

**HEALTH CANADA'S INPUT TO
THE WORKING GROUP OF THE EXECUTIVE COMMITTEE ON
STREAMLINING THE GOVERNANCE MECHANISMS OF PAHO**

The Reform and Simplification of the Subcommittee on Planning and Programming (SPP), the Subcommittee on Women, Health and Development and the Standing Committee on Non-governmental Organizations

Health Canada is cognizant of and supports many of the recommendations proposed by the *Working Group on PAHO in the 21st Century*¹, the *Report of the Joint Inspection Unit of the United Nations*,² and the *Final Report of the Sub Committee on Women, Health, and Development*³ pertaining to governance issues, and the functions of the three advisory bodies of the Executive Committee – the Subcommittee on Planning and Programming; the Subcommittee on Women, Health and Development; and the Standing Committee on Nongovernmental Organizations (NGOs).

Included below is a summary of Health Canada's position on the above issues.

1. *Transforming the Subcommittee on Planning and Programming (SPP) into an Organ of the Executive Committee for improved results based management, monitoring & evaluation*

1.1 Health Canada supports the position that all subcommittees created for a specific purpose should have a specific time frame, and should work with clear objectives. The Ministry therefore concurs with the consensus that the functions of the Subcommittee require reformulation along the lines of the newly constituted Program Budget Administration Committee of WHO. The Ministry agrees with the recommendation that the Subcommittee cease to act as the first review body for *all* the technical health issues to be discussed by the Governing Bodies,⁴ in order to concentrate more on the programmatic and results-based aspects of the budget, and the evaluation of budget implementation.

1.2 Canada also recognizes the need for a SPP mandate to engage the countries more fully in the monitoring and evaluation of the Organization's operational, management, and financial practices. The newly established Program, Budget and Administration Committee being proposed should be able to support the development of links between financial evaluation and program budget execution.⁵ The Committee's function should therefore be similar to that described in Resolution EB114.R4 relating to WHO's Programme, Administration and Budget Committee which looks first at the reports of the external and internal auditors, followed by other evaluation/assessment reports and documents addressing oversight activities such as the JIU that have assessed productivity,

¹ CD46/29, August 2005

² CD46/23, September 14, 2005

³ MSD21/FR, March 15, 2005)

⁴ *Working Group on PAHO in the 21st. Century* Recommendation 7.1(b) under Governance.

⁵ Ibid page 18

quality of service, efficiency, and cost-effectiveness, as well as measuring impact, outcome, and success of programs.

1.3 Health Canada thus endorses the proposal to enhance the oversight function of the SPP, together with a role in ensuring that plans to comply with the recommendations of the internal and external audit have been fulfilled and properly evaluated.⁶ The SPP Committee could be charged with ensuring follow-up on the implementation of oversight recommendations.

1.4 As part of its administrative oversight function, governance issues affecting staff regulations, rules, and tracking gender equity of all staff within the Organization etc. could also be reviewed periodically by the SPP.

1.5 The process of admittance and assessment of NGOs in official relations with PAHO could be an additional task undertaken annually by the SPP – thus dissolving the Standing Committee on Non-governmental Organizations. (*As discussed in Section 3*)

Scheduling of the Sub-Committee and Executive Committee Meetings

1.6 If results-based management (RBM) budgeting is to have a positive and permanent effect, it is vital that the preparatory process be improved and the roadblocks that have been encountered in the past owing to over-tight schedules be overcome.

1.7 The first meeting in March of a newly struck Subcommittee on Program, Budget and Administration (SPBA) should be primarily an Administrative Meeting and would discuss the budget within the context of program and policy issues, and other related topics such as strategic planning etc. The duration could be two to three days, or longer if needed.

1.8 The Executive Committee scheduled for June could discuss the budget and program report from the SPBA, and also receive data and information on the substantive health topics of the program. Sufficient time should be available between the Executive Committee and the Directing Council to undertake real changes to the paper and to work on both the budget and administrative issues, and on the substantive health issues.

1.9 As such, the administrative matters could go to the newly reconfigured SPBA and the substantive health issues would remain the domain of the Executive Committee, while the apparent duplication of work on health topics between the SPP and Executive Committee would be eliminated.

The Composition of the SPBA, - Size and Diversification of the Representation

1.10 With a view to ensuring a wider participation of Member States in the revised SPBA, Health Canada recommends that the Director consider nominate representatives from additional countries to those already serving on the Executive Committee.

⁶ Report of the *Joint Inspection Unit, Recommendation 7*, Page 10

2. *Role of Subcommittee of Women Health and Development*

2.1 While concurring with the decision to dissolve the Subcommittee of Women Health and Development, Canada acknowledges the excellent work undertaken by the Subcommittee and views this decision as signalling its success in having accomplished much of what it was intended to do.

2.2 It is, however, important to recognize that while a policy in gender equity in health has been broadly articulated in the Region, more needs to be done to *implement and monitor* that policy. Therefore, we recommend that the technical aspects of women's health be included in the overall reports to the Executive Committee. In this regard, a technical advisory group (TAG) could be established tasked with overseeing the programmatic implementation of gender equity and empowerment of women. The TAG would report to the Executive Committee every two to three years, or as requested by the Committee.

3. *Transforming the Standing Committee on Non-governmental Organizations NGOs and further incorporating Civil Society into the Governance processes*

3.1 As mentioned above in 1.5, the process of admittance and assessment of NGOs in official relations with PAHO could be an additional task undertaken annually by the SPBA – thus dissolving the present Standing Committee on Non-governmental Organizations. The SPBA could be charged with oversight of the processes underway to increase and render more effective working relationships with national and international NGOs – both in official relations and informal relations.

3.2 Canada notes that each year there has been some attendance at the Executive Committee and Directing Council Meetings by NGOs in official relations with PAHO. Some have been more consistently present than others. It is recommended that other national NGOs selected according to specific criteria by the country Ministries of Health be invited to attend along the same lines as the OAS or UNFPA. The latter need not be in official relations but should have particular expertise in the topics on the agenda.

3.3 As a mechanism for greater engagement with civil society and NGOs in PAHO programme priorities, Canada would like the Working Group to consider discussing a means to organize a consultation process (similar to that of other UN Organizations) that would allow for the consolidation of ideas/views from selected NGOs (not necessarily in official relations with PAHO) that could be presented to the Executive Committee and/or the Directing Council.