REPORT ON STRATEGIC ISSUES BETWEEN PAHO AND WHO

Introduction

1. This report has been presented to the Governing Bodies of the Pan American Health Organization (PAHO) since 2018 (Document CD56/INF/3) in response to a request from Member States to review key strategic issues in the relationship between PAHO and the World Health Organization (WHO). The present report provides an update on strategic issues between PAHO and WHO from September 2023 through January 2024. It maintains the focus on high-level strategic issues and opportunities of importance to Member States in the Region of the Americas that are related to leadership and governance as well as to accountability and transparency. It also highlights results of collaboration between PAHO and WHO with a view to fostering the proactive engagement of Member States from the Region in global forums.

Leadership and Governance

2. This section provides strategic insight from ongoing deliberations and decisions of the WHO Governing Bodies, along with their implications for the Region and PAHO. It includes matters reviewed by the 154th session of the Executive Board, held from 22 to 27 January 2024. It provides updates on the consultations with Member States concerning key global issues related to health emergencies, the evaluation of the 13th General Programme of Work (GPW 13) for the period 2019–2025, the development of WHO’s 14th General Programme of Work (GPW 14) for the period 2025–2028, and the WHO investment round. It also contains information on progress with regard to the WHO Secretariat implementation plan on reform, country presence, and efforts to improve engagement and collaboration at all levels.

Strengthening WHO Preparedness and Response to Health Emergencies

3. The results of the 3 ongoing Member State-led workstreams—namely the Intergovernmental Negotiating Body (INB) to draft and negotiate a WHO convention, agreement or other international instrument on pandemic prevention, preparedness and response; the Standing Committee on Health Emergency Prevention, Preparedness and Response of the Executive Board; and the Working Group on Amendments to the International Health Regulations (2005) (WGIHR)—may have implications for PAHO’s technical cooperation with Member States.
4. The INB was established by the Second Special Session of the World Health Assembly through Decision SSA2(5) (2), with a mandate to draft and negotiate a WHO convention, agreement, or other international instrument on pandemic prevention, preparedness, and response (also known as the “WHO CA+”). The INB released a proposal for negotiating text of the WHO Pandemic Agreement on 30 October 2023. A total of 7 meetings of the INB were held in 2023; a further 2 meetings are scheduled to be held ahead of the 77th World Health Assembly, in May 2024. Subgroups focusing on critical clusters of articles contained in the negotiating text were created and engaged in informal dialogues with Member States, led by the INB Bureau Vice-Chairs and the co-facilitators of the subgroups. This work was crucial to efforts to prepare an updated text for the INB’s 8th meeting held 19 February to 1 March 2024. Nonetheless, ahead of the 77th World Health Assembly significant differences remain among Member States regarding the WHO CA+, in particular on topics such as: a) public health surveillance; b) One Health; c) preparedness, readiness, and resilience; d) sustainable production; e) transfer of technology and know-how; f) global supply chain and logistics; g) access and benefit-sharing; h) implementation capacity; and i) support and finance.

5. The WGIHR held 6 meetings in 2023 and one in early February 2024. An additional meeting will be held in April 2024 before a report is presented to the 77th World Health Assembly in May 2024. Further information on the progress made by the WGIHR will be presented to the 174th Session of the Executive Committee of PAHO in June 2024.

6. Since 2022, the Pan American Sanitary Bureau (PASB) has played a key facilitating role in bringing together Member States from the Region to build consensus, including through a regional informative session, and 4 regional meetings on the INB and the WGIHR—the most recent meeting taking place 15–16 February 2024.

7. The INB and the WGIHR are holding joint meetings to define the content of relevant articles of their respective negotiated instruments in order to avoid duplication and ensure complementarity. To date, uncertainty remains with regard to what mechanism will trigger the WHO CA+ and whether the principles and scope of the International Health Regulations will need to be modified in accordance with the advances made in both workstreams’ negotiations.

8. In 2023, the Pandemic Fund1 allocated its first round of grants after receiving 179 applications from 133 countries. Across the 6 WHO regions, grants were awarded for 19 projects covering 37 countries. For the Americas, 2 single-country projects were approved (Paraguay and Suriname), as well as 2 multi-country projects covering 19 countries (7 in South America and 12 in the Caribbean). PAHO/WHO is one of the implementing entities in 3 of these 4 approved projects in the Region.

9. In recognition of the high demand for funding under the first round, the Pandemic Fund’s Governing Board approved a second round of funding that will prioritize high-impact investments, at national and regional levels, in early warning and disease surveillance systems, laboratory systems, and strengthening human resources and public health and community workforce capacity. Applications will be accepted from late February to 17 May 2024.

---

Strategic Planning and Budgeting

10. During the period covered by this report, significant progress was made in the development of the proposed GPW 14 for the period 2025–2028. To operationalize the first WHO investment round, the Director-General was requested to initiate consultations with Member States on GPW 14 (3). Three global sessions were held, as well as consultations during the Regional Committees of WHO (4), and 2 successive consultation documents were shared with Member States for their input.

11. At the 154th session of the Executive Board, Member States reviewed the updated draft GPW 14 (5), which was the product of the abovementioned consultation documents. Additional Member State consultations, including a regional consultation with Member States of the Americas, are planned ahead of its approval by the 77th World Health Assembly. PASB staff are part of the WHO Secretariat 3-level working group to develop the GPW 14, which has thus provided additional opportunities to contribute regional and country experiences from the Americas.

12. The GPW 14 constitutes an important input into the next PAHO strategic plan. As PASB and Member States work toward the development of the next PAHO strategic plan for the period 2026–2031, continued engagement in the GPW 14 process will be imperative. The experience gained from the implementation of GPW 13 during 2019–2023 and the PAHO Strategic Plan 2020–2025 has shown the importance of having clear alignment between the results frameworks of PAHO and WHO to facilitate planning, implementation, monitoring, and reporting. Joint advocacy by PASB and Member States focused on creating opportunities to improve such alignment, despite the different time frames of the GPW 14 and the new PAHO Strategic Plan 2026–2031, will be key.

13. The development of the GPW 14 has been directly informed by the GPW 13 external evaluation taking place simultaneously, the findings of which were presented at the 154th session of the Executive Board (6). PASB was represented in the external evaluation reference group and, in addition to the consultations held during the reporting period of this document, Member States had the opportunity to contribute, including through 2 information sessions as well as interviews, focus groups, and questionnaires.

14. Regarding the WHO investment round, which will be guided by the proposed GPW 14, additional consultations were held with Member States, who highlighted the importance of ensuring the equitable allocation of resources to the Region of the Americas. It was noted that the Region faced considerable health challenges, which should not be overlooked. Member States also inquired about how resources would be allocated from the resulting contributions to the investment rounds. It was stated that the contributions to the investment rounds should be flexible in terms of their use and allocation in order to be able to respond to the changing environment and emerging challenges. Concerns were raised regarding the short timeline for the investment round and whether this might hinder a successful outcome. It was suggested that focus should be maintained on increasing the efficiency, transparency, and accountability of WHO that Member States have requested.

15. WHO will work with Member States on the mechanism for the WHO investment round, including the hosting, co-hosting, and organization of regional events, with ongoing support from PAHO. Likewise, WHO will continue to engage with Member States to further detail the efficiencies expected from the implementation of the investment round, as well as the reporting aspects. This
process will be closely coordinated with the development of the GPW 14 and the corresponding investment case. These efforts will also help to inform the development of PAHO’s investment case for its next strategic plan.

16. Another key aspect of work under the leadership and governance of WHO is the work on the Secretariat implementation plan on reform (7). This plan was endorsed by the 76th World Health Assembly, in May 2023, following the work of the Agile Member States Task Group on Strengthening WHO’s Budgetary, Programmatic and Financing Governance. The plan includes actions related to: a) the programme budget; b) transparency; c) prevention of sexual exploitation, abuse, and harassment; d) financing; e) accountability; f) resource mobilization; g) country-level impact; and h) governance.

17. An update on actions taken to implement the plan was presented at the 154th session of the Executive Board (8). The actions implemented are essential for the continued strengthening of WHO’s efficiency, transparency, and accountability, and some of them have been integrated into the GPW 14 document development process, the investment round, country presence, and other connected efforts.

**Strengthening the Presence of WHO at Country Level**

18. Country presence continues to be a matter of priority for Member States and PASB. In that regard, PASB continued to collaborate closely with WHO to implement the action plan of the Action for Results Group aimed at improving impact at the country level, with active participation from each WHO regional office, including the Regional Office for the Americas (AMRO). As part of this initiative, considerable attention was given to reviewing staffing needs, in accordance with the WHO typology of countries, to ensure a core predictable country presence. Consequently, a total of US$ 20 million2 was approved to strengthen PAHO country offices in 2024–2025. With this amount, PAHO will be able to address some of the staffing gaps identified at the country level.

19. Related to these efforts at the global level, PASB continued to implement past internal recommendations on country presence as an ongoing effort to ensure that country offices have sufficient capacities to provide technical cooperation. A country presence working group was established to prepare a proposal on improving the country presence in key countries, as a first phase, and the rest of the country offices as a second phase. PAHO/WHO country cooperation strategies will be a key tool for defining the country presence required to respond to country priorities. The first phase has been completed, with plans to gradually improve presence in key countries beginning in the 2024–2025 biennium, and the second phase is under development.

20. This joint initiative between WHO and PAHO will serve to significantly improve staffing at the country level and advance the goal of improving country presence. These efforts will ensure that WHO, including AMRO, is strategically and technically positioned to respond to the needs and priorities of Member States.

---

2 Unless otherwise indicated, all monetary figures in this report are expressed in United States dollars.
Strategic Collaboration and Engagement with PAHO Member States and WHO

21. Timely and close collaboration and consultations between PASB and Member States provide a foundation for effectively promoting the Region’s active participation in and contribution to WHO’s governance and its strategic, programmatic, budgeting, and financing activities. PASB will continue exploring avenues for further information-sharing so as to ensure that WHO global strategic and statutory documents adequately reflect the contributions of the Region and its countries, including with regard to human resources. Consultations with Member States will continue on the topics to be addressed during meetings to be held ahead of the 77th World Health Assembly. PASB will continue to facilitate the provision of the necessary information, briefings, and regional consultations, as necessary or as requested by Member States, to ensure that contributions from the Americas at regional and country levels continue to shape and advance the global health agenda.

22. In the spirit of contributing to and influencing the global health agenda, it is also important to continue to foster collaboration among PAHO Member States in order to develop multi-country and regional statements on matters of priority importance to the Region, whenever possible. To this end, PASB will continue to collaborate, along with the Group of the Americas and Member State delegations, with WHO’s Governing Bodies.

Accountability and Transparency

23. In this section, updates are provided on the status of the WHO Programme budget 2022–2023 (WHO PB22–23) and the WHO Programme budget 2024–2025 (WHO PB24–25), including programmatic and financial monitoring and reporting. As of 31 December 2023, the overall funding of the WHO PB22–23 was $8.4 billion (125% of the overall approved budget), with base programs financed in the amount of $4.37 billion (88% of the approved budget for base programs). The WHO PB22–23 included a $292.1 million approved budget for the AMRO base programs, which, as of 31 December 2023, was financed in the amount of $182.4 million (62% of the approved budget). Of this amount, $123.3 million was WHO flexible funds and $59.1 million was voluntary contributions. Of the share of voluntary contributions, as of 31 December 2023, the Region received $9.4 million in thematic funding, through the WHO Resource Allocation Committee mechanism, which is more flexible in nature than other voluntary contributions.

24. The WHO PB24–25 (9) included a $295.6 million approved budget for AMRO, a 1.2% increase in comparison with the approved WHO PB22–23 ($292.1 million). While the WHO budget for the Americas is still the least funded when compared with other regions, it is expected that the amount of funding will increase over previous budget cycles. In December 2023, WHO committed to provide an initial allocation of $149.2 million in flexible funds for AMRO in 2024–2025. This amount is $29 million more than the initial allocation for 2022–2023 and includes $20 million allocated in the context of the above-mentioned core predictable country presence initiative.

---

4 The Regional Office for the Americas considers Pandemic Influenza Preparedness Framework and Special Programme for Research and Training in Tropical Diseases funds in base programs and not special segment as WHO, which explains the difference reported in financing of base programs between the Regional Office ($182.4 million) and WHO ($173.6 million).
25. Member States’ calls for more equitable funding for the Region are bearing fruit. PASB will continue to monitor and collaborate with WHO to ensure the timely and quality implementation of funds. Ongoing efforts by WHO to mobilize more flexible funds and strengthen internal coordination mechanisms (engaging the regions) are key to improving the financing of the approved WHO PB24–25.

26. An important aspect of WHO’s accountability under the Programme budget is its monitoring and assessment through the presentation of annual results reports to the World Health Assembly. Results from the Region of the Americas, including country success stories, will be incorporated in the WHO results report to be submitted to the 77th World Health Assembly.

27. In addition, both Member States and PASB have long advocated for WHO to adopt the joint assessment methodology that has been in use in the Americas since 2014. As recommended in the Secretariat implementation plan on reform (7), WHO is piloting a joint assessment with selected countries for the 2022–2023 assessment. Collaboration with PASB on the basis of its own experience has directly contributed to the conceptualization of this process.

Action by the Subcommittee on Program, Budget, and Administration

28. The Subcommittee is invited to take note of this report and provide any comments it deems pertinent.

References


