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Dr Tedros Adhanom Ghebreyesus, WHO Director-General, visited northwest Syria with Regional Director Dr Ahmed Al-Mandari and Dr Iman Shankiti, WHO Representative a.i. in Syrian Arab Republic, after the earthquake in February.

Transforming WHO for greater impact in countries

Dr Tedros Adhanom Ghebreyesus, WHO Director-General

WHO is only as strong as our country offices. A critical part of WHO's transformation, as we celebrate our 75th anniversary, is making sure that our country offices are better positioned to support the countries and communities they serve.

In February 2023, the regional directors and I issued a 100-day challenge for country office empowerment. This work, which has been led by WHO Representatives (WRs) from each region through the Action for Results Group, builds on the recommendations of the Global Management Meetings, which brought heads of country offices and senior management from headquarters and regional offices together in Geneva this past December, and in Nairobi, Kenya, before then.

Strong country offices start with an empowered WR who leads WHO's work at the country level, on behalf of the Director-General and the Regional Director. I have allocated US\$ 100 million to immediately fund the gaps in terms of core positions required in each of our country offices around the world.

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WHO TRANSFORMATION

The WR must be a leader and not a messenger. To ensure this, the new global delegation of authority has been developed, which has been signed by myself, and by the Regional Director for the Eastern Mediterranean Region and by other regional directors.

We are on track to complete the targets set for the first 100 days by 23 June 2023 under each of the priority areas in the comprehensive action plan:

- Strengthened and financed core predictable WHO country presence
- Delegation of authority to WHO representatives
- Improved human resources management
- Streamlined planning and programme management
- Global mobility
- End-to-end procurement and business processes
- Expanded participation for staff in decision-making and improved and more open communication for staff across all levels of the Organization

A new description of the type of predictable presence WHO needs in each country office has been developed as a key pillar of our efforts to strengthen our work in countries. Half of the country office in the Eastern Mediterranean Region fall into the category requiring the most extensive support. I am pleased to see the progress made so far within the Region, especially in the face of so many competing challenges.

Empowering our staff and country offices, and better integrating them with our Regional Offices and headquarters, will make a significant difference in our progress towards the triple billion targets and the 2030 Sustainable Development Goals. Together, we will strengthen WHO's ability to deliver health for all from the ground up.

Components of the Action Plan by the Action for Results Group





A new delegation of authority signed by the Regional Director

Within the framework of the Action for Results Group, Dr Ahmed Al-Mandhari, WHO Regional Director for the Eastern Mediterranean, has joined Dr Tedros Adhanom Ghebreyesus, WHO Director-General, in signing a new delegation of authority (DoA).

The DoA aims to harness the capacity of the three levels of the Organization in support of country offices. It empowers WHO Representatives to become responsible for implementing and managing the resources entrusted to them in country offices and adhering to organizational rules and regulations, policies and operating procedures. The DoA covers areas of work such as programme management, financial management, procurement, human resources management, duty travel, resource mobilization, donor agreements and delegation.



The Director-General and I have jointly signed the new DoA for WRs. For many colleagues, a long-time request for more decentralized authority is finally being addressed; other colleagues are concerned about the risks involved. I call on all to work together with the highest level of compliance, accountability, trust and transparency. We need to work on providing the enabling functions at country offices, particularly for those dealing with emergencies, address the risks through well-executed mitigation plans and work on developing our supporting systems at the Regional Office.



Dr Ahmed Al-Mandhari
WHO Regional Director for the Eastern Mediterranean

Recruitment and consultant hiring offers room for collaborative improvement

Staff recruitment and consultant hiring are taking longer than agreed, revealed the assessment shared by the WHO Representatives' working group on these areas. Initially, the working group's agreement with Business Operation Services was that the process would not exceed 105 days for staff recruitment and 32 days for consultant hiring. After monitoring both processes from September 2022 until the end of 2022 in six countries in the Region and two departments at the Regional Office, who took part voluntarily, it was revealed that on average, staff recruitment took 183 days and consultant hiring took 48 days.

On staff recruitment, several actions are being implemented. This includes the launching of a capacity-building workshop for human resources staff in the Region and the formulation of guidelines and standard operating procedures for all country office managers. In addition, generic post descriptions will be generated to avoid delays, with core predictable country presence positions being a priority.

Meanwhile, for consultant hiring, additional administrative training sessions will be conducted in country offices to ensure

all procedures and documentation are carried out in accordance with the guidelines. Additionally, the launching of the Business Management System in 2024 will incorporate a streamlined process to expedite recruitment.

The question of how to further monitor progress on these processes remains. Some milestones already exist within the human resources key performance indicators; which, while not allowing full process monitoring, do capture some of the key milestones. These are, however, currently suspended because the related data are not being collected systematically. This issue is being looked at.

Spearheaded by the Director-General, an outcome of the 11th Global Management Meeting in December 2022 was the formulation of an Action for Results Group (ARG), which includes six WHO Representatives from all regions. The ARG's objective is to oversee implementation of the recommendations of the 11th Global Management Meeting and fast-track transformation. The ARG has set a target to reduce the benchmark of staff recruitment to 80 days by May 2024, which provides impetus for the Region to make the necessary improvements.



The Regional Country Functional Review (RCFR) Committee resumes

In May 2023, the RCFR Committee for the Eastern Mediterranean met for the first time after a long hiatus. Its mandate has been amended and its composition restructured to be fit-for-purpose for its tasks ahead.

The RCFR Committee's role includes reviewing the implementation status of recommendations from RCFRs and providing guidance on methodologies to conduct reviews in an agile and integrated manner. In addition, the Committee reviews requests for any regional and country functional reviews based on standardized submissions and justifications and provides recommendations to the Regional Director for decisions and approvals related to RCFR recommendations.



The CFR Iraq in action.

Fit-for-purpose in a rapidly changing environment

In the Region, intensive baseline country functional reviews (CFRs) were conducted four years ago; of a total of 1047 recommendations, most (900) have been addressed, while others have become outdated or lost relevance. Only 55 are still in the process of implementation.

However, rapid and substantive changes in re-prioritized strategies, needs and demands ('purpose') in the contextual environment of many countries in the Region, caused, for example, by emergencies, call for a more agile approach to allow CFRs to assess and provide recommendations for improvement ('fitness') more rapidly and cost-efficiently. The next generation of CFRs will be better linked to other routine processes, such as compliance and risk management, audits and administrative reviews, technical country missions, desk reviews and targeted country missions only if needed. If found suitable, this new concept of integrated CFRs (iCFRs) should contribute to more systematic and continuous quality improvement cycles for sustained fitness-for-purpose within changing environments.



Families waiting to receive health care services in the WHO-supported primary health care centre serving internally displaced persons in Anbar governorate in Iraq.

CFRs and core predictable country presence

Once agreed and decided on, the new core predictable country presence, one of the major components of the 100-day challenge launched by the Director-General following the recommendations of the 11th Global Management Meeting in December 2022, and its implementation in country offices in the Region, will need to be considered in the assessment and recommendations of future CFRs.



Fitness-for-purpose should become a continuous process of quality improvement cycles.

Laleh Najafzadeh

Country Cooperation Unit technical officer,
WHO Regional Office for the Eastern Mediterranean



The recent CFR in Iraq (March 2023), addressing in a targeted way the transition from a focus on humanitarian emergency response to one on long-term recovery, resilience and development strategies, resulting in priority-setting shifts based on the humanitarian-development nexus approach is an innovation in this regard. The Region will be the first to demonstrate the methodological approach and complementarity of a combined CFR and core predictable country presence assessment at country level. The report of the Iraq CFR, which will soon be reviewed by the RCFR Committee, will therefore serve as an important best practice example for WHO.



The targeted approach of the new CFR in Iraq was very useful for us at the country office. We are proud to contribute to innovations in the Eastern Mediterranean Region and beyond: combining CFR and core predictable country presence together – that's the way forward.

Dr Ahmed Zouiten

WHO Representative, Iraq



Investing in team building: Introducing the SDGs Focal Persons Network

WHO's lead role in the joint UN implementation of the health-related SDGs is supported by the SDGs Focal Persons Network. The Network supports the planning and implementation of action on the health-related SDGs through supporting government multisectoral and multi-departmental coordination platforms, and engagement in the country cooperation frameworks, for example the United Nations Sustainable Development Cooperation Frameworks (UNSDCFs) under the umbrella of the United Nations Country Teams (UNCTs). The team building meeting for the Network took place in February 2023 to enhance collaboration and strengthen capacities.



This is the first time that a peer group to support progress on the health-related SDGs has been instituted and the Network is constituted of country officers from diverse backgrounds and with a variety of responsibilities. Building the capacity of a multidisciplinary team ensures a comprehensive approach to providing support and coordinating at the country level. The formation of the network is one of the transformative actions that will coordinate joint actions towards the goal of being fit-for-purpose.



Dr Jamal Nasher, SDGs and Gender, Equity and Rights Coordinator at WHO's Regional Office for the Eastern Mediterranean, says the Network enables a pooling and sharing of expertise, experiences and best practices and supports a strong reflection of the themes of health-in-all-policies, determinants of health and health equity approaches within the UNSDCFs. Network members are thereby able to enhance country offices and WHO's leadership role.



An important aspect of the Network's role is to capacitate other staff on the health-related SDGs, enabling harmonious action with UN Country Teams, and to position health within governmental multisectoral and multi-departmental platforms. The diverse technical backgrounds and expertise of the focal persons, including in advocacy, capacity-building and networking, enhances their role in the planning, implementation and evaluation of action on the health-related SDGs.

Since the impact on health outcomes is determined by factors beyond the health sector, Dr Maha Adawy, Director of the Department for Healthier Populations at the Regional Office, emphasizes the role of the SDGs focal persons in supporting the coordination of multisectoral action.

Dr Arash Rashidian, the Director of the Department of Science, Information and Dissemination at the Regional Office, highlights the contribution of the Network in addressing challenges for progress on the health-related SDGs at the country level in areas such as ensuring data reliability, informing policy-making processes and outlining the way forward.



"The SDGs Focal Persons Network increases awareness on countries' best practices and challenges and realigns the country focus."



Dr Jamal Nasher

SDGs and Gender, Equity and Rights Coordinator at WHO's Regional Office for the Eastern Mediterranean

Quotes from colleagues who attended the SDGs Focal Persons Network meeting (February 2023):



Engaging with government sectors beyond the Ministry of Health is critical. A channel of communication has been opened with other sectors in Iraq to ensure effective engagement.

Dr Aamr Bebany

Health Systems Lead in the WHO Country Office in Iraq



Strengthening collaboration for sustainable development, complemented by effective multistakeholder partnerships that mobilize collective action, knowledge and expertise sharing, is an essential paradigm for achieving the SDG agenda.

Dr Nada Mohamed

Lead Public Health Consultant in the WHO Country Office in Bahrain



Achieving the SDGs is a multisectoral issue and needs more collaboration and strong coordination mechanisms at different levels. As SDGs focal persons, we have an important role to play in this regard, within the country office, with the governments and with the UN country team.

Dr Hiba Hussein

Reproductive, Maternal, Newborn, Child and Adolescent Health consultant in the WHO Country Office in Sudan



To maintain a futuristic goal, we need to anchor health in all humanitarian and development programmes.

Dr Hala Khudari

WHO Health Emergencies Programme Team Lead in the WHO Country Office in Libya



The role of SDG focal points is of paramount importance and includes facilitation and coordination both within the office and with other stakeholders.

Dr Abdelghani Ibrahimi

National Professional Officer for Health System Strengthening in the WHO Country Office in Afghanistan



Team building is important to become fit-for-purpose: positioning WHO as the lead for joint UN implementation of the health-related SDGs in support to governments.

Dr Christoph Hamelmann

Chef de Cabinet, WHO Regional Office for the Eastern Mediterranean



It's important for country offices to understand the role of the SDGs focal person in becoming fit for the implementation of health-related SDGs, and all of the UN should deliver as one UN on the 2030 SDGs.

Dr Alaa Hashish

Public Health Specialist, Oman



Strengthening data collection is key for country impact

Health data collection remains one of the top challenges in the Region and, rather than burdening countries by pushing them for data collection, WHO should provide support to their data gathering programmes, according to Dr Arash Rashidian, Director of the Regional Office’s Department of Science, Information and Dissemination (SID). This support can include fostering and promoting innovation in filling data gaps.

Dr Rashidian cites the landmark resolution of the 66th session of the WHO Regional Committee for the Eastern Mediterranean in 2019 to enhance national institutional capacity for evidence-informed policy. He also notes that enhancing good-quality data is one of the outcomes identified in WHO’s Thirteenth General Programme of Work.

In growing recognition of the importance of evidence-based decision-making for better health outcomes, the WHO Regional Office has launched various initiatives. These include the establishment of a new team for Evidence and Data to Policy within the SID Department and the development of a regional action plan for the implementation of the framework for action to improve national institutional capacity for the use of evidence in health policy-making in the Eastern Mediterranean Region (2020–2024). To foster national institutional capacities and the incorporation of evidence into health policy-making, a set of tools and resources have been developed, including web-based evidence-informed policy-making training packages.

These initiatives will help to ensure that health data are reliable and accessible and are used to improve health outcomes in the Region, including by tracking and accelerating progress towards the triple billion targets and the health-related SDGs. WHO aims to play a leading and coordinating role in the improvement of data collection to support sustainable development.



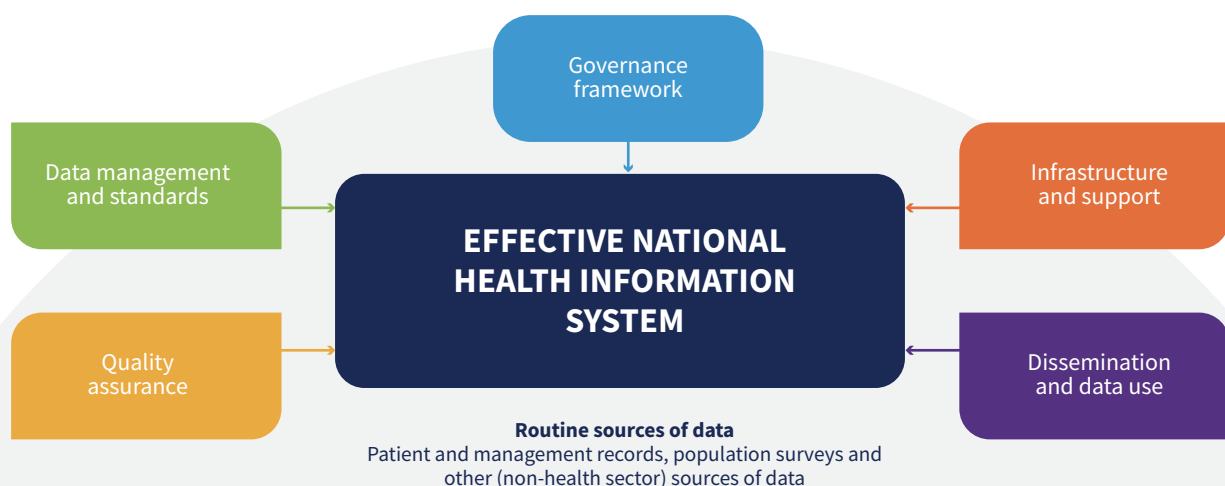
Dr Arash Rashidian
Director of the Department of Science, Information and Dissemination at the WHO Regional Office for the Eastern Mediterranean

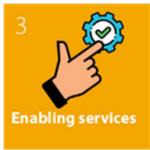
However, despite progress in some areas, Dr Rashidian points to a lack of available data as a major impediment to progress on the SDGs in the Region. He highlights five key challenges: weak governance; fragmented health care services; limited data availability from Member States; the impact of emergencies and fragile and humanitarian settings; and gender inequality and health disparities.

Weak governance leads to a lack of investment in health, and fragmented health care services result in a suboptimal health workforce and limited geographical coverage. A lack of plans for the implementation of national surveys to better inform evidence-based policies is a hindrance to securing the needed data. Population health in fragile and emergency settings is impacted by limited access to water and sanitation and the interruption of health service delivery. Gender and health inequities, converging with structural and sociocultural barriers, increase the risk of violence towards women and negatively affects their decision-making power about their health.

“A lack of reliable data affects and shapes the efficiency of country policies and WHO’s capacity to monitor progress”, he says. “Further attention should also be given to the use of reliable data in decision-making, and in monitoring progress towards improving health outcomes and reducing inequalities.” Inaccurate country data impacts the implementation of appropriate health policies.

To ensure progress on the health-related SDGs, Dr Rashidian emphasizes strengthening government leadership, expanding access to health services, promoting intersectoral collaboration, investing in health information systems and ensuring a gender and equity-sensitive response.





Building a culture of trust and mutual support to manage risks

The WHO's shift to being risk-aware rather than risk-averse continues to progress in the Eastern Mediterranean Region. Amarnath Das, Regional Compliance and Risk Management (CRM) Manager, explains that the shift in the overall landscape is being enabled by strong leadership and staff commitment.



Rather than being perceived as a policing role, CRM is now considered a supporting department.

Amarnath Das



Within the context of the Eastern Mediterranean Region's multiple emergencies, transparency has been crucial when responding to Member State needs and fulfilling donor obligations. Compliance and risk management has been integrated into most operations through a bottom-up approach to identifying principal risks. Essential actions relating to compliance and risk management being rolled out in the Region include the global risk assessment tool for preventing sexual exploitation, abuse and harassment (PRSEAH) and the anti-fraud and anti-corruption policy. Reflecting on the cultural transformation over the years, CRM Officer Meriana Zaki says that "the Organizational culture has transformed into accepting compliance as the norm".

Meanwhile, CRM Officer Ahmad Nazar emphasizes the additional factors that have promoted this cultural transformation. These include supportive leadership, staff engagement, technological advancements and intensified three-level collaboration. The introduction of interactive tools and dashboards has helped to closely monitor compliance across all budget centres. Collectively, these elements have paved the way for a results-based approach within the Organization.



If WHO faces reputational damage due to non-compliance, it will not be a trusted leader in health.

Amarnath Das



Mr Das points to the importance of staff expertise in this area within country offices, supporting administrative reviews to address gaps. Furthermore, he explains that the Action for Results Group's core predictable country presence model, stemming from the 11th Global Management Meeting, recognizes the importance of more human resources for compliance and risk management. Country offices will greatly benefit from this.



Mr Amarnath Das, Regional CRM Manager, presents the compliance and risk management overview to country office staff in the Syrian Arab Republic in July 2019.



First respectful workplace training-of-trainers course held in the Eastern Mediterranean Region

A training-of-trainers course on a respectful workplace, the first of its kind across all WHO regions, was held in February 2023 for the Eastern Mediterranean Region. The training was part of the regional Respectful Workplace initiative that addresses diversity, equity and inclusion, and preventing sexual harassment and abuse. Participants from 17 countries in the Region and all departments of the Regional Office took part in the training.

In response to identified staff needs, the training focuses on areas such as microaggressions, setting healthy boundaries and improving email etiquette. The training aims to help create an environment that is respectful and motivated, fosters mutual support, collaboration and transparency, and focuses on country-level results. It encourages staff to embed and uphold WHO values at all levels to serve as the face of the Organization with professionalism, integrity and trustworthiness.

The course's modules will be adjusted in response to participant feedback obtained through a post-training survey, and tailored for departmental and country-office contexts. Future training will include ways to overcome procrastination and manage underperformance.

WHO Representatives and directors are invited to nominate a participant to join future training courses, provided certain criteria are met. Proposed participants should be suited to the role of facilitator and to becoming a catalyst for co-creating a respectful workplace environment in their spheres of influence within the Organization.



Participants of the respectful workplace training-of-trainers course, held on 20–22 February 2023 in Cairo, Egypt.



The training was organized and facilitated by the Human Resources and Talent Management team of the Business Operation Services department, the Staff Association, the Staff Counsellor and the Ombudsperson, with additional support from the transformation team.

The primary objective of the regional Respectful Workplace initiative is to embed and integrate respectful workplace components in all of the Organization's affairs.

Regional Transformation Roadmap

