150th SESSION OF THE EXECUTIVE COMMITTEE

Washington, D.C., USA, 18-22 June 2012

Provisional Agenda Item 4.1

CE150/11 (Eng.) 11 May 2012 ORIGINAL: SPANISH

MID-TERM EVALUATION OF THE HEALTH AGENDA FOR THE AMERICAS

Introduction and background

- 1. On 3 June 2007, the ministers and secretaries of health of the Region of the Americas launched the Health Agenda for the Americas 2008-2017 (the Agenda) in Panama¹ to guide the collective action of national and international stakeholders who seek to improve the health of the peoples of this Region over the next decade.
- 2. The Agenda recognizes the shared principles and values of the countries of the Region, presents an analysis of the health situation and trends in the Americas, defines the main areas of action, and reiterates the commitments made by the countries at international fora in order to strengthen the response to effectively realize them.
- 3. The Agenda establishes the following eight areas of action:
- (a) strengthening the national health authority;
- (b) tackling health determinants;
- (c) increasing social protection and access to quality health services;
- (d) diminishing health inequalities among countries and inequities within them;
- (e) reducing the risk and the burden of disease;
- (f) strengthening the management and development of health workers;
- (g) harnessing knowledge, science, and technology; and

¹ Health Agenda for the Americas 2008-2017. Washington (DC): US. PAHO; 2007 (presented by the Ministers of Health of the Americas in Panama City, June 2007). Available from: http://www.paho.org/English/DD/PIN/Health Agenda.pdf.

- (h) strengthening health security.
- 4. The Agenda intends to carry out the above-mentioned actions by guiding the preparation of national health plans, as appropriate, and the strategic plans of all organizations interested in cooperating in health with the countries of the Americas. Assessment of progress in the areas outlined in this Agenda will be done by evaluating the achievement of goals set in these plans (paragraph 6 of the Statement of Intent of the Agenda).
- 5. Since 2012 marks the midpoint of the Agenda's implementation period, it is timely for the Member States to carry out a mid-term evaluation. This evaluation will focus on the following components:
- (a) determination of the Agenda's influence on the development of national and subregional health plans, as well as of all the international organizations that cooperate in health with the countries of the Americas;
- (b) evaluation of progress in the Agenda's eight areas of action, measured using proxy indicators;²
- (c) evaluation of the response of the Pan American Sanitary Bureau (PASB) in the implementation of the Agenda.
- 6. The countries will evaluate components (a) and (b), and the Office of Internal Oversight and Evaluation Services (IES) of the Pan American Sanitary Bureau will simultaneously perform an independent evaluation of component (c).
- 7. As a high-level policy instrument for health promoted by the Member States, the Health Agenda for the Americas provides PAHO with a vision and a direction. To that end, the Agenda was a key reference for the development of PAHO's Strategic Plan 2008-2012.³
- 8. It is worth noting that this evaluation coincides with other significant events at the global and regional levels, including the World Health Organization (WHO) reform

_

Proxy indicators will be used since the Agenda did not establish its own targets or indicators to measure progress. These indicators measure the impact and process in the areas of action included in the Agenda.
Pan American Health Organization (PAHO). PAHO Strategic Plan 2008-2012 Amended (Official Document 328). 49th Directing Council of PAHO, 2009 Sep 28 – Oct 2; Washington (DC), US. Washington (DC): PAHO; 2009. Available from: http://new.paho.org/hq/dmdocuments/2009/OD-328%20complete%20document.pdf.

process and the preparation of the new strategic plans of WHO and PAHO (2014-2019), among others.

- 9. It was agreed at the sixth session of the Subcommittee on Program, Budget and Administration (Subcommittee) in March 2012, that a mid-term evaluation of the Agenda would be carried out, and a working group comprised of ten countries was created for this purpose. It was recommended that the working group be made up of the Subcommittee members (of 2012) (Argentina, Costa Rica, El Salvador, Guyana, Saint Vincent and the Grenadines, the United States of America and the Bolivarian Republic of Venezuela), as well as the members of the 2007 Subcommittee that guided the development of the Agenda (Antigua and Barbuda, Argentina, Canada, Chile, Cuba, the United States of America, and Panama). Brazil asked to be part of the working group and the Subcommittee also approved this request. Additionally, it was decided that Argentina would be lead the working group, and that the PASB would serve as the secretariat for the process.
- 10. This document presents a progress report on the evaluation process in order to provide current information to the Member States on the progress made to date and the next steps. It is also intended to encourage Member States to participate in this important process to ensure implementation of the relevant activities prior to the presentation of the evaluation's findings at the 28th Pan American Sanitary Conference in September 2012.

Progress report on the assessment process

- 11. Pursuant to the agreements reached during the sixth session of the Subcommittee, the working group was established, made up of 10 countries: Argentina, Brazil, Costa Rica, Chile, El Salvador, United States of America, Guyana, Panama, Saint Vincent and the Grenadines, and the Bolivarian Republic of Venezuela. The health authorities of nearly all the countries have confirmed their commitment to participate in the working group and have appointed a delegate to the group.
- 12. In accordance with the work plan for the evaluation, the first face-to-face meeting of the working group was held in Buenos Aires, Argentina, from 25-27 April 2012. At the meeting, a) the work plan, b) the methodology, and c) the instruments for the evaluation were reviewed and approved. The delegates from Argentina, Costa Rica, Guyana, Panama, United States of America, and the Bolivarian Republic of Venezuela attended the meeting. The Ministry of Health of Argentina led the meeting, with support from PAHO/WHO as the secretariat for the process. In addition, all of the PAHO/WHO teams in the country offices have been trained so that they can support the health authorities in their respective countries in carrying out the evaluation. A PAHO regional team has also been trained to evaluate the response of the international agencies to the Health Agenda for the Americas.

- 13. Important steps in the work plan for completing the evaluation are described below. The complete timetable is attached as an Annex.
- 22 May to 18 June 2012: the surveys and interviews will be carried out in the countries, as well as with subregional integration bodies and international entities. The Ministry of Health of Argentina, as the leader of the process, will send the official communication to the national health authorities, the subregional integration bodies, and the international agencies. The PAHO/WHO representatives and their teams in each country will undertake the relevant activities with the national health authorities and the subregional integration bodies. At the same time, a regional PAHO/WHO team will follow up as appropriate with the international agencies.
- 25-27 July 2012: the working group will hold a second face-to-face meeting to examine the preliminary findings of the evaluation and to complete the draft assessment report.
- 3-24 August 2012: a consultation on the draft evaluation report will be carried out with all the countries.
- 18-21 September: the report will be presented at the 28th Pan American Sanitary Conference.

Action by the Executive Committee

14. The Executive Committee is requested to examine the progress made in the midterm evaluation of the Health Agenda for the Americas and to issue recommendations for completing this important process.

Annex

Timetable for the mid-term evaluation of the Health Agenda for the Americas (March-Sentember 2012)

	(March-	(March—September 2012)	er 2012)				
Activity	March	April	May	June	July	August	September
1) Approval by the Subcommittee of the proposal to conduct the evaluation	14-16						
2) Creation of the countries' working group		1-20					
3) First face-to-face meeting of the working group to		25-27					
review and approve the methodology and instruments							
(Buenos Aires, Argentina)			1				
4) Distribution of documents for review and final			2-7				
5) Training (using <i>Elluminate</i>) of teams of interviewers			10-15				
6) Distribution of instruments to countries, subregional bodies, and international agencies			21-22				
7) Conduct the surveys, interviews, and documentary			22 May	22 May-18 June			
review							
8) Presentation of the progress report on the process of				18-22			
the evaluation by Argentina to the PAHO Executive							
Committee							
9) Compilation and analysis of the information from the				18-29			
surveys, interviews, and document review							
10) Preparation of the first draft of the evaluation report					1-13		
and virtual meeting for its review							
11) Second face-to-face meeting of the working group to					25-27		
review the draft report (proposal to hold it in Panama							
City, Panama)							
12) Consultation of the draft evaluation report with all the						3-24	
countries of the Americas							
13) Drafting of the report that will be submitted to the Pan						24-29	
American Sanitary Conference (PASC)							
14) Delivery of the report for the PASC to the PAHO						30	
Governing Bodies Office to be translated for the PASC							
15) Presentation of the report to the countries during the							18-21
) () () () () () () () () () (