Strategic priorities of the WHO
General Programme of Work 2014-2019

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The General Programme of Work 2014-2019: Purpose of GPW

- To provide a high-level strategic vision for the work of WHO establishing the priorities

- as part of the WHO reform process
The General Programme of Work 2014-2019:

**WHO Mission**

- To act as the directing and coordinating authority on international health work
- towards the objective of the attainment by all peoples of the highest possible level of health as a fundamental right
The General Programme of Work 2014-2019:

Six core functions of WHO

1. Providing leadership on matters critical to health and engaging in partnerships where joint action is needed;

2. Shaping the research agenda and stimulating the generation, translation and dissemination of valuable knowledge;

3. Setting norms and standards, and promoting and monitoring their implementation;

4. Articulating ethical and evidence-based policy options;

5. Providing technical support, catalyzing change, and building sustainable institutional capacity;

6. Monitoring the health situation and assessing health trends.
New political, economic, social and environmental realities
Current health and demographic trends
More complex health challenges
More effective health security and humanitarian action
New challenges in health governance
Growing pressures on multilateral organizations
The General Programme of Work 2014-2019: Leadership Priorities

- **Advancing universal health coverage**: enabling countries to sustain or expand access to essential health services and financial protection and promoting UHC as a unifying concept in global health.

- **Health-related Millennium Development Goals** – addressing unfinished and future challenges: accelerating the achievement of the current health-related Goals up to and beyond 2015, including completing the eradication of polio and selected neglected tropical diseases.

- **Addressing the challenge of noncommunicable diseases** and mental health, violence and injuries and disabilities.
### Possible Health Goal and subgoals

<table>
<thead>
<tr>
<th>OVERARCHING HEALTH GOAL</th>
<th>Ensure healthy lives and universal health coverage at all ages</th>
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<tbody>
<tr>
<td><strong>SUB-GOALS:</strong></td>
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<tr>
<td>1.</td>
<td>Achieve the health-related Millennium Development Goals (MDGs)</td>
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<tr>
<td>2.</td>
<td>Address the burden of noncommunicable diseases, injuries and mental disorders</td>
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<td>3.</td>
<td>Achieve Universal Health Coverage including financial risk protection</td>
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<td>4.</td>
<td>Address the social and environmental determinants of health</td>
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</table>
The General Programme of Work 2014-2019: Leadership Priorities

- Implementing the provisions of the International Health Regulations: ensuring that all countries can meet the capacity requirements specified in the International Health Regulations (2005).

- Increasing access to essential, high-quality and affordable medical products (medicines, vaccines, diagnostics and other health technologies).

- Addressing the social, economic and environmental determinants of health as a means of reducing health inequities within and between countries.
The General Programme of Work 2014-2019:

Categories of work

1. Communicable diseases
   • reducing the burden of communicable diseases, including HIV/AIDS, tuberculosis, malaria and neglected tropical diseases.

2. Noncommunicable diseases
   • reducing the burden of noncommunicable diseases, including heart disease, cancer, lung disease, diabetes,
   • and mental disorders as well as disability, and injuries,
   • through health promotion and risk reduction, prevention, treatment and monitoring of noncommunicable diseases and their risk factors.
3. Promoting health through the life-course

- reducing morbidity and mortality and improving health during pregnancy, childbirth, the neonatal period, childhood and adolescence;
- improving sexual and reproductive health;
- and promoting active and healthy ageing,
- taking into account the need to address determinants of health
- and internationally agreed development goals, in particular the health-related Millennium Development Goals.
The General Programme of Work 2014-2019:

Categories of work

4. Health systems

• supporting the strengthening of health systems with a focus on the organization of integrated service delivery;
• financing to achieve universal health coverage;
• strengthening human resources for health;
• health information systems;
• facilitating transfer of technologies;
• promoting access to affordable, quality, safe, and efficacious health technologies;
• and promoting health systems research.
5. Preparedness, surveillance and response

• supporting the preparedness, surveillance and effective response to disease outbreaks, acute public health emergencies and the effective management of health-related aspects of humanitarian disasters to contribute to health security.

6. Corporate services/enabling functions

• organizational leadership and corporate services that are required to maintain the integrity and efficient functioning of WHO.
• a clear results chain, it explains how WHO’s work will be organized over the next six years;

• how the work of WHO contributes to the achievement of a clearly defined set of outcomes and impacts; and the means by which WHO can be held accountable for the way resources are used to achieve specified results.
MISSION
To act as the directing and coordinating authority on international health work, towards the objective of attaining by all peoples of the highest possible level of health as a fundamental right.
### The General Programme of Work 2014-2019: Design

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Outcome indicator</th>
<th>Baseline</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increased access to interventions for improving health of women, newborns, children and adolescents</td>
<td>Number of women using contraception for family planning in the 69 poorest countries</td>
<td>260 million</td>
<td>320 million</td>
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<td></td>
<td>Skilled attendant at birth (percentage of live births attended by skilled health personnel)</td>
<td>69% (2011)</td>
<td>75% (2015)</td>
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<td></td>
<td>Postnatal care for mothers and babies (percentage of mothers and babies who received postnatal care visit within two days of childbirth)</td>
<td>46% (2010)</td>
<td>60% (2015)</td>
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<td></td>
<td>Exclusive breastfeeding for six months (percentage of infants aged 0–5 months who are exclusively breastfed)</td>
<td>37% (2011)</td>
<td>40% (2015)</td>
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<tr>
<td></td>
<td>Antibiotic treatment for pneumonia (percentage of children aged 0–59 months with suspected pneumonia receiving antibiotics)</td>
<td>47%</td>
<td>60% (2015)</td>
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<td></td>
<td>Adolescent birth rates (per 1000 girls aged 15–19 years)</td>
<td>50 per 1000 girls (2009)</td>
<td>45 per 1000 girls (2015)</td>
</tr>
<tr>
<td>Increased proportion of older people who can maintain an independent life</td>
<td>Global indicator(s) will be developed as part of a global framework on monitoring ageing and health to be developed by December 2014</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Gender, equity and human rights integrated into the Secretariat’s and countries’ policies and programmes</td>
<td>Evaluation processes are in place to ensure gender, equity and human rights are measured in Secretariat programmes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Increased intersectoral policy coordination to address the social determinants of health</td>
<td>Net primary education enrolment rate (MDG target 2A)</td>
<td>90% (2008)</td>
<td>100% (2015)</td>
</tr>
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<td></td>
<td>Number of slum dwellers with significant improvements in their living conditions (MDG target 7D)</td>
<td>Not applicable</td>
<td>100 million</td>
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<td>Reduced environmental threats to health</td>
<td>Proportion of the population without access to improved drinking-water sources</td>
<td>11% (2010)</td>
<td>9% (2015)</td>
</tr>
<tr>
<td></td>
<td>Proportion of the population without access to improved sanitation</td>
<td>37% (2010)</td>
<td>25% (2015)</td>
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<td>Proportion of the population relying primarily on solid fuels for cooking</td>
<td>41% (2010)</td>
<td>38% (2015)</td>
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Mini-symposium Saturday, 24 May 2014, 9:30-11:30, at Château de Bossey
Working towards Health for All: What’s the count? And what role for civil society action?

Thank you!

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