

THE TRANSFORMATION AGENDA
OF THE WORLD HEALTH ORGANIZATION
IN THE AFRICAN REGION:

DELIVERING RESULTS AND MAKING AN IMPACT

EXECUTIVE SUMMARY AND ILLUSTRATIVE REPORT



**World Health
Organization**

REGIONAL OFFICE FOR **Africa**

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A message from the Regional Director

The Regional Director is pleased to present this report on the achievements of the African Region in the first phase of the Transformation Agenda. The report reflects on the ongoing organizational reform that has delivered successful results and strengthened the Organization's ability to carry out its mandate. This is especially relevant as 2018 also marks the 70th anniversary of the World Health Organization and the 40th anniversary of the Declaration of Alma Ata on Health for All.



“ As we embark on the second phase of this journey, I reflect on the progress and some remarkable successes we have had over the past three years. I am filled with pride in the people who make up our Organization. I am humbled to work with colleagues who share the vision of an Organization that is proactive, results-driven, accountable and appropriately resourced to deliver on its mandate. In the same vein, we would like to extend our appreciation to our Member States and partners for their unwavering support to this initiative. ”

Dr Matshidiso Moeti,
WHO Regional Director for Africa

The report outlines progress made in the four work areas of the Agenda, namely fostering pro-results values, smart technical focus, responsive strategic operations, and effective communications and partnerships.

1. Pro-results Values

Strong alignment by senior leadership in the change process

Recognizing that change requires ownership and time commitments, WHO AFRO has sought to ensure that leadership acts as one team to guarantee alignment on everything from aspirations and direction to the design and implementation of the Transformation Agenda.

Greater staff awareness of accountability, transparency, ethical behaviour, and producing results

Through an online survey as well as numerous group and individual interviews it was observed that a stronger culture of accountability is emerging and that there is a change in the way staff are working together.

Better staff engagement and ownership leading to a clearer vision of expected results

Sustainable change can only happen if staff at all levels understand, own and take leadership of the process. Staff must be at the centre of change, to continue and deepen the transformation. There has been a broad use of communication channels to engage and inform staff.

Improved partner recognition

The organizational culture change that is emerging under the Transformation Agenda has been recognized and welcomed by partners and donors.

2. Smart Technical Focus

Strengthened regional capacity for health security

The reform of WHO AFRO's work in emergencies was triggered by the unprecedented Ebola virus disease outbreak in West Africa. This led to the establishment of the WHO Health Emergencies Programme in the African Region (WHE). WHO AFRO detects and confirms outbreaks and public health events everyday, with reports of new outbreaks published in a weekly online bulletin. The WHO African Region responded to 152 emergencies across the continent in 39 countries in 2017 alone, including 134 outbreaks and 18 humanitarian crises. In the report we present the effective control of the May 2017 Ebola outbreak in the Democratic Republic of the Congo. In addition the Organization has also provided strengthened emergency risk assessments and preparedness activities. In 2016, WHO AFRO also compiled an inventory of all epidemics reported in Africa from 1970 to 2016 to have a greater understanding of risk and distribution of epidemics in the WHO African Region. This will be used as a foundation for tracking epidemics subnationally within the Region.

Prioritized actions towards Polio eradication

In 2015, the 'unfinished agenda' of Polio eradication was prioritized as part of strengthening regional health security in the African Region.

For the first time, more than half of all people living with HIV in the Region have access to life saving HIV treatment, reaching 14 million people by the end of 2016.

After almost two years without any reported case of wild poliovirus (WPV), four new cases were reported in security-compromised areas in northern Nigeria in 2016. No further wild poliovirus cases have been reported since August 2016. The restructuring of polio teams, the development of polio dashboards, and the use of GIS/GPS to support micro-planning and monitoring of vaccination teams has ensured that progress continues to be made towards the certification of the Region as being polio-free.

Implementation of Framework of Actions towards UHC: a cross-cutting systems approach.

At the Sixty-seventh session of the Regional Committee which took place in August 2017, Ministers of Health adopted the framework as a working tool to be used by WHO Member States to strengthen health systems to achieve Universal Health Coverage (UHC) and Sustainable Development Goal (SDG) 3. It suggests operational actions to assist countries in determining and phasing in priorities when planning, implementing and monitoring their national health strategies.

Creation of the Adolescent Health Flagship Programme - leveraging Africa's demographics for health.

There are a quarter of a billion 10- to 19-year olds in Africa. Adolescents in the African Region have extremely high HIV infection, early pregnancy and maternal mortality rates. In recognition of these considerations, the health of adolescents was prioritized as a Flagship Programme for the Region for the period 2015-2020. The overall aim of the programme is to guide and support countries and partners in the implementation of evidence-based and effective interventions to improve the health and well-being of adolescents in the African Region.

Creation of the Expanded Special Project for Elimination of Neglected Tropical Diseases (NTDs)

The five-year Expanded Special Project for Elimination of Neglected Tropical Diseases

Following an external review, a significant realignment of human resources with health priority needs has been completed both at Regional and Inter-country Support Team (IST) level.

(ESPEN) was launched in May 2016 to accelerate the control and elimination of the five NTDs that generate the greatest burden in the African Region: onchocerciasis, lymphatic filariasis, schistosomiasis, soil-transmitted helminthiasis and trachoma. Key achievements in 2017 included provision of direct operational and technical support to 32 countries; development of annual national plans of action by 14 countries; recovery of 132 million tablets worth an estimated US\$ 6 million; mapping of targeted preventive chemotherapy neglected tropical diseases (PC-NTDs); and the launch of an online open access data portal.

Marked progress in curbing communicable and noncommunicable diseases, and promoting health through the life course

There has been significant progress in improving the health of people affected by HIV/AIDS, tuberculosis, and malaria. For the first time, more than half of all people living with HIV in the Region have access to life saving HIV treatment, reaching 14 million people by the end of 2016. New TB medicines and shorter treatments for multi-drug resistant TB are being rolled out in 21 countries, with the Xpert rapid testing now available in 40 Member States. Over half the people at risk of malaria across the Region have been sleeping under insecticide-treated nets for the past five years, indicating some success in behaviour change and outreach campaigns and

a malaria vaccine pilot project is being rolled out to test the RTS,S vaccine in children. With regard to noncommunicable diseases (NCDs), WHO AFRO has helped over half of Member States to develop national NCD plans. WHO's work on tobacco control is yielding significant results with the African Region leading in the adoption of the Protocol to Eliminate Illicit Trade in Tobacco Products. Results have also been seen in reproductive, maternal, newborn, child and adolescent health. WHO's support for the Rapid Access Expansion (RAcE) project has led to policy change in countries for scaling up community-case management of malaria, diarrhoea and pneumonia in children. Adolescent health has been prioritized with a newly launched flagship programme that is already delivering improvements.

3. Responsive Strategic Operations

Improved managerial accountability, transparency and risk management

The Accountability and Internal Control Strengthening Initiative (AICS), launched in 2015, has resulted in the implementation of a number of activities to support the Transformation Agenda that have led to considerable improvements. Some successes include: reducing to zero the number of unsatisfactory internal audit reports issued during the period 2016 and 2017 - all internal audits during this period were either rated fully or partially satisfactory; Country Offices have been supported through 'Programme Management and Administrative' reviews and compliance reviews in 27 Member States; and a framework of Key Performance Indicators (KPIs) has been developed and is being implemented. Managerial KPIs were introduced in 2015 and linked to performance management of Country Office leadership and the administrative staff. Best performing Country Offices were rewarded in 2017 based on 2016 performance. Managerial KPIs have now been rolled out in the Regional Office. On the other hand, the technical KPIs will assist in measuring WHO's performance in contributing to prioritized health goals. A total of 44 indicators were defined and incorporated

into a Results Framework. This Framework will highlight neglected programme areas and suggest where WHO should prioritize funding.

Realignment of human resources at Regional and Intercountry Support Team level

Following an external review, a significant realignment of human resources with health priority needs has been completed both at Regional and Inter-country Support Team (IST) level. This has been a major achievement of the Transformation Agenda, with new organograms developed and all position descriptions revised. WHO has sought to increase the number of female staff in the organization as part of its efforts to achieve gender balance. Currently, around a third of international staff at the WHO African Regional Office is female. Between 2015 and December 2017, female staff occupying long term international positions increased by 4.5%. AFRO has implemented outreach activities to increase the number of female staff.

Realignment of human resources at country office level: The functional review process

In line with the country-focus approach, the Regional Office developed a country-level functional review model that is being used to assess human resource needs and country priorities. By the end of 2017, a total of 14 country offices had been reviewed. A categorization of countries was carried out based on health system performance towards universal health coverage and four groups of countries were proposed. The functional review has achieved better alignment with the ongoing organizational processes in determining country structures. A total of 32 country offices are scheduled to be reviewed in 2018.

Setting up of emergency hubs in Dakar and Nairobi

To effectively and efficiently manage health emergencies, the Regional Office has decentralized emergency management through the creation of two operational hubs in Dakar and Nairobi and one liaison office in Addis Ababa.

Better value for money in the procurement of goods and services

The procurement of goods and services is the second largest expense item after staffing costs. WHO AFRO has therefore looked at innovative ways of saving money and efficiently allocating funds and resources using a best-value-for-money approach. In 2017, a sample of 19 transactions was assessed for value-for-money. It was found that cost savings of US\$ 1.4 million had been made.

4. Communications and Partnerships

Enhanced internal communications

The Communications Programme has regularly and in a timely manner, provided briefings on the Transformation Agenda and mission reports. Senior Regional Office staff now receive media training and online communication platforms have been created to encourage staff to freely contribute ideas. Work across the three levels of the Organization (Headquarters, Regional Office, and Country Offices) has been strengthened as well.

Reinforced external communications

Proactive engagement of strategic regional and global media and stakeholders has resulted in increased awareness of health issues in Member States and showcased WHO AFRO's wide-ranging roles. Social media activity has also improved significantly, and the Organization launched a new, professional and easy-to-use website allowing greater access to information. WHO AFRO publishes weekly online bulletins on emergencies and there have been improvements to the tracking of donor technical and financial reports.

Strengthened strategic partnerships

AFRO has participated in a number of efforts to strengthen partnerships in a range of areas. The following are some of the main initiatives: the Africa Centre for Disease Control and Prevention;

the Addis Declaration on Immunization; the Harmonization for Health in Africa platform; the Africa Health Forum; and the World Health Organization-International Telecommunication Union Cooperation Agreement.

5. Conclusion

The next phase of the Transformation Agenda (February 2018 to January 2020) will have a technical focus, pursuing deliverables and results, while putting people at the centre of change. The Transformation Agenda has been aligned with the strategic priorities of the Global Transformation Plan and Architecture. WHO AFRO will strive to effectively implement the change management process. The regional realignment process will continue in WHO country offices and decisions will be made on transitioning the existing polio infrastructure. The Key Performance Indicators will be further implemented.

The considerable accomplishments of the emergency team will continue, and avenues to integrate health emergency activities into universal health coverage and health systems strengthening - in particular community level health systems - will be explored. The implementation of the SDGs/UHC framework for action will be strengthened. The significant improvements made in communicable, noncommunicable, maternal, adolescent, and child health will be further built upon.

The Region will expand on the progress that has been made in its internal and external communication strategy. The Harmonization for Health in Africa platform and the African Health Forum have provided a solid foundation for developing partnerships in the Region. To continue this progress, participation will be broadened. WHO AFRO will continue to advocate for Member States to increase allocations to their health budgets and to mobilize external funding to accelerate the scale-up and implementation of proven health interventions.

1. Introduction

The goal of the World Health Organization (WHO) is to build a better, healthier future for people all over the world. Working through offices in more than 150 countries, the Secretariat staff engage with governments and other partners to ensure the highest attainable level of health for all people¹.

In recent years, WHO has undergone a profound reform process. The aim is the emergence of an organization that pursues a higher degree of excellence, contributes to greater coherence in global health and, most important of all, achieves better health outcomes.

The African Region has achieved marked improvements in disease burden and health outcomes in the past decade. There has been a substantial decrease in the burden of communicable diseases and impressive progress made in reducing under-five child mortality from 176 to 90 per 1000 live births between 1990 and 2013. The maternal death rate also declined by 48% during the same period. Meanwhile, the Region struggled with, but has started to overcome, the devastating HIV epidemic with a significant reduction in deaths and new cases. Despite the progress made, many health challenges remain, such as multiple epidemics and humanitarian emergencies, the double burden of communicable and noncommunicable diseases, and challenges to health systems and maternal, adolescent and child health.

Achieving a health transformation in Africa will require the active involvement of all Member States, development partners and stakeholders. Many countries are reforming their health sectors to make them more responsive and efficient; new advances have been made in health technologies; and new health initiatives and stakeholders have come on board. WHO in the African Region launched the Transformation Agenda in 2015 to ensure that it was in the best possible position to address the health challenges the continent faces. The reform programme is a vision and a strategy for change aimed at facilitating the emergence of “the



WHO that the staff and stakeholders want”: more transparent, responsive and results-driven. The Agenda also aims to strengthen WHO’s leadership in the African Region, its ability to deliver on priority technical areas at country level, its internal and external communications, and to expand its resource base through innovative financing mechanisms.

The ‘unfinished’ agenda of the Millennium Development Goals (MDGs) and the introduction of the Sustainable Development Goals helped shape the Transformation Agenda. WHO AFRO has prioritized work on improving women and children’s health, communicable diseases – predominantly HIV/AIDs, TB, Malaria and NTDs – and noncommunicable diseases. The launching of the Adolescent Health Flagship Programme (see section 2.2.4.) and the Expanded Special Project for Elimination of Neglected Tropical Diseases (see section 2.2.5.) supports these efforts. Through a realignment of staff and monitoring Key Performance Indicators of effective management and producing results, WHO AFRO is improving its prioritization of health needs at country level.

The ultimate goal of the Africa Health Transformation Programme is for all WHO Member States in the African Region to make significant progress towards attaining the SDGs and achieving UHC.

¹ The Global Guardian of Public Health. World Health Organization: Geneva; 2016

2. Progress Made

2.1 Pro-results values



Objectives:

An organizational culture that is defined by the values of excellence, teamwork, accountability, integrity, equity, innovation and openness

Some achievements are:

1. Collective support of senior leadership
2. Improved staff awareness
3. Better staff engagement and ownership
4. Improved partner recognition

2.2 Smart technical focus



Objectives:

An organization providing effective technical and policy support for all Member States, and WHO's priorities defined, addressed and financed in alignment with agreed priorities

Some achievements are:

1. Strengthened health security with improved prevention, detection, and response
2. Progress towards polio-free certification and good polio transition planning
3. Strengthening of health systems and the UHC/SDGs Framework of Actions
4. Creation of the Adolescent Flagship Programme and Expanded Special Project for Elimination of Neglected Tropical Diseases
5. Progress in communicable and noncommunicable disease, and health through the life course

2.3 Responsive strategic operations



Objectives:

An organization with enabling functions that efficiently support the delivery of programmes

Some achievements are:

1. Improved internal controls, performance of individual staff and budget centres, and mechanisms to measure, monitor and report on progress and trends (for example through Key Performance Indicators)
2. Realignment of human resources at Regional, Inter-country Support Team, and Country Office level
3. Setting up of emergency hubs in Dakar and Nairobi
4. Better value for money in the procurement of goods and services

2.4 Effective communications and partnerships



Objectives:

A more responsive and interactive organization, internally among staff members and externally with stakeholders

Some achievements are:

1. Enhanced internal communications through a regional communications strategy
2. Reinforced external communications through engagement of strategic regional and global media and stakeholders
3. Strengthened strategic partnerships for example through the Harmonization for Health in Africa platform and Africa Health Forum

2.1

PRO-RESULTS VALUES

OBJECTIVE

The purpose of this focus area is to foster the emergence of an organizational culture that is defined by the values of excellence, teamwork, accountability, integrity, equity, innovation and openness. It supports the Agenda through “accountability and transparency” and “strengthened culture of evaluation”.

Pro-results Values: Summary

1 Senior leadership are aligned and proactively and collectively leading the change effort



- Recognizing that change requires ownership and time commitments, WHO AFRO has sought to ensure that leadership acts as one team

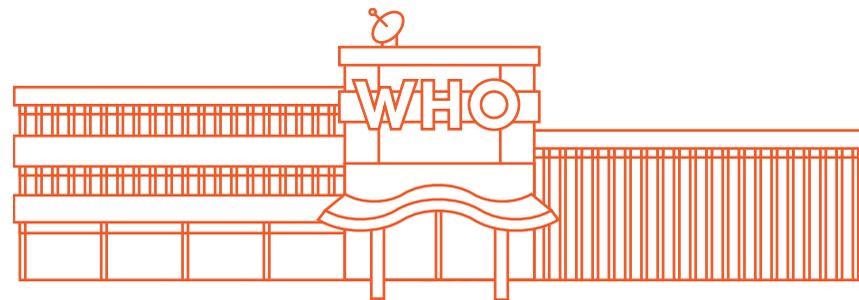


- The WHO Regional Director for Africa continues to benefit from the valuable strategic direction and policy advice of the Independent Advisory Group (IAG)



- In the first phase of the Transformation Agenda, a special Regional Programme Meeting was held with senior leadership to engender buy-in

- Several strategic recommendations emerged from previous IAG meetings in May 2015 and October 2016 that were incorporated into the development of the Transformation Programme.



Most recently, at the 56th Regional Programme Meeting held from 26 to 28 April 2018 in Accra, Ghana, discussions focused on progress made so far, and the launch of the second phase of the Transformation Agenda.

At its third meeting in Magaliesburg, South Africa, from 20 to 21 March 2018, the IAG commended the ongoing drive by WHO AFRO to effectively position itself for the forthcoming 13th Global Programme of Work, focusing on universal health coverage (UHC), health emergencies and healthier populations as well as the noticeable improvements in the performance of the Organization through the Transformation Agenda (TA).

2 Staff have an improved awareness of accountability, transparency, ethical behaviour, and producing results



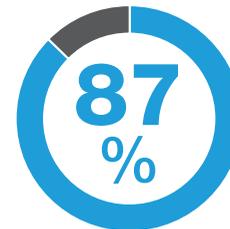
A full time Ombudsperson is now installed at the Regional Office.



of staff in the survey said they were **moderately to very actively involved** in the values of the Transformation Agenda



of respondents agreed that they had seen **tangible changes in their day-to-day work**



of staff report that they have a **clear idea of what their tasks and responsibilities** are and how they will be held accountable



agreed that managers are held accountable for the authority delegated to them and felt that the Performance Management and Development System (PMDS) assesses staff performance with regard to agreed objectives in a transparent and fair manner

3 A clearer vision of expected results for change is leading to better staff engagement and ownership



- There has been a broad use of communication channels to engage and inform staff:
- Town hall meetings
 - Intranet
 - Regional Director's mission reports
 - Web-based, collaborative platform (SharePoint)



- A staff welfare officer has been appointed
- Staff retreats and cluster/Country Office/IST meetings about the transformation process have been held.



- Training sessions have been conducted with nearly **500 staff** participating in 2017 and 2018.
- In 2018 a Sexual Harassment, Exploitation and Abuse course was initiated.
- Over the last two years, a comprehensive induction programme has been held for **over 100 new staff**.

4 Partner recognition has improved



The organizational culture change that is emerging under the Transformation Agenda has been recognized and welcomed by partners and donors.



2.2

SMART TECHNICAL FOCUS

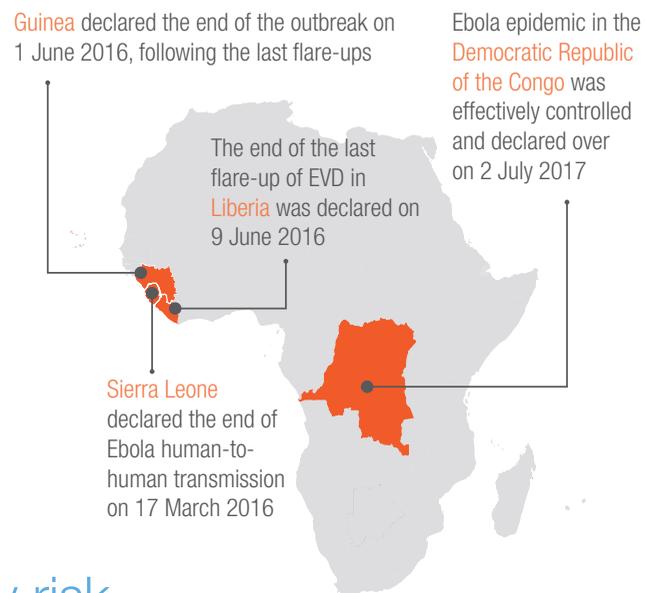
OBJECTIVE

The Smart Technical Focus area is aimed at directing the technical work of the Organization on regional priorities and commitments, and aligning it with evidence-based priorities and lessons learned from experience. This focus area will contribute to WHO's programmatic reform through the outcome on "WHO's priorities which are defined, addressed and financed in alignment with agreed country priorities" and managerial reform through the outcome on "effective technical and policy support for all Member States".

Smart Technical Focus: Summary

1 Strengthened regional capacity for health security through the creation of a **unified** Emergencies Programme

2 Control of the Ebola Virus Disease epidemic in West Africa and in the Democratic Republic of Congo



3 Improved emergency risk assessment and prevention

- 24** Risk profiling has been conducted in 24 countries to assess epidemic risk vulnerability.
- 17** 32 Simulation Exercises have been conducted in 17 countries to test emergency response capabilities
- 13** WHO AFR has conducted After Action Reviews in 13 countries to assist with future planning
- 47** 47 countries in the African Region have submitted IHR annual reports.
- 34** 34 Countries conducted country capacity assessment of IHR capabilities

4 Creation of the Adolescent Flagship Programme

1 Offering every WHO Country Office technical support, documentation and capacity building

8 Bringing evidence and leveraging commitment in eight priority countries

1 Convening our stakeholders to boost investment in adolescent

THE ADOLESCENT HEALTH FLAGSHIP PROGRAM DIFFERS FROM PREVIOUS PROGRAMMES:

1 Not a "funded parallel program" but makes a specific population the focus of attention

1 Builds on previous decades of work in maternal and child survival

SO FAR, THE FOLLOWING PROGRESS HAS BEEN MADE:

- Region-wide mapping exercise for implementation roadmap
- Adolescent health video messages broadcast in many countries around the world;
- Online Atlas and individual factsheets providing country profiles of important data
- New collaborative learning approach in the Democratic Republic of the Congo;
- Capacity building workshop for 13 Anglo-phone Countries;
- Country Offices conducted rapid analysis and identified concrete responses to accelerate national action;
- Cross-cluster capacity strengthened at the Regional Office

5 Creation of the Expanded Special Project for Elimination of Neglected Tropical Diseases

32

Provided direct operational and technical support to 32 countries

14

14 countries developed annual national plans of action

17

Enabled Ministries of Health in 17 countries to leverage donated drugs for mass drug administration programmers



132 million tablets worth an estimated 6 million dollars were recovered in 7 countries through supply chain analysis.



Completed the unprecedented mapping of targeted PC-NTDs and launched an on-line open access data portal



The ESPEN Lab in Ouagadougou further developed to become the hub for a regional network of labs

Abu Dhabi's Crown Prince and the Bill & Melinda Gates Foundation announced that up to 20% of the Reaching the Last Mile Fund would be dedicated to support the work of ESPEN



2.3

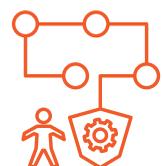
RESPONSIVE STRATEGIC OPERATIONS

OBJECTIVE

The goal of this focus area is to ensure that the WHO Secretariat in the African Region evolves into an organization with enabling functions that efficiently support the delivery of programmes. This area has the following outcomes: staffing matched to needs at all levels of the Organization; financing and resource allocation aligned with priorities; and managerial accountability, transparency and risk management assured.

Responsive Strategic Operations: Summary

1 Improved managerial accountability, transparency and risk management



2015:

The Accountability and Internal Control Strengthening Project (AICS) was launched and has been implementing a number of initiatives to support the Transformation Agenda.

- 1 Improved compliance and quality assurance
- 2 Improved information sharing
- 3 Targeted training and direct country support
- 4 Improved engagement with Member States
- 5 Improved governance and oversight
- 6 Clearly defined expectations and robust monitoring and evaluation: Managerial Key Performance Indicators and the Results Framework

2 A Framework of Key Performance Indicators (KPIs)

A Results Framework was created in order to measure WHO's performance in contributing to prioritized health goals.

This includes

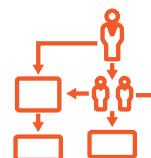
12 managerial Key Performance Indicators **32** programme-related Key Performance Indicators

This Framework will highlight neglected programme areas and suggest where WHO should prioritize funding.

Managerial Key Performance Indicators (KPIs)

- Covering enabling functions related to finance, budgeting, security; administrative services, human resources management; and audit and compliance.
- Linking managerial performance to KPI achievements with PMDS
- Improved reporting and transparency of progress through three dashboards
- Recognition of staff and Country Office performance
- Widely accepted in the Region as strengthening internal control environment and a best practice

3 Realignment of human resources at Regional and Inter-country Support Team level



New organograms have been developed based on a consultative process, with revised position descriptions that clearly articulate programmatic priorities.



WHO has sought to increase the number of female staff in the organization as part of its efforts to achieve gender balance. Between 2015 and December 2017, female staff occupying long term international positions **increased by 4.5%.**



From only 10 interns and no UN Volunteers and JPOs in 2015, in 2017 the Regional Office recruited a total of **70 interns, UN Volunteers and JPOs.**

4 Realignment of human resources at Country Office level: The functional review process

In line with the country-focus approach, the Regional Office developed a country-level functional review model that is being used to assess:

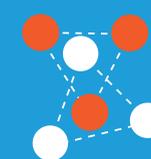
- human resource needs and
- country priorities.

By the end of 2017, a total of **14 Country Offices** had been reviewed.

A total of **32 Country Offices** are planned to be reviewed in 2018

The Regional Office launched an independent midterm evaluation led by the Evaluation Unit at HQ. A midterm assessment concluded that:

“The general consensus is that the functional review process is a very important and timely exercise that is well received by WRs and Country Office staff.”



The Executive Management also highlighted the need to group countries with similar needs in order to ensure coordinated support to groups of countries. A categorization of countries was carried out based on health system performance towards Universal Health Coverage (UHC).

5 Setting up of Emergency hubs in Dakar and Nairobi

The Regional Office has decentralized emergency management through the creation of:



6 Better value for money in the procurement of goods and services

Under the Transformation Agenda, procurement processes have been strengthened. These use:



a best value for money approach



a competitive bidding process.



2.4

COMMUNICATIONS AND PARTNERSHIPS

OBJECTIVE

This focus area seeks to foster a more responsive and interactive organization, internally among staff members and externally with stakeholders. Managerial reform in this area seeks to develop a strengthened culture of evaluation and improved strategic communication. It is also aligned with governance reform through streamlined reporting of and communication with Member States, and enhanced, effective engagement with other stakeholders.

Communications and Partnerships: Visual Summary

1 Enhanced internal communications

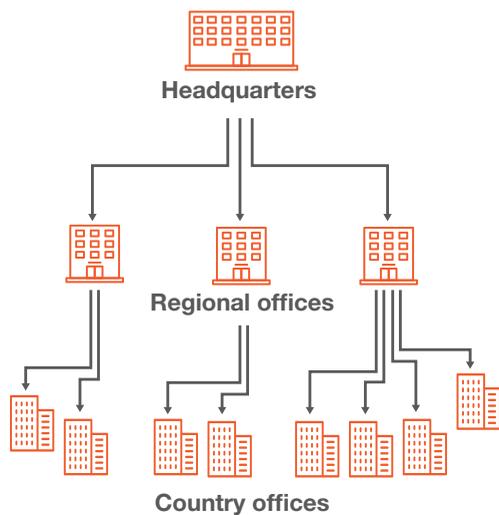


The Communications Programme has provided briefings on the Transformation Agenda and the mission reports and meetings of the Regional Director and Cluster directors.



Senior Regional Office Staff now receive media training and engage more frequently with the press.

Work across the three levels of the Organization has been strengthened.



2 Reinforced external communications



Closer working relations with media houses have been established, obtaining regular slots in key television and radio channels within the Region.



WHO sponsored the 2016 **CNN Multichoice Best African Health and Medical Journalism award.**



By December 2017, WHO in the African Region had received over **12 million** tweet impressions, up from **3.3 million** in 2015



A Facebook channel was launched in 2017 resulting in over **1 million** reaches



Major events of WHO AFR such as the first WHO African Health Forum and the 67th Regional Committee were **streamed live on YouTube**



A new, professional and easy to use website was launched. This has resulted in an increase in page views of the Regional and Country sites from **1.9 million** hits in six months compared to fewer than **0.9 million** hits in the whole of 2015



The WHO Health Emergencies Programme has published **weekly online bulletins and news articles**



The Region has made progress in strengthening its financial resource base by engaging with **traditional and new donors** as well as **improving tracking of donor technical and financial reports.**

3 Strengthened Strategic Partnerships

2015

January 2015



The African Union Commission (AUC), in collaboration with the World Health Organization Regional Office for Africa and partners launched the **Centres for Disease Control and Prevention in Africa.**

2016

February 2016



Heads of State at the 28th African Union Summit endorsed **The Addis Declaration on Immunization.**

2017

March 2017



The WHO Regional Director for Africa spearheaded the re-launch of the **Harmonization for Health in Africa (HHA)** platform

June 2017

October 2017



The WHO Regional Office for Africa and the International Telecommunication Union signed a Cooperation Agreement on using digital services to save lives and improve people's health

2018

3. Conclusion

The achievements highlighted in this report demonstrate the effectiveness of the Transformation Agenda in the African Region in delivering results which are making an impact on the health of populations in the Region, and moving countries towards achieving the health goals of the Sustainable Development Agenda. These reforms have been validated by an independent evaluation of the Transformation Agenda, a staff perception survey as well as through consultations with key stakeholders and advisors. The changes in the WHO in the African Region Organization are evident; we are becoming the effective, accountable, results-driven and transparent Organization that people wish to see.

The next phase of the Transformation Agenda (February 2018 to January 2020) puts people at the centre of change. The focus will be on ensuring that staff and work plans are aligned with the strategic priorities of the Organization, working through

productive partnerships and stakeholders, and supporting Member States. There will be a strong focus on technical support, on delivering results and demonstrating progress, and on making a positive impact to health outcomes in the African Region. The WHO Director General, Dr Tedros, has launched the Global Transformation Plan and Architecture that seeks an extraordinary improvement in global health over the period of the 13th General Programme of Work (2019-2023). It is encouraging to note that the Transformation Agenda is already well aligned with the strategic priorities of the Global Transformation Plan and Architecture that aim to deliver results at country level through the country functional review; change of the organizational culture; and changes to WHO's external engagement model and communication across the three levels to ensure sustainable support for WHO.





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