



Update on implementation of the WHO transformation agenda in the Eastern Mediterranean Region

Introduction

1. In alignment with the three-level global WHO transformation agenda, the process of transformation has progressed in the Eastern Mediterranean Region guided by the fourth pillar of *Vision 2023: health for all by all*, which calls for internal transformation in WHO. *Vision 2023* is anchored in WHO's Thirteenth General Programme of Work (GPW 13) 2019–2025 and the Sustainable Development Goals (SDGs).

2. On a global level, the Organization has been taking action for long-term improvements. The way forward for sustainable financing has been paved, based on Member States' decision for an increase in assessed contributions. An increase in assessed contributions¹ will empower WHO to fulfil its mandate, while also reflecting the increased demands on WHO by its Member States. The feasibility of a replenishment mechanism has been assessed, including analysis of the six guiding principles,² to further broaden the WHO financing base in response to the need for more sustainable, predictable and flexible financing. This process is leading to the first "WHO investment round", to be implemented in 2024 in close consultation with Member States.³

3. The Intergovernmental Negotiating Body was established to draft and negotiate a WHO convention, agreement or other international instrument on pandemic prevention, preparedness and response (commonly known as the Pandemic Accord). The Working Group on Amendments to the International Health Regulations (2005) (IHR) was constituted as a continuation of the Working Group on Strengthening WHO Preparedness and Response to Health Emergencies; their work will focus exclusively on the consideration of proposed targeted amendments to the IHR.⁴ Furthermore, the Agile Member States Task Group on Strengthening WHO's Budgetary, Programmatic and Financing Governance was created to address challenges in governance, transparency, efficiency, accountability and compliance. These working groups provide an environment for dialogue to produce strategic directions for the Secretariat and Member States. These efforts, in addition to the deepening relationship with Member States, strengthens WHO in effectively fulfilling its role as a leader and coordinator in health.

¹ Annex 4. Recommendations of the Working Group on Sustainable Financing to the Seventy-fifth World Health Assembly. In: Seventy-fifth World Health Assembly, Geneva, 22–28 May 2022. Resolutions and decisions, annexes. Geneva: World Health Organization; 2022 (https://apps.who.int/gb/ebwha/pdf_files/WHA75-REC1/A75_REC1_Interactive_en.pdf#page=1, accessed 2 May 2023).

² Sustainable financing: feasibility of a replenishment mechanism, including options for consideration: report by the Director-General (A76/32). Geneva: World Health Organization; 2023 (https://apps.who.int/gb/ebwha/pdf_files/WHA76/A76_32-en.pdf, accessed 21 August 2023).

³ Decision WHA76(19). Sustainable financing: feasibility of a replenishment mechanism, including options for consideration. Geneva: World Health Organization; 2023 ([https://apps.who.int/gb/ebwha/pdf_files/WHA76/A76\(19\)-en.pdf](https://apps.who.int/gb/ebwha/pdf_files/WHA76/A76(19)-en.pdf), accessed 20 August 2023).

⁴ Decision WHA75(9). Strengthening WHO preparedness for and response to health emergencies. Geneva: World Health Organization; 2022 ([https://apps.who.int/gb/ebwha/pdf_files/WHA75/A75\(9\)-en.pdf](https://apps.who.int/gb/ebwha/pdf_files/WHA75/A75(9)-en.pdf), accessed 2 May 2023).

Progress update

Implementing the regional transformation roadmap

4. At the regional level, transformation initiatives have been implemented and remain in sync with the regional transformation roadmap,¹ which has 10 action points. Formulated using a bottom-up approach, the roadmap was the outcome of intensive consultations between WHO Representatives from all countries and territories of the Region and senior managers from the WHO Regional Office for the Eastern Mediterranean. It serves as a blueprint for the ongoing transformation efforts, and implementation of the roadmap has yielded progress on multiple fronts. The roadmap focuses on: upholding WHO values; legal issues; enabling services; the regional Transformation Change Network; monitoring and impact; emergency situations; country operations; communications and partnerships; health leadership in the UN; and leadership capacities.

Transformation governance

5. Following the establishment of the Transformation unit in the Regional Office in 2021, the Office's transformation facilitation, monitoring and reporting roles have been strengthened. The Regional Transformation Team (RTT), comprising members from the Regional Office and country offices, was established in 2022 to ensure wider engagement in the transformation process. Members of the RTT, in addition to staff based in country offices, remain actively engaged in the process through thematic working groups aligned with the priority areas laid out in the regional transformation roadmap.

6. Contextualizing WHO transformation in the Region has involved strategic prioritization in various areas. This includes strengthening a collaborative and results-focused culture and upholding WHO values in all areas of work; for example, building staff capacities through respectful workplace initiatives such as diversity, equity and inclusion (DEI) measures and preventing and responding to sexual exploitation, abuse and harassment (PRSEAH). A Respectful Workplace Network comprising WHO country office staff has been established to ensure a unified approach in delivering on WHO's core values. The new PRSEAH coordinator was appointed in the Regional Office in May 2023.

7. The Organization also made headway in achieving gender parity and more equal geographical representation. It continued its efforts to improve diversity, balanced representation and gender parity in human resource management. Statistics on gender distribution as at May 2023 showed a slight improvement since August 2022, with the proportion of female professional staff in the Regional Office and country offices increasing from 33.5% to 35%. At director and WHO representative level, the female staff increase was slightly more significant, from 34.4% to 36.5% during the same period. In addition, 70% of Regional Office international professional staff are from developing countries.

8. A regional staff counsellor was recruited to improve staff health and well-being through multi-level interventions based on prevention, intervention, maintenance and follow-up support. This includes, for example, the provision of confidential individual/group counselling and emergency deployments following critical incidents to provide in-person support in affected areas.

9. The first full-time Regional Ombudsperson commenced their duties in May 2022. The Ombudsperson's Office emphasizes its provision of early assistance to support avoidance, prevention and amelioration of conflicts and problems.

¹ Update on implementation of the WHO transformation agenda in the Eastern Mediterranean Region. Annex I: WHO transformation roadmap for the Eastern Mediterranean Region, 2022–2023 (EM/RC69/13). Cairo: WHO Regional Office for the Eastern Mediterranean; 2022 (<https://applications.emro.who.int/docs/WHO-transformation-EMR-eng.pdf?ua=1>, accessed 2 May 2023).

10. To advance implementation of the health-related SDGs in the Region, the Organization expanded its partnerships to accelerate action on the ground. A prime example is the Regional Health Alliance (RHA), a regional platform spearheaded by WHO to coordinate implementation of the health-related SDGs. Closely linked with WHO's Global Action Plan for Healthy Lives and Well-being for All (SDG3 GAP) and the United Nations Country Teams (UNCTs), the RHA's membership comprises 16 health, development and humanitarian agencies. The RHA has launched its second joint action plan for 2022–2023, aligning its work with the seven SDG3 GAP accelerators. The Gender Advisory Group ensures gender equality cuts across all areas of the RHA's work. The RHA is linked to the Issue-based Coalition on Inclusive Social Services, as part of the United Nations (UN) Regional Collaborative Platform for the Arab States.¹ Activities and outputs of the RHA's work constitute the deliverables of the Coalition to support progress on SDG 3 for good health and well-being. The RHA strengthens interagency coordination at the regional level between UN partners, with a focus on country impact and a more targeted response to requests for support.

11. Placing WHO at the forefront in implementing the health-related SDGs requires action on three key areas of the regional transformation roadmap: strengthening transformation change networks; streamlining country operations; and strengthening WHO's position as a health leader within the UN. Putting the roadmap into action to empower country offices remains an important component in positioning WHO as the health lead for joint UN support to governments on the health-related SDGs. WHO has strengthened its support to country offices for developing and implementing their United Nations Sustainable Development Cooperation Frameworks (UNSDCFs) through, for example, the establishment of an SDG focal persons network in the Region. A three-day workshop was organized to help to build the capacity of SDG focal persons, particularly on improving WHO country offices' effectiveness in multisectoral work and multi-departmental government platforms, and as the health lead within the UNCTs under the UNSDCFs. This deeper engagement has provided a firm foundation in countries for multi-departmental and multisectoral platforms to implement the health-related SDGs. Through the RHA, regional in-house capacity for the systematic analysis of UNSDCFs was enabled by pooling of knowledge and development of innovative methods and tools. This will strengthen WHO's position for future UNSDCFs and ensure targeted country support.

12. The reactivated Transformation Change Network plays an essential role in placing people at the centre of change within the Organization. It contributes to a motivated and fit-for-purpose workforce at the Regional Office and country offices, as well as encouraging staff engagement in the transformation process. To push transformation at the country level, the WHO country office in Jordan piloted the first country transformation team in the Region to reduce working in silos and realign communication.

13. The WHO Regional Office's Department of Communications, Resource Mobilization and Partnerships, created during the reorganization of functions in 2021, is now fully operational. It provides leadership and support to the country offices through improved capacity for partnerships, resource mobilization and technical support. The transformation unit has also enhanced communication for change through, for example, the WHO transformation newsletters² for the Region (first produced in 2022). The newsletters serve to create dynamic interaction and engagement among staff. Newsletters are distributed to all staff in the Region, WHO headquarters and other regional offices to encourage inclusivity and increase visibility on the transformative work of WHO country offices in the Region. In addition, a regional transformation website³ was launched, which is regularly updated and offers an interactive method of engaging visitors.

¹ United Nations Arab States Regional Collaborative Platform [website]. (<https://as-rcp.org>, accessed 20 August 2023).

² WHO Transformation newsletter [website]. Cairo: WHO Regional Office for the Eastern Mediterranean (<https://www.emro.who.int/who-transformation/information-resources/index.html>, accessed 3 May 2023).

³ WHO Transformation [website]. Cairo: WHO Regional Office for the Eastern Mediterranean (<https://www.emro.who.int/who-transformation/index.html>, accessed 3 May 2023).

Strengthening the three-level operating model

14. An important milestone was reached regarding the implementation of the recommendations of the 18 country functional reviews (CFRs) that were conducted between 2018–2020. The Regional Office’s Country Cooperation Unit (CCU) intensified their quarterly follow-up with all country offices on the 1056 recommendations for making the offices more fit for purpose, and the dashboard for monitoring the implementation of recommendations underwent substantive improvements. By end of 2022, only 63 recommendations had not yet been implemented and were still in progress. Most of these relate to the business operations component of the CFRs and are linked to joint action with the Regional Office. The majority (43) are related to Afghanistan, Somalia and Sudan.

15. Following the baseline CFRs, rapid and substantive changes in many country contexts (for example, caused by emergency situations) have resulted in newly defined strategic priorities and requests by Member States, which require updates of CFRs. In such situations, time is of the essence. In addition, it was understood that becoming “fit for purpose” should involve a continuous process of quality improvement cycles. The CCU therefore developed a draft concept for integrated country functional reviews (iCFRs) as a best-practice example of agile management that takes advantage of ongoing routine processes (for example, in the area of compliance and risk management) and country technical missions to update fit-for-purpose recommendations and follow up on their implementation in a timely manner. The iCFRs also integrate the new corporate action plan for the introduction of a well-defined “core predictable country presence”, one of the major steps introduced following the 11th Global Management Meeting (GMM) in December 2022 to ensure transformation makes a real impact at country level. The CFR update of the WHO country office in Iraq, conducted in early 2023, was the first globally in WHO and demonstrated the useful complementarity of the core predictable country presence and CFRs.

16. The CCU also introduced transformative innovations for the development, monitoring and evaluation of country cooperation strategies (CCSs) and their alignment with the biennial programme budget planning. A regional CCS Peer Support Group, comprising experienced WHO country office staff, has been established to provide support in the development of CCSs for all countries in the Region. The links between the CCSs and the UNSDCF has been strengthened, an essential component of the regional transformation roadmap (action point 9). Seven country offices in the Region (Jordan, Lebanon, Morocco, Oman, Pakistan, Somalia and Sudan) have a valid CCS, while a further seven countries are in the process of developing and validating their CCS.

Strengthening results-based planning, reporting and evaluation

17. Following the extension of GPW 13 to 2025, country priorities for WHO collaboration to achieve the SDGs and the triple billion targets were reviewed and revised in 2022 through a consultative data-driven and evidence-informed process, capitalizing on WHO’s comparative advantages to ensure focused and efficient investment of WHO resources, and incorporating the impact of the COVID-19 pandemic on national health plans, as part of the development of the Proposed programme budget for 2024–2025. After they were endorsed by governments, the revised priorities for all 22 countries and territories of the Region were published on the Programme Budget 2024–2025 digital platform.¹ These revised priorities will be the reference for developing country support plans and for allocation of financial and human resources during operational planning for the Proposed programme budget 2024–2025.

18. Aiming to further enhance accountability, inform policy and strategy change, and promote organizational learning in WHO, an evaluation function was established in the Regional Office in September 2022 to promote

¹ Programme budget 2024–2025 [website]. Geneva: World Health Organization; 2023 (<https://www.who.int/about/accountability/budget/programme-budget-digital-platform-2024-2025>, accessed 20 August 2023).

evaluation of WHO's work in the Region. Immediately after the function was established, the Regional Office began to participate in Organization-wide thematic evaluations, decentralized evaluations and joint evaluations with other UN organizations, such as the 2022 Inter-Agency Humanitarian Evaluation response in Afghanistan. The Regional Office has also initiated evaluation of WHO's contribution at the country level, seeking to measure its contribution over the past two to three biennia. Increasingly, these evaluations will be conducted across WHO country offices in the Region to ensure better accountability and to utilize evaluation evidence and recommendations to improve WHO's work at country level.

Amplifying engagement with Member States

19. Throughout the year, the Regional Director maintained high-level engagement with Member States through briefing sessions with ministers and ambassadors, and numerous regular and ad hoc bilateral consultations. His strong leadership formed the basis for successful engagement between Member States and the WHO Secretariat in the Region. WHO staff liaise with designated WHO governing bodies focal points in the ministries of health and the permanent missions in Geneva, who actively coordinate engagement at various statutory and governing bodies meetings.

20. Over the course of 2022, WHO's regional governing bodies team conducted webinar sessions on leadership skills training for key topics in global health policy and diplomacy, targeting governing bodies focal points in both capital cities and permanent missions in Geneva. These included lectures from global and regional experts and leaders, as well as case-studies, scenario simulations and analysis of priority topics in WHO's annual cycle of governing bodies meetings and work. The positive feedback from Member States encouraged the team to develop a new series of the Leadership Skills Training on Global Health Policy and Diplomacy to be rolled out in 2023 as a corporate best-practice example, this time focusing on improving quality aspects of WHO resolutions in line with the request of the Agile Member States Task Group.

Moving towards a culture of transparency, compliance, knowledge and information-sharing

21. The Regional Office's Department of Compliance and Risk Management (CRM) continues to transform the organizational culture towards openness and transparency, and to strengthen internal control mechanisms through increased collaboration and interaction. At a global level, the Global Risk Management Committee concluded a review of WHO's Principal Risks. Administrative and programme review missions were conducted in Egypt, Jordan, Libya, Morocco and the Syrian Arab Republic, resulting in recommendations on critical areas. The implementation of audit recommendations in a timely and sustainable manner remains a high priority and follow-up efforts have been made to address delays. With more intense collaboration and intervention, audit opinions maintained a positive trend in the Region throughout 2022. A robust process to integrate risk management within operational planning was conducted for the 2022–2023 workplans, resulting in the integration of 70% of the Region's 2022 risk registers in the relevant workplans.

22. New initiatives have been rolled out in the Region, including the Anti-Fraud and Anti-Corruption (AFAC) policy, which the Regional Office contributed towards and provided training in. Delivering AFAC awareness to WHO's workforce, particularly those in the field, is critical to programme delivery and the Organization's reputation. A sexual exploitation, abuse and harassment (SEAH) risk assessment tool was also created for all country offices to evaluate SEAH risks as a prioritized Principal Risk and to identify mitigation actions to address identified gaps within local contexts. The Regional Office continued to carry out training and briefing sessions with staff to strengthen their skills and ownership of such risks. Furthermore, staff are encouraged to complete the global risk management training available on WHO's iLearn platform to ensure increased awareness (208 records were completed during 2022).

23. Since the Framework of Engagement with Non-State Actors (FENSA) became the responsibility of CRM at the beginning of 2022, engagement to identify and capacitate “FENSA champions” has increased. These champions have delivered customized training for different target audiences, in coordination with WHO headquarters, at regional and country levels. An eWorkflow system was developed to streamline due diligence and risk assessment processes, improve the audit trail and reduce the turnaround time for critical engagement with non-State actors.

United commitment to placing countries at the centre

24. Leveraging existing recommendations from internal WHO networks and coordination mechanisms, a strategic agenda was formulated for the 11th GMM. The Director-General articulated his full support and commitment to fast-tracking WHO transformation, calling for a global push during the GMM. As a result, a three-level Action for Results Group (ARG) was established to identify the scope of areas requiring intensive action to strengthen the capacity of country offices. The ARG produced a comprehensive plan of action, approved by the Global Policy Group, to bring about timely changes to make WHO impactful, reliable and relevant. The ARG will aim to mainstream the activities proposed in the plan of action within other ongoing initiatives.

25. In addition, the “100-day challenge” was initiated in February 2023 to pursue key areas of action in an intensive manner. Key areas include enhancing the core predictable country presence, improving human resources management and ensuring that financial needs are met. The Regional Director signed a new Delegation of Authority which aims to harness the capacity of the three levels of the Organization in support of country offices. It empowers WHO Representatives to become responsible for implementing and managing the resources entrusted to them in country offices and adhering with organizational rules and regulations, policies and operating procedures.

26. Within the plan of action, programme management was strengthened into a single streamlined planning system and global staff mobility was introduced. The plan of action also includes improvements to end-to-end procurement and other business processes, prior to the launch of the new business management system in 2024. Lastly, the initiative aims at improving three-level internal communication within the Organization and expanding staff participation in decision-making. A regional Action for Results Task Force was established in June 2023, chaired by two WHO Representatives, to translate the global ARG milestones and timelines into a regional action plan. The task force reports directly to the Regional Director and comprises relevant stakeholders at the Regional Office and country offices, who will be responsible for implementation of the regional plan, as well as for monitoring its progress and enhancing transparency and accountability.

Next steps

27. As part of the WHO global transformation agenda, the regional transformation roadmap has proven to be an effective tool for advancing change through its bottom-up approach, its strong focus on putting countries at the centre and its further strengthening of the engagement and active participation of Member States in WHO’s decision-making processes. This internal overhaul will support effective delivery to make a measurable impact in countries, advance the attainment of the health-related SDGs and provide value for money. By scaling up individual and institutional capacities, the Organization will move closer towards achieving the objectives of GPW 13.

28. Priority actions will be directed towards the thematic areas outlined by the ARG, as a result of the recommendations stemming from the 11th GMM. This will take place through a dedicated plan of action, for which alignment and a synergistic mode of work with the regional transformation roadmap is planned.

29. Key upcoming workstreams for the Organization are the implementation of more equitable financing and human resources allocation, including increased staff mobility to country offices. The streamlining of business processes and enabling additional flexibility in the delegation of authority in countries remain key next steps in enhancing three-level WHO transformation.