



PAN AMERICAN HEALTH ORGANIZATION
WORLD HEALTH ORGANIZATION



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FINAL REPORT SPECIAL SESSION OF THE 152nd SESSION OF THE EXECUTIVE COMMITTEE

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**FINAL REPORT
SPECIAL SESSION OF THE 152nd SESSION
OF THE EXECUTIVE COMMITTEE**

Opening of the Session

1. The Executive Committee held a special meeting on 29 April 2013 pursuant to a request by the Subcommittee on Program, Budget, and Administration and in accordance with Article 17(a) of the PAHO Constitution. Representatives of all nine members of the Committee (Brazil, Canada, Chile, El Salvador, Grenada, Jamaica, Paraguay, Peru, and United States of America) participated in the meeting, as did representatives of the following other Member States and Associate Members: Argentina, Aruba, Bahamas, Barbados, Colombia, Cuba, Curaçao, Guatemala, Mexico, Nicaragua, Panama, and Sint Maarten. Dr. Mohamed Abdi Jama (Assistant Director-General for General Management, WHO) participated on behalf of the WHO Secretariat. Some participants attended the meeting in person at PAHO Headquarters in Washington, D.C., while others took part via telephone or web conferencing software.

2. Dr. Víctor Raúl Cuba Oré (Peru, President of the Executive Committee) opened the meeting and welcomed the participants, noting that the main purpose of the meeting was to discuss the allocation of funds by WHO to the Region of the Americas.

3. The Director added her welcome to participants. She observed that the meeting was being held just before the Sixty-sixth World Health Assembly, at which the WHO program budget for 2014-2015 would be discussed. The program budget proposal to be presented to the Health Assembly reflected earlier discussions by Member States during and after meetings of the WHO Programme, Budget and Administration Committee and Executive Board. A great deal of work had gone into the preparation of the proposal, which was an important consideration to be borne in mind in the course of the Committee's discussions. An equally important consideration, however, was the strongly held view among PAHO Member States that there must be equity in the allocation of the Region's portion of the WHO budget. She noted that the Director-General of WHO had asked her to make it clear to the Committee that she was fully committed to putting in place a mechanism to ensure transparency with regard to budget allocations among the WHO regions.

Procedural Matters

Adoption of the Agenda

4. The Committee adopted the proposed agenda contained in Document CE152/SS/1.

Program Policy Matters

Allocation of Funds by WHO to the Region of the Americas (Document CE152/SS/2)

5. Dr. Matías Villatoro (El Salvador, President of the Seventh Session of the Subcommittee on Program, Budget, and Administration) recalled that during the Subcommittee's consideration of the draft proposed program and budget at its Seventh Session in March 2013 (see Document SPBA7/FR, paragraphs 26 to 36), the Delegate of Mexico had presented data on the historic trend of WHO funding for the Region of the Americas (AMRO). The Bureau had been requested to validate the data. Subsequently, in his capacity as President of the Subcommittee, he had requested the Bureau to convene a special virtual meeting of the Subcommittee in order to discuss the data presented by Mexico and to provide additional guidance to assist Member States in preparing for the World Health Assembly in May 2013.

6. The special meeting had been held on 17 April 2013.¹ The Subcommittee had examined a document prepared by the Bureau (Document SPBA7/SS/2), which presented an overview of the legal framework and budgetary considerations that distinguished PAHO from WHO, as well as a comparison of the amounts budgeted by WHO for the Region of the Americas and the amounts actually received by the Region in the previous three bienniums. The Subcommittee had also heard a presentation by the Delegate of Mexico and had examined a document prepared by the Government of Mexico (Document SPBA7/SS/3), which contained a proposed declaration by Member States of the Americas regarding the allocation of funds by WHO to the Region. The proposed declaration requested the WHO Secretariat to guarantee full funding of the Region's allocation of the WHO budget for 2014-2015 and to review regional budget allocation criteria.

7. The Subcommittee had expressed concern about the decline in the Region's share of the WHO budget and had called for a more transparent and equitable approach to resource allocation among the WHO regions. The fact that the Region routinely failed to receive its full allocation from the WHO budget had also been seen as cause for serious concern. It had been considered essential to bring the matter to the attention of the World Health Assembly and had been deemed timely to do so during the Health Assembly's Sixty-sixth session in May, in the context of the discussion of WHO reform, the Twelfth General Programme of Work of WHO, and the WHO program budget for 2014-2015.

8. The Subcommittee had therefore recommended that the Executive Committee hold a special meeting prior to the formal opening of its 152nd Session so that the Committee might adopt a resolution on the matter, to be transmitted to the WHO Programme, Budget and Administration Committee. It had also recommended that the

¹ The final report of the meeting appears in Annex D of Document SPBA7/FR.

matter should be discussed by the Group of the Americas (GRUA), which would meet prior to the World Health Assembly, and that a statement should be made on behalf of the Americas during the Assembly.

9. Ms. Verónica Ortíz (Advisor, Program and Budget, PASB) introduced Document CE152/SS/2, highlighting several important considerations in relation to the allocation of funds by WHO to the Region of the Americas. One was that, in addition to serving as the Regional Office of WHO for the Americas, PAHO was an independent international organization, which meant that its Governing Bodies, not the World Health Assembly, approved its budgets and its Member States paid assessed contributions to PAHO as well as to WHO. It also meant that PAHO received assessed contributions both directly and through its share of the WHO budget. The same was true of voluntary contributions. Another important consideration was that PAHO voluntary contributions (i.e., funds mobilized by PAHO as an independent organization) could not legally be accounted for as voluntary contributions within the Region's share WHO voluntary contributions.

10. Summarizing the figures shown in Table 1 in Document CE152/SS/2, she noted that while PAHO had received virtually all of its regular budget allocation from the WHO budget in 2010-2011, it had received only 25% of its budgeted share of WHO voluntary contributions. As of 31 December 2012 it had received about \$30 million of the Region's budgeted share of over \$80 million of WHO voluntary contributions for the current biennium. Figure 1 in the document, which showed the trend of budgeted and received funds over three bienniums, revealed a consistent pattern of underfunding of the WHO voluntary contributions for the Region, with PAHO receiving only around 30% of its budgeted share.

11. A comparison of amounts received versus amounts budgeted (including both regular budget funds and voluntary contributions) for all WHO regions in 2010-2011 revealed that the Americas had received the lowest proportion of expected funding from WHO (49%, as compared with 57% for the African Region, 62% for the South-East Asia Region, 79% for the European Region, 59% for the Eastern Mediterranean Region, and 83% for the Western Pacific Region). The Region had also been allocated the lowest proportion of the WHO budget for base programs: 6.1% in 2012-2013, although the strategic resource allocation validation mechanism approved in 2006² called for the Region to receive between 6.3% and 7.7%. For 2014-2015, the Region's projected share of the total WHO budget would be 4.4%, while its share of the WHO budget for base programs would be 5.4%. While the Bureau expected the Region's regular budget allocation from WHO to remain the same as in the previous two bienniums (\$80.7 million), regular budget allocations had not yet been established. The WHO strategic resource allocation validation mechanism had been abandoned and would not

² See WHO Documents EB118/7 and EBSS-EB118/2006/REC/1.

apply to the 2014-2015 budget. It was not known why it had been discarded or when it might be replaced by a new validation mechanism.

12. The Executive Committee was invited to consider the proposed resolution contained in the annex to Document CE152/SS/2, which included a proposed statement by the Member States of the Americas to be presented to the Eighteenth meeting of the WHO Programme, Budget and Administration Committee and to the Sixty-sixth World Health Assembly.

13. The Committee expressed strong concern about the Region's dwindling share of the WHO budget, noting that not only was that share below the percentage envisaged under the strategic resource allocation validation mechanism approved in 2006, but that the amounts received were routinely less than the amounts allocated. The fact that the Region was receiving significantly less, both in absolute and proportional terms, than other WHO regions was also a source of concern. Delegates noted that the voluntary contribution portion of the budget, in particular, was underfunded and that the Americas' portion was funded at a far lower level than that of other regions. An explanation was sought from the WHO Secretariat as to the rationale for that discrepancy. Delegates also wished to know why the 2006 resource allocation mechanism had not been applied and what criteria that had been used in its place to determine allocations to the various regions under the 2014-2015 budget. It was stressed that any new resource allocation method that might be devised to replace the 2006 mechanism must be fair, equitable, and transparent, and must ensure accountability. It was also emphasized that the heterogeneity and asymmetries existing in the Americas must be taken into account in setting the Region's allocation.

14. Several delegates pointed out that the lack of certainty and predictability in funding of the WHO portion of the Region's budget could make it difficult to ensure adequate attention to priorities such as noncommunicable diseases and social determinants of health. Several delegates inquired what impact the reductions and funding shortfalls in the WHO portion of the budget had had on PAHO's fulfillment of its responsibilities vis-à-vis WHO and on the Region's achievement of the strategic objectives and Organization-wide expected results established under the WHO Medium-term Strategic Plan. In order to present a strong case for increased WHO funding for the Region, it was considered essential to supply hard data demonstrating the impact of the funding gap. It was also considered necessary to "sell" PAHO as a nimble, efficient, results-oriented organization.

15. Ms. Ortiz affirmed that the Region's share of the WHO budget for 2012-2013 had amounted to 6.1%, which was indeed below the range of 6.3% to 7.7% provided under the 2006 resource allocation mechanism; moreover, the percentage actually received had been lower than that. In 2010-2011, the Region had been allocated \$245 million, but had received only about half that amount: \$121 million. The funding gap had certainly had an

impact on the Bureau's ability to deliver technical cooperation, and there had been a fairly direct relationship between the percentage of funding received and the extent to which expected results had been achieved.

16. Dr. Amalia del Riego (Senior Advisor, Planning and Resource Coordination, PASB) added that, in day-to-day operations, gaps in funding from one source were covered with funds available from other sources, and it was therefore not possible to identify specific areas that had been impacted by failure to receive expected funding from WHO. However, the impact on the Organization's overall budget was evident, as Ms. Ortíz's presentation had shown.

17. The Director said that it was her understanding that the discrepancies in allocation of voluntary contributions among regions had to do with the fact that voluntary funding mobilized by other regions was accounted for in the voluntary contribution component of the WHO budget, whereas voluntary funding mobilized by PAHO was not. Senior officials at the WHO Secretariat had expressed the view that a portion of PAHO voluntary contributions should be counted as part of the Region's share of WHO voluntary contributions. She agreed that transparent criteria for allocating the budget among regions were needed. However, given that WHO did not receive all of the voluntary funding for which it had budgeted, in her view it was also necessary to establish clear guidelines for determining what percentage of available voluntary contributions would go to each Region.

18. As the Committee contemplated what action to take on the matter, she encouraged Member States to bear in mind that the development of a budget was a lengthy and complex process. If Member States from the Americas were to insist that the 2006 strategic resource allocation mechanism be applied to the proposed WHO program budget for 2014-2015, the budget proposal would have to be reworked, which would doubtless cause delays during the May 2013 World Health Assembly. She would therefore suggest that Member States simply call for the development of a clear, equitable, and transparent validation mechanism to be applied to future budgets.

19. Dr. Mohamed Abdi Jama (Assistant Director-General for General Management, WHO), speaking via telephone from WHO Headquarters, explained that the strategic resource allocation validation mechanism approved in 2006 had been a time-limited measure set to expire in 2013. A replacement mechanism had not yet been devised, but options were being discussed as part of the WHO reform agenda by a task force led by the Regional Director for Europe and the Deputy Director-General of WHO; the matter would be opened for discussion by Member States in the next few months. In the meantime, the Director-General had suggested that resources should follow functions—meaning that resources should go to the level or part of the Organization where particular functions were being carried out. That idea had informed the proposed allocation of the

2014-2015 budget. The main criterion applied in determining allocations had been expenditures as of December 2012.

20. Regarding the reasons why the Americas appeared to receive a lesser amount of WHO voluntary contributions than other regions, he explained that the amounts allocated to other regions comprised funds raised by the Region itself and voluntary contributions channeled through the WHO Secretariat. In all regions except the African Region, funding raised in the Region accounted for more than half of that Region's allocation of voluntary contributions and could account for up to 80%. The Region of the Americas was the only Region in which voluntary funding mobilized at the regional level was not counted as part of the Region's share of WHO voluntary contributions. He underlined that the Americas did, however, receive the same percentage as all other regions—except Africa—of the voluntary contributions channeled through the WHO Secretariat. That percentage ranged from 20% to 30%.

21. In response to Dr. Jama's remarks, a delegate pointed out that the document setting out the strategic resource allocation validation mechanism did not appear to specify any time limit on its application and asked for clarification of the expiration date mentioned by Dr. Jama. Another delegate sought confirmation that when Member States collectively approved the WHO budget, PAHO's budget as an independent organization was not taken into account in determining the amount to be allocated to the Region of the Americas. If that was the case, she wondered why that amount had been steadily declining.

22. Dr. Jama confirmed that the WHO budget reflected only voluntary contributions generated through WHO Headquarters. It did not show any such contributions generated at the regional level in the Americas. He reiterated that for all the other regions except Africa the voluntary contribution component of their budgets comprised voluntary funding mobilized by the Region itself, complemented by voluntary contributions channeled through WHO Headquarters.

23. Several delegates expressed the view that the underfunding of the Region's voluntary contribution allocation had not been adequately explained. It was pointed out that for the past several bienniums the Americas had received less than 50% of its allocation, whereas other regions had received as much as 80%, and it was emphasized that the lack of predictability in WHO funding made it difficult for PAHO to develop and carry out its budgets and to evaluate the results achieved. In relation to Dr. Jama's comment that the 2014-2015 budget proposal had been drawn up on the basis of expenditures in the previous biennium, clarification was sought of whether expenditure levels had been appraised against amounts allocated or amounts actually received. It was emphasized that expenditures should not be the only factor considered in budget allocation.

24. Regarding the 2006 resource allocation mechanism, several delegates expressed the view that unless there had been an explicit written agreement by Member States to cease its application, the mechanism should continue to be used until a new mechanism had been approved. It was stressed that Member States must be involved in developing the new mechanism. The need for clear allocation criteria in order to ensure transparency and accountability was reaffirmed.

25. The proposed resolution and declaration contained in Document CE152/SS/2 were discussed at length and the declaration was revised extensively to reflect the points raised in the discussion and to strengthen the language and render it more concise. Paragraphs 2, 4, and 5 were removed altogether, either because their content was considered redundant or subjective in nature or because it appeared to be based on assumptions, not fact. It was pointed out that paragraphs 4 and 5, for example, referred to arguments that might be debated or rejected, but did not offer any evidence that such arguments had, in fact, been advanced. In relation to paragraph 5, it was emphasized that the point to be made was that PAHO was committed to transparency and accountability in its strategic planning and budgeting and that Member States expected the same transparency and accountability from WHO.

26. Subparagraphs 6(b) and 6(c) of the original proposed declaration (which became subparagraphs 5(b) and 5(c) in the amended declaration) were shortened considerably and the wording revised to call on the WHO Secretariat to make known the criteria by which budgets were allocated and resources distributed among WHO Headquarters and the regional offices and to underline the need to involve Member States in developing a new strategic resource allocation model.

27. The Committee adopted Resolution CE152.SS.R1 and requested that it be transmitted to the Eighteenth Meeting of the WHO Program, Budget and Administration Committee and to the Sixty-sixth World Health Assembly.

Closure of the Session

28. Following the customary exchange of courtesies, the President declared the Special Session of the 152nd Session of the Executive Committee closed.

Resolutions

29. The following is the resolution adopted by the Executive Committee in the course of the 152nd Special Session.

Resolution

CE152/22.R1 ***Allocation of Funds by WHO to the Region of the Americas***

THE SPECIAL SESSION OF THE 152nd SESSION OF THE EXECUTIVE COMMITTEE,

Having considered the background document *Allocation of Funds by WHO to the Region of the Americas* (Document CE152/SS/2);

Mindful of the fact that the Directing Council of the Pan American Health Organization (PAHO) does not meet until September 2013 and that input is urgently needed for the Sixty-sixth World Health Assembly of May 2013;

Noting the need for an open and interactive discussion of the allocation of budget envelopes and resources at both global and regional levels, and

Considering the complex health challenges we face going forward and the need to work responsibly and with common strategies that promote solidarity among the regions,

RESOLVES:

To request that the following statement be presented to the Eighteenth Meeting of the WHO Programme, Budget and Administration Committee of the Executive Board (PBAC) and to the Sixty-sixth World Health Assembly.

STATEMENT BY THE MEMBER STATES OF THE AMERICAS REGARDING WHO BUDGETARY ALLOCATIONS TO THE REGION OF THE AMERICAS

1. For several biennia the Member States of the Region of the Americas have noted a continuous reduction in the allocation of both budget envelopes and financial resources to the Region of the Americas by the World Health Organization (WHO). Concern was expressed at the Sixty-fourth World Health Assembly in 2011 through a Manifesto presented by the Member States of the Americas advocating for a fair share of budget allocation to the Region. The concern was not heeded. The Regional Office of WHO for the Americas (AMRO) is consistently funded under 50% of the budgeted voluntary contributions.

2. For the 2014-2015 biennium, the WHO Secretariat has proposed a base program budget envelope of 5.4%¹ for AMRO. While the Secretariat has declared in the *Proposed Programme Budget 2014-2015*² that the Strategic Resource Allocation (SRA) mechanism approved in 2006³ is not being used, it is nonetheless worth remembering that this model—an objective means for budget allocation based on needs-based criteria—recommended a budget allocation to AMRO of 6.3% to 7.7%. The lack of information on the criteria used to allocate resources for the 2014-2015 biennium is a shared concern of the Member States of the Americas. Therefore, until a new means for global budget allocation is agreed by the Executive Board, the SRA mechanism is the best objective basis for discussion.
3. PAHO is committed to transparency and accountability, and presents its Strategic Plan and Program and Budget to its Governing Bodies and publishes them on its web pages.
4. The Region of the Americas acknowledges that WHO endeavors to present a realistic budget that reflects the functions of all levels of WHO and the health priorities of the countries. However, the Region of the Americas expresses its concern that the implementation of past budgets should not be the only factor considered in budget allocation, given that the allocated resources were never fully provided to the Region.
5. Guided by a clear commitment to transparency and accountability, the Member States of the Americas hereby request that the Programme, Budget and Administration Committee of the Executive Board and the World Health Assembly agree to provide the following directions to the WHO Secretariat:
 - (a) That while it is acknowledged that allocation of 4.4% of WHO's 2014-2015 total budget to AMRO is less than optimal, such an allocation is acceptable for this biennium only, on the condition that actual funding to fill this envelope includes 100% funding of the assessed contribution portion and, if feasible, at least 75% funding of the voluntary contribution portion, on the principle of equitable treatment for all regions.
 - (b) The Region of the Americas requests that the Secretariat provide the criteria by which budgets are allocated and resources are distributed to WHO Headquarters and the regional offices.

¹ This figure (5.4%) corresponds to the WHO base program budget envelope for AMRO (not including the Outbreak and Crisis Response [OCR] funds which are conditional on the occurrence of an outbreak or crisis). The WHO total budget allocation for AMRO (including the OCR funds) is 4.4%.

² WHA Document A66/7 of WHO's Sixty-sixth World Health Assembly.

³ WHO Document EB118/7.1 of WHO's 118th Executive Board

- (c) The WHO Secretariat should work with Member States with regard to a process for a new strategic allocation model for WHO resources starting with the 2016-2017 biennium.

(Adopted at the Single Plenary, 29 April 2013)

AGENDA

1. OPENING OF THE SESSION

2. PROCEDURAL MATTERS

2.1 Adoption of the Agenda

3. PROGRAM POLICY MATTERS

3.1 Allocation of Funds by WHO to the Region of the Americas

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LIST OF DOCUMENTS

Working Documents

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Agenda

CE152/SS/2

Allocation of Funds by WHO to the Region
of the Americas

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