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Report

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Introduction

Early 2012, the WHO Regional Office for the Eastern Mediterranean (EMR) worked with Member States to reach consensus on the key health challenges that would be the focus of joint work over the course of the next five years. Five strategic priorities were identified and were subsequently endorsed by the World Health Organization (WHO) Regional Committee for the Eastern Mediterranean, which is the WHO governing body at the regional level, at its 59th session in October 2012 (1). These were: health system strengthening, maternal and child health, prevention and control of noncommunicable diseases, health security and the unfinished agenda of communicable diseases, and emergency preparedness and response.

In close coordination with Member States, WHO undertook a comprehensive situation analysis for each priority area, in terms of the nature and characteristics of the challenges encountered, gaps and barriers to action, as well as opportunities for intervention. This was followed by identifying what had to be done to address these gaps. This is summarized in the report “Shaping the future for health in the Eastern Mediterranean Region: Reinforcing the role of WHO 2012–2016” (2, 3).

In addition to the pre-existing challenges in the five priorities, the past five years witnessed major developments that had a considerable impact on the public health landscape in the Region. Political changes, social and economic crises, civil unrest and emergencies, as well as rapid demographic changes, have had a significant impact on health of the Eastern Mediterranean populations. The same period has also experienced the unfolding crises in Iraq, Libya, Syria, and Yemen, in addition to the ongoing protracted emergencies in countries like Afghanistan, Pakistan, Somalia and parts of Sudan. Today, almost two-thirds of Member States in the Eastern Mediterranean Region are directly or indirectly significantly affected by crises resulting in unprecedented massive population movements (4-6).

A common gap that was identified for all five priority areas is the limited availability of public health capacity (7). Although there has been some progress in public health capacity in the Region over the last two decades, this has not matched the overwhelming public health challenges the Region faces. In fact, some countries did not appear to have made a significant improvement in public health within ministries of health during this period. It was clear in 2012 that competencies in public health are insufficient in tackling the health priorities in many countries of the Region. Thus, strengthening public health capacity was established as a special initiative of the Regional Director and was given a high priority during his five-year term. This was translated through a number of regional initiatives launched since 2012, including: the Leadership for Health programme, health diplomacy initiative, refocusing the Eastern Mediterranean Health Journal as a regional public health journal, and reinforcing national public health institutes and associations. One key component of this initiative focused on the assessment of Essential Public Health Functions (EPHFs) (8).

Purpose and objectives

The overall purpose of this initiative is to provide evidence-informed recommendations for improving public health capacity and performance in Member States. This is achieved through 1) providing a baseline assessment of public health services and capacities at the national level; 2) identifying areas of strength as well as areas for further development and actions needed at country level to strengthen EPHF; 3) convening a national policy dialogue that brings together different stakeholders to reach consensus on strategic directions and develop an action plan to address priorities; and 4) developing institutional capacity within the Region to undertake an assessment of EPHF.

The process of assessing EPHFs is not new. There are several assessment frameworks, developed as early as the 1990s (Table 1), with a common aim – to identify areas of strength as well as areas that require strengthening in national public health systems. The assessment of EPHFs in the Eastern Mediterranean Region provides a renewed opportunity to refine and update the methodology and develop a regional framework that practical, feasible, and meets the needs and addresses the challenges of the different Member States in the region.

Several Member States in the Eastern Mediterranean Region were engaging in a process of health sector reform and development of national health strategies and were therefore open to an objective approach to evaluating their own health systems and the response to their key health challenges. Through the EPHF performance assessment, countries led by their ministries of health are able to identify the strengths and weaknesses in the public health system and based on the results develop interventions designed to sustain good practices and bridge gaps.

The uniqueness of the EMRO initiative is that 1) it has built on existing initiatives to develop a framework that is relevant to the context of the Region and considers latest developments in global health; 2) the basis for the assessment tool is topic-specific WHO guidelines, assessment tools and policy recommendations, in order to foster a coherent, evidence-based approach to public health challenges; 3) it stems from the request of Member States and is not intended to be an “external audit” of the health system; and 4) it combines a mixed approach of self-assessment followed by a joint external assessment to validate the findings.

Essential public health functions in the EMR

The conceptual framework for essential public health functions for the Region has been developed through a review of experiences from other WHO regions and a series of technical meetings of WHO staff and international experts, conducted between 2013 and 2014. The framework identifies eight inter-related functions, four core and four enabling functions, which are necessary for a comprehensive public health system (Figure 1). According to the conceptual framework of essential public health functions for the EMR, operational definitions have been developed for each term. This has further been the basis for development of a comprehensive assessment tools and accompanying glossary of terms. The eight functions are further broken down into a detailed list of sub-headings and sub-functions, which together constitute a comprehensive package of public health services that all Member States in the EMR should aim to provide to their populations.

Approach and process

The scope of assessment of essential public health functions is country-wide and follows a multi-sectoral approach. It is done in close collaboration with the ministry of health, as its owner, but ensures the involvement of relevant stakeholders. The assessment is a collaborative effort between WHO and the Member State, with full ownership of the project by the national authorities. The scope of the assessment of EPHF will be country-wide, country-owned and will follow a multi-sectoral approach.

The assessment tool provides a brief list of criteria for each item, which national public health officials and external experts can use to evaluate the adequacy, quality and comprehensiveness of the service. These criteria have generally been synthesized from topic-specific WHO guidelines, assessment tools and policy recommendations, in order to foster a coherent, evidence-based approach to public health.

The tool is unique in that it has been conceived to facilitate a broad, system-wide assessment of public health functions in Member States and to identify gaps and areas where improvement is needed. The pathways for assessment include three different dimensions (Box 1).

In the self-assessment (stage 2), national public health authorities take the responsibility of completing the assessment tool, in advance of the joint external assessment. The assessment tool is a comprehensive document that is not meant to be completed by one person or even by one unit within the Ministry of Health, but rather through a multi-sectoral involvement and a national meeting produce their own conclusions on their capacity and areas requiring further development. Stage 2 will involve the following steps:

Assembling a national steering group to oversee the assessment process at national level. Ideally, the group may consist of directors of different sectors/departments/units in the Ministry of Health and related entities.

Completing each of the eight sections of the assessment tool by the department/sector/unit that corresponds to it. The process requires reviewing available documents, reports, strategies, and publications in support of the information needed while filling the assessment tool.

Reviewing the sections corresponding to the eight EPHFs in an integrated way, by the national steering group to avoid any duplications/conflicting information.

Sharing the completed tool and related documentation with WHO well in advance of the planned external assessment mission to the country.In the joint external assessment (stage 3), a WHO-led team of experts will conduct a country mission, meeting with officials from the Ministry of Health (or equivalent), unit directors, and other key stakeholders. The role of the WHO-led team during the third stage can be summarized as follows:

Review documents shared by the country and the filled in assessment tool, prior to the country mission. Attend presentations prepared by the national team, summarizing the situation in the country in relation to each of the eight EPHFs.

Conduct in-depth face-to-face interviews and meetings with relevant ministry of health staff, stakeholders and partners in the country (following the structure of the tool), to understand the interplay of contextual factors in the delivery of EPHFs.

Draft an assessment report that includes the outcome of the assessment as well as a set of recommendations for improving public health services in the country, based on the responses to the tool, the presentations, site visits and parallel meetings.

Share the report with the national authorities for their review and feedback.

Once the assessment is complete a follow-up workshop is jointly organized (by WHO and the country) to discuss the findings of the assessment and develop a plan of action for strengthening the areas covered under the essential public health functions. The workshop brings together the relevant stakeholders at country level, under the leadership of the Ministry of Health to outline the steps that need to be taken to strengthen public health capacity and performance in the country.

It is important to emphasize that the success of the initiative relies heavily on partnerships between different stakeholders. At national level, the assessment is a joint initiative of different partners, including:

Ministry of Health (or its equivalent) – as the principal steward of the public health system in the country;

Other relevant sectors of the government, parliament and partners in the country (with responsibilities influencing the wider social determinants of health) – environment, food and agriculture, industry, transport, etc.;

Leading academic institutions and think tanks in order to build capacity within the country and Region; and

Public health experts of international eminence with diverse expertise and experience in leading health systems and public health programs in their own countries.

In conclusion, Figure 2 summarizes the steps recommended to conduct the assessment of essential public health functions:

Lessons from the country experiences

Using the regional framework, WHO has supported two countries in conducting an assessment of essential public health functions, Qatar being the pilot country in the Region, followed by Morocco. A number of requests from other Member States have been received, expressing interest to conduct an assessment of EPHF. A review of the initiative was conducted to reflect on what was achieved and reflect on the lessons learned to further enhance the initiative before expanding to other countries. The lessons learned are elaborated across three headings:

Approach

The current format of a combined approach of self-assessment followed by an external review has proved very useful and contributes to ensuring an unbiased and a more objective final product.

WHO preparatory work in conducting a desk review of public health functions provide background information and important input on the situation in the country prior to the visit.

The joint external assessment is undertaken through a five-day mission, which is only sufficient to adequately assess the whole situation on the ground if a thorough national assessment is conducted prior.

Assessment process

Timing of the assessment during the country’s planning cycle is vital. The assessment can be an effective advocacy tool and contributes to placing “public health” high on the policy agenda.

Multisectoral involvement is key, bringing together different sectors at national level, to discuss and analyze the challenges, gaps in action and roles in addressing them.

Structure of the national assessment team is key to ensure that individuals with knowledge are identified and included early on in the assessment process.

Assessment tools

The current tools are very comprehensive and cover many areas. Consideration of an “abridged” version may be useful in contexts where a thorough assessment is not possible.

Some questions are not obviously clear and in some cases it is not a yes/no answer. There is need for clarification and restructuring of some sections to avoid misunderstanding.

Some areas need to be updated to cover recent developments and new public health innovations.

The “norm” for each function needs to be explained, in terms of “what an ideal system looks like”.

Within each function, there is need to identify issues that are “core” and others that are “optimal”.

Conclusion and way forward

It is imperative to acknowledge the work of the two countries that undertook an EPHF assessment (Qatar and Morocco) and the countries that have expressed their interest to undertake an assessment. The leadership of Member States in this area is vital to sustain and build on this initiative. From the lessons learned in the two countries, specific actions are recommended to continue to improve the process. Developing a road-map for implementation of the recommendations is of critical importance (Box 2).

Sustainability of the initiative will require further inclusion of other partners in the initiative like other UN agencies, World Bank and other key international and regional organizations working the health field. Sustainability will also depend on the full engagement of regional public health institutions. WHO will continue to act as secretariat for the assessment and for supporting and monitoring implementation of recommendations. Needless to say, the initiative will also benefit from broadening and expanding the expert group, to include more regional experts and those who have been leading EPHF assessments at national level.

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