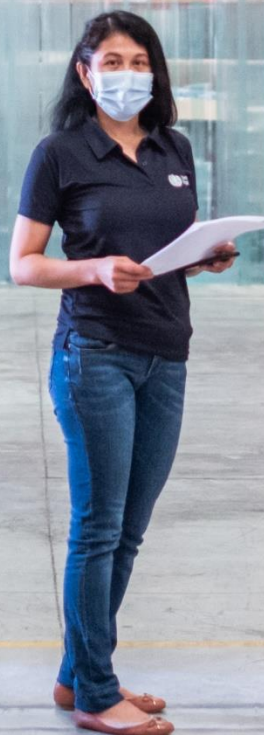


WHO Procurement Report 2021



World Health
Organization



WHO Procurement Report 2021

WHO procurement report 2021

ISBN 978-92-4-004947-5 (electronic version)

© **World Health Organization 2022**

Some rights reserved. This work is available under the Creative Commons Attribution-NonCommercial-ShareAlike 3.0 IGO licence (CC BY-NC-SA 3.0 IGO; <https://creativecommons.org/licenses/by-nc-sa/3.0/igo>).

Under the terms of this licence, you may copy, redistribute and adapt the work for non-commercial purposes, provided the work is appropriately cited, as indicated below. In any use of this work, there should be no suggestion that WHO endorses any specific organization, products or services. The use of the WHO logo is not permitted. If you adapt the work, then you must license your work under the same or equivalent Creative Commons licence. If you create a translation of this work, you should add the following disclaimer along with the suggested citation: “This translation was not created by the World Health Organization (WHO). WHO is not responsible for the content or accuracy of this translation. The original English edition shall be the binding and authentic edition”.

Any mediation relating to disputes arising under the licence shall be conducted in accordance with the mediation rules of the World Intellectual Property Organization (<http://www.wipo.int/amc/en/mediation/rules/>).

Suggested citation. WHO procurement report 2021. Geneva: World Health Organization; 2022. Licence: [CC BY-NC-SA 3.0 IGO](#).

Cataloguing-in-Publication (CIP) data. CIP data are available at <http://apps.who.int/iris>.

Sales, rights and licensing. To purchase WHO publications, see <http://apps.who.int/bookorders>. To submit requests for commercial use and queries on rights and licensing, see <https://www.who.int/copyright>.

Third-party materials. If you wish to reuse material from this work that is attributed to a third party, such as tables, figures or images, it is your responsibility to determine whether permission is needed for that reuse and to obtain permission from the copyright holder. The risk of claims resulting from infringement of any third-party-owned component in the work rests solely with the user.

General disclaimers. The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by WHO in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by WHO to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall WHO be liable for damages arising from its use.

Contents

Introduction	1
PART 1 Procurement at WHO	2
PART 2 Procurement statistics	4
2.1 Procurement data overview	5
2.2 Procurement by value.....	6
2.3 Procurement by category	8
2.4 Procurement by WHO headquarters and regional offices	10
2.5 Procurement by supplier and supplier countries	12
2.6 COVID-19 related procurement	13
2.7 Procurement from catalogues.....	15
PART 3 Key initiatives and highlights	16
3.1 Supporting emergency response in Afghanistan	17
3.2 Emergency health kits.....	17
3.3 Sustainable procurement	18
3.4 Highlights from WHO regional offices	18
Annexes	20
Annex 1. Procurement by supplier country and territories	21
Annex 2. Procurement of goods and services by WHO regional office.....	25
Annex 3. COVID-19 related procurement by WHO regional office	28
Annex 4. How to become a supplier to WHO	30

Introduction

Founded in 1948, WHO is the United Nations agency that connects nations, partners and people to promote health, keep the world safe and serve the vulnerable – so everyone, everywhere can attain the highest level of health.

WHO leads global efforts to expand universal health coverage. It directs and coordinates the world's response to health emergencies. And it promotes healthier lives – from pregnancy care through old age. WHO's Triple Billion targets outline an ambitious plan for the world to achieve good health for all, using science-based policies and programmes.

WHO procures and supplies on a yearly basis a significant amount of goods and services to enable its important public health mandate, and is thus a critical function of the organization.

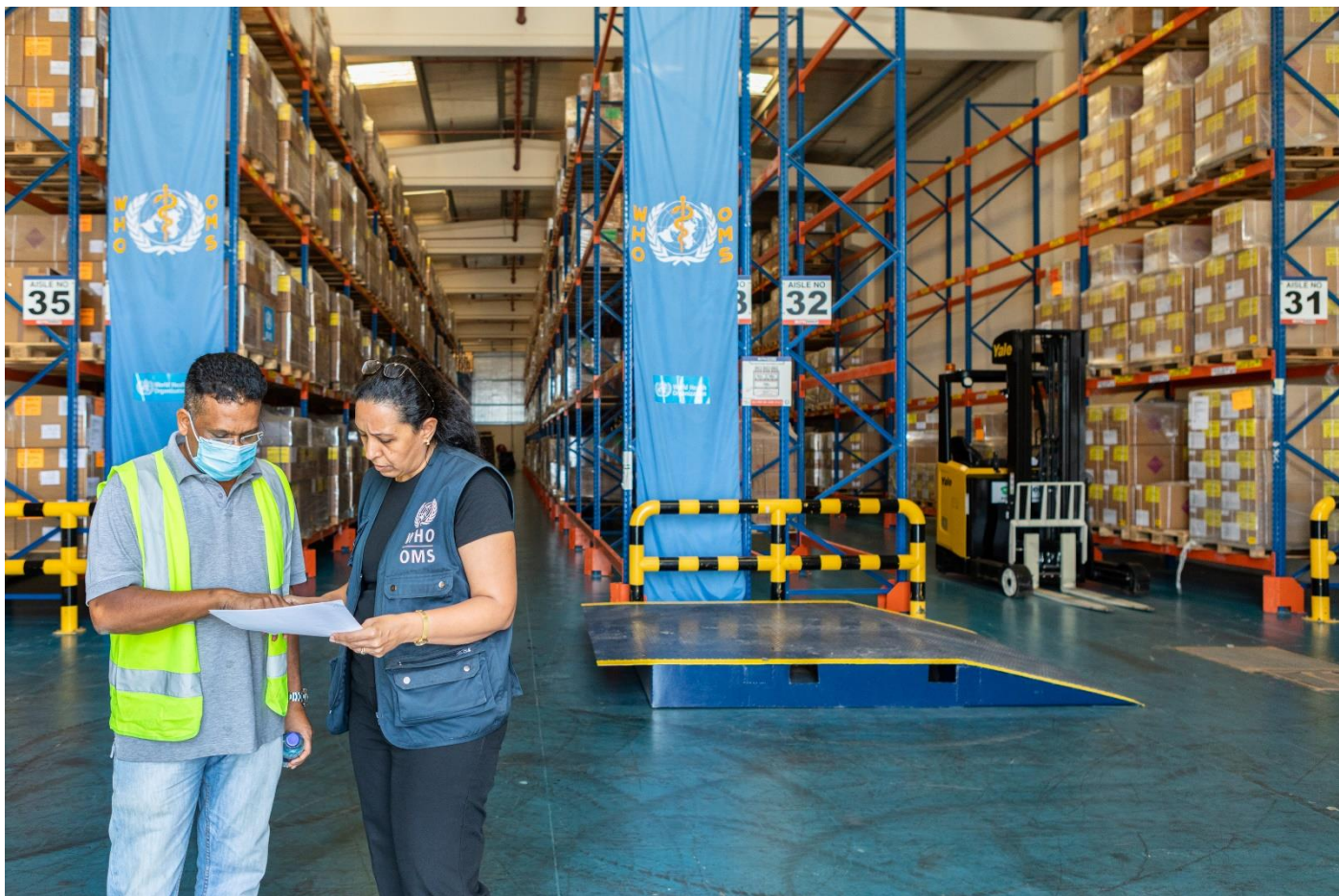
The WHO Procurement Report, which has been published since 2020, provides an overview of procurement at WHO, details essential procurement data for the year, and showcases key initiatives and highlights. This report is produced in line with WHO's commitment to transparency and for the benefit of WHO Member States, donors, partners, WHO staff, the supplier community and other stakeholders.

The WHO Procurement Report complements the Annual Statistical Report on United Nations Procurement (ASR) to which WHO contributes and that provides an overview of procurement data of approximately forty organizations within the United Nations (UN) system. The ASR is available on the United Nations Global Marketplace (UNGM) and includes interactive data dashboards¹.

¹ <https://www.ungm.org/Shared/KnowledgeCenter/Pages/ASR>

PART 1

Procurement at WHO



In order to fulfil its mandate and achieve its vision, WHO procures a significant volume of goods and services. In the period 2013-2019 WHO purchased on average US\$ 770 million worth of goods and services per year. In 2020, the procurement volume was significantly higher at US\$ 1.718 billion due to the global pandemic of coronavirus disease 2019 (COVID-19) and the related emergency response provided by WHO. In 2021, while slightly decreasing, the procurement volume has remained, with US\$ 1.657 billion, at a high level in the wake of the continued global pandemic.

As a public organization entrusted with donor funds and committed to supporting developing economies, the objective of procurement and supply activities within WHO is the timely acquisition and delivery of goods and services, while respecting guiding principles for procurement.

The overall guiding principle for all WHO procurement is to obtain the best value for money for the Organization. “Best value for money” is defined as the most responsive offer that represents the best combination of technical specifications, quality and price. Best value for money is the result of several factors, including: quality; experience; vendor reputation; and life-cycle costs, benefits and parameters that measure how well the good or service allows the Organization to meet its social, environmental or other objectives and has the greatest possible impact on the outcomes from WHO programmes. Other guiding principles² that are the basis for WHO procurement are fairness, integrity, transparency and equal treatment; effective competition; the interest of WHO; and sustainable procurement, which entails social, environmental, and economic considerations. As a public organization, WHO must also strictly adhere to the Organization’s Financial Regulations and Rules and dedicated procurement policies and procedures, which mandate, among other requirements, that contracts be awarded through a competitive process, except when otherwise authorized by designated officials. Suppliers play an essential role in WHO’s supply chain and in 2021 alone, WHO contracted over 18 000 different suppliers from 186 countries (for guidance on how to become a supplier to WHO refer to Annex 4).

In WHO, responsibility for procurement is based on a tiered system, with procurement carried out at the global, regional and local/country levels. In addition, the WHO Health Emergencies Programme has delegated authority for procurement for emergencies in accordance with established policies and protocols. Contract Review Committees at the WHO headquarters or regional offices ensure that procurement undertaken by WHO complies with the procurement principles and relevant policies and procedures, procurement risks are properly assessed and mitigated, and the best value for money and the interest of the organization are fully achieved. Furthermore, WHO procurement activities are continuously subject to rigorous internal and external audits.

Procurement is one part of the supply chain and to deliver supplies to programmes, in 2021, WHO expedited over 6000 international commodity movements (surface, sea and air) through its network of freight forwarders and partners, consolidating orders and delivering to some of the most remote, hard-to-reach locations globally. This was complemented by over 70 warehouses and storage facilities managed by WHO, including the WHO Dubai Hub, which in 2021 supported the delivery of approximately US\$ 48 million in health supplies to 100 countries across all WHO regions, consolidating and fulfilling over 545 orders, a 20% increase over the previous year.

² <https://www.who.int/about/accountability/procurement/principles-and-processes/guiding-principles>

PART 2

Procurement statistics



This section covers key procurement statistics for the year that ended on 31 December 2021. Every procurement transaction is made and confirmed by issuing a Purchase Order (PO), which commits the relevant funds. The scope of the data in this report covers all WHO offices (except the Regional Office for the Americas³) and contains all POs approved in 2021. The data are based on the same data set used to produce the statistics for the Annual Statistical Report on United Nations Procurement (ASR) to which WHO contributes annually. The ASR containing the data for the prior year is usually published in June or July and made available on the ASR page⁴ on the United Nations Global Marketplace including through interactive dashboards. Hence, the data used to produce this WHO report, will also be available on the United Nations Global Marketplace from mid-2022 onwards.

In the ASR, procurement statistics have been collected from organizations in the United Nations System and have been reported together since 1984. The most recent data currently available for the ASR are for the calendar year 2020, when 39 organizations reported a collective US\$ 22.3 billion in procurement of goods and services. US\$ 13.7 billion of United Nations funds were spent in developing countries, countries with economies in transition and least developed countries in 2020. Overall, this amount makes up 61% of the total United Nations procurement spend for its operations and programmes around the world. Health has been the largest procurement sector of the UN system for some time, and in 2020 the COVID-19 pandemic increased its relevance. It represented almost a quarter of the total procurement, with US\$ 5.5 billion. The next largest procurement segments across the UN were construction, engineering and science, food and farming, and transportation and storage.

The present report contains additional statistics on WHO procurement that are not included at this level of detail in the ASR.

2.1 Procurement data overview

In 2021, the total value of WHO's procurement amounted to US\$ 1.657 billion of which US\$ 741.4 million was for the procurement of goods and US\$ 915.7 million for the procurement of services (Fig. 1). Goods hence represented 45% of all procurement, while services represented 55%. At WHO, procurement of goods is centralized and mostly handled by specialized procurement units and teams, including through catalogue procurement from established Long Term Agreements (LTA), whereas the procurement of services is decentralized and mostly handled by requisitioning departments themselves.

In 2020, the overall procurement volume had almost doubled, increasing by US\$ 824 million compared with a total of US\$ 893 million in 2019. The vast majority of this increase was attributed to the emergency response WHO provided to the COVID-19 pandemic as noted in Section 2.6 of this report. In 2021, the total procurement volume slightly decreased and remained at a high level in the wake of continued global COVID-19 pandemic. Between 2020 and 2021, there has been a shift in the distribution of this procurement volume as comparatively more services have been purchased in 2021 compared to goods. Services have been traditionally the largest type of procurement at WHO.

³ Data for this report is drawn from WHO's enterprise resource planning (ERP) system (called the Global Management System or GSM). The Regional Office for the Americas does not use the same ERP system as the rest of WHO.

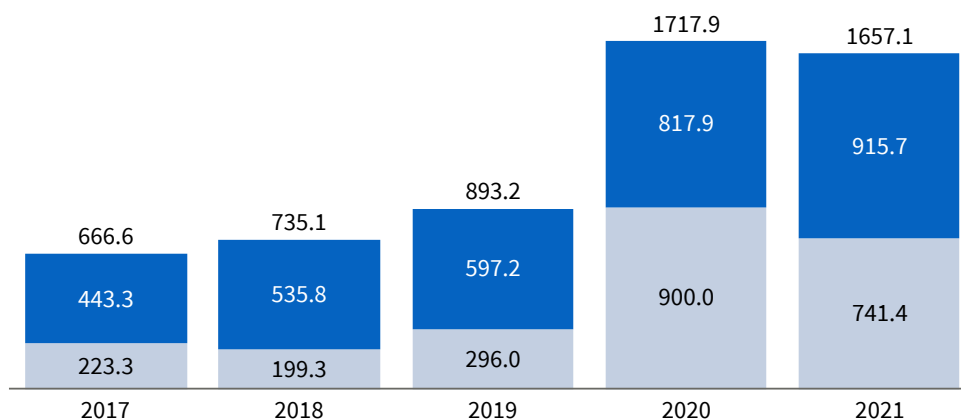
⁴ The ASR is available on the UNGM at the following link: <https://www.ungm.org/Shared/KnowledgeCenter/Pages/ASR>

Fig. 1. Procurement of goods and services

Procurement of goods and services

in million US\$, total procurement value: US\$ 1.657 billion

Goods Services



2.2 Procurement by value

Over the course of the year, WHO approved a total of 57 888 POs with a total of 168 400 PO lines.⁵ The total number of POs increased by more than 15% as compared to 2020 (50 011 POs approved in 2020) and an increase of 27% compared to 2019. The average value of POs was US\$ 28 624, which is 17% lower than in 2020 but still significantly higher than in 2019 where the average value of a PO was US\$ 19 587. The POs on COVID-19 related procurement tended to be higher in value, leading to an overall much higher average value of a PO in 2021 compared to 2019.

It is important to distinguish between the average value of a PO and the median value of a PO. The median is defined as the value separating the higher half from the lower half of all POs. This means that 50% of all POs had a value higher than the median and 50% of all POs had a value lower than the median. The median is more representative of the “typical” value of a PO, as the average can be skewed by a small number of particularly high value POs. The median value of all POs (excluding the COVID-19 related POs) was US\$ 4502 in 2021, which is only slightly above the median value in 2020.

Fig. 2 shows how many POs were approved within a given value range. For instance, a total of 8594 POs were issued within the value range of US\$ 2500 to US\$ 5000. As can be seen, most POs have a relatively low value and only a comparatively small number of POs are issued in the high-value ranges. 78% of all POs were below US\$ 20 000 and this distribution has not changed significantly compared to the previous year.

The number of POs in the highest value bracket above US\$ 1 000 000 represents around 0.3% of the total number of POs approved.

⁵ Each PO is issued to one supplier but can contain different items or deliverables that are expressed in the different PO lines.

Fig. 2. Number of POs per value range

Number of POs per value range

in number of POs, total number of POs: 57 888

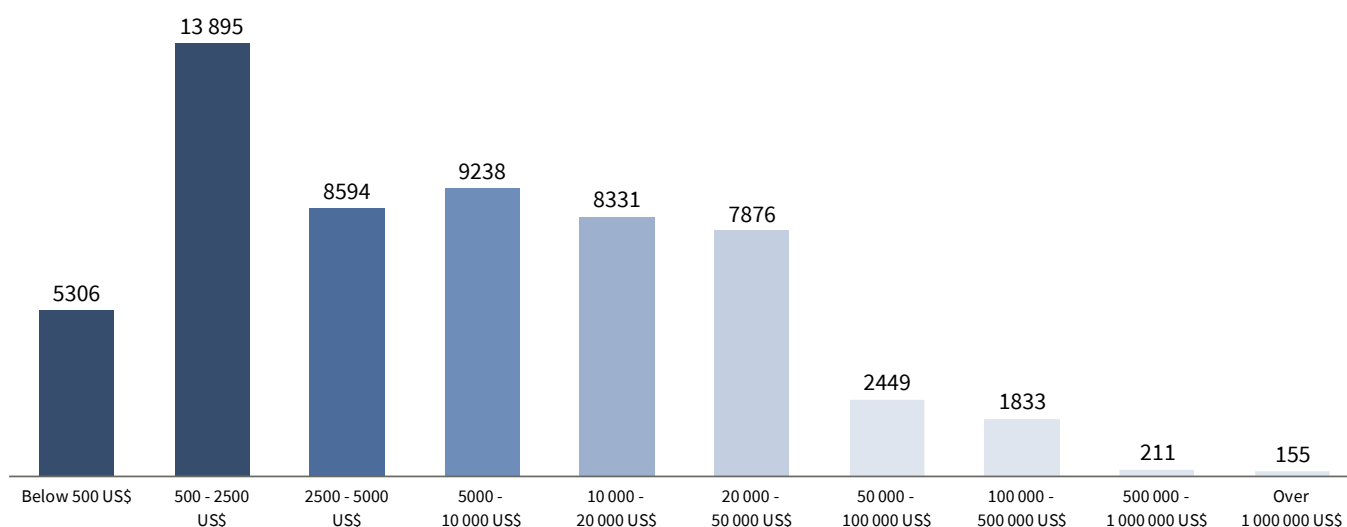


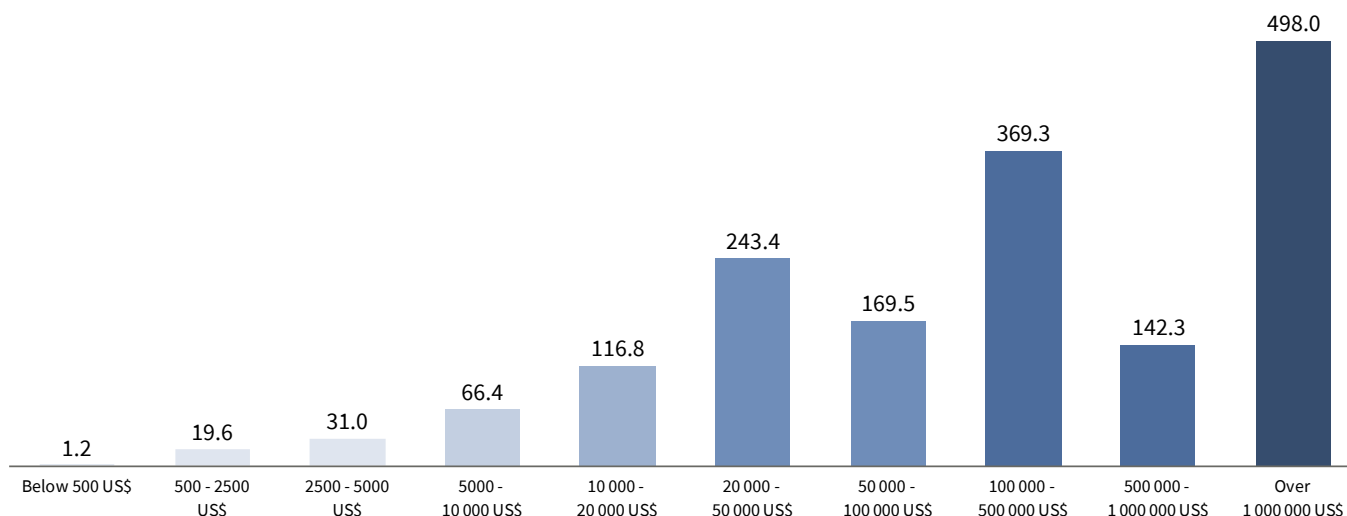
Fig. 3 shows the total value of all POs within a given value range. For instance, all 8594 POs which were issued in the value range from US\$ 2500 to US\$ 5000 together had a total value of US\$ 31.0 million. This shows that the large majority of the procurement volume is generated by a relatively small number of high value POs. At WHO in 2021 only a relatively small fraction of the overall expenditure (US\$ 235.0 million or approximately 14%) lies in the lower value brackets up to US\$ 20 000, but the small number of 155 high-value POs accounted for a total of US\$ 498.0 million or 30% of the total spend. The 2199 POs with a value above US\$ 100 000 together amounted to US\$ 1009.6 million or 61% of the total spend.

Overall, this distribution has remained very similar to 2020. One notable difference is that the higher value ranges made up in total less than in the previous year. For instance, in 2020, the POs with a value above US\$ 100 000 accounted for 68% of the total spend whereas in 2021, they accounted for 61% of the total spend.

Fig. 3. Total value of POs per value range

Total value of POs per value range

in million US\$, total procurement value: US\$ 1.657 billion



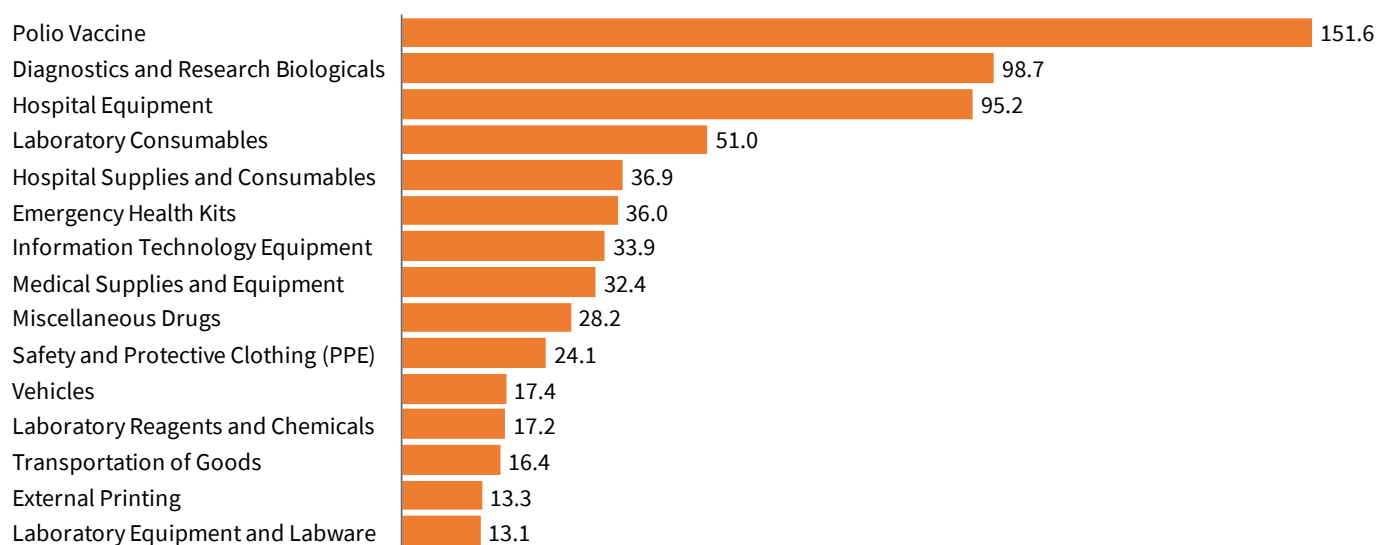
2.3 Procurement by category

Fig. 4 and Fig. 5 show the major categories of procurement expenditure for goods and services, respectively. The top five procurement categories for goods include Polio Vaccines (9.1% of total spend), Diagnostics and Research Biologicals (6.0%), Hospital Equipment (5.7%), Laboratory Consumables (3.0%), and Hospital Supplies and Consumables (2.2%). This distribution reflects the significant involvement of WHO in responding to the COVID-19 pandemic as these categories (with the exception of the Polio Vaccine category) contain the items that have been most critical in the response to the pandemic. The procurement of polio vaccines increased by US\$ 40.2 million compared to 2020. This is due to the spread of Type 2 vaccine-derived polio viruses, mostly in sub-Saharan Africa. To combat its spread, the Global Polio Eradication Initiative has been procuring large quantities of a newly developed novel Oral Polio Vaccine Type 2.

Fig. 4. Largest procurement categories for goods

Largest procurement categories for goods

in million US\$

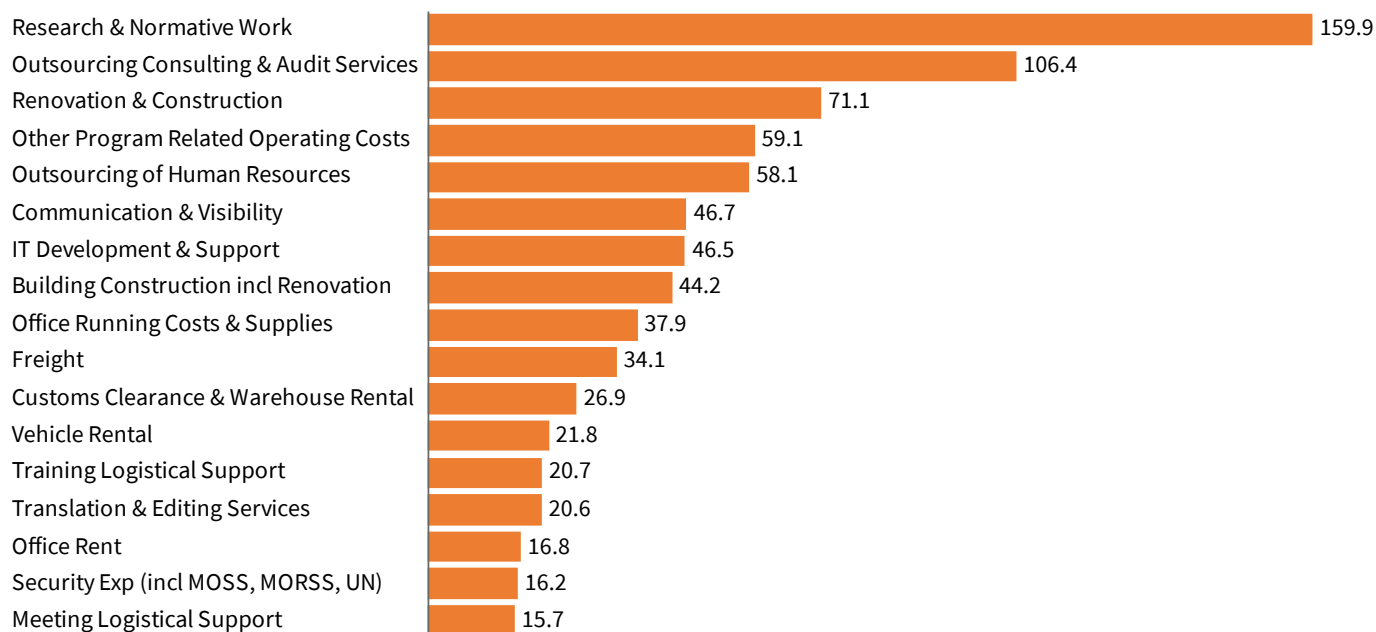


In terms of services, the top three categories of expenditure were Research and Normative work (9.6% of total spend), Consulting and Audit Services (6.4%), and Renovation and Construction (4.3%).

Fig. 5. Largest procurement categories for services

Largest procurement categories for services

in million US\$



2.4 Procurement by WHO headquarters and regional offices

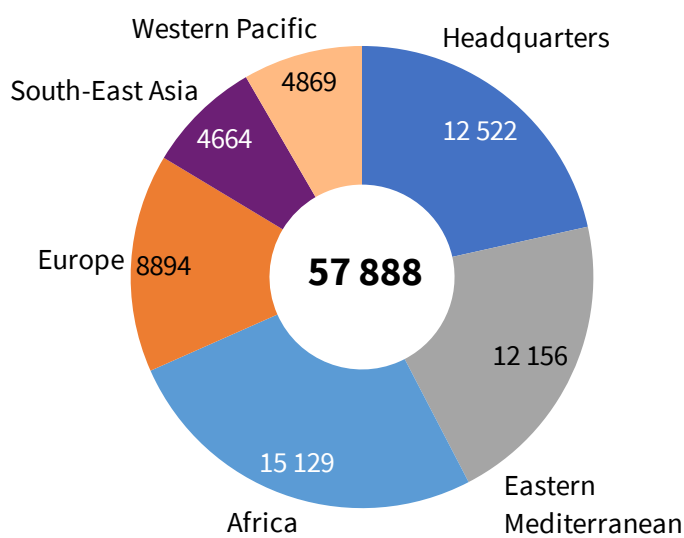
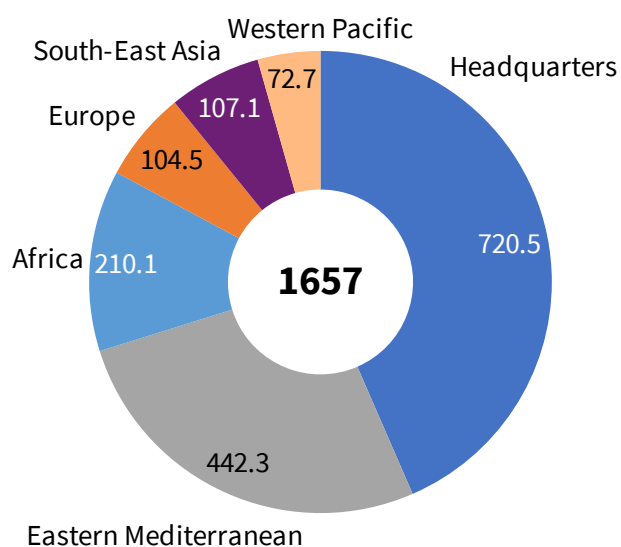
Fig. 6 to Fig. 8 provide further details on the procurement spend profile of WHO headquarters and regional offices. The largest share of procurement is from WHO headquarters with US\$ 720.5 million, which also contains the most significant share of the COVID-19 related procurement (more detail on this in Section 2.6). WHO headquarters, the Regional Office for Africa and the Regional Office for the Eastern Mediterranean account together for US\$ 1.373 billion or 83% of all procurement.

Fig. 6. Procurement by WHO headquarters and regional offices, in terms of value and number of POs⁶

Procurement by WHO headquarters and regional offices

In million US\$, total procurement value: US\$ 1.657 billion

In number of POs, total number of POs: 57 888



In terms of number of POs, the African Region is the region with the largest number of POs (15 129 or 26% of all POs). WHO headquarters, the Regional Office for Africa and the Regional Office for the Eastern Mediterranean together account for 39 807 or 69% of all POs. The average value per PO varies between the regions, with most regions showing an average value between US\$ 11 000 and US\$ 23 000. For WHO headquarters, the average value of a PO was US\$ 57 540 and for the Eastern Mediterranean Region, the average value of a PO was US\$ 36 382.

The following figures show additional details on the procurement spend profile for WHO headquarters. These figures are included here as an example. The equivalent graphs have been produced for each regional office and are included in Annexes 2 and 3.

Fig. 7 shows that for WHO headquarters, the total procurement value of US\$ 720.5 million was distributed between US\$ 349.4 million (48%) in goods and US\$ 371.1 million (52%) in services. For goods, the largest procurement categories reflect the ongoing pandemic (e.g., Diagnostics and Research Biologicals, Hospital Equipment, and Safety and Protective Clothing (PPE) and the centralization of the procurement of certain categories (e.g., Polio Vaccine).

Fig. 8 provides details of the overall procurement spend of US\$ 720.5 million by WHO headquarters related to the COVID-19 responses and also provides a disaggregated view between goods and services. Within the COVID-19 related procurement, the share of procurement of goods was 72 percent. Within the remaining procurement not related to the COVID-19 response, the share of goods was 36 percent. Additional details on the procurement profile of regional offices are included in Annexes 2 and 3.

⁶ The distinct number of POs amounts to 57 888. If separate PO lines contained in a single PO are assigned to two or more of WHO headquarters or regional offices, the PO appears in each office's count.

Fig. 7. Procurement overview for WHO headquarters (the same details for regional offices are included in Annex 2)

Procurement overview for WHO headquarters

in million US\$

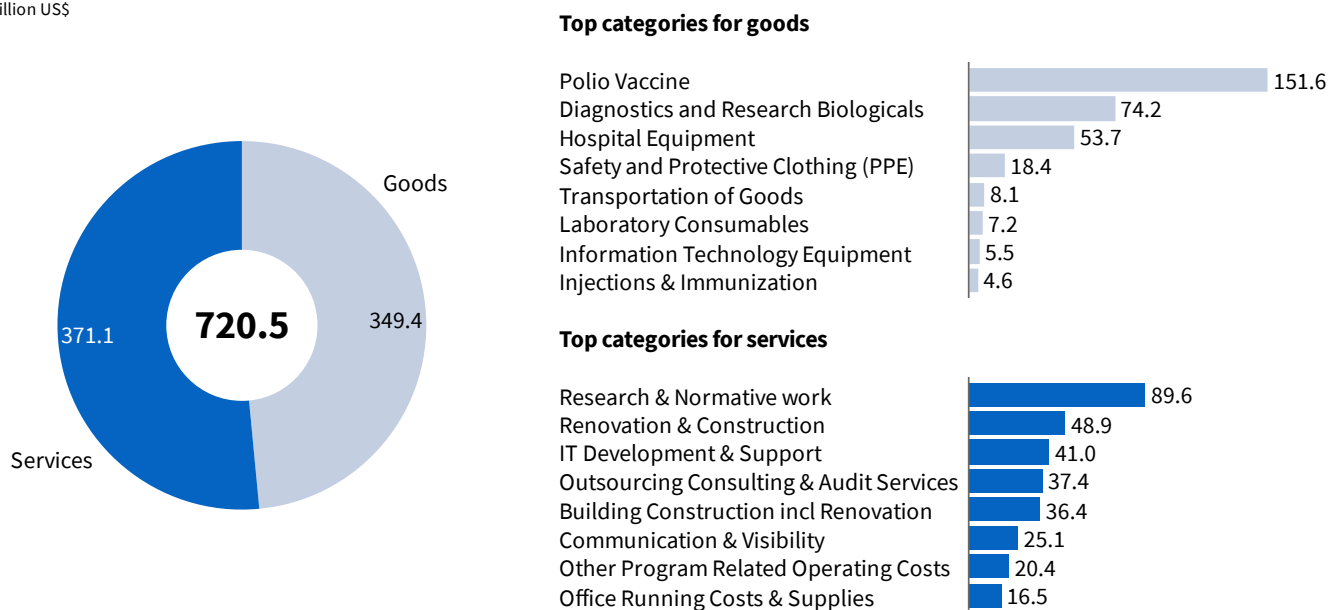
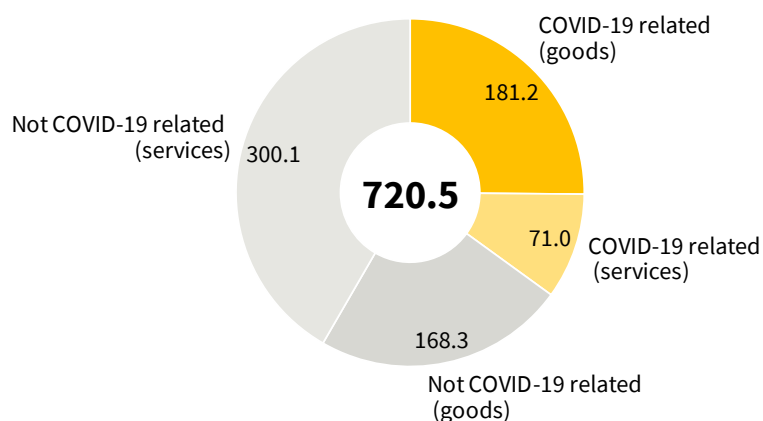


Fig. 8. COVID-19 related procurement for WHO headquarters (the same details for regional offices are included in Annex 3)

COVID-19 related procurement for WHO headquarters

in million US\$



2.5 Procurement by supplier and supplier countries

In 2021, a total of 18 117 different suppliers provided goods and services to WHO. Of those, the top 88 suppliers accounted for 50% of the WHO's overall procurement expenditure and the top 1557 suppliers accounted for 80% of WHO's overall procurement expenditure.

Fig. 9 shows the largest suppliers and their respective procurement volume broken down by goods and services. Most of the largest suppliers are suppliers of goods, with some also or exclusively providing services to the WHO. The 10 largest suppliers counted for US\$ 408.2 million (25%) of the overall procurement expenditure. The goods procured from the United Nations Children's Fund (UNICEF) are almost entirely poliovirus vaccines, which are manufactured by GlaxoSmithKline, BioFarma and Sanofi.

Fig. 9. Largest suppliers

Largest suppliers

in million US\$, including procurement from UN organizations

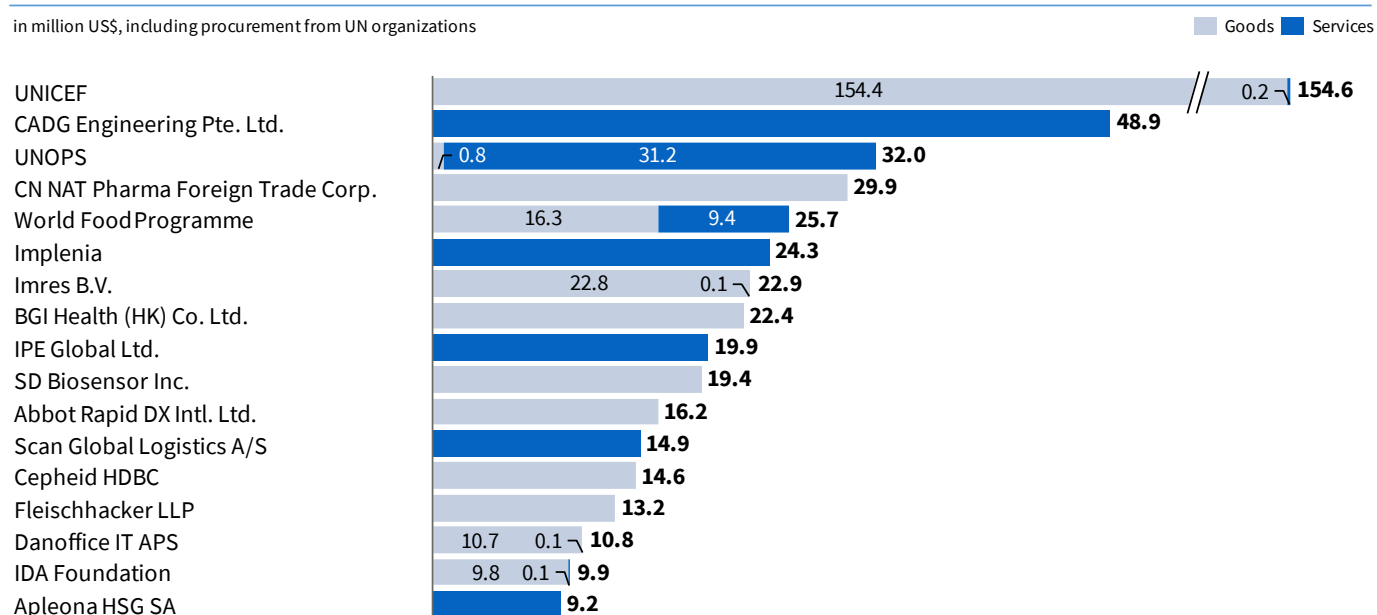


Fig. 10 shows where WHO's suppliers are located. Overall, WHO procured from suppliers from 186 countries. The top countries in terms of origin of supplier include Denmark, Switzerland, China, Yemen⁷, and Singapore. Together, the top five countries accounted for US\$ 615.9 million (37.2%) of the overall procurement spend in 2021.

Some of this procurement is from other UN organizations. For Denmark, US\$ 154.4 million of the US\$ 224.2 million was purchased from UNICEF Supply Division in Copenhagen, which consisted almost entirely of poliovirus vaccines. Another US\$ 25.2 million was purchased from United Nations Office for Project Services (UNOPS). For Italy, a large majority of the procurement (US\$ 23.7 million) was from the World Food Programme.

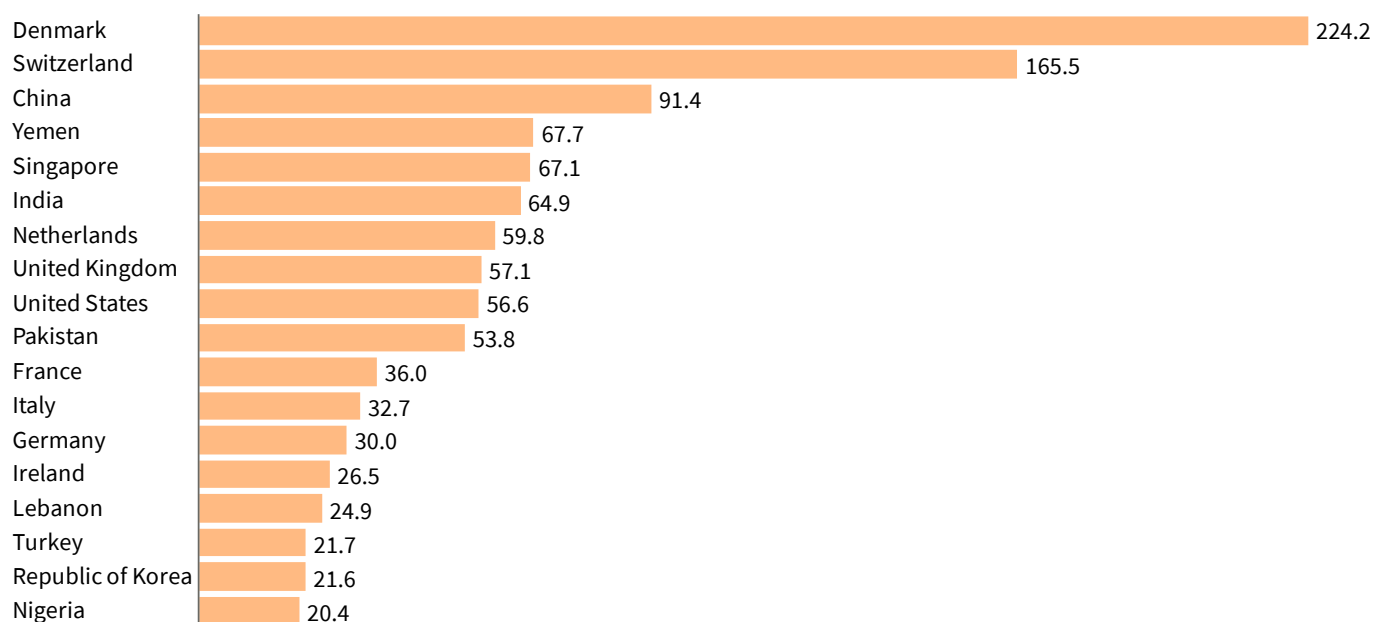
Many of the goods and services purchased by WHO are procured locally and from developing countries, and countries with economies in transition, as reflected in the consolidated list of supplier countries available in Annex 1.

⁷ The suppliers in Yemen mainly provided custom clearance, transportation and warehousing services, as well as medical gases and fuel to maintain and operate health facilities and hospitals.

Fig. 10. Largest supplier countries⁸

Largest supplier countries

in million US\$, including procurement from UN organizations



2.6 COVID-19 related procurement

In 2020 and 2021, the COVID-19 global pandemic created an unprecedented global health crisis. WHO's procurement footprint was significantly impacted by the Organization's emergency response. In 2021, WHO spent US\$ 638.0 million (38.5% of total spend) on COVID-19 related goods and services. These POs had an average value of US\$ 36 614 and a median value of US\$ 8048.

Fig. 11 illustrates the split between COVID-19 related and non-COVID-19 related procurement. The figure also shows key categories in which COVID-19 related procurement took place. By far, the largest COVID-19 related procurement categories were Diagnostics and Research Biologicals (containing items required for testing and analysis) and Hospital Equipment. These two categories together made up US\$ 171.3 million (27% of the COVID-19 related spend). Other key procurement categories included laboratory and hospital consumables, and PPE (such as masks, gloves, and gowns). In the procurement of services, the top categories include services consulting (US\$ 51.4 million) and research and normative works (US\$ 49.8 million) and also includes the ancillary costs for the transportation and freight of the procured goods (US\$ 30.0 million).

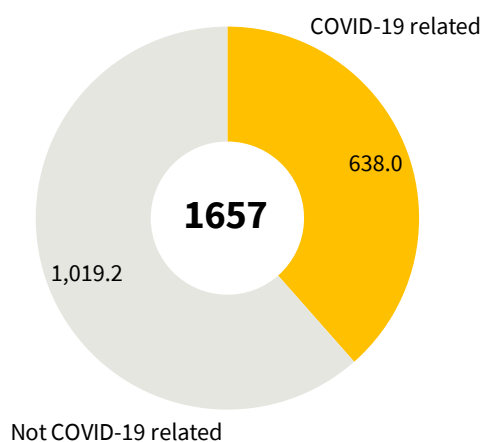
The portion of procurement of COVID-19 related goods and services varied between WHO headquarters and regional offices. WHO headquarters and the Regional Office for the Eastern Mediterranean together accounted for US\$ 415.5 million or 65% of all COVID-19 related procurement. It should be noted that most of the goods purchased at WHO headquarters were delivered to regions and countries.

⁸ Supplier country: Denmark – US\$ 154.4 million of the US\$ 224.2 million indicated for Denmark was purchased from UNICEF Supply Division in Copenhagen, which consisted almost entirely of poliovirus vaccines. US\$ 25.2 million of the US\$ 224.2 million indicated for Denmark was purchased from the United Nations Office for Project Services (UNOPS) and consisted of human resources services. Italy – US\$ 23.7 million of the US\$ 32.7 million indicated for Italy was purchased from the World Food Programme in Rome and consisted mainly of services for the implementation of programmes and medical supplies and equipment.

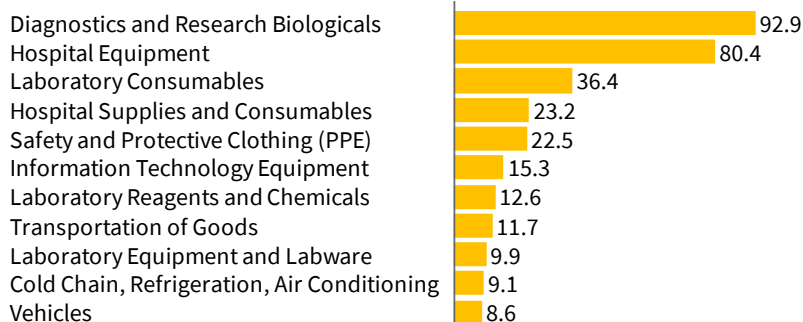
Fig. 11. COVID-19 related procurement and key categories

COVID-19 related procurement and key categories

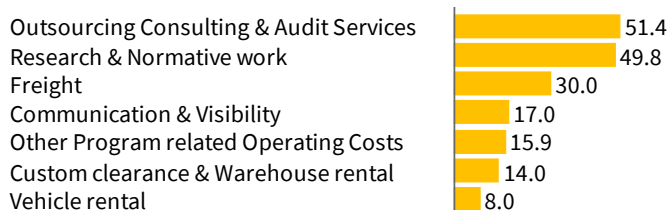
in million US\$



... thereof goods



... thereof services

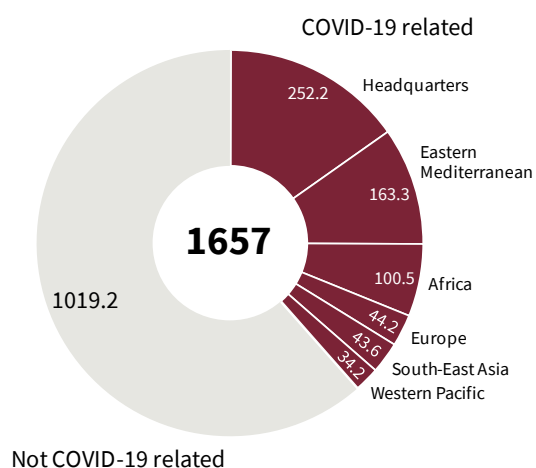


In terms of percentage of the total procurement spend that related to COVID-19, Fig. 12 shows that the Regional Offices for Africa and for the Western Pacific had the comparatively highest COVID-19 percentages with 48% and 47% respectively, followed by the Regional Office for Europe (42%), the Regional Office for South-East Asia (41%), the Regional Office for the Eastern Mediterranean (37%), and Headquarters (35%).

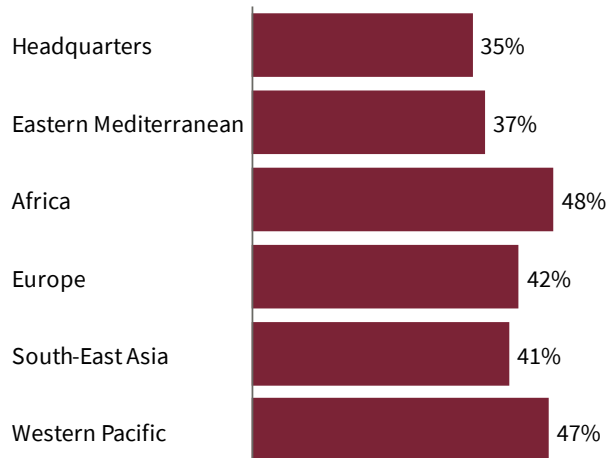
Fig. 12. COVID-19 related procurement by WHO headquarters and regionals offices, plus share of COVID-19 procurement by office

COVID-19 related procurement by WHO headquarters and regional offices

in million US\$



... COVID-19 related procurement as share of total procurement



2.7 Procurement from catalogues

WHO establishes and uses long-term agreements (LTA) and catalogues to enable the efficient processing and procurement of frequently required goods and services. A catalogue is a list of specific goods, accessible online on the WHO intranet, with standardized specifications across all WHO offices for which LTAs have been established with suppliers, through a competitive or pre-qualification process. Once the catalogue is set-up, the Global Procurement and Logistics unit can issue POs directly to the suppliers, based on requesting offices/internal clients requisitions.

Fig. 13 shows the value and categories of goods that were procured through catalogues. Out of a total spend US\$ 363.2 million,⁹ a total of US\$ 69.8 million (or 19%) was procured from catalogues. The largest categories included Emergency Health Kits and various kinds of drugs as well as Information Technology Equipment, Vehicles, Diagnostics and Research Biologicals, and Laboratory Consumables.

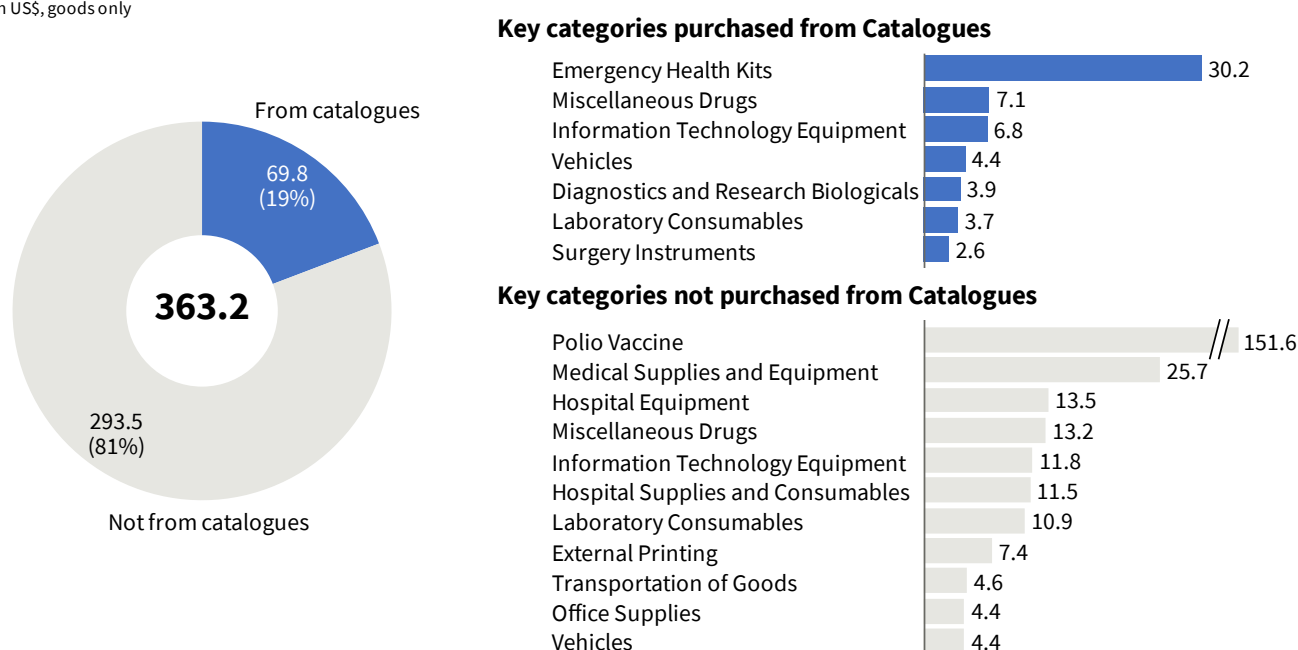
The largest categories of goods not procured from catalogues include Polio Vaccines, a wide range of various medical supplies and equipment, hospital equipment, and other drugs (categorized under Miscellaneous Drugs).

Increasing spend under long-term agreements and catalogues will remain a focus moving forward.

Fig. 13. Procurement of goods from catalogues (not COVID-19 related)

Procurement of goods from catalogues (not COVID-19 related)

in million US\$, goods only



⁹ Consideration of goods procurement relevant for catalogues only, i.e. procurement of goods without purchasing from United Nations organizations and without COVID-19 related procurement, hence US\$ 363.2 million.

PART 3

Key initiatives and highlights



3.1 Supporting emergency response in Afghanistan

In August 2021, the events that affected Afghanistan had a direct impact on basic healthcare provision due to a complete supply chain breakdown amongst other challenges on the ground. Throughout the month of August, urgently required health commodities were ready for collection at the WHO Dubai Hub and WHO supplier and partner facilities globally. No commercial freight forwarding options were available into Afghanistan and UN partners were unable to offer transport solutions in the timeframes required.

The Office for the Eastern Mediterranean Region (EMRO) leadership intervened and was able to secure support from the Pakistani International Airlines, which allowed the Global Procurement and Logistics unit to source the first delivery of urgently required humanitarian health commodities into Afghanistan. This milestone enabled the Global Procurement and Logistics unit to source a series of freight solutions competitively, whilst guiding technicalities in-country. A pipeline of global commodities was then delivered into Afghanistan on full charter aircrafts, on flights funded by European Civil Protection and Humanitarian Aid Operations (ECHO) for which WHO obtained landing permits in Kabul, and on flights funded by the Qatari Government and attained again through WHO Eastern Mediterranean Region's leadership.

By the end of 2021, in close collaboration with the Dubai Hub, WHO consolidated, prioritized, and delivered 415 metric tons of cargo on 25 flights. WHO further assisted the delivery of commodities required by partner agencies and country team stakeholders, laying the foundation for an effective response throughout 2022.

3.2 Emergency health kits

WHO designs Emergency Health Kits (EHKs) to provide an immediate and effective health response with essential medicines and health supplies during humanitarian emergencies. WHO establishes LTAs with suppliers such that EHKs can be delivered across the globe in response to all types of emergencies ranging from natural disasters to outbreaks of infectious diseases and armed conflicts. Since 2015, WHO has managed a warehouse in Dubai where it prepositions EHKs as well as other supplies required to respond to emergencies. This approach helps to reduce the time required to provide assistance during emergencies.

Over the past years, WHO has developed new types of EHKs tailored to specific emergency situations and the health profiles of affected populations. For instance, in view of the growing number of populations affected by protracted emergencies, WHO developed the first EHK specifically for non-communicable diseases and primary health care settings. WHO now has 8 kits for emergency response, in addition to a joint UNFPA/WHO kit for reproductive health. Specifically, in 2021:

- the Interagency Emergency Health Kit (IEHK) was procured more than three times as much as compared to 2020, which had already seen a strong demand. Since the requesting countries remained substantially the same, this large increase is a reflection of the continued and aggravated emergency contexts;
- the Pneumonia kit was launched in late 2020, and in 2021 provided medicines to treat 114 300 cases of pneumonia out of which 68 500 cases were among children less than 5 years old;
- the Trauma and Emergency Surgery Kit (TESK), which was launched in 2019, has now become a widely adopted resource. It was used in 2021 to support ~63 000 patients requiring surgical care in emergency situations;
- the Paediatric Kit (PED/SAM) was launched in late 2020 and in 2021 it supported treatment for ~180 000 hospitalized children and ~82 000 children visiting outpatient services or mobile clinics;
- other kits to support the treatment of chronic disease patients in emergency settings included the Non-Communicable Diseases kit 2017, of which 1774 modules have been procured across the 5 different modules; and
- the revised Cholera kit 2020, used to tackle outbreaks of cholera in Africa and Middle East. There are 15 modules available in the kit and 2550 modules have been procured since its launch.

Over the past years, WHO procured and distributed EHKs valued on average over US\$ 35 million per year. EHKs are shipped to more than 30 countries with multiple or complex health emergencies.

3.3 Sustainable procurement

WHO has recently updated its procurement policy and expanded a previous procurement principle on environment to the broader sustainable procurement concept, to be applied to the extent possible within the context of the goods or services being purchased, as well as any specific country, industry or supply market conditions.

Sustainable Procurement is defined as “requirements, specifications and criteria that are compatible and in favour of the protection of the environment, of social progress and in support of economic development, namely by seeking resource efficiency, improving the quality of products and services and ultimately optimizing costs”. Environmental considerations are already included in some WHO procurement processes (for instance by purchasing electric vehicles which are now included in the WHO catalogue). Social considerations are part of the WHO standard solicitation documents and contractual conditions, such as ethical behaviour and compliance with WHO policies, such as prevention of sexual exploitation and abuse, whistleblowing and protection against retaliation, disability inclusion and occupational health and safety. Several large-scale outsourcing contracts require the use of local labour to support local economies. Social considerations are also included in the United Nations Supplier Code of Conduct, which suppliers to WHO need to adhere to. In terms of economic considerations, WHO regularly takes into account the whole-life-cost, in particular for categories such as vehicles or for large medical equipment. On the latter, when designing the tender processes, WHO procurement staff ensure that aspects such as local maintenance, training, installation or energy consumption are captured and considered during the evaluation process.

In 2021, WHO collected carbon emission data of its global freight forwarders (responsible for over 6000 international shipments per year and several thousand tonnes of emissions), which will be offset in 2022 as part of WHO’s Carbon Neutral roadmap.

Starting in 2022, WHO will actively consider the incorporation of social, economic and environmental factors when establishing global LTAs and will roll out a supplier sustainability questionnaire. Suppliers play an essential role to improve the sustainability of WHO’s supply chain hence WHO will continue to actively engage and collaborate with the supplier community.

3.4 Highlights from WHO regional offices

Regional Office for Africa: In order to increase the awareness of procurement actors, raise visibility of activities and promote the usage of long-term agreements (LTAs) in the African Region, the Regional Office for Africa held a virtual Open Door event where more than 380 participants attended from across the entire region. The event had the objective to explain the procurement rules and procedures and to share experiences. The event has seen very positive feedback from the audience. Also, in order to efficiently support health interventions and programs in countries in the region, WHO African Region implemented a centralized library of LTAs called “Contrathèque”. This library ensures that 18 recurrent General Operational Services are under established LTAs, which includes 846 contracts covering 47 countries in the region. It has the objective of enabling volume leverage, reducing administrative costs and guaranteeing fixed prices. As part of the implementation of the Contrathèque, a web-based LTA data collection tool has been developed. The above have been very welcomed in the Region and results in better collaboration and commitment of the stakeholders to procurement.

Regional Office for the Eastern Mediterranean: In 2021, the Eastern Mediterranean Region supported countries to ensure that the required goods and services were promptly delivered, with a specific focus on countries with ongoing emergencies. For instance, WHO has played a major role in responding to the health needs in Yemen

through the provision of support to 291 health facilities treating men, women and children. This included the supply of water, fuel, oxygen refilling, medical supplies, equipment, laboratory supplies, anti-cancer medicines and haemodialysis supplies. Almost 1 million children younger than 1 year of age were vaccinated against preventable diseases. 37 496 Caesarean sections and 139 888 regular deliveries were conducted. Other vulnerable groups were also supported and more than 120 000 patients with mental health disorders had access to adequate care through the provision of psychotropic drugs in 16 health facilities across Yemen.

Regional Office for Europe: Since 2020, as a response to the COVID-19 pandemic, the WHO Regional Office for Europe enhanced its Quality Assurance (QA) capability by joining the global QA network. Special efforts have been made to assist local procurement of medical products to support Member States. Europe Region technical experts from different divisions were appointed as QA reviewers for special items such as medicines, emergency medical kits, vaccines, laboratory equipment and supplies, laboratory diagnostics, medical devices, disinfectants, and hospital equipment and supplies. Subsequently, the QA reviewer list was published on Europe Region intranet such that requestors could directly reach reviewers to gain faster responses. The Regional Office for Europe QA team has been actively advising on those items, not only during the COVID-19 pandemic but in early 2022 also to support the increase of requests coming from Ukraine and neighbouring countries.

Regional Office for South-East Asia: The Procurement team in Regional Office for South-East Asia conducted monthly meetings with WHO Representative and Administrative Officers to support emergency COVID-19 related procurement requirements in the country offices. This close collaboration contributed to efficient implementation during a difficult period and has seen South-East Asia Region take the lead on overall budgetary implementation for the last biennium. In addition, technical capacity building and professionalization of procurement and technical staff has been an opportunity for cross UN joint learning by encouraging staff who to complete the UNDP CIPS (Chartered Institute for Procurement and Supply) training. Currently, there are 34 staff from all 11 country offices who have completed the UNDP CIPS training course. Efforts continue to be made to expand and strengthen at the regional and country office level.

Regional Office for the Western Pacific: In 2021, WHO in the Western Pacific procured five oxygen generating plants to support Cambodia, Lao and Papua New Guinea in addressing the urgent need of medical oxygen. This support is critical during the Covid-19 pandemic and helps ensure a stable and independent source of oxygen in the countries for medical treatments that require oxygen therapy. These plants will help produce 552 000 m³ of oxygen per year in Cambodia, 480 000 m³ in Lao and 160 000 m³ in Papua New Guinea. WHO also initiated the procurement of a further seven units of oxygen generating plants for Pacific Island countries in the Region. The demand for oxygen generating plants increased drastically as we entered the second year of the pandemic. To secure supply, the WHO team established and maintained constant communications with the manufacturer while discussions on in-kind donation agreements with governments were underway. As a result, the orders from WHO were promptly placed in the queue for production.

Annexes



Annex 1. Procurement by supplier country and territories

Supplier Country/Territory	Total PO Value (in US\$)
Afghanistan	15 044 006
Albania	1 200 451
Algeria	772 532
Angola	1 172 582
Antigua and Barbuda	6100
Argentina	504 920
Armenia	3 016 874
Australia	17 889 519
Austria	11 439 030
Azerbaijan	1 913 118
Bahrain	62 110
Bangladesh	7 462 785
Barbados	301 079
Belarus	527 738
Belgium	9 779 744
Belize	20 000
Benin	2 320 515
Bhutan	1 237 850
Bolivia (Plurinational State of)	4500
Bosnia and Herzegovina	646 924
Botswana	1 475 937
Brazil	1 515 728
Brunei Darussalam	66 975
Bulgaria	611 070
Burkina Faso	4 478 448
Burundi	2 044 328
Cabo Verde	383 877
Cambodia	4 355 526
Cameroon	6 688 486
Canada	14 891 097
Central African Republic	2 289 581
Chad	3 575 049
Chile	265 761
China	91 421 222
Colombia	9 353 355
Comoros	617 452
Congo (the)	9 417 176
Costa Rica	50 538
Côte d'Ivoire	3 800 185
Croatia	297 727
Cuba	69 028
Cyprus	1 267 034
Czechia	801 130
Democratic People's Republic of Korea (the)	90 077
Democratic Republic of the Congo	15 567 170
Denmark	224 195 487
Djibouti	1 674 205
Dominican Republic	47 152
Ecuador	39 060

Supplier Country/Territory	Total PO Value (in US\$)
Egypt	13 389 622
El Salvador	112 056
Equatorial Guinea	787 003
Eritrea	688 521
Estonia	616 375
Eswatini	1 774 383
Ethiopia	6 956 892
Fiji	2 431 045
Finland	555 354
France	35 999 837
France (New Caledonia)	2180
France (French Polynesia)	16 000
Gabon	1 461 998
Gambia	465 106
Georgia	1 932 944
Germany	29 950 200
Ghana	5 228 386
Greece	1 066 219
Guam	21 527
Guatemala	169 373
Guinea	6 427 085
Guinea-Bissau	817 836
Hungary	889 314
Iceland	15 223
India	64 945 325
Indonesia	3 981 946
Iran (Islamic Republic of)	2 960 883
Iraq	2 231 830
Ireland	26 473 013
Israel	961 192
Italy	32 666 600
Jamaica	7000
Japan	5 053 069
Jordan	17 281 540
Kazakhstan	2 184 304
Kenya	15 763 343
Kiribati	167 170
Kuwait	97 107
Kyrgyzstan	2 617 300
Lao People's Democratic Republic (the)	6 843 335
Latvia	211 599
Lebanon	24 932 749
Lesotho	805 081
Liberia	3 688 127
Libya	5 657 869
Lithuania	410 798
Luxembourg	1 939 365
Madagascar	1 707 088
Malawi	5 473 067
Malaysia	6 105 370
Maldives	2 065 374
Mali	7 562 775

Supplier Country/Territory	Total PO Value (in US\$)
Malta	310 309
Marshall Islands	7345
Mauritania	1 037 820
Mauritius	870 986
Mexico	856 358
Micronesia (Federated States of)	147 018
Mongolia	4 179 790
Montenegro	472 601
Morocco	2 372 605
Mozambique	2 798 458
Myanmar	5 546 364
Namibia	1 048 162
Nauru	33 500
Nepal	5 124 374
Netherlands	59 800 750
New Zealand	6 144 537
Nicaragua	6 600
Niger	3 851 465
Nigeria	20 350 896
North Macedonia	1 015 650
Norway	4 830 302
occupied Palestinian territory, including east Jerusalem	12 998 144
Oman	896 113
Pakistan	53 808 264
Palau	21 778
Panama	7733
Papua New Guinea	2 972 711
Paraguay	24 960
Peru	309 740
Philippines	11 100 474
Poland	696 094
Portugal	2 587 620
Qatar	178 350
Republic of Korea	21 645 049
Republic of Moldova	4 529 283
Romania	3 364 594
Russian Federation	5 503 936
Rwanda	3 091 093
Saint Lucia	775
Samoa	610 307
Sao Tome and Principe	596 255
Saudi Arabia	282 901
Senegal	3 144 598
Serbia	2 647 659
Seychelles	97 888
Sierra Leone	3 823 803
Singapore	67 051 004
Slovakia	249 224
Slovenia	311 234
Solomon Islands	915 778
Somalia	7 879 401
South Africa	7 246 520

Supplier Country/Territory	Total PO Value (in US\$)
South Sudan	6 548 868
Spain	11 122 932
Sri Lanka	4 271 923
Sudan	8 520 861
Suriname	5000
Sweden	1 763 309
Switzerland	165 509 547
Syrian Arab Republic	10 007 182
Taiwan, China	359 160
Tajikistan	1 725 152
Thailand	5 407 069
Timor-Leste	4 985 612
Togo	2 372 993
Tonga	538 518
Trinidad and Tobago	49 940
Tunisia	3 724 284
Turkey	21 654 544
Turkmenistan	668 239
Uganda	7 624 375
Ukraine	14 244 007
United Arab Emirates	9 472 197
United Kingdom of Great Britain and Northern Ireland	57 092 325
United Kingdom of Great Britain and Northern Ireland (Gibraltar)	7 414 059
United Republic of Tanzania (the)	2 321 602
United States of America (the)	56 621 589
United States of America (the) (American Samoa)	6490
Uruguay	188 945
Uzbekistan	3 175 955
Vanuatu	396 878
Venezuela (Bolivarian Republic of)	5000
Viet Nam	2 566 610
Yemen	67 679 420
Zambia	3 071 055
Zimbabwe	3 424 484

Annex 2. Procurement of goods and services by WHO regional office¹⁰

Fig. A2.1. Procurement of goods and services by the Regional Office for Africa

Procurement of goods and services by the Regional Office for Africa

in million US\$

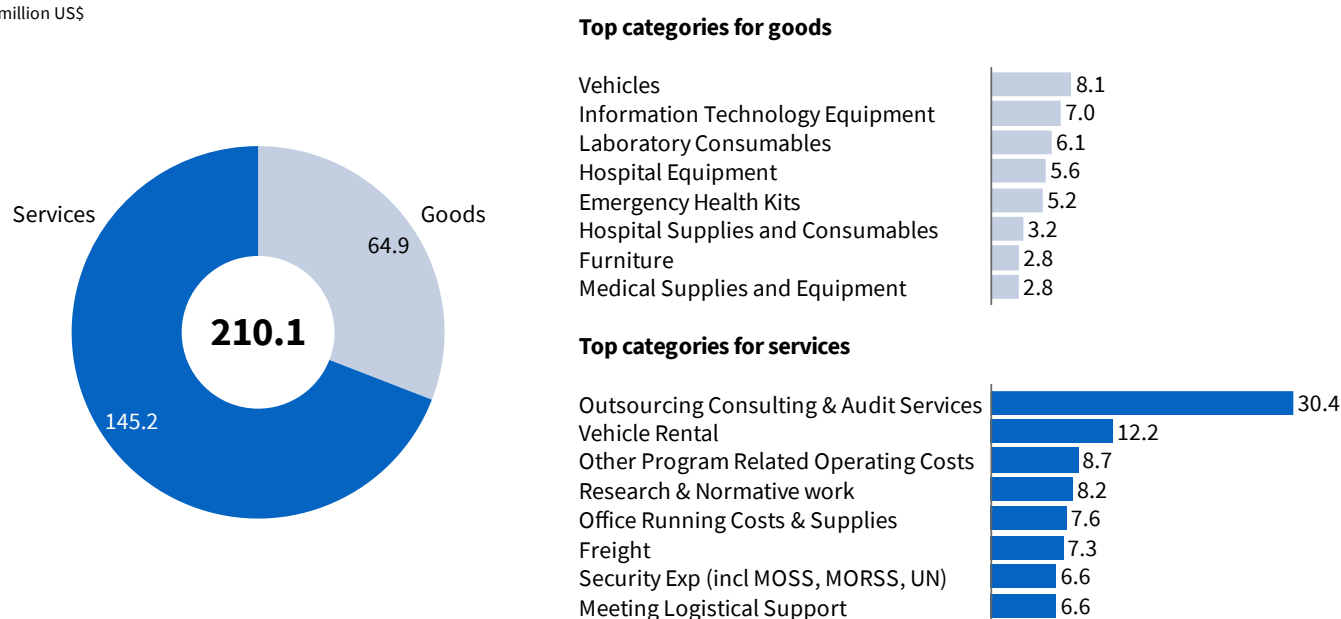
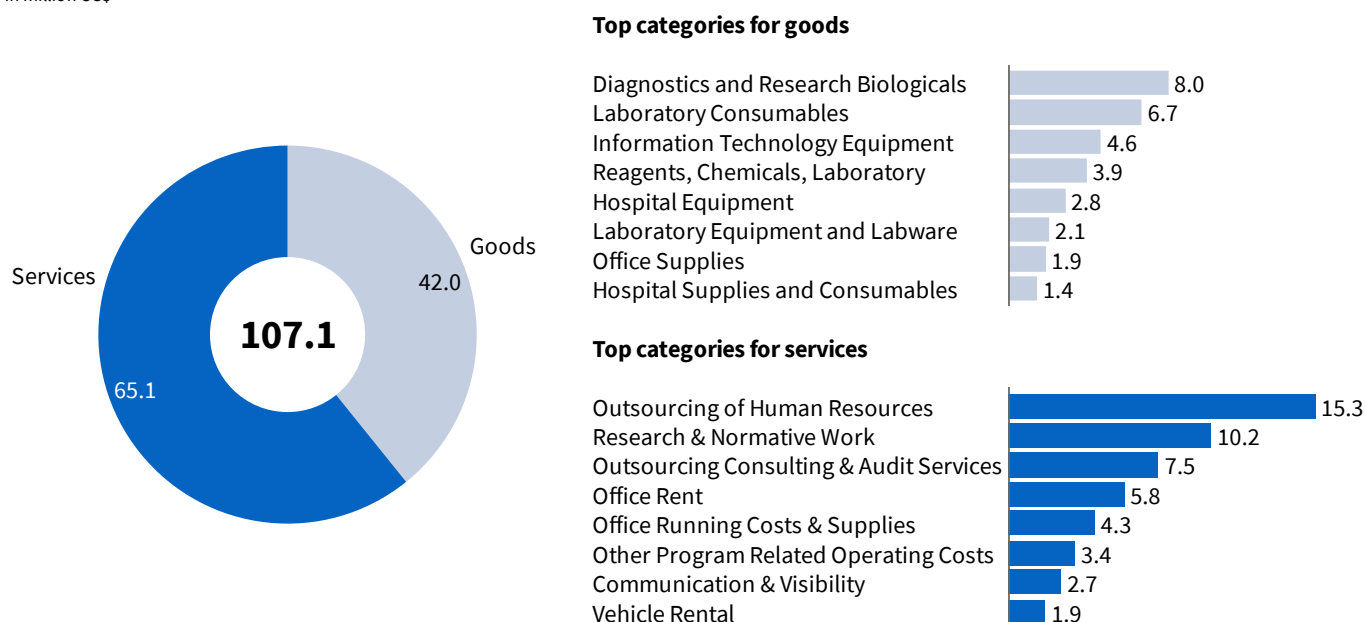


Fig. A2.2. Procurement of goods and services by the Regional Office for South-East Asia

Procurement of goods and services by the Regional Office for South-East Asia

in million US\$



¹⁰ Data for this report is drawn from WHO's enterprise resource planning (ERP) system (called the Global Management System or GSM). The Regional Office for the Americas does not use the same ERP system as the rest of WHO.

Fig. A2.3. Procurement of goods and services by the Regional Office for Europe

Procurement of goods and services by the Regional Office for Europe

in million US\$

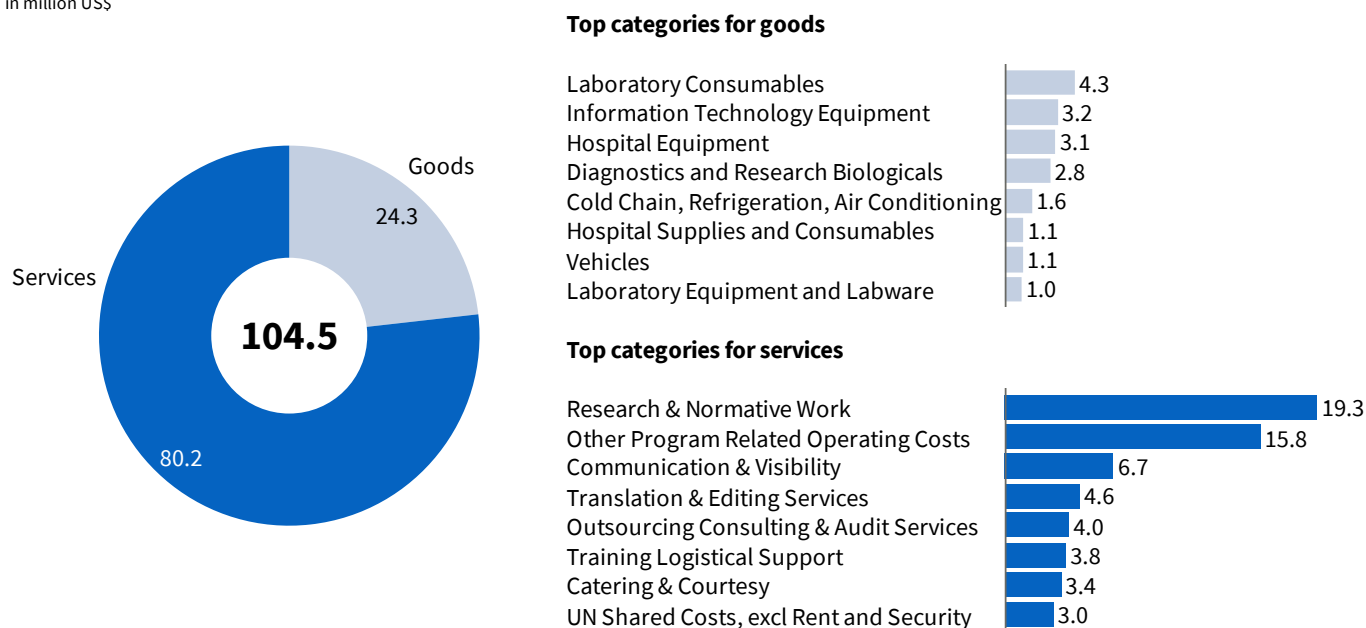


Fig. A2.4. Procurement of goods and services by the Regional Office for the Eastern Mediterranean

Procurement of goods and services by the Regional Office for the Eastern Mediterranean

in million US\$

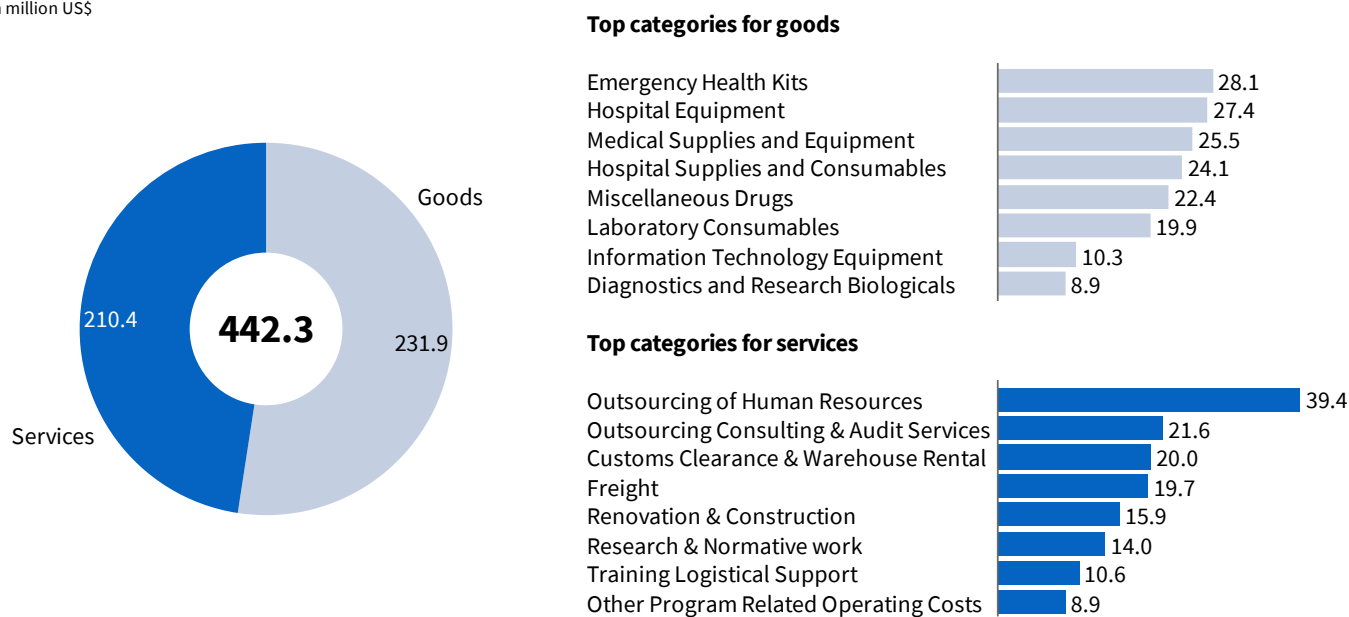
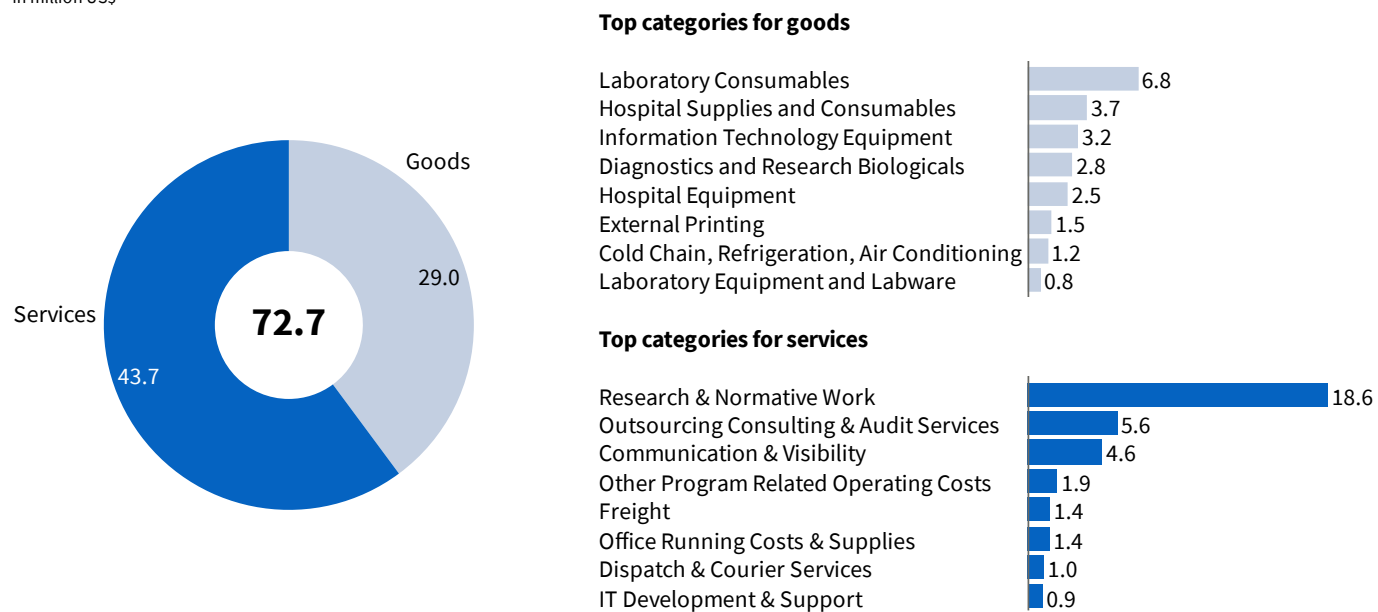


Fig. A2.5. Procurement of goods and services by the Regional Office for the Western Pacific

Procurement of goods and services by the Regional Office for the Western Pacific

in million US\$



Annex 3. COVID-19 related procurement by WHO regional office¹¹

Fig. A3.1. COVID-19 related procurement by the Regional Office for Africa

COVID-19 related procurement by the Regional Office for Africa

in million US\$

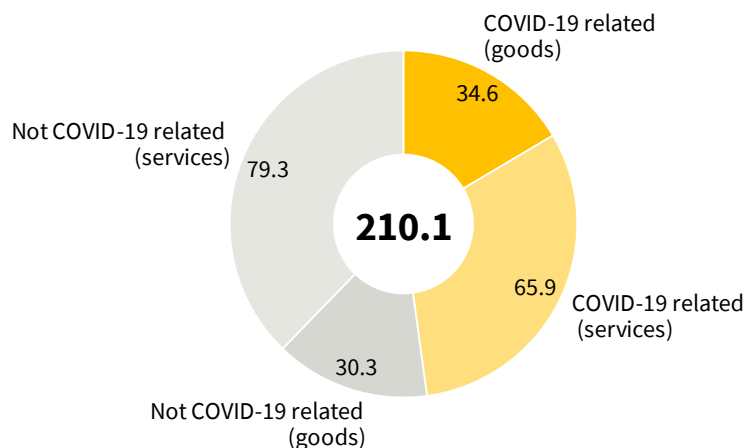
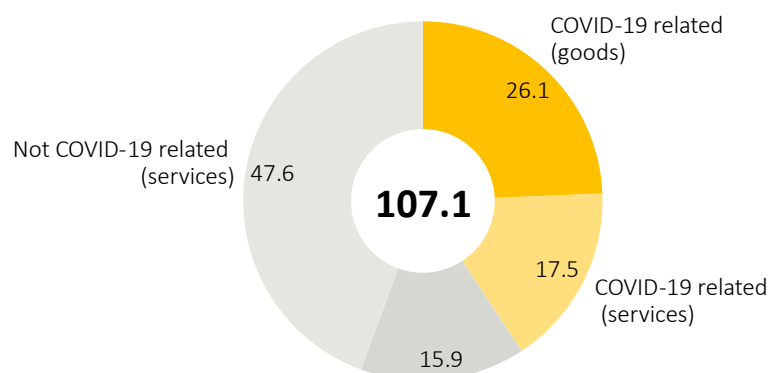


Fig. A3.2. COVID-19 related procurement by the Regional Office for South-East Asia

COVID-19 related procurement by the Regional Office for South-East Asia



¹¹ Data for this report is drawn from WHO's enterprise resource planning (ERP) system (called the Global Management System or GSM). The Regional Office for the Americas does not use the same ERP system as the rest of WHO.

Fig. A3.3. COVID-19 related procurement by the Regional Office for Europe

COVID-19 related procurement by the Regional Office for Europe

in million US\$

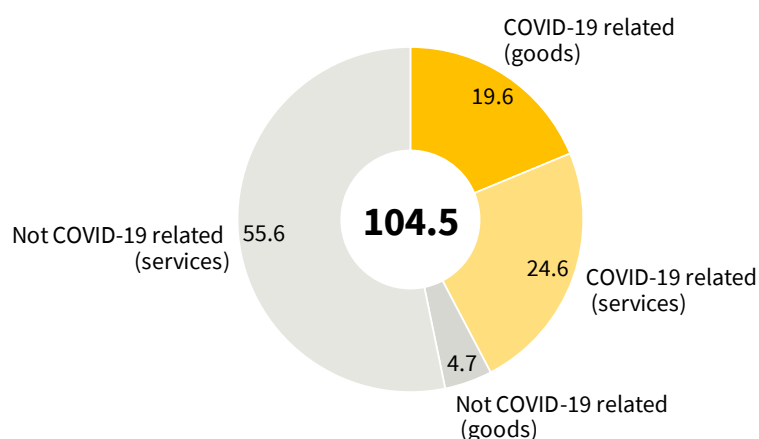


Fig. A3.4. COVID-19 related procurement by the Regional Office for the Eastern Mediterranean

COVID-19 related procurement by the Regional Office for the Eastern Mediterranean

in million US\$

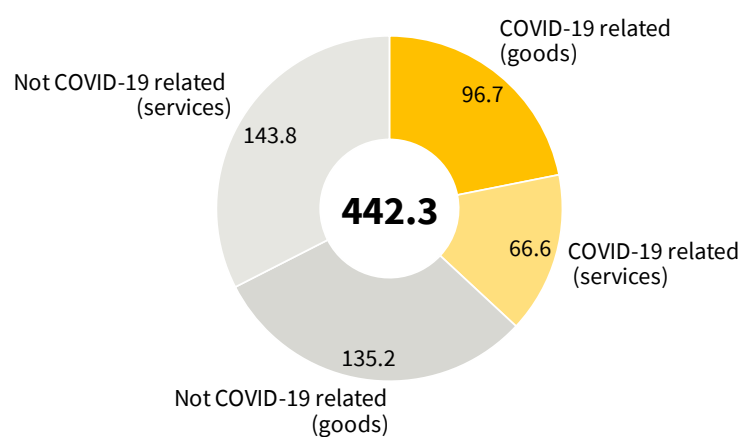
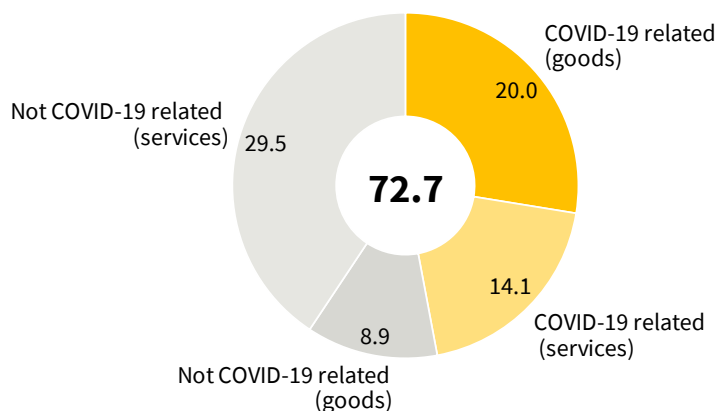


Fig. A3.5. COVID-19 related procurement by the Regional Office for the Western Pacific

COVID-19 related procurement by the Regional Office for the Western Pacific

in million US\$



Annex 4. How to become a supplier to WHO

Suppliers play an essential role in WHO's supply chain and in 2021 alone, WHO contracted over 18 000 different suppliers from 186 countries. General guidance on how to become a WHO supplier can be accessed on the WHO website¹², including the different procedures and solicitation methods used, contractual information, the WHO pre-qualification programme, and FAQ.

WHO participates in the United Nations Global Marketplace (UNGM)¹³, the common procurement portal of the United Nations. UNGM acts as a single window through which potential suppliers may register to access a global market of over US\$ 22 billion annually across United Nations organizations. It allows suppliers to keep current business information available to all United Nations organizations as a tool for locating potential suppliers. It also provides online access to all tender opportunities and contract awards published by many United Nations agencies.

WHO issues tenders to its pre-qualified vendors for goods and services directly and publishes open competition procurement opportunities on [UNGM](#). While qualification criteria may be further specified to meet the needs of a particular purchase, all qualified WHO vendors must meet the following general criteria:

- have adequate financial resources to perform the contract or the ability to obtain them;
- provide audited financial statements for completed fiscal years upon request;
- comply fully and effectively with WHO general terms and conditions of the contract;
- have the necessary organization, facilities, experience, accounting and operational controls; adequate insurance and technical skills (including, as needed, quality controls, property and production control systems, standards and safety programmes applicable to goods produced or services performed);
- have a record of satisfactory performance with WHO or UN Agencies, when applicable;
- have sufficient material and financial resources to meet all existing commercial commitments; and
- have not been temporarily suspended or debarred by WHO, another United Nations agency or the World Bank. WHO considers vendors included in the United Nations Security Council Sanction Lists (1267) to be ineligible for WHO contracts.

New suppliers can register on UNGM and indicate their interest in doing business with WHO, and they can then compete for the WHO procurement opportunities that are posted on UNGM. A step-by-step supplier guide is available on the UNGM and WHO websites including on how to use WHO's e-tendering system.

New suppliers may inform themselves of procurement activities of WHO and other UN entities using the [Annual Statistical Report on UN Procurement data portal](#) on the United Nations Global Marketplace. This data portal provides access to procurement statistics of 39 UN organizations through interactive dashboards, as well as the annual reports themselves. This can be useful to suppliers to understand which goods and services are typically procured by each UN organization so that suppliers can target their commercial efforts. Potential suppliers may also check the lists of contracts awarded by WHO, which is included on the WHO website¹⁴.

All WHO suppliers must abide by the United Nations Supplier Code of Conduct and comply with WHO General Terms and Conditions and other relevant WHO Policies available on the WHO website.

¹² <https://www.who.int/about/accountability/procurement/become-a-supplier>

¹³ <https://www.ungm.org>

¹⁴ <https://www.who.int/about/accountability/procurement/contract-awards>

Procurement and Supply Services Department
Business Operations Division

World Health Organization
20 Avenue Appia
1211 Geneva 27
Switzerland
who.int

