



WORLD HEALTH ORGANIZATION

**PROGRAMME DEVELOPMENT COMMITTEE
OF THE EXECUTIVE BOARD
Eighth meeting**

**EBPDC8/5
11 January 2002**

Report of the eighth meeting of the Programme Development Committee of the Executive Board

1. The eighth meeting of the Programme Development Committee (PDC) was held in Geneva on 11 January 2002 under the chairmanship of Ms K. Wigzell (Sweden). The list of participants is annexed. The Committee adopted the provisional agenda¹ with the addition of a supplementary item on future meetings.

Agenda item 2. Thematic evaluations in 2001

- **Eradication of poliomyelitis (Document EBPDC8/3)**

2. The Committee was informed of the main findings of the evaluation and its recommendations, including lessons applicable to other large global initiatives. Progress towards the eradication goal had been impressive, and this initiative, unlike that for smallpox, could leave a legacy in the form of trained staff, strengthened health services, improved surveillance capacity, and a global network of laboratories. However, the goal of eradication had yet to be reached. Problems experienced included a constant need to mobilize resources, inadequate forecasting of vaccine needs and arrangements for supply, varying levels of institutional support, and an initial absence of clear leadership. Such programmes could also benefit from early and regular review by a high-level committee of independent scientific experts, which would further serve to guide the decisions and directions taken. Important lessons for other global initiatives concerned the need for thorough background work on financial and other implications before a commitment is made, the assurance of a rapid rate of progress, and the importance of managing partnership relationships. Above all, measures should be in place to ensure that large investments in such programmes leave a permanent legacy of improved infrastructure and skills.

3. The Committee appreciated the comprehensive and frank evaluation, noting that such assessments help to increase confidence in WHO's transparency. Acknowledging the great progress that had been achieved, it noted that it was imperative that the goal of eradicating poliomyelitis be reached quickly, although many countries with difficult epidemiological situations were being tackled last. The evaluation highlighted several complex managerial, programmatic and technical issues. Experiences in developing countries confirmed that inadequacies in vaccine supply could lead to the cancellation of immunization campaigns and that coordination needed to be ensured among

¹ Document EBPDC8/1.

neighbouring countries. The Committee expressed particular concern about the possible need to reintroduce national immunization days in countries where poliomyelitis had been eradicated.

4. The Committee agreed on the urgent need to eradicate poliomyelitis by the target date, and affirmed that usefulness of lessons highlighted in the evaluation to other programmes. It was particularly important to ensure that sustainable benefits to the health infrastructure remained after eradication of poliomyelitis, as had been the case in the Region of the Americas. The immense achievements of the eradication initiative ought to be more widely publicized. Members also raised questions about the technical work needed to guide the final steps, including post-eradication policies, and asked for reassurance that adequate resources could be mobilized.

5. The Committee endorsed the evaluation and its recommendations.

Agenda item 3. Reporting to the Health Assembly and the Executive Board: Mechanism for reducing ongoing requirements (Document EBPDC8/4)

6. Given the intent to explore possible mechanisms for reducing the number of resolutions with reporting requirements to the Health Assembly and the Executive Board, the Committee welcomed procedural changes aimed at greater efficiency but noted that some issues required updated information on a regular basis. In addition, some formal reporting was governed by regulations, such as those pertaining to reports of WHO Expert Committees. Solutions proposed included finding a better balance between requirements for reporting periodically and by a fixed date; alternative mechanisms, such as annual reports by the Director-General and use of the WHO web site, could be explored. Moreover, as WHO continues to streamline its programmes and implement its evaluation plans, the number of reporting requirements could be expected to decrease naturally. In general, the Committee considered that more analysis was needed before firm recommendations could be made.

7. The Secretariat was asked to prepare proposals for consideration at the next meeting of the Committee.

Agenda item 2. Thematic evaluations in 2001

• Evaluation of WHO's strategic budgeting and planning process (Document EBPDC8/2)

8. In response to a request for more information on procedures for evaluation, the Committee was informed about the way evaluation interrelated with other components of the overall managerial framework, which now included a strategic, results-based budgeting process, and the introduction in the present biennium of a new series of mechanisms for periodic evaluation.

9. The Committee heard a summary of the major recommendations of the evaluation team. Positive features of the budgeting and planning process that had been identified included the clear policy guidance, logical framework and greater focus that followed from the corporate strategy, and the identification of precise areas of work and a limited number of priorities. The team considered that a budget for "one WHO" had been put together, although it was not yet fully integrated in terms of resources from the regular budget and from extrabudgetary sources. Other shortcomings included the late issuance of procedural guidelines and a correspondingly limited consultation process, inadequate participation of regions and countries, and difficulty in the formulation of expected results and indicators. Although the increase in funds from extrabudgetary sources was welcomed, it was noted

that these were not always aligned with agreed priorities. The need to train staff throughout WHO in the principles of results-based budgeting was stressed.

10. Members confirmed that inadequate country participation was a major concern and called for other ways than formal meetings to increase involvement in the future, particularly as a beneficial impact at country level, even though difficult to measure, was an obvious indication of successful results. Members also noted unevenness among programmes in the strategic budgeting process, and confirmed the importance of staff training. The role of governing bodies in the managerial process should be determined by Member States. The Committee considered that, in the future, once procedural guidance was issued in a timely fashion, better coordination and participation would follow.

11. The Committee endorsed the evaluation and its recommendations.

Agenda item 4. Recommendations for future meetings

12. The Chair noted requests that documentation for the Committee be made available in a more timely manner. She referred to the framework for programme evaluation,¹ noting that global thematic evaluations would be initiated by the Director-General in consultation with the Committee, and that progress reports would be submitted to the Committee at its annual session. The results of the planned evaluation of Integrated Management of Childhood Illness, when completed, would be reported to a future meeting.

¹ Document EB107/INF.DOC./3.

ANNEX

LIST OF PARTICIPANTS

MEMBERS, ALTERNATES AND ADVISERS

Cuba

Dr A. González (Alternate to Dr C. Dotres Martínez)

Ethiopia

Dr G. Azene (Alternate to Dr K. Tadesse)

Iran (Islamic Republic of)

Dr B. Sadrizadeh (Member *ex officio*)

Myanmar

Mr Ket Sein (Member)

Mr Mya Than (Alternate)
Dr Kyi Soe (Alternate)
Professor Maung Maung Wint (Alternate)
Dr Pe Thet Htoon (Alternate)
Mrs Aye Aye Mu (Adviser)
Mrs Ei Ei Tin (Adviser)
Mr Soe Aung (Adviser)

Philippines

Dr A.G. Romualdez (Member)

Saudi Arabia

Dr Y.Y. Al-Mazrou (Member)

Sweden

Ms K. Wigzell (Member, Chair)

Ms B. Schmidt (Adviser)
Ms A.-C. Filipsson (Adviser)
Mr A. Molin (Adviser)

Chairman of the Executive Board

Mrs M. Abel (Vanuatu)

MEMBER STATES NOT REPRESENTED ON THE EXECUTIVE BOARD

Australia (Ms L. D’Cruz)

Canada (Dr J. Larivière)

Luxembourg (Ms M. Pranchère-Tomassini, Mr M.-H. Godefroid)

Netherlands (Ms M.A.C.M. Middelhoff)

Republic of Korea (Mr C.-J. Moon)

Spain (Sr. J.L. Consarnau Guardiola)

Zambia (Mrs A. Kazhingu)

= = =