

Update on PB2022-23 Financing and Implementation and Programme Budget 24-25 strategic considerations

**Member States briefing
Geneva, 21 June 2022**



**World Health
Organization**

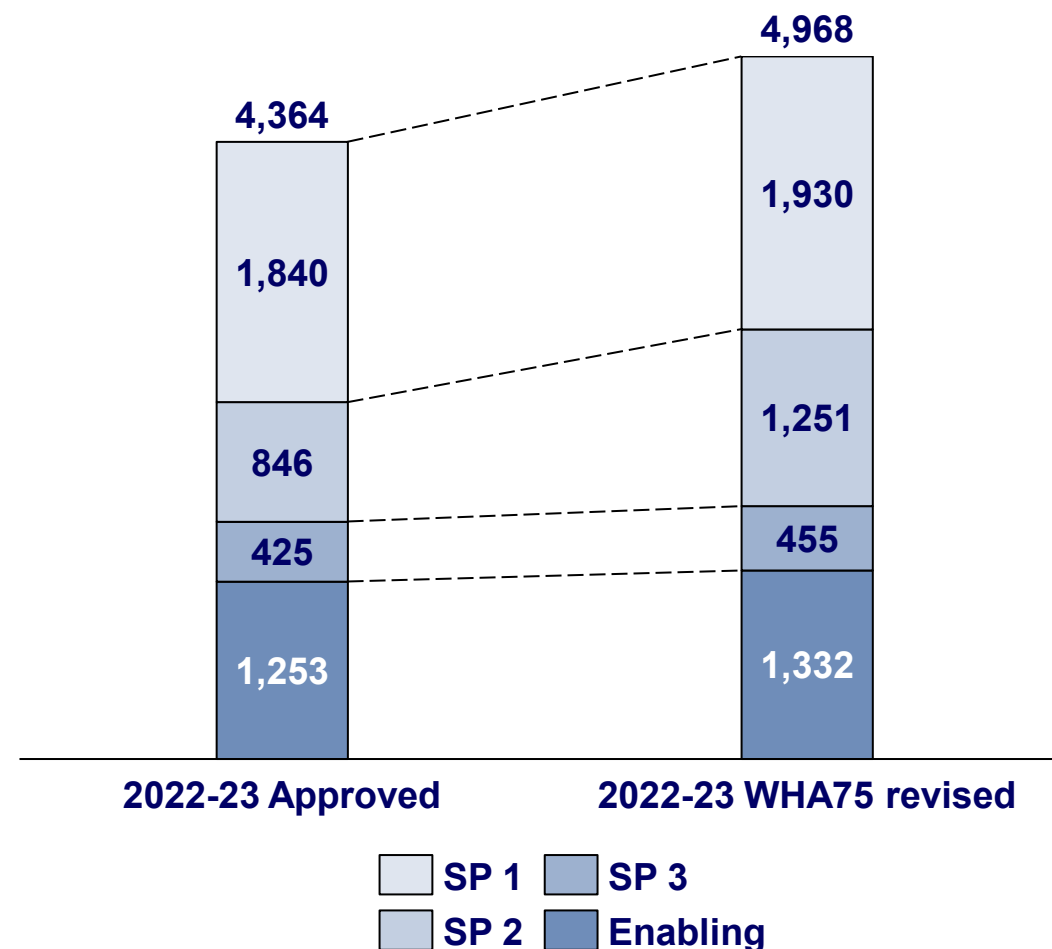
Outline

- ❑ PB 2022-2023 Revision
- ❑ Update on funding and utilization
- ❑ Heatmap of Base funding by major offices



PB 2022-2023 Revision (US\$ million)

- As per WHA74 WHO PB 22-23 Base segment Approved budget was US\$ 4,364 million;
- In May 2022, WHA75 resolved to increase the PB22-23 Base segment to US\$ 4,968 million (+US\$ 604 million);
- 67% of the increase is for SP2 or an additional US\$ 405 million;
- US\$ 120 million increase for SP1 and SP3;
- US\$ 50 million to strengthen Transparency, Accountability and Compliance (including PRSEAH)
- US\$ 29 million for health information systems
- Overall increase primarily to benefit country level activities



Update on funding and utilization of revised PB22-23 (as of 31 May 2022)

76%

Current level of Base budget financing

18%

Current level of Base budget utilization

74%

Best financed SP1

31%

Least financed SP2

20%

Utilization SP1, SP4

14%

Utilization SP2, SP3

- ❑ PB increase for the base segment had an impact on both funding and utilization levels (i.e. decrease);
- ❑ Current financial gap for the base segment is approximately US\$ 1.2 billion;
- ❑ Financing of Strategic priorities (SP) is uneven;
- ❑ Utilization of SPs varies from 14% to 20%



Heat map of revised PB22-23 funding by Major office by outcome (as of 31 May 2022)

Global outcomes	AFRO	AMRO	EMRO	EURO	SEARO	WPRO	HQ	TOTAL
1.1 Improved access to quality essential health services	52%	31%	66%	64%	57%	57%	134%	74%
1.2 Reduced number of people suffering financial hardship	15%	29%	27%	65%	41%	33%	69%	39%
1.3 Improved access to essential medicines, vaccines, diagnostics and devices for primary health care	44%	20%	76%	34%	51%	33%	109%	72%
2.1 Countries prepared for health emergencies	25%	15%	13%	40%	14%	25%	48%	28%
2.2 Epidemics and pandemics prevented	49%	10%	17%	27%	22%	9%	62%	40%
2.3 Health emergencies rapidly detected and responded to	26%	11%	22%	20%	14%	19%	37%	27%
3.1 Safe and equitable societies through addressing health determinants	14%	38%	37%	49%	42%	35%	160%	63%
3.2 Supportive and empowering societies through addressing health risk factors	15%	14%	31%	113%	38%	35%	142%	59%
3.3 Healthy environments to promote health and sustainable societies	15%	11%	19%	52%	36%	38%	51%	36%
4.1 Strengthened country capacity in data and innovation	21%	28%	10%	34%	40%	24%	43%	31%
4.2 Strengthened leadership, governance and advocacy for health	60%	68%	40%	52%	39%	47%	57%	54%
4.3 Financial, human, and administrative resources managed in an efficient, effective, results-oriented and transparent manner	35%	59%	42%	50%	55%	60%	36%	42%
Grand Total	40%	28%	36%	53%	47%	40%	77%	52%

- Overall – as expected at this stage - increased number of less funded outcomes by Major offices
- Same outcome can be overfunded in one part of the Organization and underfunded in another (e.g., 1.1, 3.1, 3.2)
- Any given Major office can be well funded in some outcomes and less funded in other outcomes
- HQ and EURO are among the best funded Major offices;
- Strategic priority 2 outcomes (2.1-2.3) least financed for all Major offices but HQ
- Strategic priority 3 outcomes (3.1-3.3) are underfunded in most Major offices



Programme Budget 2024-2025 development

Strategic considerations

1. Developing Strategic Focus/Priorities
2. Overall budget envelope
3. Process – how to make it different?

Emerging theme:

“Implementation of GPW13’s unfinished agenda”



1. Strategic Focus

1. Support countries to make an urgent paradigm shift towards promoting health and well-being and preventing disease by addressing its root causes

→ Healthier Population billion

2. Support a radical reorientation of health systems towards primary health care as the foundation of universal health coverage

→ Universal Health Coverage billion

3. Urgently strengthen the systems and tools for epidemic and pandemic preparedness and response at all levels, underpinned by strong governance and financing

→ Health Emergencies Protection billion

4. Harness the power of science, research innovation, data and digital technologies as critical enablers of other priorities

} Leadership functions

5. Urgently strengthen WHO as the leading and directing authority on global health at the center of the global health architecture

- Starting point: priorities suggested in the GPW 13 extension document
- Further refinement of focus areas under each heading that can 'accelerate' progress
- Follow a data-driven approach as a starting point



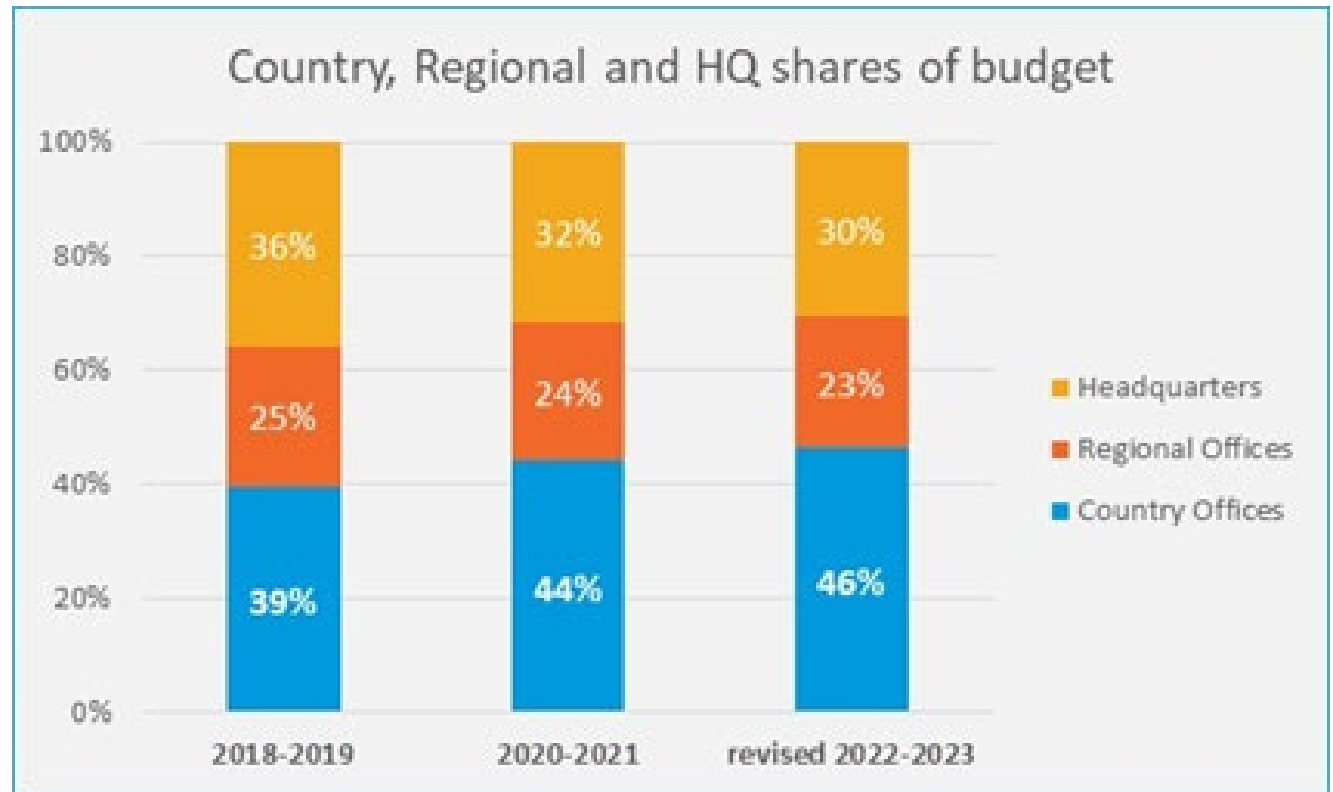
1. Strategic Focus (cont'd)



- ❑ Initial global and regional input based on data/evidence for consideration of the RCs
- ❑ Discussion on priority setting at the RCs
- ❑ Individual country prioritization discussions starting now and finalized after the RCs
- ❑ Consolidation of priority discussions
- ❑ MS discussions on consolidated draft

2. Budget

- Given the increase of Base PB22-23, we propose to keep PB24-25 close to constant
- At the same time further increase of country allocations.



3. Overall Process

DG and RD jointly initiate the PB development process with a letter to all MS (June 2022)

Regional Offices design a consultation process tailor-fit to their specific context (June-July 2022)

Regional proposals are discussed with the RCs (August to October 2022)

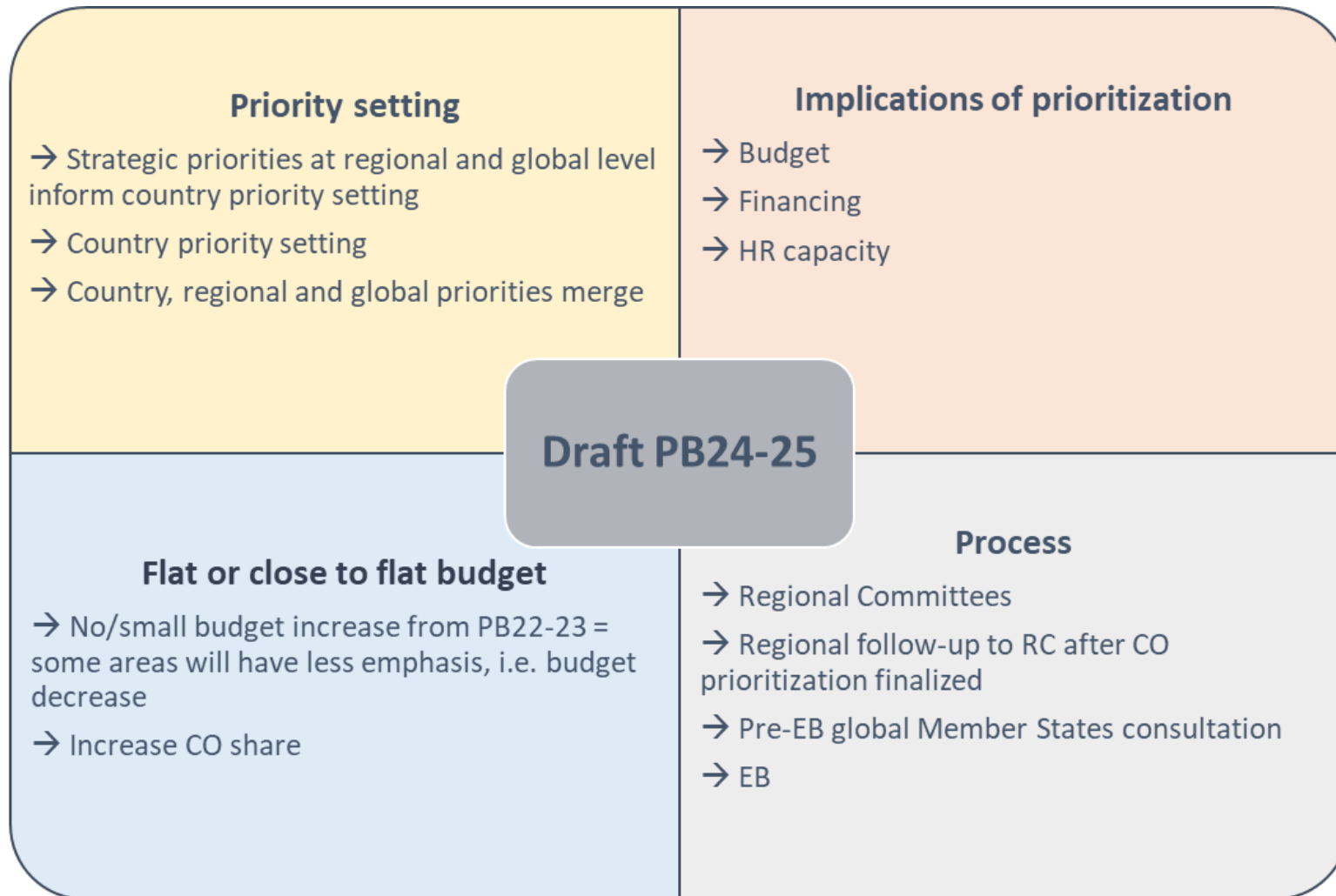
Major Offices conduct their process to provide structured inputs to the global development of the PB (Depends on their RC schedule between August and October 2022)

Consolidation (October-November 2022)

The EB in January 2023 will discuss the draft proposed PB 2024-2025 and provide guidance for finalization for the WHA.



3. Process at a glance



Outline of PB for the RCs

- **Background and context** – Key elements defining the draft proposed PB, including COVID 19 lessons, getting-back-on track agenda, other relevant context
- **Global Strategic directions** in line with GPW13 and refined focus areas
- **Region specific data drivers and evidence** – Overview of available data analysis that affect the prioritization or shifts in emphasis in the region matched with existing regional priorities. Other data and information will be considered, including CCS, cooperation frameworks, national plans.
- **Budget considerations** – Outlines the considerations on the budget for 2024-2025, including initial envelopes, initial proposals on overall budget envelopes, budget shifts in line known information at the time of the RC
- **Consultation process** – Overview of the global consultations, plus details on region-specific consultation process.
- **Timeline** – Global timeline, including consultations, engagement with the Task Group, plus specific timeline adaptations of RO in line with RC schedule.
- **Specific questions** to be discussed at the RC

