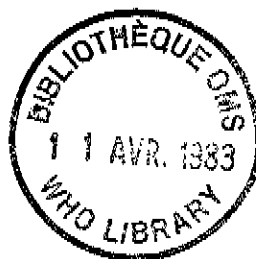




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EXISTING EVALUATION MECHANISMS  
AT THE WHO REGIONAL OFFICE FOR EUROPE

W.H.O. - ROE

*программы,  
орг. + админ  
eval. studies*

In recent years the evaluation mechanisms and procedures at the WHO Regional Office for Europe have been integrated with the managerial process for WHO programme development. Special attention is now being paid to a more systematic application of the different components of evaluation and, whenever possible, to computerizing them as a by-product of the process evaluated.

Coordination of this "internal" evaluation process and mechanism with the evaluation made by Member States of their national health programmes needs further strengthening, although differences in timing as well as methods will remain. This coordination, which will probably mainly concern compatibility of procedures, is of prime importance for rational and adequate assessment of the progress of the European strategy for Health for All by the Year 2000.

The views of the CGPD are invited on the adequacy and relevance of the evaluation mechanisms at the Regional Office for Europe.

## 1. Introduction

The successful implementation of the European strategy for Health for All by the Year 2000 implies, inter alia, a careful and comprehensive evaluation of all programmes and activities leading to the achievement of the Strategy's goals. This applies with greatest relevance to the programmes and activities of the Regional Office.

The present document reviews the evaluation mechanisms and procedures in the Regional Office and their evaluation in recent years. Evaluation procedures are integral components of the managerial process for WHO programme development and as such of the WHO programme in the European Region.

In applying the various components of evaluation listed in the following paragraphs the right balance is to be struck between the resources devoted to the process being evaluated and those required by evaluation, and more generally to its managerial support. Achievement of such balance may be one of the more delicate aspects of the evaluation process.

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## 2. Policy basis

Programme evaluation was the subject of a resolution by the Executive Board and the World Health Assembly as early as 1953, when the Sixth World Health Assembly requested the Executive Board to give particular attention to a study of programme analysis and evaluation (resolution WHA6.22) (1).

During the late seventies a systematic study was made in the development of guidelines for programme evaluation and in May 1978 the Thirty-first World Health Assembly adopted resolution WHA31.11 (1), which, stressing the important role of the regional committees in promoting health programme evaluation, urged Member States to promote this process for the evaluation of national health programmes, and to collaborate with WHO in evaluating the impact of the Organization's programmes in their countries (1).

Since the late nineteen-sixties the Regional Committee for Europe has adopted several resolutions dealing with evaluation (2). In 1968 the Eighteenth Regional Committee asked the Regional Director to report on the evaluation of programmes in different fields such as cardiovascular diseases, mental health of young people, or environmental pollution (EUR/RC18/R5). In September 1970 the Twentieth Regional Committee requested the Regional Director to ensure that the evaluation of ongoing projects and programmes became more prominent in the work of the Regional Office, to take into consideration the results of evaluation when proposing priorities in future programme planning and to ensure that the methods used and the results obtained could be applied by countries to their own national situation (EUR/RC20/R6).

Subsequent Regional Committee resolutions also dealt with evaluation, in particular EUR/RC21/R4, EUR/RC22/R4, EUR/RC24/R2 and EUR/RC29/R2.

In 1982 the Consultative Group on Programme Development and the Consultative Group on Budgetary Questions discussed extensively the evaluation of programmes and noted the difficulty of assessing how Member States make use of the evaluation of results of the Regional Office programmes and apply them to advantage in their countries (3). This question arose again when the Thirty-second Session of the Regional Committee dealt with the monitoring and evaluation of progress in the implementation of the Regional strategy for Attaining Health for All by the Year 2000 (4).

## 3. Development of monitoring and evaluation in WHO

### 3.1 Monitoring and evaluation of WHO's work

Initially evaluation in WHO was based on a comprehensive system of reports, ranging from monthly progress reports and quarterly reports to final and special reports. However, this system tended to become a mechanical process, consisting of factual reporting of activities and resources used; it gave only limited feedback and evaluative information on outcome and impact. The system was then replaced by the profile concept which can be described as a standardized structure for presenting selectively "the right information in the right volume and right format, to the right user at the right time" (5).

However, the usefulness of this Information System Support for evaluation depended on reconstructing the managerial tools used by the Organization. The latter are specified in the Managerial Process for WHO's Programme Development (MPWPD) where the evaluation was presented as an integral part of all other components of the process (6, 7). Several types of evaluation in WHO are identified:

- for analysing the extent to which WHO's policies respond to the health situation throughout the world and assessing whether the health problems have been clearly defined;
- for verifying the relevance of WHO programmes in relation to its policies and for confirming that priorities have been selected in accordance with greatest needs;
- for strengthening all stages of the managerial process for WHO's programme development, from preparation of the general programme of work to programme budgeting;
- for evaluating progress in carrying out what has been planned, and the overall efficiency with which plans are being carried out;

- for assessing the effectiveness of WHO's programme in changing the health situation for the better, both in particular countries and throughout the world. In the final analysis this can only be done by joint assessment by Member States and WHO, Member States deciding how they evaluate their national health strategies and programmes.

### 3.2 Monitoring and evaluation of the strategies for attaining HFA2000

When launching the Global Strategy for Health for All by the Year 2000, the Thirty-second World Health Assembly, in resolution WHA32.30, also invited Member States to formulate national strategies and plans of action and to join regionally in formulating regional strategies. All WHO regions have adopted regional strategies and several countries (mainly outside the European Region) have formulated national strategies. Many of those that have not yet formulated a national strategy for HFA2000 are nevertheless realigning their policies and plans in the light of the main thrusts and objectives of the global and regional strategies.

Inseparable from these strategies is continuous monitoring of progress in the implementation and evaluation of their effectiveness and impact. This monitoring and evaluation takes place at three levels: national, regional and global and is based on indicators to measure the progress made in the implementation of the strategy.

Member States' governments will set up mechanisms for such evaluation and select national indicators that are appropriate to their social, economic and health situation.

The Regional Committees have been requested by the World Health Assembly to monitor and evaluate their Regional Strategy at regular intervals, on the basis of information received from the countries.

The Executive Board has been requested to monitor and evaluate the Global Strategy at regular intervals. In order to facilitate this monitoring and evaluation, a short list of 12 indicators has been formulated at the global level.

Member States and regions were invited to develop national and regional indicators to monitor and evaluate their strategies. A document entitled "Common framework and format for monitoring progress in implementing the strategies for Health for All by the Year 2000" (8) has been prepared to facilitate the monitoring by countries of progress in implementing their national strategies for HFA2000. This document, which has been circulated to countries in the Region, will assist them in reporting on their progress at regional and global levels.

A regional synthesis is to be presented to the 1983 sessions of the various regional committees. National and regional reports will be consolidated in a global report to be submitted to the January 1984 session of the Executive Board and to the subsequent World Health Assembly. In view of the relatively short time since the strategies were launched this first report will mainly monitor the relevance of national health policies and the progress made in implementing them. The next reporting cycle will begin in 1985, and a new common framework and format will be prepared for it.

### 4. Monitoring and evaluation at the WHO Regional Office for Europe

Evaluation requires an adequate flow of relevant information between the different policy, management and operational levels of the organization, including feedback for corrective or other action. In the following paragraphs the evaluation mechanisms and present procedures will be reviewed, from procedures dealing with policy and strategy matters to those concerned with the evaluation of projects.

#### 4.1 Monitoring and evaluation of the Regional Strategy and of national follow-up actions

The evaluation of the relevance and adequacy of the European strategy for Health for All by the Year 2000 and the Regional Office's successive programmes of work is the responsibility of the Regional Committee. It should be noted that the Thirty-second session of the Regional Committee for Europe, in discussing the proposed 1984-85 programme budget document, specifically stated that the programme gave due consideration to the Seventh General Programme of Work and the main thrusts of the regional strategy for attaining HFA2000 (EUR/RC32/R5). The monitoring of national follow-up activities is to be performed through the "Common framework and format for monitoring progress in implementing the strategies for Health for All by the Year 2000" (8). This proposed framework and format was reviewed by a Subcommittee of the Thirty-second Regional Committee. As noted by the

Subcommittee (4), this will be facilitated by the regional indicators to be submitted to the 1983 Regional Committee for Europe. These indicators will also be the key to evaluate the progress, efficiency, effectiveness and impact of the cooperative efforts of WHO and the Member States in implementing the strategy, the evaluation of which will be the responsibility of the Regional Office. The Digest of Health Statistics, produced since 1982 by the Epidemiology and Information Support Unit at the Regional Office, will progressively be extended to present relevant indicators at appropriate intervals.

The Subcommittee established at the Thirty-second Regional Committee considered that the existing structures (Consultative Group on Programme Development, Regional Health Development Advisory Council, Regional Committee) would be adequate to deal with the evaluation of the relevance of regional policies, strategies and programmes and that there would, therefore, be no need for additional mechanisms.

With regard to the implementation, monitoring and evaluation of national strategies the Subcommittee stressed that this was the responsibility of national health administrations. It should be left to national authorities to decide how they should perform their monitoring and evaluation and whether or not to set up new mechanisms to facilitate this process (4).

It is, however, expected that, when the revised version of the Regional Strategy will be submitted to the Regional Committee in 1983, the proposed regional targets and indicators which will be included in this revision might facilitate the formulation of national strategies and the selection of national indicators to evaluate national progress.

#### 4.2 Evaluation of the EURO programme proposals and of EURO programme implementation

##### 4.2.1 Inter-country programme planning

The relevance of the inter-country programme of the Regional Office is assessed every second year through the submission to European Member States and relevant organizations of inter-country proposals for the European Region for the next biennium, with a projection of subsequent activities for the following four years (Consultation Letter). The proposed programme budget is then reviewed by the Consultative Group on Programme Development and the Consultative Group on Budgetary Questions on the basis of the comments received before the Regional Director finalizes his work on the new programme budget, which then goes to the Regional Committee for detailed analysis.

##### 4.2.2 Country programme planning and evaluation

The relevance of the programme budget proposals is further discussed on a yearly basis by senior representatives of the Regional Office with senior representatives of the country concerned. An evaluation of the impact and adequacy of the collaborative programme with the country concerned is made on this occasion.

##### 4.2.3 The Regional Director's report

An evaluation of the implementation of the total programme and, as far as possible, of its impact, is made in the successive Annual Reports of the Regional Director. Special mention is made of programmes having reached important landmarks during the year under review.

##### 4.2.4 Ad hoc evaluation

At intervals, more detailed independent evaluations of specific programmes or of specific aspects of programme, are also made. Such reviews may take the form of a submission to the Regional Committee, or an in-depth review by an advisory group of external experts or as a EURO publication (as was the case for the cardiovascular disease programme of WHO in Europe, which was extensively reviewed in an issue of a Public Health in Europe (9)). It is anticipated that other major programmes of the Regional Office will be similarly reviewed.

As noted by the Consultative Group on Programme Development, one of the major functions of the evaluation of the work of WHO is to judge the extent to which recommendations and new information have been useful and applicable to the majority of Member States and the extent to which these have been utilized in practice. This should be the major concern of such evaluations.

#### 4.2.5 Mechanisms for internal monitoring and evaluation of EURO programmes

Programme monitoring and evaluation is an integral component of the management process for programme development. During the last five years a substantial effort has been made in WHO to clarify and standardize methods and procedures for medium-term programming and programme budgeting and from 1982-83 a new uniform system for medium-term programming and programme budgeting has been operational in the Regional Office. This lays the right type of groundwork for programme implementation. Since 1980, the Regional Office has been gradually developing a management information system based on computer- and word-processor, to assist programme and project implementation, monitoring and evaluation and eventually to incorporate additional integrated text and data processing tools. The basis for this system will be successive biennial programme budgets and international project plans as enabling documents for programme implementation.

Every second year, each programme of the Regional Office is reviewed separately and evaluated during an internal programme review meeting (one for each programme). The meeting is attended by the executive management of the Office, by all directors of service and officers involved such as budget and finance officer and by members of related internal advisory groups, etc. The relevant programme managers for the corresponding WHO headquarters programme are also invited to participate. The review is made just before the preparation of the programme of the next biennium is started so that any corrective action may be taken into consideration. The review is based on the current medium-term programmes and the programme budget. It uses monitoring sheets showing the extent to which targeted activities have been attained and budgeted resources have been spent, as well as providing information on the outcome and impact of the programme through relevant indicators.

Additional ad hoc programme review meetings are carried out within each of the six services, mostly to monitor progress of programme delivery.

#### 4.2.6 Monitoring and evaluation of individual projects within each EURO programme

An annual project summary is prepared for every project by the project manager. The project summary contains, inter alia, the project title and number, the starting and termination date, information on implementation of the project, giving major milestones and an evaluation of the project. Project summaries are the means of informing the Executive Board and the World Health Assembly of ongoing activities, are the basis for reporting between different management echelons, serve as briefing documents and form part of working papers for the internal programme review meetings described in section 4.2.5 above.

In addition, a number of activities or functions have a built in evaluation mechanism; for example, the membership of a working group or the redesignation of a collaborating centre may only be made after evaluation of past collaboration.

#### 4.3 Development of evaluation procedures at the Regional Office

Evaluation procedures at the Regional Office Secretariat are analysed by two internal advisory bodies, reporting directly to the Director, Programme Management (assisted by the Programme Monitoring Officer):

- the Advisory Group on EURO Management (GREM). This deals with all aspects of internal management procedures.
- the Advisory Group for Managerial Processes for National Health Development. This deals with matters related to WHO's advice to countries on national systems for health care management.

#### 5. Conclusions and possible issues for discussion by the Consultative Group on Programme Development

The evaluation process at the Regional Office described in the foregoing has been developed to meet the requirements of the programme of the Organization. As such it is a dynamic process which requires constant updating to meet the requirements of the programme, both in substance and in terms of resources needed for evaluation.

The CGPD may wish to provide guidance as to the adequacy and relevance of the evaluation mechanisms, at the Regional Office in general and with regard to specific aspects. In particular, the CGPD may wish to comment on the following questions:

- (1) Is the present EURO evaluation mechanism:
  - (a) adequate for assessing the relevance of the WHO programmes in the European Region to Health for All by the Year 2000?
  - (b) compatible with the evaluation mechanisms used by Member States as part of their managerial process for national health development?
- (2) More particularly, the CGPD may wish to provide guidance on specific aspects such as:
  - (a) Are there any aspects of such evaluation which need to be modified, amplified or strengthened?
  - (b) Is the participation of Member States in these evaluation procedures adequate? In particular, is the participation of the Regional Committee and of the CGPD adequate?
  - (c) Is documentation on the evaluation process in the Regional Office adequate? If not, which additional types of publication/documents would be required by Member States?
  - (d) Are there any aspects of the WHO programme which may justify a more thorough evaluation?

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