# The Tenth Meeting of the Country Support Unit Network

# The (2<sup>nd</sup>) Copenhagen Report

6-8 December 2010





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List of Acronyms

AC Assessed Contributions
AFRO Regional Office for Africa
AMRO Regional Office for Americas
ARD Assistant Regional Director
BRIC Brazil, Russia, India, China

BWP Biennial Work Plan

CAS Country Analysis and Support Unit

CCC Country Relations and Corporate Communication

CCO Department of Country Focus
CCS Country Cooperation Strategy

CSU Country Support Unit

DG Director General

DPM Director of Programme Management

EMRO Regional Office for Eastern Mediterranean

EURO Regional Office for Europe

GPG Global Policy Group

GSM Global Management System
HWCO Head of WHO Country Office
ICST Intercountry Support Team

IHR International Health Regulations (2005)

MTSP Medium Term Strategic Plan

NHPSP National Health Policy, Strategy and/or Plan

NIC Newly Industrialized Country

PB Programme Budget

PMDS Performance Management Development System

PRP Department of Planning, Resource Coordination and Performance Monitoring

PSG Peer Support Group
RD Regional Director

RM Resource Mobilization

SEARO Regional Office for South-East Asia

SIDS Small Island Developing States

SO Strategic Objective

SRC Strategic Relations with Countries

UNDAF United National Development Assistance Framework

UNCT United Nations Country Team

WPRO Regional Office for Western Pacific

## Introduction, objectives and expected outcomes

The tenth meeting of the Country Support Unit (CSU) Network was hosted by the Regional Office for Europe in Copenhagen, Denmark from 6 to 8 December, 2010. The meeting was attended by members from all regional CSUs; four Heads of WHO Country Offices (HWCOs) (Bahamas, Burundi, Laos and Iran); a representative from the Department of Programme Planning, Coordination and Performance Monitoring (PRP) and the Department of Country Focus (CCO).

#### **Overall objective**

The overall objective of the meeting was to strengthen the CSU Network to back-up and support WHO's work in countries, implementing the renewed Country Focus policy.

To achieve this objective the meeting focused on strategic discussion around the following three themes:

- 1. The renewed WHO Country Focus: towards a policy
- 2. More effective WHO collaboration in countries
- 3. Measuring WHO's performance in countries

## Specific objectives and expected outcomes

Under each of the themes, the specific objectives and expected outcomes were as follows:

# 1. The renewed WHO Country Focus: towards a policy

To reach consensus on the role of the CSUs in:

- a. Advocating for, facilitating and monitoring the country focus policy in support to:
  - o national health policies, strategies and plans
  - o national readiness for and response to emergency situations
- b. Adjusting WHO's technical collaboration to different countries/groupings of countries including facilitating the Newly Industrialized Countries (NICs) & Brazil, Russia, India and China (BRIC) and Small Island Developing States (SIDS) network, and fostering South-South cooperation.

#### 2. More effective WHO collaboration in countries

The Compendium of National Expertise

 To reach consensus on how CSUs will facilitate maintenance (population and updating) as well as optimal use of the Compendium of National Expertise.

# Country Cooperation Strategies

- To share regional Country Cooperation Strategy (CCS) experiences, including the development of CCSs in middle-income countries and other groups of countries.
- To reach consensus on how CSUs will support the use of the CCS-Medium Term Strategic Plan (MTSP) Mapping exercise to inform the Programme Budget 2012-2013 and the next MTSP.

# Intelligence

- To share regional experiences of collecting, sharing and using intelligence/reports from countries.
- To share good practices and reach consensus on how CSUs support effective roll-out of the UN Development Assistance Framework (UNDAF) in countries.
- To agree on how to contribute more effectively to DG Briefings.

#### Capacity building for country teams

 To reach consensus on the role of CSUs in the global induction, mentoring and coaching of HWCOs, as well as the Global Learning Programme.

#### 3. Measuring WHO's performance in countries

- To share regional and global experiences of reviewing WHO performance in countries.
- To reach a consensus on the CSU's role in performance assessment, and way forward.

# Methodology

The meeting used plenary sessions, group work, presentations and discussion to work through the agenda and agree on key actions for implementation.

#### 1. Opening Session

# 1.1 Introductory comments from the Regional Director

The Regional Director (RD) of EURO, Ms Zsuzsanna Jakab opened the 10<sup>th</sup> Country Support Unit (CSU) Network meeting. She began by reminding participants that "everything we do, we do for countries".

RD raised the critical issue of how the Secretariat can best channel the knowledge it possesses to its member states, and how it can provide more specific support to respond to country specific needs in health policy and strategy development. She acknowledged the difficulty of doing so, but expressed that this is critical to maintaining our flagship - especially in times of financial crisis where we risk losing our flagship to other, better-funded organizations.

She said that this challenge was compounded by the incongruence between the profile of WHO staff and the current priorities of its member states WHO needs to support. Ms Jakab gave the example of the WHO region for Europe (EURO) where staff have a predominantly communicable diseases profile, despite the region's priorities being noncommunicable diseases and health policy and health systems. To address this, EURO is working to establish a core country presence, and technical staff at the regional office who can provide technical backstopping in the priority areas.

RD also highlighted the need to provide more efficient support to member states in the areas of health policy, health systems and planning - and an intersectoral approach to doing so, as many determinants of health lie outside of the health sector itself. In the WHO European Region, at least half of the member states will be involved in health policy and planning processes at the same time. Yet the regional office and country offices do not have the capacity to provide the requested support.

This year, EURO has renewed its country focus and has been working on a new strategy for support to member states and has conducted a review of country offices; the report of which is being finalized. RD highlighted the usefulness of the report for other areas of Organization as it focuses on chronic noncommunicable diseases, social determinants and support to national health policies, strategies and plans (NHPSPs). The next step is reviewing criteria for country offices in all types of countries - those where we will need country offices, and those where we will need a different type of presence. A review of what a "core staff" means and how to match other capacities around this is needed.

RD briefed participants on the new team named "Strategic Relation with Country" (SRC) that has been set up within the Regional Director's Office under Dr Lucianne Licari (Executive Manager, Country Relations and Corporate Communication), for more strategic relations with member states and to guide technical units on how to support technical areas and country offices to respond to country needs. She concluded by highlighting the importance of nurturing and strengthening the CSU network for its contribution to making country offices more efficient and effective.

#### 1.2 Welcome from Director CCO

Director of the Department of Country Focus (CCO), Dr Marie-Andrée Romisch-Diouf, gave a brief overview of the functioning of the CSU Network for the benefit of first-time participants to the CSU Network meetings.

Director CCO highlighted in particular: the equal footing from which the seven country support units operate; the sharing and learning that takes place between the units; and the tradition of inviting Heads of WHO Country Offices to participate.

Referring to the RD's opening comments, Director CCO emphasized the need for more focus to be given to coming up with practical, concrete ideas regarding WHO's core presence during the meeting. She thanked RD, Dr Licari and her team for hosting the meeting.

# 1.3 Review of key action points agreed in the 9th CSU Meeting

For the follow-up on the actions agreed at the 9<sup>th</sup> CSU Network meeting, participants reviewed a table of key action points and their implementation. Each region was invited to contribute additional updates and information regarding implementation of the actions.

All regions reported that time has been devoted to the follow-up of actions agreed at the Fifth Global Meeting of HWCOs with the Director-General (DG) and RDs in each regional HWCO meeting. Support to national health policies, strategies and plans (NHPSPs) is understood as WHO's core business in all regions and is as such being reflected in HWCOs' Performance Management Development Systems (PMDSs).

All regions are fostering interregional cooperation to strengthen the country support function. SEARO and WPRO are fostering collaboration between WHO offices in Mekong countries. When available, the regions will share relevant documentation related to this collaboration between SEAR and WPR country offices.

All CSUs agreed that now is a critical time to discuss the renewed WHO country focus and position ourselves strategically, in order to support its implementation.

EMRO expressed ongoing concerns regarding the financial constraints for the implementation of the Country Focus agenda especially the renewal of CCSs, for further strengthening of country office capacity as well as for multilingualism.

Across regions, almost all exercises to map the CCS Strategic Agendas to the MSTP have been completed and will be shared with HQ by 15 December. The next step is to ensure the results inform our operational planning.

Regions mentioned the need for additional funding for Strategic Objective (SO) 12, to ensure continuity of the Country Support Unit's work to support implementation of WHO's renewed country focus. Maintaining an "international" staff was identified as critical to WHO's core presence in the country, yet threatened by funding constraints. Participants felt that it is crucial to identify 1) the countries that need/want a physical presence; and 2) the number and profile (required competencies and skills) of staff to ensure a minimum presence in these countries.

The remark was made that too many actions had been selected at the previous meeting, making follow-up a challenge. This lesson suggested that the Network needed to be more strategic for the action plan to be agreed at this 10<sup>th</sup> CSU Network meeting.

#### 1.4 Presentation of the EURO Country Support Unit

Executive Manager, Country Relations and Corporate Communication (CCC), presented an overview of EURO's new structure based on the renewal of WHO's Europe work with and in countries. The new structure is the outcome of six working groups established after the RD took office in early 2010.

#### **Positioning**

Within the RD's cabinet, CCC is one of four "teams" alongside *governance*, *strategic partnerships*, and *policy and cross-cutting programmes*, *and RD's special projects*. CCC is the direct link between the country office and RD.

#### **Functions**

The functions of CCC are twofold: 1) corporate and internal communication as well as website management (i.e. the corporate communication function); and 2) strategic relations with countries (SRC) - i.e. EU and non-EU member states.

SRC serves as the Country Support Team (i.e. the CSU) in EURO.

# Mission statement of Strategic Relations with Countries

- a) To provide strategic guidance to the RO under the policy direction of the RD and in line with the Organization's corporate priorities;
- b) To ensure in-house coordination of country work;
- c) To coordinate and manage effective collaboration with member states with and without WHO country representation in line with the new EURO Country Strategy.

This team is charged with the difficult mandate of building ways of working with at least four groups of countries in the EURO Region, with well defined specificities. This includes: i) countries that do not necessarily require a country office such as EU Member States, many of which are also traditional WHO donors; ii) EU accession countries with economies in transition but where the development road map has been well-defined; iii) "new donor countries" with emerging economies, such as Russia and Turkey; and iv) countries with economies in transition (previously classified as developing countries - and thus a large group including Caucasus and countries in Central Asia). In order to deliver on this mandate, the unit has developed the position of "Strategic Relations Officer" to work closely with and to serve as an information and intelligence conduit for HWCOs and country offices, representing the HWCOs at the regional office level. They will also serve to link group of countries with similar contexts, similar needs and similar priorities.

Executive Manager, CCC also gave a brief overview of the findings of the review of WHO's work in EUR countries. (See presentation on CD-ROM). The outcome is that EURO will review the need for a WHO office on a country-by-country basis. Criteria to support the process now need to be agreed.

# 2. WHO's renewed Country Focus: towards a policy

The original Country Focus Policy is being renewed for a strengthened WHO role in supporting national health policies, strategies and plans; and for supporting country offices to prepare for and respond to public health and humanitarian emergencies.

Participants discussed the role of the CSU Network in advocating for, facilitating and monitoring the renewed WHO country focus.

In groups, participants focused on the role of CSUs in:

- 1. selection process, and development of Heads of WHO Country Offices (HWCOs); linked with incentives and rewards.
- 2. improving the functioning of country offices in terms of identifying:
  - the core capacity needed in country offices to provide technical advice, and respond to public health emergencies;
  - the families of core competencies needed;
  - the administrative support needed:
  - how to stimulate resource mobilization at the country level.

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