

REGIONAL COMMITTEE FOR AFRICA

ORIGINAL: ENGLISH

<u>Sixty-seventh session</u> <u>Victoria Falls, Republic of Zimbabwe, 28 August–1 September 2017</u>

Agenda item 18

REGIONAL ORIENTATION ON THE IMPLEMENTATION OF THE WHO PROGRAMME BUDGET 2018-2019

Report of the Secretariat

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BACKGROUND

- 1. The Programme budget 2018-2019 is the last within the Twelfth General Programme of Work (12th GPW) 2014–2019. It has been developed in the broader context of WHO reform, whose aims include clear programmatic priority-setting, increased accountability, continued budget discipline and a clearer articulation of roles and functions across all levels of the Organization.
- 2. The World Health Assembly in May 2017, through resolution WHA70.5, approved the Programme budget (PB) 2018-2019. This resolution allows WHO offices at all levels to formulate workplans on the basis of country needs and regional priorities.
- 3. This document outlines the health priorities and the budget distribution to countries and to the Regional Office (see Table 1). It also outlines the progress made towards the operationalization of the programme budget as well as the required steps for its implementation during the biennium 2018-2019 in the African Region.
- 4. In the African Region, five strategic priorities have been defined in the Transformation Programme.² These are: (i) improving health security; (ii) strengthening/investing in national health systems; (iii) sustaining focus on the health-related Sustainable Development Goals (SDGs); (iv) addressing the social and economic determinants of health; and (v) transforming WHO in the African Region into a responsive and results-driven Organization.

PROGRESS MADE/ACTIONS TAKEN

- 5. The Programme budget 2018-2019 was developed through a more robust bottom-up planning process similar to the previous biennium, leading to the identification of a focused number of priorities for technical cooperation within each country. It also took into account the current Country Cooperation Strategy (CCS) documents, recent developments in national health contexts, and feedback from the Regional Committees and Executive Board.
- 6. In line with WHO reform on emergencies, the programme budget considers the full scope of the WHO Health Emergencies Programme, ensuring that the Organization has the operational capabilities to deal with outbreaks and humanitarian emergencies. In this regard, a new results structure for the Health Emergencies Programme replaces category 5 and is presented as category E in Table 1.
- 7. The Programme budget 2018-2019 also presents a coherent and comprehensive programme for combating antimicrobial resistance. It focuses on full scale implementation of national action plans on antimicrobial resistance. It further emphasizes WHO's work with other partners to accelerate the development of new medicines and other health technologies.
- 8. The need for an event-driven component of the Programme budget will remain and will be funded through appeals. Given the difficulties in accurately anticipating the budget requirements for specific emergencies, the humanitarian response plans and appeals will be planned, budgeted and financed at the moment of responding to events using emergency planning processes. This component replaces the outbreak and crisis response component that was referred to in the Programme budget 2016-2017.
- 9. The Organization will continue to invest in the stewardship and coordinating function to support WHO's work in implementing the Sustainable Development Goals. A WHO-wide Sustainable Development Goals team has been established to coordinate the work aiming at aligning WHO's programmes with the 2030 Agenda for Sustainable Development especially at country level. This stewardship and coordination work is incorporated into the programme area on leadership and governance.

¹ WHO: Not merely the absence of disease: 12th WHO General Programme of Work 2014-2019, WHO, Geneva, 2013.

² Vision and strategic agenda for the five-year mandate of Dr M.R. Moeti as Regional Director for the African Region.

- 10. The Strategic Budget Space Allocation (SBSA) model has been applied to the Programme budget 2018-2019 relating to the WHO budget segment for technical cooperation at country level (operational segment 1).³ With the application of the Strategic Budget Space Allocation, the budget space allocated to the Region, for this particular segment, will increase by 27.8 million.
- 11. In line with the Transformation Agenda, the African Region has made considerable progress in strengthening health systems, particularly in post-Ebola countries. However, the Region continues to face several challenges with an unprecedented scale of emergencies including the yellow fever outbreaks in Angola and the Democratic Republic of the Congo and the cholera outbreak in Ethiopia, among others. It therefore remains a top priority for the Region to continue to strengthen its operational capacities for preparedness and response to emergencies.
- 12. The 3% increase in Assessed Contributions approved by the Seventieth World Health Assembly demonstrates a clear commitment by Member States to increase flexible funding in the Programme budget. Many African Member States are up to date with the payment of their Assessed Contributions (see Table 2).

NEXT STEPS

- 13. The Programme budget 2018-2019 and subsequent operational plans provide an opportunity to plan for operationalizing the implementation of relevant interventions to address both regional and global priorities, taking into account lessons learnt during the implementation of previous programme budgets. This will also be in line with the priorities identified through the bottom-up planning process.
- 14. The Secretariat will lead the development of realistic operational plans, and ensure greater budget discipline in the implementation of the Programme budget 2018-2019. Member States are encouraged to support the Secretariat in fulfilling its obligation in line with priorities identified through the bottom-up planning process.
- 15. The Secretariat will ensure that the implementation of the Programme budget 2018-2019 accounts for successful implementation of the Polio endgame, particularly in relation to the future use of existing Polio Eradication Programme expertise and infrastructure.
- 16. Member States are urged to advocate for a clear collective commitment to ensure adequate funding for effective implementation of the Programme budget. The Programme budget should be used by both Member States and the Secretariat as a resource mobilization tool during interactions with partners so as to broaden the donor base.
- 17. All Member States are urged to continue to fulfil their commitments by remaining up to date with the payment of their Assessed Contributions.

The four operational segments are: country-level technical cooperation; provision of global and regional goods; management and administration; and response to emergency events, such as outbreak and crisis response (see document EB137/6).

ANNEX: Budget allocation to the African Region, breakdown for Country Offices and Regional Office by Category of work and Programme Area (US\$ million)

Category/Programme	Country		
	Offices	Regional Office	Tota
1 - Communicable diseases	220.4	70.7	291.1
1.1 HIV/AIDS	43.9	10.2	54.1
1.2 Tuberculosis	27.4	5.0	32.4
1.3 Malaria	31.5	14.4	45.9
1.4 Neglected tropical diseases	25.1	6.8	31.9
1.5 Vaccine-preventable diseases	87.9	32.1	120.0
1.6 Antimicrobial resistance	4.6	2.2	6.8
2 - Noncommunicable diseases	36.8	24.2	61.0
2.1 Noncommunicable diseases	19.5	16.1	35.6
2.2 Mental health and substance abuse	5.4	1.5	6.9
2.3 Violence and injuries	2.7	0.9	3.6
2.4 Disability and rehabilitation	0.3	0.8	1.1
2.5 Nutrition	6	3.1	9.1
2.6 Food safety	2.9	1.8	4.7
3 - Promoting health through the life-course	80.7	24.6	105.3
3.1 Reproductive, maternal, newborn and child health	60.5	14.4	74.9
3.2 Ageing and health	1.1	0.6	1.7
3.5 Health and the environment	9.5	6.2	15.7
3.6 Equity, social determinants, gender equality and human rights	9.6	3.4	13.0
4 - Health systems	58.2	30.3	88.5
4.1 National health policies, strategies and plans	14.0	6.5	20.5
4.2 Integrated people-centred services	21.3	11.2	32.5
4.3 Access to medicines and health technologies and strengthening	13.8	5.5	19.3
regulatory capacity 4.4 Health systems, information and evidence	9.1	7.1	16.2
E - Health Emergencies Programme	73.5	67.7	141.2
E1 Infectious hazard management	7.1	12.9	20.0
E2 International Health Regulations and country preparedness	27.6	13	40.6
E3 Health emergency information and risk assessment	3.8	11.6	15.4
E4 Emergency operations	24.6	19.1	43.7
E5 Emergency core services	10.4	11.1	21.5
6 - Corporate services/enabling functions	82.1	64.9	147.0
6.1 Leadership and governance	32.6	15.3	47.9
6.2 Transparency, accountability and risk management	0.3	4.0	4.3
6.3 Strategic planning, resource coordination and reporting	0.1	5.8	5.9
6.4 Management and administration	48.6	35.6	84.2
6.5 Strategic communications	0.5	4.2	4.7
10 - Polio and trust funds	311.3	16.2	327.5
Polio eradication	311.3	16.2	327.5
Research in human reproduction*			-
Tropical disease research*			-
Grand Total	863.0	298.6	1,161.6

^{*:} These two special programmes have their budgets and funding maintained at the global level in Headquarters; that is the reason why no amounts are shown in Table 1.

Table 2:Status of Assessed Contribution Payments by Member States for WHO African Region as of 22 June 2017

Member State or Associate	2016-17 Biennium			Total outstanding To date including 2017 Assessment		
Member		Assessme	nt			
	2016 US\$	2016 Sw.fr.	2017 US\$	2017 Sw. fr.	US\$	Sw.fr
Algeria	318 185	301 639	373 925	354,480.90	-	-
Angola	46 450	-	46 450	-	435.99	-
Benin	13 940	-	13 940	-	311.31	-
Botswana	78 970	-	65 030	-	65 030	-
Burkina Faso	13 940	-	18 580	-	-	-
Burundi	4650	-	4650	-	-	-
Cabo Verde	4650	-	4650	-	-	-
Cameroon	55 740	-	46 450	-	130 527.24	-
Central	4650					
African			40.50		400 005	
Republic	9290	-	4650	-	129 865.75	-
Chad		-	23 230	-	-	-
Comoros	4650	-	4650	-	393 514.74	-
Congo	23 230	-	27 870	-	40 462	-
Côte d'Ivoire	51 100	-	41 810	-	52 250.32	-
Democratic Republic of	13 940					
the Congo		-	37 160	_	_	_
Equatorial	46 450					
Guinea		-	46 450	-	160,145	-
Eritrea	4650	-	4650	-	4650	-
Ethiopia	46 450	-	46 450	-	31 350	-
Gabon	92 900	-	78 970	-	-	-
Gambia	4650	-	4650	-	13 950.00	-
Ghana	65 030	-	74 320	-	858.27	-
Guinea	4650	-	9290	-	-	-
Guinea-	4650		4050		050 004 05	
Bissau	60 390	-	4650	-	253 024.95	-
Kenya	4650	-	83 610	-	129 915.21	-
Lesotho	4650	-	4650	-	-	-
Liberia	13 940	-	4650	-	-	-
Madagascar		-	13 940	-	13 483.65	-
Malawi	9290	-	9290	-	18 580	
Mali	18 580	-	13 930	-	-	
Mauritania	9290 60 390	-	9290	-	96.21	
Mauritius		-	55 740	-	-	-
Mozambique	13 940	-	18 580	-	4640	-
Namibia	46 450	-	46 450	-	-	-
Niger	9290	-	9290	-	22 908.83	-
Nigeria	209 025	198 156	485 405	460 164	-	-
Rwanda	9290	-	9290	-	-	-
Sao Tome and Principe	4650	_	4650	-		
Senegal	27 870		23 230	-	24 796.10	
Seychelles	4650		4650	-	24 / 30.10	
Sierra Leone	4650		4650	-		
South Africa	863 970	819 044	845 390	801 430	-	
South Sudan	18 580		13 930	- 001 430	56 579.99	
Swaziland	13 940		9290	-	5031	
Togo	4650		4650	-	4650	<u> </u>
Uganda	27 870		41 810		57 941.31	
United	41 810	-	41010	-	JI 341.31	
Republic of	71 010					
Tanzania		-	46 450	-	47.57	-
Zambia	27 870	-	32 520	-	-	-
Zimbabwe	9290	-	18 580	-	18 580	-
Grand Total	2 431 790	1 318 839	2 796 390	1 616 074 90	1 633 625 44	_