WHO reform: World health days

Report by the Director-General

INTRODUCTION

1. In November 2020, the Seventy-third World Health Assembly requested the Secretariat to hold informal consultations and consider a more structured process to observing world health days, weeks, months, years and decades related to health (hereafter referred to as observances).¹ This item should be considered in the light of an analysis submitted by the Secretariat to the Seventy-third World Health Assembly,² which includes a mapping of current observances marked by the Secretariat and an evaluation of their effectiveness, together with an examination of possible alternatives to such events.

2. An earlier report submitted by the Secretariat to the Executive Board at its 144th session in 2019 analysed the mandates and current practice, and the rationale and objectives of such observances, and provided a summary of observances in WHO and the United Nations system.³ This earlier report also gave a preliminary assessment of the evaluation, costs, impact, possible benchmarks and the way forward.

INFORMAL CONSULTATION WITH MEMBER STATES

3. An informal consultation was held on 15 March 2021 in which Member States reviewed the list of observances currently marked by the Secretariat⁴ and discussed how to strike a balance between motivation, technical requirements and purpose in order to set up a mechanism for agreeing on future observances.

4. Member States were in agreement with the Secretariat’s assessment of the current observances marked by the Secretariat. There is considerable variability among the observances in terms of their profiles and characteristics, as outlined below.

(a) Purpose. Despite good intentions, the majority of the campaigns related to observances are planned within a short time frame, without defined goals or objectives. Some have not been successful: some have even had detrimental effects.

¹ See the summary records of the Seventy-third World Health Assembly, Committee B, first and second meetings, section 2.
² Document A73/19.
³ Document EB144/39 Rev.1. Note that the Annex to document A73/19 supersedes Table 1 in document EB144/39 Rev.1.
⁴ See document A73/19, Annex.
(b) Evaluation. Evaluation mechanisms have not been an integral component of all observances, making comparison across campaigns and over time very difficult.

(c) Resources. The Secretariat estimates that about US$ 150 000 would be needed annually per observance. Such resources are, however, rarely available. As an example, in 2019, headquarters’ spending on most Health Assembly-mandated observances was between US$ 15 000 and US$ 50 000.

(d) Politically driven or public health interest. Some observances were set up more in response to political inclinations than evidence-based public health criteria. Most observances marked by the Secretariat were not mandated by the Health Assembly.¹

**Future observances**

**Process**

5. In their deliberations, Member States suggested the following process for considering new proposed “observances”.

   (a) If a Member State wishes to propose a new observance, a detailed written proposal should be submitted to the Director-General at least three months before the start of the next Health Assembly. The proposal should make it clear that the observance meets the required criteria.

   (b) Submission of the proposal in advance of the Health Assembly would allow all Member States and other stakeholders to consider the proposal and prepare for the discussions at the Health Assembly. It would also allow a thorough assessment of the proposal by the competent organs.

   (c) A decision on the proposal would then be taken by the Health Assembly. If the Health Assembly decides to establish the observance, as a practical matter, the observance would start the calendar year following the Health Assembly’s decision.

   (d) No observance should be established before basic arrangements for its financing and organization have been made. These include the effective coordination of the activities of all stakeholders to avoid duplication, as well as procedures for monitoring and evaluating the impact of the proposed observance in implementing WHO’s General Programme of Work.

**Criteria**

6. A group of Member States also proposed the following criteria for new observances.

   (a) The subject of a proposed observance should be consistent with the purposes and principles of WHO, as stated in its Constitution.

   (b) A proposed observance should focus on: emerging priorities and global health challenges; priorities highlighted in WHO’s General Programme of Work; or health issues on which there has been insufficient progress despite the existence of a Health Assembly-endorsed global strategy or action plan, in particular those affecting developing countries.

¹ See document A73/19, Annex.
(c) A proposed observance should contribute to furthering the work of the Organization and implementation of the strategic visions of the respective General Programme of Work. The proposal should also contain set time frames, including evaluation of the observance’s cost-effectiveness (globally, regionally and locally) and its contribution to the WHO brand as well as to increased knowledge of global public goods for health.

**Prerequisites**

7. Member States also discussed the following prerequisites that should be in place before a new observance is established.

   (a) The basic arrangements for financing the observance must have been made. Such financing should, in principle, be based on voluntary contributions.

   (b) If an observance is expected to be funded by voluntary contributions, the sources of funding should be indicated.

   (c) Ensure that adequate funds for the observance are predicted (at least partially) in each programme budget.

   (d) There should be an estimate of the human resources needed to ensure sufficient capacity for the management of the observance, including communication teams (handling translations and social media procedures) and its monitoring and evaluation.

   (e) The proposal for an observance should not include a request for reports on the observance.

**Monitoring and evaluation**

8. A group of Member States also suggested that a monitoring and evaluation framework for observances should be developed. They proposed that the following elements should be part of the framework:

   (a) public awareness of the observance, as well as Member States’ and stakeholders’ perceptions;

   (b) the benefits of the observance on health, human rights and sustainable development (medium- and long-term outcomes);

   (c) the extent of media coverage of the observance (determined, for example, through citations);

   (d) policy dialogues held, documents published and policy changes;

   (e) Member States’ and stakeholders’ engagement and activities;

   (f) resource mobilization;

   (g) service coverage (if applicable);

   (h) further analysis of the impact of the observance; and
(i) development of benchmarks, to assess the results of observances. These could include, for example, assessing the human and financial resources required for the observance in the light of the resources needed in providing technical support to countries. Such benchmarks could also be used to identify observances for which no action has been taken by the Secretariat and which could therefore be considered for sunsetting.

ACTION BY THE HEALTH ASSEMBLY

9. The Health Assembly is invited to note the report and review the list of observances currently marked by the Secretariat\(^1\) and provide guidance on sunsetting observances mandated by the Health Assembly if they are deemed less relevant to the work of the Secretariat in achieving WHO’s General Programme of Work.

10. The Health Assembly is also invited to provide further guidance on the process, criteria and prerequisites for establishing new observances and their subsequent monitoring and evaluation.

\(^1\) See document A73/19, Annex.