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**SIXTH PROGRESS REPORT ON THE IMPLEMENTATION OF THE
TRANSFORMATION AGENDA OF THE WORLD HEALTH ORGANIZATION
SECRETARIAT IN THE AFRICAN REGION**

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BACKGROUND

1. The Transformation Agenda of the World Health Organization in the African Region 2015–2020 is a five-year road map for the transformation of the Organization into an effective, responsive and accountable leader in public health.¹ It aligns with the comprehensive reform effort of the Director-General to transform WHO at the global level, into an organization that is better equipped to deliver improvements in global health.²

2. In implementing the Transformation Agenda, the Secretariat adopted a phased approach. The first phase spanning 2015 to 2017 focused on priority actions to build an enabling environment for change across four strategic pillars: pro-results values; smart technical focus; responsive strategic operations; and effective communications and partnerships. An evaluation conducted in 2017 revealed that implementation of the Transformation Agenda was generally successful in reforming the Secretariat's processes. However, an enhanced focus on changing staff behaviours, delivering results at country level, communicating the work of the Secretariat and broadening engagement with Member States was required in the next phase for reforms to be sustainable.³ The second phase (2018–2020) therefore focused on placing staff at the centre of change with the aim of transforming the Secretariat's organizational culture for country-level impact.

3. The sixth progress report on the Transformation Agenda (July 2020–June 2021) presents the progress made in driving transformation forward across the six broad workstreams of the second phase of the Agenda⁴: (1) strengthening change management processes and enhancing a value-based culture; (2) enhancing the country focus approach for greater impact; (3) delivering quality results and value for money; (4) promoting efficiency and accountability; (5) broadening engagement with Member States and partners and (6) ensuring more effective communication of the work of the Secretariat. This report also takes into account the COVID-19 pandemic and the ensuing disruption of planned transformation activities.

PROGRESS MADE/ACTIONS TAKEN

4. **Strengthening change management processes and enhancing a value-based culture:** The 2020–2021 global evaluation of the WHO Transformation draft report noted that staff in the Region reported 'being more confident in their role because of the clarity provided by workplans aligned with the goals of the Thirteenth General Programme of Work, 2019–2023 (GPW 13) and the organizational cultural shifts that enabled them to be more effective'⁵. The report also showed that the average staff satisfaction in reforms was higher in the Region compared to WHO headquarters and other WHO regions. The number of staff engaged as volunteer change agents in WHO in the

¹ AFR/RC70/4 Fifth progress report on the implementation of the Transformation Agenda of the WHO (<https://www.afro.who.int/about-us/governance/sessions/seventieth-session-who-regional-committee-africa>, accessed March 2021)

² A72/48 – The WHO Transformation Agenda (<https://www.who.int/about/transformation>, accessed, March 2021)

³ Report of the mid-term evaluation of the Transformation Agenda of the WHO Secretariat in the African Region, 2017 (<https://www.afro.who.int/sites/default/files/2017-08/Report%20of%20the%20mid-term%20evaluation%20of%20the%20Transformation%20Agenda%20of%20the%20WHO%20Secretariat%20in%20the%20African%20Region.pdf?ua=1>, accessed, April 2021)

⁴ The Transformation Agenda of the World Health Organization Secretariat in the African Region - Phase 2: PUTTING PEOPLE AT THE CENTRE OF CHANGE (<https://www.afro.who.int/publications/transformation-agenda-world-health-organization-secretariat-african-region-phase-2>, accessed March 2021)

⁵ World Health Organization (2021). Report of the Independent evaluation of the WHO Transformation: 2020 -2021, under publication

African Region had increased from 237 in 2019 to 280 by the end of 2020. Overall, evidence of positive and significant transformation in organizational culture has been noted in the global evaluation, with initiatives such as the WHO values charter and the Regional Change Agents Network highlighted as promising efforts at inculcating new cultural values and norms.⁶

5. The Secretariat's transformation experience with the Pathways to Leadership for Health Transformation programme is being adopted organization-wide with cohorts for Assistant Directors-General, WHO EURO and WHO EMRO currently in the preparatory phases. The rapid pace of change brought about by the COVID-19 pandemic necessitated adjustments to the programme to support leaders in developing the required skills to adapt to the new ways of working. Customized leadership coaching was delivered virtually for over 20 WHO senior leaders in the Region, resulting in enhanced leadership capacities in crisis communication, managing remote teams, agility and resilience building. In August 2020, the pilot WHO Leadership Programme for Member States in the African Region was launched with 34 women leading decentralized primary health institutions in the Republic of Congo, participating in the pilot phase. Plans are underway to expand the programme to 16 regional directors of health within the Ghana Health Service.

6. Within the Secretariat's workforce, the implementation of affirmative recruitment actions aimed at achieving gender parity resulted in a 3% increase in female representation from 29.8% in 2015 to 32.8% in 2021. The pandemic has presented opportunities for female alumni of the Leadership Programme to grow into leadership roles with a total of 12 women advancing to leadership positions within the Secretariat's executive leadership, the WHO Health Emergencies Programme in the Region and other clusters, and WHO headquarters.

7. The WHO AFRO Mentorship Programme aimed at strengthening staff engagement and motivation at regional and country levels undertook a mid-term assessment of its first cohort in October 2020. The assessment revealed benefits and learning experienced by both mentors and mentees. Mentors reported improvements in coaching and active listening skills and an enhanced appreciation of different cultures in the Organization, while 96% of mentees reported experiencing learning and growth as a result of the mentorship relationship. Seventy-eight per cent of participants also experienced increased effectiveness in their work and felt the programme was worth their time and effort. The second cohort launched in February 2021 consists of 115 mentors including mentors from WHO headquarters and other WHO regions and 249 mentees from the Region.

8. **Enhancing the country focus approach for greater impact:** The restructuring of the Secretariat to align it with and operationalize GPW13 for country-level impact was completed in November 2020. Further aligning the day-to-day work of all staff in the Region with GPW 13 has renewed the Transformation Agenda emphasis on results-based programming which has begun to yield results. Fifty-four per cent of staff surveyed as part of the global WHO Transformation evaluation 'agreed strongly' that WHO had a culture which was evidence-driven, and that WHO staff had a results-focused orientation in their day-to-day work.⁷ Improvements have also been made in the regional budget allocation of resources for WHO country offices in the Region (WCOs) intended for achievement of the GPW 13 triple billion targets from 66.1% for the Programme budget 2018-2019 to 69.3% for the Programme budget 2020-2021.

⁶ World Health Organization (2021). Report of the Independent evaluation of the WHO Transformation: 2020 -2021, under publication

⁷ World Health Organization (2021). Report of the Independent evaluation of the WHO Transformation:2020-2021, under publication

9. Actions to improve the operational environment in WCOs and implement the recommendations of the WCO functional reviews are being undertaken despite resourcing constraints. Programme management, external relations and partnerships and health policy, planning and coordination rosters have been created to ensure that core functions are in place. Multi-country assignment teams (MCATs) are also being constituted as a stopgap measure to coordinate technical support to Member States.

10. To further advance WCO functional transformation, a team performance diagnostic tool has been deployed to six WCOs⁸ to identify the competencies required to boost productivity and teamwork. Although still in its pilot phase, the WHO AFRO Team Performance Programme initiative has already benefitted 65 staff - 21 professional and 44 general service - from the Region with personalized, co-development support based on their individual needs. The programme consists of 32 training modules and individual coaching aimed at developing high-performing teams and enhancing collaboration within and across technical and administrative functions.

11. **Delivering quality results and value for money:** Value for money has become an integral element of WHO's work at all levels. In 2020, the Secretariat introduced value-for-money performance indicators for all technical units to assess application and achievement of the value-for-money approach in maximizing the impact of every dollar spent. An innovative capacity building initiative has also been designed to embed value-for-money principles in planning, implementation, monitoring and resource mobilization processes across the Secretariat. Short, animated videos that use WCO examples to communicate the meaning of value for money, how it is applied, and the efficiencies gained as a result have been produced and will be used to build the capacities of programme management officers (PMOs) now present in, and supporting 26 WCOs⁹.

12. In spite of the COVID-19 pandemic, the Secretariat progressed in its efforts to drive last-mile efforts towards a polio-free African Region. In August 2020, the independent Africa Regional Certification Commission (ARCC) officially declared the WHO African Region free of indigenous wild poliovirus. This achievement is attributed to the leadership of Member States, effective collaboration among polio partners, and the adoption of innovative approaches, such as using geographic information systems (GIS) to strengthen surveillance.

13. **Promoting efficiency and accountability:** The Region continues to assess the effectiveness of internal controls by completing the annual internal controls self-assessment checklist on key business process aspects. Despite the challenging operating environment marked by the COVID-19 pandemic, the consolidated results showed that overall, throughout the Region, internal controls have been self-assessed as robust. The most challenging control areas identified in 2020 were monitoring, including country compliance reviews, post-facto, onsite verifications and other assurance mechanisms. In response, the Secretariat provided guidance and targeted oversight to facilitate implementation of policy guidelines updated for COVID-19. A road map to review and strengthen the Secretariat's anti-fraud and anti-corruption policy architecture, tools and risk assessments has also been created.

⁸ Botswana, Congo, Liberia, Namibia, Niger and Uganda.

⁹ Benin, Botswana, Burundi, Cabo Verde, Côte d'Ivoire, Democratic Republic of the Congo, Eritrea, Eswatini, Ethiopia, Gambia, Ghana, Guinea, Kenya, Lesotho, Madagascar, Malawi, Mali, Mauritius, Mozambique, Namibia, Rwanda, Sao Tome and Principe, Senegal, South Africa, Uganda, Zambia.

14. The launch of region-specific GPW 13 key performance indicators (AFR KPI-13) across WHO in the African Region has contributed to the quantifiable demonstration of the Region's contribution to GPW 13 outcomes. AFR KPI-13 have also been applied in the Programme budget 2020-2021 mid-term review to strengthen the three-level output scorecard reporting process.

15. Innovative solutions are being rapidly scaled up across the Secretariat's operations in response to the COVID-19 environment. Consequently, a Digital Finance Team was created in 2020 and has since supported 16 Member States¹⁰ to transition from cash to digital payments. Between September and December 2020, over 100 000 polio campaign workers in Côte d'Ivoire, Ghana and Mali received mobile money payments. This has resulted in improved cost effectiveness, reduced lag time in financial reporting and reduced inequities through financial inclusion of the rural poor. Innovative health solutions such as the use of new tools for vaccine and testing certification have also featured prominently in the pandemic response in the Region. The unanimous endorsement by Member States and partners of the Strategy for scaling up health innovations in the WHO African Region in 2020 demonstrates the growing appetite for national innovation architecture in the context of COVID-19 and beyond.

16. Furthermore, the recent introduction of COVID-19 vaccines in the Region signalled the need for improvements in vaccine regulatory capabilities and capacities of Member States. The Secretariat initiated consultations with the African Vaccine Regulatory Forum (AVAREF) comprising of national regulatory authorities of all Member States. As a result, AVAREF endorsed an emergency joint review process and shortened timeline to accelerate the development of COVID-19 diagnostics, vaccines and medicines.

17. **Broadening the engagement with Member States and partners:** Investments in catalytic partnerships and resource mobilization capacities of the Secretariat resulted in US\$ 331.8 million mobilized for the WHO pandemic response in the African Region. This represents 72.8% of the overall budget of US\$ 455.9 million.¹¹ In the context of its response to the COVID-19 pandemic, the Secretariat strengthened its partnership with the Africa Centres for Disease Control and Prevention (Africa CDC) and diversified its funding base to include global and continental private sector actors. These partnerships have resulted in the harmonization of pandemic management support to Member States and over US\$ 3.5 million mobilized in the reporting period. A roster of qualified External Relations and Partnership Officers has been deployed to 21 WCOs¹² to further strengthen country-level engagement with Member States and partners. Additionally, a quarterly partners' forum was created to enhance engagement with non-State actors and synchronize their response towards respective government priorities. These efforts have led to a 177% increase in regional engagement with non-State actors.

¹⁰ Burkina Faso, Cameroon, Chad, Congo, Côte d'Ivoire, Democratic Republic of the Congo, Ethiopia, Gambia, Ghana, Kenya, Liberia, Mali, Niger, Sierra Leone, South Sudan and Uganda

¹¹ World Health Organization (2021). Report on the Strategic Response to COVID-19 in the WHO African Region: February – December 2020, under publication.

¹² Botswana, Burkina Faso, Comoros, Congo, Democratic Republic of the Congo, Eswatini, Gabon, Guinea, Kenya, Lesotho, Liberia, Mauritania, Nigeria, Sao Tome and Principe, Senegal, Seychelles, Sierra Leone, South Africa, South Sudan, United Republic of Tanzania, Zimbabwe

18. **Ensuring more effective communication of the work of WHO towards improving health outcomes:** Since the onset of the pandemic, over 50 virtual press conferences and more than 450 media interviews involving 270 global media outlets¹³ and over 70 regional and national media organizations have been delivered by the Secretariat to effectively share lifesaving information, enhance stakeholder engagement and demonstrate the Secretariat's health leadership. The Secretariat has experienced a significant increase in followers across its social media platforms throughout the pandemic with Facebook followers increasing by 1.5 million. Visitors to the Secretariat's website also increased by 283% from 1.2 million in 2019 to 4.6 million visitors in 2020. Cross-cutting internal communications on the Transformation Agenda and change management efforts have also increased through the monthly 'Change Management Highlights', internal newsletters and the Regional Director's townhall meetings.

19. The landmark Africa Infodemic Response Alliance¹⁴ (AIRA) was launched in December 2020 to counter COVID-19 misinformation and complement public health awareness raising and community engagement efforts in the Region. The Alliance also aims to support Member States in developing tailored infodemic management strategies rooted in research and analytics. Subsequently, the *Viral Facts* initiative has emerged and is being used as a communication tool to dispel myths, misconceptions and disseminate trustworthy COVID-19 messages.

20. The COVID-19-associated lockdowns, international border closures and additional public health restrictions have impacted the delivery and oversight of planned Transformation Agenda initiatives. The protracted pandemic continues to divert attention and resources from the change agenda to the COVID-19 response. Resourcing constraints have also hampered implementation of the new country operating models recommended by the WCO functional reviews which are expected to effectively and efficiently deliver country-level impact. A framework for continuity of the transformation process (consolidation phase) is currently under development. This next phase will focus on consolidating the achievements of the Transformation Agenda and accelerating country-level transformation to build forward better.

NEXT STEPS

21. The WHO Secretariat in the African Region should:

- (a) consolidate change management efforts with the aim of: (i) sustaining and encouraging positive changes in staff behaviours, leveraging role models and champions; (ii) institutionalizing training on leadership, productivity, agility and quality improvement; (iii) promoting knowledge transfer and ownership of change initiatives; and (iv) accelerating country-level transformation;
- (b) align the Transformation Agenda with the WHO Global Transformation to leverage the ideas, resources and strategies that are being introduced;

¹³ New York Times, British Broadcasting Corporation (BBC), Radio France Internationale (RFI), Cable News Network (CNN), Le Monde, Associated Press and The Economist

¹⁴ Africa CDC, the International Federation of the Red Cross and Red Crescent Societies (IFRC), the United Nations Verified initiative, the United Nations Children's Fund (UNICEF), The United Nations Educational, Scientific and Cultural Organization (UNESCO) and United Nations Global Pulse. Participating and supporting bodies include Africa Check, Agence France-Presse Fact Check, PesaCheck, Dubawa and Meedan.

- (c) accelerate WCO-level functional transformation, including through full implementation of functional review recommendations and deployment of PMOs to better align support to national priorities, deliver value for money and ensure country-level impact;
 - (d) improve the visibility and sustainability of Transformation Agenda results by: (i) enhancing internal and external documentation and communication of Transformation Agenda achievements; (ii) broadening participation of Member States in Transformation Agenda initiatives; and (iii) promoting integration of Transformation Agenda approaches within the Secretariat.
22. The Regional Committee is invited to note the report and endorse the proposed next steps.