



# Pan American Health Organization



*Regional Office of the*  
World Health Organization

***Program and Budget 2008-2009 end-of-biennium  
assessment/ interim PAHO Strategic Plan 2008-  
2012 progress report (doc: ce146/9)***

146th SESSION OF THE EXECUTIVE COMMITTEE  
Washington, DC, USA, June 2010

# **Report Contents**

- I. Executive Summary**
- II. Introduction**
- III. Methodology**
- IV. Programmatic and Budgetary Assessment**
  - A. Overview of Public Health in the Region (major achievement and challenges during 2008-2009)**
  - B. Programmatic Assessment**
  - C. Budgetary Assessment and Resource Mobilization**
  - D. Analysis of the Prioritization of SOs**
  - E. Strategic Objectives Progress Reports**
- V. Conclusions and Recommendations**

# Methodology Overview

- **The End-of-Biennium Assessment was conducted across all 69 PASB Entities:**
  - Country: 40
  - Subregional: 5
  - Regional: 24
- **Programmatic and budgetary implementation analyses were conducted by:**
  - Organizational level (country, subregional and regional entities)
  - Strategic Objective (SO)

# Methodology Overview (cont.)

## Performance Monitoring and Assessment Criteria:

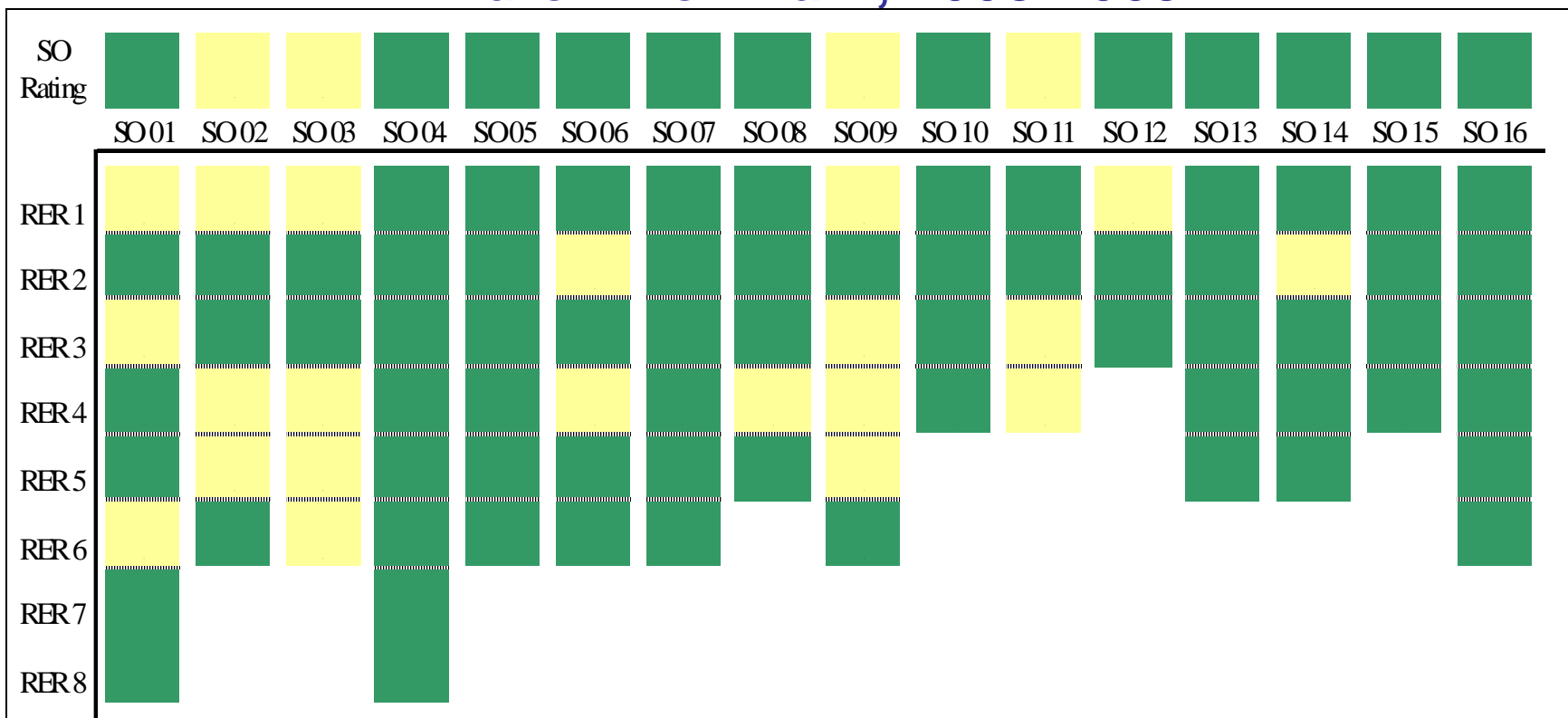
- **MONITORING**

- 90-100% implementation rate = **Green, or “on track”**: no impediments or risks are expected to significantly affect progress.
- 75-89% implementation rate = **Yellow, or “at risk”**: progress is in jeopardy and action is required to overcome delays, impediments, and risks.
- <75% implementation rate = **Red, or “in trouble”**: progress is in serious jeopardy due to impediments or risks that could preclude reaching targets.

- **ASSESSMENT**

- A rate of 75% and above for programmatic or budgetary implementation is considered an acceptable performance at the end of the planning period, as established in the Strategic Plan 2008-2012.

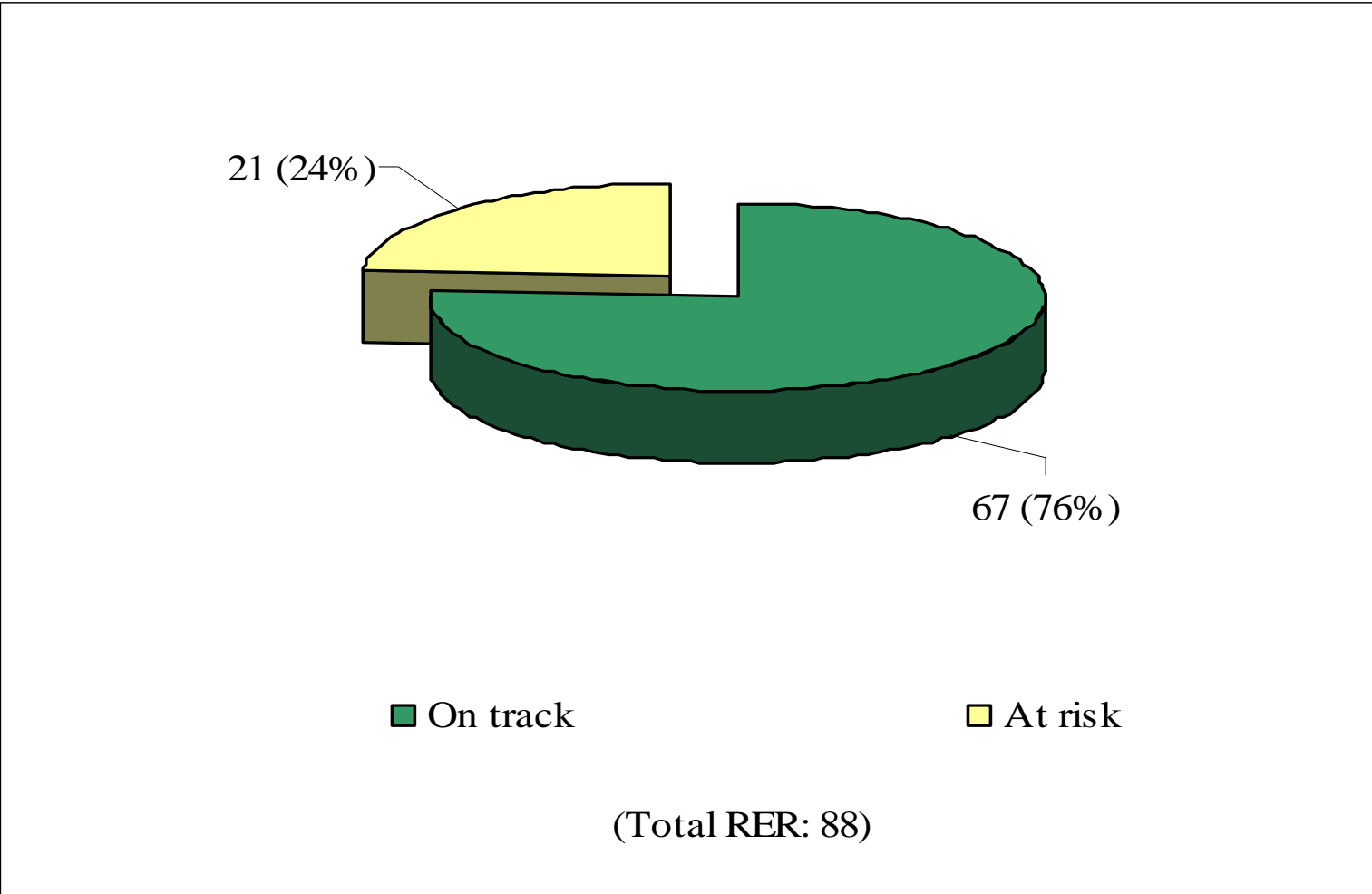
# Progress towards the Achievement of SOs and RERs, End-of-Biennium, 2008-2009



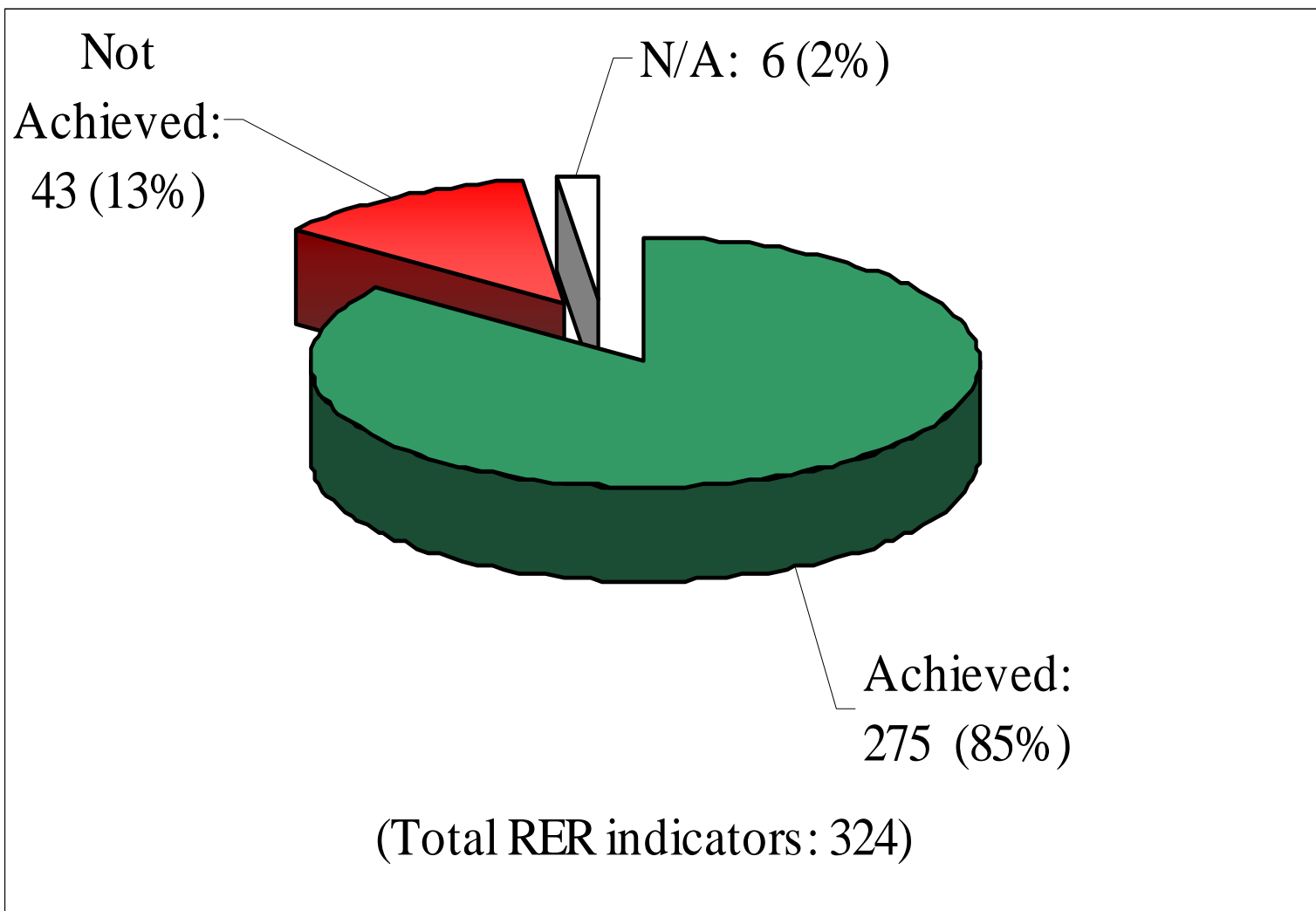
SO 01 Communicable diseases  
 SO 02 HIV/AIDS, TB & Malaria  
 SO 03 Chronic noncommunicable diseases (CNCD)  
 SO 04 Maternal, child, adolescent & elderly health  
 SO 05 Emergencies & disasters  
 SO 06 Health promotion & risk factors  
 SO 07 Social & economic determinants of health  
 SO 08 Healthier environment

SO 09 Nutrition, food safety & food security  
 SO 10 Health services  
 SO 11 Health systems leadership & governance  
 SO 12 Medical products & technologies  
 SO 13 Human resources for health  
 SO 14 Social protection & financing  
 SO 15 PAHO/WHO leadership & governance  
 SO 16 Flexible & learning organization

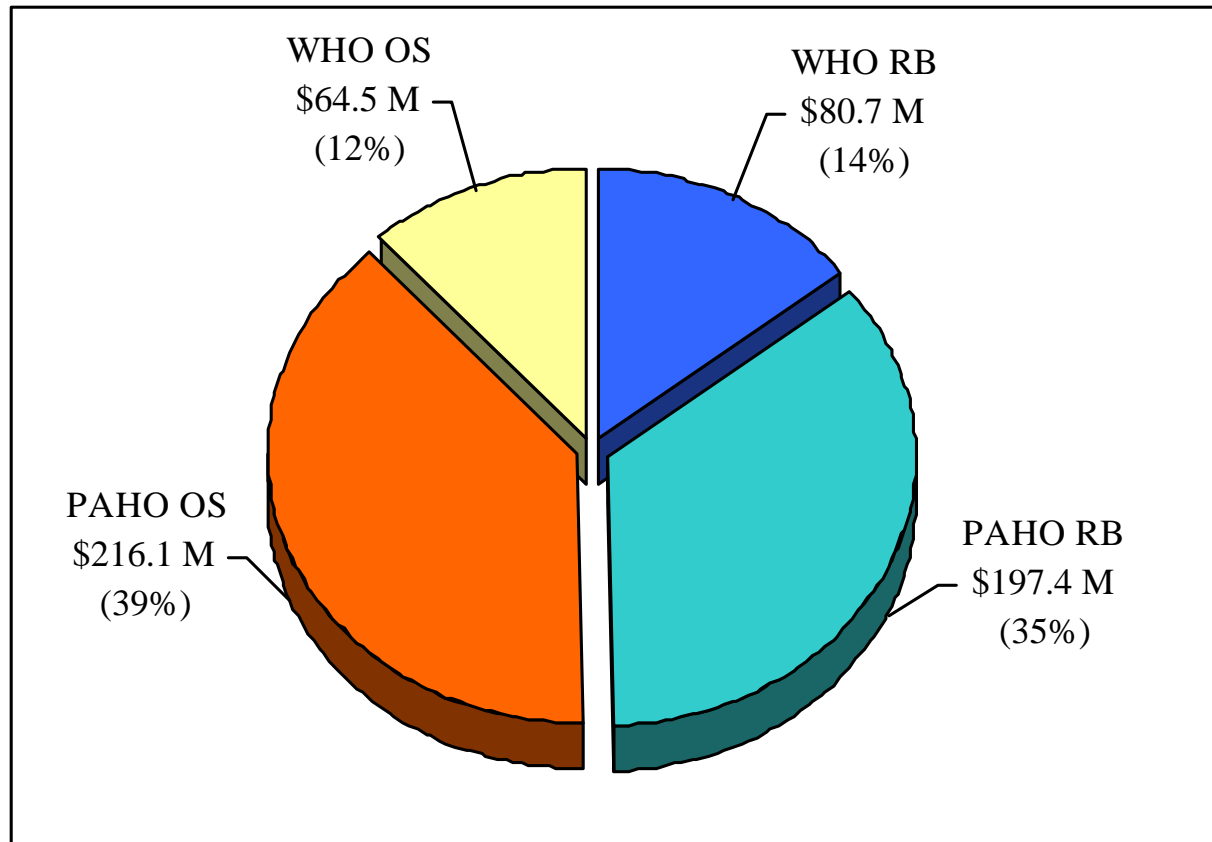
# Progress towards the Achievement of RERs, End-of-Biennium, 2008-2009



## Achievement of RER Indicator Targets, End-of-Biennium, 2008-2009



# Funds Available for the Biennium, 2008-2009, by Source



Approved Program and Budget (PB 2008-2009): \$626 million; total available for the biennium:  
\$559 million (89% of PB 2008-2009)

Note: The figures do not include funds from government-financed internal projects, the Revolving Fund, the Strategic Fund or any other funds that are not directly funding the Strategic Plan.



## Budget Overview by Organizational Level, Biennium 2008-2009

Organizational level	Approved Program and Budget 2008-2009 (US\$ thousand)	Funds available for the biennium (US\$ thousand)	Funds available for the biennium (as % of PB 08-09)	Distribution of funds available (as % of total funds available)
<b>Country</b>	<b>247,537</b>	<b>223,933</b>	<b>90</b>	<b>40</b>
<b>Subregional</b>	<b>44,594</b>	<b>29,852</b>	<b>67</b>	<b>5</b>
<b>Regional</b>	<b>333,936</b>	<b>304,955</b>	<b>91</b>	<b>55</b>
<b>Total</b>	<b>626,067</b>	<b>558,740</b>	<b>89</b>	<b>100</b>

Note: The figures do not include funds from government-financed internal projects, the Revolving Fund, the Strategic Fund or any other funds that are not directly funding the Strategic Plan.

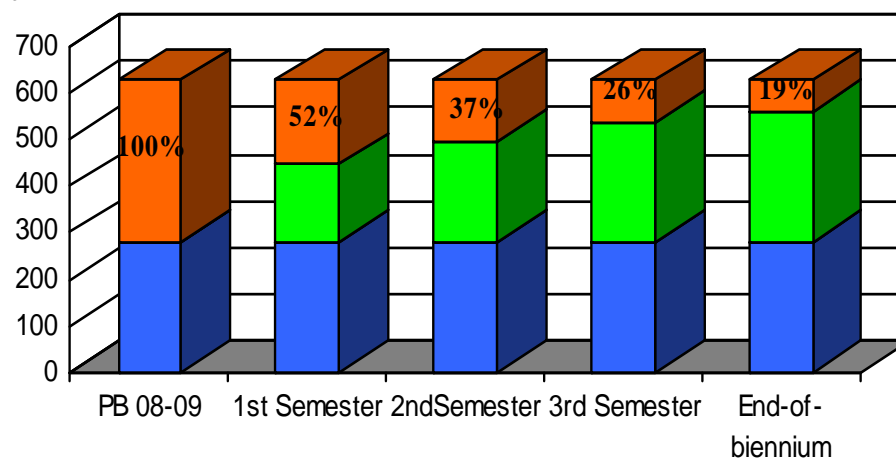
## Budgetary Implementation by Organizational Levels and Source of Funds, End-of-Biennium, 2008-2009

Organizational level	Funds available for the biennium (US\$ thousand)			Expenditure (US\$ thousand)			Implementation rate (%)		
	RB	OS	Total	RB	OS	Total	RB	OS	Total
Country	103,965	119,968	223,933	103,241	103,935	207,176	99	87	93
Subregional	15,276	14,576	29,852	15,116	13,428	28,544	99	92	96
Regional	158,823	146,132	304,955	157,672	131,606	289,278	99	90	95
<b>Total</b>	<b>278,064</b>	<b>280,676</b>	<b>558,740</b>	<b>276,029</b>	<b>248,969</b>	<b>524,998</b>	<b>99</b>	<b>89</b>	<b>94</b>

Note: The figures do not include funds from government-financed internal projects, the Revolving Fund, the Strategic Fund or any other funds that are not directly funding the Strategic Plan.

# Status of the Funding Gap During the Biennium, 2008-2009

US \$  
million

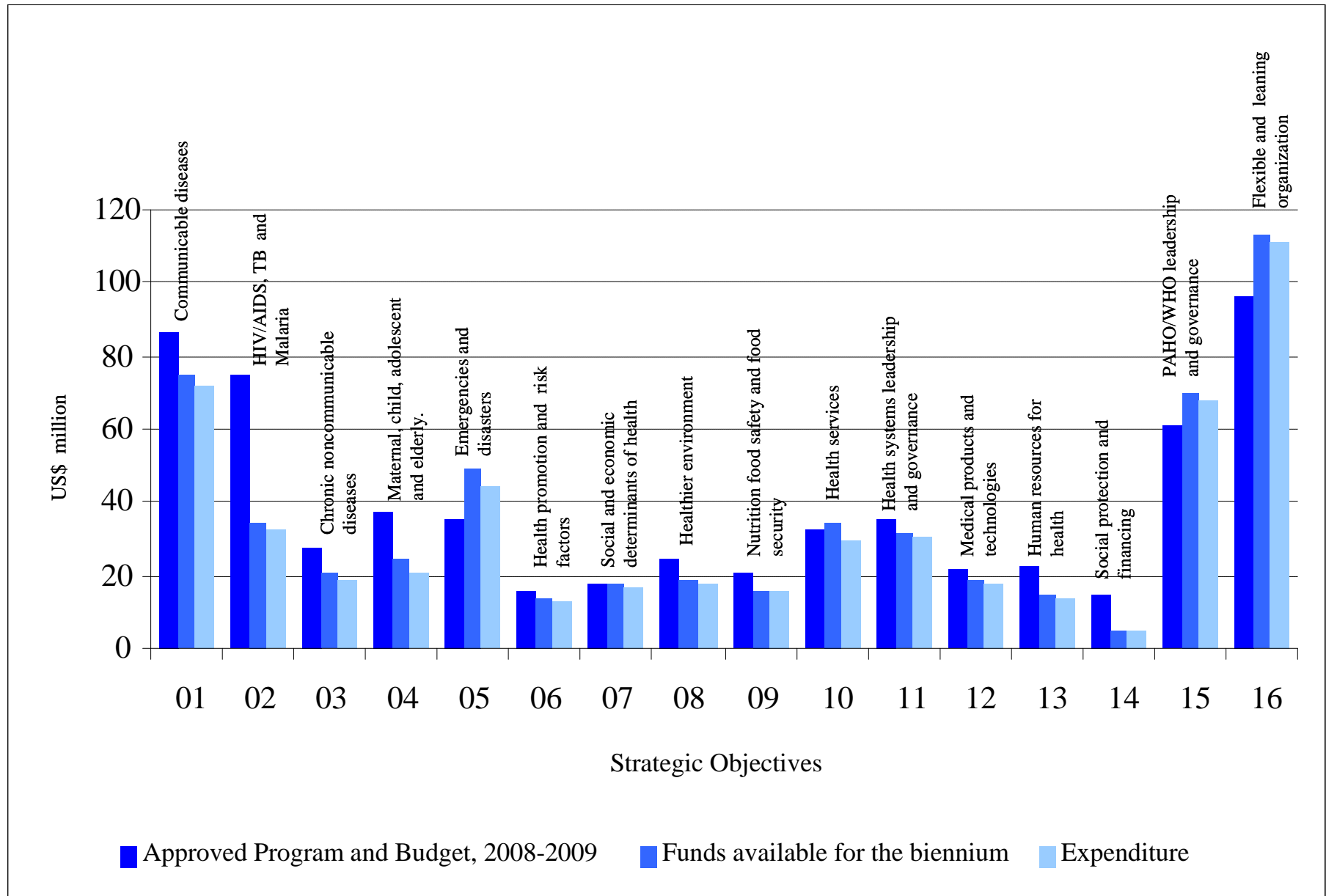


■ RB allocation ■ Resources mobilized ■ Funding gap

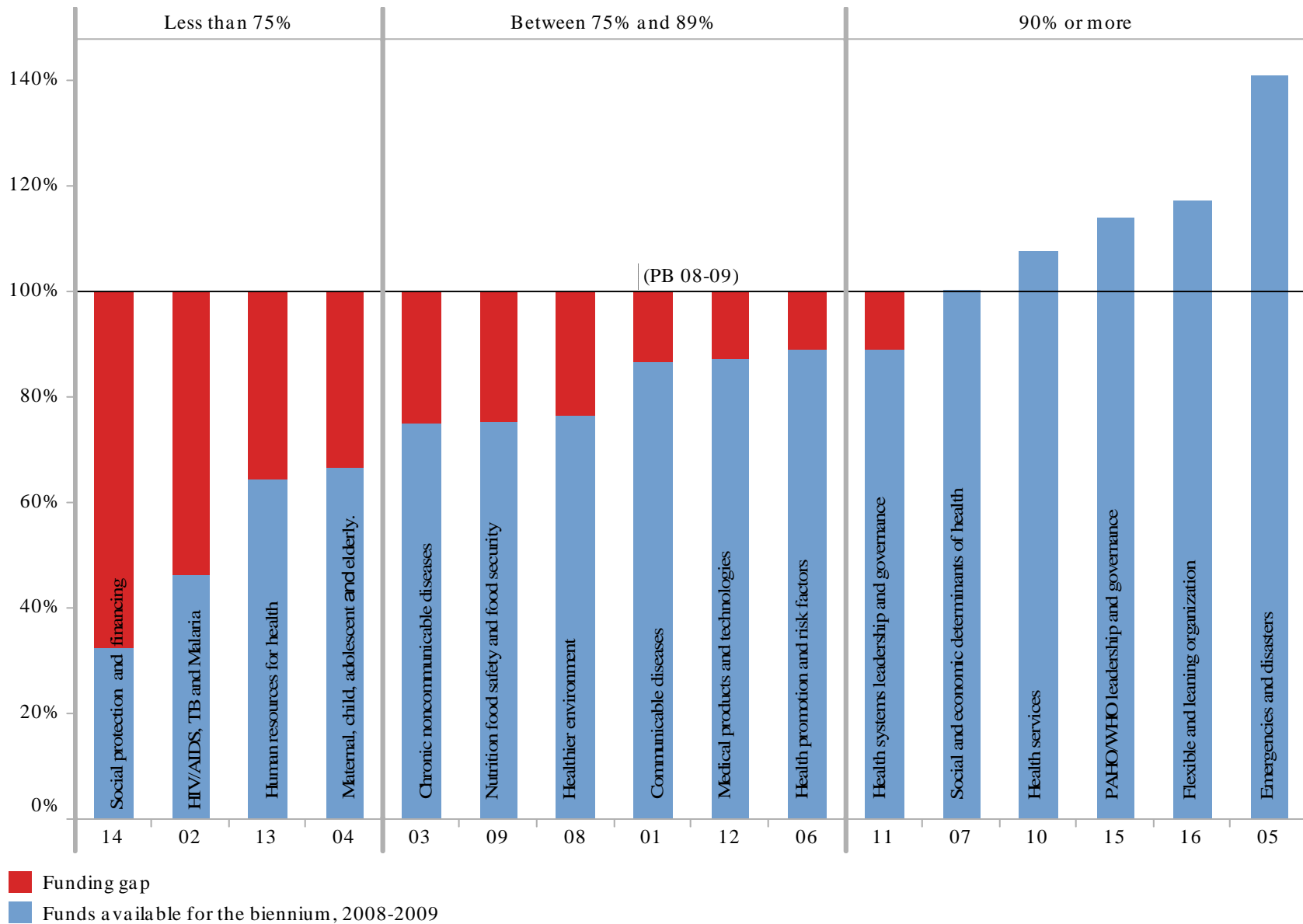
Funding type	Beginning-of-Biennium (US\$ thousand )	End-of-Biennium (US\$ thousand)
<b>Regular Budget</b>	<b>279,067</b>	<b>278,064</b>
<b>Resources mobilized*</b>	<b>0</b>	<b>280,676</b>
<b>Funding gap</b>	<b>347,000</b>	<b>66,327</b>
<b>PB 08-09</b>	<b>626,067</b>	<b>626,067</b>

Note: The figures do not include funds from government-financed internal projects, the Revolving Fund, the Strategic Fund or any other funds that are not directly funding the Strategic Plan.

# Budget Overview by Strategic Objective, 2008-2009



# Funds Available by SO as Percentage of their Approved Program and Budget 2008-2009



## Alignment of Programmatic Priority Ranking with the Allocation of Funds Available, 2008-2009

Strategic Objective	Programmatic priority ranking (a)	Funds available ranking (b)	Difference in rankings (a-b)	Funding according to priority *
SO4 - Maternal, child, adolescent and elderly health	1	9	-8	Significantly underfunded
SO1 - Communicable diseases	2	6	-4	Underfunded
SO2 - HIV/AIDS, TB and Malaria	3	11	-8	Significantly underfunded
SO3 - Chronic noncommunicable diseases	4	8	-4	Underfunded
SO7- Social and economic determinants of health	5	3	2	Acceptable
SO13 - Human resources for health	6	10	-4	Underfunded
SO10 - Health services	7	2	5	Overfunded
SO8 -Healthier environment	8	7	1	Acceptable
SO6 -Health promotion and risk factors	9	4	5	Overfunded
SO14 - Social protection and financing	10	12	-2	Acceptable
SO11 - Health systems leadership and governance	11	4	7	Overfunded
SO12 - Medical products and technologies	12	6	6	Overfunded
SO5 - Emergencies and disasters	13	1	12	Significantly overfunded
SO9 - Nutrition food safety and food security	14	8	6	Overfunded

\* Criteria: Acceptable funding: +/- 2 points of difference in rankings; Underfunded/overfunded: between +/- 3 to +/- 7 points difference ; Significantly underfunded/overfunded: +/-8 or more points

## Main Conclusions and Recommendations

- The 2008-2009 end-of-biennium assessment was the first exercise covering a full biennium within the RBM framework.
- The progress achieved during the 2008-2009 biennium indicates that the Organization is progressing well toward the achievement of the Strategic Plan targets.
- The Planning and PMA tools have contributed to improving the programmatic, budgetary and resource mobilization performance of the Organization compared with previous biennia.
- There is need for closer alignment between the mobilization and allocation of resources with the programmatic priorities identified by the Strategic Plan.
- The resource coordination mechanisms have improved the management and implementation of funds from “other sources”.
- The majority of the RERs “at risk” are related to high-level policy and macro interventions to scale-up or sustain achievements. Increased and sustained joint interventions will be required by Member States, PASB and partners to ensure the achievement of such results. The RER indicator targets not achieved (mostly number of country-type) will also require special attention in 2010-2011 and 2012-2013 biennia.
- The qualitative assessment of RER indicator targets complements the quantitative assessment. The complementary analysis allows showing the real programmatic progress and orients the reprogramming of targets for the next biennia.
- Performance monitoring and assessment of the Strategic Plan requires ongoing dialogue among all levels of the Organization, particularly within SO teams and country entities.

**Thank you!**