

Evaluation of WHO's work with Collaborating Centres

Evaluation brief – May 2020

Context of the evaluation

WHO collaborating centres (CCs) have been in place since the founding of the Organization, with the first WHO CC having been designated in 1948. WHO CCs are a mechanism of cooperation in which relevant institutions are recognized by WHO as assisting the Organization in implementing its mandated work by: supporting the achievement of WHO's planned strategic objectives at the regional and global levels, including objectives related to the development and strengthening of national and regional institutional capacity; and enhancing the scientific validity of its global health work.

Objectives and scope of the evaluation

The last evaluation of WHO's work with CCs took place in 2007. The objective of the current evaluation was to examine the relevance, effectiveness, and efficiency of the programmatic contribution of CCs to the achievement of WHO objectives and expected results. The evaluation also documented successes, challenges and best practices, and provided lessons learned and recommendations for future use by management to inform policy and decision-making. It covered CCs that were active during the biennium 2018-2019.

Key findings and conclusions

Question 1: To what extent is the work carried out by the CCs aligned to the relevant General Programmes of Work and their outputs/outcomes?

Since the 2007 evaluation, there have been significant changes in WHO's approach to working with CCs, and considerable improvements in the efficiency and transparency of processes to designate and redesignate CCs. Changes have also brought about improved alignment of the work of CCs with WHO's priorities.

The majority of the work of CCs is relevant to the priorities expressed in WHO's GPW and Programme Budgets. The importance of the work of CCs and their contribution to WHO's priorities are well recognized within the Organization. There is also a good level of understanding among heads of CCs about how their work contributes to the delivery of WHO's priorities. However, a lack of strategic coordination of the work of CCs across the Organization limits the maximization

of their contribution to WHO's priorities. In addition, there are still several CCs that are inactive or no longer relevant to WHO's current work.

The current planning and designation/redesignation process through the electronic platform established for this purpose (i.e., eCC) provides several opportunities to identify clear and appropriate objectives, detail the relevance and alignment to WHO's priorities, match the entities to which CCs are linked, and ensure effective communication.

The engagement of all key stakeholders from the beginning of the approval process is crucial in ensuring alignment with WHO's priorities, timely approval as well as effective implementation, monitoring and evaluation of the work with CCs. The engagement of Technical Counterparts in the designation and redesignation process and in planning the work of CCs varies significantly, and their role is often not recognized or given due consideration.

There are several issues that need to be addressed in order to further improve efficiency and to make the designation and redesignation process through eCC more user-friendly, quicker and more transparent. Additionally, limited understanding of the needs and requirements of the FENSA due diligence process among CC staff and Responsible Officers make it difficult for them to understand the feedback that they receive on their proposal from the FENSA due diligence team.

Question 2: To what extent does the work of CCs contribute to the delivery of WHO's results?

CCs contribute to several critical areas and effectively support the delivery of WHO's mandate by: increasing WHO's access to high-quality technical and scientific expertise; strengthening research capabilities; delivering capacity strengthening; and policy development.

CCs particularly value the opportunity to contribute to the global and regional mandate of WHO. They also value the enhanced reputation that the designation brings to their institution and the opportunities to network with other CCs working in similar areas. However, there are a number of issues that need to be addressed to make the work of current and future CCs more effective.

The specific needs of CCs often depend on where they are located. CCs that are located in low- and middle-income countries often face challenges in terms of technical and financial resources.

Because regional offices and HQ have different functions, CCs linked to regional offices often focus on the provision of technical expertise and capacity strengthening, while those linked to HQ focus more on research and the development of guidelines or policies. It is therefore crucial that careful consideration be given to what types of CC can provide the services that best respond to the specific (and often divergent) needs of WHO HQ and WHO regional offices.

There are several key factors that affect the ability of CCs to work effectively and overcome the aforementioned challenges. These need to be considered in the development of any future approach to working with CCs. The most significant challenge faced by the CCs is a lack of resources. While this is particularly true for CCs from low- and middle-income countries, CCs in high-income countries often have to internally justify delivering work as a CC where there is no financial benefit to the wider institution.

Another key factor is that of strategic alignment between and among individual CCs. Networks of CCs working in the same or similar areas often adopt a collaborative and strategic approach to planning, thus helping to maximize the effectiveness of individual CCs.

Question 3: How efficiently did WHO manage its relations with collaborating centres?

The efficiency of WHO's work with CCs is mixed. WHO CCs bring important financial, technical and scientific resources to WHO. How efficiently these resources have been used is often contingent upon the presence of strategic planning processes that ensure the non-duplication of work.

WHO's investment in managing the work with CCs largely consists of the human resources required to coordinate this relationship, the cost of which is not easily quantified. However, rough estimates based on feedback from the head of CCs suggest that CCs contribute a substantial amount of financial, human, and administrative resources to support the implementation of the mandate and priorities of WHO.

One of the key issues hindering the efficiency with which WHO manages its relationship with CCs is the lack of awareness among WHO staff of the type of work delivered by CCs across the Organization.

There are administrative and management systems currently in place to support CCs and WHO staff in the designation/redesignation process, and in the planning

and delivery of CC activities. However, there is a need to make these systems more efficient and robust.

Question 4: What are the main lessons learned and the strategic recommendations for the way forward?

One overarching lesson emerging from the evaluation is that effective engagement with CCs can contribute significantly to WHO's results. Beyond this general level, having a strategic approach and strong leadership when working with CCs is important to ensuring the relevance of the work of CCs to WHO's priorities.

Discontinuing the designation of ineffective or inactive CCs is essential to reduce the potential reputational risks for WHO.

Timely and transparent communication between WHO and CCs is essential to ensure trust in the relationship and to maximize the impact of the work of CCs.

The use of a web-based platform such as eCC can improve transparency in planning and increase efficiency in decision-making. It can also facilitate alignment of CCs' work with WHO's priorities. However, the technology needs to be regularly assessed and updated in order to ensure its user-friendliness.

High-level recommendations

Recommendation 1: Develop, implement and disseminate a strategic framework for working with Collaborating Centres at global, regional and departmental level.

Recommendation 2: Promote awareness of Collaborating Centres and their contribution, both within WHO and with external audiences as appropriate.

Recommendation 3: Develop a communication plan for the Organization's relations with Collaborating Centres.

Recommendation 4: Use the forthcoming re-development of the Electronic Collaborating Centres as an opportunity to improve the effectiveness and efficiency of the online system.

Recommendation 5: Undertake a review of current staff support and management systems to identify areas for improvement.

Contacts

For further information please contact the evaluation office at the following address: evaluation@who.int
The evaluation report is available here: <https://www.who.int/publications/m/item/evaluation-of-who-s-work-with-collaborating-centres-volume-1-report>