

# Programme Budget 2022–23: Process and Approach

**Imre Hollo**

# Context

- Under ‘normal’ circumstances the Secretariat would now present a draft proposed PB document to the Regional Committees – based on thorough MS consultations at the country level and on a bottom-up planning process.
- Due to COVID-19 this was not possible.
- The delay has critical implications on process, timing and approach to PB development.
- Nevertheless, a draft PB will have to be ready by the 148<sup>th</sup> EB.

# Strategic Dilemma

PB 2022–23 is being prepared in historic times:

- There is a unique window of opportunity (and duty) to rethink strategic direction/WHO positioning to face COVID-19 challenges and avoid future pandemics.
- To entrench any changes as early as possible for greater and sustained impact, **BUT:**
- The ongoing IPPR evaluation will most likely be submitted to MS for approval at the 74<sup>th</sup> WHA in May 2021, the same time as the PB 22–23.
- **How to reflect needed changes without preempting conclusions of the IPPR evaluations?**

# Proposed Process

1. The Secretariat will present a provisional PB 2022–2023 for consideration of Executive Board in January 2021.
2. PB 2022–2023 will be presented for approval to WHA in May 2021 with clear expectation of mid-term revision in May 2022.
3. The revisions will be based on emerging information, esp. IPPR report.
4. Extend the achievement date of Triple Billion Targets to 2025.
5. In line with resolution WHA73.1, options for more sustainable financing of the Programme budget will be developed and for the 148th session of the Executive Board.

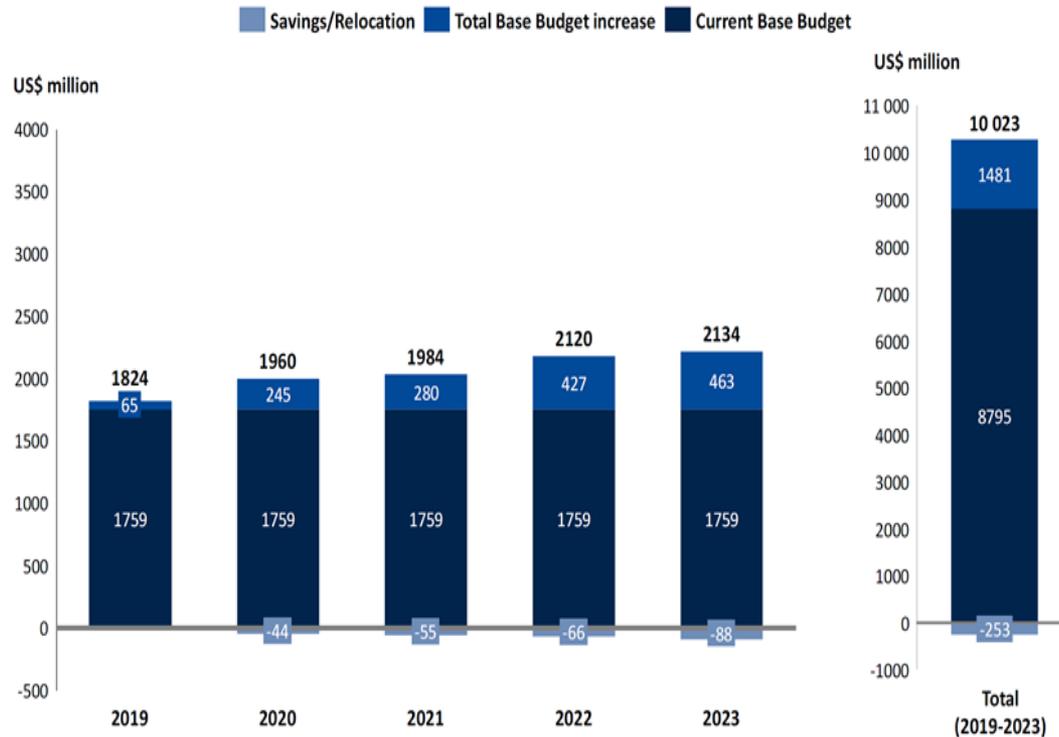
# Elements of the PB presented to the 148<sup>th</sup> EB

1. Health impacts that WHO committed to delivering in GPW13, including an update on the current status and trajectories.
2. Analysis of the emerging needs, including those changes brought about by COVID19 crisis, based on known information and lessons learned.
3. What WHO will deliver and how performance will be measured.
4. Budget in line with agreed GPW13 requirement and taking into account requirements that have emerged since the approval of the current programme budget (budget by Major Office, by Outcome).

**WE WILL USE THE SAME RESULTS FRAMEWORK**

**Billions – Outcomes - Outputs**

# Budgetary Envelope for PB 2022–23



- The GPW13 financial estimate foresaw a Base budget need for 2022–2023 of USD 4.254 M
- A 7.8% increase compared with 2020–2021
- This will be the basis for the provisional PB 22–23

# Additional budget elements already known

- 1. COVID-19** – Emerging and already known changes triggered by COVID-19 - e.g. emerging global public health goods; elements of ACT accelerator, strengthening of essential public health and WHO preparedness function; etc.
- 2. WHO Transformation Initiatives** (e.g. science division, supply chain platforms).
- 3. Polio transition related** - integration of essential public health functions in most countries.

These additional elements will be carefully considered together with the originally planned increases, prioritized, costed and then examined as to whether they can be accommodated within the planned 7.8% budget increase.

# Engagement with Member States

1. In-country consultations if possible (ROs will apply modalities as appropriate to their situation).
2. Programme Budget Administration Committee Meeting (21–23 Oct 2020) and resumed WHA session (Nov 2020).
3. Use of formal/informal regional consultation mechanisms.
4. Informal Member States consultations using different platforms.
5. Other forms of consultations (incl with other stakeholders).

# PB 2022-23 High-level Steps and MS Engagement Timeline

Strategic direction setting,  
3-level alignment, drafting

High-level review, PB  
finalization

Executive Board Prep and  
Discussions

Post-EB revision, review and WHA  
approval

## Member States Engagement

