

**The Ninth Meeting of the
*Country Support Unit Network***

The Harare Report

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**World Health
Organization**

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List of Acronyms

ADG	Assistant Director General
ARD	Assistant Regional Director
AC	Assessed Contributions
CAS	Country Analysis and Support Unit
CCO	Department of Country Focus
CCR	Country Cooperation Review
CCS	Country Cooperation Strategy
CSU	Country Support Unit
CVC	Core Voluntary Contributions
DG	Director General
DPM	Director of Programme Management
GMG	General Management Cluster
GPG	Global Policy Group
GRMST	Global Resource Mobilization Support Team
GSM	Global Management System
HWCO	Head of WHO Country Office
ICST	Inter-Country Support Teams
IHR	International Health Regulations (2005)
MDG	Millennium Development Goal
MoU	Memorandum of Understanding
MOSS	Minimum Operating Security Standards
MTSP	Medium Term Strategic Plan
NIC	Newly Industrialized Country
PRP	Department of Planning, Resource Coordination and Performance Monitoring
PSG	Peer Support Group
RD	Regional Director
RM	Resource Mobilization
SIDS	Small Island Developing States
SO	Strategic Objective
TCC	Technical Cooperation among Countries
UNDAF	United National Development Assistance Framework
UNFPA	United National Population Fund
UNCT	United Nations Country Team
UNDP	United Nations Development Programme
UNRC	United Nations Resident Coordinator
WHA	World Health Assembly

Introduction, objectives and expected outcomes

The ninth meeting of the Country Support Unit (CSU) Network was hosted by the Regional Office for Africa CSU, with support from the WHO Country Office, in Harare, Zimbabwe, from 30 November to 2 December, 2009. The meeting was attended by members from all regional CSUs; four Heads of WHO Country Offices (HWCOS) (Cuba, Mongolia, Somalia and Zimbabwe); representatives from the Department of Programme Planning, Coordination and Performance Monitoring (PRP) and the Department of Country Focus (CCO); and the Assistant Regional Director of AFRO. The list of participants is attached as Annex 1.

Overall objective

To effectively contribute to enhancing WHO's performance in countries through the strengthening of the CSU Network within the framework of the WHO renewed country focus that: i) supports the development, implementation, monitoring and assessment of National Health Strategies/Plans; ii) responds to emergencies situations; and iii) shapes the health dimension of existing partner platforms and maximize synergies with Global Health Initiatives.

Specific objectives

The specific objectives of the meeting are to:

1. Agree on the role of CSUs in the implementation and follow-up of key action points from the 5th Global Meeting of Heads of WHO Country Offices (HWCOS) with the DG and RDs.
2. Discuss and internalize a renewed country focus, and to identify the implications for CSUs in taking forward the renewed Country Focus Policy.
3. Update on the assessment of HWCOS as part of the selection, appointment and development process as well as the way forward.
4. Identify implications of simplified UNDAF guidelines and UNDAF Action Plan for WHO.
5. Discuss financing of WHO at country level: i) implications of budget constraints for the forthcoming 2010-2011 biennium; and ii) resource mobilization needs for countries and to support WHO's country work.

Expected outcomes

The expected outcomes of the meeting are as follows:

1. Agreement reached on the role of CSUs in the implementation and follow-up of the key action points from the 5th Global Meeting of HWCOS with the DG and RDs.
2. The renewed Country Focus Policy discussed and internalized; and implications for the CSUs identified.
3. Participants updated on the assessment of the first cohort of applicants to the position of HWCOS; and steps for further improvement/way forward identified.
4. Implications of simplified UNDAF guidelines and the UNDAF Action Plan for WHO, identified.
5. Implications of budget constraints for the 2010-2011 biennium, and resource mobilization for countries and to support WHO's country work, identified.

1. Opening Session

The WHO Representative of Zimbabwe, Dr Custodia Mandlhate, welcomed participants to the 9th Country Support Unit (CSU) Network meeting and gave a brief overview of the health situation in the country, changes to the socio-political context and the recent Cholera epidemic.

The Assistant Regional Director (ARD) of the Africa Region opened the meeting, referring to the renewed country focus, which underpinned the agenda of the recent 5th Global Meeting of Heads of WHO Country Offices (HWCOs) with the Director-General (DG) and Regional Directors (RDs).

ARD explained that a number of important developments necessitate a renewed country focus, especially in a resource constrained environment and in the context of health system strengthening based on primary health care (PHC). Countries are requesting/need a way of working - with partners and with resources - that is less fragmented. Sound National Health Strategies/Plans (NHSPs) are critical to the achievement of Millennium Development Goals (MDGs) and other health development goals; and in the implementation of the Paris Declaration, through the International Health Partnership and Related Initiatives and the Accra Agenda for Action (AAA). The renewal of PHC and a focus on health systems strengthening provide provides important opportunities for making and sustaining health achievements in countries. The realization and implementation of a renewed country focus has thus become more urgent, and requires us to play a strong role in policy development and dialogue.

ARD also highlighted the need for WHO to find ways to share, adapt and apply good practices, experiences and innovations that can help to inform strategic and policy guidance. WHO also needs to make the most of the current human resources within the Secretariat, especially in times of financial crisis, and to be strategic in its use of the Country Cooperation Strategy (CCS). It needs to enhance the role of Governments in health partnerships; and focus resource mobilization efforts for activities in support of the actions agreed at the 5th Global Meeting, such as making inter-country and cross-regional collaboration a reality.

Review of key action points agreed in the 8th CSU Meeting

For the follow-up on the actions agreed at the 8th CSU Network Meeting, a table of key action points and their implementation status, was discussed among the participants. The only action point that has not been fully implemented related to the cost of ensuring 'realistic' compliance with Minimum Operating Security Standards (MOSS). Discussions have focused primarily on implementation of the Guidelines for Working with WHO Country Offices, and the ongoing challenges related to MOSS-compliance.

Guidelines for Working with Countries

The application of WHO Guidelines for Working with Countries appears to have become more systematic, with only a few cases of 'parachuting' reported in 2009. Nonetheless there have been a few serious instances where activities not requested by the Country Office or articulated in the CCS, were proposed/carried out by the Regional Office or Headquarters.

It was subsequently agreed that the CSU Network needs to further insist that all the contributions being made in a country, should be responding to the country's needs as articulated in the CCS and workplans. CSUs, with support from HWCOs, should continue to monitor compliance with these guidelines.

Minimum Operating Security System (MOSS) - compliance

The 2.5% taken from staff salaries to cover staff security and other costs remains insufficient for ensuring full MOSS-compliance. A resolution was presented to the 2009 World Health Assembly (WHA), however no significant progress towards MOSS-compliance has been registered.

Participants agreed that WHO Country Teams need to find innovative ways to ensure MOSS compliance, seizing and building on opportunities as they arise, including extra-budgetary resources (e.g. humanitarian funds). The representative from PRP also highlighted the role of HWCOs in increasing funds for MOSS-compliance, by including security costs into funding requests.

CCO commits to:

- Providing, based on the Country Presence Survey, a trend analysis of evolutions in the location of country office premises.

Presentation of the AFRO Country Analysis and Support (CAS) Unit:

Coordinator the AFRO Country Analysis and Support (CAS) Unit presented the mission, functions, and organizational structure of the CAS, as well as areas that require improvement.

Mission

The mission of the CAS is to provide political, strategic, technical, administrative and managerial backstopping from the different levels of the Organization to Country Teams, for effective delivery and improved performance of WHO at country level.

Functions

Under the direction of the Assistant Regional Director, the CAS gathers, analyses, and provides/disseminates data and intelligence. The CAS also provides policy support and advice to the Regional Director, on how to improve WHO's performance in countries in the Africa Region.

Its functions are two fold: i) effective country and inter-country support; and ii) knowledge management and information.

Effective support:

The support provided to WHO Country Teams, by the CAS is for policy formulation, implementation and monitoring.

- Follow-up on the implementation of the WHO Country Focus Policy at country level.
- Provide evidence for follow-up of the managerial process of WHO in collaboration with relevant units.
- Facilitate and ensure synergies between country, and inter-country support.
- Support countries with the development of Country Cooperation Strategies.

Knowledge management and information:

- To generate information and provide orientation for improved leadership capacity
- Manage country and IST reports
- Create and update the Expert Roster in order to make available experts for country offices as well as partners.

The CAS also analyses country reports, responds to the opportunities for technical support articulated in these reports; and assists Country Offices with their workplans (often at the review phase).

Organizational structure

The CAS is comprised of a Coordinator, two Administrative Assistants/Officer; a database manager, and two Medical Officers - one to support to ICSTs and one to provide country support.

Areas for improvement

A number of areas needing improvement, was identified. Each area could be largely attributed to the unfilled positions due to high staff turnover:

1. A policy direction needs to be developed in collaboration with the Partnerships and Resource Mobilization team on linking the General Programme of Work, the Medium Term Strategic Plan and the CCS.
2. Better follow-up of CCS implementation is needed, as is intelligence sharing and communication from the Regional Office to countries, and between countries; and attention should be focused on facilitating the sharing of best practices between these countries.
3. Additional support to the optimal functioning of ICSTs and the Regional Office in their work with countries is needed.
4. The action points agreed during partnership meetings need to be disseminated and followed-up on.

The CSU Network commits to :

- Sharing the attributes of each Regional Country Support Unit.
- Making this information available and ensuring that it is up-to-date, through SharePoint.

2. 5th Global Meeting of HWCOS with the Director-General and the Regional Directors

The 5th Global Meeting of the Heads of WHO Country Offices with the Director-General and Regional Directors was held at the WHO Headquarters in Geneva from 2 to 5 November 2009.

The meeting was attended by 286 participants. Participants included the Deputy Director-General, Assistant Directors-General, Deputy Regional Directors and Directors of Programme Management as well as 141 Heads of WHO Country Offices, and Directors and other senior staff from Regional Offices and Headquarters.

The overall purpose of the three-day policy dialogue between the Director-General, the Regional Directors and the Heads of WHO country offices (HWCOS) was to improve and strengthen WHO performance in countries. Three themes were selected by the Global Policy Group (GPG). These include:

1. Strengthening WHO's response to public health and humanitarian emergencies.
2. Responding to the financial and economic crisis.
3. Strengthening WHO's performance at the country level.

The draft key action points agreed at the meeting were shared with the CSU Network for their inputs. Two important observations were made. First, in terms of responsibility, it was noted that the role of Country Offices was absent from the large majority of outputs related to the key actions - and that Country Teams need to take these actions forward and their roles should be

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