WORLD HEALTH ORGANIZATION

REPORT ON WHO REFORM DEVELOPMENT PHASE 2011-2012
I. INTRODUCTION

Objectives of the project as mandated by the Member States

WHO reform, initiated by the Director-General in 2010, is an inclusive and Member State driven process aiming at adapting the Organization to better respond to the health challenges of the 21st century.

The 64th World Health Assembly adopted resolution 64.2 endorsing the agenda for reform as set out in the Director-General’s report, and urged Member States to support the implementation of the reform programme. Following the 64th World Health Assembly, the 129th Executive Board decided to establish a transparent, Member-State driven and inclusive consultative process on WHO reforms, based on existing mechanisms, and comprising several steps. The Executive Board also urged Member States to support the process with possible funding, and to engage actively in the reform process.

The three objectives of the reform were defined at the Sixty-fourth World Health Assembly.

1. Improved health outcomes, with WHO meeting the expectations of its Member States and partners in addressing agreed global health priorities, focused on the actions and areas where the Organization has a unique function or comparative advantage, and financed in a way that facilitates this focus.
2. Greater coherence in global health, with WHO playing a leading role in enabling the many different actors to play an active and effective role in contributing to the health of all peoples.
3. An Organization that pursues excellence; one that is effective, efficient, responsive, objective, transparent and accountable (EBSS/2/2).

Three distinct and interconnected fields of work have emerged in line with these objectives:

- Programmes and priority setting
- Governance reform
- Managerial reform

The WHO Secretariat reached out to its Member States to raise necessary funds for the development phase of reform and the development of the implementation plan for reform. The following activities were identified and sought funding for (according to original funding proposal):

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost (USD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Consultations and Meetings of Governing Bodies</td>
<td>1,288,000</td>
</tr>
<tr>
<td>2. Secretariat Costs</td>
<td>2,484,000</td>
</tr>
<tr>
<td>3. Independent Evaluation</td>
<td>1,773,000</td>
</tr>
<tr>
<td>Sub Total</td>
<td>5,545,000</td>
</tr>
<tr>
<td>Programme Support Costs (13%)</td>
<td>721,000</td>
</tr>
<tr>
<td>TOTAL</td>
<td>6,266,000</td>
</tr>
</tbody>
</table>

1 WHA 64/4 World Health Organization: reforms for a healthy future
2 And, where applicable, regional economic integration organizations
3 EB129(8) WHO reform
4 WHA 64/4 World Health Organization: reforms for a healthy future
Several donors**** came forward to support the process and the received funding was pooled for the purpose of the reform development. Additional funding was made available by the Director-General to fill funding gaps.

<table>
<thead>
<tr>
<th>Donor</th>
<th>Amount received</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canada*</td>
<td>$976,562</td>
</tr>
<tr>
<td>Monaco*</td>
<td>$14,286</td>
</tr>
<tr>
<td>Sweden*</td>
<td>$723,484</td>
</tr>
<tr>
<td>USA**</td>
<td>$200,000</td>
</tr>
<tr>
<td>Director-General’s contribution***</td>
<td>$2,363,483</td>
</tr>
<tr>
<td><strong>Grand total incl PSC</strong></td>
<td><strong>$4,277,815</strong></td>
</tr>
</tbody>
</table>

* pooled for the general use of the reform  
** earmarked for evaluation  
*** Director-General’s contribution includes AC and VC. Part of the VC is reflected in the Financial statement for the pooled award.  
**** In addition to the above donations, a generous contribution from Switzerland of $1,009,876 was received and will be used for the implementation of the reform in the biennium 2014-15.

The following expenditures have been recorded for the activities sought funding for:

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost (USD)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Meetings of Governing Bodies</strong></td>
<td>$720,117</td>
</tr>
<tr>
<td>(a) Special Session of Executive Board on WHO Reform (EBSS)</td>
<td></td>
</tr>
<tr>
<td>(b) Meeting of Member States on programmes and priority setting</td>
<td></td>
</tr>
<tr>
<td>(c) Second Extra-ordinary meeting of the Programme, Budget and Administration Committee</td>
<td></td>
</tr>
<tr>
<td><strong>2. Consultation with Member States and Non-Governmental Organizations</strong></td>
<td></td>
</tr>
<tr>
<td><strong>2. Secretariat Costs</strong></td>
<td>$2,821,047</td>
</tr>
<tr>
<td>Comprising staff costs, internal consultative mechanisms, and expert advice from consultants and other experts, communication to staff members, Member States and non-state stakeholders</td>
<td></td>
</tr>
<tr>
<td><strong>3. First-stage independent evaluation</strong> (cost for second stage evaluation not incurred during this report period) and United Nations Joint Inspection Unit review</td>
<td>$244,513</td>
</tr>
<tr>
<td><strong>Sub Total</strong></td>
<td>$3,785,677</td>
</tr>
<tr>
<td><strong>Programme Support Costs (13%)</strong></td>
<td>$492,138</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>4,277,815</strong></td>
</tr>
</tbody>
</table>
WHO reform: timeline of governing bodies and Member State meetings 2011-2012

II. OUTPUTS AND ACTIVITIES: DEVELOPMENT PHASE

The development phase of the reform was planned to extend from June 2011 to May 2012 when a comprehensive proposal for WHO reform was presented to the Sixty-fifth session of the World Health Assembly. Though the majority of the reforms were defined and developed in this time period, the development phase extended until the end of December 2012 as outputs and key deliverables were being further developed and refined to ensure the success of reform. The Executive Board meeting in January 2013 reviewed a comprehensive report on progress of the reform and an implementation plan.

The development phase was initially budgeted for USD$6.2 million for which WHO received USD$1.9 million (please see table in section I). The Director-General made funding available to cover funding gaps. The development phase included costs associated with consultations and extraordinary meetings of the Governing bodies, staff dedicated to the WHO reform, independent external support (i.e., consultants); consultation and meetings of the Governing bodies.

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5 See WHO reform: Consolidated report by the Director-General http://apps.who.int/gb/ebwha/pdf_files/WHA65/A65_5-en.pdf
and the first stage of the independent evaluation. An expenditure breakdown is included in the section above.

ACTIVITY: SCOPING AND CONSULTATIONS

The 129th session of the Executive Board (EB129) decided that the reform process should be a Member state driven and an inclusive, consultative process. Consequently, regular consultations with Member States, staff members and non-state actors have informed the development of proposals for reform.

At the outset, the EB129 requested the Secretariat to prepare three concept papers on the issues of WHO governance, independent evaluation of WHO and the World Health Forum. A series of consultations followed with Missions in Geneva, in addition to bi-lateral and multi-lateral discussions, and dedicated discussions in the Regional Committees. Web-consultations, using a dedicated web platform for the programme of reform that could be accessed by Member States, provided a compliment to the process. Consultations, at the governing bodies meetings, extra-ordinary meetings, bi-lateral and multilateral and through the web platform have since remained the main tool in moving the development of proposals forward and collect the views of Member States.

The establishment of a staff Task Force on reform engaged and collected the views of staff members from the three levels of the Organization with diverse professional backgrounds and number of years of service. The Task Force members contributed with their experience to the development of concepts and proposals leading up to the Special session of the Executive Board (EBSS) in November 2011. When a number of papers were presented to pursue the three objectives of the reform. The Task Force members have also been asked to give specific feedback to a range of products and papers produced by the Secretariat.

Non-governmental organizations in official relations with WHO have been invited to participate in web consultations on numerous issues including WHO’s categories of work and criteria for setting priorities. In addition, two face-to-face consultations took place in 2012 to gather views from these groups on WHO’s relations with non-state actors.

ACTIVITY: FIRST STAGE EVALUATION AND UNITED NATIONS JOINT INSPECTION UNIT

The Member States decided at the Special Session of the Executive Board (EBSS) to proceed with an independent evaluation to provide input into the reform through a two-stage evaluation process. The first stage of the independent evaluation took place from 27 February to 30 March 2012 and assessed the completeness, comprehensiveness and the relevance of the reform proposals. The evaluation team focused on the documents prepared for the 128th, 129th and the 130th sessions of the Executive Board, Special Session of the Executive board and the Sixty-Fourth World Health Assembly and made recommendations to further reform. These recommendations have been taken on board and are included in the reform proposals and the implementation plan. The first-stage evaluation came to the conclusion that WHO had rightly identified the challenges facing the Organization and had used an inclusive, consultative process to process to set priorities and develop proposals for change.

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The Second stage evaluation is currently on going and the evaluation team will submit its report to the 134th session of the Executive Board for their consideration.

At the request of the Executive Board in November 2011, the United Nations Joint Inspection Unit (JIU) updated two earlier reports on management and administration practices, and the decentralization of WHO. The objective was to identify areas of improvement and come with recommendations for future work in those areas. The review was undertaken throughout 2012 and included the result of the staff surveys. These reports were presented to the EB133 in January 2013. A number of the recommendations provided are addressed as part of the reform activities. The Secretariat has committed to report on the progress of the implementation of the recommendations to the Member States.

ACTIVITY: DEVELOPMENT OF PROGRAMMATIC REFORM

Reform of priority setting is central to the WHO reform. Establishing clear institutional priorities will ensure that WHO’s performance can be effectively and objectively measured, and that the Organization can be held accountable for its specific, expected deliverables. The envisioned outcome: WHO’s priorities defined and addressed in a systematic, transparent, and focused manner and financed in alignment with agreed priorities.

Following discussions in the 130th Executive Board meeting, a Member States meeting on programmes and priority setting took place 27-28 February 2012. The meeting reached consensus on criteria for setting priorities for the Organization:

1) The current health situation
2) Needs of individual countries
3) Internationally agreed instruments
4) Evidence based, cost effective interventions
5) Comparative advantage of WHO

The Member State meeting also identified six categories of work for the Organization:

1) Communicable diseases
2) Noncommunicable diseases
3) Promoting health through the life course
4) Health systems
5) Preparedness, surveillance and response
6) Corporate services/enabling functions

These criteria and categories have formed the basis for determining WHO’s leadership priorities that gives focus and direction to WHO’s work in the 12th General Programme of Work and the Programme Budget 2014-2015 that were agreed by the 66th session of the World Health Assembly.

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10 Meeting of Member States on Programmes and Priorities: Chairman’s report http://apps.who.int/gb/ebwha/pdf_files/WHA65/A65_40-en.pdf
ACTIVITY: DEVELOPMENT OF GOVERNANCE REFORM

The governance reform aims to strengthen both the internal governance of WHO by Member States, as well as the role of WHO in global health governance. Consultations have led to the identification and development of proposals in five high-level areas of reform and 15 specific outputs:

- **Oversight:** strengthen the governing bodies oversight of the organization
  - **Outcome:** Strengthened oversight by governing bodies
  - **Outputs:**
    - Strengthened Programme, Budget and Administration Committee with expanded role to include oversight of monitoring and evaluation of programmatic and financial implementation at the three levels of the organization
    - Increased strategic, executive and oversight role for the Executive Board
    - Increased oversight role for regional committees and subsidiary bodies

- **Harmonization and alignment**
  - **Outcome:** Harmonization and alignment of governance processes
  - **Outputs:**
    - Rational scheduling for governing body meetings
    - Increase linkages between the regional committees and the global governing bodies
    - Harmonized practices across the regional committees in relation to the nomination of regional directors, the review of credentials, and participation of observers

- **Enhanced strategic decision making**
  - **Outcome:** Enhanced strategic decision-making by governing bodies
  - **Outputs:**
    - The governing bodies vet resolutions, and limit reporting requirements and timelines
    - Improved methods of work of the Board and World Health Assembly including standardized approaches to resolutions/decisions
    - Strengthened support to Member States in preparation for and participation in the work of the governing bodies in collaboration with regional offices, with particular regard to the timely provision of quality documentation in all official languages.

- **Streamlined national reporting**
  - **Outcome:** Streamlined national reporting of and communication with Member States
  - **Outputs:**
    - A streamlined national reporting system for health data; health policies and law; and the implementation of governing bodies
    - A platform for communication with Member States

- **Engagement**
  - **Outcome:** Strengthened effective engagement with other stakeholders
  - **Outputs:**
    - Engage and, where appropriate, lead and coordinate across the United Nations system and with other international agencies on issues that impact health
    - Principles, policies and operational procedures for engagement with non-State actors
    - Increased Member State involvement with and oversight of partnerships
    - Strengthen coherence in global health matters
ACTIVITY: DEVELOPMENT OF MANAGERIAL REFORM

The managerial reform is to ensure that the work of the Secretariat is organized and delivered in ways that meet the challenging needs of Member States. It aims at increasing the organizational effectiveness, improve results-based management and accountability, strengthen financing, resource mobilization and strategic communication, and ensure that staffing is matched to needs at all levels of the Organization. There are six areas of reform with 30 specific outputs:

- **Support to Member States**
  Outcome: Effective technical and policy support for all Member States
  Outputs:
  - Increased alignment of profile of WHO country presence with country needs and priorities
  - Strengthen country offices
  - Promote alignment, synergy and collaboration across the Organization
  - Improved knowledge management
  - Strengthen technical excellence

- **Human resources**
  Outcome: staffing matched to needs at all levels of the Organization
  Outputs:
  - Human resources strategy that encompasses a model for strategic workforce planning and career development
  - Streamlined recruitment and selection processes
  - Mobility and rotation framework
  - Enhanced staff learning and development
  - Improved performance management
  - Enhanced administration of justice

- **Finance**
  Outcome: Financing and resource allocation aligned with priorities
  Outputs:
  - Increased transparency, predictability and flexibility of WHO’s financing
  - Results-based planning and budgeting mechanism based on new results chain
  - Sequenced planning to reflect country needs
  - Improved Organization-wide resource mobilization
  - Improved financing of administration and management costs
  - New resource mechanism

- **Accountability and transparency**
  Outcome: Managerial accountability, transparency and risk management
  Outputs:
  - Improved accountability and internal control framework
  - Improved risk management framework
  - Information disclosure policy
  - Increased effectiveness in management of conflict of interest
  - Increased capacity of audit and oversight

- **Evaluation**
Outcome: Strengthened culture of evaluation
Outputs:
- Evaluation policy including a mechanism for oversight of evaluation by governing bodies
- Conduct an independent evaluation of WHO
- Joint Inspection Unit to update its reports (Decentralization in WHO and Review of the management and administration of WHO)

- Communication
Outcome: Improved strategic communications
Outputs:
- Increased communication strategy
- Strengthened communications coordination
- Cost-effective communications platforms
- Improved public and stakeholder understanding of the work of WHO
- Strengthen publication policy and strategy

SUMMARY TABLE OF COMPLETED OUTPUTS AND ACTIVITIES; DEVELOPMENT PHASE

Status of outputs and activities covered by this report:

<table>
<thead>
<tr>
<th>OUTPUTS</th>
<th>ACTIVITIES AND TIMELINE</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Papers for consultation and discussion in the special session of the EB on:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Governance of WHO</td>
<td>First drafts; end Jun 2011</td>
<td>Completed</td>
</tr>
<tr>
<td>- World Health Forum</td>
<td>Strategic discussions in Regional Committees; Aug-Oct 2011</td>
<td></td>
</tr>
<tr>
<td>2. Draft proposals prepared by the Secretariat or proposed by Member States on other aspects of the reforms outlined in document A64/4</td>
<td>Discussion paper; early Sep 2011</td>
<td>Completed</td>
</tr>
<tr>
<td></td>
<td>Mission consultation; 15 Sep 2011</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Draft EB paper; early Oct 2011</td>
<td></td>
</tr>
<tr>
<td>3. Decisions of Special Session of the EB on WHO Reform</td>
<td>Special Session of EB; 1-3 Nov 2011</td>
<td>Completed</td>
</tr>
<tr>
<td>4. Revised proposals on WHO Reform based on decisions of Special Session of EB</td>
<td>Papers drafted; Nov-Dec 2011</td>
<td>Completed</td>
</tr>
<tr>
<td></td>
<td>Distribution to MS; end Dec 2011</td>
<td></td>
</tr>
<tr>
<td>5. Decisions of 130th EB</td>
<td>130th EB; 16-21 Jan 2011</td>
<td>Completed</td>
</tr>
<tr>
<td>6. Member-State driven process to develop recommendations on categories, criteria and methods for programme and priority setting and a timeline for the 12th General Programme of Work and next Programme Budget</td>
<td>Member-state meeting 26-28 February, plus web consultation open to Member States and possibility for NGOs to submit comments on WHO reform</td>
<td>Completed</td>
</tr>
<tr>
<td>7. Comprehensive proposal and</td>
<td>Papers drafted; Feb-Mar 2012</td>
<td>Completed</td>
</tr>
</tbody>
</table>
# Implementation Plan for WHO Reform

**Reform for consideration by 65th WHA based on decisions of 130th EB**

## Stage 1 of Independent Evaluation
- Web consultation open to Member States for development of TOR for evaluation.
- Evaluation team works 26 February – 31 March 2012
- Evaluation team submits final report and TORs for second stage evaluation to WHO – mid-April
- Evaluation team presents its report to WHO Member States at WHA65

## Stage 2 of Independent Evaluation
- Evaluation Management Group formed
- Evaluation team selected (PWC)
- Evaluation team works June - December 2013
- Evaluation team presents its report to EB133 January 2014

## United Nations Joint Inspection Unit (JIU) Review
- Review of management, administration and decentralization
- Report presented to the EB131 January 2013
- Recommendations addressed and included in the implementation plan

## Options to improve transparency, predictability and flexibility of WHO’s financing
- Second Extra-ordinary meeting of the Programme, budget and administration committee 6-7 December 2012

## Conclusion and Future Workplan

IV. CONCLUSION AND FUTURE WORKPLAN

The Secretariat presented to the 65th WHA in 2012 a high-level implementation and monitoring framework. The Assembly requested the Director-General to report each year, through the EB to the WHA on the progress in the implementation of WHO reform in line with the implementation and monitoring framework. Four-monthly progress reports are presented to the Independent Expert Oversight Advisory Committee (IEOAC) for review. The reform implementation plan with status is available online where progress in the different streams is reported on a regular basis.

The Second stage evaluation commenced in June 2013 and are looking at WHO’s capacity to implement reform, the findings was presented to the 134th session of the Executive board in January 2014.

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11 WHO reform: High-level implementation and monitoring framework (A65/INF.DOC./6)