNIDO, the World Bank and the Global Fund to Fight HIV/AIDS, Tuberculosis and Malaria in order to promote consistent international policy guidance concerning pharmaceuticals.
- 9. WHO and the World Bank jointly organized the third and last **High-Level Forum on the Health MDG** (Paris, 14-15 November 2005). Senior policy-makers from both donor and partner countries, as well as UNDP, UNICEF and UNFPA, focused on key challenges and impediments to achieving the international goals in health and development. The areas considered included human resources in health, investment in health, improved coordination and improving health systems. WHO is working with the World Bank to ensure that progress made at the Forum is translated into concrete national policy changes.

¹ United Nations General Assembly resolution 58/289.

² Resolution WHA57.10.

UNITED NATIONS REFORM

- 10. In resolution WHA58.25 the Health Assembly requested the Director-General, inter alia, to adhere to the international **harmonization and alignment** agenda and to take into account the **triennial comprehensive policy review of operational activities for development of the United Nations system.** In its interim progress report to the Executive Board, the Secretariat outlined the active involvement of more than 80% of its country offices in the United Nations reform processes. More recently, WHO has provided further guidance on harmonization and alignment as well as on its role in sector-wide approaches. Furthermore, the Organization is finalizing an action plan for harmonization and alignment at county level, which will include relevant training activities.
- 11. In line with the Rome Declaration on harmonisation (2003) and the Paris Declaration on aid effectiveness: ownership, harmonization, alignment, results and mutual accountability, WHO places increased emphasis on **joint assessments, missions, planning and programmes** for activities at country level. Examples of WHO participation in such efforts include the joint assessment mission for Sudan conducted by the United Nations and the World Bank; the interagency assessment mission to Kyrgyzstan; the joint United Nations programme on strengthening the management of public health emergencies in Viet Nam; and joint planning with UNICEF for activities in regions and countries in 2006 in the areas of child and adolescent rights, and nutrition. In the WHO/UNAIDS HIV Vaccine Initiative, following an innovative model, the two sister agencies aim jointly to plan, cosponsor and, in close collaboration with relevant partners, implement specific targeted activities in respect of agreed international priorities. WHO also participated in the meeting on the Joint Assistance Strategy for Zambia in October 2005, where the United Nations Resident Coordinator spoke on behalf of the 13 United Nations organizations working in the country, focusing on the value added to national development processes by the contribution of different parts of the United Nations system.
- 12. The 2005 World Summit Outcome emphasized the elements of a bolder United Nations reform agenda and provided guidance on the strategic directions for the strengthening of the United Nations. Of particular importance to WHO among the latter is the focus on **system-wide coherence**. Building on the support expressed in the Outcome for strengthening linkages between the normative work of the United Nations system and its operational activities, WHO is engaging with its key partners in the United Nations system in a review of its way of working at both the global and country levels.
- 13. Recognizing the importance of the United Nations reform agenda for WHO and its collaboration within the United Nations system, the Secretariat has initiated an Organization-wide policy dialogue and review concerning its engagement in the first phases of the reform agenda, in order to clarify the Organization's role and responsibilities and provide the necessary strategic directions. In so doing, the Organization aims to contribute to the global policy debate and efforts both within the United Nations system and beyond, with particular emphasis on system-wide coherence.
- 14. In the spirit of the relevant provisions of the 2005 World Summit Outcome, WHO continues to implement its **Secretariat and management reforms**, which are expected to be largely operational by the end of 2006. Initiatives include the completion of a fully integrated global management system, the performance of an in-depth review and consequent adjustment of the Organization's staff and skills

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¹ United Nations General Assembly resolution 59/250.

² Document EB117/29.

³ Documents accessible online at http://who.int/hdp/publications/harmonization/en/.

profiles, the renewal of the results-based management framework, the strengthening of the oversight and accountability framework, and the further development of policies governing ethical conduct and fraud prevention.

EXAMPLES OF COLLABORATIVE EFFORTS AT REGIONAL AND COUNTRY LEVELS

- Developing national capacities in a sustainable manner is one of the primary aims of WHO's activities. In order to tackle the particular public-health concerns raised by HIV/AIDS and tuberculosis in eastern Europe, the WHO Regional Office for Europe has conducted regional and country training and information courses in six countries. WHO has also organized several intercountry workshops to discuss and promote the implementation of the United Nations Standard Rules on the Equalization of Opportunities for Persons with Disabilities. As part of the WHO/UNFPA Strategic Partnership Programme, six joint regional workshops involving a total of 60 countries were convened during 2004-2005. In collaboration with UNICEF and UNFPA, WHO ran workshops in the African and South-East Asia regions to strengthen national capacity and share experiences in relation to the prevention and care of HIV/AIDS among young people. WHO launched the Health Emergency Action Response Network in late 2005, under the auspices of the Inter-Agency Standing Committee. The first training course for the Network provided training for 32 public health and related professionals from a range of agencies and countries. European Union Member States and the African, Caribbean and Pacific Group of States have supported WHO's efforts to strengthen national health-sector capacities and accelerate achievement of the Millennium Development Goals through increased involvement of ministries of health in poverty reduction strategies, sector-wide approaches, and budget support processes.
- 16. WHO promotes strong **collaboration with other United Nations bodies at the regional level** in developing strategies. In order to support its Member States in building capacity to track progress towards achievement of the health-related Goals, the Regional Office for Europe submitted a strategy on the Millennium Development Goals in Europe for consideration by the Regional Committee for Europe. The Regional Office also collaborates and coordinates relevant activities with the corresponding regional offices of UNDP and UNICEF, as well as with the United Nations Economic Commission for Europe. Other collaborative efforts at regional level include the preparation of a WHO/UNICEF child survival strategy.
- 17. An example of **rapid and flexible support to United Nations efforts at country level** is provided by the Global Polio Eradication Initiative, involving a partnership between WHO, UNICEF, Rotary International and United States Centers for Disease Control and Prevention. While continuing to focus on its mandate, the Initiative was instrumental in providing support to United Nations relief efforts during the south Asian earthquake in 2005. The Initiative has also closely coordinated efforts with United Nations country teams in response to other public-health emergencies, including those caused by outbreaks of Marburg haemorrhagic fever in Angola, avian influenza in Nigeria and Ebola haemorrhagic fever in Africa.

¹ Document EUR/RC55/Inf.Doc./1.

FOSTERING PARTNERSHIPS

- 18. In May 2005, WHO and the International Federation of Red Cross and Red Crescent Societies signed a joint letter to countries, with a view to improving coordination and collaboration in areas such as mental health and psychosocial support; water, hygiene and sanitation; prevention of disease outbreaks; and women's health; as well as HIV/AIDS, tuberculosis and malaria in crises.
- 19. WHO and the European Commission intensified their cooperation through a strategic partnership aimed at accelerating achievement of the Millennium Development Goals. The European Commission continued its important strategic support to WHO's activities concerning health action in crises. This included funding to increase WHO's capacity to provide support to countries in Africa and countries in transition.
- 20. Launched in September 2005, in order to increase efforts to achieve international development goals for child and maternal health, the **Partnership for Maternal, Newborn and Child Health** unites developing and donor countries, United Nations entities and agencies (WHO, UNICEF, UNFPA, UNAIDS, the World Bank), professional associations, academic and research institutions, foundations and nongovernmental organizations. The Partnership aims to intensify and harmonize national, regional and global progress towards the Millennium Developments Goals 4 and 5.

ACTION BY THE HEALTH ASSEMBLY

21. The Health Assembly is invited to note the report.

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