

Transforming for enhanced country impact: progress in the Eastern Mediterranean Region

Introduction

1. This report describes the progress made by and planned activities of the WHO Regional Office for the Eastern Mediterranean and WHO country offices in the Region as part of WHO transformation across the three levels of the Organization. It focuses on the main developments since the 65th session of the WHO Regional Committee for the Eastern Mediterranean (RC65) in October 2018. During RC65, technical discussions focused on the implementation of the Thirteenth General Programme of Work, 2019–2023 (GPW 13), including the WHO Transformation Agenda. As part of the latter, Member States requested the Regional Director to conduct country functional reviews (CFRs) to strengthen WHO performance based on country needs and priorities, as outlined in resolution EM/RC65/R2.

2. WHO's vision for the Region, *Vision 2023*,¹ launched during RC65, sets out the Organization's strategic priorities for the WHO Eastern Mediterranean Region in 2020–2023, and these were further elaborated in *WHO's strategy for the Eastern Mediterranean Region, 2020–2023: turning Vision 2023 into action*.² This current report highlights the progress made with regard to regional strategic priority 4 of *Vision 2023*: transforming WHO to make it “an accountable, catalytic leader in health in the Region by making fundamental changes in the WHO working business model, systems and culture”.

3. To achieve regional strategic priority 4, the following five strategic objectives were identified:

- Strategic objective (a): align the work of all staff to a common strategy;
- Strategic objective (b): ensure a fit-for-purpose structure and processes by improving strategic positioning, engagement and capacities to efficiently respond to country needs and priorities;
- Strategic objective (c): expand partnerships and strengthen strategic communications as core functions;
- Strategic objective (d): streamline the evidence base for informed health policy-making; and
- Strategic objective (e): streamline measurement approaches to ensure WHO functions and country achievements are measured effectively.

4. This report is a progress report on strategic objectives (a), (b) and (c). Strategic objective (d) is progressing through implementation of the framework for action to improve national institutional capacity for the use of evidence in health policy-making in the Eastern Mediterranean Region, endorsed by the Regional Committee at its 66th session, and a separate progress report on this will be presented to the Committee during its 68th session. Work on strategic objective (e) is also progressing.³

5. The progress made by WHO on strategic objectives (a), (b) and (c) of regional strategic priority 4 is summarized below, with further details presented in Annex 1. In particular, substantial progress has been made in developing diagnostic tools to inform the planning and design of transformative actions across

¹ *Vision 2023: Eastern Mediterranean Region: health for all by all*. Cairo: WHO Regional Office for the Eastern Mediterranean; 2018 (http://applications.emro.who.int/docs/RD_Vision_2018_20675_en.pdf, accessed 2 October 2020).

² *WHO's strategy for the Eastern Mediterranean Region, 2020–2023: turning Vision 2023 into action*. Cairo: WHO Regional Office for the Eastern Mediterranean; 2019 (<https://applications.emro.who.int/docs/EMRPUB-RDO-014-2019-EN.pdf?ua=1>, accessed 4 October 2020).

³ Work on strategic objective (e): streamline measurement approaches to ensure WHO functions and country achievements are measured effectively, is led by the Department of Science, Information and Dissemination in the Regional Office. Some major achievements and issues are presented in the annual report of the Regional Director (document EM/RC67/5). The Regional Health Observatory was comprehensively redeveloped in 2019.

strategic objectives (a), (b) and (c). In parallel, and depending on resource availability, actions have commenced with a focus on strengthening WHO's country presence and impact.

Progress update

6. The Regional Office organogram has been restructured to align with GPW 13 and the new structure of WHO headquarters. Key changes include a defined structure for coordinating transformation headed by the Chef de Cabinet and the establishment of a new Department of Communications, Resource Mobilization and Partnership (CRP) under the Regional Director. In addition, units focusing on country support, the Sustainable Development Goals (SDGs), and gender, equity and human rights were established in or moved to the Regional Director's Office.

7. Regional functional reviews are in progress to further align different technical and operational functions. Functional reviews of the WHO Health Emergencies Programme (WHE), Polio Eradication Initiative (PEI) programme and communications functions have been completed.

8. Country functional reviews (CFRs) for 18 WHO country offices in the Region have been completed, and country-specific recommendations are being actioned and overseen by a newly established committee under the chairmanship of the Regional Director. A dashboard for monitoring the implementation of key recommendations is in place. An initial financial analysis indicates that US\$ 45 million is required to strengthen the country offices in the nine countries facing emergencies; the total cost for all regional country offices is therefore expected to be much higher. A detailed report on the CFRs is in preparation and will be shared with Member States and partners by the end of 2020.

9. Ongoing analysis of CFR findings and recommendations is informing regional and global transformation initiatives, including those related to developing regional strategies, core operating models, business processes and configuration of technical capacity at the three levels of the Organization to deliver at country level.

10. Strategic partnerships and communications emerged from the CFR process as a key area for strengthening, especially in country offices. The recently created CRP department responds to this need and is currently finalizing its strategy in line with regional and country needs and priorities. WHO country offices' communication capacities are being strengthened through the establishment of communications and resource mobilization positions.

11. Action has also been taken on the building of partnerships. The Regional Office initiated implementation of the Global Action Plan for Healthy Lives and Well-being for All, which aims to improve collaboration among 12 health and development partners on the health-related SDGs. Strategic discussions, planning and implementation largely focusing on primary health care and health financing are taking place in seven countries (Djibouti, Egypt, Jordan, Lebanon, Morocco, Pakistan and Somalia). A Regional Health Forum in March 2020 and subsequent meetings resulted in a joint regional workplan involving 12 United Nations organizations to ensure that countries meet the health-related SDGs, and plans are under way to launch a Regional Health Alliance by the end of 2020. In addition, and as part of WHO preparedness for and response to the COVID-19 pandemic, a partnership network involving 35 health and development partners, including academia and international nongovernmental organizations (INGOs), was established which includes three working groups on risk communication and community engagement, humanitarian settings, and supplies and logistics.

12. A staff pulse survey on WHO transformation was conducted in 2019 and a staff well-being survey in mid-2020. Discussion is under way to strengthen internal policies to improve staff well-being. In addition, work is ongoing with the Global Staff Management Council to finalize staff policies on mobility, health insurance and harassment.

13. Initiatives are being developed to strengthen technical capacity in leadership, health diplomacy, gender and equity. The Regional Office partnered with the United Nations Systems Staff College (UNSSC) to deliver a course on country leadership in health and well-being in February 2019, and a subregional course was conducted jointly by WHO, UNSCC and the Gulf Cooperation Council in November 2019. The Regional

Office is collaborating with the WHO Regional Office for Africa on their next leadership and health diplomacy course planned for 2021. Finally, a leadership course for WHO Representatives is currently being developed as part of the CFR process.

14. Key performance indicators based on the WHO Results Framework have been developed to monitor progress towards delivering impact at the country level aligned with GPW 13 and SDG targets for monitoring key activities, improving operational efficiency, transparency and accountability, and better demonstrating achievements.

15. Internally, during lockdowns and periods of teleworking necessitated by the COVID-19 pandemic, WHO senior management paid special attention to ensuring staff well-being and support, including through the development of an information package on mental health and a regular Regional Office staff newsletter. The efforts made to highlight and reinforce the values and role of WHO, and acknowledge the vital contributions and efforts of front-line WHO teams during the COVID-19 response, have been key in sustaining the morale of WHO's technical programmes.

16. As part of the COVID-19 response, regular communication took place between the Regional Director and government ministers, including daily messages with updates on pandemic activities and progress, as well as with other United Nations regional directors and resident coordinators. Furthermore, as a direct result of the involvement of the Regional Director and senior WHO management in discussions and high-level meetings, there was increased collaboration with the WHO Regional Office for Africa, African Union, Arab League and the Organisation of Islamic Cooperation. Expanded collaboration also took place with academic centres and think tanks in the Region, which allowed the Regional Office to better share information on WHO's response to the pandemic, clarify its mandate, provide programme updates and position health at the core of the response.

17. Collaboration between the three levels of WHO and countries has also increased as virtual meetings and consultations have expanded, allowing for greater participation than would be possible in face-to-face meetings and for closer attention to be paid to country requests.

Challenges

18. Progress on the WHO Transformation Agenda faces several challenges, including those which have arisen due to the economic and political consequences of the COVID-19 pandemic. The expected implications of COVID-19 and lessons learnt from the planned evaluation of the WHO response to it, in addition to the withdrawal of funding from the United States of America, will need to be configured into the transformation process, including through possible reprioritization. Ensuring coordination in the design and implementation of transformation initiatives across the three levels of the Organization also remains a challenge. Additional financial resources will be required to ensure a strong country presence across the programmatic, operational and support functions of WHO.

Next steps

19. The effective coordination of all WHO organizational levels in the development and implementation of transformation initiatives needs to be ensured. This will involve: (a) regular meetings of the Global Transformation Team and Regional Transformation Task Force; (b) Regional Office input into the design of technical and operational initiatives cascading from WHO headquarters; and (c) effective monitoring of the implementation of CFR recommendations through the establishment of an implementation committee headed by the Regional Director.
20. Work on the cost implications of strengthening WHO country offices resulting from the CFR process will be expedited and a resourcing plan developed – while remaining mindful of the overall constraints on WHO following the withdrawal of funding. Additional high-level review missions are planned for desk offices and newly established WHO country offices.
21. In order to mobilize additional resources, reports and other advocacy products will be developed based on the findings and recommendations of the CFRs.
22. The capacity of the unit responsible for Country Cooperation and Collaboration with the United Nations System (CCU) at the Regional Office will be strengthened, in line with its functions and with the restructuring of the CCU at WHO headquarters.

Annex 1.

Progress on regional strategic priority 4: Transforming WHO

Strategic objective (a): align the work of all staff to a common strategy	
Areas of work	Progress
Staff well-being; respectful workplace initiatives; WHO Values Charter	<ul style="list-style-type: none"> • The WHO Values Charter was launched in May 2019 with active engagement at country and Regional Office levels. • The Regional Transformation Taskforce was expanded in July 2019 to scale up collaboration across the Regional Office and country offices. • Staff support services were expanded to include a peer support volunteer network and a psychosocial support programme, and a staff screening programme for hepatitis and noncommunicable diseases was conducted in the Regional Office as part of the Egyptian national screening initiative. • A staff pulse survey on WHO transformation was conducted in July 2019 among a limited group of directors and WHO Representatives, and in November 2019 among all regional staff. In addition, a staff well-being survey was conducted in mid-2020. Discussions are under way to strengthen internal policies to improve staff well-being. • Work is ongoing with the Global Staff Management Council to finalize staff policies on mobility, health insurance and harassment. • Local staff association committees are being established in WHO country offices to facilitate communication with the regional Staff Association Committee and senior management. • Internal communications processes are being strengthened to support staff engagement, including through the launch of the regular Regional Office staff newsletter in June 2020. • Staff retreats at country office level, social events/gatherings at regional level and “health-promoting” days will continue to be held.
Career development and performance management	<ul style="list-style-type: none"> • There are continuing professional development assignments and participation by staff in courses through the iLearn online platform.
Strengthening technical capacities in leadership, health diplomacy, team performance, gender and equity	<ul style="list-style-type: none"> • Potential WHO Representatives are being supported to prepare for their assessment as part of their application process. • A leadership course for WHO Representatives is being developed under the CFR process. • The Regional Office partnered with UNSSC to deliver a course on country leadership on health and well-being in February 2019, and a subregional course was conducted jointly between WHO, UNSCC and the Gulf Cooperation Council in November 2019. • Collaboration is taking place with the WHO Regional Office for Africa on their upcoming leadership and health diplomacy course planned for 2021. • A regional gender, equity and human rights training package is being developed and piloted among WHO country office staff.
Strategic objective (b): ensure a fit-for-purpose structure and processes by improving strategic positioning, engagement and capacities to efficiently respond to country needs and priorities	
Reshaping operating models	<ul style="list-style-type: none"> • The Regional Office was restructured in August 2019 to ensure alignment with GPW 13 and WHO headquarters. • CFRs have proposed new organograms for WHO country offices, aligned with the Regional Office structure and country needs. • Discussions are ongoing at the Regional Office and with the Global Transformation Team at WHO headquarters on a core operating model with the flexibility to contextualize as needed. • Regional functional reviews are ongoing, and reviews of WHE, PEI and Communications programmes have been completed.
Strengthening country presence	<ul style="list-style-type: none"> • CFRs have been conducted for 18 WHO country offices. • CFR recommendations on strengthening human resources are being implemented, depending on resource availability. • The Department of Human Resources Services is working on costing additionalities in terms of funding requirements. • A costed regional human resources plan is being developed.

Enhancing strategic and operational planning in countries, and ensuring value for money for measurable impacts	<ul style="list-style-type: none"> • As of July 2020, 10 country cooperation strategies were valid or near finalization and six more had been initiated. • Value-for-money workshops have been conducted at the Regional Office, with plans to cascade to WHO country offices. • The alignment and prioritization of country support plans is ongoing.
Developing a culture of performance management through comprehensive and clear reporting of achievements	<ul style="list-style-type: none"> • A set of key performance indicators that aligns with GPW 13 has been established for the Regional Office and country offices to monitor key activities, improve operational efficiency, transparency and accountability, and better demonstrate achievements.
Strategic objective (c): expand partnerships and strengthen strategic communications as core functions	
Enhancing strategic partnerships with donors, academia, United Nations entities, regional bodies and communities to address regional priorities	<ul style="list-style-type: none"> • A new department (CRP) was established as part of the restructuring of the Regional Office. • The Regional Office started implementation of the Global Action Plan for Healthy Lives and Well-being for All, a global plan to improve collaboration among 12 health and development partners on the health-related SDGs through ongoing discussions and strategic planning in seven countries of the Region, conducted a Regional Health Forum in March 2020 and prepared a joint regional workplan with 12 United Nations organizations. • A partnership network was established, including three working groups (risk communication and community engagement, humanitarian settings, and supplies and logistics) with 35 health and development partners including academia and INGOs as part of WHO preparedness for and response to the COVID-19 pandemic.
Improving Member State engagement to ensure the relevance and effectiveness of WHO's regional and global work	<ul style="list-style-type: none"> • Efforts to strengthen country engagement with WHO included a senior management meeting with ambassadors to Egypt from countries of the Region in December 2019, the first in-person meeting with regional members of the WHO Executive Board in January 2020, COVID-19 briefings with ministers of health and the Permanent Missions, and the establishment of a network of governing bodies focal points from all countries in the Region.
Strengthening external communications to reiterate WHO's role as a leader and trusted health authority	<ul style="list-style-type: none"> • Communications positions are being established in WHO country offices, with headquarters support. • A regional functional review of communications was conducted in 2019, resulting in a regional communications strategy which will be part of a broader CRP strategy currently being developed. • A two-day video conference on planning and capacity development with focal points for resource mobilization from WHO headquarters, the Regional Office and country offices was held in December 2019. • Communications expanded markedly in response to needs and priorities due to the COVID-19 pandemic.