





# XVIII PAN AMERICAN SANITARY CONFERENCE XXII REGIONAL COMMITTEE MEETING

WASHINGTON, D.C., U.S.A. SEPTEMBER-OCTOBER 1970

Provisional Agenda Item 33

CSP18/16 (Eng.) 21 August 1970 ORIGINAL: SPANISH

#### LONG-TERM PLANNING AND EVALUATION

In implementation of Resolution XXVII of the XIX Meeting of the Directing Council, the Director submitted to the Executive Committee Document CE64/8, "Long-Term Planning and Evaluation." With reference to this item, the Executive Committee at its 64th Meeting adopted Resolution XV, which reads as follows:

### THE EXECUTIVE COMMITTEE,

Having considered the report of the Director of the Bureau on long-term planning and evaluation of PAHO/WHO assistance to the countries (Document CE64/8, Rev. 1);

Bearing in mind that in this way Resolution XIV of the 61st Meeting of the Executive Committee and Resolution XXVII of the the XIX Meeting of the Directing Council of the Pan American Health Organization on the subject are being fulfilled, as is Resolution WHA23.59 of the Twenty-third World Health Assembly on the General Program of Work Covering a Specific Period;

Recognizing that the procedure recommended, namely the joint study and planning of the assistance the Governments need for dealing with their priority health problems, will result in more effective use of PAHO/WHO resources;

Seeing that, if the procedure is to operate satisfactorily, the active collaboration of all Member Governments is required; and

Bearing in mind that the procedure should be improved in the light of the experience gained and additional studies promoted and conducted by PAHO/WHO,

#### **RESOLVES:**

1. To approve the report of the Director of the Bureau on the steps taken to plan and evaluate PAHO/WHO assistance to the countries, and to urge the Member Governments to continue to use the procedure adopted.

- 2. To recommend to the Director that the program and budget estimates of the Organization reflect the importance assigned to the critical areas in which priority assistance from PAHO/WHO is needed.
- 3. To recommend to the Director that the projects for the Region of the Americas that will be included in the Fifth General Program of Work of the World Health Organization for the period 1973-1977, be based on joint programming by the Governments of the Region and the Organization.
- 4. To recommend to the Member Countries that they continue their efforts to develop and improve health planning as a part of economic and social development planning.
- 5. To request the Director to submit to the XVIII Pan American Sanitary Conference a report on the planning of PAHO/WHO assistance to the countries, including additional studies designed to improve the procedure.

In compliance with the request in operative paragraph 5 of that resolution, it may be stated that the planning of assistance to the countries has continued to be based on an analysis of the information received, especially the preliminary proposals submitted by the countries to the Bureau and deriving from the joint delimitation of critical areas requiring priority assistance from PAHO/WHO. Thus country recommendations are being examined, and zonal and regional projects are being worked out. The information in question was also used as a basis for the formulation of the proposed Fifth Program of Work of the Region of the Americas.

The next step involves a series of consultations with the countries to determine which joint projects will be carried out from 1972 onwards, depending on the resources available to the Organization. If this cycle is to be continued without interruption, it will mean verifying and supplementing the information available and periodically analyzing the extent to which the targets laid down for the particular period have been attained.

With regard to method, it should be pointed out that weaknesses and inconsistencies which appeared at this preliminary stage are being carefully studied so that once the obstacles have been satisfactorily overcome, the process will be gradually perfected.

Annex I (Document CE64/8) is based on information received up to 15 June 1970, and summarizes the status of long-term planning and evaluation at that date. Annex II summarizes the situation as at 1 August 1970.

Annexes

CSP18/16 (Eng.) ANNEX I



working party of
the regional committee

WORLD
HEALTH
ORGANIZATION

64th Meeting Washington, D.C. June-July 1970

Provisional Agenda Item 8

CE64/8, Rev. 1 (Eng.) 19 June 1970 ORIGINAL: SPANISH

#### LONG-TERM PLANNING AND EVALUATION

In accordance with the provisions of paragraph 6 of Resolution XXVII of the XIX Meeting of the Directing Council of PAHO, the Director has the honor to submit to the Executive Committee a summary of activities promoted and carried out to June 1 regarding "Long-Term Planning and Evaluation".

## Background

The object of long-term planning of the PASB/WHO cooperative activities with the countries is found in Resolutions WHA21/29 and 22.53 adopted at the Twenty-first and Twenty-second World Health Assemblies, respectively. The latter placed special emphasis on the desirability of integrating and continuing such activities within the context of overall strategy during the Second Development Decade of the United Nations.

In turn, in its Resolution XIV the XVIII Meeting of the Directing Council of PAHO instructed the Director to review existing procedures and to prepare a joint planning process, in accordance with the aforementioned Resolutions. At its XIX Meeting, the Directing Council of PAHO examined in detail the report of the Director on "Long-Term Planning and Evaluation" (Document CE61/14), as well as Resolution XXIV on that topic, regarding which he had requested that the Directing Council recommend to the countries provision of the facilities required for applying the proposed process. The abovementioned meeting of the Directing Council adopted Resolution XXVII which states the following in its operative part:

- "l. To approve the report of the Director on long-term planning and evaluation as well as the proposed method for making four-year projections of the assistance activities of the Organization.
- 2. To urge Member Countries to actively participate in the joint planning process based on the proposed method.

- 3. To recommend to the Director that he prepare long-term plans and the corresponding budget estimates for PAHO/WHO assistance activities at both the country and the regional level, bearing in mind the guidelines and stages proposed by the World Health Assembly in Resolution WHA22.53.
- 4. To bring to the attention of the Governments Resolution XXVI on strengthening program and project evaluation procedures in which the processes of long-term planning and evaluation are complemented.
- 5. To recommend to the Director that, in the course of long-term planning, he endeavor to strengthen liaison with agencies of the inter-American system and other agencies involved in the social and economic development of the Region.
- 6. To request the Director to report to the 64th Meeting of the Executive Committee on progress in implementing the planning process, including the participation of Member Countries."

# Purposes

According to the provisions of the aforesaid resolutions of the Governing Bodies of the Organization, the basic object of the proposed procedure, known as "Quadrennial Projections of PASB/WHO Activities", is to provide an instrument for improving the Organization's cooperation with countries by means of a continuing process of joint programming.

The process has the following features:

- It entails joint action with the health authorities of the countries;
- Programs are projected and adjusted annually for four-year periods;
- It is based on prevalent health problems, national and regional health policies, available resources and external cooperation policy defined by the countries.

# Development of the Process

Preliminary Test - In August 1969 the proposed process was the object of a preliminary field test in Guatemala. Consequently, it was possible to identify the areas in which the process required further development, to adjust and give specific form to headings which were originally excessively detailed and, finally, to confirm the feasibility of joint application, that is, with national personnel and PASB/WHO staff. Subsequently the appropriate modifications were introduced and plans were prepared for implementing the process in accordance with the provisions of the Directing Council Resolution.

- Joint Action In order to carry out the above-mentioned plans, the Director sent a note to the Member Countries which, in addition to mentioning the purposes of the exercise, emphasized the need for implementation through joint action of health personnel designated by the appropriate Ministry and PASB/WHO staff. He specifically recommended organization of a joint group which would be responsible for the process. As this happened to be one of the points emphasized during consideration of the topic by the 61st Executive Committee as well as the XIX Directing Council, Bureau staff were instructed to provide maximum cooperation to the Governments to ensure that the activity would be carried out specifically as provided by the aforesaid Governing Bodies of PAHO/WHO.
- Application in the Countries As most of the countries immediately expressed their support of this measure in view of experience gained in the preliminary test and on the basis of joint action by local and international personnel, the process was initiated in February and March. With some slight variations it consisted of the following:
  - a) Analysis and discussion of activities to be carried out by national and Organization personnel in preparing the projections;
  - b) Compilation and processing of basic information for general diagnosis of the health situation in each country and of the structure of the health sector, including identification of major problems and availabilities of resources;
  - c) Establishment of an image of change at the end of a 10-year period and determination of the action required in order to bring about such changes;
  - d) Definition and identification of critical areas within overall problems and activities in which external cooperation is required;
  - e) Preparation of a portfolio of proposed projects based on critical areas in which PAHO cooperation is considered necessary. Some may pertain to current projects, others to new problems or activities, and still others may aim at reorientation and even termination of existing projects;
  - f) Selection of projects to be implemented during the quadrennium, on the basis of real availabilities of budgetary resources of the country as well as the Organization; and
  - g) Establishment of terms of reference for subsequent evaluation.

Up to June 1, on the basis of the interest shown in this activity by the health authorities of most of the countries, it was possible to obtain basic information from 21 countries, and the required data for the quadrennial projection from 17 countries (see Annex). It should be emphasized that, in some instances, this exercise has furthered the planning process at the national level and is facilitating broader work relations between national health personnel and Organization staff.

Plan to be Followed - The material received is being reviewed and processed in the headquarters of the Organization in order to prepare an overall projection of PASB/WHO cooperation with the countries during the 1972-75 period. It is expected that this phase will be completed in July if pertinent information can be obtained from the countries. In addition to analysis of the data received, this phase entails the development of a typology of countries as well as the preparation of regional projects and an initial draft quadrennial budget.

It should be mentioned that, in this phase, the bases necessary for organization of regional activities and resources should be established. The marked differences observed in countries of the Region with regard to their respective development processes have emphasized the need to classify them according to their socio-economic and health characteristics.

It is expected that this will permit establishment of a frame of reference which will facilitate analysis of problems which affect the health situation. The aforesaid analysis entails many difficulties, including the fact that, frequently, the required data are incomplete and sometimes only available with regard to certain countries and for different periods. In addition to being unreliable, the quality of the information varies widely from country to country. Furthermore, the criteria for defining and compiling data vary. On the other hand, the difficulty of evaluating the general situation of a given country on the basis of analysis of numerous different indicators is still another factor that must be considered. In order to overcome these obstacles, the economic and social indicators applied may be handled so as to permit the establishment of profiles of development which may provide a graphic idea of the essential characteristics of the countries.

By means of the proposed typology, countries with the most homogeneous characteristics are grouped. In turn, such groups differ sufficiently among themselves so as to permit identification of various levels of development. In other words, each group represents a given level of economic and social development. Aspects pertaining to levels and structure in the areas of health, education, environment, economics and demography are considered.

Specifically, the proposed typology will be useful in determining the frame of reference for regional analysis of health problems in relation to development. It will also facilitate preparation, evaluation and readjustment of PAHO regional cooperation with the countries, orientation designed to formulate the various types of health plans, and analysis of behavioral relations of the health sector with the other components of development by types of countries.

Preparation of Regional Projects - In preparing regional projects—an integral part of quadrennial projections— the plan adopted for country and intra-zonal projects is used. Nevertheless, because of their particular characteristics, it is necessary to adopt an overall approach to the problems to be solved and to the resources required for implementation. On the basis of data obtained from the countries, in order to identify and handle problems at the regional level it is necessary to apply development and health typologies in determining which groups of countries are sufficiently homogeneous and affected by common and specific problems. Such problems are analyzed in relation to the regional and world policies that the countries have established in this regard.

It is expected that, during this phase, an initial approximation to a four-year work plan will be available. Such an approximation should be revised and adjusted for the first time during the second half of the current year. The approximation would include the budgetary implications of the plan.

As this is a dynamic process, the verification of data, health policy changes—at both the national and regional levels—and the availability of resources, together with the results achieved in relation to the objectives, will determine the modifications and adjustments that will have to be introduced in the aforementioned work program on a continuing basis.

In view of the present stage of development of the process, it is planned to submit to the Pan American Sanitary Conference a complete report on the program, including a preliminary presentation of the model projection applied to the group of countries regarding which information will be available in July.

PRESENT STATUS OF FOUR-YEAR PROJECTIONS OF PASB ASSISTANCE TO THE COUNTRIES

(Information at 15 June)

	Basic	c Information		Projection	tion		Preparation
Country	Being Compiled	Obtained	Sent to PASB	Being Prepared	Sent to PASB	Analysis of Basic Information	of Regional Projection
Argentina	×						
French Antilles and Guiana <sup>1</sup>							
Barbados		×	×	×	×	×	x
Bolivia		×	×	×	×	x	×
Brazil	×						
Chile		×	×			X	
Colombia		×	×	×	×	Х	×
Costa Rica		×	×	×	×	x	×
Cuba	x						
Ecuador		×	×	×	×	×	×
El Salvador		×	×	×	×	×	×
Guatemala		×	×	×	×	×	×
Guyana		×	х	×	×	×	×
Haiti		×	×	×	×	×	×
Honduras		×	x	×	×	×	×
Jamaica		×	×	×	×	×	×
Mexico	×						
United Kingdom $^2$	×						
Nicaragua		×	ж	×	×	×	×
Panama		×	×	×	×	×	×
Paraguay		×	×	×	×	×	×
Peru		×	x	×	×	X	×
Dominican Republic		×	×	×	×	×	×
Surinam and Netherlands Antilles $^3$		×	×	×	×	×	×
Trinidad and Tobago		×	×	×	×	×	×
Uruguay		×	×			×	
Veneziole		Þ	*	>		>	٥

Prench Antilles and Guiana: Guadaloupe, Martinique, French Guiana, part of St. Martin, St. Bartholomew United Kingdom: Bahamas, Bermuda, British Virgin Islands, Cayman, Turks and Caicos, West 2 United Kingdom: Bahamas, Bermuda, British Virgin Islands, Cayman, Turks and Caicos, West
Indies (Anguilla, Antigua, Barbuda, Dominica, Grenada, Montserrat, Nevis,
St. Kitts, St. Lucia, St. Vincent)
3 Netherlands Antilles: Aruba, Bonaire, Curaçao, Saba, part of St. Martin, St. Eustatius

CSP18/16 (Eng.) ANNEX II

PRESENT STATUS OF FOUR-YEAR PROJECTIONS OF PASB ASSISTANCE TO THE COUNTRIES (Information at 1 August)

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							1 Preparation
	Basic	: Information		Projection	ł		
Country	Being  Compiled 0	Obtained	Sent to PASB	Being Prepared	Sent to PASB	Analysıs ot Basic Information	of Regional Projection
Argenting	×						
French Antilles and Guiana							
Barbados		×	×	×	×	×	×
Bolivia		×	×	×	×	×	×
Brazil		×	×	×	×	×	×
Chile		×	×			×	
Colombia		x	×	×	×	×	×
Costa Rica		x	x	x	×	×	×
Cuba	x						
Ecuador		×	×	×	×	×	×
El Salvador		×	×	×	×	×	×
Guatemala		×	x	×	×	×	×
Guyana		×	x	×	×	×	X
Haiti		×	×	×	×	×	×
Honduras		×	×	×	×	×	×
Jamaica		×	×	×	×	×	×
Mexico	×	×					
United Kingdom $^2$	x						
Nicaragua		×	×	×	×	×	×
Panama		×	×	×	×	×	×
Paraguay		×	×	×	×	×	×
Peru		×	×	×	×	×	×
Dominican Republic		×	x	×	×	×	×
Surinam and Netherlands Antilles	3	×	×	×	×	×	×
and Tobago		×	×	×	×	×	×
Uruguay		×	×	×	×	×	×
Venezuela		×	×	×	×	×	×

French Antilles and Guiana: Guadaloupe, Martinique, French Guiana, part of St. Martin, St. Bartholomew 2 minda Rritish Virgin Islands. Cavman. Turks and Caicos, West United Kingdom: Bahamas, Bermuda, British Virgin Islands, Cayman, Turks and Caicos, West Indies (Anguilla, Antigua, Barbuda, Dominica, Grenada, Montserrat, Nevis, St. Kitts, St. Lucia, St. Vincent)

Netherlands Antilles: Aruba, Bonaire, Curação, Saba, part of St. Martin, St. Eustatius