
Evaluation of the WHO 13th General Programme of Work Annexes



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Photo caption: Nurse attending to a patient in the dengue ward at Mugda Hospital in Dhaka, Bangladesh, September 2023

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Annex 1: Terms of Reference

Background and rationale

The Thirteenth General Programme of Work, 2019-2023, extended to 2025 (GPW13) of WHO places countries at the centre of its response. It aims to reach Triple Billion targets by 2023: **1 billion more people benefitting from universal health coverage (UHC); 1 billion more people better protected from health emergencies; and 1 billion more people enjoying better health and well-being** (1). The WHO Transformation was launched in 2017, with the goal of “making WHO a modern, seamless, impact-focused organization to better help Member States achieve the health-related Sustainable Development Goals, in the context of United Nations reform” (2).

The WHO results framework, developed in consultation with Member States, tracks the joint efforts of the Secretariat, Member States and partners to meet the GPW 13 Triple Billion targets and achieve the health-related Sustainable Development Goals (SDGs), as well as to measure the Secretariat’s contribution to that process (3),(4),(5). Three components of this framework are: impact measurement consisting of 46 outcome indicators (39 of which are SDGs—the remaining were approved in World Health Assembly resolutions), Triple billion targets and related indices on healthier populations, UHC and health emergencies protection, and health adjusted life expectancy –a comprehensive indicator that connects all three billion targets: the output scorecard measuring the contribution of the Secretariat across six dimensions; and, qualitative case studies, capturing experiences and progress in countries.

Recognizing the importance of the results framework to define and measure WHO impact at the country level, the WHO Executive Board approved the organization-wide evaluation workplan for 2022-2023, which included the “evaluation of the contribution of data and delivery to the implementation and impact of WHO GPW13 and transformation” (6). In addition, at the 35th meeting of the Programme, Budget and Administration Committee of the Executive Board (PBAC35) in January 2022, the African Region submitted a request for an additional similar evaluation of the GPW 13 focusing on “identification of low-risk, high-yield opportunities, as well as areas requiring additional investments towards achievement of the Triple Billion targets”. This evaluation was further referenced in the Director-General’s report to the Executive Board in January 2023 (document EB152/34) ¹ on the Secretariat’s implementation plan on reform, along with reference to the added element to the evaluation, requesting identification of low-risk, high-yield opportunities, as well as areas requiring additional investments towards the achievement of the Triple Billion targets (7).

¹ The Director-General’s report proposed evaluations of the contribution of data and delivery to the implementation and impact of GPW 13; and the mid-term evaluation of the GPW 13 to identify low-risk, high-yield opportunities, as well as areas requiring additional investments towards achievement of the Triple Billion target. Given that GPW 13 is in its sixth year of implementation, a full evaluation instead of a mid-term evaluation is proposed, with a view to making forward-looking recommendations for GPW 14, and combine two evaluations into one covering both aspects with a view to benefiting from synergies from combined analysis and ensuring coherence in the recommendations.

This evaluation will aim to address all these requests. It will incorporate findings and lessons from recently completed WHO independent evaluations, as appropriate, such as the evaluations of WHO transformation (2021) (8), results-based management in WHO (2023) (9), and WHO reform, third stage (2017)(10). It should also benefit from relevant performance audits, particularly those on the Secretariat's results reporting system and the external auditor's report (11).

Evaluation scope and purpose

The evaluation is taking place at a time when GPW 13 has two more years to complete, and preparations for the next General Programme of Work (GPW 14) are soon to get underway. In addition, the context in which WHO is operating has changed dramatically with the external shock of the COVID-19 pandemic. Given these factors, the evaluation is expected to be largely formative and forward-looking, seeking to feed into discussions and decisions regarding GPW 14 development.

The evaluation scope covers all of the WHO Secretariat's activities at the global, regional and national levels in implementing GPW 13, including those related to use of data and reporting on the achievements of GPW 13. The period covered by the evaluation is 2017 to 2023 and includes the launch and implementation of the transformation agenda and GPW 13. The evaluation will pay particular attention to the impact of GPW 13 at the country level, and specifically how it has been received, how has it changed WHO interactions with the countries, and how it has helped shape the direction and contribution of its programmes.

The evaluation is intended for the Secretariat and Member States to learn from the reflection on the implementation of GPW 13 and to provide critical inputs for the formulation of GPW 14, and to improve the results framework. The evaluation will examine the development and formulation of the results framework and theory of change and its measurement, and the contribution of data and delivery to the implementation and impact of GPW 13. It will provide suggestions to make the results framework of GPW 14 most appropriate and fit for purpose. It will also examine achievements and challenges related to the implementation of GPW 13 and aim to suggest areas of work that present opportunities for impact.

Evaluation objectives

The objectives of the evaluation are to:

1. Assess the appropriateness of the results framework of GPW 13 in facilitating the achievement of Triple Billion targets and associated organizational goals, including whether the application of the results framework provided the following:
 - accurate and timely impact measurement of progress towards the Triple Billion targets and the health-related SDGs;
 - appropriate measure of the Secretariat's contribution across the six dimensions of the output scorecard;²
 - evidence of the utility of the framework from experiences captured through qualitative case studies.
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2. Assess the extent to which WHO was able to focus on the goals of GPW 13 by aiming for measurable impact in countries in a holistic and seamless manner and identifying the potential for new approaches that facilitate the achievement of GPW

² Six dimensions of the output scorecard: (1) effective delivery: leadership function; (2) Achievements of results in ways leading to impacts; (3) delivering value for money; (4) impactful integration of gender, equity and human rights;(5) effective delivery: technical support at country level; and (6) effective delivery: global goods.

13 goals.

3. Identify areas of work in which good progress was made by countries in achieving targets and intended outcomes of GPW13, and in which challenges were met, and analyse the factors that facilitated or hindered the achievements, including the ability of WHO to effectively support countries to:
 - establish priorities based on data and evidence;
 - identify resources for acceleration;
 - implement high impact interventions against country priorities;
 - monitor public health policy and health service delivery programmes.
4. Draw lessons from the analyses, and make recommendations for action, for the WHO Secretariat as well as for Member States, for sustaining results and for development and subsequent implementation of GPW 14, including identification of opportunities and areas requiring additional investment towards achievement of the Triple Billion targets and greater alignment and acceleration of the SDGs.

Evaluation approach and methodology

The evaluation will be conducted using a combination of **quantitative and qualitative methods**, including:

- **a desk review** of available documentation, such as: reports of the Secretariat, Independent Expert Oversight Advisory Committee (IEOAC), Programme, Budget and Administration Committee of the Executive Board (PBAC) and the Executive Board; Secretariat materials related to the processes, outputs and results; and selected independent evaluations and performance audits;
- **key informant interviews and/or online surveys of key internal and external stakeholders**, including WHO senior management; the focal points for GPW data, delivery and monitoring, for planning, budgeting and results reporting, and for implementing the transformation agenda across the Organization; WHO representatives and staff at the regional and country levels; Member States representatives; and other WHO staff and its partners as required;
- **country case studies** examining the results achieved and the impact of GPW 13, while identifying good practices, challenges and lessons.

Consultations with Member States through appropriate mechanisms will be conducted at the inception, the data collection and validation stages of the evaluation.

Evaluation management and governance

In order to ensure independence and credibility, the evaluation will be conducted by an **external independent evaluation team** and managed by the WHO Evaluation Office.

The evaluation team will have appropriate knowledge of the subject of the evaluation and skills mix, as well as relevant experience in performing similar evaluations involving organizational reform in multilateral or United Nations organizations.

A senior member of the WHO Evaluation Office will serve as the **Evaluation Manager**. The Evaluation Office will provide overall quality assurance of the evaluation in adherence with the United Nations Evaluation Group (UNEG) norms and standards. It will also provide the necessary support to the evaluation team during the evaluation exercise (finalization of methodology, facilitation of the evaluation process, identification of relevant documentation and data).

An **Evaluation Reference Group** (ERG) will be established in order to ensure the evaluation's relevance, accuracy and utility through a consultation and validation process. The ERG will include relevant staff from the three levels of the Organization (such as representatives of Executive Management and the Global Policy Group; representatives from the Data, Analytics and Delivery

for Impact Division, and the departments of Country Strategy and Support and Planning Resource Coordination and Performance Monitoring; representatives from the Actions for Results Group, and representatives from the regional offices), who will be nominated by the Director-General's Office and the regional directors. The ERG will review the key deliverables (the inception report and the draft report) of the evaluation.

The Independent Expert Oversight Advisory Committee will be kept informed and consulted on the evaluation as appropriate.

The evaluation process

Preparatory phase (April to mid-May 2023): The WHO Evaluation Office will develop the short Terms of Reference (ToR) and establish the ERG through a consultative process. An external independent evaluation team with the necessary skill mix will be selected by the WHO Evaluation Office.

Inception phase (mid-May to mid-June 2023): Based on the desk review of initial documentation and consultation with internal and external stakeholders, the evaluation team will prepare the inception report. The inception report should formulate detailed evaluation questions and sub-questions; develop the methods and tools for data collection and identify sources of data; and, plan for the country case studies. The inception report should be circulated to the ERG for its review and comments in mid-June. Consultations with the Member States through appropriate mechanisms will also be conducted at this stage to clarify their expectations.

Data collection phase (June-July 2023): The evaluation team will lead the data collection from a variety of internal and external stakeholders through agreed tools. Country case studies will be conducted during this period to the extent possible.

Data analysis and reporting (August-mid-September 2023): The evaluation team will present early findings of the evaluation by 18 August 2023, aiming to feed into the early preparatory process of GPW 14. The draft report is expected to be ready by mid-September for review and validation with the ERG, and the final report will be presented at the end of October.

Dissemination phase: The WHO Evaluation Office is responsible for submitting the final report to senior management and Member States, providing it to key stakeholders, such as relevant departments and regional offices, and disseminating it through its website. The WHO Secretariat also will disseminate the evaluation report through its networks. A summary of the report will be presented to the EB/PBAC in January 2024.

Evaluation timeline

Key milestones	Date
ToR finalized	28 April 2023
Selection and contracting of evaluation team	10 May 2023
Submission of the inception report	15 June 2023
Review of the inception report by ERG	mid-June 2023
Presentation of the inception report to Member States	late-June 2023
Data collection	June-July 2023
Presentation of preliminary findings	18 August 2023
Submission of the draft report	15 September 2023
Review of the draft report by ERG	Late-September 2023
Presentations of key findings and recommendations	October 2023
Final report	27 October 2023
Dissemination	November-December 2023

Annex 2: Evaluation Matrix

Key Evaluation Question (KEQ)	Sub-e Evaluation Question (SEQ)	OECD-DAC criteria mapping							Link to Conceptual framework	Instruments & Methods							Findings
		Re	Co	Ef	Ey	Su	Im	Xc		Desk review	Quantitative data analysis	KII	FDG	HWCO Survey	MS Survey	Country Deep dive	
Objective 1: To assess the appropriateness of the results framework of GPW 13 in facilitating the achievement of the Triple Billion targets and associated organizational goals																	
KEQ1: How robust was the GPW 13 theory of change and results framework?	What type of instrument and process is GPW 13?	Re	Co	Ef	Ey	Su			<ul style="list-style-type: none">Strategy formulation	X		X					1, 2
	Is the GPW 13 theory of change comprehensive?	Re	Co	Ef	Ey	Su		Xc	<ul style="list-style-type: none">Strategy formulation	X		X	X	X	X		3
	How strong are the linkages between impact, outcomes, outputs and indicators from GPW 13?	Re		Ef	Ey				<ul style="list-style-type: none">Strategy formulationStrategy cascading & steering	X		X					4, 5, 6, 7, 8, 9
	How SMART is the results framework?	Re		Ef	Ey				<ul style="list-style-type: none">Strategy formulation	X	X	X	X	X	X		
KEQ2: How robust and effective was the accounting for results?	To what extent did GPW 13 address supporting monitoring and evaluation framework, reporting and plans?			Ef					<ul style="list-style-type: none">Strategy cascading & steeringDemand for Data and Information Use	X		X					10
	How often are/have results been reported? What time lag can data reporting cause? (e.g., reporting 2019 data in 2021)?			Ef					<ul style="list-style-type: none">Strategy cascading & steeringDemand for Data and Information Use	X		X					11, 13
	Where gaps in indicators and data collection exist, how have the Secretariat and Members States worked towards bridging these gaps so that adequate GPW 13 reporting can ultimately be provided?			Ef		Su		Xc	<ul style="list-style-type: none">Strategy cascading & steeringDemand for Data and Information Use	X		X	X	X	X		12
KEQ3: To what extent is there evidence that the results framework and related reporting are used by Member States and the Secretariat to drive impact at country level?	To what extent have the different Member States aligned with the goals of GPW 13 and integrated them into their planning and implementation of health initiatives?	Re	Co	Ef					<ul style="list-style-type: none">Strategy cascading & steeringDemand for Data and Information Use	X		X		X	X	X	14
	Is there evidence that the results framework was used to drive decision-making, prioritization on areas and beneficiaries of greatest needs, resource allocation by Member States, the Secretariat and partners?	Re	Co	Ef				Xc	<ul style="list-style-type: none">Strategy cascading & steeringDemand for Data and Information Use	X		X	X	X	X	X	15, 16, 17

Objective 2: To identify the areas of work in which good progress was made by countries in achieving the targets and intended outcomes of GPW 13, and in which challenges were met, and analyse the factors that facilitated or hindered the achievements (NB: factors that facilitated or hindered achievements are addressed under KEQ7 under objective 3)																	
KEQ 4: To what extent were GPW 13 goals achieved by Member States, and why?	What results have been achieved by Member States in different areas of GPW 13, including differential results across groups? What were the deviations from these plan sduring the implementation period?			Ef			Im	Xc	<ul style="list-style-type: none">Data demand and Information Use	X	X		X		X	X	18, 19, 20, 21, 22, 23, 24, 25
	KEQ 5: Did the Secretariat achieve the strategic and operational shifts outlined in GPW 13, and why?	What was the Secretariat’s relative contribution at headquarters, regional and country level to each of the Triple Billion targets (UHC, HE, HP) within the Member States? What were the deviations from these plans during the implementation period?			Ef	Ey			<ul style="list-style-type: none">Strategy implementation	X	X	X	X	X	X	X	26, 27, 28, 29, 30, 31
	To what extent did Secretariat's activities across the three levels, across regions and across programmatic areas align with and focus on implementing GPW 13? How well has the organization worked as “One WHO” to harness its internal capacities to achieve results?	Re		Ef	Ey	Su		<ul style="list-style-type: none">Cascading & SteeringStrategy implementation	X		X	X		X	X		
Objective 3: To assess the extent to which the Organization was able to focus on the goals of GPW 13																	
KEQ6: To what extent were Member States and the Secretariat able to focus on implementing GPW 13 at country level?	Was GPW 13 focused enough for Member States and the Secretariat to truly prioritize their resources and activities?	Re		Ef				<ul style="list-style-type: none">Strategy formulation	X	X	X	X					32
	Was there sufficient flexibility built into GPW 13 and programme budget to accommodate these factors and changing environment, and to address emerging needs?			Ef	Ey	Su		<ul style="list-style-type: none">Strategy formulationCascading & SteeringStrategy implementation	X		X	X	X	X		33	
	Was there adequate transparency and governance around choices that may have led to deviations? Were there adequate systems in place to manage these decisions and related implications on results and resourcing?			Ef	Ey			<ul style="list-style-type: none">Cascading & Steering	X		X	X					
KEQ7: What external (e.g., COVID, funding) and internal (e.g., organizational issues) explanatory factors can be invoked for success and setbacks? What was their respective contribution to deviations?	What were the external and internal factors that contributedto Member States deviations, successes and setbacks? Do Member States have the systems, capacity and support to successfully deliver on the goals of the GPW 13?			Ef	Ey	Su		<ul style="list-style-type: none">Cascading & SteeringStrategy implementation	X	X	X	X	X	X	X	<ul style="list-style-type: none">34	
	What were the factors that allowed or hindered the Secretariat contribution to MS (e.g., financing, resource allocation, integration across advocacy, policy and implementation activities, operating model and alignmentof activities and priorities across the three levels of the organization...)?			Ef	Ey	Su		<ul style="list-style-type: none">Strategy implementation	X	X	X	X	X	X	X	<ul style="list-style-type: none">34	
Objective 4: To draw lessons from the analyses and recommendations for action, for the WHO Secretariat as well as for Member States, for sustaining results and for development and subsequent implementation of GPW 14																	
KEQ 8: What interventions are required to sustain results achieved to date?	Do Member States and their implementation structures have adequate capacity to sustainably carry out the goals of GPW 13?			Ef				<ul style="list-style-type: none">Strategy implementation	Not applicable							Recommendation 1: To obtain closure on COVID-19 and reset progress towards GPW 13 objectives the WHO Secretariat and Member	

KEQ 9: What are key considerations for the process of defining and implementing GPW 14?	What specific general attributes or principles should guide the definition of GPW 14 and future result framework?	Re		Ef		Su	Im		• Strategy formulation		States should prioritize the following short-term actions for the remaining period.
	What considerations in the strategic planning process should the Secretariat and Member States consider, e.g., cross sectoral inputs, level of consultation required use of evidence, linkages to strategy transformation processes, accountability of Member States and Secretariat, reporting?		Co	Ef		Su			• Strategy formulation		Recommendation 2: WHO should build on GPW 13 and its learnings to ensure that GPW 14 will be an effective results-based strategic instrument
	Are there specific or emerging topics of relevance for GPW 14 consideration compared to GPW 13? On the other hand, how to strengthen focus and define core areas of work?			Ef		Su	Im		• Strategy formulation		
	How can cross cutting aspects of gender, equity and human rights be better integrated into GPW 14?							Xc	• Strategy formulation		
KEQ 10: What adaptations to its processes, systems, organization and partnerships should the Secretariat consider to better support Member States to achieve GPW 14 goals moving forward?			Co	Ef	Ey	Su			<ul style="list-style-type: none">• Cascading and Steering• Strategy implementation		Recommendation 3: The Secretariat should renew efforts to institutionalize changes underway and reap the benefits of strategic and operational shifts

Legend: Relevance- Re; Coherence- Co; Effectiveness- Ef; Efficiency- Ey; Impact- Im; Sustainability- Su; Cross-cutting- Xc

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Annex 4: People consulted during the data collection phase

Total

Sr. No.	Designation	Number of participants	Gender distribution in %
1	Part A: KIIs	43	16 were female (37%) and 27 were male (63%).
2	Part B:FGDs	127	53 were female (42%), 46 were male (36%) and 28 were not identified (22%).
3	Part C1:Country Deep Dives (FGDs)	39	17 were female (44%), 21 were male (54%) and 1 was not identified (3%).
4	Part C 2:Country Deep Dives (KIIs)	6	1 were female (17%) and 5 were male (83%).
5	Total	215	87 were female (40%), 99 were male (46%) and 29 were not identified (13%).

Note: In addition, two semi structured online questionnaires to capture the feedback from Member States and heads of WHO Country Offices yielded 19 responses and 45 responses respectively.

Annex 5: Country Deep Dives

To look at the evaluation from the point of view of a country, six country case studies or deep dives have been conducted in each region. This allowed the independent evaluation team to look at whether and how GPW 13 was implemented and to identify lessons learned from country-based practitioners.

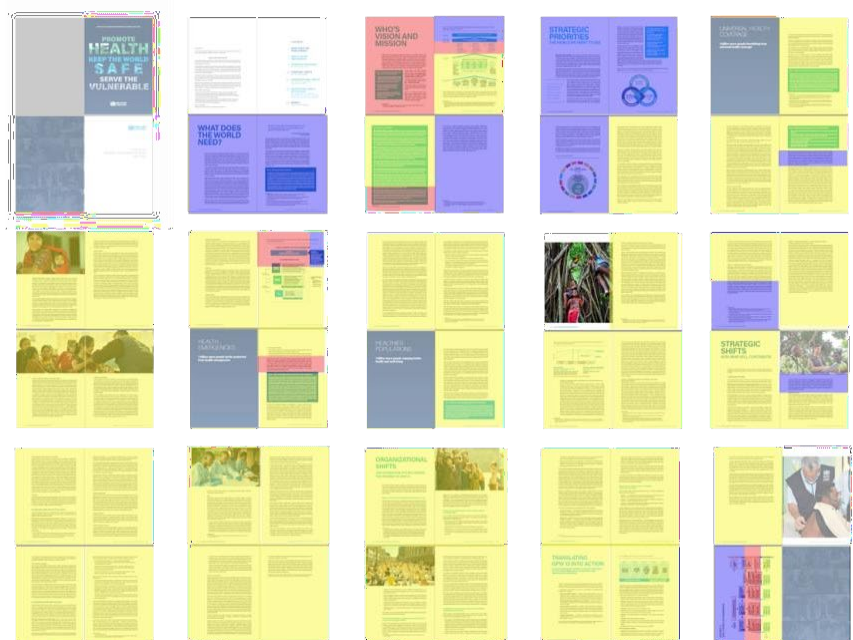
Country case studies focused on key evaluation questions 3 to 10. Each of the country case studies has been carried out through an initial desktop research, focus group discussions with the WHO country representative and their management team and interviews with ministries of health officials in the selected countries. Initially, Botswana, El Salvador and Nepal, among other countries, were chosen. As the case studies for these countries could not happen, the following countries replaced them: India, Rwanda and Sudan.

Selected country	Region	WHO Country Typology	Engaged in the 100d challenge and Delivery Sprint (YES/NO)
Bahrain	EMR	A2- Policy support	NO
India	SEAR	D- Full technical support	NO
Rwanda	AFR	D- Full Technical Support	YES
Solomon Island	WPR	C- Moderate technical support	NO
Sudan	EMR	E- Full technical support with field operations	YES
Tajikistan	EUR	C- Moderate technical support	NO

Annex 6: Mapping of GPW13

Legend:

- Corporate **Strategy** (speaks essentially about what the Secretariat will do)
- Institutional **Strategy** (speaks about what MS should do)
- Global Health **Strategy** (relevant to all global health actors)
- Not specific



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