SUMMARY OF PROGRAMME SUBCOMMITTEE DISCUSSIONS ON THE DRAFT 12TH GENERAL PROGRAMME OF WORK

The Draft 12th WHO General Programme of Work (GPW) sets out a six-year (2014–2019) vision and mission for WHO and provides a framework for priority setting and accountability. The draft was developed as a means to support the implementation of the WHO reforms. In preparation for discussions by the Sixty-second session of the WHO Regional Committee for Africa, the Programme Subcommittee (PSC) reviewed the draft GPW during its meeting in Luanda, Angola, in October 2012. This report summarizes the conclusions and recommendations of the PSC for consideration by the Sixty-second session of the Regional Committee.

Chapter 1:

1. In setting the scene for the 12th GPW, the PSC felt that there was a need to include an analysis of successes and challenges in the implementation of the 11th GPW and the current global health situation including progress made towards the attainment of the health MDGs as well as the various roles and contributions of various stakeholders and partners.

2. The evidence base for the analysis as presented in Chapter 1 seems to be inadequate and will require some hard data and referencing.

3. The PSC considered that the use of the phrase “unfinished business” was not applicable, since communicable diseases and maternal mortality continue to be core business in the African Region. It was recommended that a separate paragraph on communicable diseases be added.

4. On the “changing role of ministries of health” the PSC was of the view that ministries of health had always been required to play the roles listed. The issue has been to what extent ministries of health have had the capacity to steer, regulate and negotiate with a wide range of partners. There is thus the need to strengthen the capacity of ministries of health to enable them to effectively play these roles.

5. With regard to the global goals post-2015, the PSC recommended that WHO should play a more active role and ensure that health-specific goals are included in the global post-2015 development agenda.
Chapter 2:

6. The PSC observed that the chapter does not clearly articulate the new approaches that WHO will adopt to implement the 12th GPW given the changing global environment. It was recommended that how the Organization will perform its leadership role in the global health agenda be clearly articulated taking into account the current context and new developments. With regard to the key elements of the approach that WHO should adopt in implementing its constitutional role, it was proposed that support for human resources development and capacity building at country level be included.

7. The PSC recommended a clearer articulation of the role of WHO given its constitutional mandate and core functions based on its comparative advantage within a crowded and competitive environment.

8. It was recommended that the roles of WHO at the different levels be clearly articulated while ensuring a strong country focus and complementarity within the current context of WHO reforms and WHO’s core functions.

9. The PSC welcomed the move from categorical disease-focused programmes towards greater health service integration and recommended that this approach be fully developed while ensuring that specialized expertise is sustained and available to countries.

Chapter 3:

10. The PSC noted that while the categories have not been presented in order of priority, there was the need to re-order them to give prominence to “promoting health through the life-course approach”, “health systems”, and then “communicable diseases”, followed by the remaining categories.

11. It was observed that the level of detail in some of the priorities was too much and needed to be reduced and harmonized across the priority areas while including important priority areas such as health financing, health information and research which are missing in the health system category.

12. It was recommended that the burden of HIV/AIDS, TB, malaria and maternal mortality in the African Region be highlighted in the priorities.

Chapter 4:

13. The PSC recommended that the chapter should be less descriptive and more analytic in showing how WHO will play its leadership role in the changing environment.

Chapter 5: