



REGIONAL COMMITTEE

Provisional Agenda item 7.3

Seventy-fifth Session
Paro, Bhutan
5–9 September 2022

SEA/RC75/6

28 July 2022

Proposed Programme Budget 2024–2025

The development of the Programme Budget comes at a crucial moment. The world faces multiple crises – the ongoing COVID-19 pandemic, worsening of the global health situation, and the recurring emergence of other humanitarian and natural emergencies, among others. Not only are these aggravating the health situation in countries, there are also socioeconomic crises triggered by disruptions caused by the pandemic. Although the pandemic is definitely not over and is still far from entering an endemic stage, ‘pandemic fatigue’ appears to be setting in worldwide. All these factors have significant implications on the work of WHO, more so during the next biennium of 2024–2025.

WHO has two options: take the road to slow and steady progress towards its goals or the accelerated highway that brings with it a strong sense of urgency. The goals and strategic directions for the Programme Budget 2024–2025 remain the same as have been described in the instrument granting extension to the Thirteenth General Programme of Work (GPW13).¹ The question is the pace and force of change that should be made, especially during the biennium 2024–2025, and this will likely define the trajectory towards achieving the Organization’s goals.

While the challenges remain and in fact evolve into more complex forms, uncertainties on the overall financing of the Organization’s priority work persist. Thus, setting the priorities as to where WHO’s key capacities and resources should be directed becomes critically important.

As part of the refinements to the ongoing mechanism to develop the Programme Budget, the WHO Secretariat has introduced an enhanced process of prioritization. A key principle adopted in this prioritization is that the whole Organization should invest its limited capacities and resources in areas where it will maximize impact, especially in the countries. The starting point of this prioritization process will be based on the focus areas as suggested in the GPW13 extension and will further refine the focus areas under each heading that can ‘accelerate’ progress following a data-driven and evidence-based approach.

¹ Programme Budget 2022–2023: revision - Extending the Thirteenth General Programme of Work, 2019–2023 to 2025. Doc no. A75/8. Geneva: World Health Organization, 2022. https://apps.who.int/gb/ebwha/pdf_files/WHA75/A75_8-en.pdf - accessed 1 Aug 2022.

Given the resolution of the Seventy-fifth World Health Assembly² to increase the Base Programme Budget 2022–2023 by 14%, it is proposed to retain the Programme Budget 2024–2025 at the same level (US\$ 4968.4 million) as of the Base Programme Budget 2022–2023, i.e. there is no Budget increase. The major focus of the Programme Budget 2024–2025 should be on a further increase in country allocations.

In the revised Programme Budget 2022–2023, country-level allocations represented 46% of the total Budget. About 51% of the total Base budget is to be allocated to the Country Office level across several bienniums. The first step towards reaching this goal comes through the Programme Budget 2024–2025 wherein there is an increase in allocation by ~1.6% to the countries.

This Working Paper was presented to the Fifteenth Meeting of the Subcommittee on Policy and Programme Development and Management (SPPDM) for its review. Subsequent to the Fifteenth Meeting of the Subcommittee on Policy and Programme Development and Management (SPPDM), the Draft Concept Note for the Proposed Programme Budget 2024–2025 is now available and is presented as an information document (SEA/RC75/6 INF. DOC. 1) to this Working Paper.

The SPPDM made the following recommendations for consideration by the Seventy-fifth Session of the WHO Regional Committee:

Actions by Member States

- (1) Collaborate actively with the Programme Budget 2024–2025 prioritization exercise in consultation with country offices and the Regional Office.
- (2) Continue active participation in discussions related to the Programme Budget 2024–2025 at the regional and global Governing Body meetings and highlight SE Asia regional process and achievements collectively.

Actions by WHO

- (1) Continue to support and facilitate Member States engagement in the Programme Budget 2024–2025 process.
- (2) Present further details highlighting the process and the global focus of the Programme Budget 2024–2025 to the Seventy-fifth Session of the Regional Committee for its consideration.
- (3) Initiate country-level discussions on the prioritization exercise once the Director-General launches the process for the development of the Programme Budget 2024–2025.
- (4) Convene a consultation of SE Asia Region Member States to discuss the prioritization of outcomes with the participation of the Regional Office, country offices and the national planning focal points in the Member States.

This Working Paper and the SPPDM recommendations are submitted to the Seventy-fifth Session of the WHO Regional Committee for South-East Asia for its consideration.

² Revision of the Programme Budget 2022–2023. Doc no. WHA75.5. Geneva: World Health Organization, 2022.
https://apps.who.int/gb/ebwha/pdf_files/WHA75/A75_R5-en.pdf - accessed 1 Aug 2022.

Introduction

1. The development of the Programme Budget comes at a crucial moment. The world faces multiple crises – the ongoing COVID-19 pandemic, worsening of the global health situation, and recurrent emergence of other humanitarian and natural emergencies, among others. These are aggravating the health situation globally. In addition, there are also socioeconomic crises triggered by the disruptions caused by the pandemic. Although the pandemic is definitely not over and is still far from entering an endemic stage, “pandemic fatigue” appears to be setting in worldwide. All these factors have significant implications for the work of WHO, more so during the next biennium of 2024–2025.

2. With the complexity of the situation likely to increase, or worsen, during the biennium 2024–2025, the option before WHO is a choice between taking the road to slow and steady progress towards its goals or the accelerated highway that brings with it a strong sense of urgency. The goals and strategic directions remain the same as has been described in the instrument granting extension to the Thirteenth General Programme of Work (GPW13) 2019–2023 to 2025.¹ The question is the pace and force of change that should be ensured, especially during the biennium 2024–2025 that will likely define the trajectory of the Organization’s work towards achieving its goals.

3. The process for developing the Programme budget 2024–2025 will bring to the fore the implications of these issues and engage Member States on defining the way forward together. The Working Group on Sustainable Financing recommended a closer look at strengthening WHO’s budgetary, programmatic and financial governance. The Agile Member States Task Group which has been established to look into this is expected to make recommendations that will help with the development of the Programme Budget 2024–2025.

4. However, there is a crucial balancing act that WHO will need to perform. Member States recently approved an increase of US\$ 604.4 million in the Programme budget 2022–2023 for which the Organization has yet to mobilize full funding. The expected increase in assessed contributions (AC), which may start in 2024–2025, will certainly help with improving the size of the predictable financing available for the Programme Budget, but that is not sufficient to cover the financing gaps that already exist. There is also a risk of diluting the impact of an increase in the AC on raising the overall predictability of financing with any significant additional future Budget increases.

5. With the challenges getting bigger and more complex, and uncertainties in overall financing of the Organization’s priority work persisting, setting the right priorities vis-à-vis where WHO’s capacities and resources should be directed becomes critically important. As part of the refinements of the priority areas for the development of the Programme Budget 2024–2025, the WHO Secretariat has introduced an enhanced process of prioritization.

6. A key principle in this prioritization process is that the entire Organization should invest its limited capacities and resources in areas where it will maximize its impact, especially in the countries. To reinforce this, prioritization in countries should be guided by coherent strategic directions based on the most credible and actionable data and evidence.

Global strategic directions shaping the Programme Budget 2024–2025

7. GPW13 focuses on measurable impact of WHO's work on the health of the people in all countries. The GPW13 Triple Billion targets provide a unified approach to accelerating progress towards the achievement of the health-related Sustainable Development Goals. The COVID-19 pandemic has caused setbacks that veered the world off its track in the quest to attain the health-related SDGs.

8. To get back on course in the pursuit of these targets, the Organization is conducting more analytical work to secure evidence using most recent data available to WHO – through the Global Health Observatory mortality database, Global Health Estimates, Global Burden of Risk Factors and the Triple Billion Dashboard – to identify areas where countries will need to concentrate their attention for the next biennium and beyond.

9. According to available data and analysis, noncommunicable diseases remain the leading cause of morbidity and mortality globally. Infectious diseases are declining in terms of their share in overall mortality if not in actual case numbers. For UHC, the indicators showing the largest potential gaps to achieve the Triple Billion-related targets and SDG Target 3.4 are financial protection, health workforce and access to essential services, particularly for the control of hypertension. For the index on healthier populations as part of the "Billion achievements", of the leading health risk factors, nine out of 10 have increased in terms of attributable burden over the past two decades, with high body mass index showing the greatest increase of 70%. Climate and environment-related health issues, tobacco and alcohol control also have the greatest potential for registering overall health gains.

10. In addition, the pandemic has reiterated the harsh reality that the focus must continue to be on the need to step up capacity to prevent, be better prepared for and respond to any outbreaks in every country for health to achieve the emergencies protection index targets. Quantitative measures to determine the role of social determinants on health outcomes is very challenging, but one can infer the critical importance of social determinants from evidence that people born in high human development countries live on average 19 years longer than those born in low human development countries.

11. Data and evidence available with WHO globally, together with global strategic directions set by Member States through GPW13 and other instruments, will sharpen the focus on the development of the Programme Budget 2024–2025.

12. Given the Seventy-fifth World Health Assembly resolution³ to increase the Base Programme Budget 2022–2023 by 14%, it is proposed to retain the Programme Budget 2024–2025 figures at the same level (US\$ 4968.4 million) as of Base Programme Budget 2022–2023, i.e. no further increase in the Programme Budget. The major focus of the Programme Budget 2024–2025 should be on a further increase in country allocations. In the revised Programme Budget 2022–2023, country-level allocations represent 46% of the total Budget. Fifty one percent (51%) of the total Base Budget to be allocated to the country office level incrementally has been considered as a good target. As the first step towards this goal, an increase of ~1.6% in country level budget in the Regions have been included in the Proposed Programme Budget 2024–2025 (*see Table 2*).

13. This 1.6% increase could be achieved by shifting 3% of HQ and Regional Office Budgets to the country office level in the Proposed Programme Budget 2024–2025. For headquarters this would mean an actual net decrease in the Budget; for the Regional Offices a shift in Budgets between levels, and an eventual Budget increase of the Regional Offices due to a budgetary shift from HQ.

14. Country allocation is increased from 46.3% to 47.9% as per the Proposed Programme Budget 2024–2025 when compared with the revised approved Programme Budget 2022–2023, resulting in a net increase by 1.6%.

15. The Budget could be reprioritized within Major Office envelopes in line with the prioritization, i.e. some shifts between the “Billions” are possible within certain limits (to be established). For example, it will be hard to justify a massive reduction in the budget for Billion 2 or depletion in Billion 3.

Regional strategic directions shaping the Programme Budget 2024–2025

16. The South-East Asia Region is home to over a quarter of the world’s population, with some of the highest rates of extreme poverty in the world. The need for more action towards achieving the Strategic Priorities of GPW13 is particularly prominent in countries of the South-East Asia Region.

17. As for the global target on achieving healthier populations, it is projected that the Region will have reached 360 million more people enjoying better health and well-being in 2023 compared with the baseline value of 2018. There is more work to be done to achieve greater progress on the healthier population indicators in the Region in areas such as tobacco and alcohol, air quality, nutrition, physical activity, road safety and water and sanitation, which are critically lagging behind in this part of the world.

³ Revision of the Programme Budget 2022–2023. Doc no. WHA75.5. Geneva: World Health Organization, 2022. https://apps.who.int/gb/ebwha/pdf_files/WHA75/A75_R5-en.pdf - accessed 1 Aug 2022.

18. In the last decade, the Region has made impressive progress in improving service coverage – a 14-percentage point increase over 10 years (from an index of 47 in 2010 to 61 in 2019). However, of the estimated shortfall of 730 million people globally that emerges from the efforts to reach the target of “One billion more people benefiting from universal health coverage”, approximately 200 million are in the South-East Asia Region. The Region also has the lowest public spending on health and the highest out-of-pocket spending among all WHO regions. As of 2021, the availability of doctors, nurses and midwives per 10 000 population remains below the global median (48.6 health professionals per 10 000 population) in the majority of the countries in the Region.

19. The Region stands as the third-most affected, after the Region of the Americas and the European Region, in terms of COVID-19-related infections and deaths. The countries of the South-East Asia Region are also particularly prone to all-hazards emergencies, including natural disasters. This highlights that more work is needed in making the countries better prepared for health emergencies.

20. Overall, while the Region preserves the hard-earned public health gains and restricts the burden of disease, there is an urgent need for stronger emphasis on the ongoing and emerging challenges. These include getting countries better prepared to deal with health emergencies and the health impacts of climate change, reducing the number of people suffering from financial hardship, strengthening the health and care workforce and scaling up health systems through primary health care and programme interventions. These also include multisectoral actions to address risk factors to noncommunicable diseases, malnutrition and harmful use of alcohol. The Region will need to continue with its strong emphasis on public health and social determinant interventions to address communicable diseases, such as TB and the health impacts of air pollution.

21. The revised Approved Programme Budget for 2022–2023 for SE Asia is US\$ 480.3 million. This is a 24% increase from the approved Programme Budget for 2020–2021 (US\$ 388.5 million). The Proposed Programme Budget 2024–2025 for the SE Asia Region is US\$ 487.3 million. This will be a 25% increase from the corresponding figures of Programme Budget 2020–2021.

22. Country allocation as per the revised approved Programme Budget 2022–2023 is US\$ 354.4 million, which is 73.8% of the total of US\$ 480.3 million, the balance of US\$ 125.9 million being earmarked for the Regional Office. In the Proposed Programme Budget 2024–2025, country allocation is proposed at US\$ 365.2 million (increase of US\$ 10.8 million in absolute term) and balance US\$ 122.2 million for Regional office. With this, Country allocation will reach 74.9% of the total which is the highest among all the Major Offices.

The way forward

23. The development of the Programme Budget 2024–2025 will apply a new approach to priority-setting as an integral part of its development process. An iterative approach will be applied that starts at the country office level to ensure maximum alignment with country situations and priorities. It will be guided by the strategic directions as well as available credible data, evidence and trends in every country.

24. The WHO Country Office leadership will be responsible for convening the prioritization consultations, engaging key government counterparts and relevant partners. Each Region will apply an approach appropriate to its situation.

25. Since the intention is that priorities will define the Programme Budget, priorities will be set at the Output level in the current GPW13 Results Framework. This should then guide Regional Office priorities and contribute to the prioritization of work at the global level, particularly in terms of investments in country support and normative work.

26. Subsequent to the Fifteenth Meeting of the Subcommittee on Policy and Programme Development and Management (SPPDM), the Draft Concept Note for the Proposed Programme Budget 2024–2025 is now available and presented as an information document (SEA/RC75/6 INF. DOC. 1) to this Working Paper.

27. Engaging Member States in the development of the Programme budget 2024–2025 will be done in phases. Multiple existing channels will be used for the consultations with Member States, particularly in view of setting priorities that should inform Budget and financing decisions eventually. Further to the presentation of this Working Paper with the Member States at the Fifteenth Meeting of the Subcommittee on Policy and Programme Development and Management, further refinements have been added to the questions to be discussed by the Member States at the Regional Committee Session and subsequent consultations:

- (1) Based on the available credible data, evidence and trends, to which priorities should the Region direct increased capacities and resources in the proposed Programme budget 2024–2025?
- (2) On which existing priorities should the WHO Secretariat provide less emphasis for investing in capacity and resources?

28. The proposed process and timeline for Programme Budget 2024–2025 has been earmarked and is listed in Table 1.

Table 1. *Proposed process and timeline for Programme Budget 2024–2025*

Member States Consultations	Date	Application
Regional Programme Budget Subcommittee	21 July 2022	Region
Country-level consultations	August–September	Region
Regional Committee consultations	5–9 September 2022	Region
Regional Member State consultations pre-EB	October 2022	Region
Global Pre-EB Member States consultations	TBD	Global
Executive Board Programme Budget discussions	January 2023	Global
Post-EB consultations	TBD	Region/global
Health Assembly Programme Budget proposal	May 2023	Global

Table 2. Preliminary Budget envelopes by Major Office for Programme Budget 2024–2025

Major Office	Revised PB 2022-2023 (US\$ million)				Draft PB 2024-2025			
	CO	RO	HQ	Total	CO	RO	HQ	Total
Africa	946.4	361.5		1307.9	975.9	350.7		1,326.6
The Americas	178.1	114.0		292.1	185.0	110.6		295.6
South-East Asia	354.4	125.9		480.3	365.2	122.2		487.3
Europe	145.5	215.2		360.7	154.9	208.8		363.6
Eastern Mediterranean	434.1	175.7		609.8	447.9	170.5		618.4
Western Pacific	243.4	159.9		403.2	253.0	155.1		408.0
Headquarters	-	-	1,514.3	1514.3	-		1,468.9	1,468.9
Grand Total	2301.8	1152.3	1,514.3	4968.4	2,381.8	1,117.8	1,468.9	4,968.4
Allocation by level (% total)	46.3%	23.2%	30.5%		47.9%	22.5%	29.6%	