# IMPLEMENTATION OF THE TRANSFORMATION AGENDA

## Progress report

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BACKGROUND

1. The Sixty-fifth session of the WHO Regional Committee for Africa endorsed the Transformation Agenda of the WHO Secretariat in the African Region: 2015–2020 (hereinafter referred to as the “Transformation Agenda”), that aims at transforming the Secretariat into a more responsive, effective and transparent organization. The Transformation Agenda is a vision of the Regional Director, whose objective is to accelerate the implementation of WHO reform within the African Region, to ensure the emergence of “the WHO that the staff and stakeholders want”.  

2. The Transformation Agenda comprises four focus areas, namely, pro-results values, smart technical focus, responsive strategic operations, and effective communication and partnerships. The ongoing WHO global managerial, programmatic and governance reforms were taken into consideration in developing the focus areas. Clearly defined strategic actions and activities linked to these focus areas were adopted for implementation within (a) the first 100 days; (b) the first two years; and (c) subsequent years until the end of the fifth year of the term of the WHO Regional Director for Africa in January 2020.

3. In steering the transformation, the Regional Director set up an Independent Advisory Group (IAG) to provide strategic and policy advice on how to improve capacity and strengthen the work of WHO in the Region. The IAG met in May 2015 and October 2016. Several strategic recommendations were made at these meetings, including the development of a Transformation Programme. The IAG also called on the Regional Director to ensure that WHO-AFRO maximizes its convening powers; invests in communication infrastructure; strengthens capacity to respond to emerging health challenges; and continues to implement the Transformation Agenda.

4. The Transformation Programme has since been launched as a framework for the implementation of the Transformation Agenda. It is the strategic framework aimed at guiding WHO’s contribution to the emerging sustainable development platform in Africa. An independent evaluation of the first two years of the Transformation Agenda was undertaken in April 2017 by the WHO Evaluation Office in Geneva at the request of the Regional Director (Annex 1). The purpose of the evaluation was to review progress, document achievements and best practices, identify challenges and areas for improvement and provide recommendations on the way forward.

5. In line with the Regional Committee recommendation that the Regional Director report yearly on progress made in the implementation of the Transformation Agenda, the first report was presented to the Sixty-sixth session of the Regional Committee. This document is the second report covering the first two years of the implementation of the Transformation Agenda.

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PROGRESS MADE

6. The focus area on pro-results values seeks to promote and foster the emergence of an organizational culture that is defined by the values of excellence, team work, accountability, integrity, equity, innovation and openness. Significant progress has been made in implementing these values. This includes improving the knowledge and skills of staff by ensuring access to key WHO and UN policy documents and tools that promote transparency, accountability and ethical behaviour. In a survey that was conducted by the independent evaluation team, 78% of staff confirmed having improved their knowledge of these WHO and UN policy documents and tools. The position of full-time Ombudsperson in the Regional Office has since been established and filled to deal with staff queries and concerns in order to promote a fair workplace. A special Regional Programme Meeting on the Transformation Agenda, bringing together WHO Representatives and Programme Managers was held to build their capacity and engender ownership in order to facilitate its implementation.

7. The smart technical focus area aims at aligning the technical work of the WHO Secretariat in the African Region on evidence-based priorities and lessons learned. The initial challenge was to control the Ebola virus disease outbreak, which was met. The regional capacity for health security continues to be strengthened for effective preparedness and timely response to disease outbreaks and emergencies. This has been demonstrated by the swift response to the yellow fever outbreak in Angola and the Democratic Republic of Congo in 2016. In July 2017, WHO established an Emergency Hub in Nairobi, Kenya, with the aim of supporting countries to respond to outbreaks and emergencies from a closer range and in real time, for Eastern and Southern African countries. Another hub will soon be established in Dakar, Senegal to serve West and Central African countries.

8. Furthermore, polio eradication has remained a priority in the Region and high-level advocacy was maintained. Progress continued to be made in ensuring that the Region is certified polio free. It is now more than a year since the last case of wild poliovirus was detected in Nigeria in August 2016. As a result, the WHO Global Policy Group considered the WHO African Region as a good example among the WHO regions of transition planning.

9. The Transformation Agenda has contributed in building synergies and promoting joint work, interconnectedness and dialogue to address cross-cutting issues, for instance, the implementation of the regional flagship programme on adolescent health. In addition, the First Regional Forum on Strengthening Health Systems for the Sustainable Development Goals (SDGs) and universal health coverage (UHC) was organized in December 2016. The Forum sought to focus the WHO African Region’s actions on strengthening health systems in order to facilitate progress towards the SDGs and universal health coverage. The SDG Standing Committee has since been established under the leadership of the Director of Programme Management in the Regional Office, to intensify health advocacy efforts across governments to ensure that the SDGs and universal health coverage remain at the top of political and development agendas.

10. In the area of responsive strategic operations, the focus is on developing and implementing strategic activities to improve effectiveness, timeliness, efficiency and accountability of actions in support of Member States. A review of compliance and quality assurance functions in the Regional Office was completed to establish a baseline for monitoring progress in administration using internal and external audits.
11. The Accountability and Internal Control Strengthening Project (AICS) has been implemented to enhance budget centre performance. Its objectives were to strengthen the effectiveness of internal controls; improve accountability, transparency and compliance; enhance performance of individual staff members and budget centres; and monitor and report on progress and trends. The AICS website has been uploaded with all relevant policies, standard operating procedures and guidelines in the languages of the Region.

12. A Compliance and Risk Management Committee (CRMC) has been formally established in the Regional Office to ensure a strategic, transparent and effective approach to risk and compliance management. The number of audit reports issued in 2016 with an unsatisfactory rating has been reduced to 0%, compared to 50-80% in previous years. Of the new audits, 100% were fully or partially satisfactory. The number of overdue Direct Financial Cooperation (DFC) reports decreased from 1907 on 1 April 2016 to 764 on 24 May 2017, a drop of 60%.

13. A new DFC Accountability and Assurance Framework was developed and approved by the regional CRMC to ensure that DFC funds are used for intended purposes and that recipients have the necessary control functions to ensure compliance with monitoring and reporting requirements. Self-assessments and internal control checklists have been rolled out to all Ministries of Health, and training sessions on working with WHO are underway. Controls on DFC reporting have been strengthened to include mandatory technical reports to accompany the financial reports.

14. The realignment of human resources with regional health priority needs, to ensure that WHO is fit for purpose, has been completed both at regional and Intercountry Support Team level. New organograms have been developed based on a consultative process, and an objective criterion was used to assess required staffing levels as well as revised position descriptions that clearly articulate the programmatic priorities. The staff matching exercise for these positions has since been completed at the Regional Office. At the Regional Office in Brazzaville, greater efforts to improve staff wellbeing are ongoing through a comprehensive induction programme, an intranet welfare site and a monthly newsletter identifying social and sporting events.

15. In line with the country-focus approach, the Regional Office, working with an external consultancy firm, developed a country-level functional review model that will be used to objectively assess the human resource needs of the country offices while aligning them to the country priorities, following which a similar staff matching exercise will be undertaken at the country level. In relation to accountability for results, programmatic and managerial key performance indicators (KPIs) have been introduced to help in monitoring performance of budget centres in contributing towards health development in countries.

16. The effective communication and partnerships focus area is devoted to strengthening strategic partnerships and more effectively communicating WHO’s contribution to health development. It seeks to foster a more responsive and interactive organization, internally among staff members and externally with stakeholders. The baseline assessment of internal and external communications capacity has since been completed, and the outcome will be used in developing the regional communication strategy. Online communication platforms have been created to encourage staff to freely contribute innovative ideas and initiate candid discussions to be considered by management for implementation. In addition, another online platform was established to collate, monitor, assess and report on the activities undertaken within the framework of the Transformation Agenda.
17. Still under the partnerships focus area, the Region has made progress in strengthening its financial resource base by engaging with traditional and new donors as well as improving tracking of donor technical and financial reports. There has been a gradual increase in donor commitments and support in different health priority areas. For example, the United Kingdom Department for International Development (DFID) supported efforts to tackle antimicrobial resistance. In March 2017, the WHO Regional Director for Africa spearheaded the re-launch of the Harmonization for Health in Africa (HHA) platform. This reaffirms WHO’s commitment to working together with other partners to advance health development in the Region.

18. A regional partnership strategy is being developed to contribute to the expansion of partnerships and the introduction of other innovative financing mechanisms that include the private sector and philanthropists. In June 2017, WHO held the first ever Africa Health Forum on the theme “Putting People First: The Road to Universal Health Coverage in Africa” in Kigali, Rwanda. The Forum provided a platform to discuss strategies on persistent challenges in public health in the Region, and explored ways for partners to contribute to WHO’s reform agenda. It attracted new and global health players including youth organizations, academia and the private sector. One of the key outcomes of the meeting was the Kigali Call to Action (Annex 2), whose implementation is closely monitored through a road map.

19. The progress outlined in this report has been reaffirmed by the independent evaluation outcomes. The evaluation team also noted improved visibility of the Organization. In order to ensure a more structured and successful implementation of the Transformation Agenda, governance structures have been put in place to regularly review and determine priorities, provide inputs and guide, oversee and monitor its implementation.

20. Despite the steady progress in implementing the various activities under the Transformation Agenda, several key challenges have emerged. Managing the change needs a more focused investment than was originally envisaged, to fully implement the various activities and to institutionalize these activities into workplans and staff routines. Effective communication still remains a major challenge in demonstrating visible changes in countries. Prioritization continues to be a challenge largely due to the broad diversity of countries and their needs. This has created the need to develop programmatic KPIs to measure performance in the different country contexts.

NEXT STEPS

21. Institutionalization of the Transformation Agenda. Efforts should be sustained to institutionalize the Transformation Agenda into management and governance structures in the Region. This ensures that budget centres are fully responsible for the implementation of the Transformation Agenda and that all activities are integrated into the regular workplans, and funded for implementation.

22. Change management. In order to better manage perceptions and expectations of staff members, WHO AFRO has recruited a change management expert to support executive management and staff in the change management process. There are also plans to step up regular and targeted communication as well as in-person interaction with staff throughout the process. Management will ensure that the human dimension is at the centre of the Transformation Agenda, with appropriate psychological support where necessary during the restructuring process.
23. **Programmatic Key Performance Indicators (KPIs).** Strengthening monitoring of performance remains a key aspect of work delivery. To this end, WHO-AFRO is planning a progressive roll-out of the programmatic KPIs in all 47 Member States by the end of 2017. The roll-out will be accompanied by timely updates to all staff members to enable early buy-in and regular feedback and sharing of best practices.

24. **Communication.** The need for an external and internal communication strategy has been identified as a key requirement for disseminating the activities and impact of WHO. In this connection, WHO-AFRO will finalize the regional communication strategy in order to guide future work in the Intercountry Support Teams (IST) and the country offices. Furthermore, active engagement of staff will be increased, either through retreats or meetings at all levels of the Regional Office. This will contribute to informing and engaging staff on the Transformation Agenda to facilitate their understanding and participation.

25. The Regional Committee is requested to take note of this report and the proposed next steps.
ANNEX 1: Executive summary of the Mid-term Review of the Transformation Agenda

Report of the mid-term evaluation of the Transformation Agenda of the WHO Secretariat in the African Region

EXECUTIVE SUMMARY

May 2017
Introduction

The Transformation Agenda of the World Health Organization Secretariat in the African Region 2015-2020 was launched by the Regional Director for Africa in February 2015. Its objective is to ensure that the WHO Secretariat in the African Region evolves into the primary leader in health development in Africa and is a reliable and effective protector of Africa’s health stock.

The Transformation Agenda has four focus areas: pro-results values, smart technical focus, responsive strategic operations and effective communications and partnerships. The managerial, programmatic and governance themes of the ongoing WHO global reform were factored into its development. It is not only a commitment to positive change in the Regional Office but also a programme for accelerating the implementation of WHO global reform within the Region, with each focus area closely aligned with specific outcomes of the WHO global reform programme.

The Transformation Agenda aims to be bold, ambitious and seeks to engender a regional health organization that is foresighted, proactive, responsive, results-driven, transparent, accountable, appropriately resourced and equipped to deliver on its mandate. The Transformation Agenda also responds to increased expectations of Member States and regional and global stakeholders for a change in the way WHO does business in the African Region. There is anticipation of accelerated implementation and institutionalization of the WHO reform agenda as well as improvement in the effectiveness and efficiency of actions in line with the Organization’s mandate. Stakeholders want to see an appropriately resourced and equipped WHO that is responsive and effective in strengthening national health systems; coordinating disease prevention and control, including outbreak preparedness and response; and launching supranational actions in support of global health security. Whilst it is a vision

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5 The Transformation Agenda is one of five interrelated and overarching priorities identified by the Regional Director: (i) improving health security; (ii) strengthening national health systems; (iii) sustaining focus on the health-related MDGs/SDGs; (iv) addressing the social determinants of health; and (v) transforming the African Region into a responsive and results-driven Organization.
and a strategy for change aimed at facilitating the emergence of “the WHO that the staff and stakeholders want”, its success will depend on the commitment and cooperation of staff, Member States and partners.

**Background to the evaluation**

The Transformation Agenda envisages both a mid-term and a final evaluation of its implementation. It also sets forth activities to be carried out in the first two years, of which some were to be completed within the Regional Director’s first 100 days in office from February to April 2015 and the remaining activities were to be completed within the first two years ending in January 2017.

The end of the first two-year period in January 2017 provided an opportune time to undertake the mid-term evaluation, which was carried out as an independent evaluation by the WHO Evaluation Office at the request of the Regional Director.

The evaluation objectives were to review the progress in the implementation of the Transformation Agenda, to document achievements and best practices, to identify challenges and areas for improvement and to provide recommendations on the way forward. It may also serve as a source of baseline material for the final evaluation.

**Methodology**

The evaluation was conducted as a mixed-method approach using a combination of document review, key informant interviews, site visits and an all-staff online survey. The key informant interviews were mainly conducted face-to-face during on-site visits across the different levels of the Region (at the Regional Office in Brazzaville and with the inter-country support teams (ISTs) and WHO country offices in Brazzaville, Harare, Libreville and Ouagadougou). During on-site visits and follow-up video or teleconferences, individual or group interviews were held with senior staff, professional staff, general
service staff and the staff associations. The evaluation team also met with senior officials of the Ministry of Health in Burkina Faso, Congo, Gabon and Zimbabwe. Additionally, telephone interviews were conducted with representatives from three key external stakeholder groups (members of the Regional Programme Subcommittee, members of the Regional Independent Advisory Group, and international partners and donors).

Findings

The mid-term evaluation finds that the Transformation Agenda is relevant and timely. It is a clear strategy for organizational change guided by the Regional Director’s vision. This vision and the need to become a better Organization is well received and accepted by staff in general. It is recognized both internally within the Secretariat and externally by partners that the Transformation Agenda also addresses the reputational difficulties of the Organization in the aftermath of the Ebola crisis. Furthermore, the Transformation Agenda, through its alignment with the WHO global reform, also provides a renewed focus for the reform in the African Region. The evaluation confirms the relevance of the Transformation Agenda’s four focus areas and the related expected results.

The evaluation notes reasonable progress towards achieving the aim of the Transformation Agenda to render the Regional Office more effective, timely and efficient in providing the best possible support to Member States. However, any reform will require not only a change in processes but also of behaviours and this takes time. The evaluation notes completion of, and progress in, many activities that were planned and there is also an emerging change in behaviours and mindset. However, there have also been delays in achieving a number of planned activities which has slowed progress, and weaknesses in communication and change management support have led to lack of understanding of the Transformation Agenda and engagement with it among some staff.
Major efforts to support the control of the outbreak of Ebola virus disease (EVD) appear to have had implications for the speed of implementation of the Transformation Agenda during its early phase. Nevertheless, progress was made and key achievements per focus area are noted below.

**Pro-results value**

The purpose of this focus area is to foster the emergence of an organizational culture that is defined by the values of excellence, team work, accountability, integrity, equity, innovation and openness. The expected results for this focus area are: enhanced accountability by individuals and teams; improved fairness in rewards, recognition and sanctions for staff members; responsive, supportive and inclusive teams; and enhanced ethical standards for the staff.

Completed activities within this focus area include: the launching of the Accountability and Internal Control Strengthening Project, the establishment of the Compliance and Risk Management Committee, and establishing and filling the full-time position of ombudsperson in the Regional Office. In addition, a staff welfare officer position was established and efforts are underway to develop and implement staff well-being and welfare programmes at all levels.

**Smart technical focus**

The technical areas of WHO’s work in the African Region will be prioritized in line with regional priorities and commitments, and interventions will be based on evidence and lessons learned from experience. The expected results for this focus area are: EVD epidemic controlled; strengthened regional capacity for health security, including effective preparedness and timely response to disease outbreaks and emergencies, and polio eradication; accelerated progress on Millennium Development Goals (MDGs) and implementation of the Sustainable Development Goals (SDGs); functional cross-
cutting systems approach within the WHO African Region facilitating progress towards universal health coverage (UHC); and enhanced knowledge management.

Within this focus area, a number of activities relating to the control of the EVD epidemic have been completed and a recovery and rebuilding strategy is under implementation. Other successful efforts to strengthen regional capacity for health security include: the restructuring of the Regional Office to effectively address outbreaks and emergencies, the prioritization of polio eradication in the Region and high-level advocacy undertaken by the Regional Director in this regard; the definition of mechanisms for effective coordination between the three levels of the Organization in the context of the emergency reform; and the engagement with the African Union to support the establishment of an Africa Centre for Disease Control and Prevention and to support accelerated implementation of the MDGs.

**Responsive strategic operations**

The goal of this focus area is to evolve into an Organization with enabling functions that efficiently support the delivery of programmes. The expected results for this focus area are: human, financial and material resources aligned with the identified priorities; strengthened WHO human resource capacity; enhanced transparency in recruitment, placement and performance management; improved efficiency and accountability in the areas of finance, procurement and general management; and improved leveraging and use of available technologies and tools, especially the Global Management System (GSM) and business intelligence dashboards.

A number of activities have been completed in this focus area. For example, accountability and efficiency have been enhanced with the review of delegation of authority in the Region, regional compliance functions have been strengthened and streamlined, and key performance indicators (KPIs) for performance monitoring have been developed. Formal training programmes have also been developed on the use of
new technologies. There is progress in the human resources component of the Transformation Agenda with the restructuring process completed in four of the six clusters in the Regional Office. With regard to the transparency of recruitment and selection process, standard, harmonized recruitment processes were used, in alignment with the processes used for professional positions throughout WHO and a transparent and competitive bidding process for procurement of services is in place. In an effort to ensure that staff are well equipped for working in the Organization and performance is appropriately recognized, a mandatory induction programme for newly-recruited staff members has been established, a learning and development needs assessment was conducted and transparency in rewarding good performance has been enhanced. The Regional Director has also made critical senior-level appointments in the Regional Office and in country offices.

**Effective communications and partnerships**

This focus area seeks to foster a more responsive and interactive organization, internally among staff members and externally with stakeholders. The expected results for this focus area are: enhanced internal communication between and across all the three levels of the Organization; reinforced external communication; and strengthened strategic partnerships.

Activities in this area that have been completed in order to enhance internal communication include the engagement of a communications consultancy firm to conduct an assessment of communications in the African Region, the regular sharing of information with regard to the Regional Director’s travel and the outcome of her missions/meetings, and the institution of regular fora for discussing progress in the implementation of strategic programmes. With regard to the reinforcement of external communication, closer working relations with media houses have been established, with regular WHO slots in key television and radio channels within the Region.
Areas for future focus

Going forward, areas for further work internally include: (i) reviewing the activity workplan to ensure outstanding activities are completed or sunsetted and that further activities are planned; (ii) completing the restructuring exercise in a fair, transparent and participatory manner; (iii) completing the functional reviews in country offices; (iv) providing greater clarity and advocacy on the role of the ISTs and their interaction both within the country offices and with the Regional Office; (v) rolling out the technical KPIs; (vi) strengthening change management and project management efforts; (vii) continuing efforts to engage staff in the activities of the Transformation Agenda, including, where appropriate, increasing knowledge and awareness of staff through briefings or training possibilities; and (viii) ensuring funding for the overall budget of the Regional Office, and the activities of the Transformation Agenda in particular.

In addition, further areas on which to concentrate efforts, both internally and externally, include: (i) strengthening communication, as an integral part of the Transformation Agenda, to cover both internal and external audiences with greater focus in the next phase, including better articulation of success stories and results at the country level; (ii) moving from a process focus to a stronger focus on delivery of results and better communication of the work of the Regional Office in this regard; and (iii) broadening the engagement of Member States and partners in the next phase.

Finally, all the above efforts need to be underpinned by a clear governance structure for the Transformation Agenda.

Recommendations

1. The Regional Director and executive management team should revisit the activity workplan of the Transformation Agenda, ensuring outstanding activities are completed or sunsetted, and plan activities for the next phase.
- consider a second stage launch, targeted at staff and Member States, in order to renew the Regional Director’s vision and engage staff, Member States and partners
- the next phase of Transformation Agenda to concentrate on technical focus, delivery and results.

2. Establish a clear governance structure for the Transformation Agenda with membership made up of the executive management team and staff representatives.

- governance team to review progress on a monthly or bi-monthly basis, provide guidance to project team and address any delays or bottlenecks in implementation.

3. Strengthen the Transformation Agenda project management team with appropriately skilled staff and resources.

4. Develop and implement a change management strategy to institutionalize the Transformation Agenda

- identify change agents in regional office, intercountry support teams and country offices
- identify and support champions among directors, WRs and other staff

5. Develop and implement an effective communication strategy, commencing with a conscious "relaunch" to staff and Member States, recalling the vision and purpose, detailing progress, and recognizing some of the challenges and shortfalls in the first two years.
6. Complete cluster restructuring exercises for General Management and Noncommunicable Diseases clusters, and any other major human resource reorganization as soon as possible.

7. Provide regular updates on planned functional reviews of country offices and complete these as soon as possible.

8. Encourage active engagement of Member States and partners in the next phase of the Transformation Agenda.
ANNEX 2: Call-to-Action – Putting People First: The Road to Universal Health Coverage in Africa

The Africa Health Forum

Call to Action – Putting People First: The Road to Universal Health Coverage in Africa

Kigali, Republic of Rwanda

We, participants at the first-ever Africa Health Forum, convened by the World Health Organization Regional Office for Africa, and hosted by the Government of the Republic of Rwanda, from 27 to 28 June 2017 in Kigali, Republic of Rwanda:

Cognizant of our broad representation of the African people: leaders and policy-makers, ministries of health and finance, development partners, intergovernmental agencies, agencies of the United Nations system, the African Union Commission and regional economic communities, the private sector, academia, philanthropic foundations, youth and women’s organizations, nongovernmental organizations, civil society organizations and the media;

Mindful of the theme of the Forum, “Putting People First: The Road to Universal Health Coverage in Africa” and Africa’s commitment to attain the highest possible level of health for its people as articulated in the WHO Constitution, the African Union Health Strategy 2016–2030 and Agenda 2063, and the Transformation Agenda of the WHO Secretariat in the African Region;

Acknowledging the progress made in health outcomes – improved life expectancy at birth, reductions in adult and under-five mortality rates and maternal mortality ratio – due to better availability, coverage and utilization of health services;

Concerned that despite the progress made, inequities in service provision still persist, with a high burden of communicable diseases such as HIV/AIDS, tuberculosis, malaria and neglected tropical diseases, as well as noncommunicable diseases; and numerous public health emergencies that have the potential to destroy health systems and communities, disrupt national economic activities and threaten peace and security, all against the backdrop of a demographic transformation with rapid urbanization and climate change; and limited focus on interventions that improve health outcomes but lie outside the remit of ministries of health;

Recalling the adoption, in September 2015, of the Sustainable Development Goals (SDGs) in general and SDG 3 in particular – “ensure healthy lives and promote well-being for all at all ages” – especially with the adoption of universal health coverage (UHC), defined as “all people receiving the good-quality promotive, preventive, curative, rehabilitative and palliative services they need without suffering financial hardship in so doing” as one of its targets;

Recognizing that the 2030 Agenda for Sustainable Development will require health systems strengthening, which includes implementing the “Global Strategy on Integrated People-Centered
Services” and ensuring public health security, including better preparedness and response to disease outbreaks and epidemics and other public health emergencies;

Reaffirming our commitment to putting people first, promoting synergies and coordination and engaging all stakeholders behind the goal of achieving UHC, while leaving no one behind;

Hereby commit ourselves, individually and collectively, to:

- Keeping UHC as the overarching approach for attaining SDG 3 in order to ensure healthy lives and promote well-being for all at all ages;
- Sustaining strong political will and commitment, increasing and sustaining domestic and external financial contributions and investments in health, including establishing innovative financing mechanisms, ensuring value for money and increased accountability;
- Building, reorienting and realigning health systems towards UHC, with emphasis on primary health care, and maintaining effective systems to ensure improved financial protection and affordability for the most vulnerable populations, including women, children and the youth, while intensifying focus on quality and equity;
- Strengthening health workforce development and sustainability, including community health workers, to deliver quality health services;
- Empowering people, including the youth, with the information, skills and resources that will enable them to actively engage in health policy development and maintain healthy environments, improve health literacy, thereby making effective decisions about their own health and that of their families and communities;
- Placing stronger focus on building national core capacities for the International Health Regulations, including outbreak and emergency preparedness and active engagement of communities, while mobilizing strategic partners within and beyond the health sector to address the social and environmental determinants that influence vulnerability related to health emergencies;
- Establishing well-coordinated multisectoral regional emergency mechanisms and teams to support countries for prompt response to outbreaks and other health emergencies and supplementing national capacities when needed;
- Strengthening advocacy and national capacity for health research, including setting the agenda, improving infrastructure, regulatory mechanisms and human capacity for the generation, analysis, synthesis and use of research and other health data, and mobilizing the required funding;
- Promoting, through partnerships, the use of new technologies, including innovative eHealth solutions to support the attainment of UHC;
• Establishing well-coordinated multisectoral monitoring and progress-tracking mechanisms to promote efficiency and accountability in delivering on key health-related commitments to achieve concrete results towards attainment of UHC;
• Creating new opportunities for improved partnerships and an enabling environment that brings together the different stakeholders to undertake transformational change, including strengthening legislative frameworks, regulatory capacity and financial management, and reorienting public policy-making and the health workforce.

*Call upon:*

• **National governments** to provide leadership and stewardship for actions aimed at creating consultative planning platforms and regulatory frameworks for the attainment of UHC;
• **National governments** to increase domestic investments; mobilize and coordinate all stakeholders for a common purpose; forge partnerships with bilateral and multilateral agencies, the private sector and civil society; and monitor and report progress;
• **WHO** to intensify its advocacy and convening role across governments, foundations, civil society, academia and the private sector to ensure that the SDGs in general, and UHC in particular, remain at the top of the political and development agenda, and that adequate domestic and external resources are mobilized;
• **The African Union Commission** to intensify its advocacy and convening role with African leaders and governments and ensure that the highest political will and commitment are mobilized and sustained for UHC and the SDGs;
• **WHO, agencies of the United Nations system and partners** to support countries to sustain focus on accelerating efforts to address the burden of HIV/aids, tuberculosis, malaria and neglected tropical diseases, building on the progress made in reducing maternal mortality and addressing women’s health, and ensuring that resources are mobilized for health research, noncommunicable diseases and the social determinants of health;
• **WHO and the International Telecommunication Union (ITU)** to support the scaling up of eHealth solutions in the context of UHC and the SDGs;
• **Development partners** to increase their investments in UHC, including in health security, and improve resource alignment to country priorities as set out by governments, in line with the Paris Declaration on aid effectiveness;
• **The private sector** to increase its investment in health, while making the most of opportunities and mechanisms such as research and development, public-private partnerships, local manufacturing of health products, direct technical assistance and undertaking corporate social responsibility actions;
WHO and the African Union Commission to help strengthen the capacity of Member States, facilitate and support the sharing of country experiences and establish mechanisms for monitoring progress towards the realization of the actions set out in this Call to Action;

Thank His Excellency Mr Paul Kagame, President of the Republic, and the Government and People of Rwanda for successfully hosting the First Africa Health Forum;

Request the WHO Regional Director for Africa to extend the congratulations of the Africa Health Forum to the newly elected WHO Director-General, Dr Tedros Adhanom Ghebreyesus;

Request the WHO Regional Director for Africa to present this Call to Action to the Sixty-eighth session of the WHO Regional Committee for Africa;

Request the WHO Regional Director for Africa to establish a biennial platform to engage key stakeholders in reviewing progress towards the health-related SDGs and in identifying common strategies to expedite the attainment of UHC.

Done at Kigali on 28 June 2017