

{loadposition healthfuture} **Situation in 2012**

It was clear in 2012 that a key priority for reforming WHO's work in this region is to reinforce managerial processes and strengthen the effectiveness and transparency of administrative actions. The humanitarian crises within the Region also necessitate the most effective and efficient regional management and governance possible in order to assure to the best possible help and support for millions of people in need. The underlying goals of the reforms are to develop and implement plans that result in defined, concrete actions with measurable public health outcomes and clear accountability framework. Governance, management and administrative processes are being significantly streamlined; priorities are being refined and reduced in number to only those with the realistic expectation of valuable results.

Progress 2012-2016
Programmes and priority-setting

At the regional and country level, strategic directions were set to the five technical areas reflected in this report: health systems strengthening towards universal health care; maternal and child health; noncommunicable diseases; health security and communicable diseases; and emergency preparedness and response. These priorities reflect the regional needs and are also consistent with the priorities endorsed by the World Health Assembly as part of the Twelfth General Programme of Work for 2014-2019.

Supported by the Regional Committee and working closely with national health authorities at the highest level, the Region was the first to implement the bottom-up planning process, starting with the planning for 2014-2015 , and focusing on a realistic set of programme areas and deliverables in order to achieve more tangible results and closer alignment with needs at country level. With this specific aim, the Region has steadily increased its budget to the country programme over successive biennia. In comparison with the biennium 2014-2015, the approved programme budget for 2016-2017 includes a 36% increase for the country offices while the increase for the Regional Office is only 7%. The intention has been to increase the impact of WHO's support to countries and avoid the fragmentation of the past years. The successful experience of the Region in the planning for 2014–2015 was used to guide the planning processes in the rest of the Organization in planning for 2016–2017.

Governance

Based on guidance from Member States, reforms have focused on harmonization of governance processes, strengthened oversight, greater strategic decision-making by governing bodies and more effective engagement with other stakeholders. Reforms also address the need for improved links between regional committees and global governing bodies, and between

Member States and the Regional Director.

A number of actions and initiatives have been undertaken since 2012 to strengthen the governance process. High-level meetings for Member States' representatives and permanent missions in Geneva were instituted prior to each major meeting of the WHO governing bodies (World Health Assembly, Executive Board), supported by concise and timely briefings to representatives. These meetings have been well attended and have strengthened the engagement of Member States in the work of the governing bodies, as well as providing valuable orientation for new delegates and representatives. The rules of procedure of the Regional Committee were revised to ensure alignment with best practice in the Organization, and a one-day pre-session meeting was initiated to allow for less formal discussion of up and coming issues on the regional health agenda.

The agenda of the Regional Committee itself was streamlined with regular agenda items on the key strategic priorities of health system strengthening, health security and noncommunicable diseases, and annual updates on maternal and child health and emergency preparedness and response. A concerted effort was also made to reduce the number of resolutions that Member States need to implement to a practical level. The Regional Committee decided to retire 79 resolutions, which it considered to be implemented, superseded or otherwise closed, and to introduce an accountability mechanism to monitor active resolutions and regularly report on their implementation.

A technical advisory committee was established to provide advice to the Regional Director on matters relating to strengthening technical cooperation among and between Member States of the Region, providing support in evaluating programmes and assisting with resource mobilization.

Management

Management reform has been aimed at more efficient use and distribution to priority areas of limited resources for the purposes of sharpening the focus of the Region on the immense needs of countries, while ensuring greater efficiency, transparency and accountability. Capacities at country level were strengthened and additional training and support was provided to country teams. In particular, emphasis was placed on technical and managerial capacity through appropriate selection of WHO representatives in order to ensure effective support at country level, and on review and revision of country offices structures in some countries. Similar processes have been enacted at regional level. Internal structures were reviewed and revised, and programmes streamlined and relocated as necessary to achieve optimal effectiveness.

The managerial actions associated with the reform process with respect to staff mobility and rotation, performance management and human resources planning and management were complemented by the promotion of an accountability culture. Accountability and controls continued to be at the heart of improvement efforts with focus on the five compliance areas, which were repeatedly mentioned in internal and external audit observations of preceding years: direct financial cooperation, direct implementation, imprest purchase orders, asset inventories and non-staff contractual arrangements. These areas are now closely monitored throughout the year by means of the monthly compliance dashboards.

Other management reforms include a dedicated compliance and risk management role; improved compliance and performance monitoring and reporting through dedicated dashboards; accountability compacts with budget centre managers and administrative officers tied in with performance management mechanisms; self-assessment questionnaires for managers in support of the management assertions on internal control; capacity-building initiatives, such as an integrated training programme for budget centres, compliance forums, and other outreach initiatives including joint capacity-building activities with Member States.

Measurable progress has been achieved in regard to accountability and internal control. For example, the number of outstanding reports on direct financial contributions was reduced from over 500 in 2014 to about 60 by mid May 2016; a specific reform project addressed the non-compliant uses of special service agreements as a contracting method; and all overdue audit recommendations emanating from internal and external audits were fully addressed by May 2016, which is unprecedented, with new audit recommendations being largely being addressed before they become due.

Way forward

WHO in the Region is fully committed to reform. Substantial progress has been made so far but clearly more needs to be done in improving WHO performance and support to Member States, based on efficiency, accountability and transparency. Country offices have been a major focus of attention and while positive progress has been made in several countries, continued expansion of WHO's presence is planned in others. The planned reform in the WHO emergency programme is expected to have substantial impact within the Region, given the magnitude of the situation, and has the potential to bring concrete benefits.

The support of the Regional Committee has been invaluable in the period 2012-2016, both in guiding the work of WHO in the Region and also in its willingness to support change. The

ownership of WHO's work by Member States will remain crucial to success in continuing reform.

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