

Collaboration within the United Nations system and with other intergovernmental organizations

Report by the Director-General

INTRODUCTION

1. This report provides highlights of WHO's engagement with the United Nations and other intergovernmental organizations during 2022. WHO's collaboration with the United Nations, facilitated by the WHO Office at the United Nations, is an essential part of its coordinating role in international health work. It contributes to aligned global governance for health and coherent implementation of WHO norms and standards. The improved coordination at the country level that has resulted from WHO's close collaboration with the United Nations development system demonstrates the benefits of the United Nations development system reform to WHO, including its Member States.

Working with the United Nations system to advance the health agenda and achieve the Sustainable Development Goals

2. WHO provided support to various Member State discussions at meetings of the principal bodies of the United Nations, including the Economic and Social Council, the Security Council and the General Assembly, to anchor health in the global development agenda and better position health in various aspects of the work of the United Nations system, including: sustainable development, eradication of poverty, climate change, agricultural development, food security and nutrition, the urban agenda, information and communications technologies, gender equality, children, youth, family, ageing, persons with disabilities, migrants, peacekeeping and countering mis/disinformation, as well as international drug control, space technology and effects of atomic radiation.

3. WHO provided technical guidance throughout the adoption processes of multiple General Assembly resolutions, including resolution 76/294, the Political Declaration of the High-level Meeting on Improving Global Road Safety, which recognizes that road safety is an urgent development priority, a major public health problem and a social equity issue, and calls on Member States to drive implementation of the Global Plan for the Decade of Action for Road Safety 2021–2030, and recognizes and strengthens the role of WHO in the implementation and follow-up process to the declaration. That process will include convening a high-level meeting of the General Assembly on improving global road safety in 2026 to undertake a comprehensive midterm review of the implementation of the declaration. WHO provided guidance on General Assembly resolution 76/302, which designates 16 September as the International Day for Interventional Cardiology and invites WHO to facilitate its implementation. It also provided guidance on General Assembly resolution 76/257, the annual global health and foreign policy resolution on the theme of “elevating pandemic prevention, preparedness and response to the highest level of political leadership”, which emphasizes the need to prioritize international cooperation and collaboration for pandemic prevention, preparedness and response, with broad support for WHO as the coordinating authority. On 17 March 2023, the WHO Director-General briefed the Security Council

on the health situation in Ukraine, as part of a series of briefings by United Nations senior management. Further to that, through its eleventh emergency special session, the United Nations General Assembly adopted three resolutions on the war in Ukraine, including on the protection of civilians, humanitarian personnel, journalists and vulnerable persons.

4. WHO also followed the work of the General Assembly Committees, providing technical guidance on a number of relevant health-related resolutions, including resolution 77/236 on organ donation and transplantation, which recognizes the role of WHO in developing normative guidelines, data sharing, capacity-building and technical assistance, and encourages WHO to develop a global strategy in the field of organs, tissues and cells that seeks the integration of donation and transplantation into health-care systems.

5. WHO supported the President of the General Assembly in convening a high-level meeting on improving global road safety on the overall theme of “the 2030 horizon for road safety: securing a decade of action and delivery” to mobilize political leadership, identify gaps and challenges, and promote multisectoral and multistakeholder collaboration to improve global road safety.

6. The WHO Office at the United Nations regularly convened partners in New York to raise the profile of the health agenda, and provided technical and strategic support to the United Nations groups of friends advocating for: universal health coverage, solidarity for global health security, mental health and well-being, tackling antimicrobial resistance, drowning prevention, ageing populations, vision, water and sanitation in health care facilities, defeating neglected tropical diseases, and newly established group on hepatitis elimination. WHO worked with the health-related group of friends to mobilize support for strengthened health language across relevant United Nations resolutions, host side events and briefings for United Nations Member States, and promote common goals across the health agenda to build consensus around key priorities for the upcoming United Nations high-level meetings on universal health coverage, tuberculosis, and pandemic preparedness and response.

7. WHO regularly engaged in the work of the Economic and Social Council and its thematic sessions. These included the Economic and Social Council Coordination Segment, where WHO focused on discussions around vaccine equity, investment in health security, emergency preparedness, One Health, investments in universal health coverage and noncommunicable diseases; the 60th session of the Commission for Social Development, where WHO organized a side event on realizing food and nutrition commitments, focusing on the coalition on healthy diets and the nutrition decade; the United Nations Statistical Commission, where WHO launched the Global Health Facilities Database; the 66th session of the Commission on the Status of Women, during which WHO worked closely with Member States to ensure the inclusion of comprehensive health language in the Agreed Conclusions, and co-hosted four side events focusing on the impact of forever chemicals on girls and women, eye health and gender equity, women’s health and well-being in context with environment and noncommunicable diseases, climate change and recognition of air pollution as a global health crisis; the Economic and Social Council Youth Forum, with a focus on coronavirus disease (COVID-19) recovery and youth taking action for a sustainable future; the Economic and Social Council special event on the implementation of the New Urban Agenda where WHO emphasized its commitment to scale up technical support for the implementation of regional and national responses to address urban health; the Financing for Development Follow-up Forum, where WHO worked closely with Member States to ensure the promotion of health throughout the Forum, including the outcome document which refers to WHO’s COVID-19 Vaccines Global Access initiative and Access to COVID-19 Tools Accelerator, along with strengthening national health infrastructure, universal health coverage and considering gender issues relating to the health workforce and gender-based violence; the 55th session of the Commission on Population and Development, which focused on recovery from COVID-19 and the notable reductions in public spending to support young persons, older people and other highly vulnerable

population groups; the 15th session of the Conference of States parties to the Convention on the Rights of Persons with Disabilities, where WHO co-hosted three side events focusing on assistive technology, accessibility of telehealth services, and health equity for persons with disabilities; the Economic and Social Council Humanitarian Affairs Segment, where WHO co-hosted a side event on comprehensive approach to mental health and psychosocial support in humanitarian settings; the United Nations high-level political forum, with side events on building back better from COVID-19 while advancing the 2030 Agenda, the launch of the report on the gender pay gap in the health and care sector, issues of food security, eye health and education, and the impact of COVID-19 on women's mental health and health promotion. In addition, the United Nations Inter-Agency Task Force on the Prevention and Control of Non-communicable Diseases continued to be led by WHO in 2022 which brings the United Nations system and other intergovernmental organizations together to support governments in meeting the noncommunicable disease-related targets of the Sustainable Development Goals.

8. During the high-level week of the seventy-seventh session of the United Nations General Assembly, WHO engaged politically with United Nations Member States and partners by organizing 12 side events on the topics of pandemic preparedness, progress towards achieving the global targets on tuberculosis, action on antimicrobial resistance, promoting the health of refugees and migrants, ending violence against children, prevention and control of noncommunicable diseases (including mental health promotion), healthy ageing, universal health coverage and health system strengthening, and ending the COVID-19 pandemic through equitable access to vaccines, tests and treatments. The events, which included the launch of advocacy initiatives and calls for political will and action at the country level, were of particular interest to United Nations Member States and partners, given the context of the COVID-19 pandemic and the upcoming high-level meetings of the General Assembly on tuberculosis, universal health coverage and pandemic preparedness at the seventy-eighth session of the General Assembly.

9. During 2022, WHO undertook various preparatory work for the forthcoming high-level meetings of the seventy-eighth session of the United Nations General Assembly on universal health coverage, tuberculosis and pandemic prevention, preparedness and response. One outcome of the first high-level meeting on universal health coverage in 2019 was Member States' decision to hold a follow-up high-level meeting to undertake a comprehensive review on the implementation of Political Declaration 74/2, and to identify gaps and solutions to accelerate progress towards the achievement of universal health coverage by 2030. The consideration by the Seventy-sixth World Health Assembly of the report on reorienting health systems to primary health care as a resilient foundation for universal health coverage and preparations for a high-level meeting of the General Assembly on universal health coverage¹ will help inform the preparations for the High-level Meeting and its political declaration. United Nations General Assembly resolution 73/3 adopted on 10 October 2018, entitled "Political Declaration of the High-level Meeting of the General Assembly on the Fight against Tuberculosis", called for a comprehensive review by the heads of states and governments at a high-level meeting in 2023 on the progress and implementation of agreed tuberculosis goals at the national, regional and global levels. The modalities resolution for the high-level meeting and the multistakeholder hearing was adopted by the United Nations General Assembly on 24 February 2023. The modalities resolution indicated that the second United Nations high-level meeting on ending tuberculosis will take place on 22 September 2023 to review progress made in the fight against tuberculosis and the achievement of the targets set out in the 2018 Political Declaration. It is expected that the outcome will focus on the shortfalls in achieving the tuberculosis targets, including the lack of funding, research, data gaps and the effects of the COVID-19 pandemic, which has reversed years of global progress in tackling tuberculosis, resulting in – for the first time in over a decade – more people falling ill with tuberculosis and losing

¹ Document A76/6.

their lives. The upcoming high-level meeting of the General Assembly on ending tuberculosis is an opportunity to highlight the need for urgent global action to end the epidemic. On 2 September 2022, Member States at the United Nations General Assembly adopted by consensus a draft resolution calling for a high-level meeting on pandemic prevention, preparedness and response. That high-level meeting will take place on 20 September 2023 as outlined in the modalities resolution adopted by the General Assembly on 24 February 2023. The co-facilitators are committed to ensuring that this meeting does not inadvertently duplicate the Intergovernmental Negotiating Body to draft and negotiate a WHO convention, agreement or other international instrument on pandemic prevention, preparedness and response or the Working Group on Amendments to the International Health Regulations (2005) processes, but focuses rather on political support and issues outside the public health realm. WHO is working closely with the co-facilitators to ensure this outcome. The high-level meeting presents an opportunity to provide political support for pandemic prevention, preparedness and response and to look at its multisectoral impact and the role of other sectors in pandemic prevention, preparedness and response, which is where the General Assembly adds most value, including getting on track to achieve the Sustainable Development Goals.

10. WHO provided technical and substantive support to the President of the seventy-seventh session of the United Nations General Assembly to begin preparations for the multistakeholder hearings for the above high-level meetings, as well as to the six co-facilitators responsible for intergovernmental negotiations on the corresponding political declarations. The high-level meetings and their political declarations present an opportunity to mobilize political support at the highest levels, and commitments and resources for accelerating action across sectors for universal health coverage, tuberculosis and pandemic prevention, preparedness and response.

11. WHO regularly participated in meetings and follow-up discussions related to the United Nations Sustainable Development Group, a mechanism within the United Nations system that coordinates the work of the entities of the United Nations system, funds and programmes and brings together the principals and senior staff of United Nations system entities directly involved in implementing the 2030 Agenda. The main role of the United Nations Sustainable Development Group is to support countries in achieving the Sustainable Development Goals by promoting coherence and collaboration among United Nations entities and partners.

12. WHO regularly participated in meetings and follow-up discussions related to the Chief Executive Board, a high-level coordination body composed of the executive heads of the entities of the United Nations system, serving as a forum for strategic guidance and coordination among United Nations organizations. The Board is supported by various subsidiary bodies and task forces, including the high-level Committee on Management, which focuses on management and administrative issues, and the high-level Committee on Programmes which oversees United Nations system-wide programming.

13. WHO participated in the inter-agency assessment of the Business Innovation Group's business operations strategies, which was conducted in late 2022. It covered the period from January 2019 to November 2022 and focused primarily on the strategies and the three enablers of the efficiency agenda (mutual recognition, customer satisfaction principles and costing/pricing principles). The Business Innovation Group is a subsidiary body of the Sustainable Development Group, which oversees the business operations components of United Nations development system reform, known as the efficiency agenda. WHO is an active member of the Business Innovation Group/efficiency agenda and its subsidiary task teams and working groups. WHO adopted the efficiency reporting methodology developed by the Efficiency Reporting Task Team of the Sustainable Development Goals in 2022 and uses it to report its efficiencies to WHO Governing Bodies.

14. The Global Action Plan for Healthy Lives and Well-being for All remains committed to improving the coordinated support offered to countries to accelerate progress towards the health-related Sustainable Development Goals by bringing together 13 multilateral agencies active in health, from both within the United Nations and beyond.¹ WHO and its Global Action Plan partner agencies are reviewing the effectiveness of the Plan since its launch in 2019. They are jointly formulating a set of recommendations to scale the components which have worked well and address those which have not, to ensure transformational change in the way multilateral agencies collectively support countries in accelerating progress towards the Sustainable Development Goals. The Global Action Plan has helped to establish an improvement cycle on health in the multilateral system. Hence, through its monitoring framework, it amplifies country voices at the country level by allowing governments to assess the quality of collaboration and alignment at that level. Based on the responses, catalytic support has been provided to 23 WHO country offices to bring partners together to address challenges highlighted by governments, and best practices have been documented. The Plan has also established itself as a multilateral platform for collaboration, strengthening United Nations reform objectives by setting up structures at the global and thematic levels (through functioning communities of practice) and building trust among agencies. Action and impact at the country level remain central. Implementing countries increased from 37 in 2021 to 52 in 2022. WHO continues to convene the Global Action Plan agencies, working closely with partner entities of the United Nations system: it co-leads the primary health care accelerator with the United Nations Children's Fund, working closely with the World Bank to find solutions to sustainably finance primary health care-focused health systems and the World Food Programme in fragile and vulnerable settings. With the United Nations Population Fund, WHO is providing concrete support to countries to strengthen data systems, and the International Labour Organization, the Joint United Nations Programme on HIV/AIDS, the United Nations Development Programme and United Nations Women are contributing to enhancing equity in health.

15. Discussions among the most senior officials of the United Nations system are informed by WHO's work. WHO regularly participates in the United Nations Secretary-General's senior management meetings, including the Executive Committee, the Deputies Committee and the Senior Management Group. WHO is the lead coordinating body and the convener of the United Nations Crisis Management Team for COVID-19. WHO received regular invitations to brief the Deputies Committee and the Executive Committee on emerging issues, especially with respect to disease outbreaks, including the COVID-19 pandemic and response, and on vaccine delivery. It participated and engaged in relevant discussions on other themes, including the United Nations Biorisk Working Group established by the Secretary-General's Executive Committee in August 2020. This inter-agency mechanism aims to foster better coherence and coordination within the United Nations in responding to natural, accidental and deliberate biological events. WHO continued to co-chair the United Nations Biorisk Working Group with the United Nations Office for Disarmament Affairs.

16. WHO's humanitarian priorities remained closely linked to those of the United Nations Inter-Agency Standing Committee and its members. The Inter-Agency Standing Committee is the longest-standing and highest-level humanitarian coordination forum of the United Nations system. WHO continued to work closely with Committee partners, taking the lead in health as the Cluster Lead Agency for Health in Inter-Agency Standing Committee-activated countries and as Co-Chair of the Committee Reference Group on Mental Health and Psychosocial Support. WHO also actively engaged

¹ The signatories to the SDG3 GAP are Gavi, the Vaccine Alliance; Global Financing Facility for Women, Children and Adolescents (GFF); Global Fund to Fight AIDS, TB and Malaria (Global Fund); International Labour Organization (ILO); Joint United Nations Programme on HIV/AIDS (UNAIDS); United Nations Development Programme (UNDP); United Nations Population Fund (UNFPA); United Nations Children's Fund (UNICEF); Unitaid; United Nations Entity for Gender Equality and the Empowerment of Women (UN Women); World Bank Group; World Food Programme (WFP) and World Health Organization (WHO). <https://www.who.int/initiatives/sdg3-global-action-plan> (accessed 4 May 2023).

in all Committee subsidiary bodies, including leading high-level advocacy and operational decision-making by the Principals and Emergency Directors Group. WHO's engagement and evidence informs the Committee's global policy and standards. Through its engagement with the Committee, WHO worked closely with other humanitarian partners in areas such as risk communication and community engagement, as well as surveillance and logistics to ensure that health systems in Inter-Agency Standing Committee-activated countries were supported and strengthened. This also included partnerships with health-enabling sectors such as nutrition, food security, water and sanitation and hygiene and protection.

Catalysing United Nations system response to the COVID-19 pandemic

17. WHO remains the lead of the United Nations Crisis Management Team, activated on 4 February 2020 in response to the COVID-19 pandemic by the United Nations Secretary-General. The Crisis Management Team is chaired by the Executive Director of WHO's Health Emergencies Programme, and facilitates and aligns United Nations actions in response to COVID-19. This has included scaling up the COVID-19 supply chain system, coordinating inter-agency action for United Nations staff protection, and providing regular crisis updates and messaging for United Nations entities. The Crisis Management Team includes 23 participating United Nations entities and nine strategic workstreams with regular briefings to the United Nations Deputies and Executive Committees.

18. WHO has coordinated closely with the United Nations since the onset of the COVID-19 pandemic. At the country level, the United Nations country teams have been fully engaged in supporting the implementation of COVID-19 plans and frameworks, such as the Strategic Preparedness and Response Plan, the Global Humanitarian Response Plan and the United Nations Socio-Economic Framework. In early 2022, the Access to COVID-19 Tools Accelerator and COVID-19 Vaccines Global Access established the COVID-19 Vaccine Delivery Partnership as an inter-agency coordination mechanism to deliver high-level political advocacy and targeted operational support especially in 34 countries where COVID-19 vaccination coverage was lagging. A Senior Global Coordinator was jointly appointed by WHO and the United Nations Children's Fund in January 2022. The COVID-19 Vaccine Delivery Partnership has worked extensively with other entities of the United Nations system, notably the International Organization for Migration, the United Nations Office for the Coordination of Humanitarian Affairs, and the United Nations High Commissioner for Refugees and, depending on the country, through the Resident Coordinator and the United Nations Country Team. By the end of 2022, the complete primary series coverage in the Advance Market Commitment showed that vaccine coverage rose in 92 countries from 28% in January to 52% in December 2022. Across the 34 countries with less than 10% full vaccine coverage in January 2022, average coverage rose from 3% to 24% between January and December 2022. The number of countries with less than 10% coverage dropped from 34 in January to 7 in December 2022, with 18 of such countries reaching over 20% coverage and 9 reaching over 30%.

19. WHO worked closely with the United Nations in COVID-19-related coordination activities. At the country level, the United Nations country teams were fully engaged in supporting the implementation of COVID-19 plans and frameworks, such as the Strategic Preparedness and Response Plan, the Global Humanitarian Response Plan and the United Nations Socio-Economic Framework. In January 2022, the COVID-19 Vaccine Delivery Partnership was launched by the United Nations Children's Fund, WHO and Gavi, with the goal of accelerating COVID-19 vaccination in countries with the lowest rates, and supporting them in reaching vaccination targets and closing the vaccine equity gap that exists between high- and low-income countries. Between January and June 2022, coverage increased to over 10% in 16 out of the 34 countries that had received concerted support to accelerate vaccinations.

Supporting United Nations development system reform

20. The United Nations country teams play a crucial role in supporting Member States in achieving development goals and addressing humanitarian needs. WHO provides a significant contribution to the work in countries, as it is a member of 129 of the 131 United Nations country teams. WHO's country teams worked closely with other agencies and national counterparts to advance the achievement of Sustainable Development Goal 3 and other health-related Sustainable Development Goals. WHO country offices have incorporated areas of the Thirteenth General Programme of Work, 2019–2025 into the United Nations Sustainable Development Cooperation Frameworks, played a leading role in developing, implementing, monitoring and evaluating health-related issues in the Frameworks and contributed to the Common Country Analysis. Additionally, WHO staff at the country level continue to participate in United Nations thematic groups to promote country-level inter-agency and multisectoral collaboration on gender, human rights, disaster risk reduction, environment and climate change, nutrition and food security, water and sanitation, and access to social services and social protection.

21. WHO works closely with the United Nations Development Coordination Office at the global level, including by providing induction sessions for new resident coordinators. During 2022, 20 newly appointed resident coordinators were briefed on WHO's priorities, governance structure and ways of working. At the regional levels, WHO was actively engaged in United Nations regional collaborative platforms and contributed to knowledge management hubs and change management processes.

22. WHO supports the United Nations Funding Compact as a mechanism to advance the 2030 Agenda and accelerate results on the ground, while improving transparency and accountability and increasing efficiencies. The UN Secretariat implementation plan on reform outlines additional reforms under way to further enhance its performance and strengthen its budgetary, programmatic, finance, governance processes and accountability. Examples of progress made include aligning all WHO country cooperation strategies with the United Nations Sustainable Development Cooperation Framework, improving reporting and transparency through continual improvements to the Programme Budget Portal, publishing data that meets International Aid Transparency Initiative standards, reporting of financial data and Sustainable Development Goals expenditure data to the Chief Executive Board, and reporting on efficiencies achieved to the United Nations Development Cooperation Office.

23. As indicated in the previous report,¹ WHO also participates in United Nations development system cost-sharing arrangements. United Nations agency shares are calculated through a three-step formula: (i) annual base fee; (ii) entity staff size and expenditures; and (iii) participation in the United Nations Sustainable Development Cooperation Frameworks at the country level. Based on this formula, the WHO allocation for 2022–2023, including the Pan American Health Organization, amounted to US\$ 8 341 143 or 10.77% of the total share (an increase of US\$ 1 363 033 over the 2019–2021 allocation period). This allocation makes WHO the third largest contributor (following the United Nations Secretariat and the United Nations Development Programme) to the United Nations development system. As a specialized agency with a significant amount of its budget and resources devoted to normative work at the global and regional levels, WHO has argued that its allocation should be readjusted, and its expenditure considered under the global agenda and specialized assistance category.

24. In 2022, the WHO Office at the United Nations, in collaboration with the resource mobilization team and regional offices, conducted a series of capacity-building exercises for WHO representatives to ensure better access to pooled funds and to encourage stronger engagement with the pooled funding

¹ Document A75/39.

ecosystem. A total of US\$ 43 million was transferred to WHO in 2022 in pooled funding from the Multi-Partners Trust Fund Office and WHO has participated in 69 Multi-Partner Trust Funds since 2016. WHO is currently hosting Multi-Partner Trust Funds on antimicrobial resistance, workers for health, and noncommunicable diseases and mental health. In 2022, the WHO Office at the United Nations and the Coordinated Resource Mobilization Department hosted the first Multi-Partners Trust Fund workshop for WHO-hosted Secretariats. This resulted in the creation of an internal platform, bringing together Trust Fund secretariats with headquarters support functions to ensure that they receive the help required for their efficient performance. WHO is leading the newly established Capacity Building Subgroup in the Fiduciary Management Oversight Group under the United Nations Sustainable Development Group, with the aim of creating a One United Nations common package of support materials to disseminate to regions and countries, promoting the use of pooled fund mechanisms and their benefits, particularly at the country level.

25. The Management and Accountability Framework of the United Nations Development and Resident Coordinator system was endorsed by United Nations Sustainable Development Group principals in September 2021. The Framework provides a clear, unambiguous structure for management and accountability within United Nations country teams, the regional and global levels, and across the three levels of the Organization to ensure a consistent approach among countries. The WHO Office at the United Nations issued a guidance document on the revised Management and Accountability Framework for heads of WHO offices in countries, territories and areas to facilitate its implementation, organized several guidance sessions to ensure country teams familiarity with the main aspects of the Management and Accountability Framework and provided clarifications on a number of queries from WHO Regional and Country Offices related to the Framework.

26. WHO provided inputs to the 2021 annual survey of United Nations entities on progress in implementing the United Nations General Assembly resolution on the quadrennial comprehensive policy review of operational activities for development of the United Nations system, as well as United Nations General Assembly resolution 72/279 on the repositioning of the United Nations development system. The survey contained 125 questions concerning WHO's contribution to the 2030 Agenda, measures taken to ensure collaboration with the reinvigorated resident coordinator system and new generation of United Nations country teams, the implementation of the Management and Accountability Framework, the harmonization and simplification of business practices and system-wide results monitoring, and the strengthening of results-based management, partnerships and funding.

Collaboration with other intergovernmental organizations

27. In addition to engaging with political forums, such as the G20 and G7, WHO worked closely with other intergovernmental organizations, such as the African Union, the Association of Southeast Asian Nations, the Organisation Internationale de la Francophonie, and the Commonwealth of Nations.

28. WHO engaged with the African Union Commission and related bodies, including Africa Centres for Disease Control and Prevention and the African Union Development Agency with Memorandum of Understanding agreements and joint workplans with WHO headquarters, and African and Eastern Mediterranean Regional Offices. WHO provided strategic financial and technical support to the African Union Assembly of Heads of States, the African Union/European Union Summit, the high-level forum on migration and health, the Malabo Extraordinary Humanitarian Summit, and the Executive council meetings in Lusaka. The African Union Health and Human Services Commissioner addressed the Regional Committee in Lomé, Togo. WHO contributed to the Africa Centres for Disease Control and Prevention Restructuring Steering Committee and the African Medicine Agency Roadmap including with seconded staff and supported the implementation of the African Union Year of Nutrition. The WHO

Office to the African Union and United Nations Economic Commission for Africa has undergone a transformation process with the nomination of a director as head of office and a review of staffing and the workplan for a fit-for-purpose WHO presence in Addis Ababa, in the context of WHO multilateral and continental commitments.

29. WHO worked closely with the Jakarta-based Association of Southeast Asian Nations Secretariat to support the regional response to the COVID-19 pandemic and strengthen preparedness and response capacities for health emergencies. In this context, the European Commission-funded South-East Asia Pandemic Response and Preparedness Project was an important priority for WHO to support its Member States in the Association of Southeast Asian Nations region. WHO's work with the Association of Southeast Asian Nations was coordinated with United Nations partners under the Association of Southeast Asian Nations–United Nations Plan of Action for 2021–2025. WHO's engagement with the Organisation internationale de la Francophonie was based on a 2021 Memorandum of Understanding and included organization of joint events, such as a virtual roundtable on World Malaria Day (April 2022) and a high-level panel discussion on universal health coverage and social protection (December 2022). WHO also participated in the 18th Summit of the Francophonie in November 2022 in Tunisia. WHO's collaboration with the Commonwealth of Nations was strengthened through a Memorandum of Understanding signed in February 2022. The WHO Director-General attended the Commonwealth Ministers of Health meeting (May 2022), the 26th Commonwealth Heads of Government meeting in Kigali, Rwanda (June 2022), and the Kigali Summit on Malaria and Neglected Tropical Diseases, held in the margins of the latter meeting. WHO is following up with Member States chairing these initiatives and the relevant Secretariats to support implementation of the ambitious health-related commitments contained in the ministerial and leader-level declarations of these organizations.

ACTION BY THE HEALTH ASSEMBLY

30. The Health Assembly is invited to note the report and provide any comments or guidance it deems pertinent, particularly in respect of the following questions:

- (a) how best can the Secretariat strengthen collaboration with the United Nations development system and other intergovernmental organizations? and
- (b) are there any other areas that the Secretariat should focus on when implementing the current United Nations reform?

ANNEX

WHO COLLABORATION WITHIN THE UNITED NATIONS SYSTEM

WHO DATA ON THE IMPLEMENTATION OF THE UN FUNDING COMPACT

Part I: WHO commitments

Commitments relevant to WHO	<i>Funding Compact: indicators, baseline and targets</i>	WHO data 2022	Explanation of methodology/approach
Accelerating results on the ground			
1.^a Enhance cooperation for results at the country level	<i>Fraction of UN Sustainable Development Group entities reporting at least 15% of development-related expenditures on joint activities</i> Baseline (2017): 9/29 or 31%; Target (2021): 75%	Current system does not capture the data; however, the narrative reporting of activities at country level (for example through country presence report 2021) indicates over 62% of joint activities.	WHO is undertaking a replacement of its enterprise resource planning (ERP) system. WHO will work with the UN Development Coordination Office to identify whether specific data requirements for tracking UN reform can be built into the ERP.
	<i>Percentage of Resident Coordinators who state that at least 75% of country programme documents are aligned to the UN Development Assistance Framework in their country;</i> Baseline (2017): to be determined; Target (2021): 100%	WHO recommends that all its country cooperation strategies be aligned with the United Nations Sustainable Development Cooperation Framework.	UN Sustainable Development Group reporting will be based on the survey of Resident Coordinators by the UN Development Coordination Office. WHO's reporting will be based on the country presence report which is published every two years and presented to the Health Assembly.

^a The numbering of the commitments is aligned with the UN Funding Compact (see UN document A/74/73/Add.1 – E/2019/4/Add.1.) The commitments not reflected are either those for which WHO is not responsible for reporting against (e.g. reported by the Multi-Partner Trust Fund Office/UN Development Coordination Office) or those for which WHO is in process of devising appropriate tracking systems to capture.

2. Increase collaboration on joint and independent system-wide evaluation products to improve UN support on the ground	<p><i>% of UN Sustainable Development Group evaluation offices engaging in joint evaluations or independent system-wide evaluations;</i> <i>Baseline (2018): 10/35 or 29% of evaluation offices have engaged in joint evaluations;</i> <i>Target (2021): 75% of evaluation offices will have engaged in a joint evaluation;</i> <i>Baseline (2018): 7/35 or 20% have engaged on an independent system-wide evaluation product;</i> <i>Target (2021): 50% of evaluation offices will have engaged in at least one independent system-wide evaluation</i></p>	<p>Yes.</p> <p>The WHO evaluation office has collaborated in a number of joint and independent system-wide evaluations, including:</p> <ul style="list-style-type: none"> • Co-managed with UN Foundation the joint evaluation of the COVID-19 Solidarity Response Fund • Evaluation of the inter-agency COVID-19 health and socioeconomic response and coordination (with UN Office for the Coordination of Humanitarian Affairs and Inter-Agency Humanitarian Evaluation Steering Group) • Independent evaluation of UN Joint Programme on HIV/AIDS work with key populations at the country level (participated in Evaluation Management Group) • Evaluation synthesis of UN system and development bank work towards Sustainable Development Goal 6 (participated in evaluation reference group) • System-wide evaluation of the United Nations COVID-19 Response and Recovery Multi-partner Trust Fund. 	<p>Y/N question.</p> <p>Use the following definition of an independent system-wide evaluation: “a systematic and impartial assessment of the relevance, coherence, efficiency, effectiveness, results and sustainability of the combined contributions of United Nations entities, to achieve the goals and targets set out in the 2030 Agenda for Sustainable Development”. A joint evaluation implies the participation of at least two United Nations entities; an independent system-wide evaluation implies the participation of a majority of United Nations entities with a mandate related to the evaluation topic.</p>
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Improving transparency and accountability			
6. Strengthen the clarity of entity-specific strategic plans and integrated results and resource frameworks and their annual reporting on results against expenditures	<i>Fraction of UN Sustainable Development Group entities that in their respective governing bodies held structured dialogues in the past year on how to finance the development results agreed in the new strategic planning cycle;</i> <i>Baseline (2017): 17/27 or 62%;</i> <i>Target (2021): 100%</i>	Yes. WHO uses two processes: (i) WHO's Programme Budget and Administration Committee fulfils a similar function and WHO's programme budget, its financing and outlook is the standing agenda for that Committee; and (ii) the work of the Sustainable Financing Working Group covers in greater depth the scope and scale required of the structured funding dialogues.	Y/N with an entity-specific narrative on the content of the dialogue, e.g., issues raised/future agenda/alignment with the funding compact.
	<i>Centralized, consolidated and user-friendly online platform with disaggregated data on funding flows at entity and system-wide levels in place (Y/N):</i> <i>Baseline (2018): n/a;</i> <i>Target (2020): Y</i>	Yes. WHO uses the Programme Budget Portal.	Y/N question.

7. Strengthen entity and system-wide transparency and reporting, linking resources to Sustainable Development Goals results	<i>Fraction of UN development system entities individually submitting financial data to CEB; Baseline (2017): 27/39 or 69%; Target (2021): 100%</i>	Yes. WHO submits its financial data to CEB annually.	Y/N question.
	<i>Fraction of UN development system entities publishing data as per the highest international transparency standards</i>	Yes. WHO publishes data that meet International Aid Transparency Initiative standards, first reported in 2017.	Y/N with the date of first report.
	<i>Fraction of UN development system entities with ongoing activities at country level that report expenditures disaggregated by country to the CEB; Baseline (2017): 18/39 or 46%; Target (2021): 100%</i>	Yes. WHO submits financial data to CEB annually, disaggregated by country.	Y/N question.
	<i>Fraction of UN development system entities that report on expenditures, disaggregated by Sustainable Development Goals; Baseline (2017): 6/29 entities or 20%; Target (2021): 100%</i>	Yes. WHO reported expenditure by Sustainable Development Goals as part of the 2022 UN Data Cube reporting to the CEB.	Y/N question.

9. Increase accessibility of corporate evaluations and internal audit reports, within the disclosure provisions and policies set by governing bodies at the time of report issuance	<i>% of UN development system entities authorized within disclosure provisions and policies that have made their corporate evaluations available on the UN Evaluation Group website; Baseline (2018): 10/48, or 21%; Target (2019): 100%</i>	<p>Yes.</p> <p>WHO evaluations are published on the WHO website when available.</p>	Y/N question.
	<i>% of internal audit reports issued in line with the disclosure provisions and policies set by the relevant governing bodies, which are available on a dedicated searchable UN-Representatives of Internal Audit Services (UN-RIAS) platform/website, pending availability of resources; Baseline 2018: 0; Target (2021): 100%</i>	<p>WHO is committed to supporting the UN-RIAS initiative to provide access to the annual report of the internal auditor (covering audit and investigations) to the WHO governing bodies when the UN-RIAS platform is available.</p> <p>Comment: UN-RIAS platform not available.</p>	<p>Y/N question.</p> <p>Once the UN-RIAS platform becomes operational, additional data on publishing WHO reports on that platform will be included.</p>
10. Increase visibility of results from contributors of voluntary core resources, pooled and thematic funds and programme country contributions	<i>Specific mention of voluntary core fund contributors pooled and thematic fund contributors, and programme country contributions in UN country teams annual results reporting and entity specific country and global reporting (Y/N); Baseline (2018): n/a; Target (2020): Y</i>	<p>Yes.</p> <p>WHO provides annual revenue details by contributor.</p> <p>Voluntary core fund contributors are presented in the revenue details by contributor. Pooled and thematic fund contributors and programme country contributions are reported in financial data submissions to the CEB.</p>	Y/N question.
	<i>Specific mention of individual contributors in all results reporting by pooled fund and thematic fund administrators and UN Sustainable Development Group recipients (Y/N); Baseline (2018): n/a; Target (2020): Y</i>	<p>Yes.</p> <p>Revenue by fund and contributor is reported annually.</p>	Y/N question.

Increasing efficiencies			
11. Implement the Secretary-General's goals on operational consolidation for efficiency gains	<i>Consolidation of common premises; Baseline (2017): 430 common premises (or 17% of all premises); Target (2021): 1000 common premises (or 50% of all premises)</i>	As per the "WHO presence in countries, territories and areas 2021 report", 19% of country offices (29) are located in common UN premises.	Percentage of location of WHO offices as per the country presence report. The information will be updated for 2020 once the 2021 country presence report is finalized.
	<i>% of UN Sustainable Development Group entities that report to their respective governing bodies on efficiency gains; Baseline (2018): 12/29 or 41%; Target (2021): 100%</i>	Yes. WHO reports to its governing bodies on efficiency gains against a WHO efficiency target, as part of the report on the implementation of the programme budget.	WHO is undertaking a replacement of its ERP system. WHO will work with the United Nations Development Cooperation Office to identify whether specific data requirements for tracking UN reform can be built into the ERP.
	<i>% of UN Sustainable Development Group entities that have signed the High-Level Framework on Mutual Recognition; Baseline (2017): 11/39 or 28%; Target (2021): 100%</i>	Yes. WHO has signed the mutual recognition statement in 2018.	Y/N question.
12. Fully implement and report on approved cost-recovery policies and rates	<i>Fraction of UN development system entities that report annually on the implementation of their approved cost recovery policies and rates to their respective governing body; Baseline (2017): 15/29 or 51%; Target (2021): 100%</i>	Yes. WHO reports the annual cost recovery rate in the audited financial statements.	Y/N question.

Part II: Member States' commitments

Commitments relevant to WHO	<i>Funding Compact: indicators, baseline and targets</i>	WHO data 2022	Explanation of methodology/approach
Providing stability			
3. Broaden the sources of funding support to the UN development system	<i>Number of UN Sustainable Development Group entities reporting an annual increase in the number of contributors of voluntary core resources; Baseline (2017): 66%; Target (2023): 100%</i>	The number of Member States contributors to core resources was the same in 2022 as in 2021 (11) compared to 2020 (8) for core voluntary contributions (CVCA).	Number of Member States contributing to core resources and increase/decrease from previous year and from the 2017 baseline (in percentage and number). Based on the number of contributors to core voluntary contributions.
4. Provide predictable funding to the specific requirements of UN Sustainable Development Group entities, as articulated in their strategic plans, and to the UN Development Assistance Framework funding needs at country level	<i>Fraction of UN development system entities indicating that at least 50% of their contributions are part of multiyear commitments; Baseline (2017): 48%; Target (2023): 100%</i>	32%	Based on the following definition: "share of total contributions received in a given year that is part of a financial commitment that covers multiple years". Agreements (awards) that span more than 365 days, based on US\$ value of agreements. This is based on award start and end dates for awards with revenue recorded in 2022.
Facilitating coherence and efficiency			
6. Facilitate and support the implementation of efficiency measures, where relevant and possible	<i>% of cost of common premises covered by additional financial and/or in-kind contributions; Baseline (2019): to be determined; Target (2020 onwards): 100%</i>	No additional financial or in-kind contributions have been provided to WHO to cover the cost of common premises or moving to common premises.	
7. Fully comply with cost recovery rates as approved by the respective governing bodies	<i>Average number of cost recovery support fee waivers granted per UN development system entity per year; Baseline (2018): tbc; Target (2019 onwards): 0</i>	During 2022, WHO granted waivers on 17 agreements (8 donors), with a total value of US\$ 106 million.	Number of cost-recovery waivers granted during the year (with the dollar value of waivers combined). Note an additional element of reporting (dollar value) compared to the indicator.