

PROGRAMME BUDGET 2026–2027

Introduction

1. The global Programme Budget 2026–2027 is the first to be fully developed and approved based on the global WHO *Fourteenth General Programme of Work 2025–2028* (GPW 14), which prioritizes advancing health equity and strengthening the resilience of health systems.
2. GPW 14 builds on the achievements of the *Thirteenth General Programme of Work 2019–2025* (GPW 13) and takes forward the WHO pledge to promote, provide and protect the health and well-being of all people, while enabling the work of the global health ecosystem to achieve the SDGs and enhance the performance of WHO.
3. The 156th session of the WHO Executive Board in February 2025 took place in the wake of significant changes in the global geopolitical and financial landscape, with notable impacts on health programmes and systems. In response, Member States were requested to revisit health priorities to reflect evolving funding and partnership realities, including shifts in support from key health actors. While some changes were observed, overall patterns remained largely consistent.
4. The [WHO Programme Budget Digital Platform](#) showcases the revised priority-setting results by Member States following Executive Board discussions.
5. The WHO Secretariat proposed a global Programme Budget 2026–2027 of US\$ 5.3 billion to the Executive Board in February 2025, and the Executive Board recommended a decreased envelope of US\$ 4.9 billion for the biennium. Subsequently, the Secretariat proposed a reduction to US\$ 4.2 billion as a more realistic response to the rapidly evolving global financing environment. This adjustment ensures that WHO remains focused on delivering results with efficiency and impact, while aligning available resources to safeguard the most essential work of the Organization.
6. The global Programme Budget 2026–2027 approved by the World Health Assembly is presented as an information document in Annex 3.

Global Programme Budget 2026–2027: An overview

7. The prioritization of outcomes and outputs for WHO technical cooperation under GPW 14 was led by countries and grounded in the principle that the Organization should focus efforts on areas where they provide the greatest added value. The process was guided by country cooperation strategies, as well as data and trends, and developed in alignment with regional and global strategic directions. The process sought to identify areas in which WHO technical cooperation is most needed across all settings in order to advance national health agendas to achieve collectively agreed priorities at the country level.
8. To operationalize this approach, WHO country offices led outcome prioritization consultations in collaboration with governments and key partners. Countries were asked to rank each outcome as a high, medium or low priority – signalling the expected level of WHO technical cooperation and

contribution rather than the overall importance of the result. This allowed for a more realistic alignment of WHO support with national contexts and capacities, as well as the efforts of other partners.

9. Accountability is central to the global Programme Budget 2026–2027. A strong results framework, performance indicators and transparent reporting mechanisms will guide implementation and help track progress. WHO remains committed to supporting Member States in implementing national health strategies, building institutional capacity and delivering equitable evidence-based interventions where they are most needed.

10. The WHO results framework is a systematic and structured approach to define, organize and assess the expected impacts, outcomes and outputs of health initiatives. It provides a clear and logical connection between inputs, activities and the resultant health improvements, ensuring that every action contributes to the overarching goals of the Organization. The results chain is illustrated in Fig. 1.

Fig. 1. WHO results framework



11. The Base Programmes segment represents the core mandate of WHO and constitutes the largest part of the approved global Programme Budget 2026–2027 in terms of strategic priority-setting, detail, budget figures and performance assessment mechanisms. This segment reflects overall global health priorities trends and shows budget distribution by outcome across the major offices. The Base Programme budget segment of the approved global Programme Budget 2026–2027 is set at US\$ 4.2 billion, compared with US\$ 4.9 billion for Programme Budget 2024–2025.

12. The Emergency Operations and Appeals segment includes WHO operations in emergency and humanitarian settings, including protracted crises, as well as the WHO response to acute events. Increasingly protracted, complex and multidimensional crises demand multifaceted responses and greater resources than ever before.

13. The Polio Eradication segment represents the WHO share of the implementation of the budget to implement to global *Polio Eradication Strategy 2022–2026*.

14. The Special Programmes segment includes special programmes that have additional governance mechanisms and budget cycles that inform their annual and biennial budgets.

Western Pacific Region Programme Budget 2026–2027

15. With the World Health Assembly decision to decrease the global WHO Programme Budget 2026–2027 to US\$ 4.2 billion, the Western Pacific Region Base Programmes segment of the draft Programme Budget 2026–2027 was approved at US\$ 347.2 million, which is a reduction from US\$ 408.1 million in the Programme Budget 2024–2025.

16. In addition, US\$ 33.4 million of the Base Programmes segment was shifted from the South-East Asia Region to the Western Pacific Region due to the reassignment of Indonesia as a Western Pacific Member State. The total base budget allocation to the Western Pacific Region is now US\$ 380.6 million. This adjustment ensures that the Region will remain focused on delivering results with efficiency and impact, while aligning available resources to safeguard the most essential work towards achieving the regional vision, *Weaving Health for Families, Communities and Societies in the Western Pacific Region (2025–2029)*.

Table 1. Base Programmes segment of Programme Budget 2026–2027 for the Western Pacific Region: organizational level, outcome and budget segment (US\$ million)

Approved (Seventy-seventh World Health Assembly)	Additional allocation after Indonesia joined the Region	Total allocated Programme Budget 2026–2027
347.2	33.4	380.6

17. Although the Western Pacific Region will be working with a reduced budget overall, the country office budget allocation in the Region has been increased to 68.1% from 61.8%. The budget ratio of 68:32 favours country offices over the Regional Office for the Western Pacific.

Table 2. Western Pacific Region Base Programmes segment Programme Budget allocation comparison 2024–2025 vs 2026–2027 (US\$ million)

Major office split	Approved Programme Budget 2024–2025	%	Draft Programme Budget 2026–2027	%
Country offices	252.1	61.8	259.3	68.1
Regional Office	155.9	38.2	121.3	31.9
Total	408.0	100.0	380.6	100.0

Table 3. Allocated Programme Budget 2026–2027 for the Western Pacific Region organizational level, outcome and budget segment (US\$ million)

Outcome	Country offices	Regional Office	Total
1.1. More climate-resilient health systems are addressing health risks and impacts	20.3	2.2	22.5
1.2. Lower-carbon health systems and societies are contributing to health and well-being	1.8	1.1	2.9
2.1. Health inequities reduced by acting on social, economic, environmental and other determinants of health	2.4	4.1	6.4
2.2. Priority risk factors for noncommunicable and communicable diseases, violence and injury, and poor nutrition reduced through multisectoral approaches	14.7	6.1	20.8
2.3. Populations empowered to control their health through health promotion programmes and community involvement in decision-making	2.1	1.6	3.7
3.1. The primary health-care approach renewed and strengthened to accelerate universal health coverage	26.3	8.1	34.4
3.2. Health and care workforce, health financing and access to quality-assured health products substantially improved	18.5	8.7	27.2
3.3. Health information systems strengthened, and digital transformation implemented	9.7	1.9	11.6
4.1. Equity in access to quality services improved for noncommunicable diseases, mental health conditions and communicable diseases, while addressing antimicrobial resistance	40.0	16.0	56.0
4.2. Equity in access to sexual, reproductive, maternal, newborn, child, adolescent and older person health and nutrition services, and immunization coverage improved	28.2	5.0	33.2
4.3. Financial protection improved by reducing financial barriers and out-of-pocket health expenditures, especially for the most vulnerable	1.9	0.5	2.3
5.1. Risks of health emergencies from all hazards reduced and impact mitigated	6.8	3.7	10.6
5.2. Preparedness, readiness and resilience for health emergencies enhanced	16.1	11.9	28.0
6.1. Detection of and response to acute public health threats is rapid and effective	15.7	15.2	30.9
6.2. Access to essential health services during emergencies is sustained and equitable	1.4	0.3	1.7
Corporate Outcome 1: Effective WHO health leadership through convening, agenda-setting, partnerships and communications advances the sustainably financed GPW 14 outcomes and the goal of leaving no one behind	31.8	12.7	44.5
Corporate Outcome 2: Timely delivery, expanded access and uptake of high-quality WHO normative, technical and data products enable health impact at the country level	1.9	5.2	7.1
Corporate Outcome 3: An efficiently managed WHO with strong oversight and accountability and strengthened country capacities better enables its workforce, partners and Member States to deliver the GPW 14 outcomes	19.6	17.1	36.8
Subtotal Base Programmes	259.3	121.3	380.6
Polio Eradication	0.0	2.6	2.6
Special Programmes	0.0	4.2	4.2
Emergency Operations and Appeals	10.0	0.0	10.0
Total Programme Budget 2026–27	269.3	128.1	397.4

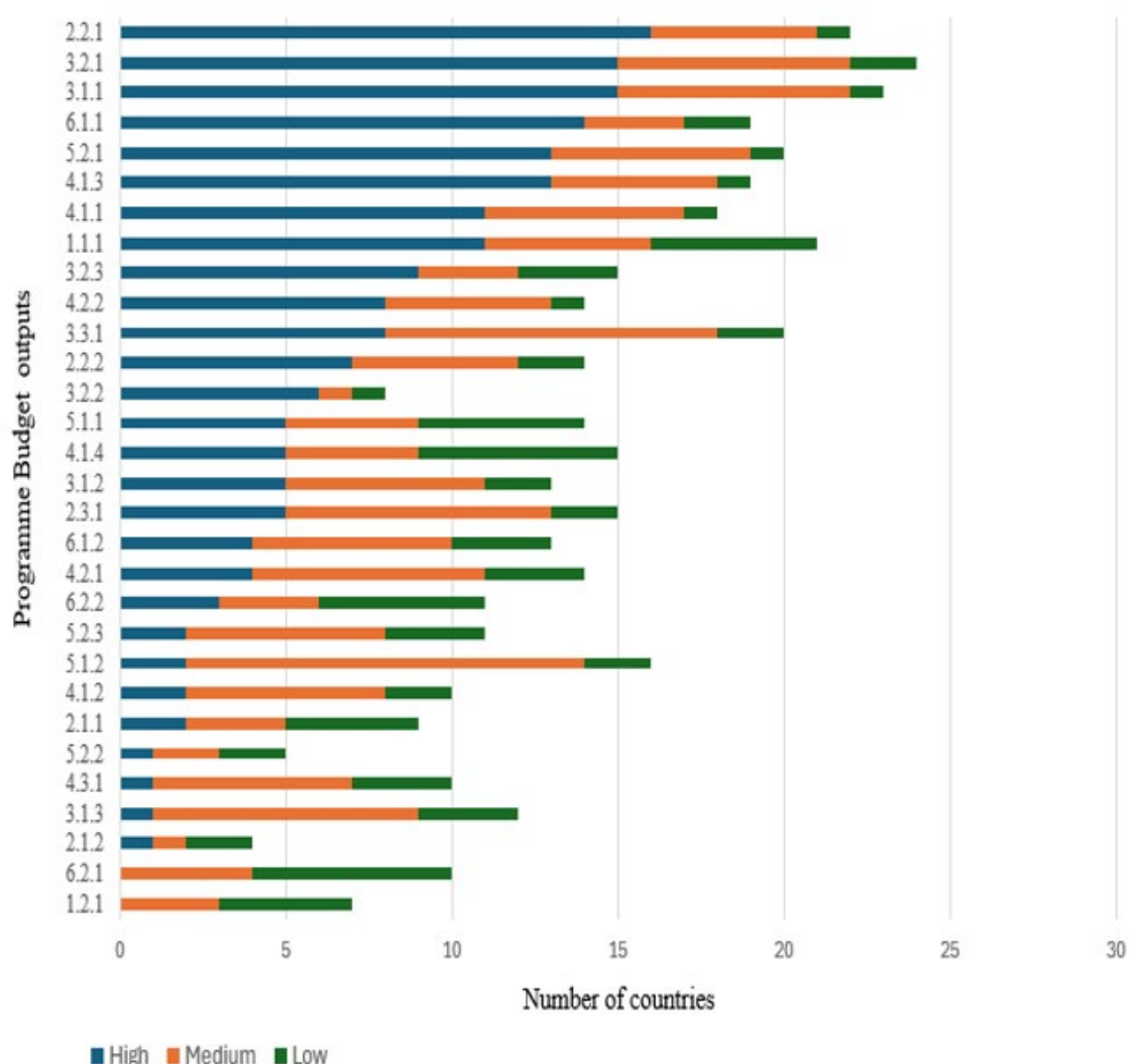
Note: The table includes the increased budget allocation after Indonesia joined the Region. Figures (in US\$ millions) are rounded off to one decimal point.

18. In the Western Pacific Region, the Regional Office and the country offices worked together to review and identify priorities reflecting a reduced budget, resource constraints and shifting priorities in countries (Fig. 2). Regional technical programmes also aligned the budget and planning process with WHO headquarters in an effort to review outputs and deliverables and to prioritize outputs and deliverables, as well as scale down and sunset certain deliverables.

19. Outcome 1.1 related to climate-resilient health systems and health risks emerged as a high-priority outcome in the Western Pacific Region, which is unique and resonates to specific public health challenges in majority of Western Pacific countries and areas.

20. Eleven high-priority GPW 14 technical outputs were identified at the regional level based on bottom-up prioritisation from country offices.

Fig. 2. Western Pacific Region Programme Budget output priorities ranked by priority level (number of countries)



21. The 11 high-priority Programme Budget technical outputs further guided the allocation of over 70% of the budget for the Regional Office and country offices to these priorities, with the remaining resources allocated to other country and regional priorities. This planning and budget process supported strategic alignment, budget rationalization and early planning for potential organizational adjustments.

22. The 11 outputs were fully aligned with the five vertical strands, or action areas, for Member States and partners in the Region's "weaving health" vision.

Table 4. Western Pacific regional vision of weaving health and Programme Budget 2026–2027 regional priorities

Eleven high-priority Programme budget technical outputs (short names)	Regional vision strands (action areas)	
1.1.1 Climate-resilient health systems, One Health	2. Climate-resilient health systems	
2.2.1 Address risk factors for communicable diseases and noncommunicable diseases (NCDs)	1. Transformative primary health care (PHC)	4. Healthier populations
3.1.1 People-centred service delivery	1. Transformative PHC	
3.2.1 Workforce development	1. Transformative PHC	
3.2.3 Product quality assurance	1. Transformative PHC	
3.3.1 Health information systems/digital health	5. Technology & innovation	
4.1.1 NCD management and best buys	4. Healthier populations	1. Transformative PHC
4.1.3 Delivery of communicable disease services	1. Transformative PHC	
4.2.2 Quality immunization services	1. Transformative PHC	
5.2.1 National preparedness and readiness plans	3. Health security	
6.1.1 Surveillance and laboratories	3. Health security	

Table 5. Western Pacific Region allocated budget for 11 high-priority GPW 14 technical outputs

Priorities/GPW 14 outputs	Country offices	Regional Office	Total
1.1.1 Climate-resilient health systems, One Health	20.31	2.20	22.51
2.2.1 Address risk factors for communicable diseases and NCDs	12.33	3.77	16.10
3.1.1 People-centred service delivery	20.97	7.37	28.34
3.2.1 Workforce development	8.30	5.41	13.71
3.2.3 Product quality assurance	7.13	2.30	9.44
3.3.1 Health information systems/digital health	9.73	1.89	11.62
4.1.1 NCD Management and best-buys	11.19	2.43	13.62
4.1.3 Delivery of communicable disease services	23.66	10.87	34.53
4.2.2 Quality immunization services	21.55	3.90	25.45
5.2.1 National preparedness and readiness plans	15.23	11.52	26.75
6.1.1 Surveillance and laboratories	11.49	9.67	21.16
Total budget for the 11 high-priority technical outputs	161.89	61.32	223.21
Total technical budget	205.96	86.25	292.21
Technical budget (% of total budget)	78.60	71.10	76.39

23. The results achieved by the joint efforts of Member States, the Secretariat and partners will be measured using specific outcome indicators. For the Western Pacific Region, indicators outlined in the Weaving Health regional vision will also be measured. Regional vision indicators mapped to 11 Programme Budget regional priorities are presented in Annex 1.
24. The Secretariat's performance and its subsequent contribution to the delivery of health outcomes under the GPW 14 results framework (as shown in Figure 1) will be tracked through the outputs and leading indicators. The Secretariat's performance and contributions have a clear and direct linkage to the outputs, as well as a plausible contribution to outcomes through the outcome indicators.
25. WHO in the Western Pacific Region has initiated operational planning focusing on contributions to the regional vision and GPW 14 results framework indicators, aligned with the 11 high-priority technical outputs. WHO representatives and country liaison officers have initiated dialogues to identify tangible results achieved with WHO support.
26. To ensure that baselines and targets are fully aligned with the outcomes of the prioritization exercise, WHO country and country liaison offices are working to ensure that baselines and targets for output indicators are aligned to the operational plans for the draft Programme Budget 2026–2027. The focus is on the 11 high-priority Programme Budget technical outputs and other country-specific medium- and high-priority outputs. The process is expected to be completed with the development of operational plans for 2026–2027.
27. The output indicators relevant to the 11 technical priority outputs are included under the related outputs in Annex 2. The full list of output indicators for the GPW results framework is listed in the information document for Programme Budget 2026–2027.
28. In addition to the Secretariat's annual reporting on the achievement of GPW 14 results (in WHO results-based management reports), organizational learning and evaluation approaches will be used to provide insights about opportunities to improve results-based management during the GPW 14 period.
29. Evaluation is a cornerstone of the WHO results-based management culture. By drawing on lessons learnt, enhancing organizational effectiveness and promoting accountability for results, the evaluation function enhances the added value of WHO. The Western Pacific Region will continue to invest in systematic evaluation to inform policies, strategies and programmes, leading to improved health outcomes.
30. As defined in [WHO Evaluation Policy \(2025\)](#), the WHO Secretariat conducts Thematic evaluation, Programmatic Evaluation and Country Programme Evaluations.
31. Country programme evaluations, as per the [global framework](#), focus on the contributions of WHO at the country level, recognizing that the success of WHO efforts depend on the country context and efforts by multiple partners. These evaluations examine the relevance, effectiveness, impact, sustainability and coherence of WHO objectives, actions and contributions in individual countries to ensure that WHO is effectively addressing the health needs of the country within its capacity, as formulated in the Organization's General Programme of Work and key country-level strategic instruments, including country cooperation strategies, country prioritization exercises, biennial country office workplans and national health strategies based on WHO's comparative advantage. Evaluations will review outcomes and results achieved at country level using the inputs from all three levels of the Organization. They also document good practices and gaps for learning, while providing a foundation for future country cooperation strategies in countries.
32. Thematic and programmatic evaluation will be discussed and planned as feasible during operational planning. Two country offices will be identified for country programme evaluations for Programme Budget 2026–2027.

Annex 1. Regional vision indicators for 11 high-priority Programme Budget technical outputs

Priority output code	Priority output	Regional vision indicator	Target
1.1.1	Climate-resilient health systems	National adaptation plan/strategy for climate change that includes health	20 countries have developed and are implementing a national adaptation plan/strategy for climate change that includes health
1.1.1	Climate-resilient health systems	Proportion of health facilities with basic water services	80% of all health facilities have basic water services
1.1.1	Climate-resilient health systems	Proportion of health facilities with basic sanitation services	60% of all health facilities have basic sanitation services
2.2.1	Address risk factors for communicable diseases and noncommunicable diseases (NCDs)	Effective hypertension treatment coverage among adults aged 30–79 (age-standardized)	Regional target of 100 more million whose hypertension is controlled and country target of 50% effective treatment coverage of hypertension
2.2.1	Address risk factors for communicable diseases and NCDs	Cities and/or islands that are members of functioning Healthy Setting networks	500 new cities and/or islands become members of functioning Healthy Settings networks
2.2.1	Address risk factors for communicable diseases and NCDs	Cities and/or islands in Healthy Settings networks that are actively reporting on city-level and equity-based indicators	500 members of Healthy Settings networks have been selected and are periodically reporting on at least 10 city-level and equity-based indicators and targets
2.2.1	Address risk factors for communicable diseases and NCDs	A national intersectoral policy, strategy and/or plan on specific Healthy Settings (schools, universities, marketplaces, workplaces, etc.)	80% of countries have a national intersectoral policy, strategy and/or plan on specific Healthy Settings (schools, universities, marketplaces, workplaces, etc.)
3.1.1	People-centred integrated service delivery	UHC service coverage index	All countries and areas with an increased UHC service coverage index
3.2.1	Workforce development	Density of health workforce (Physicians, nurses and midwives, dentists, pharmacists) per 10 000 of population	All countries have increased health workforce densities per 10 000 of population
3.2.2	Health and care workforce, health financing and access to quality-assured health products	Percentage of population with household expenditures on health greater than 10% of total household expenditure or income	Percentage of population with household expenditures on health greater than 10% of total household expenditure or income reduced to 16.7%

3.2.3	Product quality assurance	Proportion of countries achieving maturity level 3 or 4 in national regulatory systems for health products	Nine Countries have achieved maturity level 3 or maturity level 4 as benchmarked against WHO Global Benchmarking Tool
3.3.1	Health information systems/digital health	Countries with an increased SCORE (health data collection) index	All countries have implemented SCORE assessment and have an increased SCORE index
3.3.1	Health information systems/digital health	A national digital health strategy, costed implementation plan and legal frameworks to support safe, secure and responsible use of digital technologies for health	All countries have a national digital health strategy, costed implementation plan and legal frameworks to support safe, secure and responsible use of digital technologies for health
4.1.1	NCD best-buys	Additional WHO best-buy interventions introduced or in development across Member States	Sixty more WHO best-buy interventions introduced or in development
4.1.3	Delivery of communicable disease services	Treatment coverage for major communicable diseases (tuberculosis, HIV, hepatitis B and C, syphilis, malaria and neglected tropical diseases)	90% treatment coverage rate for all major communicable diseases
4.2.2	Quality immunization services	Immunization coverage for DTP3, MCV2, PCV3, HPVc among eligible populations	90% immunization coverage
5.2.1	National preparedness and readiness plans	SDG indicator 3.d.1. International Health Regulations (2005) capacity and health emergency preparedness	All countries with increased International Health Regulations (2005) States Party Self-Assessment Annual Reporting Tool, second edition, (IHR SPAR 2021) average of core capacity scores
6.1.1	Surveillance and laboratories	Proportion of countries with timely access to genomic sequencing for pathogens with pandemic and epidemic potential	All countries in the Western Pacific Region have timely access to genomic sequencing for pathogens with pandemic and epidemic potential, with at least 70% having in-country sequencing capability

Annex 2. GPW 14 output indicators related to the 11 high-priority Programme Budget technical outputs

Priority output code	Output indicator wording (Global/regional level)
1.1.1	Number of countries having conducted a climate change and health vulnerability and adaptation assessments (V&A) and developed the health component of their health national adaptation plan (HNAP)
1.1.1	Number of countries integrating meteorological information into surveillance and response systems for at least one climate-sensitive health risk (for example, extreme heat or climate-sensitive infectious disease) benefiting from WHO technical guidance or support
2.2.1	Number of countries that have strengthened at least one MPOWER measure from the MPOWER technical package for tobacco control, enabled by WHO technical support
2.2.1	Number of countries integrating WHO guidance on water, sanitation, hygiene and health in policies, plans, regulations or in monitoring systems
2.2.1	Number of countries adopting evidence-based legislative and policy reforms to prevent and respond to violence against children, enabled by WHO technical support
2.2.1	Number of countries that have made a legislative or policy change to improve road safety, enabled by WHO technical support
2.2.1	Number of technical support packages and guidance for countries to adopt and implement population-based alcohol policy measures in line with WHO policies and resolutions
2.2.1	Number of countries with at least one of the following policies: national policy on physical activity; national policy on walking and cycling; national physical activity guidelines; national physical activity communications campaign; and brief interventions on physical activity in primary health care, enabled by WHO technical support
3.1.1	Number of countries that have developed or updated existing quality-of-care and patient safety strategies/plans based on WHO guidance
3.1.1	Number of countries that have strengthened monitoring of access to equitable and quality health services based on WHO guidance
3.1.1	Number of countries that have an integrated UHC package of priority services that meets core WHO criteria
3.2.1	Number of countries implementing national health workforce accounts (NHW) and reporting data through the NHW data platform
3.2.1	Number of countries reporting on health worker migration through the national health workforce accounts (NHW)
3.2.1	Number of countries reporting on the production of health and care workers
3.2.3	Number of countries with a list of essential medicines (or reimbursed medicines) developed centrally (at the national or regional level), updated within the last 5 years, and grounded in the concept of the WHO Model List of Essential Medicines
3.2.3	Number of in-country registrations of prequalified products and stringent regulatory authority/WHO-listed authority approved products registered under the Collaborative Registration Procedure or other facilitated reliance pathway in case of emergency

3.2.3	Number of Member States with established institutional development plan to improve regulatory capacity for health products based on assessments using WHO global benchmarking tool
3.3.1	Number of countries with a digital health strategy and/or a road map
3.3.1	Number of countries that have demonstrably improved their health information system capacity and increased their country assessment scores using the SCORE for health data technical package
4.1.1	Number of countries that have completed a WHO STEPS survey or an equivalent risk factor survey aligned with WHO standards, including physical and biochemical measurements of key behavioural and metabolic risk factors for noncommunicable diseases (NCDs)
4.1.1	Number of countries with evidence-based national guidelines/protocols/standards aligned with WHO guidance for the management of major NCDs through a primary care approach
4.1.1	Number of countries implementing an action plan or strategy aligned with the WHO global strategy for cervical cancer elimination
4.1.1	Number of countries that have implemented disability inclusion measures in national health programmes and strategies
4.1.1	Number of countries with patient information systems reporting NCD indicators aligned to WHO guidance
4.1.3	Percentage of countries confirmed by WHO to have met WHO criteria for disease elimination for at least one disease
4.1.3	Percentage of countries that have adopted policies in line with current WHO norms and standards to address endemic communicable diseases (HIV, tuberculosis, malaria, neglected tropical diseases, hepatitis, sexually transmitted infections)
4.1.3	Percentage of countries reporting on WHO-recommended indicators for endemic communicable diseases (HIV, tuberculosis, malaria, neglected tropical diseases, hepatitis, sexually transmitted infections)
4.2.2	Number of countries submitting immunization coverage data to WHO through the electronic Joint Reporting Form platform
4.2.2	Number of countries in which the national immunization strategy includes implementation progress reviews of annual operational plans (AOPs) addressing either: a) zero-dose children; b) measles vaccine coverage; or c) human papillomavirus vaccine coverage
5.2.1	Number of countries with an epidemic and pandemic prevention and preparedness plan, and prevention and control programme for at least one pathogen of epidemic and pandemic potential
5.2.1	Number of States Parties completing annual reporting for the International Health Regulations (2005)
5.2.1	Number of countries that have completed an action review or simulation exercise to review national system capacities and inform national action plans
6.1.1	Percentage of critical acute public health events for which a formal initial rapid risk assessment and grading are completed within one week
6.1.1	Number of countries that have demonstrated laboratory capabilities to test and sequence for priority pathogens of epidemic and pandemic potential