



Pan American Health Organization



*Regional Office of the
World Health Organization*

Essential Public Health Functions in the Eastern Caribbean

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Overview

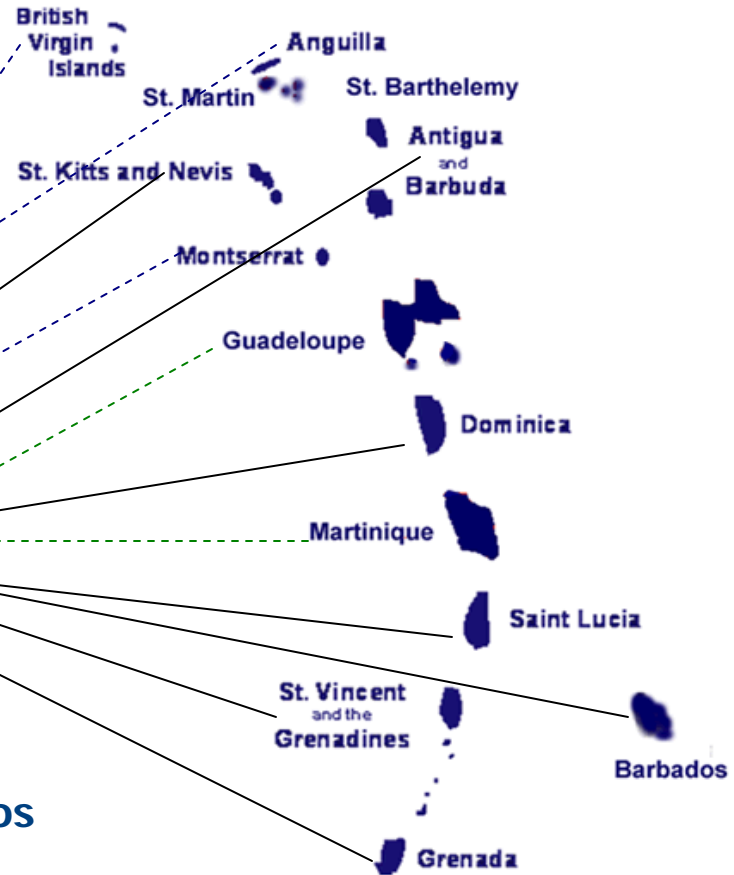
- ❖ EPHFs in the Eastern Caribbean
 - ❖ EC English-Speaking Countries
 - ❖ French Departments of the Americas
- ❖ The Intervention
- ❖ Some Results
- ❖ How Do Essential Public Health Functions Fit into the Puzzle?

The Eastern Caribbean



PAHO/WHO Office

Eastern Caribbean Coordination, Barbados



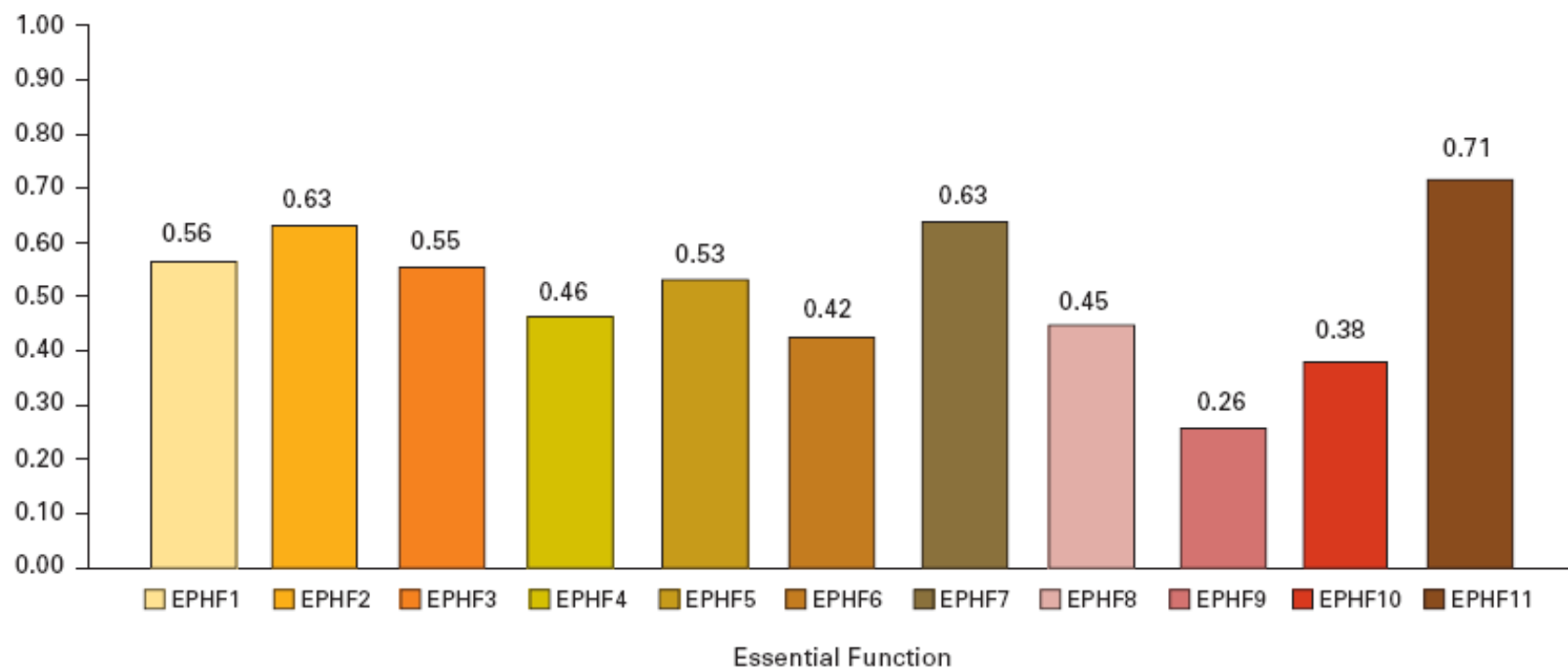
Situation in 2005

- ❖ 2001-2002 all Member States, except the FDAs, conducted initial performance measurement of the EPHFs.
- ❖ Measurement exercise highlighted the strengths and weakness of the countries' Public Health Systems.
- ❖ Based on results, an analysis of the EPHF in the English Speaking Caribbean was drafted and published in *"Public Health in the Americas"*.
- ❖ Most countries failed to move from "measurement to action".



Performance Measurement English Speaking Caribbean

Figure 74 Performance of the EPHF in the subregion of the English-speaking Caribbean and the Netherlands Antilles



Situation in 2005 (2)

- ❖ Most MOHs displayed *very weak leadership* to carry out stewardship/steering role responsibilities.
- ❖ Some governments questioned the need for a MOH.
- ❖ Poor capacity of the MOH to make use of data, interpret the findings, and integrate the information into the decision-making process.
- ❖ Many of the ECC were, either developing or about to formulate, National Health Plans.

Situation in 2005 (3)

- ❖ Martinique, Guadeloupe, and French Guiana (FDAs), only Member States in the Region who had not completed Performance Measurement.
 - Doubts concerning the applicability of the tool to the reality of these territories.
 - Language barrier.
- ❖ These territories are, in fact, regions of France and not independent states as the rest of the Caribbean.

OECC Objectives 2005-2006

- ❖ Strengthen the MOH as the National Health Authority
 - ❖ Put the EPHFs back on the MOH agenda
 - ❖ International Health Regulations
- ❖ Include EPHFs strengthening in National Strategic Health Plans.
- ❖ Promote institutional development.
- ❖ Complete the EPHFs measurement for the FDAs.

The Intervention


❖ Specific Objectives

- Increase senior MOH authorities, managers, and health planners capacity to analyze and utilize the EPHF framework.
- Identify priorities and propose interventions for institutional development.
- Integrate these priorities to the strategic planning process.

Increase knowledge of stewardship/steering role responsibilities.

Clarify concepts, terms, and definitions.

Workshop Strategy

- ❖ An official proposal was sent outlining workshop objectives, suggested participants, agenda, etc.
- ❖ The Permanent Secretary (PS) and the Chief Medical Officer (CMO) must be present.
- ❖ Preparatory Actions
 - Copies of the first measurement, country report, tool, and chapters 8 and 13 of *Public Health in the Americas* were circulated 
 - Presenters, Discussant, Report Writer.
- ❖ The venue must be away from the MOH main offices.





Rationale for the Performance Measurement of EPHF

The processes of State modernization and health sector reform have highlighted the importance of evaluating the performance of social systems and, in particular, of health systems, to make them more transparent and useful while providing a public accounting of their actions with respect to the allocation, utilization, and development of resources that society provides for the fulfillment of social objectives and public policies, including health policies.

In this context, a variety of actions and debates have unfolded regarding the direction, purpose, process, and utilization of health systems performance assessment in recent years, including, in the Region of the Americas, a series of consultations on the subject among participating countries. Performance measurement of the EPHF by national authorities fits within the framework of those interventions and debates.

1. Assessment and improvement of health systems performance

The regional consultations in the Region of the Americas on health systems performance assessment included a concerted effort to orient the debate toward the future and to contribute to the development of a clear definition of performance assessment and to improvements in the reliability and usefulness of the data collected for the participating countries. These consultations resulted in several conclusions that are summarized below.¹

Health systems performance assessment should be linked to political, social, and

management decision-making by the health system and should not be conceived as a simple academic exercise. Additionally, it should be linked to the definition of desired changes included in current programs of health sector reform, as well as to the real possibility of putting these changes into practice.

At both the national and international levels, the criteria for evaluating the performance of health systems as well as the indicators used should be established by consensus. Otherwise, polemics on criteria and indicators will tend to cloud the assessment results and limit their possible use by policy makers and other interested actors.

Similarly, performance assessment should be seen as a “quantitative and qualitative appraisal that shows the degree of achievement of the objectives and the goals.”

¹ Pan American Health Organization. *Health Systems Performance Assessment and Improvement in the Region of the Americas*. Washington, D.C.: PAHO/WHO, 2001.



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Institutional Strengthening for the Performance of the EPHF

1. Introduction

Based on the results obtained in the EPHF measurement exercise in the Region of the Americas, the challenge of encouraging member countries to develop national plans for the institutional strengthening of their national health authorities is addressed in an effort to improve public health practice in each country.

In preparing those national plans, it is essential that the actors involved understand the relationship between EPHF performance measurement and the institutional work of the NHA, so that progress may be made toward achieving the strategic objectives proposed by the Initiative:

1. to improve public health practice
2. to develop the infrastructure to improve the performance of EPHE, and

3. to strengthen the steering role of the national health authority.

The design and implementation of strategies and actions aimed at achieving these objectives and, consequently, bridging the existing gaps between the optimal standard and the degree of performance obtained in the measurements of EPHF are fundamental for this purpose.

Measuring the degree to which the EPHF are carried out in each country utilizing a common instrument has made it possible to identify critical areas shared by two or more EPHF and others that are specific to each function. Accordingly, it should be recognized that these weaknesses may require both immediate action for improvement and the identification of the principal elements that favor or hinder the development of public health in the countries of the Region.

This diagnosis is a starting point—that is, the baseline or point of departure representing the current level of public health performance in the countries—and its realization is what will make it possible to make solid progress with a clear vision toward the preparation of plans for strengthening public health institutions.


2. Guidance in Moving From Diagnosis to Action

A preliminary finding of the diagnosis is that some countries are stronger in some areas, while others are weaker. Thus, there are situations that call for complementary synergistic exercises between neighboring countries, or even countries with similar political, demographic, and socioeconomic features.

This reveals the great potential for establishing partnerships in the Region and underscores the potential for stim-

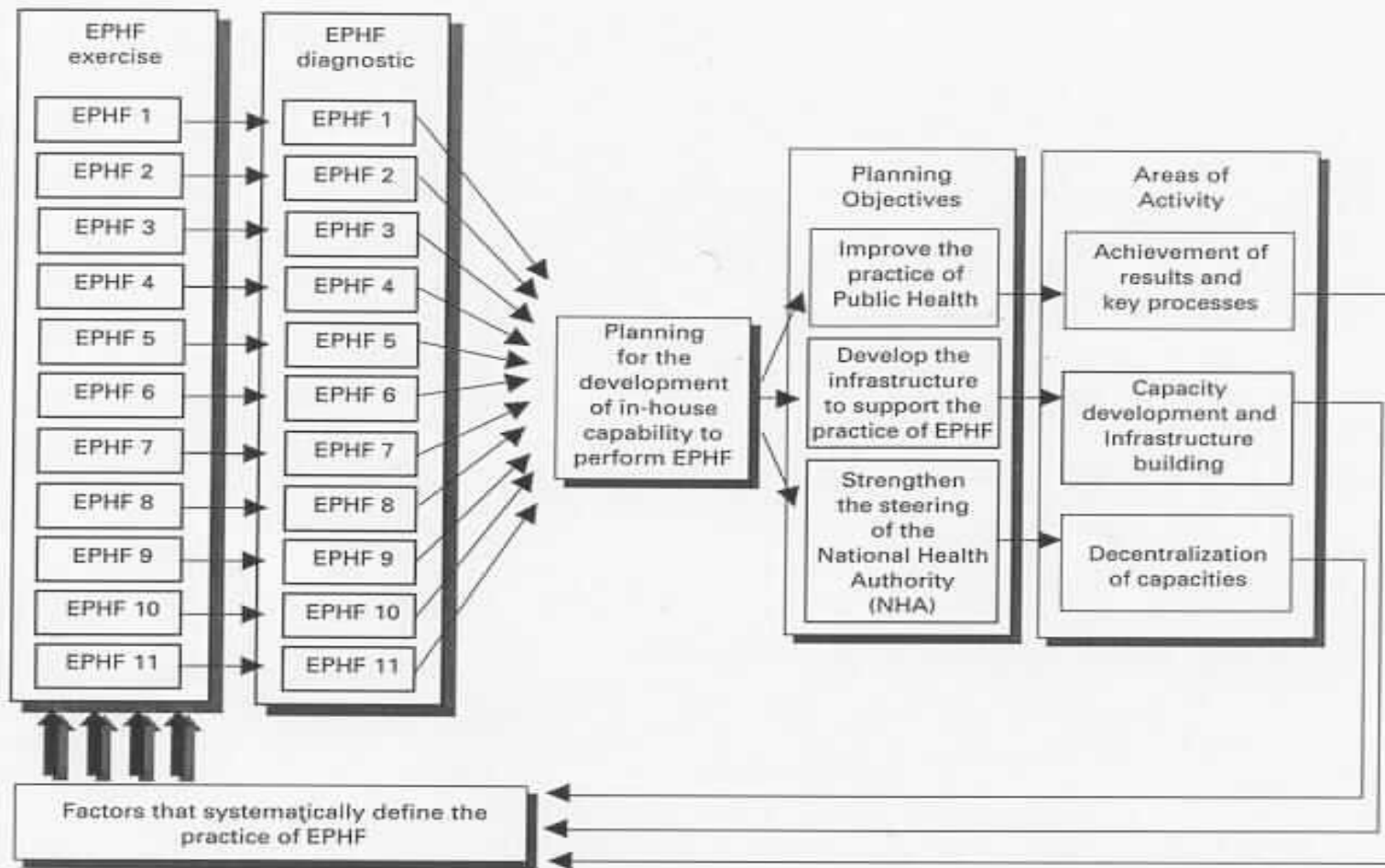
Workshop Dynamics

❖ Agenda

- Involvement of the PS to lead the sessions
- Presentation by HSS Advisor
- MOH Presenters
- Work Sessions 
- Plenary



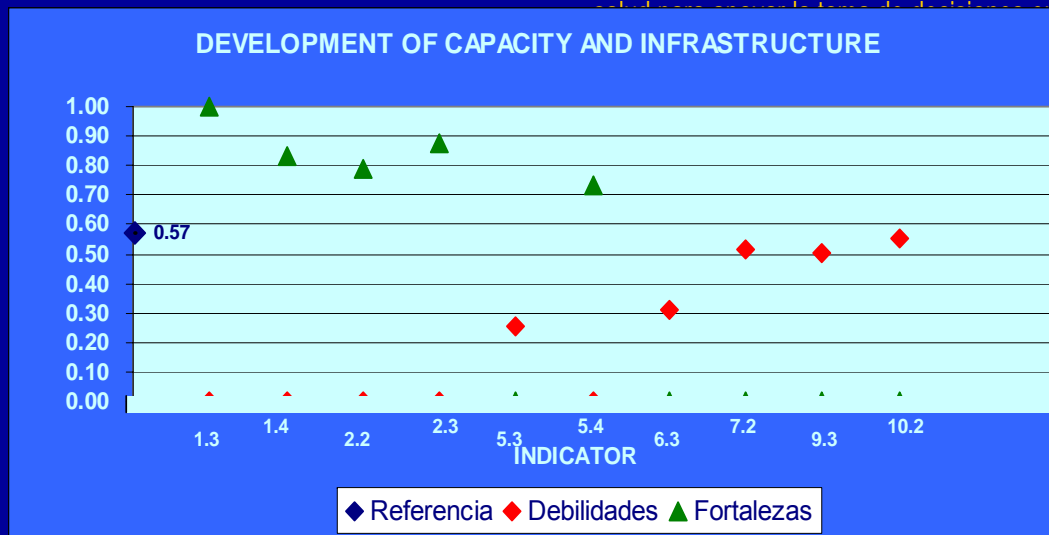
Relationship between diagnosis of the EPHF, planning, and intervention for the development of institutional capacity



Example of Institutional Development Results

Development of Capacity and Infrastructure

EPHF	Indicators	Classification
1	1.3 Apoyo experto y recursos para el monitoreo y evaluación del estado de salud	1.00 F
1	1.4 Soporte tecnológico para el monitoreo y evaluación del estado de salud	0.83 F
2	2.2 Capacidades y experticia en epidemiología	0.79 F
2	2.3 Capacidad de los laboratorios de salud pública	0.88 F
5	5.3 Desarrollo de la capacidad institucional de gestión de los sistemas de salud pública	0.26 D
5	5.4 Gestión de la cooperación internacional en salud pública	0.73 F
6	6.3 Conocimientos, habilidades y mecanismos para revisar, perfeccionar y hacer cumplir el marco regulatorio	0.31 D
7	7.2 Conocimientos, habilidades y mecanismos para acercar a la población los programas y servicios de salud necesarios.	0.51 D
9	9.3 Sistema de gestión tecnológica y de evaluación de tecnologías en salud pública	0.51 D
	de investigación	0.56 D



Results

- ❖ Methodology applied in eight (8) countries: Anguilla, Barbados, BVI, Dominica, Grenada, St. Lucia, St. Kitts & Nevis, and St. Vincent & the Grenadines.
 - **Anguilla and BVI.** Results reinforced need to revisit the role of the MOH as the NHA.
 - **BVI.** Exercise led to development of a proposal to restructure the MOH.
 - **Barbados.** Targeted EPHF # 6 for strengthening (Enforcement Workshop).
 - **Grenada, St. Kitts & Nevis, and St. Vincent and the Grenadines.** Included sections on EPHFs in their NSPH.
- ❖ In all 8 countries there was a feeling that the situation had not changed much in comparison to the initial assessment.



Results (2)

- ❖ FDAs performance measurement conducted in Martinique, April 2005.
- ❖ Some participants considered that the tool did not adapt well to their health system
 - The difference: the local level assessing the NHA.
- ❖ Overall measurement (0.67) ranked higher than the Region (0.48) and the English Caribbean (0.51).
- ❖ EPHF # 8 scored the lowest ► Unrealistic standards?
- ❖ Difficulties with terminology and translation
- ❖ Voting methodology.

EPHFs fits into the Puzzle

- ❖ As a tool for assessing MOH role and responsibilities in Public Health.
- ❖ As a framework for re-organizing ministries in decentralized systems.
- ❖ As a guide for institutional development.
 - Educating and clarifying “other functions” of the ministry aside from healthcare delivery.
 - Strengthening specific areas of weakness.
 - Understanding what can be decentralized and what should not be.

Thank You!