

29.1 Programme and financial reports for 20-21

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In focus

[A74/28](#), the mid term review of PB20-21, reports on:

- progress against the triple billion targets (healthier populations, universal coverage, health emergencies protection); the [Triple Billions Portal](#) provides more detail
- headline achievements under each of the three pillars;
- self-assessment of the contribution of WHO to delivering the outputs (using the output scorecard);
- case studies showcasing WHO's work;
- financing of budgeted expenditure and funds utilised as a proportion of budget;
- sources of funds, by contributors and flexibility.

The material encompassed in A74/28 is supplemented by more details in the [Triple Billions Portal](#), the [online interactive mid term results report](#), [A74/INF./4](#) (voluntary contributions) and the [Programme Budget Portal](#).

A74/28 and associated documents are for noting so no decision is anticipated but MS and others may comment on any or all of the issues listed above.

Background

[A74/29](#): Audited financial statements for year ended 31 Dec 2020

[A74/7](#): WHO results framework: an update

[GPW13: Methods for impact measurement](#)

PHM Comment

Most indicators (for the three billions) are improving slowly (although with some exceptions such as diabetes, and obesity). However, improvements are slower for some countries leading to a widening of inequalities. Progress in the UHC indicators is disappointing.

The self-assessments of PB outputs by WHO secretariat teams is interesting, particularly useful for management and strategy within WHO.

Financing of the PB20-21 budget at the halfway mark shows a familiar pattern of over subscription to those outcomes that the donors want to fund and under subscription of others.

Low utilisation in relation to budget estimates are evident in those outcomes which are under-funded and several where staff have been transferred to Covid duties.

The sources of funds data confirm the dominance of a small number of donors and the continuing preference of donors for tightly earmarked contributions rather than thematic or core.

This report reflects well on the Secretariat notwithstanding Covid-19. However, the patterns and trends evident in the various outcome indicators are a shocking reflection on economic inequality globally and the funding situation a damning indictment of contemporary global health governance.

Notes of discussion at WHA74