

Management Response

Evaluation Title	Evaluation of implementation of Regional Flagship Areas in the WHO South-East Asia Region 2014–2018
Commissioning Unit	SE/DPM/PPC
Link to the evaluation	https://www.who.int/southeastasia/publications-detail/9789290228066
Evaluation Plan	Global evaluation plan 2020-21
Unit Responsible for providing the management response	DPMO
<p>Overall Management Response: Accepted</p> <p>An independent evaluation of Regional Flagship Areas Implementation in WHO South-East Asia Region 2014 – 2018 was commissioned by DPM/PPC/SEARO in November 2019. The purpose of the evaluation was to foster reflection on key accomplishments and challenges, and on what has worked well and what could be improved in the pursuit of results, so as to facilitate organizational learning that helps the WHO Regional and Country Teams and partners to better deliver on the commitments made in RD's 1 by 4 initiative.</p> <p>The specific objectives of the evaluation are, to:</p> <ul style="list-style-type: none"> a) document regional progress of each flagship's implementation, identifying achievements and success stories, best practices, and key challenges encountered, and, to the extent possible, its outcomes or impact; and b) make recommendations on the way forward to sustain the gains, accelerate actions and innovate where needed at country and regional level to achieve the impact targets of GPW 13 and Sustainable Development Goals. <p>PPC/DPM in collaboration with an Evaluation Management Group (EMG) comprised of senior management, evaluation and technical experts from the three levels of the Organization guided and coordinated this evaluation. The overall course of this independent evaluation has been designed and implemented using evaluation criteria of Organization for Economic Co-operation and Development (DAC) and the evaluation used a mixed-method (qualitative–quantitative) to collect the information from more than 350 different stakeholders to provide a holistic view of the flagship area implementation the SEA region.</p> <p>There are seven recommendations for the WHO Secretariat and four for the ministries of health in Member States provided in the report by the independent evaluators.</p> <p>Four recommendations to the ministries of health related to sustainability, multi sectoral engagement, funding and external evaluation of flagship areas at country level has been communicated to high level officials at the regional governing body meetings and at the other officials at the country level forums to take the flagship areas forward.</p>	
Management Response Status:	<i>In Progress</i>
Date:	10.02.2022

Recommendations and Action Plan

Recommendations for WHO Secretariat

Recommendation 1: Revisit the scope of Regional Flagship Areas with following additions: <ul style="list-style-type: none"> Including additional areas such as dengue (under the flagship focusing on NTDs), malnutrition leading to stunting (under the maternal and child health flagship), and migrant health (under the flagship focusing on UHC and emergency preparedness) to provide the necessary attention and impetus to these issues. These are areas where WHO is already supporting the ministries of health across several Member States and additional focus and resources would be beneficial. The flagships need to formally set the conditions and provisions for equity to increase access and barriers of care (catering to hard-to-reach populations, geographical access, gender, etc.). This would help in integrating equity related interventions into the Regional Flagship Areas. 				
Management Response	Partially Accepted <ul style="list-style-type: none"> Since Flagships are already revised in 2019 and are to be implemented starting 20-21 the scope for revision can be considered while drafting next set of regional priorities and focus can be on sustaining and accelerating the gains Biennium 2022-23 is the last biennium for implementation of the flagships and will focus on sustaining and accelerating the flagship achievements Include Gender and equity dimensions while operationalizing revised flagship areas. To ensure continuous improvement in the regular availability and analysis of national data remains a challenge. The Regional Office will work closely with Member States to explore ways to amend existing household surveys to capture unmet needs in a methodologically sound manner. Equity dimension can be addressed in areas like UHC and Health emergency and disaster risk management 			
Status:	<i>In progress</i>			
Key Actions	Responsible	Timeline	Status	Comments
Mapping and classification of the revised regional flagship in operational plans	All BCs	Dec 2021	Completed	All relevant top tasks are classified using for revised regional flagship. The GSM operational plan module has regional flagship classification inbuilt for 2022-23 operational planning
Incorporate GER in BC discussion for development of operational plans and during monitoring	All BCs	Dec 2021	Ongoing	Started GERD Gender Equity, Rights and Disability sensitization to all BC during the operational planning 2022 23 and also used the Scorecard GER to assess outputs for GERD dimension for MTR and EOB
Better understand and identify barriers of care, which lead to financial	HSD/HFG	Dec 2023		Including questions on unmet needs in countries where household surveys are planned despite the pandemic.

hardship but are not captured in the current SDG measurement				Analyze the collected data to take a stock of unmet needs, and equity dimension associated with it. Contribute to WHO's overall proposal of including unmet needs in the revised version of SDG3.8.2 indicator . A scoping review was conducted in 2020; country-level surveys will be conducted in Sri Lanka later 2022 and in more countries in 2023
Annual review of gender, disability and marginalized and vulnerable people mainstreaming into Flagship 6	WHE (in collaboration with HSD)	2022-2023	ongoing	In the 2022-23 biennium, South East-Asia Region plans to adapt the Global Competency Standards that integrate the knowledge, skills and attitudes required by health workers in specific settings to provide quality health services for refugees/ migrants.

Recommendation 2: Develop a standardized monitoring and evaluation framework. The framework will ensure that stakeholders have performance data for decision-making as well as to track progress across Member States for each of the flagships. This can be through: <ul style="list-style-type: none"> Regular reviews and independent evaluations for each of the flagships. Standard templates for monitoring and reporting across all countries. Periodic (annual) sensitization workshops for WHO country offices and Ministry of Health officials. Defined targets as per the monitoring and evaluation framework 				
Management Response	Partially accepted <ul style="list-style-type: none"> PPC/HSD in coordination with the other technical units to implement Regional Results Measurement Framework as a monitoring framework with targets for each country based on the recommended available progress indicators by the evaluators Review Regional Results Measurement Framework and add additional indicators as needed to cover the revised flagship for biennium 2022-23 Framework with baseline will be confirmed with WR for country level monitoring PPC/DPM will commission a second independent evaluation on the implementation of the Flagships, 2019-2023 at the end of 2023			
Status:	<i>In progress</i>			
Key Actions	Responsible	Timeline	Status	Comments
Annual review of the flagships	DPM/RDO		<i>On going</i>	Continue the process of RDO review of flagships and to present progress updates to the Regional Committee in 2023

Identify flagship related regional KPI indicators and monitor its progress (RMF)	PPC/DPM /HSD		<i>Status on regional KPI prepared by June 2022</i>	Review and assess regional KPI and identify indicators related to flagship areas
Periodic (annual) sensitization workshops for WHO country offices and Ministry of Health officials	GBM/RDO		<i>Ongoing</i>	Use the existing MS briefing and governing body meetings under PB implementation to sensitize the WCOs and MOH officials, ongoing and will be increased

<p>Recommendation 3: Accelerate efforts for advocacy initiatives: WHO may consider accelerating their efforts towards the political advocacy which will garner political commitment and will lead to improved ownership and increased investment from Member States. This can be done by:</p> <ul style="list-style-type: none"> Considering establishing a regional flagship caucus with representation from parliamentarians, civil society organizations and community representatives. Accelerating efforts to engage with the private sector and encourage integration with the public sector 				
Management Response	<p>Partially accepted</p> <p>Accepted for the accelerating WCO and regional efforts for flagship:</p> <ul style="list-style-type: none"> PIA will develop a advocacy package based on the available material to be used at the WCO level Country level to conduct at least one advocacy event on flagship concept with all stakeholders per year CSU to monitor and report to the senior management <p>Regional flagship caucus may not be possible however the update on flagship can be presented to the MS during briefing and regional committee meetings</p> <p>In line with the parliamentary engagement initiative of WHO, engage with parliaments to advocate for the regional health agenda, including the flagship programmes.</p> <p>Establish Regional partners and advocacy meetings</p>			
Status:	<i>In Progress</i>			
Key Actions	Responsible	Timeline	Status	Comments
Conduct a partner and donor landscaping for	PRM/RDO	Aug 2022	<i>Ongoing</i>	Supports advocacy efforts as well as the goals of Recommendation 5 below.

the Flagships and their implementation.				
Develop a standard message for WCO to conduct flagship advocacy events	PIA/DPM	Aug 2022	<i>Ongoing</i>	Use the existing material relevant for flagships to be used by WCOs
Conduct at least one advocacy of flagship at country level	WRs/CSU /RDO	Dec 2022	<i>Ongoing</i>	Country support unit to support countries to hold these events including during the Prioritization workshops for PB 2024-25.
Organize partners meetings at country level to support the regional health partnership	WRs/CSU/PRM	Dec 2022	<i>Ongoing</i>	PRM and Country support unit to support countries to hold these events including during the Prioritization workshops for PB 2024-25.
Present Flagship Programmes at regional partners forum	PRM/RDO/WRs	Nov 2022	<i>Ongoing</i>	PRM/RDO. CSU and departments to coordinate this event
Focused update on regional Flagship initiative to be presented to the MS briefing and regional committee meeting	CSU/RDO	Sept 2022	<i>Ongoing</i>	Regional update on SEAR flagship progress to be developed and presented
Specific actions will be developed by Flagship areas to garner political commitment towards flagship	All relevant departments and WCOs	Sept 2022	<i>Ongoing</i>	Each department owning flagship areas to focus on garnering politic commitment for the flagship implementation.

Recommendation 4: Establish a funds mobilization strategy: WHO could establish a funds mobilization strategy (customized to country context) that assesses future funding needs and identifies specific actions to address any potential shortfalls and improve donor management relationships.				
Management Response	Partially Accepted <ul style="list-style-type: none"> A Global Resource mobilization strategy is already in place 			
Status:	<i>Not initiated</i>			
Key Actions	Responsible	Timeline	Status	Comments
Analysis of resource allocated for the flagship areas	PPC and PRM/RDO	Aug 2022	<i>Ongoing</i>	Since PB 2022-23 classification is there by top task, use them as source to identify the related TT and resource allocation for flagship
Conduct a partner and donor landscaping for the Flagships and their implementation.	PRM/RDO	Aug 2022	<i>Ongoing</i>	In line with the Global Resource Mobilization Strategy, establish a plan to widen the partners and donors base for the flagship programmes

Recommendation 5: Develop a multisectoral accountability framework: WHO could leverage its convening power to support Member States in effective multisectoral collaboration with key actors both within and outside the health sector. The Organization could: <ul style="list-style-type: none"> Conduct a comprehensive partner and donor landscaping, and map and engage with key ministries, other than the ministries of health. Develop a multisectoral accountability framework for each of the flagships at country level that will clearly lay down the roles and responsibilities of each of the partners. 	
Management Response	Not accepted <p>This recommendation to be taken with the recommendation number 3 on advocacy initiative as multi sector accountability is difficult to achieve at country level due to differences in the mandates of the organization and agencies</p> <p>All MS were assisted to establish a multisectoral governance mechanism (working group or committee) comprising of representatives from different government ministries as well as civil society and private sector to prevent and control NCDs at country level. This was for overall multisectoral response and not only limited to NCD Flagship. Their existence and functionality are periodically assessed every two year as part of the national country capacity surveys. As of 2021, all the Member States except 2 have established formal multisectoral governance mechanisms. Most of the these are fairly young established in or after 2017.</p> <p>Since there are already mechanisms for in countries for various program areas under flagship, need for creating separate one for each flagship areas</p>

Status:	<i>Not initiated</i>			

<p>Recommendation 6: Strengthen Member States' capacity for evidence-based research: Research will not only promote the development of guidelines and plans relevant to country context, but also build the country's capacity to invest in research and innovation.</p> <ul style="list-style-type: none"> WHO could form a research network across the Region involving academia and institutions from all Member States, which can be further supplemented by WHO's technical expertise at the regional and country level. 				
Management Response	<p>Accepted.</p> <ul style="list-style-type: none"> R&I/HPN to develop priority areas of research and innovation based on the needs of the country and regional level Strengthen Member States' capacity for evidence-based research Develop a dissemination plan for the priority research on flagship areas 			
Status:	<i>Not initiated</i>			
Key Actions	Responsible	Timeline	Status	Comments
Analysis of the gaps in evidence to inform policies and programs and prioritizing key areas for research investments in a real and dynamic manner.	Technical directors, and responsible person for specific technical programs.	By Dec 2023		Some technical programs and departments have undertaken a research prioritization exercises in the past. All the priority technical programs (starting with flagship programs) will be facilitated to carry out this exercise in this biennium and regularly update it as the evidence need evolves over time with changing policy and programmatic needs
Developing Evidence informed network at regional level with participation from Member states.	R& I unit/HPN	2022-23		Organizing 'Evidence to policy' workshop base on methodology developed by EVIPNET on priority technical areas and generic analytical tools
Support national teams in Members states to collate and analyze evidence to develop	R& I unit/HPN	2022-23		

evidence-informed policy-briefs				
Supporting research in priority areas with involvement of national institutions and creating a research registry to bring visibility to the research supported by WHO	Responsible technical officers with facilitation from R&I unit/HPN;	Ongoing.		<p>The regional research ethics review committees established in April 2022 to provide ethical & technical oversight of the research.</p> <p>Some research is already supported by respective technical units, which is reviewed and approved by R&I unit. An online research registry has been set up which will show all the approved research across all technical areas as of now. Technical units will be encouraged and supported to organized call for research proposals to ensure participation of as many research institutions as possible. A research registry will be maintained by R&I unit.</p>

Recommendation 7: Strengthen human resource capacity in WHO country offices: it is suggested that the Regional Office assess the current staffing and skills mix in WHO country offices in the light of the new flagship priorities, addressing gaps in relevant areas and providing capacity building opportunities to existing staff.				
Management Response	Accepted <ul style="list-style-type: none"> Refine process of review of HR proposals from BCs with focus on Regional Flagship 			
Status:	<i>Not initiated</i>			
Key Actions	Responsible	Timeline	Status	Comments
Conduct discussions with RO technical units and the WCOs annually to identify the HR gaps/needs at country level to achieve flagships objectives	PPC/DPM	Nov 2021 and Nov 2023	<i>Initiated and ongoing</i>	HR analysis and discussion focused on country presence and also regional priorities