REPORT ON PAHO-WHO STRATEGIC ISSUES

Introduction

1. This report responds to a request from Member States of the Pan American Health Organization (PAHO) during the 2017 Governing Bodies meetings to transform the information document “Update on WHO Reform” (the latest being Document CSP29/INF/1) into a report that describes key strategic issues in the relationship between PAHO and the World Health Organization (WHO). This report is intended as an information document for review by the Member States.

2. The aim of this report is to provide the most relevant information on strategic issues in the relationship between PAHO and WHO: governance, program and budget, and select technical initiatives. Where a given topic is covered in more detail in another agenda item of the corresponding Governing Bodies meeting, reference will be made to relevant documents to avoid duplication.

3. This report covers the period from September 2017 to January 2018. It focuses on PAHO’s contribution to WHO’s transformation agenda, to the development of WHO’s 13th General Programme of Work (GPW), and to the WHO Programme Budget 2016-2017 assessment.

4. Based on the recommendations of Member States during the 12th Session of the Subcommittee on Program, Budget, and Administration, the report will be updated for review by the 162nd Session of the Executive Committee in June 2018. Due to the need for timely publication of documents, the written report presented to the Executive Committee will not be informed by the discussions at the Seventy-first World Health Assembly in May 2018; however, any relevant updates may be presented verbally during discussion of the agenda item by the Executive Committee.
Governance

5. **WHO’s transformation agenda:** The Pan American Sanitary Bureau’s (PASB) senior management and staff have collaborated with the WHO Director-General and transformation team, sharing experiences and lessons learned from the Region of the Americas regarding practices and approaches that improve efficiency and effectiveness (e.g., country presence; joint planning, prioritization, and assessment with Member States; and development of the Sustainable Health Agenda for the Americas 2018-2030).

6. The transformation agenda is linked directly to the 13th GPW (see below), with a focus on strategic and organizational shifts, as well as on measuring impact. PASB staff are actively supporting the development of the transformation agenda, in line with support to the GPW development process.

7. **Framework of Engagement with non-State Actors (FENSA):** PAHO has begun implementation of FENSA in the Region, in alignment with WHO global implementation, and in accordance with Document CD55/8 and related Resolution CD55.R3. For more information, refer to Document SPBA12/5, Engagement with non-State Actors.

8. **Governing Bodies:** PAHO has offered WHO good practices in terms of improving Governing Bodies meetings. Among them is the Analysis of the Mandates of the Pan American Health Organization (Document CD55/18, Rev. 1), presented to the Directing Council in 2016. This facilitated the “sunset,” or retirement, of resolutions and identification of those resolutions that are active and demand follow-up. Additionally, the analysis of the mandates has served as a guide for the preparation of agendas for subsequent Governing Bodies sessions. Member States mandated PASB to repeat this exercise every three years in order to maintain an up-to-date review of outstanding PAHO resolutions. Another example is the implementation of a paperless initiative in Governing Bodies sessions, which has reduced PAHO’s, and thus WHO’s, ecological footprint and the costs associated with printing as well as staff time to manage documents. Furthermore, the Bureau has actively promoted Member State participation in WHO Governing Bodies meetings through various regional coordination efforts. Preparatory virtual meetings with countries of the Region of the Americas who are members of the WHO Executive Board are held prior to each meeting. Member States are also provided with a summary of the agenda items linked to active PAHO resolutions. These efforts aim to reduce redundancy and increase meaningful participation of Member States in WHO meetings. PASB will continue to support WHO in actively identifying opportunities to improve the efficiency of Governing Bodies meetings.

Program and Budget

9. **13th Global Programme of Work 2019-2023:** The Region of the Americas has actively contributed to the development of the 13th GPW. Since the presentation of the initial framework and road map for the GPW by the WHO Director-General to the 29th Pan American Sanitary Conference, PASB has provided input and support to the WHO
Secretariat to craft a sound and comprehensive document. Comments and recommendations from Member States received during the Conference were submitted to the WHO Secretariat. A virtual briefing for PAHO Member States was facilitated prior to the Special Session of the WHO Executive Board in November 2017. PASB management and staff have been actively involved in crafting the strategic vision and the results framework of the GPW.

10. **2018-2019 Budget:** WHO’s budget allocation to AMRO has risen in recent biennia: US$ 164.5 million\(^1\) in 2014-2015, $186.9 million in 2016-2017, and $192.0 million in 2018-2019. This is partly due to prior discussions on strategic budget space allocation (SBSA) in Geneva, although the SBSA decisions only affect the country portion of the budget (and not the Regional Office allocation). It should be noted that the WHO AMRO budget envelope has not been fully funded; for 2016-2017 it was funded at 76% (down from 84% in 2014-2015).

11. **WHO and PAHO web portals:** PAHO periodically submits the necessary information to WHO regarding WHO Programme Budget implementation. This is made available through the WHO Programme Budget Web Portal in compliance with requirements of the International Aid Transparency Initiative (IATI). In 2017, PAHO developed its own Program and Budget Web Portal with technical support from WHO; this was launched at the 29th Pan American Sanitary Conference. PASB provides updated data for both the WHO and PAHO web portals on a quarterly basis.

12. **WHO Programme Budget performance assessment 2016-2017:** While the Region of the Americas conducts its own end-of-biennium assessment of the PAHO Program and Budget 2016-2017, WHO is carrying out a performance assessment process for the WHO Programme Budget 2016-2017. Information from PAHO’s assessment feeds into the global assessment. It should be noted that the WHO assessment is conducted internally, whereas the Region of the Americas conducts a joint assessment with Member States. PASB has shared with WHO the successful experience with the joint assessment of PAHO’s Program and Budget 2014-2015. For more information, refer to Document SPBA12/2, Outline of the End-of-Biennium Assessment of the PAHO Program and Budget 2016-2017/Second Interim Report on the PAHO Strategic Plan 2014-2019.

**Select Technical Initiatives**

13. **Emergencies program reform:** PASB successfully transitioned to the new Health Emergencies Department (PHE) consistent with the WHO emergency reform process. PASB has functionally aligned its work in emergencies with WHO’s new Health Emergencies Programme (WHE) while also maintaining areas of work not addressed by WHO. In this regard, in September 2016, PASB reconstituted its emergencies program by integrating two entities—the Department of Emergency Preparedness and Disaster Relief and the International Health Regulations, Epidemic Alert and Response, and Water

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\(^1\) Unless otherwise indicated, all monetary figures in this report are expressed in United States dollars.
Borne Diseases Unit—into a consolidated Health Emergencies Department that reports to the Director of PASB. Since then, significant progress has been made, particularly with respect to structure (including budget and human resources), incident management, risk assessment, partnerships, and the International Health Regulations, as well as PAHO’s performance in outbreaks and emergencies at country level. PASB’s PHE Department has also achieved close collaboration with WHO’s WHE Programme, including in the aforementioned areas. PHE, together with WHE and the global network of Regional Emergency Directors, has identified a core set of human resources needed to maintain operational readiness and efficiency and ensure adequate emergency response, while at the same time fulfilling normative requirements of both PAHO and WHO.

14. **Universal health coverage:** WHO continues to provide targeted normative support to the program of technical cooperation to support countries in moving toward universal access to health and universal health coverage, specifically around issues relating to financial protection in health, human resources for health, and access to medicines and health technologies. Collaboration with WHO is ongoing in health information systems, and in the development of indicators for monitoring trends in the training and distribution of human resources for health, as well as in the development of standardized tools to assess regulatory capacity for medicines and health technologies.

15. **Noncommunicable diseases:** PAHO’s headquarters and country offices collaborated with WHO headquarters in the planning and implementation of a global conference on enhancing policy coherence to prevent and control noncommunicable diseases (NCDs), held in Montevideo, Uruguay, on 18-20 October 2017. PASB participated in the global organizing committee and collaborated in the development of the meeting agenda and technical content of seminars, especially in the areas of nutrition and mental health. PASB provided funding support to facilitate the participation of ministries of health and other relevant ministries from the Region’s eight priority countries and also provided logistical support to all aspects of the planning and execution of the meeting. This meeting led to an outcome document, the Montevideo Roadmap 2018-2030 on NCDs as a Sustainable Development Priority.

16. **Tuberculosis:** WHO has a long-term, strong collaboration with PAHO in relation to tuberculosis (TB). Several countries in the Americas have served as global examples of excellent TB control, including Cuba, Chile, and Uruguay. PAHO was an integral part of the discussions regarding preparation of WHO’s End TB Strategy. Currently, several areas of collaboration can be highlighted, including: joint data collection; analysis and monitoring of key indicators for the End TB Strategy; coordination in addressing drug-resistant TB through the Green Light Committee mechanism (global and regional) under an agreement between WHO and the Global Fund to Fight AIDS, Tuberculosis and Malaria; joint development of a TB elimination agenda for low-burden countries that are in pre-elimination stages; and coordination of the preparations for the 2018 United Nations General Assembly high-level meeting on TB, that will take place in New York. In mid-January, the UN General Assembly President appointed two co-facilitators for the process, namely Japan and Antigua and Barbuda.
Action by the Subcommittee on Program, Budget, and Administration

17. The Subcommittee is invited to provide comments and recommendations on the format and content of this first Report on PAHO-WHO Strategic Issues.