

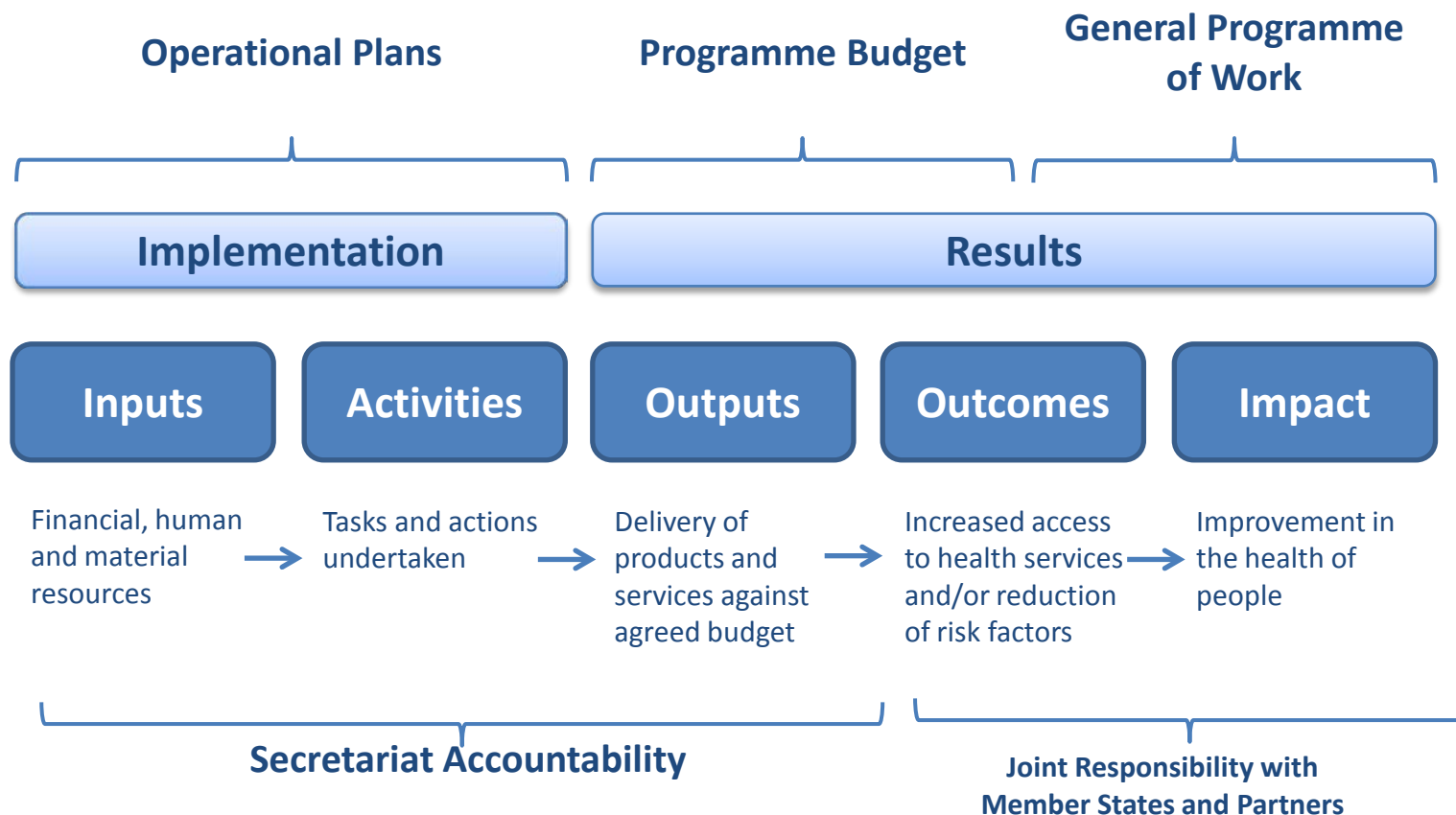
12th Global Program of Work and Program Budget 2014/15

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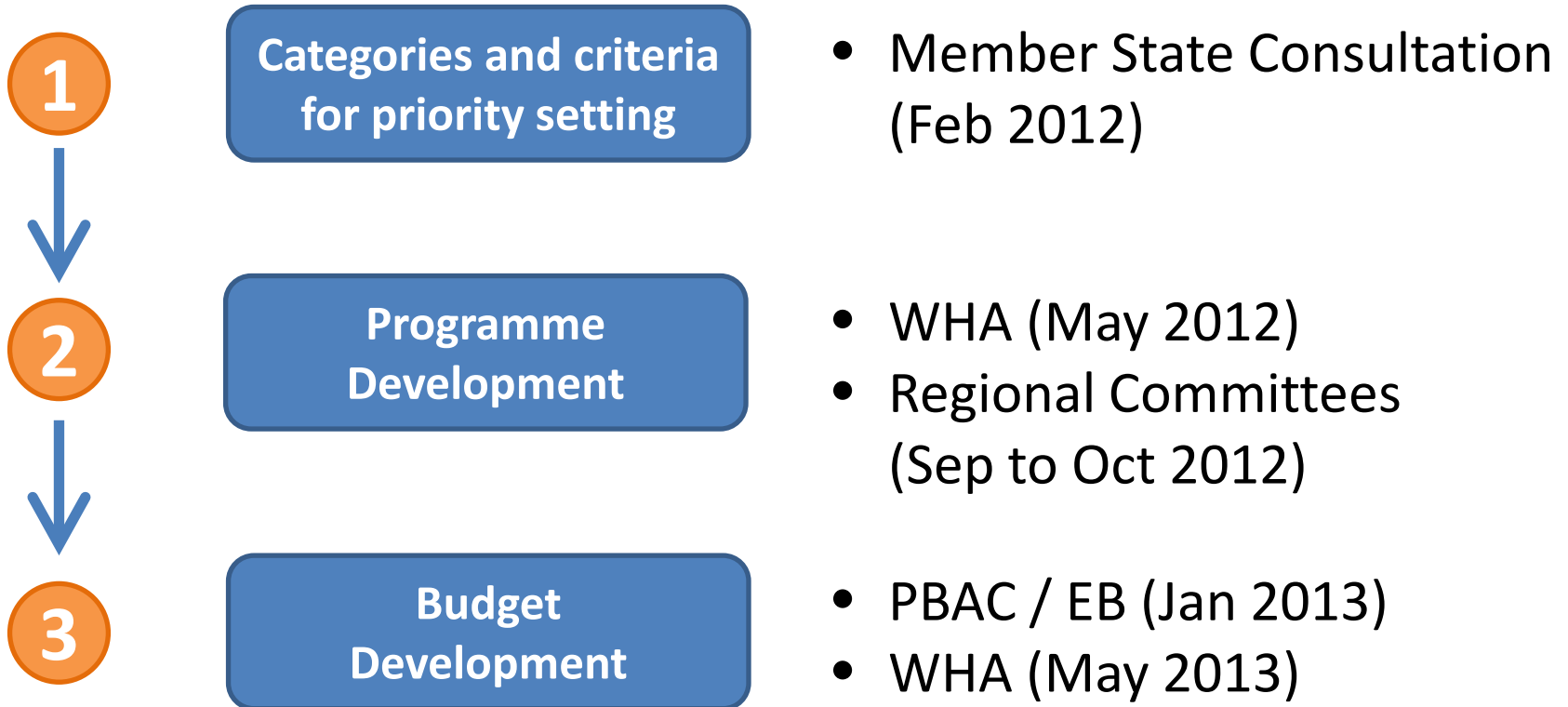
What is the GPW?

- A 6 year vision and mission for WHO
- Framework for priority setting and accountability
- Results framework – impacts and outcomes
- Focuses on direct work of WHO and the resulting public health impact
- The PB (2 years) build on it

Results chain



The Process



Priority setting

CATEGORIES for PRIORITY SETTING

1. Communicable Diseases
2. Non-communicable Diseases
3. Promoting health through the life course
4. Health Systems
5. Preparedness, Surveillance, and Response

CRITERIA for PRIORITY SETTING

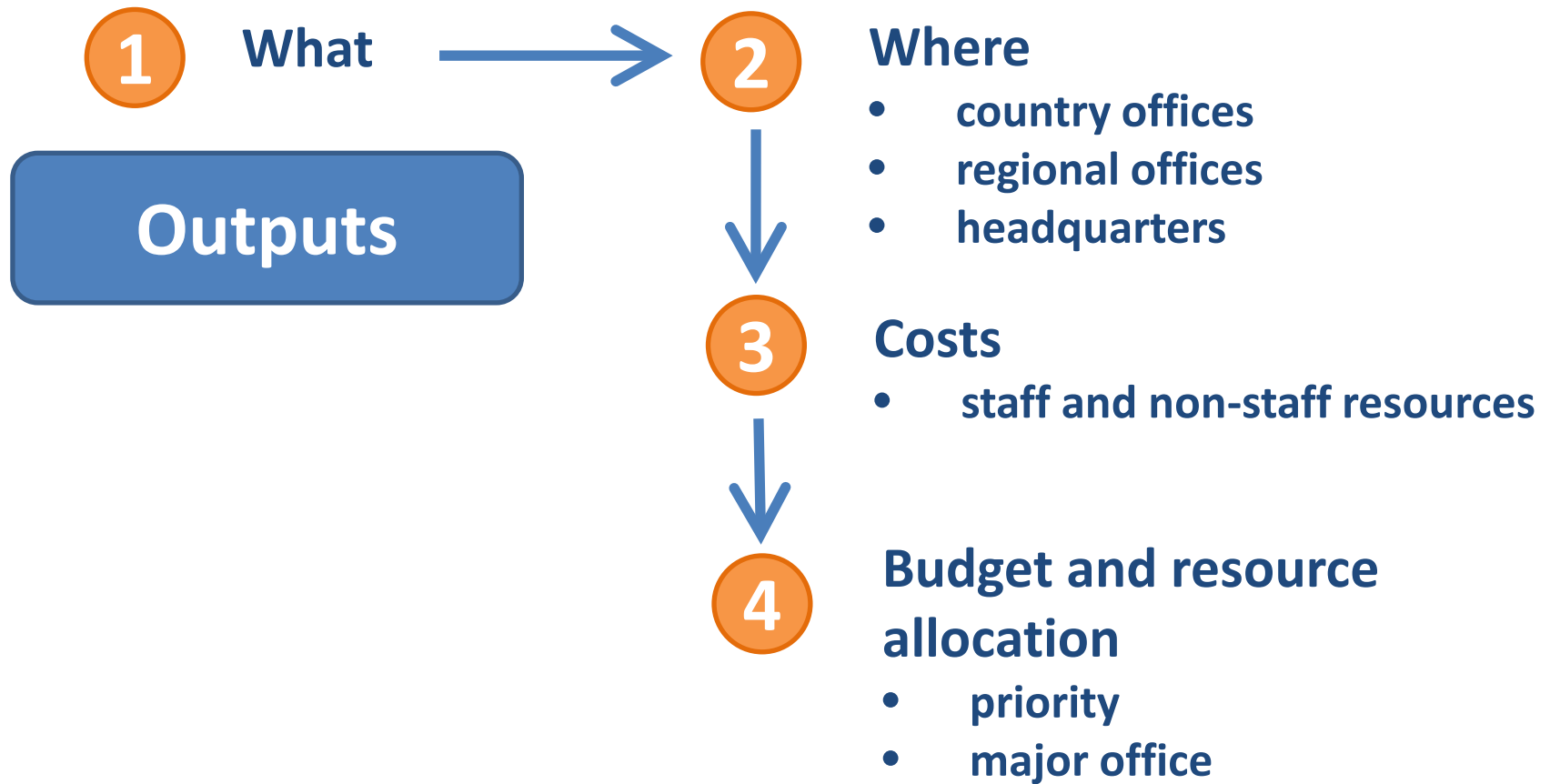
- Current health situation
- Needs of individual countries
- Internationally agreed goals and instruments
- Evidence-based, cost-effective interventions
- Comparative advantage of WHO

Programme and Budget 2014-15

Biennial programme

- Based on the 12th General Programme of Work
 - Principles
 - Priorities
 - Impacts and outcomes
- Further develops the
 - Outputs
 - Budget and resource allocations (not included in the global regional committee draft)

Budget development



Next steps

- **PBAC and EB (Jan 2013)** - Draft 2 PB 2014-15 to be presented including updated programme priorities and results chain and proposed budget based on costing of outputs
- **WHA (May 2013)** - draft GPW12 and PB 2014-15 for approval by Member States

The European Perspective

In support of the One WHO and One Programme budget

- Building on the global framework and adding regional specificities
- Aiming for optimal division of labour between levels (HQ, Regions, and countries)

Two-step process

- RC62 – specific priorities and deliverables
- RC63 – “*Contract*” between RC and Secretariat overseen by SCRC

Programme budget as a strategic tool for accountability, i.e., the “*Conceptual forerunner*” of the “*Contract*”

- Concrete, prioritized and tangible deliverables
- Pilot test in 2012-2013
- Roll-out in 2014-2015

The regional perspective

What will be delivered by the Secretariat?

The regional outcome portfolio

- Evolution rather than revolution – process already started in 2012-2013 operational planning
- 2012-2013 Outcome portfolio: 27 Key Priority Outcomes and 57 Other Priority Outcomes
- 2014-2015 Outcome portfolio: Currently stringent review taking place – expecting an about 20% change

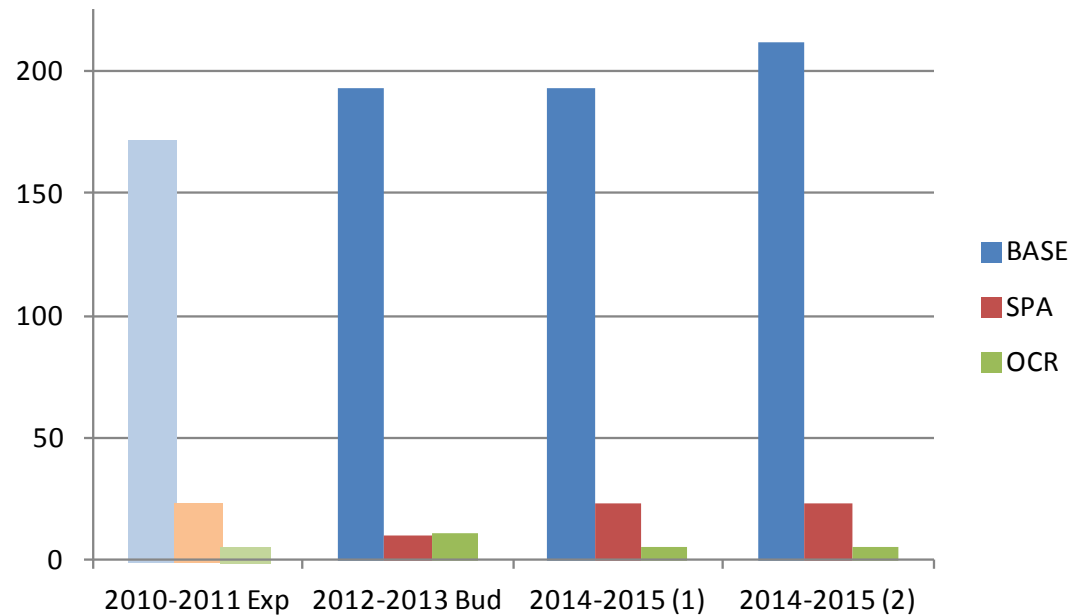
The regional perspective

The budget (all segments)

Two scenarios for 2014-2015:

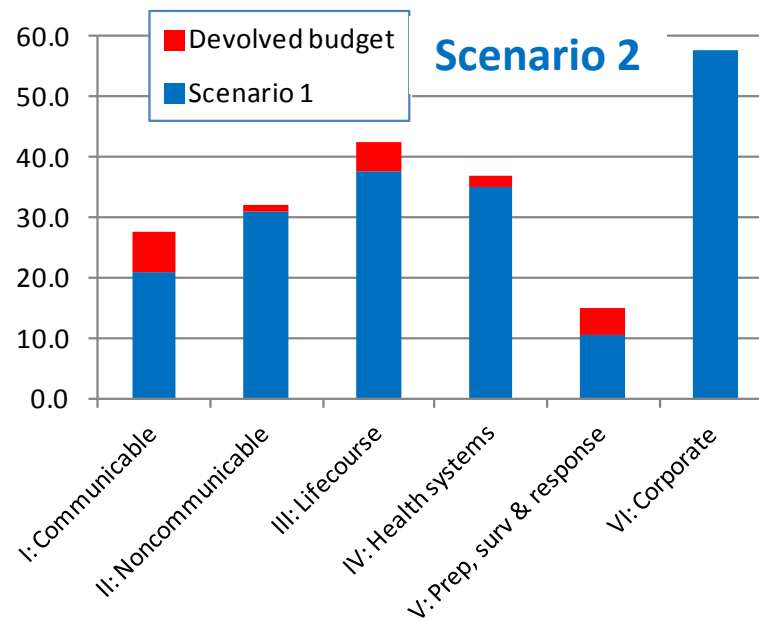
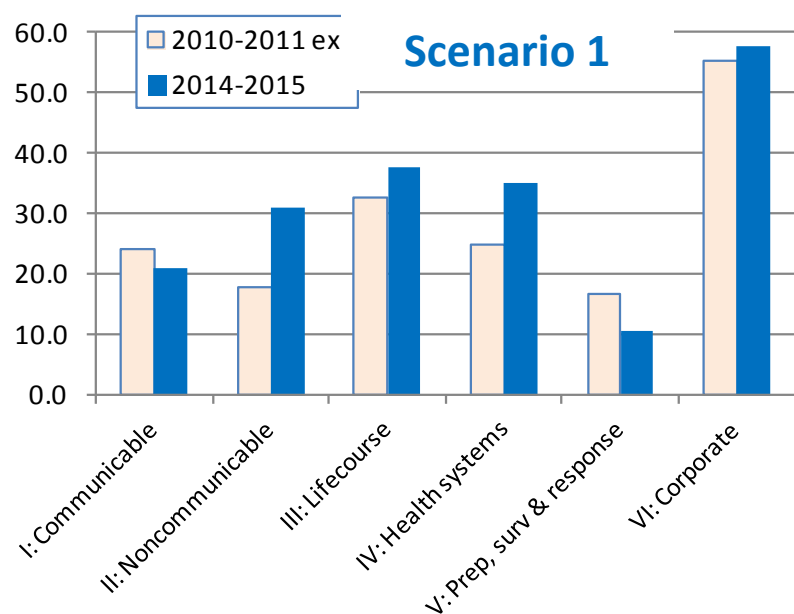
(1) Unchanged overall envelope for BASE (→ total budget \$221M)

(2) Devolved functions from HQ (→ total budget \$240M)



The regional perspective

The BASE budget by Category



- Scenario 1:** Continued increased emphasis on **II: Non-communicable diseases**, **III: Promoting health throughout the life course**, and **IV Health systems**
 Decreased emphasis on **I: Communicable diseases** and **V: Preparedness, surveillance and response**
- Scenario 2:** Functions & budget devolved in particular for **I: Communicable diseases**, **III: Promoting health throughout the life-course** and **V: Preparedness, surveillance and response**

The regional perspective

Four issues for consideration and guidance by the Regional Committee

1. Are EURO's priorities right:
 - Across categories?
 - Within categories?
2. Is EURO's business model right?
3. What would be the optimal division of labour among HQ-RO-CO?
4. What is a feasible focus for up-front funding of the Programme budget:
 - Categories?
 - Global Outcomes?
 - Regional Outcomes?
 - More specified?