

DFID: Working in partnership with the World Health Organization: New Institutional Strategy (2008-2013)**Response by the Wellcome Trust**

August 2008

1. The Wellcome Trust is the largest charity in the UK. It funds innovative biomedical research, in the UK and internationally, spending over £600 million each year to support the brightest scientists with the best ideas. The Wellcome Trust supports public debate about biomedical research and its impact on health and wellbeing.
2. The Wellcome Trust invests substantially in research around global health issues and we have a number of major programmes focused on building research capacity in developing countries. The Trust is therefore pleased to provide comments on how the UK Government, and other UK organisations, interact with the World Health Organization (WHO). We would be happy to discuss any of the issues raised in our response in further detail if that would be helpful.
3. The Trust welcomes the production of a cross-departmental UK Institutional Strategy for working with WHO. The Strategy provides an opportunity to consolidate the Government's approach to WHO, and to clarify the roles and responsibilities of individual departments. For instance, it may be appropriate to evaluate whether the representative lead for the WHO should be held by the Department of Health while DFID provides the majority of funding for global health development. The Institutional Strategy should clearly state the respective roles of each department and ensure a coordinated approach. It should also reflect the priorities of the DFID research strategy and the forthcoming Global Health Strategy.
4. The Institutional Strategy should consider the increasing number of UK stakeholders involved in global health and development issues. Rather than focusing solely on government, the Strategy should also take into account how other organisations such as the Wellcome Trust and the UK Collaborative on Developmental Sciences interact with WHO.
5. Although the Institutional Strategy focuses on the medium term, it is also important to maintain efforts to address longer-term issues, such as remaining actively engaged in shaping the UN and its agencies to ensure they are best equipped for the future. In addition, the Institutional Strategy should be sufficiently flexible to provide support for any emerging or unexpected health issues in the short term.
6. The main points the Trust would like to see emphasised in the Strategy include:
 - the importance of research to strengthen health systems;
 - an increasing role for the UK in global health advocacy;
 - the need for the WHO to engage in effective partnerships to tackle global health priorities.

Do you agree that the UK should support WHO across the three broad areas of the WHO Eleventh Global Programme of Work¹?

7. DFID identifies five health challenges facing the world in the 21st century. As a well-recognised, authoritative agency with global reach, WHO is well placed to address these challenges. We therefore agree that the UK should continue to support WHO as an effective way to have an impact on global health issues. The Institutional Strategy should support the WHO across the three broad areas of its eleventh Global Programme of Work: fundamental needs, strategic issues and operations. However, the Strategy also provides the opportunity to identify areas where WHO might need further support, or where the UK could provide additional advice and expertise.
8. For example, within 'operations', fostering partnerships is identified as a key objective. Partnerships are crucial to tackle global health and development issues, but there have been some instances where concerns have been raised that WHO's role as a partner was not entirely clear. The Institutional Strategy should discourage WHO from acting only as an 'observer' in partnerships in order to be actively engaged in collaboration.
9. The Trust agrees with the view of the House of Lords Select Committee on Intergovernmental Organisations² that "WHO's remit and resources should be developed in order to encourage and support collaboration and rationalisation among the many actors on the international health stage". The Institutional Strategy should encourage WHO to develop new approaches to collaboration. In some areas, WHO may have the greatest impact by coordinating partnerships between specialised organisations; in other areas it may be more appropriate for WHO to take a more active approach. WHO should strive to achieve a balance between active involvement in delivery and taking a more facilitative or leadership role. Given the strength of the WHO name, it is in a good position to act as a voice for other organisations on global health issues.

How can the UK best work with WHO to reduce poverty and deliver the MDGs?

10. In order to deliver the MDGs, WHO should play a greater role in strengthening health systems in developing countries. We agree with the view of the House of Lords Select Committee on Intergovernmental Organisations² that the Government should aim to achieve an effective balance between 'vertical' and 'horizontal' health programmes and should encourage other donors and WHO to do likewise. We also support the recommendation that an appropriate percentage of aid provided through organisations such as WHO should be earmarked for the strengthening of health systems. There is increasing recognition that such 'horizontal' programmes have the benefit of ensuring countries are equipped in the longer term. The Trust has also invested significantly in developing research capacity as a means of improving health systems as a whole.
11. The Trust would like to see research promoted in the Institutional Strategy. As recognised in the recent DFID Research Strategy, research makes an important contribution to improving understanding of global health issues and developing appropriate diagnostics and interventions in the long term. WHO has an important role in developing policies that are based on high-quality independent research. The Trust's views and priorities for developmental research were set out in our consultation response prior to the publication of the DFID Research Strategy.

² Diseases Know No Frontiers: How effective are Intergovernmental Organisations in controlling their spread?

12. In general, as WHO's second largest funder, the UK should be in a position to effectively influence WHO's priorities. In this regard, different funding methods allow the UK varying degrees of control over where funding is allocated. The Institutional Strategy should seek to establish an appropriate balance between different funding streams, to enable WHO to conduct its work most effectively while ensuring the UK's priorities are considered.

How should WHO work at the country level alongside other UN and international actors?

13. The Institutional Strategy should encourage WHO to continue reviewing its structure to ensure resources are distributed in the most effective manner. It is widely recognised that WHO's structure of country-level offices, regional offices and headquarters does not necessarily provide the most efficient mode of operation.
14. In particular, WHO should seek to ensure its agenda does not significantly duplicate activities of other organisations with a presence in the same countries – particularly other UN agencies. Overlap can fragment effort and make it difficult and time-consuming for partners to work with a number of different organisations. WHO will need to recognise that in some instances it may not be the best equipped organisation to operate.

How can we work with WHO to improve its internal efficiency, results based management and reporting?

15. WHO would benefit from open, external reviews of the organisation's effectiveness and efficiency. As a first step, the UK could encourage WHO to seek feedback from the stakeholders and partners with which it works, as a natural form of appraisal. WHO should be receptive to such feedback and act upon it.
16. The UK Government should also work with WHO to open up opportunities for secondments and staff exchanges. Secondments are a key way in which UK organisations can support intergovernmental organisations such as WHO, while having the additional benefit of linking up like-minded organisations and bringing valuable knowledge back to the UK. However, current human resources policies at WHO can make it difficult and time consuming for WHO to accept staff from other organisations.

How can we best measure and monitor progress with the Institutional Strategy and WHO's programme of work?

17. The Institutional Strategy should seek to provide clear, deliverable objectives focused on what the UK Government – and the UK in general – would like to see from WHO, and include details of where the UK Government intends to measure progress.
18. The 2002 DFID strategy 'Working in Partnership with the World Health Organization' gave a commitment to review DFID's technical and financial support to WHO over the past decade, and to evaluate the impact of DFID secondments to WHO over the same period. The Trust would welcome this review, which could be extended to include a broader assessment of the total UK contribution to WHO.
19. We suggest DFID is also well-placed to conduct reviews of WHO's progress over the course of the Institutional Strategy. DFID has a comparative advantage in the important area of evaluating and assessing development programmes. We are also encouraged by the development of a common approach between donor countries to improve multilateral effectiveness through the MOPAN (Multilateral Organisations Performance Assessment Network) initiative.