



Pan American
Health
Organization



World Health
Organization
REGIONAL OFFICE FOR THE Americas

156th SESSION OF THE EXECUTIVE COMMITTEE

Washington, D.C., USA, 22-26 June 2015

Provisional Agenda Item 7.1

CE156/INF/1
14 May 2015
Original: English

WHO PROPOSED PROGRAM BUDGET 2016-2017

Background

1. The Proposed Program Budget 2016-2017 of the World Health Organization (WHO) is presented to the 156th Session of the Executive Committee for information. This version of the WHO Proposed Program Budget 2016-2017,¹ presented to the 68th World Health Assembly in May 2015, incorporates comments and actions recommended by the Executive Board in January 2015 and decisions issued by the Global Policy Group (GPG) in April 2015.
2. The Program Budget 2016-2017 is the second such document to be developed under the Twelfth General Program of Work 2014-2019, which sets WHO's strategic direction and the results structure used for planning, programming, and budgeting. Priorities and biennial outputs presented in the program budget were identified in a robust, bottom-up approach for planning and budgeting recommended by Member States. Country-level priorities were aligned with regional and global commitments and were consolidated into Organization-wide outputs that are presented in the Proposed Program Budget. All levels at WHO participated in the program budget development, from the beginning of the process to the refinement of outputs and indicators with baselines and biennial targets.
3. The programmatic emphasis is on strengthening emergency preparedness, epidemic surveillance, and response capabilities; bolstering regulatory capacity and health systems information and evidence; enhancing compliance with International Health Regulations; continuing to invest in reproductive, maternal, newborn, child, and adolescent health; stepping-up the implementation of the comprehensive global action plan for noncommunicable diseases; and ensuring that actions are carried out to address the threat of antimicrobial resistance. The final program budget document incorporates the cross-cutting issues of gender, equity, human rights, and social determinants of health, which are also cross-cutting themes in the Pan American Health Organization (PAHO).

¹ [Document A68/7](#).

4. The proposed budget for 2016-2017 totals US\$ 4,384.9 million,² composed of \$3,194.3 million for base programs (8.0% budget increase); \$986.1 million for polio, tropical diseases research, and research in human reproduction (24.5% budget increase); and \$204.5 million for outbreak and crisis response (10.1% reduction). The overall budget increase reflects the need for additional resources to address identified programmatic priorities such as: *a*) core capacities in preparedness, surveillance, and response to emergencies and crises (including outbreaks of infectious diseases such as the Ebola virus disease); *b*) building resilient health systems in response to the post-2015 agenda in the context of universal health coverage and a focus on maternal, newborn and child health, as well as the elimination of malaria, and the prevention and control of noncommunicable diseases; and *c*) tackling emerging threats and priorities such as antimicrobial resistance and hepatitis control.

5. Table 1 shows the budget allocations by major office for base programs. The Region of the Americas' budget for base programs is increased by \$13.2 million, from \$164.9 million in 2014-2015 to \$178.1 million in 2016-2017. However, the Americas continue to have the lowest share (5.6%) of WHO budget for base programs.

Table 1. Budget allocations by WHO Headquarters and Regional Offices for Base Programs, Indicating Percentage of Approved Budget and Increase from 2014-2015 to 2016-2017 (in US\$ millions)

Headquarters and Regional Offices	Approved Budget 2014-2015	Percent of Approved Budget 2014-2015	Proposed Budget 2016-2017	Percent of Proposed Budget 2016-2017	Budget Increase (Decrease)	Percent Budget Increase (Decrease)
AFRO	672.5	22.7	750.7	23.5	78.2	11.6
AMRO	164.9	5.6	178.1	5.6	13.2	8.0
EMRO	268.7	9.1	292.6	9.2	23.9	8.9
EURO	216	7.3	235.4	7.4	19.4	9.0
WPRO	263.1	8.9	277.8	8.7	14.7	5.6
SEARO	265.2	9.0	282.9	8.9	17.7	6.7
HQ	1,107.30	37.4	1,176.80	36.8	69.5	6.3
TOTAL	2,957.70	100.0	3,194.30	100.0	236.6	8.0

6. Proposed budget allocations to programmatic categories and program areas in the Region of the Americas are shown in Table 2. Category 6—Corporate Services/Enabling Functions—was reduced by \$18.7 million (42% reduction), in order to increase investment in technical categories. For instance, Category 5—Preparedness, Surveillance, and Response—was increased by 57%, reflecting the emphasis to be placed on epidemic preparedness, International Health Regulations, and emergency preparedness and response. Category 2—Noncommunicable Diseases—increased by 33%; Category 1—Communicable Diseases—by 43%, Category 4—Health Systems—by 13%, and Category 3—Promoting Health through the Life Course—by 9%.

² Unless otherwise expressed, all figures are given in US\$.

7. The budget allocation to the Region of the Americas is an integral part of the PAHO Program and Budget 2016-2017. It provides a broader view of resource requirements by program areas and alignment with regional priorities, while also ensuring alignment with WHO global priorities. The budget allocation for response to emergencies remains unchanged at \$7.6 million, while polio eradication was reduced from \$3.5 million in 2014-2015 to \$1.2 million in 2016-2017.

Table 2. Budget Allocations to Categories and Program Areas, Indicating Approved Budget and Increase from 2014-2015 to 2016-2017 (in US\$ millions)				
Category/Program Area	Approved Budget 2014-2015	Proposed Budget 2016-2017	Increase (Decrease)	% Budget Increase (Decrease)
1. Communicable Diseases	19,5	27,8	8,3	43%
HIV and hepatitis	4,0	7,1	3,1	78%
Tuberculosis	1,1	1,6	0,5	45%
Malaria	0,5	1,6	1,1	220%
Neglected tropical diseases	4,6	6,2	1,6	35%
Vaccine-preventable diseases	9,3	11,3	2,0	22%
2. Noncommunicable Diseases	21,7	28,9	7,2	33%
Noncommunicable diseases	13,2	18,3	5,1	39%
Mental health and substance abuse	2,6	3,3	0,7	27%
Violence and injuries	2,2	2,7	0,5	23%
Disabilities and rehabilitation	0,9	1,1	0,2	22%
Nutrition	2,8	3,5	0,7	25%
3. Promoting Health through the Life Course	32,2	35,2	3,0	9%
Reproductive, maternal, newborn, child and adolescent health	12,1	14,4	2,3	19%
Aging and health	1,1	1,1	-	0%
Gender, equity and human rights mainstreaming	2,0	2,1	0,1	5%
Social determinants of health	4,2	4,3	0,1	2%
Health and the environment	12,8	13,3	0,5	4%
4. Health Systems	30,7	34,8	4,1	13%
National health policies, strategies and plans	14,5	16,1	1,6	11%
Integrated people-centred health services	6,0	6,3	0,3	5%
Access to medicines and other health technologies and strengthening regulatory capacity	5,7	6,2	0,5	9%
Health systems information and evidence	4,5	6,2	1,7	38%
5. Preparedness, Surveillance and Response	16,2	25,5	9,3	57%
Alert and response capacities	6,3	8,9	2,6	41%
Epidemic- and pandemic-prone diseases	3,8	4,9	1,1	29%
Emergency risk and crisis management	3,2	4,5	1,3	41%
Food safety	2,9	7,2	4,3	148%
6. Corporate Services/Enabling Functions	44,6	25,9	(18,7)	-42%
Leadership and governance	17,7	7,3	(10,4)	-59%
Transparency, accountability and risk management	4,6	2,2	(2,4)	-52%
Strategic planning, resource coordination and reporting	0,6	0,6	-	0%
Management and administration	18,6	11,8	(6,8)	-37%
Strategic communications	3,1	4,0	0,9	29%
Total - Base Programs (Categories 1-6)	164,9	178,1	13,2	8%
Polio eradication	3,5	1,2	(2,3)	-66%
Outbreak and crisis response	7,6	7,6	-	0%
TOTAL BUDGET	176,0	186,9	10,9	6%

Action by the Executive Committee

8. The Executive Committee is invited to note the briefing on WHO Proposed Program Budget 2016-2017.
