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THE TRANSFORMATION AGENDA OF THE WORLD HEALTH ORGANIZATION SECRETARIAT IN THE AFRICAN REGION 2015-2020

TAKING STOCK CONSOLIDATING AND STEPPING UP

JANUARY 2019-JANUARY 2020

THE TRANSFORMATION AGENDA OF THE WORLD HEALTH ORGANIZATION SECRETARIAT IN THE AFRICAN REGION, 2015–2020: TAKING STOCK, CONSOLIDATING AND STEPPING UP

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Significant improvements have been made in our systems and processes to enable the achievement of results and ensure that the Secretariat experiences cultural, programmatic and organizational changes to deliver on its mandate



FOREWORD

It has now been four years since I launched the Transformation Agenda of the WHO Secretariat in the African Region. The Transformation Agenda seeks to make the WHO Secretariat in the African Region more responsive, effective, efficient and accountable in providing the best possible support to Member States. It has served as a programme for accelerating the implementation of WHO reform in the African Region, and has also served to inform the efforts by the WHO Director-General to transform WHO, at the global level, into an organization that is better equipped to deliver improvements in health to the world's citizens.

I am proud of the achievements we have made in implementing the Agenda. The efforts we have made over the past four years have yielded results on three main fronts: health security, universal health coverage, and a more 'fit for purpose' WHO in the African Region.

In the area of health security, the increased regional and country capacity to detect promptly, and effectively respond to, public health threats have led to rapid control of most of the outbreaks that have occurred. The efforts made to ensure universal health coverage and well-functioning health systems in which all people receive quality and equitable health services without financial and other barriers, are leading to improved access to cost-effective health interventions and improved health outcomes in Member States.



I am proud of the achievements we have made in implementing the Agenda. The efforts we have made over the past four years have yielded results on three main fronts: health security, universal health coverage, and a more 'fit for purpose' WHO in the African Region.

Significant improvements have been made in our systems and processes to enable the achievement of results and ensure that the Secretariat experiences cultural, programmatic and organizational changes to deliver on its mandate. An important contributor to progress has been the investment in our change in organizational culture, including openly addressing harassment and creating a healthy, respectful and fair work environment. Consolidating and sustaining change requires putting people at the centre of change. We are already seeing fundamental shifts in our ways of working, thinking and engaging with others, as well as increased internal and external accountability, effectiveness and transparency, and tangible results in countries.

As we celebrate the gains we have made so far, we express our gratitude to all our stakeholders – Member States, Development Partners, Donors, Foundations and others – for walking the talk with us. These gains need to be consolidated, sustained and indeed stepped-up in 2019 year and beyond.

In this last year of implementation of the Transformation Agenda, we will need to step up and scale up to better deliver on our mandate and achieve even greater improvements in health in Africa. This document – *“The Transformation Agenda of the World Health Organization Secretariat in the African Region, 2015-2020; Taking Stock; Consolidating and Stepping-Up: January 2019-January 2020”* – articulates six Strategic Workstreams of the Transformation Agenda to be implemented during the period January 2019 – January 2020.

This publication is organized into five chapters as follows:

Chapter 1 presents the background, rationale, objectives and key actions of the Transformation Agenda.



Chapter 2 highlights the key achievements made thus far in the implementation of the Transformation Agenda, including *“The Africa Health Transformation Programme, 2015-2020: a vision for universal health coverage”* – the strategic framework guiding WHO's contribution to sustainable development in Africa.



Chapter 3 presents the objectives for Phase II of the Transformation Agenda 2019-2020, the guiding principles, the strategic workstreams and actions.



Chapter 4 presents an implementation and accountability framework for Phase II that will ensure maximum impact of the Transformation Agenda on health outcomes in the Region, in line with the Secretariat's commitment to Member States and other stakeholders.



Chapter 5 discusses our strategic directions as we step up to implement the WHO Thirteenth General Programme of Work in 2019 and beyond.



The Transformation Agenda of the WHO Secretariat continues to be a means for the WHO Secretariat and Member States to address the unacceptable inequities in health in the African Region, a region that lags behind other regions in most health indices. Effecting this change is a long-term process which requires steady WHO leadership, greater investments of resources in our work and our people and the renewed commitment and integrated efforts of Member States and all other stakeholders in shaping the health of Africa.

It is my wish, hope and expectation that Member States, Partners, Donors and all other Stakeholders rally together with WHO to effect this transformational change in order to attain the highest possible level of health for all of Africa's people, at all ages, by achieving universal health coverage, addressing health emergencies, and promoting healthier populations



Dr Matshidiso Moeti
WHO Regional Director for Africa
Brazzaville, Republic of Congo
January 2019

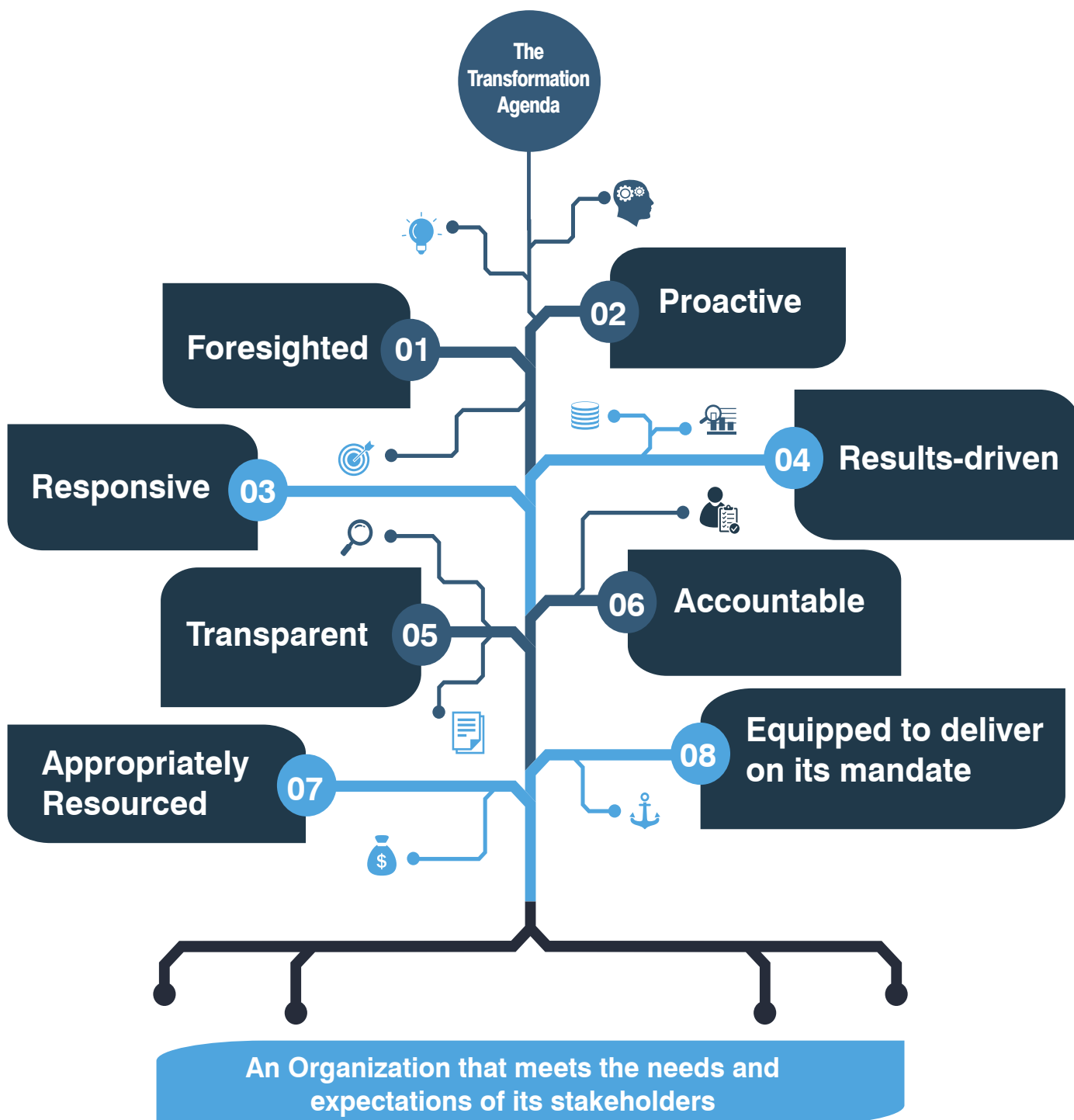


C H A P T E R O N E

THE TRANSFORMATION AGENDA

THE TRANSFORMATION AGENDA

of the World Health Organization Secretariat
in the African Region; 2015–2020



THE TRANSFORMATION AGENDA

The WHO Regional Director for Africa assumed office in February 2015, the target year for the attainment of the Millennium Development Goals (MDGs) and the adoption of the new Sustainable Development Goals (SDGs). In seeking to harness the opportunity to play a transformational role in Africa's future by working towards the goals of a new era of sustainable development, the Regional Director initiated the implementation of "The Transformation Agenda of the World Health Organization Secretariat in the African Region, 2015–2020".

The Transformation Agenda is a bold and ambitious strategy that seeks to engender a regional health organization that is foresighted, proactive, responsive, results-driven, transparent, accountable, appropriately resourced and equipped to deliver on its mandate; an organization that meets the needs and expectations of its stakeholders. It is a vision and a blueprint for change aimed at facilitating the emergence of "the WHO that the staff and stakeholders want".

The agenda had become necessary as the need to speed up the WHO reform programme was brought into sharp focus by the 2014 Ebola virus disease (EVD) epidemic in West Africa, deemed to be the worst in history in terms of its magnitude, geographical spread and duration.

As a result, concerns had been widely expressed about the perceived misalignment of the structure and technical capacity of the WHO Secretariat to deliver on its mandate in the African Region. Concrete actions were therefore needed to have an appropriately resourced and equipped WHO that could be: (a) responsive and effective in strengthening national health systems; (b) capable of coordinating disease prevention and control, including outbreak preparedness and response; and (c) able to launch supranational actions in support of global health security.



As shown in the figure below, the Transformation Agenda involves making progress within and across four integrally connected focus areas – pro-results values, smart technical focus, responsive strategic operations, and effective communications and partnerships. The managerial, programmatic and governance themes of the WHO reform were factored into its development. Each of these focus areas is closely aligned with specific outcomes of the WHO reform programme, and influences and impacts on Africa’s health.



THE FOUR FOCUS AREAS OF THE TRANSFORMATION AGENDA

01

PRO-RESULTS VALUES

TO FOSTER THE EMERGENCE OF AN ORGANIZATIONAL CULTURE THAT IS DEFINED BY THE VALUES OF EXCELLENCE, TEAM WORK, ACCOUNTABILITY, INTEGRITY, EQUITY, INNOVATION AND OPENNESS

02

SMART TECHNICAL FOCUS

TO ENSURE THAT THE TECHNICAL AREAS OF WHO’S WORK IN THE AFRICAN REGION ARE IN LINE WITH REGIONAL PRIORITIES AND COMMITMENTS, AND INTERVENTIONS ARE BASED ON EVIDENCE, INNOVATIONS AND LESSONS LEARNED FROM EXPERIENCE

03

RESPONSIVE STRATEGIC OPERATIONS

FOR THE SECRETARIAT TO EVOLVE INTO AN ORGANIZATION WITH ENABLING FUNCTIONS THAT EFFICIENTLY SUPPORT THE DELIVERY OF GOODS AND SERVICES

04

EFFECTIVE COMMUNICATIONS AND PARTNERSHIPS

TO FOSTER A MORE RESPONSIVE AND INTERACTIVE ORGANIZATION, INTERNALLY AMONG STAFF MEMBERS AND EXTERNALLY WITH STAKEHOLDERS

The first year of implementation of the Transformation Agenda, 2015, coincided with the planning processes for the preparation of the WHO Programme Budget 2016-2017. It also saw the adoption of the 17 SDGs and 169 targets to guide global development over the next 15 years to 2030, with Goal 3 aiming to “ensure healthy lives and promote well-being for all at all ages”. These, together with the lessons learned during the first 100 days of implementation of the Transformation Agenda, afforded the WHO Secretariat in the African Region the opportunity to institutionalize the Transformation Agenda by developing “*The Africa Health Transformation Programme, 2015–2020: a Vision for Universal Health Coverage*”.

Launched in 2016, the Africa Health Transformation Programme serves as the strategic framework for guiding WHO’s contribution to the sustainable development platform in Africa. The Programme articulates a vision for health and development that aims to address the intense and interlinked inequalities and inequities that have kept the Region lagging far behind others in terms of health indices and enjoyment of the highest attainable standard of life.

The Programme is underpinned by the commitment of WHO in the African Region to help ensure that the dividends of unprecedented economic growth, an improving and stable political environment, the emergence of a vibrant and innovative young generation, the birth of a new middle class, and the enormous possibilities presented by new technologies, are all harnessed and translated into tangible human development benefits for the African people, and for global health and economic security.

The goal of the Africa Health Transformation Programme is to ensure universal access to an essential package of health services in all Member States of the Region and thus achieve universal health coverage with minimal financial, geographic and social obstacles to services. The Programme defined the three following strategic priority areas to meet this goal:

- Improving health security by tackling epidemic-prone diseases, emergencies and new health threats;
- Driving progress towards equity and universal health coverage; and
- Strengthening the capacity of WHO in the African Region.

Key deliverables for the period February 2015 to January 2020 were articulated within each strategic priority area to promote accountability, with the acknowledgement that achieving health transformation in Africa would require concrete results and the active involvement of all Member States, development partners and stakeholders in the expected country health outcomes and targets to be defined. These have direct links with the six Categories of Work of the WHO Twelfth General Programme of Work, namely: communicable diseases; noncommunicable diseases; promoting health through the life course; health systems; preparedness, surveillance and response; and corporate services and enabling functions.

The goal of the Africa Health Transformation Programme is to ensure universal access to an essential package of health services in all Member States of the Region and thus achieve universal health coverage with minimal financial, geographic and social obstacles to services.

C H A P T E R T W O

THE
TRANSFORMATION
AGENDA
KEY ACHIEVEMENTS
SO FAR



THE TRANSFORMATION AGENDA

KEY ACHIEVEMENTS SO FAR

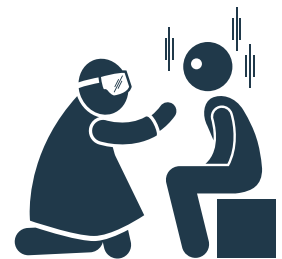


THE TRANSFORMATION AGENDA

KEY ACHIEVEMENTS SO FAR

This chapter summarizes the key achievements in the three strategic priority areas, as at December 2018, against the expected country outcomes and WHO deliverables set in the Africa Health Transformation Programme.

Regional and country preparedness and response capacity to epidemics improved: There has been a faster, better coordinated, more effective response to epidemics, with WHO and partners having supported response to more than 150 public health events in over 40 countries in 2018 alone, with the continued commitment and leadership of national authorities. Eighty-eight per cent of these were due to infectious disease outbreaks and 18 humanitarian crises, including Ebola in the Democratic Republic of the Congo.



As indicated in the December 2018 report of the Independent Oversight and Advisory Committee for the WHO Health Emergencies Programme, WHO now has more staff with the right profiles at regional and subregional levels and in the most vulnerable countries; a network of experts is available for rapid deployment to support countries in need; and WHO coordinates partners' actions in epidemic responses in countries, working as governments' closest advisor. Using the Incident Management System (IMS), WHO is now able to deploy internal teams within 48 hours of the occurrence of an acute health emergency.

Through the adoption of the African Union declaration to accelerate implementation of the International Health Regulations (IHR 2005) in July 2017, national leaders at the highest level have expressed their commitment to strengthen IHR core capacities. Member States in the Region are more compliant in implementation of IHR and, for the first time since the adoption of the IHR, all 47 Member States submitted timely IHR annual reports in 2017 and 2018, compared to a baseline of less than 50% in 2015.

WHO has led independent joint external evaluations (JEE) in 40 Member States and 20 countries have completed the development of their National Action Plan for Health Security (NAPHS).

This is helping in filling the gaps in countries' IHR capacities through planning and resource mobilization, training of national experts, laboratory capacity-building, the establishment of National Emergency Operations Centres, and cross-border cooperation, all delivering improved outcomes in epidemic control.



Region moving towards universal health coverage through primary health care: Guided by the “Framework for health systems development towards universal health coverage in the context of the SDGs in the African Region”, the Regional flagship programme on universal health coverage (UHC) has been working to accelerate tailored support to countries to advance primary health care and improve health outcomes. WHO-supported surveys and analyses of data using a universal health coverage index is providing vital data to countries to inform their strategies and guide action in health financing and health systems performance. Progress towards equitable access to good quality health services and prevention interventions addressing health determinants is speeding up.

WHO's overall work in supporting countries to adapt and scale up implementation of WHO norms is leading to results. For example, efforts to reduce and eliminate the five most prevalent neglected tropical diseases (NTDs) amenable to preventive chemotherapy (PC-NTDs) in Africa through the actions of WHO AFRO's newly-established Expanded Special Project on the Elimination of NTDs (ESPEN) have led to mapping and improved data availability, improved coordination of partners, and training of national experts. Togo, Ghana and Kenya are among the countries certified to have eliminated some NTDs in the past three years.

Nearly two thirds of Member States have adopted and are implementing WHO's “*Treat All*” policy for people living with HIV to start antiretroviral therapy regardless of their CD4 count. Eight countries have made tremendous progress in reducing mother-to-child transmission and are on the path to elimination. Working with partners, there has been a reduction in child mortality due to scaling up of community management of the major child killers and increasing access to skilled birth attendants. Some of the 22 countries supported to develop and or review integrated reproductive, maternal, newborn, child and adolescent health and nutrition (RMNCAH-N) plans, in line with the Global Strategy for Women's Children's and Adolescents' health, have used the plans as investment cases to mobilize resources from the Global Financing Facility (GFF).

Following the adoption of the “*Regional Framework for Integrating Essential NCD Services in Primary Health Care*” at the Sixty-seventh Session of the WHO Regional Committee for Africa, by December 2018, eleven countries had been supported to implement the WHO Package of Essential NCD Interventions (WHO PEN) – a package comprising cost-effective NCD actions which can be integrated into primary health care settings. Synergy between WHO PEN and the UHC Flagship Programme is expected to rapidly increase the coverage of an integrated package for the treatment and prevention of NCDs.

Region closer to polio eradication certification: WHO AFRO has coordinated the actions of Polio Partners in support of five countries in the Lake Chad Basin following proof of wild poliovirus transmission in Boko Haram conflict-affected north-eastern Nigeria. No new cases of wild poliovirus have occurred for the past 30 months, with 36 months being the cut off for certification. Forty African Region countries have had their polio-free status documentation accepted by the relevant Certification Commission, and support is being provided for the remaining seven countries to have the whole Region certified polio-free by the end of 2019.



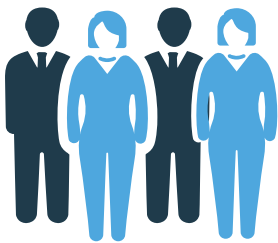
The Region has moved closer to polio eradication certification owing to the leadership of national governments, effective collaboration among partners, and the adoption of innovative approaches, including strengthened surveillance and campaigns using geographic information systems.

Staff awareness, engagement, accountability, transparency and ethical behaviour improved: This is the result of implementing various activities to build the capacity of staff members, and strengthening their engagement in and ownership of the Transformation Agenda. Through the work of the change agent network and other actions, there is greater staff awareness of accountability, transparency, ethical behaviour, and producing results as shown in the Global WHO staff cultural survey conducted in 2017 – AFRO staff have a more positive view of the culture of the Organization than the average score of staff across the Organization. By introducing leadership training, better staff engagement is being seen, leading to a clearer vision of expected results. There has been improved internal communications through regular interaction with staff, the use of e-platforms to share information, and the work of the ombudsperson. There has also been improved partner recognition of the contributions of WHO to health development, and the Transformation Agenda is welcomed by both Member States and partners.





Improved managerial accountability, transparency and risk management: Implementation of a value-for-money initiative, including regularly conducting programme management, administrative and compliance reviews, is improving the management of country offices. A Key Performance Indicator (KPI) framework has been developed, and is being monitored and reported quarterly to senior management through the Compliance and Risk Management Committee. Improved leveraging and use of available technologies and tools, especially GSM, Business Intelligence dashboards, the UN global market place for large-scale procurement, performance dashboards among others, has resulted in better value for money in the procurement of goods and services with initial savings of US\$ 1.4 million in 2017 and US\$ 5.1 million in 2018.



Human resource needs realigned and gender imbalance addressed: A reorganization of the Regional Office staff has been completed, functional reviews conducted in 34 Country Offices and implementation plans developed for 18 countries. The functional review process has shown that the roles WHO is expected to play vary significantly from country to country, ranging from normative functions to technical support and operations, depending on the complexities of countries and the partnership landscape.

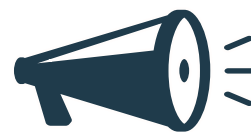
Governments and partners in almost all the countries have highlighted key functions that WHO is expected to perform, including support for health coordination; generation and dissemination of health information; support for health systems strengthening including district health systems; outbreak and emergency preparedness; health promotion; and three enabling functions, namely external relations, programme management, and communications. These functions were endorsed as “core” by the AFRO Regional Executive Management Team (Regional Director and Cluster Directors) and are directly linked to the triple billion goal set out in the newly developed WHO Thirteenth General Programme of Work (GPW 13).

There has been enhanced transparency in recruitment, placement and performance management and progress has been made towards achieving gender parity and addressing under-represented countries in the recruitment of staff including WHO Representatives. Between December 2015 and December 2017, longer term female staff representation increased from 24.3% to 31.9%, despite the fact that the Region has the lowest level of female candidates expressing interest for vacancies at professional level – 23.9% for 2018 versus a global average of 32.7%.

Strategic partnerships strengthened: WHO has continued to expand collaboration with key partners, while mobilizing traditional and new partners. Extensive discussions and visits have been conducted with partners such as the African Development Bank, the African Union Commission, China, the East African Community (EAC), the Economic Community of Central African States (ECCAS), Germany, South Korea, the Southern African Development Community (SADC), the United Kingdom and the United States, the Kuwait Fund, the Qatar Fund for Development, the OPEC Fund, etc. WHO's commitment to the Harmonization for Health in Africa platform has been strengthened and the Africa Health Forum has been established as a platform for engaging with partners, including non-State actors. The quality of partnership has improved, increasing the resources available and the voice of partners as advocates for the work of AFRO. The number of overdue donor reports had reduced from 39% in July 2017 to 8% by December 2018.



Enhanced Communication: There has been enhanced media and stakeholder engagement. The active use of social media and innovative platforms has greatly increased WHO AFRO's reach with public health information, with epidemics and emergency situation reports being of particular interest and value to health actors in the Region. There has been regular reporting on the Transformation Agenda and ongoing media training of senior Regional Office staff. Internal communication has also improved through regular staff briefings by the Regional Director, online platforms and strengthening of communication between countries, the Region and Headquarters.



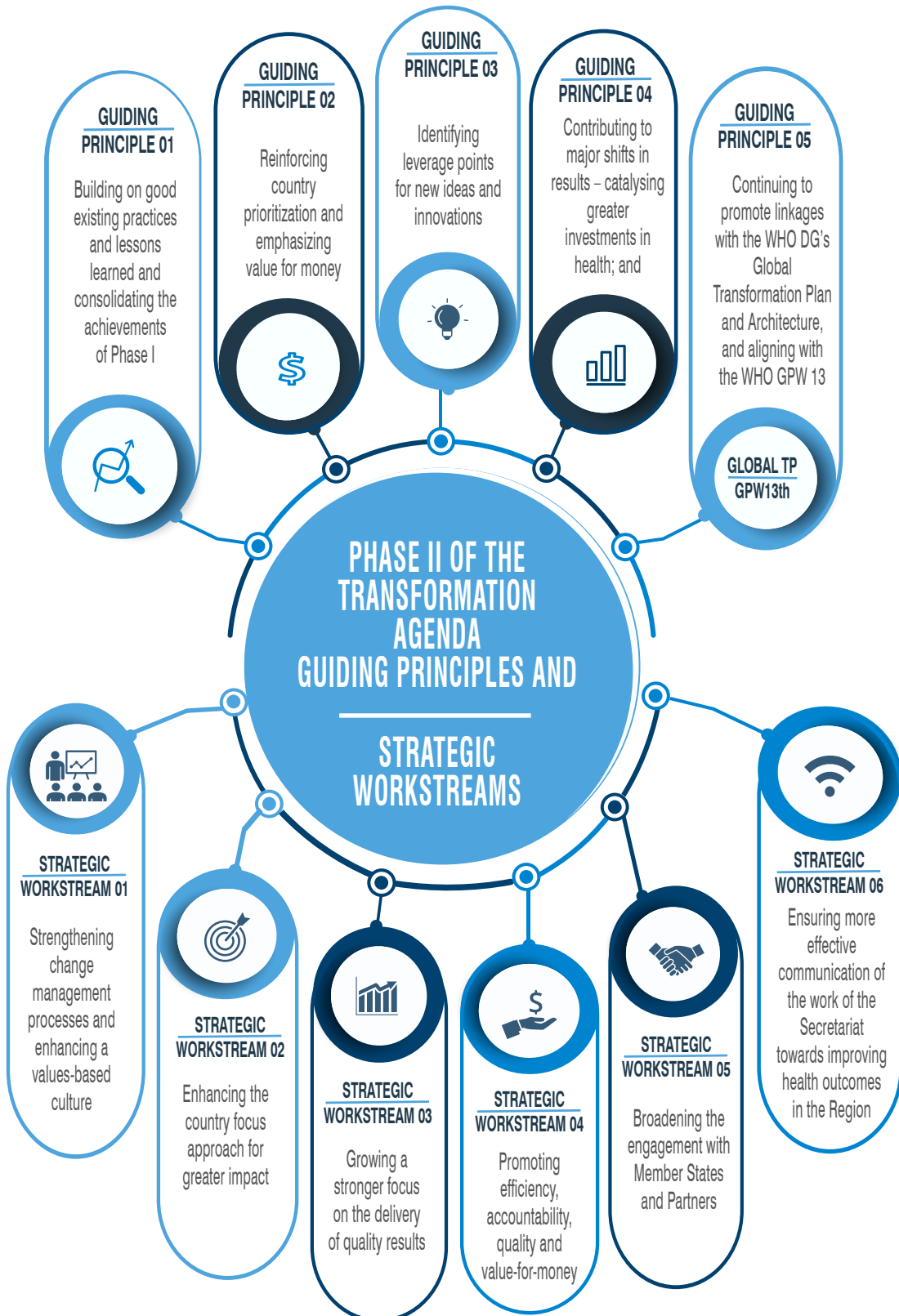


C H A P T E R T H R E E

PHASE II OF THE
TRANSFORMATION
AGENDA:
OBJECTIVES
AND STRATEGIC
WORKSTREAMS

PHASE II OF THE TRANSFORMATION AGENDA

GUIDING PRINCIPLES AND STRATEGIC WORKSTREAMS



PHASE II OF THE TRANSFORMATION AGENDA

OBJECTIVES AND STRATEGIC WORKSTREAMS

Anchored in the targeted priorities of the Transformation Agenda and building on the lessons learned and seeking to consolidate the gains of Phase I, the objective of Phase II of the Transformation Agenda is to optimize the technical focus and performance of WHO's work, thus improving the quality of work and ensuring better management of resources to generate value for money. Its focus is putting people at the centre of change in order to make sustainable progress in improving health in Africa. It places organizational emphasis on promoting a healthy, respectful and fair workplace; continuously engaging staff members and enhancing their commitment to change; identifying and encouraging desired attitudes and behaviours; striving individually and collectively towards effective delivery for quality results; and holding people and teams accountable. Phase II reinforces WHO's commitment to improved health outcomes in the Region, ensuring that the technical focus and performance of WHO's work, the effectiveness of its partnerships and the management of resources deliver quality goods and services that generate value for money and are in line with regional and country health development priorities.



Transformation Agenda Phase II 2019-2020: Guiding Principles and Strategic Workstreams

With people at the centre of change, the guiding principles and strategic workstreams that will enable the acceleration and achievement of results in Phase II of the Transformation Agenda are:

- building on good existing practices and lessons learned and consolidating the achievements of Phase I;
- reinforcing country prioritization and emphasizing value for money;
- identifying leverage points for new ideas and innovations;
- contributing to major shifts in results – catalysing greater investments in health; and
- continuing to promote linkages with the WHO Director-General's Global Transformation Plan and Architecture, and aligning with the WHO

Thirteenth Global Programme of Work (GPW 13).

The selected strategic workstreams and actions are the result of an iterative process based on the following:

- recommendations from an independent review of the Transformation Agenda;
- wide-ranging consultations at the Sixty-sixth, Sixty-seventh and Sixty-eighth sessions of the WHO Regional Committee for Africa;
- feedback from the Regional Director's Independent Advisory Group (IAG) - constituted to provide strategic and policy advice on how to improve capacity and strengthen the work of WHO in the Region;
- continued efforts to establish linkages with the WHO Global Transformation Plan and Architecture.

The six strategic workstreams, which represent the main pathways of action for achievement of results during Phase II of the Transformation Agenda, are as follows (Table 1):

TABLE 1: **STRATEGIC WORKSTREAMS OF PHASE II OF THE TRANSFORMATION AGENDA**

NUMBER	STRATEGIC WORKSTREAMS
1	Strengthening change management processes and enhancing a values-based culture
2	Enhancing the country focus approach for greater impact
3	Growing a stronger focus on the delivery of quality results
4	Promoting efficiency, accountability, quality and value-for-money
5	Broadening the engagement with Member States and Partners
6	Ensuring more effective communication of the work of the Secretariat towards improving health outcomes in the Region

STRATEGIC WORKSTREAM ONE

STRENGTHENING CHANGE MANAGEMENT PROCESSES AND ENHANCING A VALUES-BASED CULTURE



Targeted and integrated efforts to make change sustainable and facilitate the development and institutionalization of the desired values, behaviours and organizational culture will be intensified in Phase II. This will entail a participatory approach of putting people first with continued staff engagement in order to create a conducive environment for change at all levels. The enhanced leadership of the governance structure, the commitment of the change management team, and the influence of change agents in the Regional Change Network will be paramount.

The key strategic actions to be undertaken are:

Strengthening change management: The draft change management strategy 2018-2020, which provides tools and guidance for institutionalizing change will be completed and implemented. Accompanied by management's commitment and investment in driving organizational change, the key components of the strategy include enhancing all staff commitment to change; identifying and encouraging desired behaviours; training, learning and communicating for impact; and making change sustainable. A monitoring and evaluation plan will be used to encourage the adoption of new behaviours in building a culture of effectiveness and producing results.

Developing a core group of health leaders: Following the collaboration established with EnCompass, - a leading consultancy firm that offers professional learning to staff, the AFRO Pathway to Leadership Training Programme will be implemented in Phase II. The programme aims to develop the skills of senior staff in organizational, team and personal leadership; enhance their analytical and strategic thinking skills; and gain a greater understanding of the complex issues facing managers and leaders today and in the future. Nine cohorts of 205 staff members will go through the Leadership Programme with each programme covering three to five months. The modules to be covered in the training include understanding the actionable principles of management and leadership; negotiating difficult conversations and optimizing team performance; effective vision articulation, aligning that vision to WHO’s mandate and executing actions in clear and coherent ways; and resource mobilization strategies.

Ensuring greater and more meaningful engagement of staff in the activities of the Transformation Agenda: This will include enhanced dedication to:

- Staff Development and Learning (SDL) to encourage staff development and skill upgrading, openness to ideas and suggestions, improved communication and clarity to promote better understanding of potential improvements in WHO ways of working;
- Regular coordination meetings to review executed and planned actions, strengthen accountability and assess progress towards strategic goals and targets; and
- Town Hall meetings to facilitate information sharing and to promote transparency.

Promoting a healthy and respectful workplace, including prevention of bullying and sexual harassment: This will include:

- Establishing and galvanizing a committee dedicated to promoting a respectful and healthy workplace;
- Accelerating implementation of the staff well-being and welfare programme;

- Organizing training/briefing sessions on sexual harassment and bullying;
- Implementing the approved recommendations of the Healthy and Respectful Workplace Committee; and
- Conducting an anonymous survey to assess the evolution of staff attitudes to guide the Secretariat’s efforts in this area.

Enhancing the work of the Transformation Agenda governance structures: This will include:

- Ensuring that monthly Executive Management Team meetings contain standing agenda items on the Transformation Agenda;
- Resourcing the Change Management Team to coordinate and monitor implementation of the Transformation Agenda; and
- Equipping and supporting the Regional Change Network to champion the principles of accountability, quality, value-for-money and promoting a healthy and respectful workplace, while recognizing that each staff member plays an essential role in making a difference in the lives of people in the African Region.

ENHANCING THE
COUNTRY FOCUS
APPROACH FOR
GREATER IMPACT



The systematic process for assessing the structure of WHO country offices (WCOs) to ensure adequate and suitable expertise to address country health priorities – “functional reviews” – will be continued to its logical conclusion. Already, the functional reviews are resulting in fit-for-purpose country operating models, better alignment with country priorities and responsive strategic operations. Efforts will be intensified to support WCOs to implement the most effective, recommended country operating model in pursuit of country level health impact. Engagement of WCO staff members will be enhanced with the aim of further promoting and institutionalizing the objectives and values of the Transformation Agenda.

The following key strategic actions will be carried out:

Consolidating implementation of the recommendations of the functional reviews in country offices: This will include:

- Completing functional reviews in the remaining 13 WCOs and prioritizing the most feasible, effective functional review recommendations for all countries;
- Finalizing and disseminating guidelines for implementation of non-HR recommendations;
- Enhancing implementation and monitoring of country plans, while supporting more robust capacity development including strengthening WHO leadership in health at country level;
- Expanding resource mobilization opportunities at country level to ensure investment of adequate, catalytic resources to strengthen WHO’s country-focused, programming approach in line with the GPW 13; and

- Recruiting programme management officers to improve implementation and management of the programme budget.

Continuing engagement with country staff: This will include:

- Organizing quarterly country strategic webinars with WRs on change management;
- Capacity strengthening for non-professional staff in WHO country offices to enhance their roles in the Transformation Agenda;
- Conducting regular interactions with professional and support staff in WHO country offices;
- Encouraging openness to ideas and suggestions, improved communication, and the promotion of better understanding of potential improvements for programming excellence; and
- Conducting joint programme management and administrative reviews in country offices with newly appointed WRs.



GROWING A STRONGER FOCUS ON THE DELIVERY OF QUALITY RESULTS

Building upon the experience in institutionalizing the African Region Results Framework, and within the framework of the “triple billion” targets of the GPW 13, continued emphasis will be put on results-driven implementation and on optimizing the utilization of the programmatic Key Performance Indicators to manage for and communicate results. Implementation of the “Framework for health systems development towards UHC, with emphasis on Primary Health Care” will be accelerated to help countries improve access to quality health services that are centred on people’s needs and circumstances, without the users of the services enduring financial hardship. Efforts will be made to build on and consolidate the gains made in health security to maximize and sustain IHR capacity and health emergency preparedness of countries. As a knowledge-based Organization, WHO will continue to invest in the expansion of knowledge generation, utilization and management capacity.

Reinforcing the utilization of the KPIs to manage for results: This will include:

- Expanding the functionalities of the eTool for African Region Results (TAR) by harmonizing internal reporting processes (the Regional Director’s quarterly reports, mid-term and end-of-biennium reporting) using a single data entry form in the TAR to enhance efficiencies and streamline results-focused reporting;
- Optimizing the use of KPI data to manage for results by further enhancing the TAR to populate user-based management reports for results driven decision-making in clusters, programmes/units and offices;
- Developing a TAR mobile application to increase accessibility to KPI performance data and linking the TAR to GSM to promote results-based management of technical and managerial functions and resources;
- Ensuring availability of up-to-date KPI data by integrating system-generated KPI reporting alerts to support clusters, programmes/units and offices to better manage reporting functions and minimize bottlenecks in the KPI reporting workflow, including developing a KPI administrative dashboard to recognize the efforts of clusters, programmes/units and offices in using up-to-date KPI data, and to identify countries requiring support to manage their KPI reporting;
- Supporting clusters, programmes/units and offices to better communicate WHO’s contribution by providing a platform within TAR to publish country success stories that will engage donors, partners and Member States for support while promoting country-to-country learning; and
- Linking programmatic and managerial KPI monitoring and evidence to planning, and mapping and alignment of the TAR KPIs with the GPW 13 Impact Framework.

Continuing implementation of AFRO Flagship Programmes:

This will include:

- Enhancing the work of the Inter-Cluster Collaborative Working Group on Universal Health Coverage and the Sustainable Development Goals, including setting up teams/groups of focal points from different clusters that are assigned to coordinate support for groups of countries;
- Supporting countries to implement the “Framework for Health Systems Development towards Universal Health Coverage in the context of the Sustainable Development Goals in the African Region” with improvements in the targeting and impact of resources to ensure sustainability within the context of the WHO AFRO UHC flagship programme;
- Supporting countries to implement the “Regional Strategy for Health Security and Emergencies, 2016-2020” within the context of universal health coverage and guided by the WHO Emergencies Results Framework;
- Supporting countries to implement the Adolescent Health flagship programme;
- Supporting countries to integrate implementation of disease-specific programmes, such as the Malaria “High burden to high impact” initiative; integrated management of NCDs in PHC settings using WHO/PEN and others; and
- Conducting intensified polio surveillance with GIS technologies for real-time evidence to ensure containment of polioviruses so that the African Region can be certified to have eradicated polio by the end of 2019.

Promoting country innovations and best practices: This will include:

- Establishing an innovation platform that will disseminate health innovations with the potential for having significant social impact and addressing the unmet health needs in the Region and serve as a dynamic platform to connect diverse stakeholders;
- Showcasing exhibitions on innovations during the 2nd Africa Health Forum and the Sixty-ninth session of the WHO Regional Committee for Africa; and
- Identifying, documenting and sharing best practices across countries, including lessons learned from interregional, South-South and triangular cooperation, in order to foster a culture of innovation internally and externally.

Enhancing knowledge management:

This will include:

- Developing a regional Knowledge Management Strategy with an implementation framework;
- Supporting countries to collect and collate disaggregated data (by sex and age) through routine data collection and national surveys (census, DHS and MICS) for better management;
- Developing a tool for countries to improve monitoring and evaluation capacity for UHC and the SDGs;
- Identifying and designating a WHO Collaborating Centre for knowledge management to strengthen WCO capacity, and
- Establishing an integrated observatory platform, hosting the Africa Health Observatory and the National Health Observatories, with open access and extensions that will enable real-time exchange of data.



**PROMOTING
EFFICIENCY,
ACCOUNTABILITY,
QUALITY AND
VALUE-FOR-MONEY**

Further efforts will be made to sustain the impressive progress made in ensuring that staff comply with WHO’s rules and regulations in order to promote efficient use of resources for the delivery of results within the framework of the Accountability and Internal Control Strengthening (AICS) initiative. The focus of this initiative has been to improve accountability, transparency and compliance; enhance performance of individual staff and teams; and implement mechanisms to measure, monitor and report on progress and trends.

The key strategic actions to be undertaken are:

Enhancing human resource capacity at all levels:

This will include:

- Developing and implementing a new Regional Awards Programme, in addition to the current global and regional level awards programmes, to recognize and reward outstanding and exceptional performance in the African Region;
- Designing and implementing mandatory training modules for the various streams and functions to ensure the productivity and efficiency of new staff members;
- Expanding the rotation of Operations Officers to other functional areas to promote mobility within the Region; and
- Exploring and undertaking outreach activities to attract talent, and more specifically female applicants for international professional positions within the Region.

Improving transparency, efficiency, quality and accountability in WHO processes, including procurement and delivery of services:

This will include:

- Establishing a General Management Cluster service catalogue with turnaround times for processes and services;
- Launching and implementing a Green Initiative and Paperless Environment;
- Expanding the managerial KPIs, including quarterly reports, to all Regional Office clusters, programmes and units;
- Establishing a Programme Committee to review technical and financial implementation of the work all Regional Office clusters, programmes and units; and
- Conducting periodic value-for-money studies in the administrative areas which are servicing technical programmes.

**BROADENING
ENGAGEMENT WITH
MEMBER STATES
AND PARTNERS**



The work with Member States and Partners in addressing regional and country health priorities will continue to be prioritized. Efforts will be made to effect policy and institutional arrangements in countries in order to amplify the results being delivered with the implementation of the Transformation Agenda. Particular emphasis will be placed on health governance, priority setting, coordination of partners and organizational efficiency. Extended efforts will be made to strengthen existing partnerships and engage new partners and donors in support of Member States.

The following key strategic actions will be carried out:

Maximizing the Regional Director’s Interactions with Member States: This will include:

- Sustaining the regional partnership with Member States to advance the universal health coverage agenda at the highest political level;
- Organizing and following up on official high-level strategic advocacy visits by the Regional Director to Member States;
- Organizing ministerial briefings aimed at fostering better understanding of the World Health Organization, the role of its Governing Bodies, key policies, strategic guidance and UN reform processes, for newly appointed Ministers of Health in the WHO African Region;
- Organizing regular briefings for Geneva-based mission representatives from the African Region and;
- Leveraging resource mobilization opportunities at country level to ensure adequate resources to strengthen WHO’s work in countries in line with the WHO Thirteenth General Programme of Work.

Consolidating the Regional Director’s Engagements with Partners, Donors and other Key Stakeholders:

This will include:

- Organizing and following up on high-level strategic advocacy visits to partner institutions and donors, including the African Union Commission and regional economic communities;
- Leading and coordinating the work of the Harmonization for Health in Africa platform;
- Engaging philanthropists and the private sector in the Region to enhance investments and support to the health sector in general and WHO’s work specifically;
- Producing and disseminating quarterly regional updates on the Transformation Agenda to stakeholders;
- Organizing the 2nd Africa Health Forum;
- Conducting a survey of stakeholders to measure satisfaction with WHO contribution; and
- Further improving the effectiveness of Governing Bodies through sun-setting of resolutions, improved management of the agenda of meetings and strengthening Member States’ capacity in Global Health Diplomacy.



ENSURING MORE EFFECTIVE COMMUNICATION OF THE WORK OF THE SECRETARIAT TOWARDS IMPROVING HEALTH OUTCOMES IN THE REGION

The Secretariat’s work to foster a more responsive and interactive organization, internally among staff members and externally with stakeholders has resulted in increased awareness of health issues in Member States and showcased WHO’s wide-ranging roles in support of countries. It has also informed stakeholders of the organizational changes that have been progressing under the Transformation Agenda. This work will continue to be given a lot of attention during Phase II, including using more dynamic media materials.

The key actions to be undertaken are:

Strengthening external communications: This will include:

- Documenting and disseminating key WHO-led health developments in the media through timely press releases, interviews and opinion pieces;
- Disseminating impact stories about communities that benefit from WHO’s work in countries;
- Transforming WHO communications to showcase the results of WHO’s work through dynamic media materials such as videos, photo stories and infographics;
- Disseminating information on key events using the e-Alert Newsletter;
- Regularly updating the Transformation Agenda web pages on the WHO AFRO Intranet;
- Disseminating a yearly Regional Director’s Letter to all stakeholders;
- Renovating the WHO audio/video studio for cost-effective in-house production of audio-visual materials; and

- Establishing partnerships with media outlets in Africa to transmit WHO-produced content.

Strengthening internal communications, specifically intra- and inter-cluster communication: This will include:

- Creating a communication content sharing platform on the WHO AFRO Intranet for systematic sharing between the Regional Office and country offices;
- Enhancing horizontal communication between staff on technical and managerial knowledge, values and innovations to ensure better delivery of results from staff;
- Promoting and supporting the Staff Association as a mechanism for improving staff engagement and working environment;
- Disseminating information on key events using the e-Alert Newsletter; and
- Regularly updating the Transformation Agenda web pages on the WHO AFRO Intranet.

C H A P T E R F O U R

PHASE II –
IMPLEMENTATION
AND ACCOUNTABILITY
FRAMEWORK

KEY DELIVERABLES, TIMELINES
AND EXPECTED RESULTS



PHASE II – IMPLEMENTATION AND ACCOUNTABILITY FRAMEWORK

KEY DELIVERABLES, TIMELINES AND EXPECTED RESULTS

The core thrust of the Transformation Agenda has been accountability and the delivery of results. Continued emphasis will be put on these aspects in Phase II. The following tables present the key deliverables for the six Strategic Workstreams, their deadlines and the results that they are expected to contribute to. These have been selected as proxy indicators as they have the potential to contribute to major shifts in results because of their catalytic nature.

All staff members are responsible for implementing the strategic actions of Phase II, within the framework of the WHO 2018-2019 Programme Budget and Workplans. The work of the Regional Change Network, which is an ad-hoc advisory group, will be extremely important during this phase as the Change Agents are expected to devote 5% of their time to championing change; suggesting cross-cutting activities to increase synergies; facilitating open communications on change; identifying organizational and cultural factors that may enhance or detract from the change objectives; and identifying and addressing potential sources of resistance to change; and others.

The Regional Director will prepare a report on the status of implementation of the Transformation Agenda for dissemination at the Seventy-second World Health Assembly in May 2019 and at the Sixty-ninth session of the WHO Regional Committee for Africa in August 2019. This will be in addition to the existing statutory semi-annual monitoring and mid/end-term review mechanisms of WHO's work.

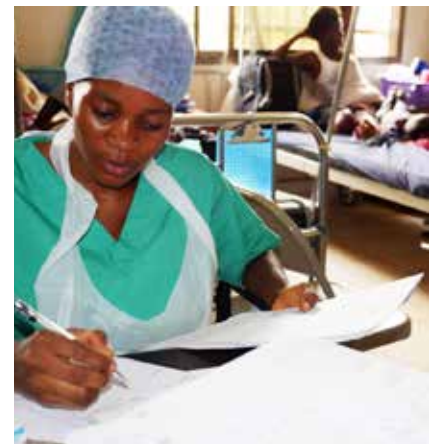


TABLE 2: STRATEGIC WORKSTREAM 1

STRATEGIC ACTIONS	KEY OUTPUTS/DELIVERABLES	DEADLINE	EXPECTED RESULTS
Developing a change management strategy	Regional Change Management Strategy launched.	April 2019	<ul style="list-style-type: none"> Enhanced ethical standards for staff members.
Developing a core group of leaders, including organizing leadership training courses.	At least two leadership training courses for senior staff conducted.	June 2019	<ul style="list-style-type: none"> Responsive, supportive, inclusive results-driven teams.
Ensuring greater engagement of staff in the activities of the Transformation Agenda.	<p>At least one staff retreat organized by each cluster.</p> <p>At least four Town Hall meetings organized</p>	September 2019	<ul style="list-style-type: none"> Enhanced accountability by individuals and teams. Conducive, just and respectful working environment for change.
Promoting a healthy and respectful workplace.	At least two reports on health and the workplace submitted to EXM by the WHO/AFRO Committee on a Healthy and Respectful Workplace.	September 2019	
Enhancing the work of the TA governance structures.	<p>At least four meetings of the EXM to discuss progress reports prepared by the Change Management Team organized and recommendations implemented.</p> <p>At least two reports of the Regional Change Network prepared and submitted to the EXM.</p>	<p>December 2019</p> <p>October 2019</p>	

TABLE 3: STRATEGIC WORKSTREAM 2

STRATEGIC ACTION	KEY OUTPUTS /DELIVERABLES	DEADLINE	EXPECTED RESULTS
Consolidating the functional reviews in country offices.	Functional reviews completed and implementation plans for 13 remaining countries approved	December 2019	<ul style="list-style-type: none"> Strengthened WHO Country Office Teams in line with the functional reviews.
Continuing engagement with country staff	<p>At least two country strategic webinars on change management organized.</p> <p>At least one staff retreat organized by each WCO</p>	<p>September 2019</p> <p>October 2019</p>	<ul style="list-style-type: none"> Improved alignment of WHO human and financial resources to country health priorities Enhanced accountability by individuals and teams in WHO country offices. Conducive, just and respectful environment for change.

TABLE 4: STRATEGIC WORKSTREAM 3

STRATEGIC ACTIONS	KEY OUTPUTS / DELIVERABLES	DEADLINE	EXPECTED RESULTS
Accelerating the roll-out and implementation of the Results Framework and KPIs	A harmonized web-based internal reporting system established.	March 2019	<ul style="list-style-type: none"> Strengthened regional and national capacity for health security, including for effective preparedness and timely response to disease outbreaks and emergencies. Sustained progress towards polio eradication in the African Region. Functional and effective cross-cutting systems approach facilitating progress towards universal health coverage, with a strong emphasis on adolescents. Enhanced knowledge management, including regular dissemination of authoritative information products
Continuing implementation of WHO AFRO flagship programmes	At least two reports on the work of the Inter-Cluster Collaborative Working Group on the SDGs submitted to EXM.	July 2019	
	Accelerated implementation of National Action Plans for Health Security and Emergencies in at least five countries to maximize and sustain IHR capacity.	December 2019	
	Accelerated implementation of the Framework for health systems development towards UHC in at least 20 countries.	December 2019	
	Intensified polio surveillance with GIS technologies for real-time evidence to ensure containment of polioviruses towards eradication.	December 2019	
Promoting country innovations and best practices.	The 1st AFR Health Innovations exhibition organized.	April 2019	
Enhancing knowledge management	A regional knowledge management strategy and implementation framework adopted	September 2019	
	A WHO Collaborating Centre for Knowledge Management designated	December 2019	

TABLE 5: STRATEGIC WORKSTREAM 4

STRATEGIC ACTIONS	KEY OUTPUTS/ DELIVERABLES	DEADLINE	EXPECTED RESULTS
Enhancing human resource capacity at all levels.	A new Regional Awards programme, in addition to the current global and regional level awards programmes, established.	June 2019	<ul style="list-style-type: none"> Enhanced staff appreciation of and motivation for higher performance. Enhanced productivity and efficiency of newly recruited staff.
	Training modules for the various streams and functions developed.	December 2019	
	Rotation of staff occupying technical and administrative functions expanded.	December 2019	

TABLE 5: STRATEGIC WORKSTREAM 4 CONTD

STRATEGIC ACTIONS	KEY OUTPUTS/ DELIVERABLES	DEADLINE	EXPECTED RESULTS
Enhancing human resource capacity at all levels.	Outreach activities to attract talent, and more specifically female applicants for international professional positions within the Region conducted.	December 2019	<ul style="list-style-type: none"> Strengthened WHO human resource capacity, with improved female representation.
Improving transparency, efficiency, quality and accountability in the procurement and delivery of services.	A policy document on the Green Initiative and Paperless Environment developed.	June 2019	<ul style="list-style-type: none"> Improved alignment of WHO's human, financial and material resources with identified regional and country health priorities. Improved efficiency, accountability and value-for-money in the procurement and delivery of services, including donor confidence.
	A service catalogue with turnaround time introduced.	July 2019	
	A Programme Committee with membership and Terms of Reference, established.	July 2019	
	At least one value-for-money study conducted.	September 2019	

TABLE 6: STRATEGIC WORKSTREAM 5

STRATEGIC ACTIONS	KEY OUTPUTS /DELIVERABLES	DEADLINE	EXPECTED RESULTS
Maximizing the Regional Director's interactions with Member States.	An effective system for following up implementation of the recommendations RD's official visits established	March 2019	<ul style="list-style-type: none"> Improved collaboration between WHO, Member States, Partners and Donors contribute to efforts towards universal health coverage and the SDGs. Increased domestic and external investments in health. Scaled up implementation of innovation and best practices in health.
Consolidating the Regional Director's engagements with Partners, Donors and other Key Stakeholders.	The 2nd Africa Health Forum organized.	April 2019	

TABLE 7: STRATEGIC WORKSTREAM 6

STRATEGIC ACTIONS	OUTPUTS	DEADLINE	EXPECTED RESULTS
Strengthening external communications.	Regular quarterly e-Alert newsletters on the Transformation Agenda disseminated to all stakeholders.	December 2019	<ul style="list-style-type: none"> Enhanced internal communication between and across all the three levels of the Organization. Reinforced external communication.
	An Annual Regional Director's Letter disseminated to all stakeholders	December 2019	
Strengthening internal communications.	Regular quarterly e-Alert Newsletters on the Transformation Agenda disseminated to all AFR staff.	December 2019	

C H A P T E R F I V E

CONCLUSION AND WAY FORWARD



WAY FORWARD

Phase II of the Transformation Agenda seeks to consolidate the achievements made so far in implementing the “Change Agenda” launched in 2015 on the appointment of the WHO Regional Director for Africa.

The objectives of the second phase of the Transformation Agenda are to maximize the gains of the first phase, sharpen WHO’s technical focus and performance, enhance the quality of WHO’s work and improve the targeting, management and impact of resources to generate value for money, with a focus on “putting people at the centre of change”.

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The year 2019 represents the transition of the Secretariat’s work to GPW 13, which elaborates WHO’s strategy for achieving SDG 3 – “Ensuring healthy lives and promoting well-being for all at all ages”.

CONCLUSION AND WAY FORWARD

Phase II of the Transformation Agenda seeks to consolidate the achievements made so far in implementing the “Change Agenda” launched in 2015 on the appointment of the WHO Regional Director for Africa. The achievements show that Member States in the African Region, with the support of WHO and partners, are making significant progress in their efforts to ensure healthy lives and promote well-being for all at all ages by achieving UHC, addressing health emergencies, and promoting healthier populations. The adoption of the GPW 13 is an opportune time to step up and accelerate the pace of implementation of the Transformation Agenda.

The objectives of the second phase of the Transformation Agenda are to maximize the gains of the first phase, sharpen WHO’s technical focus and performance, enhance the quality of WHO’s work and improve the targeting, management and impact of resources to generate value for money, with a focus on “*putting people at the centre of change*”. The Secretariat expects that implementation of the six strategic workstreams will optimize WHO’s contributions toward the achievement of better health outcomes for people in the African Region. The six workstreams are:

- Strengthening change management processes and enhancing a values-based culture;
- Enhancing the country focus approach for greater impact;
- Consolidating and growing a stronger focus on the delivery of results;
- Promoting efficiency, accountability, quality and value-for-money;
- Broadening the engagement with Member States and Partners; and
- Ensuring more effective synergies across all levels of the Organization and improved communication of the work of the Secretariat in improving health outcomes in the Region.



Ensuring healthy lives
and promoting well-being
for all at all ages

The year 2019 represents the transition of the Secretariat’s work to GPW 13, which elaborates WHO’s strategy for achieving SDG 3 – “Ensuring healthy lives and promoting well-being for all at all ages”. Implementation of GPW 13 requires key strategic and organizational shifts.

With an emphasized country-led approach at its core, the GPW 13 strategic shifts include moving from the six “Categories of Work” as specified in the Twelfth GPW to the 10 “Outcomes” of GPW 13. The 2020-2021 Regional Programme Budget and Workplans that will be prepared in 2019 will articulate the impact- and outcome-focused approach to implementation that underpins GPW 13. It will organize WHO’s work around eight health outcomes, one outcome on strengthening data and innovation and two leadership and enabling outcomes which contribute jointly to the achievement of the three strategic priorities of the GPW, namely:

- achieving universal health coverage – 1 billion more people benefitting from universal health coverage.
- addressing health emergencies – 1 billion more people better protected from health emergencies.
- promoting healthier populations – 1 billion more people enjoying better health and well-being.

Linked to a logical theory of change across the three GPW 13 strategic priorities, the detailed work-plans and operational plans to be prepared through the programme budget planning process which involves Member States, the Secretariat’s leadership team and staff across the Organization will articulate how the outcomes contribute to the three strategic priorities. The central role of Member States in the implementation of the GPW 13 will be crucial. Joint accountability and joint monitoring of progress towards delivery of the targets will be emphasized.

For the African Region, the strategic and organizational shifts include stepping up leadership at all levels, driving impact in every country including placing countries squarely at the centre of WHO’s work and adopting a new organizing frame to attain the vision and outcomes of GPW 13 and reflect the four pillars of the Transformation Agenda of the WHO Secretariat in the African Region. These shifts in WHO’s strategic direction are already in progress and will be consolidated in Phase II.

The four pillars of the Transformation Agenda align with the strategic and organizational shifts of GPW 13. Since the inception of the Transformation Agenda in 2015, valuable lessons have been learned throughout its implementation, many of which were used to inform several aspects of GPW 13. In keeping with the country-focused approach, WHO in the African Region will step up leadership in the region by continuing to raise awareness and the political profile of universal health coverage. Universal health coverage will be highlighted at continental summits of African Heads of State and Government, meetings of regional economic communities and at meetings of ministers of health and ministers of finance. Continued advocacy for increased domestic investments in health will be made by interacting with governments, including Heads of State, parliamentarians, and finance ministers during official country visits. Within the context of the broader United Nations reforms, WHO country offices will continue to actively lead on health as part of the UN’s overall efforts to deliver the SDGs, including the coordination of partners in health, the provision of norms and credible information and evidence for health programming, and strengthening of health systems.

WHO will work with Member States to identify, tackle and overcome the persistent economic, geographic, epidemiological or cultural barriers to UHC through implementation of its UHC Flagship Programme. WHO will promote “primary health care and health services that are high quality, safe, comprehensive, integrated, accessible, available and affordable for everyone and everywhere, provided with compassion, respect and dignity by health professionals who are well-trained, skilled, motivated and committed” in line with the 2018 Declaration of Astana, a follow-up to the 1978 Declaration of Alma-Ata. A strong push towards integration of services will be made.

WHO reiterates that primary health care with effective linkages to timely secondary and tertiary care is “indispensable to progress towards UHC and remains central to the unfinished agendas for communicable diseases, and for maternal, newborn, child, and adolescent health ... and to tackle and overcome the growing burden of non-communicable diseases”. These health services should also include health promotion and preventive services through essential public health functions. Digital health approaches and other system innovations will be promoted through the collaboration established with the International Telecommunication Union and by implementing the AFRO Innovations Initiative.

WHO will continue to support country efforts in communicable disease prevention and control, including those on vaccine-preventable diseases, HIV/AIDS, tuberculosis, malaria, viral hepatitis, neglected tropical diseases and other vector-borne diseases such as yellow fever, while ensuring that disease-specific responses are integrated into people-centred health systems. It will also provide strategic support for scaling up comprehensive and sustainable actions to tackle antimicrobial resistance and related pathogens in line with the Global Action Plan on Antimicrobial Resistance and the Political Declaration of the high-level meeting of the General Assembly on antimicrobial resistance. Continued dedicated priority will be given to ensuring that the African Region becomes and is kept polio-free. The momentum towards polio eradication in the Region will be sustained to its logical conclusion.

With regard to noncommunicable diseases, the Secretariat will work with Member States to implement the Political Declaration of the Third United Nations High-level Meeting on NCDs held in September 2018. The Declaration includes 13 new commitments and monitoring progress towards the four time-bound commitments – setting national NCD targets; developing national multisectoral policies and action plans; reducing risk factors for NCDs; and strengthening health systems to address NCDs through people-centred primary health care and universal health coverage – set in the UN Outcome Document adopted by the Second High-level Meeting of the UN General Assembly in July 2014.

Work to accelerate the gains in maternal and child survival will continue. Guided by the “Global Strategy for Women’s, Children’s and Adolescents’ Health, 2016-2030: Implementation in the African Region” adopted by the Sixty-sixth session of the WHO Regional Committee for Africa, major efforts to improve access to safe, good-quality services in order to prevent newborn deaths and to ensure universal access to sexual and reproductive health care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes will be made. Adolescent health will remain a top priority through implementation of the AFRO Adolescent Health Flagship Programme.

The Secretariat acknowledges that investments in health systems, including human resources for health and medicines and other health products, are fundamental for health strengthening towards UHC. In the area of human resources for health, the Secretariat, guided by the “African Regional Framework for the Implementation of the Global Strategy on Human Resources for Health: Workforce 2030”, adopted by the Sixty-seventh session of the WHO Regional Committee, will continue to work with Member States to ensure that motivated, productive and fit-for-purpose health workers are available.

The Secretariat will continue to work with Member States to promote the availability of quality-assured medicines, vaccines and health products in line with the “Regional Strategy on Regulation of Medical Products in the African Region, 2016-2025 adopted by the Sixty-sixth session of the WHO Regional Committee for Africa. It will also collaborate with the African Union Commission in supporting the work of the Africa Medicines Agency – the specialized agency of the African Union that is responsible for catalysing regulatory system strengthening and addressing complex technical issues related to substandard and falsified medical products at continental level.

The Secretariat will build on and consolidate the gains made in health security, and through the WHO Health Emergencies Programme and guided by its results framework and the “Regional strategy for health security and emergencies” adopted by the Sixty-sixth session of the WHO Regional Committee for Africa, will work with partners and Member States to maximize and sustain IHR capacity and health emergency preparedness of countries to ensure that populations affected by acute and protracted emergencies have rapid access to essential life-saving health services including health promotion and disease prevention.

In line with its commitment to “leaving no one behind”, the Secretariat will build on its work to mitigate the health impacts of climate change, environmental risks and other determinants of health. It will work in countries to support action across government and society to improve the health and well-being of populations and achieve health equity through the life course by promoting the principles of “whole-of-government”, “whole-of-society” and “Health in All Policies” that comprehensively address issues related to gender, equity and human rights.

It is incumbent upon WHO to ensure access to authoritative and strategic information on matters that affect peoples’ health. Building on the report, “The State of Health in the WHO African Region: An analysis of the status of health, health services and health systems in the context of the Sustainable Development Goals: Where we are, Where we need to go” the Secretariat will work with Member States to identify key data gaps to monitor UHC and the health-related SDGs and increase efficiencies. Particular attention will be given to promoting strategic disaggregation of data related to sex, income, disability, ethnicity and age group categories in order to identify and address health inequalities and to promote health equity.

WHO comprises both the Secretariat and Member States; for that reason, it will be equally important to deepen the engagement with Member States for greater clarity on WHO's work and to further develop a shared vision and sense of common purpose and trust; to enable the Organization to reach its full potential. The Secretariat will work with Member States to make and effect policy and institutional arrangements that support and amplify the results of the change being seen and envisaged in implementation of the Transformation Agenda. Key areas that will be focused on include health governance, priority setting, coordination of partners, organizational efficiency and joint monitoring, documenting and reporting on country progress.

The Transformation Agenda of the WHO Secretariat continues to be a pathway for change by which the WHO Secretariat and Member States can effectively and sustainably address the health disparities and inequities in the African Region. Effecting this change is a long-term process which requires steady leadership commitment, hard work, persistence and shared accountability.

It is the hope and expectation of the current leadership of the WHO Secretariat in the African Region that WHO, Member States, Partners, Donors and all other Stakeholders will continue to work together to effect this transformational change in order to attain the highest possible level of health for Africa's people by achieving universal health coverage and the Sustainable Development Goals.



**World Health
Organization**

REGIONAL OFFICE FOR **Africa**