

WHO (Headquarters) - World Health Organization Headquarters

1.4 Health (WHO (Headquarters))

Methods and country health information systems

WHO is continuing to work to improve methods and country health information systems for measuring population health, health system functioning, inequities in health, core health-related indicators including health-related millennium development goals, as well as key inputs into the health system such as national health expenditures.

WHO's Global Health Observatory

WHO is developing a Global Health Observatory (GHO) that aims to enhance access to -- and analyses of -- WHO's data and statistics on health situation and trends. The Global Health Observatory is an Organization-wide activity with strong links to the regional and country offices. The goal is to enhance the quality, efficiency and effectiveness of all of WHO's work in the area of health statistics. The main target audiences are the general public, policymakers and public health professionals (in practice, research and education) in Member States and international organizations. The Global Health Observatory disseminates information in three ways:

- a web portal providing one entry-point to WHO's health statistics and analyses, including theme pages and data views;
- a data repository that includes easy links to all major data bases;
- analytical reports on specific and cross-cutting topics.

In 2009, as part of the GHO, WHO issued a global report on women and health bringing together and analysing data on health-issues relevant to women across the life-course and around the world. WHO also produces the annual World Health Statistics publication.

Methodological work

WHO methodological work continues to focus on better measurement of fatal and non-fatal health outcomes in a comparable manner and on the development of improved estimation techniques for summary measures of population health and the measurement of inequality. Specific activities include:

Mortality statistics

The WHO Department of Health Statistics and Informatics is continuing to support countries strengthen their routine health information and civil registration systems. WHO has developed a strategic guidance tool to support countries to identify gaps and weaknesses in their vital statistics and find feasible ways of addressing them.

WHO continues to invest greater effort to improve the coverage and timeliness of causes of death statistics by working with countries to:

- obtain and update civil registration information for Member States with complete civil registration, with a delay of no more than two calendar years;
- establish and implement mechanisms to obtain, validate and update vital statistics for countries with partial registration data, e.g., where data are limited to cities or to sample registration areas;
- establish and implement mechanisms to obtain, validate and update data for countries with limited registration capacity, using data from small scale/sample registration and surveillance systems;
- WHO has produced, in collaboration with other international partners, a standard verbal autopsy tool to collect data on cause of death data in household surveys in settings where vital registration is non-existent or incomplete.

Improving Measurement of Morbidity and Risk factors

Self reported health data on levels of health, chronic diseases and risk factors are known to be subject to a host of reporting biases. In order to provide comparable measurement of these factors, innovative methods of data collection are proposed for low- and middle-income countries with poor health information:

- Health examination survey: collection of biological and clinical data, behavioural/risk factor data and background characteristics;
- Global risks to health: 2004 update: WHO has updated its analyses of the relative contribution of major risk factors to population ill-health and produced a report detailing the burden of mortality, injuries and disease caused by 24 risk factors globally and in a range of regional groupings.

Summary measures of population health

WHO will continue to work with international partners in the updating of information on burden of disease using up-to-date epidemiological data as well as improved estimation techniques:

- Child mortality estimates are updated annually, working in coordination with the Inter-agency Group for Child Mortality Estimation (IGME), which includes Unicef, United Nations Population Division, the World Bank, WHO. The latest child mortality estimates up to 2009 were published in 2010.
- Neonatal mortality estimates by country are updated and published periodically by WHO. The latest estimates were for the year 2008 were released in 2010. For 2011, for the first time, it is planned to publish a time series from 1990 to 2009 for neonatal deaths for all the countries of the Member States. WHO compiled an extensive database and improved modeling methods from previous estimates.
- Maternal mortality estimates 1990 to 2008 released in 2010 were developed in close collaboration with an international expert group and used all available country data on maternal mortality, as well as improved methods of estimation. The intensive country consultation carried out as part of the development of these estimates has been instrumental in identifying increased data collection efforts in recent years including the special systems to capture data on maternal deaths. There are however major gaps in the availability and quality of data for many countries where maternal mortality levels are high, and only through statistical modeling is it possible to obtain an understanding of the trend. WHO and partner agencies will continue to strengthen the systems for data collection and analysis as well as the global database for improving the future estimates.
- Life tables estimates are also updated annually for all Member States. They provide consistent indicators across countries, period and ages for life expectancy at birth, child mortality and adult mortality. For child mortality, estimates from IGME is taken into account, furthermore, they provide the estimated total number of deaths which constitute the "envelope" that should not be exceeded when all cause-specific number of deaths are summed.
- WHO is an active partner in the update to the Global Burden of Disease for 2005. WHO's contribution includes:

- o Advancing methods for using multiple-cause-of-death statistics to generate correction algorithms for incorrectly certified deaths.
- o Developing estimates of the total (all-cause) incidence and prevalence of selected disabilities which are sequelae of multiple diseases, including hearing loss, vision loss, infertility, low IQ, incontinence, and anemia.
- o Updating disability weights using new primary data from a multi-country community study, in collaboration with Harvard University.

Monitoring health system performance

In 2010, a handbook of indicators and measurement strategies for monitoring health systems building blocks was published, with a wide range of collaborators, including country experts and donor agencies. Additionally, guidance towards monitoring and evaluation of national health strategies has been developed. This guidance outlines the key elements and characteristics of a platform that requires regular assessment of country progress and performance and uses the results to enhance the implementation and evidence base of the national health strategy.

During 2009-2010, WHO continued to work with countries and partners to strengthen health systems, under the Country Health Systems Surveillance (CHeSS) framework. The goals are to improve the availability, quality and use of health system data to inform country health sector reviews and planning processes and strengthen assessments of health systems performance. Several regional workshops have been conducted in the African Region involving 20 countries and more will take place in 2011. These workshops aim to enhance the analytical capacity of countries to conduct comprehensive health progress and performance reviews in the context of national health plans and related global health goals. Outputs of the workshops include: i) Increased capacity for analysis and synthesis among participants from country institutions; ii) Sharing of tools and methods among country participants and facilitators; and iii) Selected outputs of country analyses that can feed into their health sector reviews.

The WHO Health Statistics and Informatics department continues to work with the Health Metrics Network (HMN) partnership in strengthening country capacity to collect and report high quality health data. HMN is working closely with partners in countries to strengthen the infrastructure for a health information system that combines information from multiple sources.

Global Observatory for eHealth (GOe)

The Global Observatory for eHealth (GOe) (www.who.int/goe) provides Member States with strategic information and guidance on the use of information and communication technologies (ICT) for health. The World Health Assembly endorsed the establishment of the GOe in 2005.

- Dedicated to monitoring the impact of ICT on health and to improving the understanding of developments, opportunities and challenges to the implementation of eHealth worldwide.
- First global survey conducted in 2005/6: development of eHealth country profiles, identification of eHealth challenges and presentation of recommendations for action.
- Second global survey conducted in 2009/10: builds upon the first survey and expands its scope to address relevant eHealth areas that have evolved since the first survey.
- Publishing a series of reports on telehealth, atlas of participating country profiles, mobile health, management of patient information and legal and ethical frameworks for eHealth during 2011.

4. Methodology of data collection, processing, dissemination and analysis (WHO (Headquarters))

4.2 Classifications (WHO (Headquarters))

4.3 Data sources (WHO Headquarters)

4.3.3 Household surveys (WHO (Headquarters))

WHO Study on Global Ageing and Adult Health (SAGE)

- WHO has completed the first round of data collection from SAGE.
- Data sets from these studies are now available upon request. A public release data set with all metadata will be made available by mid 2011.
- The pilot testing has been completed in the three European SAGE-like surveys. The main field work will be completed in 2011.

Other survey related activities

- WHO will work closely with the International Household Survey Network (IHSN) and international experts to develop a standard set of modules for use in health interview surveys for priority health outcomes. A meeting has been held to start the process with the module on health expenditures but resource constraints may considerably delay this project.
- A set of health examination surveys in the Gulf Cooperation Council countries, building on the World Health Survey, have been completed in five countries. The last survey will be completed in 2011.

4.3.5 Other administrative and non-survey sources (WHO (Headquarters))
