

**Reproductive health research at WHO:  
a new beginning**

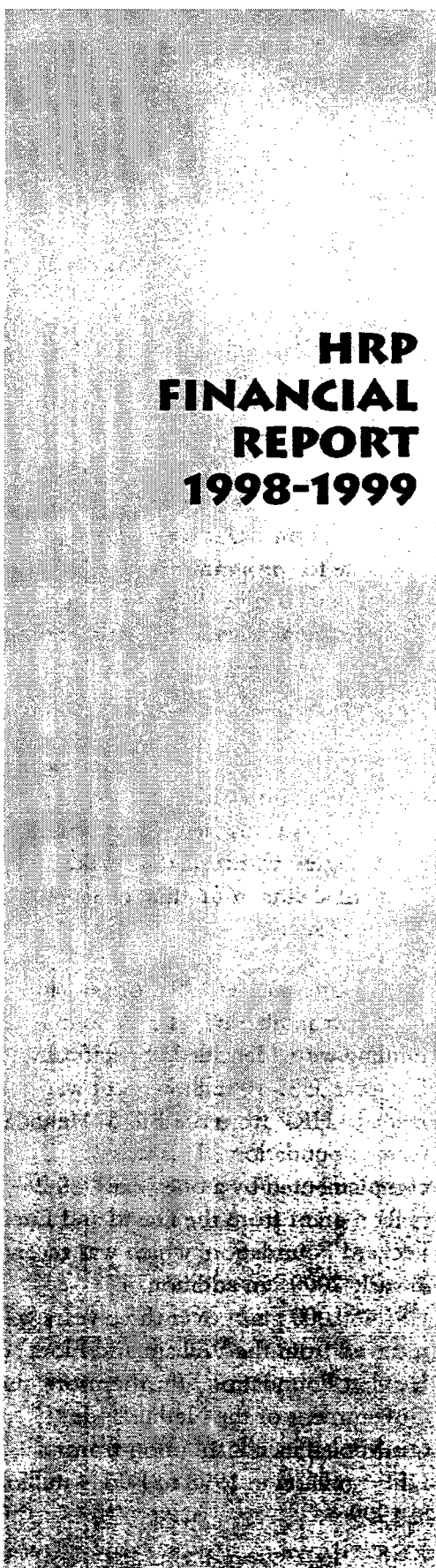
**HRP  
Financial Report  
1998 - 1999**



**World Health Organization  
Geneva**

**WHO/RHR/HRP/00.4  
(HRP/PCC(13)/2000/8.1 AND 8.2)**





## HRP FINANCIAL REPORT 1998-1999

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### INTRODUCTION

In June 1997, the UNDP/UNFPA/WHO/World Bank Special Programme of Research, Development and Research Training in Human Reproduction (HRP) *Proposed Programme Budget for the Financial Period 1998-1999*

(WHO/HRP/97.2) was approved by the HRP Policy and Coordination Committee (PCC). This budget outlines a programme of work totalling US\$ 40.7 million for the biennium, and represents the plan of work that was implemented in 1998-1999. This report summarizes the income received, financial implementation and other financial matters relating to this budget and plan of work.

This document is based on and summarizes information available in the WHO *Financial Report and Audited Financial Statements for the period 1 January 1998 - 31 December 1999* (document A53/17), which was approved by the World Health Assembly in May 2000. As such, this programme-specific document is not the subject of a separate audit, and is not intended to replace the audited *WHO Financial Report*. Rather, it is intended to provide PCC and other interested parties with information specifically relevant to HRP, as requested by PCC and the HRP Standing Committee.

## BUDGET

The *Proposed Programme Budget for the Financial Period 1998-1999* totalled US\$ 40.7 million for the biennium. The budget and programme of work was organized both by the "programme components" that were used in previous biennia, as well as by the research priorities that were identified in the document "Sexual and Reproductive Health Research Priorities for WHO for the period 1998-2003."

## INCOME AND RESOURCES

The 1998-1999 budget was financed from the following sources: (1) balances brought forward from 1996-1997; (2) income from the HRP cosponsors, including WHO; (3) income from national governments, and (4) contributions of foundations, United Nations System agencies, and other donors. This information is summarized in Table 1 and Figure 1. (All Tables and Figures referred to in this report are found at the end of the text).

As shown in Figure 1, the generous support of three of the HRP cosponsors accounted for over a third of total income (UNDP did not make a contribution during this biennium). Contributions from national governments, however, accounted for the largest proportion, making up more than half of the total income. Income from foundations and United Nations system agencies, while accounting for only 11% of the total, represents an important area of income growth. Taken together with the balance brought forward from 1996-1997, total resources available during 1998-1999 came to just over US\$ 34 million. Details of income

in 1998-1999 from all sources are shown in Table 2, while a table of income dating back to 1970 is shown in Annex 1.

With income falling short of the budget by almost US\$ 7 million, financial implementation was constrained during the biennium. However, this situation was further compounded by the strict enforcement of the WHO Financial Rules and Regulations by the new WHO Administration, which required that HRP increase the carry-over balance in order to cover salary obligations in early 2000. Taken together, these factors meant that only US\$ 28 million was available for programme implementation in 1998-1999; this represented a considerable constraint on the ability of HRP to implement the approved plan of work. Posts that were vacated in 1998-1999 were not filled, support to new projects was temporarily suspended, and support to ongoing projects was restrained. Programme management was forced to make substantial cuts in funding in all technical areas.

In the latter part of 1999, the situation started to ameliorate, as new sources of funding were identified. Specifically, a five-year, US\$ 10 million grant was made to HRP from the Bill & Melinda Gates Foundation. This was complemented by a one-year US\$ 2 million grant from the David and Lucile Packard Foundation, which was received in early 2000. In addition, a US\$ 450,000 grant over three years was received from the William and Flora Hewlett Foundation. Furthermore, the Government of the Netherlands quadrupled its contribution from Dfl. 1 million in 1998 to Dfl. 4 million in 1999.

## INCOME FROM DESIGNATED FUNDING

PCC, at its meeting in June 1997, reviewed a report on the advantages and disadvantages of accepting contributions designated or specified for particular activities. At this meeting, PCC endorsed the practice of accepting designated contributions, provided that they met a series of "Conditions for Acceptance of Designated Contributions" that were also endorsed at the meeting.

During 1998-1999, HRP accepted the 12 designated contributions listed in Annex 2. These contributions could be accepted as they fulfilled the conditions in footnote 1 of "Conditions for Acceptance of Designated Contributions", namely that they are each for a specific activity within the PCC-approved programme of work. In accordance with established practice, the Standing Committee has been informed of these designated contributions.

## EXPENDITURE

Obligations incurred during the biennium totalled US\$ 28.3 million, resulting in an overall financial implementation rate of 70%, as shown in Table 3a. This Table also compares expenditure to budget for technical and administrative costs separately. Due to the financial constraints described in the previous section, the expenditure on the operational budget of HRP was restricted to just over 50% of its budget. The expenditure on "technical evaluation and support" was high, due to the need to engage short-term staff and consulting services, in the place of vacated fixed-term posts, to ensure that ongoing projects and activities received the support that they required.

Table 3b also compares expenditure to budget, but in this case shows a breakdown by HRP "programme area". This Table and Figure 2 show the highest implementation rate in the area of "general technical activities," since it was not possible to reduce these expenditures over the short term.

## NATIONAL REPRODUCTIVE HEALTH RESEARCH

The budget for HRP's support to national reproductive health research and institution strengthening is set by PCC at half of the "global" research and development budget. In light of the difficult financial situation facing HRP in 1998-1999, funding to national reproductive health research and institution strengthening had to be cut alongside the other activities of the Programme. However, in making these cuts, care was taken to ensure that the 1:2 ratio (national reproductive health research vs. global research and development) was maintained.

## THE DIRECTOR'S INITIATIVE FUND

The "Director's Initiative Fund" facility is used at the discretion of Director, HRP to support new and emerging initiatives in reproductive health research. In light of the tight financial situation in 1998-1999, the "Director's Initiative Fund" facility was not utilized.

## CONCLUSION

In 1998-1999, HRP was faced with serious funding constraints, which restricted its ability to implement the approved programme of work.

However, a combination of new sources of income, an explicit process of prioritization in 2000-2001, and increased carry-over cash balances place the Programme in a much stronger position in 2000-2001. Specifically, in 2000-2001, the implementation of the "priority 1" budget will most likely be possible, and with new sources of additional income, the "priority 2" or even the full programme of work proposed in the *HRP Programme Budget 2000-2001* will be within reach.

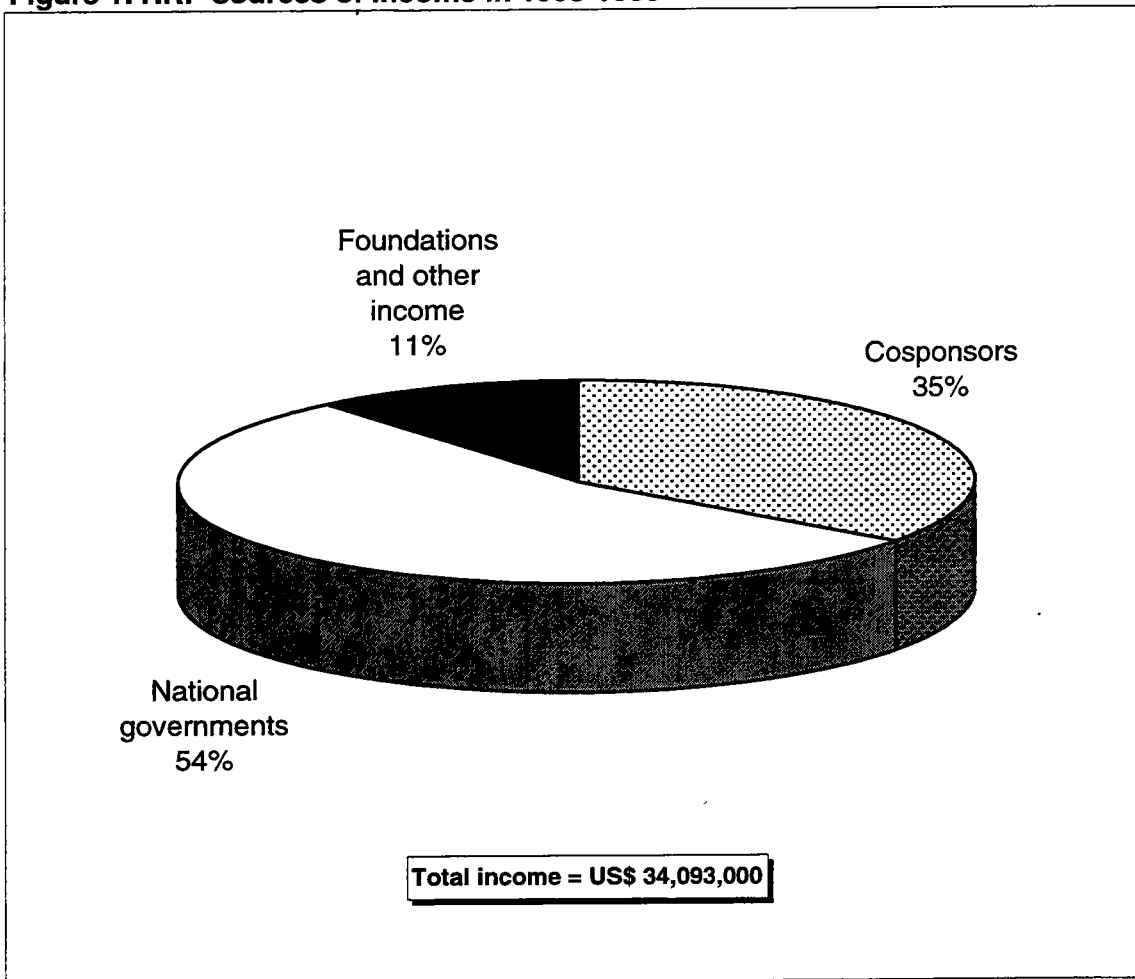
**Table 1. 1998-1999 Income and Summary Financial Statement (US\$000)**

<b>Income <sup>(1)</sup></b>	
Cosponsors	11,988
National governments	18,426
Foundations and other income	3,679
<b>Total Income</b>	<b>34,093</b>
<b>Summary Financial Statement</b>	
Unobligated balance as at 1 January 1998	388
1998-1999 Income	34,093
<b>Total resources</b>	<b>34,481</b>
Less 1998-1999 Obligations	28,332
<b>Unobligated balance as at 31 December 1999</b>	<b>6,149</b>

**Notes**

(1) See Table 2 for a detailed breakdown of Programme income.

**Figure 1. HRP sources of income in 1998-1999**



**Table 2. 1998-1999 Income<sup>(1)</sup> (US\$000)**

Source	1998	1999	Total 1998-1999
<b>Cosponsors</b>			
United Nations Development Programme	-	-	-
United Nations Population Fund	3,000	3,000	6,000
World Health Organization	725	513	1,238
The World Bank	2,500	2,250	4,750
<i>Subtotal Cosponsors</i>	<i>6,225</i>	<i>5,763</i>	<i>11,988</i>
<b>National governments</b>			
Canada	282	265	547
China	55	55	110
Finland	151	-	151
Germany	691	519	1,210
India	-	35	35
Mexico	3	4	7
Netherlands	538	1,888	2,426
Norway	1,475	1,394	2,869
Spain	-	20	20
Sweden	1,282	1,180	2,462
Switzerland	177	163	340
Thailand	40	19	59
United Kingdom	2,353	1,587	3,940
United States of America	2,000	2,250	4,250
<i>Subtotal national governments</i>	<i>9,047</i>	<i>9,379</i>	<i>18,426</i>
<b>Foundations, United Nations and other income</b>			
Contraceptive Research and Development Program	-	28	28
Ford Foundation	78	-	78
Bill & Melinda Gates Foundation	-	2,000	2,000
William and Flora Hewlett Foundation	-	150	150
The John D. and Catherine T. MacArthur Foundation	15	-	15
Ortho-McNeil Pharmaceutical, Inc.	-	5	5
The David and Lucile Packard Foundation	-	20	20
Program for Appropriate Technology in Health	-	27	27
The Rockefeller Foundation	20	143	163
UNAIDS / Joint United Nations Programme on HIV/AIDS	12	-	12
UNF / United Nations Foundation, Inc.	-	131	131
The Wellcome Trust	18	-	18
Miscellaneous income <sup>(2)</sup>	4	31	35
Special Account for Servicing Costs	93	93	186
Interest, adjustments and royalties	380	431	811
<i>Subtotal foundations, United Nations and other income</i>	<i>620</i>	<i>3,059</i>	<i>3,679</i>
<b>Grand total</b>	<b>15,892</b>	<b>18,201</b>	<b>34,093</b>

**Notes**

(1) Sources: Extra-budgetary contributions for WHO assisted activities as at 31 December 1999.  
WHO report ACG053A.

(2) For 1998-1999, includes end-of-biennium balance (\$30,100) in Voluntary Fund for Health Promotion (VD)

**Table 3a. Obligations for 1998-1999 compared with 1998-1999 Revised Budget, by Expenditure Type<sup>(1)</sup>**

	Approved Budget, 1998-1999 (US\$000)	(% of total)	Obligations 1998-1999 (US\$000)	Financial imple- mentation rate (%)
<b>Technical Costs</b>				
Operational budget	18,480	45%	9,438	51%
Clinical trials and informatics	3,790	9%	2,805	74%
Technical staff time	4,290	11%	3,479	81%
Technical evaluation and support	2,450	6%	4,183	171%
<i>Subtotal technical costs</i>	<i>29,010</i>	<i>71%</i>	<i>19,905</i>	<i>69%</i>
<b>Administrative costs</b>				
Administrative staff time	8,200	20%	6,752	82%
Administrative support costs	3,450	8%	1,675	49%
<i>Subtotal administrative costs</i>	<i>11,650</i>	<i>29%</i>	<i>8,427</i>	<i>72%</i>
<b>Grand Total</b>	<b>40,660</b>	<b>100%</b>	<b>28,332</b>	<b>70%</b>

**Notes**

(1) Source of data: WHO accounting report ACE057 as at 15 February 2000

**Table 3b. Obligations for 1998-1999 compared with 1998-1999 Revised Budget by Programme Area<sup>(1)</sup>**

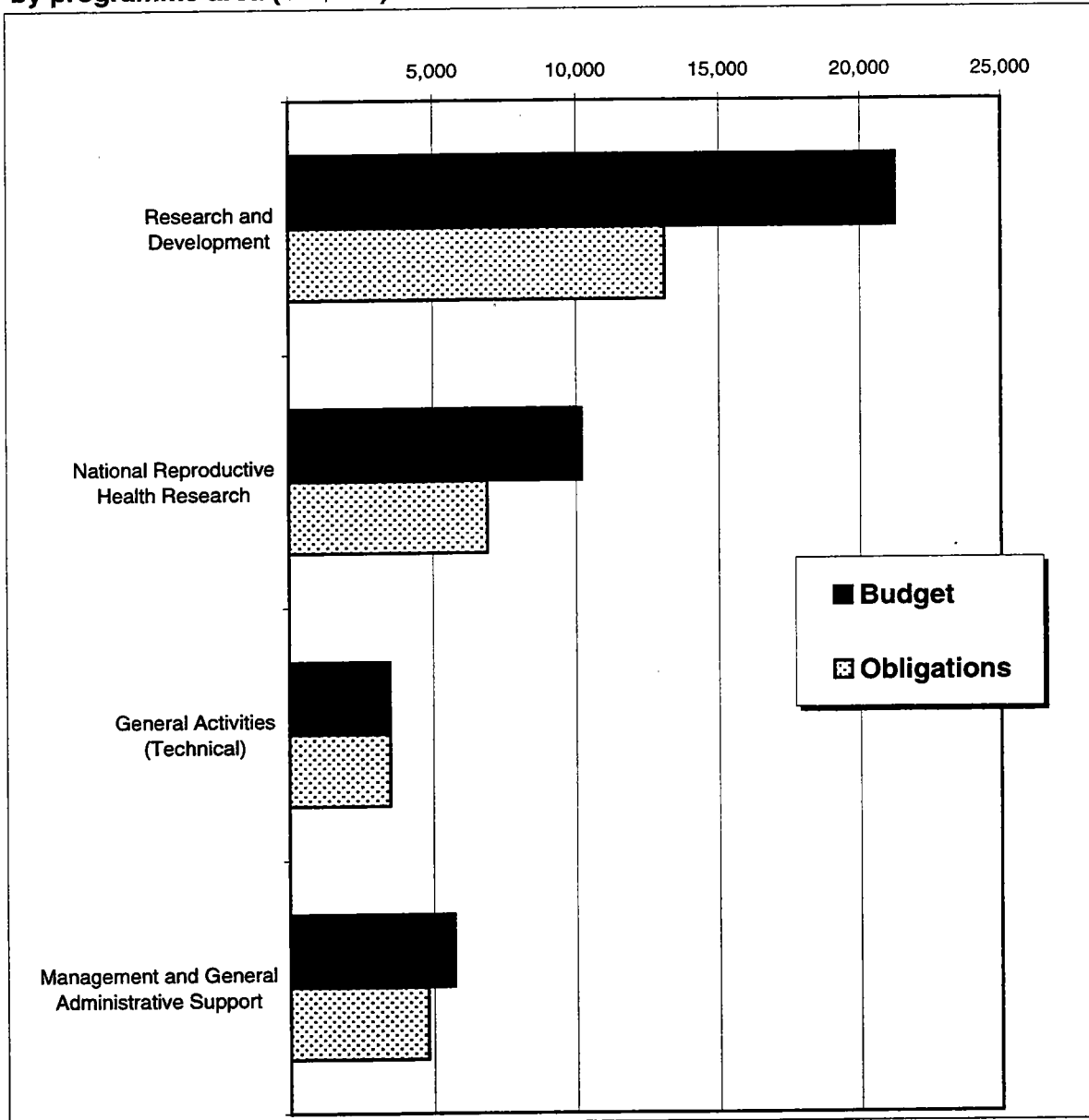
	Revised Budget, 1998-1999 (US\$000)	(% of total)	Obligations 1998-1999 (US\$000)	Financial imple- mentation rate (%)
Research and Development <sup>(2)</sup>	21,260	52%	13,127	62%
National Reproductive Health Research	10,200	25%	6,886	68%
General Activities (Technical)	3,500	9%	3,518	101%
Management and General Administrative Support	5,700	14%	4,801	84%
<b>Grand total</b>	<b>40,660</b>	<b>100%</b>	<b>28,332</b>	<b>70%</b>

**Notes**

(1) Source of data: WHO accounting report ACE057 as at 15

(2) Includes costs of Clinical Trials and Informatics Support

**Figure 2. HRP Financial Implementation in 1998-1999,  
by programme area (US\$000)**



**Annex 1. Income, 1970-1999<sup>(1)</sup> (US\$000)**

Source	1970-1995	1996	1997	1998	1999	Grand Total
<b>Cosponsors</b>						
United Nations Development Programme	1,695	-	-	-	-	1,695
United Nations Population Fund	48,040	3,500	3,500	3,000	3,000	61,040
World Health Organization	12,818	829	829	725	513	15,714
The World Bank	19,258	2,500	2,500	2,500	2,250	29,008
<i>Subtotal Cosponsors</i>	<i>81,811</i>	<i>6,829</i>	<i>6,829</i>	<i>6,225</i>	<i>5,763</i>	<i>107,457</i>
<b>National governments</b>						
Argentina	45	-	-	-	-	45
Australia	3,545	564	-	-	-	4,109
Bangladesh	5	-	-	-	-	5
Canada	9,281	254	294	282	265	10,376
Chile	35	-	-	-	-	35
China	710	55	55	55	55	930
Cuba	25	-	-	-	-	25
Denmark	29,515	-	-	-	-	29,515
Finland	2,709	385	104	151	-	3,349
France	7	-	-	-	-	7
Germany	13,143	1,288	896	691	519	16,537
India	626	32	71	-	35	764
Italy	555	-	100	-	-	655
Japan	-	200	100	-	-	300
Kenya	1	-	-	-	-	1
Malaysia	1	-	-	-	-	1
Mexico	91	-	7	3	4	105
Netherlands	5,098	660	533	538	1,888	8,717
New Zealand	13	14	-	-	-	27
Nigeria	60	-	-	-	-	60
Norway	43,390	1,187	1,287	1,475	1,394	48,733
Pakistan	5	-	-	-	-	5
Russian Federation	99	-	-	-	-	99
Spain	-	-	-	-	20	20
Sweden	92,079	747	916	1,282	1,180	96,204
Switzerland	2,728	-	179	177	163	3,247
Thailand	119	20	20	40	19	218
United Kingdom	60,692	3,867	3,979	2,353	1,587	72,478
United States of America	11,221	-	4,000	2,000	2,250	19,471
<i>Subtotal national governments</i>	<i>275,798</i>	<i>9,273</i>	<i>12,541</i>	<i>9,047</i>	<i>9,379</i>	<i>316,038</i>
<b>Foundations, United Nations and other income</b>						
Contraceptive Research and Development Program	-	-	-	-	28	28
Family Health International	205	-	-	-	-	205
Ford Foundation	1,084	-	-	78	-	1,162
Bill & Melinda Gates Foundation	-	-	-	-	2,000	2,000
William and Flora Hewlett Foundation	-	-	-	-	150	150
International Development Research Centre	716	-	-	-	-	716
The John D. and Catherine T. MacArthur Foundation	-	-	-	15	-	15
The Andrew W. Mellon Foundation	-	200	160	-	-	360
Ortho-McNeil Pharmaceutical, Inc.	-	-	-	-	5	5
The David and Lucile Packard Foundation	-	-	20	-	20	40
Program for Appropriate Technology in Health	12	87	57	-	27	183
The Rockefeller Foundation	3,248	65	205	20	143	3,681
UNAIDS / Joint United Nations Programme on HIV/AIDS	-	-	-	12	-	12
UNF / United Nations Foundation, Inc.	-	-	-	-	131	131
The Wellcome Trust	-	21	-	18	-	39
Miscellaneous income <sup>(2)</sup>	185	-	-	4	31	220
Special Account for Servicing Costs <sup>(3)</sup>	855	72	72	93	93	1,185
Interest, adjustments and royalties	12,678	271	441	380	431	14,201
<i>Subtotal foundations, United Nations and other income</i>	<i>18,983</i>	<i>716</i>	<i>955</i>	<i>620</i>	<i>3,059</i>	<i>24,333</i>
<b>Grand total</b>	<b>376,592</b>	<b>16,818</b>	<b>20,325</b>	<b>15,892</b>	<b>18,201</b>	<b>447,828</b>

**Notes**

- (1) Sources: Extra-budgetary contributions for WHO assisted activities as at 31 December 1995, 1997 and 1999. WHO report ACG053A as at 17 November 1994.
- (2) For 1998-1999, includes end-of-biennium balance (\$30,100) in Voluntary Fund for Health Promotion (VD)
- (3) Income from the WHO Special Account for Servicing Costs is included from 1984 onwards.

**Annex 2. Designated contributions 1998-1999**

1. **Donor:** Contraceptive Research and Development Program (CONRAD)  
**Subject:** Support of two-day meeting of Principal Investigators of Study 98907 "Sperm Suppression with Cyproterone Acetate (CPA) and Testosterone Enanthate (TE) or Testosterone Undecanoate (TU) in Normal Men"  
**Amount:** US\$18,419  
**Period:** April 1999
2. **Donor:** Contraceptive Research and Development Program (CONRAD)  
**Subject:** Support publication of the proceedings of the "Steroids and Endometrial Breakthrough Bleeding" conference  
**Amount:** US\$10,000  
**Period:** July 1999
3. **Donor:** Ford Foundation  
**Subject:** Support of Indonesian participants at the International Conference on Reproductive Health, Mumbai  
**Amount:** US\$18,000  
**Period:** March 1998
4. **Donor:** Ford Foundation  
**Subject:** The development of guidelines for conducting community-based research on reproductive tract infections and gynaecological morbidity  
**Amount:** US\$60,000  
**Period:** 1 July 1998 - 31 December 1999  
Comments: Rockefeller Foundation has also contributed US\$60,000 to this activity
5. **Donor:** The John D. and Catherine T. MacArthur Foundation  
**Subject:** Support of developing country speakers at the International Conference on Reproductive Health, Mumbai  
**Amount:** US\$15,000  
**Period:** March 1998
6. **Donor:** Ortho-McNeil Pharmaceutical, Inc.  
**Subject:** Support publication of the proceedings of the "Steroids and Endometrial Breakthrough Bleeding" conference  
**Amount:** US\$5,000  
**Period:** July 1999
7. **Donor:** The David and Lucile Packard Foundation  
**Subject:** Support of production costs of WHO Reproductive Health Library  
**Amount:** US\$40,000 (of total grant of US\$60,000)  
**Period:** 1 January 1998 - 31 December 2000
8. **Donor:** The Rockefeller Foundation  
**Subject:** The development of guidelines for conducting community-based research on reproductive tract infections and gynaecological morbidity  
**Amount:** US\$60,000  
**Period:** 1 July 1998 - 31 December 1999  
**Comment:** Ford Foundation has also contributed US\$60,000 to this activity

9. **Donor:** The Rockefeller Foundation  
**Subject:** Support of a meeting of investigators and project review committee for an implantation research initiative  
**Amount:** US\$35,030  
**Period:** 1 March 1999 - 30 June 1999
10. **Donor:** The Rockefeller Foundation  
**Subject:** Joint funding of mission-oriented research in male fertility  
**Amount:** US\$47,500 (third and final payment of a grant totalling \$150,000)  
**Period:** Extended until 31 December 1999
11. **Donor:** The Wellcome Trust  
**Subject:** Support of developing country speakers at the Mumbai Conference on Reproductive Health  
**Amount:** US\$17,500  
**Period:** March 1998
12. **Donor:** United Nations Foundation (UNF)  
**Subject:** Support of research related to "Female Genital Mutilation: Promoting Best Practice for Prevention"  
**Amount:** US\$131,300 (Representing first payment of \$310,000 grant, over 3 years. Total grant from UN Foundation was \$1 million, split between HRP and WHO Women's Health Department (WMH))  
**Period:** 1999-2001



The Special Programme of Research, Development and Research Training in Human Reproduction was established by the World Health Organization (WHO) in 1972 to coordinate, promote, conduct and evaluate international research in human reproduction. The United Nations Development Programme, the United Nations Population Fund and the World Bank joined WHO as cosponsors of the Programme in *"coordination of the global research effort in the field of reproductive health"*. As the main instrument within the United Nations system for research in human reproduction, the Programme brings together health care providers, policy-makers, scientists, clinicians and consumer and community representatives to identify and address priorities for research aimed at improving reproductive health. Since 1998 the Programme has functioned within the WHO Department of Reproductive Health and Research.

The Programme investigates the extent and nature of reproductive health problems, their determinants and the interventions needed for their alleviation or resolution. While fertility regulation has remained the core area of the Programme's research, the research agenda in recent years has been broadened to address other challenges in reproductive health. This reflects the Programme's response to the wide range of issues in reproductive health identified in recent international fora, particularly the International Conference on Population and Development in 1994 and the Fourth World Conference on Women in 1995. The Programme also carries out activities to strengthen the capabilities of developing countries to meet their own research needs and to enable them to participate in the global effort in reproductive health research.

The Programme promotes the use of research results in policy-making and planning at national and international levels and contributes to the setting of norms, standards and guidelines, including ethical guidelines, in the field of reproductive health research. The Programme works to ensure that gender issues, and particularly the perspectives of women, are reflected in both its research and research capability strengthening activities to foster the achievement of greater equity and sexual and reproductive rights.

As the focus of research activities within the WHO Department of Reproductive Health and Research, the Programme contributes to all of the following specific thematic areas of work of the Department: planning and programming; reproductive health needs of adolescents; fertility regulation; maternal and perinatal health; unsafe abortion; reproductive tract infections (including cervical cancer/infertility); and female genital mutilation and other harmful practices.

