

EDITORIAL

Making an impact at the country level

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Overcoming the challenges of achieving universal health coverage and ensuring health security are among the key priorities to be addressed by all countries of the WHO European Region, and are two of the three main priorities of the WHO Director-General. In this era of sustainable development, the needs and expectations of health ministries are increasing. Requests for greater support in addressing the determinants of health reach WHO at all three levels of the Organization. To have an impact on these determinants, it is important that they are tackled upstream, which requires “whole-of-government” and “whole-of-society” approaches. This is a challenge for health ministries as it necessitates strong political commitment from heads of state, as well as strong leadership from other ministers in national cabinets, and the provision of both evidence and examples of good practice for embarking on policy dialogues for change.

These challenges have an impact on the way WHO works with, in and for countries. WHO is increasingly recognized as a key health partner, delivering guidance, policy advice and technical assistance to countries that are aiming to achieve positive changes that impact health.

One important element in delivering support to countries is a country presence, namely the country offices (COs) located mainly in the central and eastern part of the Region. Over the years, COs have played a central role in strengthening relations between countries and the WHO Regional Office for Europe by establishing close relations with national health ministries. The advocacy role of the COs has been crucial in promoting public

health policies and ensuring that evidence and information are available to support decision-making processes. The roles and responsibilities of COs have gradually evolved over the years from political, administrative and technical activities to leadership, health diplomacy, resource mobilization and coordination of partnerships. An effective country presence is without doubt essential for garnering trust and credibility, and more importantly for making a measurable impact on the health indicators of countries in the European Region.

WHO’s overall leadership in health and its work at the country level depend heavily on its main asset – the staff who work in the COs, and those in regional offices and headquarters who backstop the COs and the WHO representatives (WRs) in a coordinated, cross-divisional manner. Staff at the regional and global levels broker, coordinate and provide the evidence required for outcomes at the country level. Normative work, research and evidence required for policy-making continue to be important for driving policy at the country level, ensuring that human and financial resources are sufficient in countries and are aligned with achieving outcomes rather than outputs. However, the WRs and CO staff are vital to achieving impacts at the country level, not only as a result of the coordination of technical assistance that they provide, but also because they play other significant roles, such as convening policy dialogues on priority issues, coordinating development partners at the country level, managing health-related work within the United Nations family, and advocating for health through increased use of communications and social media. Health leadership and stewardship, negotiation skills and health diplomacy are

increasingly important skills required of WRs as countries strive to achieve universal health coverage and to implement the health agenda of the Sustainable Development Goals.

This special issue of *Public Health Panorama*, entitled “Countries at the Centre”, looks at achievements in some countries of the WHO European Region resulting from WHO’s support coordinated by the COs. This collection of articles provides the reader with examples of good practice and an overview of the progress made in some countries as a result of the effective policies and interventions promoted by our Organization and also clearly demonstrates the added value of WHO, which although “shy by design”, has strong and visible impacts. ■