

Health Information and Health Sector Reform

Improving Decision Making
Through Better Information

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Topics for Today

- The Past: Lessons learned about monitoring and evaluation in the Bank's work in the HNP sectors.
- The Present: Current work on information and sectoral decision making -- some examples and issues.
- The Future: Where do we want to go ?

Some lessons from our past....

- Inadequate monitoring and evaluation --
 - 70% of completion reports show ‘no data’ for outputs, outcome
- Project documents better at “what” than “why” and “how”
- Excessive input orientation in design, supervision strategy
- Neither borrower nor Bank can attest to results achieved beyond anecdote

Why does this happen ?

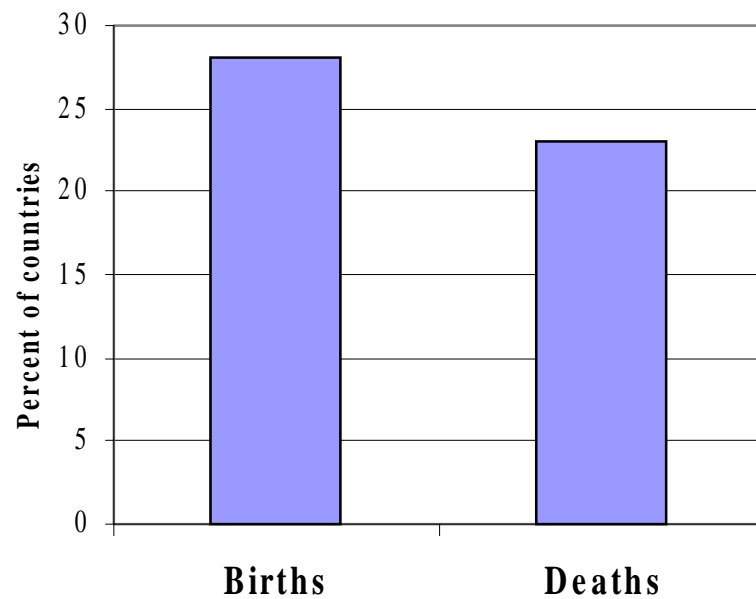
- At the Bank, *Not* because of lack of knowledge/policy -- 30 years of exhortation , multiple ‘performance indicator’ guidelines
- Weak incentive structure **within** the Bank:
 - focus on appraisal, new commitments
 - decline in allocations for supervision over time’
 - focus on ‘fiduciary supervision’ -- crowds out technical review and monitoring
 - lack of mechanisms for review of M and E results internally
- Lack of resources, skills -- especially combination of managerial and technical skills

At donor level:

- Donor agencies are under pressure to report on results to to their immediate ‘authorizers’ -- e.g. Congress, Parliamentarians...
- Short time horizons --
- Reinforces tendency to ‘report up’ , ‘extractive’ approach to design and operation of health information systems
- Competition for resources inhibits willingness to work toward ‘common denominators’

Factors at the country level (1) --

Percent of Low and Middle Income Countries with Vital Registration



Percent of Vital Events Registered

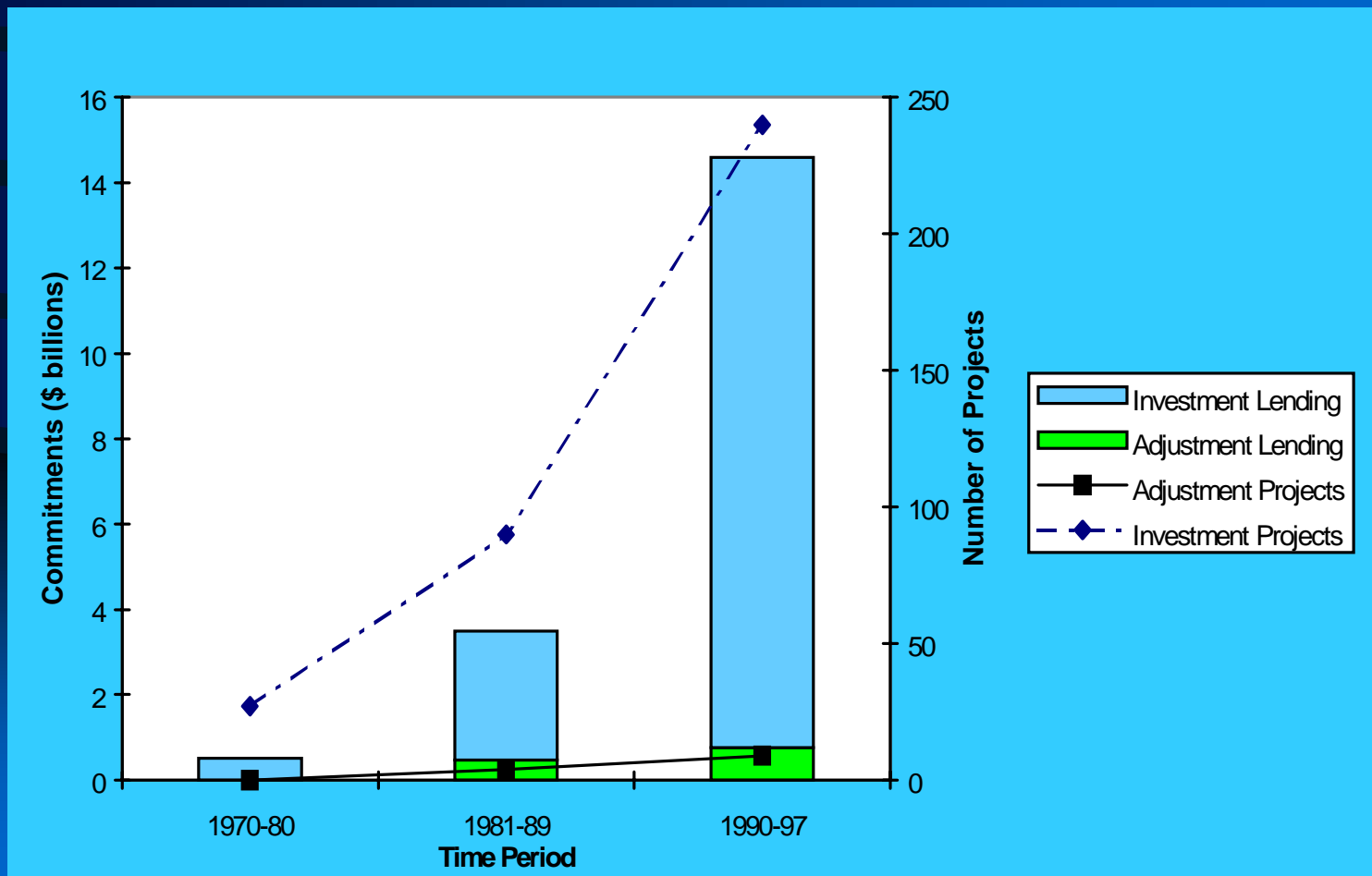


Factors at the country level (2)

- Gaps in basic 'information infrastructure' :
(e.g. registration of deaths, births not existent or incomplete in most countries)
- Planning and budgeting systems not performance based.
- Donor dominance of measurement capacity that does exist (e.g. DHS, MICS, LSMS not useful for district level decision-making)

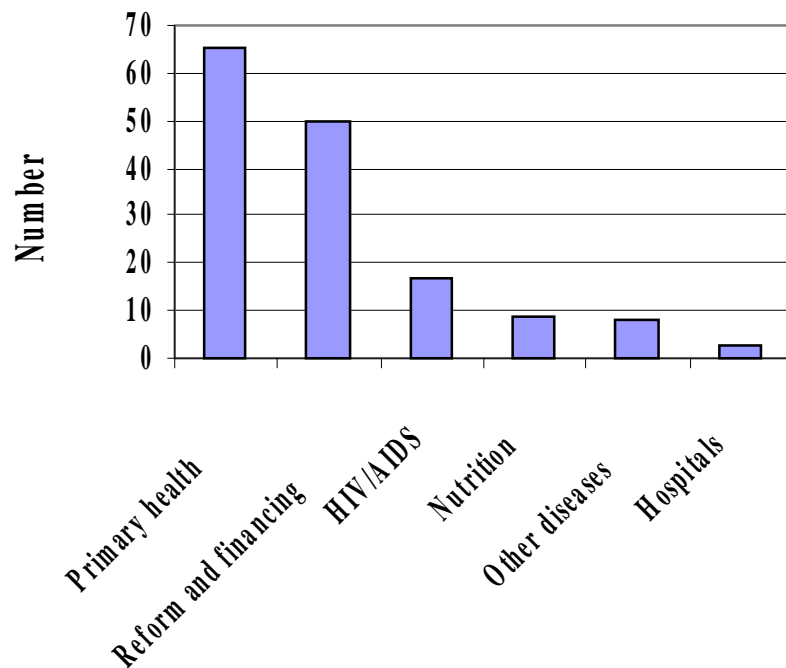
Current Issues in HNP

- Rapid and recent growth in the portfolio

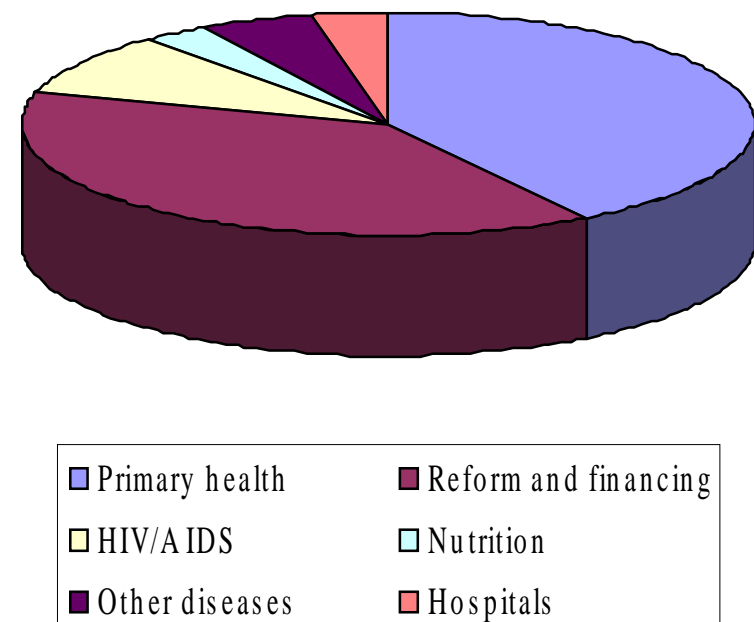


- Portfolio shows mix of systemic, disease specific, and special purpose programs:

Number of HNP operations, 1995-2001



Distribution of health lending (\$), 1995-2001



Current Trends, cont

- Forms and mechanics of assistance are changing to recognize:
 - that country and local **ownership** is key to success
 - need to reduce complexity, **maximize** coordination
 - that ‘fungibility’ negates traditional approaches to accountability
- SWAps a response in HNP, PRSPs and the Comprehensive Development Framework more general

Current Trends, cont

- Sector reform aims to:
 - improve health outcomes
 - attain sustainable and equitable financing:
economic access
 - provide stewardship: quality, standards
- Sector reform focuses on **quality and responsiveness of decision making**
 - better use of cost/financial information
 - decentralization

Current Trends, cont

Both traditional, disease-specific and newer
Sector reform efforts can not succeed
without:

*better, and better use of, local information
for decision making*

Current Trends, Cont.

- Recognition on need for better M and E not restricted to HNP
- Work on the Public Expenditure programs created tools for tracking flow of funds, inputs at local levels
- In Uganda, prior to use of these, 30% of allocated non-salary revenue reached district level facilities, moved to 90% after publishing results !!

Implications for the Future

- Health is not improved by good intentions, *evidence matters*
- Accountability for results *more* not less important in future
- Providers and donors aren't the only game in town -- consumers must have voice!
- We can no longer afford to ignore the need for investment and action to improve information infrastructure

Future Priorities

- Recognize that better M and E is the 'ultimate' public good -- source of know how and learning
- Create incentives (for donors and borrowers) by linking resources to performance measurement
- Work in partnerships to tap local capacity and knowledge

Next Steps

- Build on the past -- Estimate the costs of AND benefits of better information
 - build on lessons of experience in US, Europe, in other sectors (e.g. agriculture research)
 - estimate “costs of failure” when evidence is missing
- Empower consumers through making them the evaluators of government and donor actions
- Assess roles and comparative advantage across donors