

**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.

**Total budget by location for the strategic objective for 2008-2009 (US\$ thousand)**

Budget (US\$ thousand)							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
39 778	14 608	13 939	5 975	8 938	19 273	24 423	126 934

**Resource breakdown for the strategic objective for 2008-2009 (US\$ thousand)**

	Countries	Regions	Headquarters	TOTAL
<b>All financing 2008-2009</b>	<b>54 781</b>	<b>47 730</b>	<b>24 423</b>	<b>126 934</b>
Percentage by level	43	38	19	

**Budget by organization-wide expected result and location**

9.1 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	INDICATORS	
	9.1.1 Number of selected low-income countries that have institutionalized and functional coordination mechanisms to promote intersectoral approaches and actions in the area of food safety, food security and nutrition	9.1.2 Number of targeted low-income countries that have included nutrition, food-safety and food-security activities in their sector-wide approaches, Poverty Reduction Strategy Papers and/or development policies, plans and budgets, including a mechanism for financing nutrition and food-safety activities
	BASELINE	
No information available	14 countries (for Poverty Reduction Strategy Papers)	

communication, stimulate intersectoral actions, increase investment in nutrition, food-safety and food-security interventions, and develop and support a research agenda.	<b>TARGETS TO BE ACHIEVED BY 2009</b>						
	30 countries				30 countries		
<b>Budget (US\$ thousand)</b>							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
4 133	2 767	1 483	797	1 986	3 855	1 954	<b>16 975</b>

9.2 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.	<b>INDICATORS</b>						
	9.2.1 Number of new nutrition and food-safety standards, guidelines and training manuals produced and disseminated to countries and the international community				9.2.2 Number of new norms, standards, guidelines, tools and training materials for prevention and management of zoonotic and non-zoonotic foodborne diseases		
	<b>BASELINE</b>						
	None				None		
<b>TARGETS TO BE ACHIEVED BY 2009</b>							
15 norms				3 norms			
<b>Budget (US\$ thousand)</b>							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
6 199	1 729	2 471	598	1 490	2 891	14 653	<b>30 031</b>

9.3 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>						
	9.3.1 Number of countries that have adopted and implemented the WHO Child Growth Standards				9.3.2 Number of countries that have nationally representative surveillance data on major forms of malnutrition		
	<b>BASELINE</b>						
	20 countries				90 countries		
<b>TARGETS TO BE ACHIEVED BY 2009</b>							
50 countries				100 countries			
<b>Budget (US\$ thousand)</b>							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
7 232	1 545	2 570	1 295	1 986	1 927	1 954	<b>18 509</b>

## PROPOSED PROGRAMME BUDGET 2008-2009

<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 selected countries receiving WHO support that have developed and implemented at least three high-priority actions recommended by the Global Strategy for Infant and Young Child Feeding		<b>9.4.2</b> Number of selected countries receiving WHO support that have developed and implemented strategies to prevent and control micronutrient malnutrition		<b>9.4.3</b> Number of selected countries receiving WHO support that have developed and implemented strategies to promote healthy dietary practices in order to prevent diet-related chronic disease		<b>9.4.4</b> Number of selected low-income countries receiving WHO support that have included nutrition in their comprehensive responses to HIV/AIDS and other epidemics		<b>9.4.5</b> Number of selected countries receiving WHO support that have strengthened national preparedness and response to nutritional emergencies						
	<b>BASELINE</b>														
	30 countries		10 countries		10 countries		35 countries		None						
	<b>TARGETS TO BE ACHIEVED BY 2009</b>														
60 countries		30 countries		30 countries		35 countries		15 countries							
<b>Budget (US\$ thousand)</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>	
7 750		3 447		3 560		1 295		1 490		4 818		1 954		<b>24 314</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 countries that have established or strengthened intersectoral collaboration for the prevention, control and surveillance of foodborne zoonotic diseases				<b>9.5.2</b> Number of countries that have initiated or strengthened programmes for the surveillance and control of at least one major foodborne zoonotic disease										
	<b>BASELINE</b>														
	20 countries				50 countries										
	<b>TARGETS TO BE ACHIEVED BY 2009</b>														
20 countries				50 countries											
<b>Budget (US\$ thousand)</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>	
7 232		2 352		2 076		498		993		1 927		1 954		<b>17 032</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 countries 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 countries receiving support from WHO that have built national systems for food safety and foodborne zoonoses with international links to emergency systems					
	<b>BASELINE</b>						
	90 countries	None					
	<b>TARGETS TO BE ACHIEVED BY 2009</b>						
90 countries	None						
<b>Budget (US\$ thousand)</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>
7 232	2 768	1 779	1 492	993	3 855	1 954	<b>20 073</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.

**Total budget by location for the strategic objective for 2008-2009 (US\$ thousand)**

Budget (US\$ thousand)							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
142 093	37 462	57 829	48 567	66 206	46 607	115 290	514 054

**Resource breakdown for the strategic objective for 2008-2009 (US\$ thousand)**

	Countries	Regions	Headquarters	TOTAL
All financing 2008-2009	255 267	143 497	115 290	514 054
Percentage by level	50	28	22	

**Budget by organization-wide expected result and location**

10.1 Management and organization of integrated, population-based health-service delivery through	INDICATORS	
	10.1.1 Proportion of countries that show evidence of reduced coverage, equity and quality gaps, as measured through agreed composite indicators over a range of interventions	10.1.2 Number of countries that show progress in embedding disease-specific programmes in general health services

public and nonpublic providers and networks improved, reflecting the principles of integrated primary health care, scaling up coverage, equity and quality of health services, and enhancing health outcomes.	<b>BASELINE</b>						
	Country-specific baseline to be established in 2007-2008						
	<b>TARGETS TO BE ACHIEVED BY 2009</b>						
Significant improvement compared to 2007-2008 country-specific baseline in 20% of countries							
<b>Budget (US\$ thousand)</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>
21 618	5 653	7 612	7 042	9 669	4 882	16 903	<b>73 379</b>

10.2 National capacities for governance and leadership improved through evidence-based policy dialogue, effective governance and leadership, institutional capacity-building for policy analysis, greater transparency and accountability for performance, and more effective intersectoral collaboration.	<b>INDICATORS</b>						
	<b>10.2.1</b> Proportion of countries that, against regionally agreed benchmarks, show evidence of improving institutional capacities for policy analysis, policy formulation, strategic planning, regulation, interinstitutional coordination and implementation of reform	<b>10.2.2</b> Proportion of countries that, against regionally agreed benchmarks, show evidence of improved accountability for performance and greater participation of civil society, community, consumers and professional organizations in shaping policies and their implementation	<b>10.2.3</b> Proportion of countries that, against regionally agreed benchmarks, show evidence of improved performance in regulation, policy formulation, and policy implementation	<b>10.2.4</b> Proportion of countries that, against regionally agreed benchmarks, establish effective intersectoral cooperation mechanisms to improve health-systems' performance for better health outcomes			
	<b>BASELINE</b>						
	Country-specific baselines to be established in 2007-2008						
	<b>TARGETS TO BE ACHIEVED BY 2009</b>						
Significant improvement compared to 2007-2008 country-specific baseline in at least 10% of countries							
<b>Budget (US\$ thousand)</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>
23 450	6 507	8 871	13 236	12 827	7 840	14 753	<b>87 484</b>

10.3 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 countries where the inputs of major stakeholders are harmonized with national policies, measured in line with the Paris Declaration on Aid Effectiveness						
	<b>BASELINE</b>						
	To be established in 2007-2008						
<b>TARGETS TO BE ACHIEVED BY 2009</b>							
Increase by 20% from 2007-2008 baseline							
<b>Budget (US\$ thousand)</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>
4 233	1 142	2 105	1 477	2 763	1 824	2 257	<b>15 801</b>

## PROPOSED PROGRAMME BUDGET 2008-2009

<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 that meet agreed standards.						
	<b>BASELINE</b>						
	30% of low- and middle-income countries						
<b>TARGETS TO BE ACHIEVED BY 2009</b>							
35%							
<b>Budget (US\$ thousand)</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>
9 570	2 118	2 459	4 047	3 947	3 945	8 266	<b>34 352</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> Use and quality of Organization-wide databases of core health statistics and evidence that cover all high-priority health issues		<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 and promotion of standards such as the International Statistical Classification of Diseases and Related Health Problems			<b>10.5.3</b> Effective research for health coordination and leadership mechanisms established and maintained at global and regional levels, including ACHR	
	<b>BASELINE</b>						
	Two-thirds of countries		20			Mechanisms operating at global and some regional levels	
<b>TARGETS TO BE ACHIEVED BY 2009</b>							
Recent country health statistical profiles for 80% of Member States.		30			Mechanisms operating at global and all regional levels		
<b>Budget (US\$ thousand)</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>
9 057	1 589	1 574	3 035	1 973	1 972	17 284	<b>36 484</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 (to be defined)				<b>10.6.2</b> Number of countries complying with the recommendation to dedicate at least 2% of their health budget to research (Commission on Health Research for Development, 1990)		
	<b>BASELINE</b>						
	10%-15% (to be refined)				Less than 25% of countries (to be refined)		
<b>TARGETS TO BE ACHIEVED BY 2009</b>							
25%				10% increase from baseline			
<b>Budget (US\$ thousand)</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>
5 732	1 801	1 869	1 012	3 453	3 215	4 006	<b>21 088</b>

10.7 Knowledge management and e-Health policies and strategies developed and implemented in order to strengthen health systems.	<b>INDICATORS</b>						
	10.7.1 Number of countries adopting knowledge management strategies in order to bridge the “know-do” gap			10.7.2 Number of low- and middle-income countries with access to essential scientific information and knowledge		10.7.3 Proportion of countries with evidence-based eHealth frameworks and services	
	<b>BASELINE</b>						
	15			60		10%	
	<b>TARGETS TO BE ACHIEVED BY 2009</b>						
30			90		30%		
<b>Budget (US\$ thousand)</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>
9 861	1 589	6 098	4 553	3 453	740	12 770	<b>39 064</b>

10.8 Health-workforce information and knowledge base strengthened, and country capacities for policy analysis, planning, implementation, and information-sharing and research built up.	<b>INDICATORS</b>						
	10.8.1 Proportion of countries regularly reporting validated statistics on human resources for health (e.g. population-to-providers ratios, rural/urban distribution of health workers)				10.8.2 Number of countries facing severe health-workforce difficulties effectively transforming resource inputs from partnerships, bilateral assistance and similar mechanisms into measurable outputs for health-workforce development		
	<b>BASELINE</b>						
	Proportion of 193 countries reached by 2007				Number of countries reached by 2007 out of the 57 countries facing severe health-workforce difficulties		
	<b>TARGETS TO BE ACHIEVED BY 2009</b>						
50% of the 193 countries				At least 10 more countries facing severe health-workforce difficulties			
<b>Budget (US\$ thousand)</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>
20 453	6 864	13 963	4 553	14 604	5 621	10 158	<b>76 216</b>

10.9 Technical support provided to Member States, with a focus on those facing severe health-workforce difficulties in order to improve the production, distribution, skill mix and retention of the health workforce.	<b>INDICATORS</b>						
	10.9.1 Number of countries facing severe health-workforce difficulties that use evidence-based practices, tools and guidelines to implement and monitor national health-workforce development, including migration				10.9.2 Number of countries facing severe health-workforce difficulties that adopt updated norms and standards related to the education, training and practice of different categories of health occupations		
	<b>BASELINE</b>						
	Number of countries reached by 2007, particularly among 57 countries facing severe health-workforce difficulties				Number of countries reached by 2007, particularly among 57 countries facing severe health-workforce difficulties		
	<b>TARGETS TO BE ACHIEVED BY 2009</b>						
10 additional countries facing severe health-workforce difficulties that adopt relevant technical frameworks, tools and guidelines				10 more countries facing severe health-workforce difficulties that adopt updated norms and standards			
<b>Budget (US\$ thousand)</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>
12 306	2 942	4 721	1 518	1 480	7 692	9 382	<b>40 041</b>

## PROPOSED PROGRAMME BUDGET 2008-2009

<b>10.10</b> 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 countries 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; and to improve social protection and the efficiency and equity of resource use	<b>10.10.1</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</b>						
	15 countries	6 technical briefs for policy-makers					
	<b>TARGETS TO BE ACHIEVED BY 2009</b>						
40 countries	12 technical briefs						
<b>Budget (US\$ thousand)</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>
8 918	3 701	2 459	4 047	4 933	3 112	4 079	<b>31 249</b>

<b>10.11</b> 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, and the incidence of financial catastrophe and impoverishment	<b>10.11.2</b> Number of countries 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, and to track the impact of financing policy on households					
	<b>BASELINE</b>						
	Tools available on national health accounts, costing, financial catastrophe and impoverishment, cost-effectiveness, implications of health-insurance design, and contracting	15 countries					
	<b>TARGETS TO BE ACHIEVED BY 2009</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 countries						
<b>Budget (US\$ thousand)</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>
6 697	581	3 344	1 012	3 651	2 231	6 380	<b>23 896</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, and 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</p>	<p><b>10.12.2</b> Number of countries provided with support to build capacity in the formulation of health financing policies and strategies and the interpretation of financial data, and with key information on health expenditures, financing, efficiency and equity to guide the process</p>					
	<b>BASELINE</b>						
	<p>WHO participation in 2 global or regional partnerships on financing options; support provided on long-term financing options in 6 countries</p>	<p>Technical support provided to 25 countries and annual updates on health expenditure to all 193 Member States</p>					
<b>TARGETS TO BE ACHIEVED BY 2009</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>Budget (US\$ thousand)</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>
10 198	2 975	2 754	3 035	3 453	3 533	9 052	<b>35 000</b>

**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.

**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, 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.
- Strategic objective 7: good governance.
- Strategic objective 12: global public policy.

**Total budget by location for the strategic objective for 2008-2009 (US\$ thousand)**

Budget (US\$ thousand)							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
22 592	8 940	14 290	6 971	16 763	9 989	54 488	134 033

**Resource breakdown for the strategic objective for 2008-2009 (US\$ thousand)**

	Countries	Regions	Headquarters	TOTAL
<b>All financing 2008-2009</b>	<b>52 666</b>	<b>26 879</b>	<b>54 488</b>	<b>134 033</b>
Percentage by level	39	20	41	

**Budget by organization-wide expected result and location**

11.1 Formulation and monitoring of comprehensive national policies on access, quality and use of essential medical products and technologies advocated and supported.	INDICATORS			
	11.1.1 Number of countries receiving support to formulate and implement official national policies on access, quality and use of essential medical products and technologies	11.1.2 Number of countries receiving support to design or strengthen comprehensive national procurement and supply systems	11.1.3 Number of countries receiving support to formulate and implement national strategies and regulatory mechanisms for blood and blood products and infection control	11.1.4 Publication of a biennial global report on medicine prices, availability and affordability

<b>BASELINE</b>							
<b>TARGETS TO BE ACHIEVED BY 2009</b>							
68 countries							
25 countries							
52 countries							
Report published							
<b>Budget (US\$ thousand)</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>
6 380	2 480	5 716	2 987	3 472	4 994	13 276	<b>39 305</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, and 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 countries whose national regulatory authorities have been assessed, supported and accredited			
	<b>BASELINE</b>						
	30 per biennium		8900 names	150 products	20 countries		
	<b>TARGETS TO BE ACHIEVED BY 2009</b>						
	30 additional outputs		9100 names	250 products	30 countries		
<b>Budget (US\$ thousand)</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>
11 340	4 628	6 997	1 992	10 910	1 998	31 307	<b>69 172</b>

<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 and technologies			<b>11.3.2</b> Number of countries using national lists, updated within the past five years, of essential medicines, vaccines and technologies for public procurement and/or reimbursement			
	<b>BASELINE</b>						
	5 programmes			80 countries			
	<b>TARGETS TO BE ACHIEVED BY 2009</b>						
	10 programmes			90 countries			
<b>Budget (US\$ thousand)</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>
4 872	1 832	1 577	1 992	2 381	2 997	9 905	<b>25 556</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.

**Total budget by location for the strategic objective for 2008-2009 (US\$ thousand)**

Budget (US\$ thousand)							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
48 966	16 559	14 304	25 341	26 482	15 636	67 056	214 344

**Resource breakdown for the strategic objective for 2008-2009 (US\$ thousand)**

	Countries	Regions	Headquarters	TOTAL
<b>All financing 2008-2009</b>	<b>90 077</b>	<b>57 211</b>	<b>67 056</b>	<b>214 344</b>
Percentage by level	42	27	31	

**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 resolutions adopted that focus on policy and can be implemented at global, regional and national levels	<b>12.1.2</b> Proportion of documents submitted to governing bodies within constitutional deadlines, in all official languages	<b>12.1.3</b> Level of understanding by key stakeholders of WHO's role, priorities and key messages	<b>12.1.4</b> Percentage of oversight projects completed under the annual work plan which seek to evaluate and improve processes for risk management, control and governance
	<b>BASELINE</b>			
	20%	50%	Survey to be carried out	100%

<b>TARGETS TO BE ACHIEVED BY 2009</b>							
40%		75%		10% increase over survey baseline		100%	
<b>Budget (US\$ thousand)</b>							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
14 556	5 929	5 193	11 657	4 021	3 458	42 408	<b>87 222</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 using country cooperation strategies as a basis for planning WHO's country work and for harmonizing cooperation with the United Nations country team members and other development partners			<b>12.2.2</b> Proportion of countries where WHO's presence reflects the respective Country Cooperation Strategy		<b>12.2.3</b> Number of countries in which harmonized mechanism to assess the contribution of the Secretariat to national health outcomes is implemented	
	<b>BASELINE</b>						
	40			20%		3	
	<b>TARGETS TO BE ACHIEVED BY 2009</b>						
80			40%		25		
<b>Budget (US\$ thousand)</b>							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
21 604	7 306	5 290	10 136	11 083	10 808	4 901	<b>71 128</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> Proportion of external aid flows to health supplied through flexible and long-term instruments	<b>12.3.2</b> Proportion of health partnerships in which WHO participates and that work according to the Best Practice Principles for Global Health Partnerships	<b>12.3.3</b> Proportion of trade agreements appropriately reflecting public health interests, as outlined in WHO guidance	<b>12.3.4</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</b>			
	Not yet established	Not yet established	Less than 5%	Less than 20%
	<b>TARGETS TO BE ACHIEVED BY 2009</b>			
Mechanism established (in partnership with OECD/Development Assistance Committee and World Bank) for systematically monitoring long-term commitments or aid to health, programmed through government; baseline data gathered;	Set of indicators from the Paris Declaration on Aid Effectiveness adopted by the Global Fund to Fight AIDS, Tuberculosis and Malaria, the Global Alliance for Vaccines and	10%	Over 50%	

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	target set for 2013	Immunization, and other global health partnerships; monitoring system established; baseline data gathered; targets set for 2013					
Budget (US\$ thousand)							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
6 239	1 103	2 547	1 014	3 335	623	6 169	21 030

<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.	INDICATORS						
	<b>12.4.1</b> Number of countries that have access to relevant health information and advocacy material for the effective delivery of health programmes as reflected in the country cooperation strategies	<b>12.4.2</b> Average number of page views/visits per month to the WHO web site	<b>12.4.3</b> Number of multilingual (non-English) pages available on the WHO web site	<b>12.4.4</b> Number of WHO publications sold per biennium			
	BASELINE						
	To be established	28 million/3.5 million	12 733	350 000			
	TARGETS TO BE ACHIEVED BY 2009						
Baseline plus 20%	48 million/5 million	22 000	400 000				
Budget (US\$ thousand)							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
6 567	2 221	1 274	2 534	8 043	747	13 578	34 964

**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 2008-2009 (US\$ thousand)**

Budget (US\$ thousand)							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
125 526	29 823	49 551	36 932	38 040	33 214	229 286	542 372

**Resource breakdown for the strategic objective for 2008-2009 (US\$ thousand)**

	Countries	Regions	Headquarters	TOTAL
<b>All financing 2008-2009</b>	<b>113 369</b>	<b>199 717</b>	<b>229 286</b>	<b>542 372</b>
Percentage by level	21	37	42	

**Budget by organization-wide expected result and location**

13.1 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.	INDICATORS			
	13.1.1 Proportion of approved workplans that incorporate lessons learnt from the previous biennium as identified in the programme budget performance assessment and have been drawn up in a consultative process involving the three levels of the Organization	13.1.2 Proportion of reports on strategic objectives for the mid-term review and programme budget performance assessment that have been peer reviewed and submitted in a timely fashion	13.1.3 Percentage of evaluations and performance audit projects completed under the annual workplan in the application of the Organization's evaluation guidelines and other oversight policies	13.1.4 Proportion of managers trained and certified on WHO's accountability mechanisms

## PROPOSED PROGRAMME BUDGET 2008-2009

<b>BASELINE</b>							
50%		50%		100%		0% (certification programme not yet in place)	
<b>TARGETS TO BE ACHIEVED BY 2009</b>							
80%		80%		100%		90%	
<b>Budget (US\$ thousand)</b>							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
7 406	1 760	7 290	1 200	3 902	7 715	7 643	<b>36 916</b>

<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> Proportion of strategic objectives with expenditure levels meeting programme budget targets			<b>13.2.3</b> Proportion of voluntary contributions that are un-earmarked	
	<b>BASELINE</b>						
	Accounting Standards not implemented		70% (areas of work)			15%	
	<b>TARGETS TO BE ACHIEVED BY 2009</b>						
International Public Sector Accounting Standards implemented		80%			20%		
<b>Budget (US\$ thousand)</b>							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
10 051	5 182	8 669	2 770	1 951	3 370	28 661	<b>60 654</b>

<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 <sup>1</sup> 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			<b>13.3.3</b> Proportion of staff in compliance with the cycle of the Performance Management Development System, i.e. objectives and development needs have been discussed between staff and supervisor	
	<b>BASELINE</b>						
	40%		About 100			65%	
	<b>TARGETS TO BE ACHIEVED BY 2009</b>						
75%		300			75%		
<b>Budget (US\$ thousand)</b>							
Africa	The Americas	South-East Asia	Europe	Eastern Mediterranean	Western Pacific	Headquarters	TOTAL
6 985	3 227	3 152	4 617	1 951	144	9 554	<b>29 630</b>

<sup>1</sup> Offices here refers to country offices (144), regional office divisions (~30) and headquarter departments (~40).

<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> Proportion of known proposals, projects, and applications tracked on a regular basis through global portfolio management processes			<b>13.4.2</b> Number of information technology disciplines <sup>1</sup> implemented Organization-wide according to best-practice benchmarks		<b>13.4.3</b> Proportion of offices using consistent real-time management information	
	<b>BASELINE</b>						
	40%			0 (only localized implementation)		0% office-specific management information	
	<b>TARGETS TO BE ACHIEVED BY 2009</b>						
75%			5		75%		
<b>Budget (US\$ thousand)</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>
21 161	7 823	5 418	10 803	8 778	4 477	47 768	<b>106 228</b>

<sup>1</sup> This includes, for example, incidence management, configuration management, release management, service-desk function.

<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 according to criteria in service-level agreements			<b>13.5.2</b> Proportion of procedures delivered according to criteria in emergency standard operating procedures			
	<b>BASELINE</b>						
	0% (agreements currently under development)			0% (procedures currently under development)			
	<b>TARGETS TO BE ACHIEVED BY 2009</b>						
75%			75%				
<b>Budget (US\$ thousand)</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>
35 551	6 160	6 896	12 002	14 630	11 354	63 054	<b>149 647</b>

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

<b>13.6</b> Physical working environment conducive to the well-being and safety of staff in all locations.	<b>INDICATORS</b>						
	<b>13.6.1</b> Timeliness of implementation of the capital master plan, within the approved budget			<b>13.6.2</b> Proportion of locations that have implemented policies and plans to improve staff health and safety in the workplace, including compliance with Minimum Operating Safety Standards			
	<b>BASELINE</b>						
	Plan being submitted to the Executive Board at its 120th session			65%			
	<b>TARGETS TO BE ACHIEVED BY 2009</b>						
On target			75%				
<b>Budget (US\$ thousand)</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>
44 372	5 671	18 126	5 540	6 828	6 154	72 606	<b>159 297</b>