



PAN AMERICAN HEALTH ORGANIZATION
WORLD HEALTH ORGANIZATION



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SPECIAL SESSION

PROPOSED DECLARATION BY MEMBER STATES OF THE AMERICAS ON ALLOCATION OF FUNDS BY WHO TO THE REGION OF THE AMERICAS¹

Political Considerations

1. The Region of the Americas receives fewer and fewer resources from other international donors.
2. America is a region with profound inequities, not only among countries but also within them.

Considerations Regarding the World Health Organization Budget

3. In 2006, WHO approved a model for strategic resource allocation based on the principles of equity, results-based management, and performance, among others. With this model, a “validation mechanism” was established and has been used since the 2006-2007 biennium as the basis for validating the budget procedure in order to guarantee a “fair allocation” to the main WHO offices, that is, the six Regional Offices and Headquarters (EB118/7, *Strategic resource allocation*). The average allocation for AMRO, according to the validation mechanism, is 7.0% (the validation margin for AMRO is between 6.3% and 7.7%).
4. However, WHO Executive Board document EB132/27 (Proposed programme budget 2014–2015) indicates that for the 2014-2015 biennium, AMRO will receive 4.4%,

¹ English translation provided by the Government of Mexico, revised by PASB.

since “in order to respond to the overwhelming consensus that a new approach is required, the proposed programme budget 2014-2015 does not employ the strategic resource allocation validation mechanism”.

5. Even though in 2011 there was an increase in the United Nations system quotas and despite the fact that the “Manifesto of Member States of the Region of the Americas for a “fair allocation” of WHO Programme Budgets and available resources” was presented at the 64th World Health Assembly, the Region received 6.1%, which was less than the 6.3% that the validation mechanism determines. (Document A64/7, *Medium-term strategic plan 2008–2013 and Proposed programme budget 2012–2013*).

6. For the 2013-2014 biennium, the Region of the Americas will, in absolute terms, be the WHO region that receives the fewest resources. It is important to point out that WHO documents indicate that AMRO will receive 176 million dollars; however, 4.4% of WHO’s projected budget (3.977 billion dollars) would come to 174.99 million.

7. In relative terms—that is, the total budget for the Region divided by the number of countries with which the Regional Office works—AMRO is ahead only of Europe (4.6 million per AMRO country compared to 4.27 million for Europe).

PAHO Budget

8. PAHO’s budget increased by 9% during the last biennium.

9. Given asymmetrical information, it is impossible to determine the percentages of final budgets allocated by WHO to PAHO, except for the basic programs component, which constitutes the greatest percentage of PAHO resources (94.17% on average of what was approved).

10. Given the unfavorable international economic panorama, an adjustment was made to the PAHO budget for the 2012-2013 biennium, reducing the amount **approved** by WHO for the AMRO region by 35% (from 256 to 173 million dollars).

11. Since the Health Agenda for the Americas began in the 2008-2009 biennium, the Region has seen, to date, a shortfall of **244 million dollars**.

12. If this trend continues, we calculate that the amount of AMRO resources **not received from WHO** would come to about **459 million dollars**, equivalent to 57% of the annual budget.

13. Considering what actually reaches PAHO from WHO (about 54.6% of what WHO allocates to its Regions), if this trend continues, it is foreseeable that of the 4.4% allocated to AMRO (176 million dollars), we would receive only about 100 million dollars of the

funds available for the 2014-2015 biennium, which is about 12% of our average annual budget.

Conclusions

- (a) Considering the great challenges facing the Region of the Americas in terms of an increase in the demand for services in different areas of health and, at the same time, diminished resource allocation from other international sources.
- (b) Recognizing that in the Region of the Americas great inequity persists not only among countries but also within them.
- (c) Stressing the solidarity of the people of the Americas towards health, both regionally and globally.
- (d) Reiterating the content of the “Manifesto of Member States of the Region of the Americas for a “fair allocation” of WHO Programme Budgets and available resources” presented at the 64th World Health Assembly in 2011, in which the Americas requested that, when approving the budget, all WHO Member States take into consideration that it should be fair for the six Regional Offices and Headquarters.
- (e) Expressing surprise that, given the reform process in the World Health Organization, the agreed validation formula is not respected in the resource allocation process and that this sensitive matter is completed without giving the Member States a clear explanation of the mechanisms for distributing resources to the Regional Offices.
- (f) Pointing out the lack of clarity, within the new framework of the implementation of WHO programs, regarding how Regional Offices may reassign surpluses from one category for use in another.

Request

14. The Member States of the Region of the Americas request the following of the WHO Secretariat:

- (a) In order to end deficits in the allocation of resources to AMRO, with the resulting impact on the work done by the Regional Office, **WHO should guarantee full allocation of the equivalent of 4.4% of the WHO budget.**
- (b) For subsequent bienniums, there should be revisions of the regional budget allocation criteria. This should be done in advance and Member States should be

made aware of this in a timely manner so that they are aware of the criteria and are able to take part in the decision-making process.

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