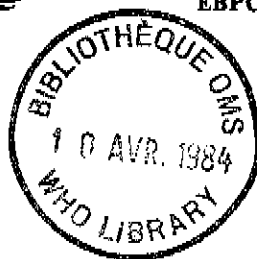




Consultative Group on
Programme Development

Copenhagen, 26-27 April 1984



INDEXED

→ ICP/GPD 102/m01(1)/6
0615d
15 March 1984
ENGLISH ONLY

COMMON FRAMEWORK AND FORMAT FOR EVALUATION OF THE
STRATEGIES FOR HEALTH FOR ALL BY THE YEAR 2000

Explanatory Note

*Health plan implem.
Nat. health for prog
S. val. 5 h.*

The plan of action for implementing the global strategy for health for all by the year 2000, adopted by the World Health Assembly in May 1982, calls on Member States to establish the necessary mechanisms for monitoring and evaluating their strategy, and to decide on the indicators they will use for that purpose. For their part the regional committees should monitor the progress made in implementing the regional strategies every two years, and evaluate the effectiveness of the strategies every six years (resolution WHA35.23).

The purpose of the Common Framework and Format, which has been developed in WHO headquarters and has been approved by the Executive Board, is to facilitate reporting by countries on the evaluation of their strategies. In turn the replies of countries, expected by March 1985, will provide a basis for evaluating the regional and global strategies. Each Region should select a set of indicators which will be appropriate to its own strategy. A possible list of indicators directly related to the regional targets is set out in document ICP/EXM 001/m01/6. It must be considered as tentative until the regional targets are approved by the Regional Committee in September 1984. The Group may, however, wish to comment on the advisability of including the list in the Common Framework and Format at this stage, taking into account the discussions of the Regional Health Development Advisory Council concerning the document on regional targets. The Group is also requested to advise on the appropriateness of the Common Framework and Format for evaluating "health for all strategies" and on the measures that should be taken to facilitate its use by Member States.

It was decided by the Thirty-sixth World Health Assembly that the first report on the evaluation of the strategies for health for all will be combined with the "Seventh report on the world health situation" (resolution WHA36.35). This decision may entail changes in the health statistics which are collected at present at global level, and which are included in the World health statistics annual. The Group is invited to advise on possible ways to ensure that the relevant health information will continue to be available in the European Region for the purposes of planning, evaluation, research and international comparison.

1. Introduction

At its thirty-third session in September 1983 the Regional Committee for Europe discussed the first report on progress in implementing the regional strategy for health for all (document EUR/RC33/10) compiled on the basis of country reports. It then adopted resolution EUR/RC33/R3, urging Member States (a) to develop their information systems and analytical capacity for monitoring and evaluating progress in the formulation of national strategies, and (b) to keep in mind the regional target areas and indicators of progress, when reporting on the effectiveness of the strategies at national level.

In pursuance of the above resolution as well as resolutions WHA35.23 and WHA36.35, it is expected that the Member States will report to the Regional Director on the effectiveness of their strategies in March 1985. On the basis of the national evaluation reports, a regional report will be drawn up and submitted to the Regional Committee in September 1985. In turn this will be used

The issue of this document does not constitute formal publication. It should not be reviewed, abstracted or quoted without the agreement of the World Health Organization Regional Office for Europe. Authors alone are responsible for views expressed in signed articles.

Ce document ne constitue pas une publication. Il ne doit faire l'objet d'aucun compte rendu ou résumé ni d'aucune citation sans l'autorisation du Bureau régional de l'Europe de l'Organisation Mondiale de la Santé. Les opinions exprimées dans les articles signés n'engagent que leurs auteurs.

Dieses Dokument erscheint nicht als formelle Veröffentlichung. Es darf nur mit Genehmigung des Regionalbüros für Europa der Weltgesundheitsorganisation besprochen, in Kurzfassung gebracht oder zitiert werden. Beiträge, die mit Namensunterschrift erscheinen, geben ausschließlich die Meinung des Autors wieder.

Настоящий документ не является официальной публикацией. Не разрешается рецензировать, аннотировать или цитировать этот документ без согласия Европейского регионального бюро Всемирной организации здравоохранения. Все ответственность за взгляды, выраженные в подписанных авторами статьях, несут сами авторы.

for the preparation of a global report, "Evaluation of the strategy for health for all by the year 2000 - Seventh report on the world health situation", that is to be reviewed by the Executive Board in January 1986 and by the World Health Assembly in May 1986. The global and regional reports will then be finalized and published in the second half of 1986.

The entire exercise will be meaningful only to the extent that it is viewed by Member States primarily as a national undertaking, and not merely as the submission of an additional report to WHO. It is expected that national health authorities will evaluate their strategies using their own procedures. The purpose of the Common Framework and Format is to facilitate the process of evaluation by countries and to provide a basis for the subsequent regional evaluation.

The Common Framework and Format follows the lines of the document on monitoring of progress, which was reviewed by the Regional Committee in 1982 and used by Member States for reporting to the Committee in 1983. Thus, for those countries which were able to report in March 1983, several items of information can be taken and updated from their earlier report on monitoring progress.

2. Evaluation framework

The introductory section of the Common Framework and Format describes a process of evaluation, in which Member States are requested to answer a series of questions grouped under 26 items. These items relate to the assessment of relevance, progress, adequacy, efficiency, effectiveness and impact of action taken, as proposed in the guiding principles established for this purpose^a.

Member States are invited to use the Common Framework and Format in whatever way they consider useful for their own needs, and should feel free to add any necessary information not contained in the document at present.

The questions are set out on the lefthand pages. Most of them are open and call for a description of the situation in the country concerned. Guidelines for each set of questions are given on the righthand pages.

3. Global indicators

Items 2, 5, 7, 9, 10 and 20, contain questions related to the 12 global indicators of progress agreed by the World Health Assembly to be basic. All countries of the world are requested to report at least on these indicators. As most of the European countries have in fact already reached the targets set for them they may wish, where this is relevant, to concentrate on the "equity" aspect of health for all and to analyse differences between geographical areas and/or socioeconomic groups, and the trends in relation to such differences.

4. Regional indicators

As decided at the last session of the Regional Committee (resolution EUR/RC33/R4), a final version of document EUR/RC33/9, "Targets in support of the regional strategy for health for all", will be submitted to the thirty-fourth session in 1984, together with a plan of action and a list of indicators for monitoring progress towards the achievement of the targets in the Region.

A first draft of such a list was annexed to document EUR/RC30/8, "Regional strategy for attaining health for all by the year 2000", in 1980, and was revised in parallel with the formulation of the targets, with the help of several consultations and exchanges of information with national experts. The present list (ICP/EXM 001/m01/6) must still be considered as provisional since it will be reviewed and possibly amended by the Regional Health Development Advisory Council as well as the Group, then submitted to the Regional Committee for final approval. Member States may wish already at this stage to take the provisional list into account when starting the evaluation of the strategies (item 22 of the Common Framework and Format).

It is stressed that not all the proposed indicators are of equal importance and that frequency of reporting varies. As indicated in the list itself, some of the indicators are considered very important for monitoring and evaluation at regional level, and all countries should report on them. Other indicators are considered useful for that purpose, and countries are requested to report on them whenever possible. For a third category of indicators information would be appreciated if it is considered relevant at country level.

^a Health programme evaluation: guiding principles. Geneva, WHO, 1981 ("Health for All" Series, No. 6).

Information for many of the proposed indicators can be derived from existing routine data collection within countries, and between countries and WHO. Information for others will require special analysis, and sometimes special data collection; sample surveys would normally be the best method for that purpose.

In the case of indicators expressed in quantitative terms, at least the national average value and the maximum and minimum values for identifiable geographic or socioeconomic groups should be provided if possible. If additional data are available on the distribution among specific groups of population, then this would be welcome, as well as information about past trends and projections. Where the values given do not cover the entire population, the origin of the data and the section of the population concerned should be given.

Several of the proposed indicators will require qualitative information on existing policies and mechanisms.

5. National indicators

Under item 24, Member States are asked to provide information on any additional indicator found useful in relation to national health policies and strategies. Copies of any relevant national report or publication on the subject, clearly marked with a reference to this item, may be attached.

6. Future exchange of information between Member States and the Regional Office

Using the Common Frameworks and Format, it should be possible to collect information directly related to the targets for health for all on a regular basis. This information will be analysed and presented in monitoring reports every second year and in the report, "Evaluation of the strategy for health for all by the year 2000 - Report on the world health situation", every six years. This process will entail a reorientation of the World health statistics annual (which gives data on vital statistics and causes of deaths, infectious diseases, health personnel and hospital establishments), to ensure that it complements the new reports, without increasing the number or size of the statistical questionnaires sent to Member States.

The result of the process may be a change in thinking on the question of maintaining the present voluminous data base compiled from replies to annual questionnaires and used over the last three decades for publication of the Annual. Most countries in the European Region contribute information for this purpose every year and use the Annual for international comparisons. In particular the historical data base on mortality is very useful for trend analysis, and was used extensively when preparing the documentation concerning the regional targets.

If important changes in the data base are introduced at global level in the near future, it will be necessary to decide what type of information, if any, must be collected and made available at regional level in order to supplement that included in the Common Framework and Format to serve purposes other than the direct monitoring of global and regional targets alone.

7. Conclusion

The Group is invited to comment on the Common Framework and Format drawn up to assist in evaluating the strategies for health for all by the year 2000, and more specifically on the proposed list of regional indicators, taking into account the discussions of the Regional Health Development Advisory Council on the subject.

In particular the Group's views are invited on the following questions:

7.1 Is there a need to organize a briefing for national health administrations on how to use the Common Framework and Format? Would it be advisable, for example, to make available to those interested a briefing session in Copenhagen before the next session of the Regional Committee? Should a subcommittee of the CGPD be convened to advise on the best way to present the Common Framework and Format to Member States?

7.2 Should the provisional list of regional indicators be included in the Common Framework and Format that is to be sent to Member States in May 1984, thus giving them nine months to prepare their answer, or would it be better to wait until the target document is approved by the Regional Committee?

7.3 If the Common Framework and Format is adopted as the only tool used at global level for collecting health statistics from Member States, would there be a need to supplement the

information at regional level? Would it be useful to seek the views of a small group of European experts concerning the possible future orientation of information exchange between Member States and the Regional Office, and more specifically on:

7.3.1 the type of information to be collected, analysed and disseminated at regional level on such topics as mortality, morbidity, disability, health resources and their utilization, environmental health, health programmes and health interventions?

7.3.2 the possible sharing of responsibilities with regional collaborating centres?

7.3.3 the development of appropriate mechanisms to support the exchange of information (questionnaires, transfers between different types of electronic data processing equipment, national publications using common definitions and codes)?

7.3.4 the need to continue the issue of regional publications such as Health services in Europe to supplement the regional component of the report, "Evaluation of the strategy for health for all by the year 2000 - Seventh report on the world health situation"?