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STUDY OF THE ORGANIZATION'S STRUCTURES
IN THE LIGHT OF ITS FUNCTIONS

Report of the Sub-Committee of the Regional Committee
on the General Programme of Work

Part III

The Regional Committee Sub-Committee on the General Programme of Work met on 18 and 19 June 1980. During the meeting, the Sub-Committee undertook to recommend to the Regional Committee that it should continue its work in connexion with the study of WHO's structures in the light of its functions (see Section 2(2) of document WPR/RC31/14).

The present document, which is Part III of the report of the Sub-Committee, contains its comments and recommendations to the Regional Committee after having reviewed the implications of resolution WHA33.17, study of the Organization's structures in the light of its functions, in particular operative paragraphs 2 and 3, and resolution WHA33.19, periodicity of health assemblies (see Annexes 1 and 2). Annex 3 contains a draft resolution prepared by the Sub-Committee which the Regional Committee may wish to consider adopting.

An addendum to this document, WPR/RC31/16 Add.1, contains a plan of action prepared by the Secretariat for implementing the recommendations of resolution WHA33.17, which the Regional Committee may wish to take into consideration during its discussions.

1. Resolution WHA33.17, Study of the Organization's structures in the light of its functions

The Sub-Committee reviewed resolution WHA33.17, adopted by the Thirty-third World Health Assembly, entitled "Study of the Organization's structures in the light of its functions" (see Annex 1). In its deliberations, the Sub-Committee focused its attention on the recommendations to Member States and the Regional Committees (operative paragraphs 2 and 3).

1.1 Operative paragraph 2

With regard to the Health Assembly's recommendations directed to Member States, the Sub-Committee noted that the main emphasis was placed on encouraging them to review the role of their health authorities and to develop or strengthen mechanisms which will enhance the coordination of activities and resources aimed at national health work. The resolution also encouraged Member States to optimize the use of their Organization through more active participation and the development of the mechanisms necessary to ensure the effective coordination of national and international health programmes.

Regarding the development or strengthening of the various mechanisms, the Sub-Committee recommended that Member States should strengthen existing national mechanisms which could act as multisectoral councils dealing with health matters. The possibility of considering the role of ministries of health as directing and coordinating authorities on national health work as an item on the agenda of a session of the Regional Committee was also recommended.

Regarding the implementation of resolution WHA31.27,¹ concerning the role of WHO at country level and in particular the shift from technical assistance to technical cooperation, the Sub-Committee felt that its own role and function adequately addressed this need.

1.2 Operative paragraph 3

The Sub-Committee then turned its attention to the Health Assembly's recommendations directed to the regional committees.

Regarding a more active participation in the work of the Organization, 3(1), the Sub-Committee felt that representatives to the Regional Committee should review the various alternatives available to them for more active involvement in both regional and global health matters. If the Regional Committee was to play a more active role, consideration might have to be given to prolonging the duration of sessions. The possibility of ministers of health attending sessions was also considered.

In considering the establishment or strengthening of appropriate subcommittees to support the work of the Regional Committee, 3(2), the Sub-Committee felt that the need for such mechanisms would become clearer once the Regional Committee had reviewed and approved the regional strategy

¹WHO Handbook of Resolutions and Decisions, Vol. II, 3rd ed., 1979, page 144.

for achieving health for all by the year 2000, which, in the process of implementation, would need to be continuously reviewed and might require special studies or analyses. It was felt, however, that the two existing subcommittees of the Regional Committee could adequately fulfil such functions. It was recommended that careful consideration should be given to a proper balance of representation on the two subcommittees, the present term of three years being considered appropriate to ensure continuity and effective and productive working relationships.

Regarding the promotion of greater interaction in the Region between the activities of WHO and other bodies concerned, 3(3), the Sub-Committee recommended that the Regional Director should prepare an annotated inventory of regional bodies with which joint undertakings of mutual benefit might be possible in the context of implementing the New International Development Strategy and establishing the New International Economic Order.

The Sub-Committee considered the provision of support for technical cooperation among Member States, 3(4), to be a subject adequately covered by the Sub-Committee on Technical Cooperation among Developing Countries.

Regarding the provision of support for the establishment or strengthening of multisectoral national health councils, 3(5), the Sub-Committee felt it had no further recommendation to make on this topic.

Regarding the channelling of external funds for health into priority activities, 3(6), the Sub-Committee felt that this was an important area for careful consideration. A number of alternatives were considered. Each region and WHO Headquarters could determine well-defined priorities for external funding through the Voluntary Fund for Health Promotion or by direct bilateral or multilateral transfer. The Regional Director could be made responsible for proposing priorities to the Regional Committee and for involving it in reviews of external funding. Consideration might also be given to organizing meetings of donors as an alternative at the regional level. The Sub-Committee proposed that the Regional Director should prepare an analysis of the various options available for future consideration.

Regarding the Regional Committee's involvement in analysis of the implications of Health Assembly and Executive Board resolutions, 3(7), the Sub-Committee noted that for the thirty-first session of the Regional Committee the Regional Director would include such a brief analysis in his oral presentation to the Committee. In subsequent sessions, a written review would be presented.

Regarding the monitoring, control and evaluation functions of the Regional Committee, 3(8), the Sub-Committee felt that the Regional Director could ensure the application of the evaluation process by including in the agenda of future sessions of the Regional Committee a review of the implementation of regional programmes and by providing the members of the Regional Committee with appropriate information for evaluation purposes.

The Sub-Committee further clarified its own role in monitoring and assessing the progress achieved in the implementation of regional strategies, using relevant and approved indicators, and its involvement in updating the regional strategies on behalf of the Regional Committee.

2. Resolution WHA33.19, Periodicity of health assemblies

The Sub-Committee reviewed resolution WHA33.19 (Annex 2) which recommended that Health Assemblies should be held biennially. It was felt that such a change would have widespread implications for the work of the Regional Committee. A clearer picture of the implications was needed to permit more substantive discussion. The Sub-Committee noted that a working paper on the subject was to be prepared for submission to its next meeting on 8 September 1980. Members of the Sub-Committee would receive copies of this paper so that it could be considered by them prior to the meeting.

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3. The Sub-Committee recommended to the Regional Committee that it should consider, with a view to adoption, the draft resolution attached as Annex 3.

RESOLUTION OF THE WORLD HEALTH ASSEMBLY

THIRTY-THIRD WORLD HEALTH ASSEMBLY

WHA33.17

21 May 1980

STUDY OF THE ORGANIZATION'S STRUCTURES IN THE LIGHT OF ITS FUNCTIONS

The Thirty-third World Health Assembly,

Recalling that the main social target of governments and WHO in the coming decades is the attainment by all the people of the world by the year 2000 of a level of health that will permit them to lead a socially and economically productive life;

Guided by the Declaration and recommendations of the International Conference on Primary Health Care held in Alma-Ata, and by resolution WHA32.30 concerning the formulation of strategies for health for all by the year 2000;

Noting with satisfaction the United Nations General Assembly resolution 34/58 on health as an integral part of development, which reinforces the responsibilities entrusted to WHO in connexion with the attainment of health for all by the year 2000;

Recalling that, in accordance with its Constitution WHO is an organization of Member States cooperating among themselves and with others to promote the health of all people, and that this cooperative action embodies the truly international nature of the Organization;

Mindful of WHO's constitutional functions of acting as the directing and coordinating authority on international health work and of entering into technical cooperation with its Member States and facilitating technical cooperation among them;

Convinced that through its international health work the Organization can be a powerful instrument in helping to reduce international tension, to overcome racial and social discrimination, and to promote peace;

Realizing that, in consequence of the above, unprecedented efforts will be required in the health and related socioeconomic sectors throughout the world;

1. DECIDES:

- (1) to concentrate the Organization's activities over the coming decades, as far as is possible in the light of all its constitutional obligations, on support to national, regional and global strategies for attaining health for all by the year 2000;
- (2) to focus the Organization's cooperative activities within the United Nations system on joint efforts to support health as part of development, to devise the New International Development Strategy and to establish the New International Economic Order;
- (3) to strengthen the roles of the Organization in promoting action for health in addition to indicating how such action might be carried out, and in developing health technologies that are effective, socially acceptable and economically feasible, and ensuring that they are available to Member States;
- (4) to take all possible measures to maintain the unity of the Organization within its complex structures, to harmonize policy and practice throughout the Organization, and to ensure a proper balance between centralized and decentralized activities;

(5) to ensure that the Organization's directing, coordinating and technical cooperation functions are mutually supportive and that the work of the Organization at all levels is properly interrelated;

(6) to influence the channelling of all available health resources, including those of other relevant sectors and nongovernmental organizations, into support for national, regional and global strategies for health for all;

(7) to maintain to the full the Health Assembly's constitutional authority as the supreme organ for determining WHO's policies as well as the other powers vested in it and to increase its monitoring and control functions with respect to the work of the Organization, including the follow-up and review of the implementation of resolutions adopted by it;

(8) to improve further the Health Assembly's work methods and in particular to consider carefully the practicability of resolutions and other policies before adopting them, and to promote greater initiative by the regional committees in proposing resolutions to the Health Assembly;

2. URGES Member States, in the spirit of the policies, principles and programmes they have adopted collectively in WHO:

(1) to review the role of their ministries of health, strengthening them as necessary so that they can fully assume the function of directing and coordinating authority on national health work, and to establish or strengthen multisectoral national health councils;

(2) to mobilize all possible resources in their countries that can contribute to health development, including those of other relevant sectors and nongovernmental organizations;

(3) to tighten their coordinating mechanisms so as to ensure the mutual relevance and support of their own health development strategy on the one hand and their technical cooperation with WHO and with other Member States of WHO on the other;

(4) to ensure that WHO's action in their countries reflects adequately resolution WHA31.27 concerning the conclusions and recommendations of the Executive Board's organizational study on "WHO's role at the country level, particularly the role of WHO representatives", and in particular the shift from technical assistance to technical cooperation;

(5) to consider the possibility of increasing the use of their Organization as an effective agent to facilitate cooperation among them;

(6) to establish or strengthen mechanisms for ensuring continuing dialogue and cooperation with their Organization with a view to making sure that national and international health programmes are well coordinated;

(7) to coordinate their representation at regional committees and the Health Assembly, and to designate representatives to the regional committees and delegates to the Health Assembly who will later be in a position to influence national health policy so as to make it consistent with collective health policy adopted in WHO;

(8) to take into account as far as possible the multidisciplinary nature of health activities when establishing their delegations to the Health Assembly and the regional committees;

(9) to bring their national health policies to the attention of the regional committees;

(10) to coordinate their representation in WHO and in the United Nations and the specialized agencies on all matters relating to health, and particularly the role of health in development";

3. URGES the regional committees:

(1) to take a more active part in the work of the Organization and to submit to the Executive Board their recommendations and concrete proposals on matters of regional and global interest;

(2) to intensify their efforts to develop regional health policies and programmes in support of national, regional and global strategies for health for all, and to consider establishing or strengthening appropriate subcommittees to this end;

(3) to promote greater interaction in the regions between the activities of WHO and those of all other bodies concerned, including bodies of the United Nations system and nongovernmental organizations, in order to stimulate common efforts for attaining health for all by the year 2000;

(4) to support technical cooperation among all Member States, particularly for attaining health for all;

(5) to provide support for the establishment or strengthening of multisectoral national health councils to Member States who so desire;

(6) to foster the channelling of external funds for health into priority activities in the strategies for health for all of the countries most in need;

(7) to extend and deepen their analysis of the interregional, regional and national implications of Health Assembly and Board resolutions, and to provide such analyses to Member States;

(8) to increase their monitoring, control and evaluation functions so as to ensure the proper reflection of national, regional and global health policies in regional programmes and the proper implementation of these programmes, and to include in their programmes of work the review of WHO's action in individual Member States within the regions;

4. REQUESTS the Executive Board:

(1) to strengthen its role in giving effect to the decisions and policies of the Health Assembly and in providing advice to it, particularly with respect to ways of attaining health for all by the year 2000, among other things by ensuring that the Organization's general programmes of work, medium-term programmes, and programme budgets are optimally oriented towards supporting the strategies for health for all of Member States;

(2) to become increasingly active in presenting major issues to the Health Assembly and in responding to the comments of delegates;

(3) to foster the correlation of its work with that of the regional committees and the Health Assembly, among other things by reviewing carefully and drawing conclusions from the policy proposals of the regional committees in matters of worldwide interest, particularly in preparation for the ensuing Health Assembly;

(4) to monitor on behalf of the Health Assembly the way the regional committees reflect the Assembly's policies in their work, and the manner in which the Secretariat provides support to Member States individually, as well as collectively in the regional committees, Executive Board and Health Assembly;

(5) to review regularly measures taken by the relevant bodies of the United Nations system in the areas of health and development, and to ensure the coordination of WHO's activities with the activities of those bodies in order to promote an inter-sectoral approach to health development, thus facilitating the attainment of the goal of health for all by the year 2000;

5. REQUESTS the Director-General and Regional Directors to act on behalf of the collectivity of Member States in responding favourably to government requests only if these are in conformity with the Organization's policies;

6. REQUESTS the Director-General:

(1) to continue to exercise to the full all the powers entrusted to him by the Constitution in his capacity as chief technical and administrative officer of the Organization, subject to the authority of the Board and the Health Assembly;

(2) to ensure the provision of timely, adequate and consistent Secretariat support to the Organization's Member States, individually and collectively, and to this end to take all the measures within his constitutional prerogatives that he considers necessary;

(3) to expand the engagement of national staff of the country concerned in the execution of collaborative projects, to review the engagement of international WHO field staff, and to take any measures required so that such WHO staff become fully involved with the collaborative national programmes;

(4) to redefine the functions of the regional offices and of headquarters in such a way as to ensure that they provide adequate and consistent support to Member States in their cooperation with WHO and among themselves, and to adapt accordingly the organizational structures and staffing of the regional offices and of headquarters, reporting to the regional committees, the Executive Board and the Health Assembly as appropriate on his projects and plans in conformity with the constitutional functions of these bodies;

(5) to monitor the implementation of the decisions in this resolution and to keep the regional committees, the Executive Board and the Health Assembly fully informed on progress.

RESOLUTION OF THE WORLD HEALTH ASSEMBLY

THIRTY-THIRD WORLD HEALTH ASSEMBLY

WHA33.19

23 May 1980

PERIODICITY OF HEALTH ASSEMBLIES

The Thirty-third World Health Assembly,

Having considered the Director-General's report on the study of WHO's structures in the light of its functions,¹ prepared in response to resolution WHA31.27, and in particular the Director-General's report on the periodicity of Health Assemblies,² and resolution EB65.R12;

Having also considered the Executive Board's review of the periodicity of Health Assemblies, in response to resolution WHA32.26;³

Having in mind the need to preserve and strengthen the influence of the Member States in the Organization;

Recognizing that the principle of biennial programming and budgeting has been implemented in WHO;

Understanding that a change from annual to biennial Health Assemblies would necessitate changing the text of Articles 13, 14, 15 and 16 of the Constitution as set out in the Director-General's report;²

Considering that action by the Health Assembly to amend the Constitution under Article 73 is not possible until the Members have had at least six months in advance of the Health Assembly to consider the text of any proposed amendment to the Constitution:

Appreciating that many advantages could be obtained by shortening the Assemblies in alternate years;

1. REQUESTS the Director-General, within the provisions of Article 73 of the Constitution, to transmit this resolution, as well as the text of the proposed constitutional amendments, to Member States for their consideration.
2. URGES Member States to give careful attention over the coming year to the necessary constitutional changes as set out in the Director-General's report;²
3. REQUESTS the regional committees to consider the implications for their work of biennial Health Assemblies and report these to the Executive Board at its sixty-seventh session;
4. REQUESTS the Executive Board to examine the consequences of the introduction of biennial Health Assemblies for the work and functioning of all bodies of the Organization in particular, the Executive Board and the regional committees, with the aim of strengthening these, and to make appropriate recommendations to the Thirty-fourth World Health Assembly;
5. RECOMMENDS that the Thirty-fourth World Health Assembly in 1981, under Articles 73 and 60 of the Constitution, and on the basis of recommendations and conclusions of the Executive Board consider amending the texts of Articles 13, 14, 15 and 16 of the Constitution in order to permit the change from annual to biennial Health Assemblies, and at the same time consider taking other decisions relating to the structure.
6. BELIEVES that, as soon as possible, in the meantime Assemblies in the even years (when there is not a full Programme Budget to consider) should be limited to not more than two weeks' duration.

¹ Documents A33/2 and EB65/1980/REC/1, Annexes 8-10.

² Document EB65/1980/REC/1, Annex 8.

³ Document EB65/1980/REC/2, pp. 173-188.



ANNEX 3

WHO'S STRUCTURE IN THE LIGHT OF ITS FUNCTIONS

The Regional Committee,

Recalling resolution WHA33.17, in particular operative paragraph 3,
and resolution WHA33.19, adopted by the Thirty-third World Health Assembly;

Having considered Part III of the report of the Sub-Committee on the
General Programme of Work;

1. NOTES some of the implications for its work of the decisions of the
World Health Assembly, including the possibility of biennial Health
Assemblies;
2. RESOLVES to make every endeavour, through its Sub-Committee on the
General Programme of Work and its Sub-Committee on Technical Cooperation
among Developing Countries, to intensify its role and continue to take an
active part in the work of the Organization;
3. REQUESTS the Regional Director to support it to that end by monitoring
the implementation of relevant sections of the plan of action presented to
the current session and by drawing up for its consideration further
proposed regional plans of action as necessary.