

**STRATEGIC OBJECTIVE 9**

To improve nutrition, food safety and food security, throughout the life-course, and in support of public health and sustainable development

**Scope**

Work under this strategic objective focuses on nutritional quality and safety of foods; promotion of healthy dietary practices throughout the life-course, starting with pregnant women, breastfeeding and adequate complementary feeding, and considering diet-related chronic diseases; prevention and control of nutritional disorders, including micronutrient deficiencies, especially among biologically and socially vulnerable groups, with emphasis on emergencies, and in the context of HIV/AIDS epidemics; prevention and control of zoonotic and non-zoonotic foodborne diseases; stimulation of intersectoral actions promoting the production and consumption of, and access to, food of adequate quality and safety; and promotion of higher levels of investment in nutrition, food safety and food security at global, regional and national levels.

**Links with other strategic objectives**

Achievement of the strategic objective requires strong links and effective collaboration with other strategic objectives, in particular:

- strategic objective 1: in relation to prevention of zoonoses and foodborne diseases
- strategic objective 2: especially in expanding and improving interventions related to HIV/AIDS prevention, treatment, care and support
- strategic objective 4: in relation to public-health interventions for maternal, newborn, child and adolescent health
- strategic objective 5: in relation to minimizing the impact of emergency situations on the nutritional status of populations
- strategic objective 6: in relation to promotion of healthy dietary practices throughout the life-course
- strategic objective 8: in relation to environmental health risks.

**Major WHO special programmes and collaborative arrangements contributing to the achievement of Organization-wide expected results, and included within the budgetary envelope**

- Codex Alimentarius Commission

### Total budget by location for the strategic objective for 2010–2011 (US\$ million)

Budget (US\$ million)							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
37.2	13.6	11.7	5.5	8.4	17.9	26.2	120.4

### Resource breakdown for the strategic objective for 2010–2011 (US\$ million)

	Countries	Regions	Headquarters	TOTAL
<b>All financing 2010–2011</b>	<b>52.4</b>	<b>41.8</b>	<b>26.2</b>	<b>120.4</b>
Percentage by level	43.5%	34.7%	21.8%	

### Budget by Organization-wide expected result and location

<p><b>9.1</b> Partnerships and alliances formed, leadership built and coordination and networking developed with all stakeholders at country, regional and global levels, in order to promote advocacy and communication, stimulate intersectoral actions, increase investment in nutrition, food-safety and food-security interventions, and develop and support a research agenda.</p>	<b>INDICATORS</b>						
	<p><b>9.1.1</b> Number of Member States that have functional institutionalized coordination mechanisms to promote intersectoral approaches and actions in the area of food safety, food security or nutrition</p>	<p><b>9.1.2</b> Number of Member States that have included nutrition, food-safety and food-security activities and a mechanism for their financing in their sector-wide approaches or Poverty Reduction Strategy Papers</p>					
	<b>BASELINE 2010</b>						
	55	55					
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
70	70						
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
5.1	2.3	3.4	0.7	2.5	2.2	2.3	<b>18.5</b>

<p><b>9.2</b> Norms, including references, requirements, research priorities, guidelines, training manuals and standards, produced and disseminated to Member States in order to increase their capacity to assess and respond to all forms of malnutrition, and zoonotic and non-zoonotic foodborne diseases, and to promote healthy dietary practices.</p>	<b>INDICATORS</b>						
	<p><b>9.2.1</b> Number of new nutrition and food-safety standards, guidelines or training manuals produced and disseminated to Member States and the international community</p>	<p><b>9.2.2</b> Number of new norms, standards, guidelines, tools and training materials for prevention and management of zoonotic and non-zoonotic foodborne diseases</p>					
	<b>BASELINE 2010</b>						
	15 (+105 Codex standards)						
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
20 (+200 Codex standards)							
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
5.7	2.1	1.8	0.5	1.7	1.9	16.7	<b>30.5</b>

## PROPOSED PROGRAMME BUDGET 2010–2011

<b>9.3</b> Monitoring and surveillance of needs and assessment and evaluation of responses in the area of nutrition and diet-related chronic diseases strengthened, and ability to identify best policy options improved, in stable and emergency situations.	<b>INDICATORS</b>						
	<b>9.3.1</b> Number of Member States that have adopted and implemented the WHO Child Growth Standards				<b>9.3.2</b> Number of Member States that have nationally representative surveillance data on major forms of malnutrition		
	<b>BASELINE 2010</b>						
	50				100		
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
70				120			
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
6.7	1.9	0.7	1.2	0.9	4.3	2.0	<b>17.7</b>

<b>9.4</b> Capacity built and support provided to target Member States for the development, strengthening and implementation of nutrition plans, policies and programmes aimed at improving nutrition throughout the life-course, in stable and emergency situations.	<b>INDICATORS</b>						
	<b>9.4.1</b> Number of Member States that have implemented at least three high-priority actions recommended in the Global Strategy for Infant and Young Child Feeding		<b>9.4.2</b> Number of Member States that have implemented strategies to prevent and control micronutrient malnutrition		<b>9.4.3</b> Number of Member States that have implemented strategies to promote healthy dietary practices for preventing diet-related chronic diseases	<b>9.4.4</b> Number of Member States that have included nutrition in their responses to HIV/AIDS	<b>9.4.5</b> Number of Member States that have national preparedness and response plans for nutritional emergencies
	<b>BASELINE 2010</b>						
	90		70		70	65	45
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
105		75		75	70	50	
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
8.6	2.9	2.0	1.2	2.3	2.7	1.5	<b>21.3</b>

<b>9.5</b> Systems for surveillance, prevention and control of zoonotic and non-zoonotic foodborne diseases strengthened; food-hazard monitoring and evaluation programmes established and integrated into existing national surveillance systems, and results disseminated to all key players.	<b>INDICATORS</b>						
	<b>9.5.1</b> Number of Member States that have established or strengthened intersectoral collaboration for the prevention, control and surveillance of foodborne zoonotic diseases	<b>9.5.2</b> Number of Member States that have initiated a plan for the reduction in the incidence of at least one major foodborne zoonotic disease					
	<b>BASELINE 2010</b>						
	30	60					
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
45	80						
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
6.6	2.0	2.1	0.5	0.3	3.4	1.9	<b>16.7</b>

<b>9.6</b> Capacity built and support provided to Member States, including their participation in international standard-setting in order to increase their ability to assess risk in the areas of zoonotic and non-zoonotic foodborne diseases and food safety, and to develop and implement national food-control systems, with links to international emergency systems.	<b>INDICATORS</b>						
	<b>9.6.1</b> Number of selected Member States receiving support to participate in international standard-setting activities related to food, such as those of the Codex Alimentarius Commission	<b>9.6.2</b> Number of selected Member States that have built national systems for food safety with international links to emergency systems					
	<b>BASELINE 2010</b>						
	90	40					
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
90	60						
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
4.4	2.3	1.7	1.5	0.6	3.4	1.8	<b>15.7</b>

**STRATEGIC OBJECTIVE 10**

To improve health services through better governance, financing, staffing and management, informed by reliable and accessible evidence and research

**Scope**

The work under this objectives aims to improve management and organization of health service delivery, reflecting the principles of integrated primary health care, so as to scale up coverage, equity and quality of health services and improve health outcomes. The work will improve national capacities for governance and leadership, improve the various mechanisms for coordination (including donor assistance) that support member states in their efforts to achieve national targets. Work will contribute to strengthened country health-information systems, and will contribute to better knowledge and evidence for health decision-making. This will include global and regional work on generation, comparative analysis and synthesis of health statistics and evidence from research. Work will strengthen national health research knowledge management and e-health policies for health-systems development. The health workforce information and knowledge base will be strengthened and technical support to Member States will be provided to improve the production, distribution, skill mix and retention of their health workforce. Health systems financing will be improved through evidence-based policy, norms, standards and related measurement tools, and technical support, resulting in higher availability of funds, social and financial risk protection, equity, and better access to services and efficiency of resource use. Steps will also be taken to advocate for additional funds for health where necessary.

**Links with other strategic objectives**

- All strategic objectives concerned with the achievement of specific health outcomes, primarily strategic objectives 1 to 4.
- All health- and disease-related strategic objectives: the work provides a platform for close collaboration with the evidence component.
- Strategic objective 5: complementing the specific circumstances of service delivery in fragile states.
- Strategic objective 7: particularly in relation to equity, pro-poor health policies and the progressive realization of the right to health - the work translates achievements in those areas into service delivery.
- Strategic objective 12: particularly work on providing leadership, strengthening governance and encouraging partnerships and collaboration in engagement with countries.

**Major WHO special programmes and collaborative arrangements contributing to the achievement of Organization-wide expected results, and included within the budgetary envelope**

- Special Programme of Research, Development and Research Training in Human Reproduction
- World Alliance for Patient Safety
- European Observatory on Health Systems and Policies

### Total budget by location for the strategic objective for 2010–2011 (US\$ million)

Budget (US\$ million)							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
124.0	32.2	44.3	50.5	61.0	42.4	119.7	474.2

### Resource breakdown for the strategic objective for 2010–2011 (US\$ million)

	Countries	Regions	Headquarters	TOTAL
<b>All financing 2010–2011</b>	<b>234.5</b>	<b>120.0</b>	<b>119.7</b>	<b>474.2</b>
Percentage by level	49.5%	25.3%	25.2%	

### Budget by Organization-wide expected result and location

<p><b>10.1</b> Management and organization of integrated, population-based health-service delivery through public and nonpublic providers and networks improved, reflecting the primary health care strategy, scaling up coverage, equity, quality and safety of personal and population-based health services, and enhancing health outcomes.</p>	<b>INDICATORS</b>						
	<b>10.1.1</b> Number of Member States that have regularly updated databases on numbers and distribution of health facilities and health interventions offered						
	<b>BASELINE 2010</b>						
	20						
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
30							
<b>Budget (US\$ million)</b>							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
37.2	3.5	12.7	14.5	27.5	6.5	8.0	109.9

<p><b>10.2</b> National capacities for governance and leadership improved through evidence-based policy dialogue, institutional capacity-building for policy analysis and development, strategy-based health system performance assessment, greater transparency and accountability for performance, and more effective intersectoral collaboration.</p>	<b>INDICATORS</b>						
	<b>10.2.1</b> Number of Member States that have in the last five years developed comprehensive national health planning processes in consultation with stakeholders			<b>10.2.2</b> Number of Member States that conduct a regular or periodic evaluation of progress, including implementation of their national health plan, based on a commonly agreed performance assessment of their health system			
	<b>BASELINE 2010</b>						
	88			45			
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
103			56				
<b>Budget (US\$ million)</b>							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
12.3	3.5	4.7	11.4	4.1	3.4	8.7	48.1

## PROPOSED PROGRAMME BUDGET 2010–2011

<b>10.3</b> Coordination of the various mechanisms (including donor assistance) that provide support to Member States in their efforts to achieve national targets for health-system development and global health goals improved.	<b>INDICATORS</b>
	<b>10.3.1</b> Number of Member States where the inputs of major stakeholders are harmonized with national policies, measured in line with the Paris Declaration on Aid Effectiveness
	<b>BASELINE 2010</b>
	16
	<b>TARGETS TO BE ACHIEVED BY 2011</b>
	23

Budget (US\$ million)							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
5.3	2.3	2.2	0.4	0.5	2.1	4.5	<b>17.3</b>

<b>10.4</b> Country health-information systems that provide and use high-quality and timely information for health planning and for monitoring progress towards national and major international goals strengthened.	<b>INDICATORS</b>
	<b>10.4.1</b> Proportion of low- and middle-income countries with adequate health statistics and monitoring of health-related Millennium Development Goals that meet agreed standards
	<b>BASELINE 2010</b>
	35%
	<b>TARGETS TO BE ACHIEVED BY 2011</b>
	45%

Budget (US\$ million)							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
9.2	2.7	3.2	1.3	2.6	2.7	4.8	<b>26.6</b>

<b>10.5.</b> Better knowledge and evidence for health decision-making assured through consolidation and publication of existing evidence, facilitation of knowledge generation in priority areas, and global leadership in health research policy and coordination, including with regard to ethical conduct.	<b>INDICATORS</b>		
	<b>10.5.1</b> Proportion of countries for which high quality profiles with core health statistics are available from its open-access databases	<b>10.5.2</b> Number of countries in which WHO plays a key role in supporting the generation and use of information and knowledge, including primary data collection through surveys, civil registration or improvement or analysis and synthesis of health facility data for policies and planning	<b>10.5.3</b> Effective research for health coordination and leadership mechanisms established and maintained at global and regional levels
	<b>BASELINE 2010</b>		
	80%	30	Mechanisms operating at global and all regional levels
<b>TARGETS TO BE ACHIEVED BY 2011</b>			
85%	35	Mechanisms operating at global and all regional levels	

Budget (US\$ million)							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
6.0	2.7	1.5	6.0	2.2	2.0	17.3	<b>37.8</b>

<b>10.6</b> National health research for development of health systems strengthened in the context of regional and international research and engagement of civil society.	<b>INDICATORS</b>						
	<b>10.6.1</b> Proportion of low- and middle-income countries in which national health-research systems meet internationally agreed minimum standards;				<b>10.6.2</b> Number of Member States complying with the recommendation to dedicate at least 2% of their health budget to research (Commission on Health Research for Development, 1990)		
	<b>BASELINE 2010</b>						
	25%				10% increase from baseline 2008		
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
33%				8% increase from 2009 target			
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
4.7	2.3	0.8	2.6	1.9	1.5	3.1	<b>17.0</b>

<b>10.7</b> Knowledge management and eHealth policies and strategies developed and implemented in order to strengthen health systems.	<b>INDICATORS</b>						
	<b>10.7.1</b> Number of Member States adopting knowledge management policies in order to bridge the “know-how” gap particularly aimed to decrease the digital divide			<b>10.7.2</b> Number of Member States with access to electronic international scientific journals and knowledge archives in health sciences as assessed by the WHO Global Observatory for eHealth biannual survey		<b>10.7.3</b> Proportion of Member States with eHealth policies, strategies and regulatory frameworks as assessed by the WHO Global Observatory for eHealth biannual survey	
	<b>BASELINE 2010</b>						
	30			90		30	
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
45			100		50		
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
6.1	2.4	1.4	0.8	3.0	0.2	10.8	<b>24.8</b>

<b>10.8</b> Health-workforce information and knowledge base strengthened, and country capacities for policy analysis, planning, implementation, information-sharing and research built up.	<b>INDICATORS</b>						
	<b>10.8.1</b> Number of countries reporting two or more national data points on human resources for health within the past five years, reported in the Global Atlas of the Health Workforce				<b>10.8.2</b> Number of Member States with a national policy and planning unit for human resources for health		
	<b>BASELINE 2010</b>						
	75				50		
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
85				55			
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
8.7	3.6	4.1	3.2	5.2	5.5	6.8	<b>37.1</b>

<b>10.9</b> Technical support provided to Member States, with a focus on those facing severe health-workforce difficulties in order to improve the	<b>INDICATORS</b>						
	<b>10.9.1</b> Proportion of 57 countries with critical shortage of health workforce, as identified in <i>The world health report 2006</i> with a multi-year HRH plan				<b>10.9.2</b> Proportion of 57 countries with critical shortage of health workforce, as identified in <i>The world health report 2006</i> which have an investment plan for scaling up training and education of health workers		



## PROPOSED PROGRAMME BUDGET 2010–2011

production, distribution, skill mix and retention of the health workforce.	<b>BASELINE 2010</b>						
	At least 10%			At least 10%			
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
	At least 20%			At least 20%			
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
17.3	3.2	5.0	2.7	8.5	10.6	6.6	<b>54.0</b>

10.10 Evidence-based policy and technical support provided to Member States in order to improve health-system financing in terms of the availability of funds, social and financial-risk protection, equity, access to services and efficiency of resource use.	<b>INDICATORS</b>						
	<b>10.10.1</b> Number of Member States provided with technical and policy support to raise additional funds for health; to reduce financial barriers to access, incidence of financial catastrophe, and impoverishment linked to health payments; or to improve social protection and the efficiency and equity of resource use				<b>10.10.2</b> Number of key policy briefs prepared, disseminated and their use supported, which document best practices on revenue-raising, pooling and purchasing, including contracting, provision of interventions and services, and handling of fragmentation in systems associated with vertical programmes and inflow of international funds		
	<b>BASELINE 2010</b>						
	40				12 technical briefs		
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
	75				16 technical briefs		
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
7.4	2.7	1.6	4.5	2.2	4.6	2.9	<b>25.9</b>

10.11 Norms, standards and measurement tools developed for tracking resources, estimating the economic consequences of illness, and the costs and effects of interventions, financial catastrophe, impoverishment, and social exclusion, and their use supported and monitored.	<b>INDICATORS</b>						
	<b>10.11.1</b> Key tools, norms and standards to guide policy development and implementation developed, disseminated and their use supported, according to expressed need, that comprise resource tracking and allocation, budgeting, financial management, economic consequences of disease and social exclusion, organization and efficiency of service delivery, including contracting, or the incidence of financial catastrophe and impoverishment				<b>10.11.2</b> Number of Member States provided with technical support for using WHO tools to track and evaluate the adequacy and use of funds, to estimate future financial needs, to manage and monitor available funds, or to track the impact of financing policy on households		
	<b>BASELINE 2010</b>						
	Additional tools developed for resource tracking, additionality and economic burden; existing tools revised where necessary; framework drawn up for formulation of financing policy				30		
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
	Tools and frameworks modified, updated and disseminated as necessary				40		
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
4.2	3.3	0.7	1.8	0.8	1.1	3.9	<b>15.7</b>

<p><b>10.12</b> Steps taken to advocate additional funds for health where necessary; to build capacity in framing of health-financing policy and interpretation and use of financial information; and to stimulate the generation and translation of knowledge to support policy development.</p>	<b>INDICATORS</b>						
	<p><b>10.12.1</b> WHO presence and leadership in international, regional and national partnerships and use of its evidence in order to increase financing for health in low-income countries, or provide support to countries in design and monitoring of Poverty Reduction Strategy Papers, sector-wide approaches, medium-term expenditure frameworks, and other long-term financing mechanisms capable of providing social health protect consistent with primary health care</p>	<p><b>10.12.2</b> Number of Member States provided with support to build capacity in the formulation of health financing policies and strategies and the interpretation of financial data, or with key information on health expenditures, financing, efficiency and equity to guide the process</p>					
	<b>BASELINE 2010</b>						
	<p>WHO participation in 4 partnerships; country support provided on long-term financing options in 16 countries</p>	<p>Technical support provided to 55 countries, and annual updates of health expenditures to all Member States, together with information on the incidence of catastrophic expenditures in 90 countries</p>					
<b>TARGETS TO BE ACHIEVED BY 2011</b>							
<p>WHO participation in 6 partnerships; country support provided on long-term financing options in 28 countries</p>	<p>Technical support provided to 75 countries, and annual updates of health expenditures to all Member States, together with new information on the incidence of catastrophic expenditures in 20 countries</p>						
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
4.1	0.0	2.7	1.4	0.8	1.1	5.1	15.2

<p><b>10.13</b> Evidence based norms, standards and measurement tools developed to support member states to quantify and decrease the level of unsafe health care provided.</p>	<b>INDICATORS</b>						
	<p><b>10.13.1</b> Key tools, norms and standards to guide policy development, measurement and implementation disseminated and their use supported</p>	<p><b>10.13.2</b> Number of Member States participating in global patient safety challenges and other global safety initiatives, including research and measurement</p>					
	<b>BASELINE 2010</b>						
	<p>1 global safety standards and 10 major supporting tools</p>	30					
<b>TARGETS TO BE ACHIEVED BY 2011</b>							
<p>2 global safety standards and 20 major supporting tools</p>	45						
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
1.5	0.0	3.6	0.0	1.4	1.0	37.4	45.0

**STRATEGIC OBJECTIVE 11**

To ensure improved access, quality and use of medical products and technologies

**Scope**

Medical products include chemical and biological medicines; vaccines; blood and blood products; cells and tissues mostly of human origin; biotechnology products; traditional medicines and medical devices. Technologies include, among others, those for diagnostic testing, imaging, and laboratory testing. The work undertaken under this strategic objective will focus on making access more equitable (as measured by availability, price and affordability) to essential medical products and technologies of assured quality, safety, efficacy and cost-effectiveness, and on their sound and cost-effective use. For the sound use of products and technologies, work will focus on building appropriate regulatory systems; evidence-based selection; information for prescribers and patients; appropriate diagnostic, clinical and surgical procedures; vaccination policies; supply systems, dispensing and injection safety; and blood transfusion. Information includes clinical guidelines, independent product information and ethical promotion. The work outlined above will contribute to the implementation of WHO-led specific actions of the global strategy and plan of action on public health, innovation and intellectual property. In addition, in collaboration with other relevant international intergovernmental organizations – including WIPO, WTO and UNCTAD – specific actions will be undertaken concerning the application and management of intellectual property in support of health-related innovation, and to the promotion of public health.

**Links with other strategic objectives**

- Strategic objectives 1 to 5 (health outcomes): none of these objectives can be achieved without essential medical products, medicines and health technologies. With regard to access, work under this strategic objective will focus on “horizontal” issues such as comprehensive supply systems, pricing surveys and national pricing policies. On quality assurance and regulatory support, all WHO’s work is covered by this strategic objective. Work on rational use will focus on general aspects such as evidence-based selection of essential medical products and technologies, development of clinical guidelines, pharmacovigilance and patient safety, compliance with long-term treatment regimens and containing antimicrobial resistance.
- Strategic objective 10: work also contributes to health service delivery; sustainable financing of products and technologies, on which access also depends. An integrated approach to health systems in support of primary health care will be promoted.
- Strategic objective 7: good governance.
- Strategic objective 12: global public policy.
- Strategic objectives 1 and 2: global strategy and plan of action on public health, innovation and intellectual property.

### Total budget by location for the strategic objective for 2010–2011 (US\$ million)

Budget (US\$ million)							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
19.7	7.7	10.0	6.0	15.1	10.2	46.5	115.1

### Resource breakdown for the strategic objective for 2010–2011 (US\$ million)

	Countries	Regions	Headquarters	TOTAL
<b>All financing 2010–2011</b>	<b>48.2</b>	<b>20.5</b>	<b>46.5</b>	<b>115.1</b>
Percentage by level	41.8%	17.8%	40.4%	

### Budget by Organization-wide expected result and location

<b>11.1</b> Formulation and monitoring of comprehensive national policies on access, quality and use of essential medical products and technologies advocated and supported.	<b>INDICATORS</b>						
	<b>11.1.1</b> Number of Member States receiving support to formulate and implement official national policies on access, quality and use of essential medical products or technologies	<b>11.1.2</b> Number of Member States receiving support to design or strengthen comprehensive national procurement or supply systems	<b>11.1.3</b> Number of Member States receiving support to formulate and/or implement national strategies and regulatory mechanisms for blood and blood products or infection control	<b>11.1.4</b> Publication of a biennial global report on medicine prices, availability and affordability, based on all available regional and national reports			
	<b>BASELINE 2010</b>						
	68	25	52	Report published			
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
	73	30	58	Report published			
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
10.5	2.6	3.4	3.6	6.7	5.1	14.3	<b>46.2</b>

<b>11.2</b> International norms, standards and guidelines for the quality, safety, efficacy and cost-effective use of medical products and technologies developed and their national and/or regional implementation advocated and supported.	<b>INDICATORS</b>						
	<b>11.2.1</b> Number of new or updated global quality standards, reference preparations, guidelines and tools for improving the provision, management, use, quality, or effective regulation of medical products and technologies	<b>11.2.2</b> Number of assigned International Nonproprietary Names for medical products	<b>11.2.3</b> Number of priority medicines, vaccines, diagnostic tools and items of equipment that are prequalified for United Nations procurement	<b>11.2.4</b> Number of Member States for which the functionality of the national regulatory authorities has been assessed or supported			
	<b>BASELINE 2010</b>						
	30 additional	9 100	250	30			
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
	15 additional	9 200	300	45			
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
5.7	3.4	4.0	1.6	6.6	2.5	26.5	<b>50.3</b>

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<b>11.3</b> Evidence-based policy guidance on promoting scientifically sound and cost-effective use of medical products and technologies by health workers and consumers developed and supported within the Secretariat and regional and national programmes.	<b>INDICATORS</b>						
	<b>11.3.1</b> Number of national or regional programmes receiving support for promoting sound and cost-effective use of medical products or technologies	<b>11.3.2</b> Number of Member States using national lists, updated within the past five years, of essential medicines, vaccines or technologies for public procurement or reimbursement					
	<b>BASELINE 2010</b>						
	10	90					
<b>TARGETS TO BE ACHIEVED BY 2011</b>							
15	95						
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
3.5	1.8	2.6	0.7	1.8	2.6	5.7	<b>18.6</b>

## **STRATEGIC OBJECTIVE 12**

To provide leadership, strengthen governance and foster partnership and collaboration with countries, the United Nations system, and other stakeholders in order to fulfil the mandate of WHO in advancing the global health agenda as set out in the Eleventh General Programme of Work

### **Scope**

This strategic objective facilitates the work of WHO to achieve all other strategic objectives. Responding to priorities in the Eleventh General Programme of Work, it recognizes that the context for international health has changed significantly. The scope of this objective covers three broad, complementary areas: leadership and governance of the Organization; WHO's support for, presence in, and engagement with individual Member States; and the Organization's role in bringing the collective energy and experience of Member States and other actors to bear on health issues of global and regional importance.

The main innovation implicit in this objective is that it seeks to harness the depth and breadth of WHO's country experience in order to influence global and regional debates, thereby to influence positively the environment in which national policy-makers work, and contribute to the attainment of the health-related Millennium Development goals and other internationally agreed health-related goals.

### **Links with other strategic objectives**

This strategic objective is intrinsically linked to all the other objectives, as it builds on and supports the entire work of the Organization. As such it is closely related and complementary to strategic objective 13, to develop and sustain WHO as a flexible, learning Organization, enabling it to carry out its mandate more effectively and efficiently. The latter objective is more inward-looking, geared towards managerial and administrative issues, whereas strategic objective 12 is more outward-looking, focusing on issues of WHO leadership and governance, on work in Member States, and collaboration with partners including the United Nations System, at global, regional and country levels.

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## Total budget by location for the strategic objective for 2010–2011 (US\$ million)

Budget (US\$ million)							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
49.7	16.7	16.5	25.6	31.7	15.8	66.8	222.7

## Resource breakdown for the strategic objective for 2010–2011 (US\$ million)

	Countries	Regions	Headquarters	TOTAL
<b>All financing 2010–2011</b>	<b>87.2</b>	<b>68.8</b>	<b>66.8</b>	<b>222.7</b>
Percentage by level	39.1%	30.9%	30.0%	

## Budget by Organization-wide expected result and location

<b>12.1</b> Effective leadership and direction of the Organization exercised through enhancement of governance, and the coherence, accountability and synergy of WHO's work.	<b>INDICATORS</b>						
	<b>12.1.1</b> Proportion of documents submitted to governing bodies within constitutional deadlines in the six WHO official languages	<b>12.1.2</b> Level of understanding by key stakeholders of WHO's role, priorities and key messages as provided by a stakeholder survey					
	<b>BASELINE 2010</b>						
	75%	86% of stakeholders familiar/very familiar with WHO roles and priorities					
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
	85%	96% of stakeholders familiar/very familiar with WHO roles and priorities					
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
38.3	5.6	11.7	19.8	22.0	13.5	40.4	<b>151.2</b>

<b>12.2</b> Effective WHO country presence <sup>1</sup> established to implement WHO country cooperation strategies that are aligned with Member States' health and development agendas, and harmonized with the United Nations country team and other development partners.	<b>INDICATORS</b>						
	<b>12.2.1</b> Number of Member States where WHO is aligning its country cooperation strategy with the country's priorities and development cycle and harmonizing its work with the United Nations and other development partners within relevant frameworks, such as the United Nations Development Assistance Framework, Poverty Reduction Strategy Papers and Sector-Wide Approaches	<b>12.2.2</b> Proportion of WHO country offices which have reviewed and adjusted their core capacity in accordance with their country cooperation strategy					
	<b>BASELINE 2010</b>						
	80	40%					
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
	115	60%					
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
8.0	7.7	1.2	1.5	1.8	0.7	3.4	<b>24.2</b>

<sup>1</sup> WHO country presence is the platform for effective collaboration with countries for advancing the global health agenda, contributing to national strategies, and bringing country realities and perspectives into global policies and priorities.

<b>12.3</b> Global health and development mechanisms established to provide more sustained and predictable technical and financial resources for health on the basis of a common health agenda which responds to the health needs and priorities of Member States.	<b>INDICATORS</b>						
	<b>12.3.1</b> Number of health partnerships in which WHO participates that work according to the best practice principles for Global Health Partnerships			<b>12.3.2</b> Proportion of health partnerships managed by WHO that comply with WHO partnership policy guidance		<b>12.3.3</b> Proportion of countries where WHO is leading or actively engaged in health and development partnerships (formal and informal), including in the context of reforms of the United Nations system	
	<b>BASELINE 2010</b>						
	10			14%		Over 50%	
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
30			50%		70%		
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
2.0	1.1	2.2	2.9	1.7	1.1	9.2	<b>20.1</b>

<b>12.4</b> Essential multilingual health knowledge and advocacy material made accessible to Member States, health partners and other stakeholders through the effective exchange and sharing of knowledge.	<b>INDICATORS</b>						
	<b>12.4.1</b> Average number of page views/visits per month to the WHO headquarters' web site				<b>12.4.2</b> Number of pages in languages other than English available on WHO country and regional offices' and headquarters' web sites		
	<b>BASELINE 2010</b>						
	48 million /5 million				22 000		
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
65 million /6 million				30 000			
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
1.5	2.4	1.5	1.4	6.2	0.5	13.8	<b>27.2</b>



**STRATEGIC OBJECTIVE 13**

To develop and sustain WHO as a flexible, learning organization, enabling it to carry out its mandate more efficiently and effectively

**Scope**

The scope of this objective covers the functions that support the work of the Secretariat in country and regional offices and at headquarters. Work is organized according to entire results-based management framework and processes, from strategic and operational planning and budgeting to performance monitoring and evaluation; management of financial resources through monitoring, mobilization and coordination Organization-wide, ensuring an efficient flow of available resources throughout the Organization; management of human resources, including human resource planning, recruitment, staff development and learning, performance management, and conditions of service and entitlements; provision of operational support, ranging from the management of infrastructure and logistics, language services, staff and premises security, and staff medical services to the management of information technology; and appropriate accountability and governance mechanisms across all areas.

The strategic objective also covers broad institutional reform that will ensure that the above functions are continuously strengthened and provide better, more efficient and cost-effective support to the Organization. It is closely linked to broader reforms within the United Nations system at both country and global levels.

**Links with other strategic objectives**

This objective should not be considered in isolation from the other strategic objectives, as its scope reflects and is responsive to the needs of the Organization as a whole. In particular, it should be read in conjunction with strategic objective 12, to provide leadership, strengthen governance and foster partnership and collaboration with countries and to fulfil the mandate of WHO in advancing the global health agenda. Strategic objective 13 is more inward-looking, geared towards managerial and administrative issues, whereas strategic objective 12 is more outward-looking, focusing on issues of WHO leadership and governance and on collaboration with Member States and partners at global, regional and country levels.

### Total budget by location for the strategic objective for 2010–2011 (US\$ million)

Budget (US\$ million)							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
125.2	29.6	44.5	36.6	31.0	32.9	224.1	523.9

### Resource breakdown for the strategic objective for 2010–2011 (US\$ million)

	Countries	Regions	Headquarters	TOTAL
<b>All financing 2010–2011</b>	<b>111.2</b>	<b>188.5</b>	<b>224.1</b>	<b>523.9</b>
Percentage by level	21.2%	36.0%	42.8%	

### Budget by Organization-wide expected result and location

<b>13.1</b> Work of the Organization guided by strategic and operational plans that build on lessons learnt, reflect country needs, are elaborated across the Organization, and used to monitor performance and evaluate results.	<b>INDICATORS</b>						
	<b>13.1.1</b> Proportion of country workplans that have been peer reviewed with respect to their technical quality, that they incorporate lessons learnt and reflect country needs	<b>13.1.2</b> Office Specific Expected Results (OSERs) for which progress status has been updated within the established timeframes for periodic reporting					
	<b>BASELINE 2010</b>						
	75%	80%					
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
90%	85%						
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
10.1	2.1	4.7	3.6	2.7	7.2	4.8	35.3

<b>13.2</b> Sound financial practices and efficient management of financial resources achieved through continuous monitoring and mobilization of resources to ensure the alignment of resources with the programme budgets.	<b>INDICATORS</b>						
	<b>13.2.1</b> Degree of compliance of WHO with International Public Sector Accounting Standards	<b>13.2.2</b> Amount of voluntary contributions that are classified as fully and highly flexible					
	<b>BASELINE 2010</b>						
	International Public Sector Accounting Standards implemented	US\$ 200 million					
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
Not available	US\$ 300 million						
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
18.2	4.9	11.0	3.2	6.1	3.2	24.7	71.3

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<b>13.3</b> Human resource policies and practices in place to attract and retain top talent, promote learning and professional development, manage performance, and foster ethical behaviour.	<b>INDICATORS</b>						
	<b>13.3.1</b> Proportion of offices with approved human resources plans for a biennium			<b>13.3.2</b> Number of staff assuming a new position or moving to a new location during a biennium (delayed until biennium 2010–2011)		<b>13.3.3</b> Proportion of staff in compliance with the cycle of the Performance Management Development System	
	<b>BASELINE 2010</b>						
	75%			300		75%	
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
85%			300		85%		
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
9.5	3.2	3.8	3.2	2.2	2.2	13.8	<b>37.9</b>

<b>13.4</b> Management strategies, policies and practices in place for information systems, that ensure reliable, secure and cost-effective solutions while meeting the changing needs of the Organization.	<b>INDICATORS</b>						
	<b>13.4.1</b> Number of information technology disciplines implemented Organization-wide according to industry-best-practices benchmarks				<b>13.4.2</b> Proportion of offices using consistent real-time management information		
	<b>BASELINE 2010</b>						
	3				Headquarters, 5 Regional offices and associated country offices		
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
5				Headquarters, 5 Regional offices and associated country offices			
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
15.0	7.7	8.6	9.6	7.7	4.4	56.4	<b>109.4</b>

<b>13.5</b> Managerial and administrative support services <sup>1</sup> necessary for the efficient functioning of the Organization provided in accordance with service-level agreements that emphasize quality and responsiveness.	<b>INDICATORS</b>						
	<b>13.5.1</b> Proportion of services delivered by the global service centre according to criteria in service-level agreements						
	<b>BASELINE 2010</b>						
	75%						
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
90%							
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
41.4	6.1	2.7	4.6	0.8	2.3	75.9	<b>133.8</b>

<sup>1</sup> Includes services in the areas of information technology, human resources, financial resources, logistics, and language services.

<b>13.6</b> Working environment conducive to the well-being and safety of staff in all locations.	<b>INDICATORS</b>						
	<b>13.6.1</b> Degree of satisfaction with quality of services in all major offices resulting from the provision of effective infrastructure support	<b>13.6.2</b> Proportion of offices that have conducted regular evacuation exercises					
	<b>BASELINE 2010</b>						
	60%	50%					
	<b>TARGETS TO BE ACHIEVED BY 2011</b>						
75%	80%						
<b>Budget (US\$ million)</b>							
<b>Africa</b>	<b>The Americas</b>	<b>South-East Asia</b>	<b>Europe</b>	<b>Eastern Mediterranean</b>	<b>Western Pacific</b>	<b>Headquarters</b>	<b>TOTAL</b>
31.0	5.6	13.6	12.5	11.5	13.5	48.6	<b>136.3</b>