

Member States Information Session on recently concluded evaluations

Brief introduction to the session



Dr Masa Igarashi
Director
WHO Evaluation Office

10 June 2024

Opening remarks

Full report and related documents are available:

<https://www.who.int/publications/i/item/who-dgo-evl-2023-7>



Dr Jeremy Farrar
Chief Scientist

Theme 1: Evaluation of WHO normative function at country level



Dr Anand Sivasankara Kurup
Senior Evaluation Officer
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June 2024

The evaluation in a nutshell

Context of the evaluation: previous evaluation of normative function of WHO conducted in 2017

Scope: Focused on the use of six selected normative products, using a country case study approach in 7 countries. Beyond the use of the selected products, the evaluation provided a **light-touch analysis of overall experience of normative functions in the selected countries** in order to document lessons learned and challenges.

Objectives

- (a) To assess plans and processes at WHO HQ for dissemination, use and follow up in countries.
- (b) To assess how and to what extent the normative products are found relevant
- (c) Draw lessons on how WHO could improve/strengthen its country-level normative role and functions

Conducted by external evaluators

Approach

- Mixed methods
- **Normative products:** 22nd WHO Model List of EML; Guidance - conducting a country COVID-19 intra-action review (IAR), 2021; HEARTS, Technical package for cardiovascular disease management; Mental Health Global Action Programme (mhGAP) Intervention Guide, 2016; Guidelines for the treatment of malaria, 2015; and, WHO Guidelines for Indoor Air Quality: Household fuel combustion, 2014
- **Case study countries:** Ethiopia, Jordan, Maldives, Pakistan, the Philippines, Rwanda and Uganda

Evaluation questions and methods

Evaluation questions

- How have different parts of WHO been involved in the identification, preparation, formulation and validation of global normative products?
- How have the normative products been used in countries?
- What results have been achieved at country level?
- How could WHO's normative function be strengthened at country level?

Data collection methods and instruments

Desk review of documents

>275 stakeholders consulted (Key informant interviews, focused group discussions, outcome harvesting- WHO, MOH, CSOs, associations of patients, UN,+ users of guidelines- doctors, healthcare professionals, experts)

Country case studies

1. Involvement of three levels of WHO in the identification, preparation, formulation and validation of normative products (NP)

The prioritization process of normative products has improved to align to MS priorities. However, in practice the initiation of development is still driven to a large extent by HQ technical departments.

WHO normative products are seen as being of high quality and they are valued by stakeholders. In terms of positioning these products for use, feedback loops from country level stakeholders including WHO Country Office need to be further developed.

Normative products do not sufficiently take into account end-users needs in their format and content, particularly in relation to guidance on implementation, resourcing and monitoring.

2. Use of the normative products at country level

WHO normative products are widely used at country level. The primary audience is the MOH, but other actors' roles are not always recognized in WHO normative products

The normative function of WHO at country level does not stop at introducing and supporting adaptation of global normative products to country contexts. Rather, it also involves varying degrees of involvement in supporting implementation and monitoring of progress depending on the particular normative product and country context.

Normative products were not found to be specifically used to address gender and health inequities.

Prioritization, implementation, monitoring and evaluation of WHO's normative products are not well integrated into country planning processes.

3. Results achieved at country level

WHO Normative products are unequally resourced, with more implementation resources dedicated to emergency programmes, and fewer to those supporting other core areas of the GPW13 such as mental health, NCDs and environmental health.

The use and impact of normative products is insufficiently documented.

Gender equality and health equity are not prioritized explicitly in WHO's normative work at country level.

Recommendations

Involvement of three levels

Recommendation 1. Further improve the prioritization of normative products and guidance.

Recommendation 2. Revisit the process of normative products development to include feedback loop mechanisms, and outline the role of ROs and WCOs.

Recommendation 3. Normative products to include mechanisms to support implementation plan.

Use of the normative products at country level

Recommendation 4. Incorporate the implementation of global normative products in Country Support Plans.

- NP to be included in CSPs to support the delivery of WCO's strategic objectives, avoiding parallel processes
- Country planning should include the range of WHO's normative roles at country level

Recommendation 5. Resources in line with planned activities and expected results to be made available at country level to support the adoption and implementation of normative products, with sufficient flexibility for WCO to align resources to priority areas.

Recommendations

Results achieved at country level

Recommendation 6. Evaluation of WHO's normative work's implementation and contribution at country level should be strengthened.

Recommendation 5. Ensure that gender equality and health equity and human rights considerations are integrated in WHO's normative work.

WHO's normative Function at country level:

Management Response on evaluation recommendations: Reflections and proposed key actions

**Dr Mubashar Sheikh
Director**

**Department of Quality Assurance, Norms and Standards
Science Division**

Member States Briefing

WHO Headquarters (10 June 2024)

1. Process to date to prepare Management Response

2. Overview of main themes of the evaluation recommendations



3. Reflection on evaluation recommendations and proposed key actions

4. Next steps

Outline

Internal process to date to prepare the Management Response

Feb 2024

Publishing and internal sharing of the recommendations by evaluation Unit

May 2024

- Written feedback from stakeholders that the recommendations are addressed to
- Online consultation at the 3-level for additional feedback

March - May 2024

- Review of related reports from SCI/QNS and other organization-wide assessments and consultations (for e.g. GPW14, working technical papers of the WHO result framework) on related topics and highlighted in the findings and recommendations of such publications/reports.
- Drafting of initial set of actions with input from mentioned units

June 2024

Member states briefing

Three themes emerging from the evaluation recommendations

1

Involvement of three levels

1. All NPs to go through the prioritization process
2. Clarifying roles at the 3-Levels and Product development to include feedback mechanisms
3. Including mechanisms to support an implementation plan in the products

2

Use of normative products at country level

4. Enhancing implementation, monitoring and learning at country-level
5. Resources at country level (with sufficient flexibility) to support the adoption and implementation

3

Results achieved at country level

6. Evaluation of WHO's normative work's implementation and contribution at country level should be strengthened.
7. Integration of GER (gender equality and health equity and human rights) considerations in WHO's normative work.

Recommendation 1: Further improve the prioritization of normative products and guidance.

Specifics on Recommendation 1

- Prioritise fewer NP based on agreed MS priorities, including through an analysis of the strategic priorities and deliverables outlined in Country Cooperation Strategies (CCS)
- All Normative Products (NPs) should go through the prioritization process

Management Response: Key Actions

- Develop a guidance on criteria and guidance for benchmarking based on (at the minimum) country need, strategic priorities and deliverables.
- Allocate and set aside funds for appropriate resourcing and timely delivery of prioritized NPs responding to country needs.
- Enhance existing system and platforms to ensure transparency, predictability and accountability across the three levels of the Organization.

Involvement of three level

Recommendation 2: Revisit the process of normative products development to include feedback loop mechanisms and outline the role of regional offices and WCOs.

Specifics on Recommendation 2

- Each NP to have its own engagement process based on key principles to ensure relevance and usefulness of NP for end-users.
- The needs of different intended users to systematically guide NP format and presentation, including availability of translations.
- Further clarify the roles of the three levels of WHO in fostering participation of country level stakeholders

Management Response: Key Actions

- Develop and integrate user-centered design principles into the Organization's prioritization, quality assurance (QA) and publishing systems.
- Strengthen QA standards and processes and capabilities in all major offices, with the required technical and financial capabilities and resources.
- Integrate into existing corporate planning, reporting and evaluation processes, regular feedback mechanism and learning to inform new product development prioritization and development processes.

Recommendation 3: Normative products to include mechanisms to support an implementation plan

Specifics on Recommendation 3

- Ensure that quality standards for NP go beyond information and evidence provision to include guidance on how to implement, resources needed and how to identify those and what success looks like.
- NPs or accompanying documents should include a monitoring and evaluation framework.

Management Response: Key Actions

- Ensure published WHO normative products are accompanied with guidance on implementation and monitoring and evaluation plans.
- Identify KPIs to measure and report the expected impact of normative products, particularly in countries they are targeted towards.
- Incorporate reporting on uptake as part of the corporate result monitoring and reporting system (output scorecard and results report).

Involvement of three level

Recommendation 4: Incorporate the implementation of global normative products in Country Support Plans (CSP) based on country priorities and context. Normative work of WHO at country level to be planned as a process, beyond policy level, to include support to implementation and monitoring.

Specifics on Recommendation 4

- NP to be included in CSPs to support the delivery of WCO's strategic objectives, avoiding parallel processes to promote NP:
- Once NPs have been identified for the biennia, WCO should report on how they have been used and what difference they have made.
- The monitoring and evaluation of NP implementation to be integrated in the overall M&E framework of the CSP.
- Country planning should include the range of WHO's normative roles at country level:
- WCO's normative role to focus on strengthening health systems' capacity beyond specific NP, in particular by supporting strong monitoring and surveillance systems.
- WCOs to identify and work with a wider range of stakeholders wherever possible, especially civil society and private health care providers, as part of their implementation strategy for normative products, without undermining their relationship with MoH.

Management Response: Key Actions

- Ensure that country cooperation strategies include specific focus for WHO support at the country level around systematic adaptation, implementation and monitoring and evaluation of WHO normative products.
- Establish mechanism to provide regular update to WHO country offices and their stakeholders on the availability of new normative products, based on country priorities and tailored to specified needs.
- Integrate monitoring, evaluation and learning of normative products implementation and uptake as part of WHO corporate monitoring system of CSPs.

Recommendation 5: Resources in line with planned activities and expected results should be made available at country level to support the adoption and implementation of normative products, with sufficient flexibility for WCO to align resources to priority areas.

Specifics on Recommendation 5

- Ensure that there are plans to resource the implementation and monitoring of NPs.
- Where it is not feasible for WHO to provide all the support needed for implementation, WHO may support the government to obtain funding from others.
- Increase the share of resources dedicated to developing country capacity wherever flexible funding is available.
- Ensure that sufficient technical capacity is available in country office in priority areas, including through leveraging existing human resources policies and developing incentives to strengthen HR capacity at country level.
- Ensure that WCO can use resources more flexibly to support country capacity.

Management Response: Key Actions

- Strengthen human resource capacity of country and regional offices on implementation research, evidence-based adaptation and monitoring and evaluation approaches.
- Include in WHO Programme Budget and country office workplans, dedicated resource for technical support on systematic adaptation and implementation of WHO normative products.
- Provide resource mobilization support to WCOs focusing on priorities and resources needed to implement the latest WHO recommendations on health priorities of that country.

Recommendation 6: Evaluation of WHO's normative work's implementation and contribution at country level should be strengthened

Specifics on Recommendation 6

- Review WHO's NP theory of change to outline WHO's contribution at country level in supporting the use and impact of normative guidance in different contexts.
- Streamline the monitoring of NP use and impact at country level into WHO's corporate output and outcome level monitoring.
- Conduct more country-level evaluations. This could be done through standard evaluations being integrated in CCS cycles; and country case studies.
- Ensure results are used for learning and informing both country level and global normative work.

Management Response: Key Actions

- Develop and integrate relevant KPIs in the relevant outcomes and outputs of the GPW14 results framework, and future corporate evaluations, on WHO normative work implementation.
- Conduct use and impact reviews for identified normative products in selected countries and share findings and lessons learned in a biennial report.
- Develop a cross-departmental and 3-level monitoring and evaluation leadership group with focus on the contribution of normative products implementation to outcome and impact.

Results achieved at country level

Recommendation 7: Ensure that gender equality and health equity and human rights (GER) considerations are integrated in WHO's normative work.

Specifics on Recommendation 7

- Ensure that WHO's NP theory of change outlines how it intends to contribute to GER
- Ensure that normative products spell out how to implement the recommendations in a way that promotes GER
- Ensure that GER considerations are included systematically in the monitoring of the contribution normative products make to outcomes and impact, with clear guidance on disaggregated data collection and analysis
- Develop all WCO staff's awareness and capacity on GER.

Management Response: Key Actions

- Strengthen integration of gender equality, human rights and health equity as essential criteria for the development of normative products and QA, including full implementation of the SAGER guidelines.
- Provide specific guidance on gender equality, human rights and health equity considerations in WHO handbooks for normative product development.
- Build capacity of and ensure the engagement of the global GRE network to support uptake of normative products by Member States

Results achieved at country level

Next steps

15 June

Last round of comments

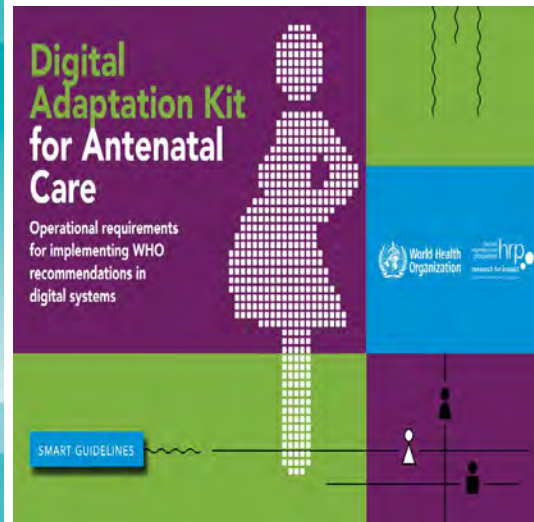
30 June 2024

Preparation of the specific actions for each recommendation, with status update (completed, in progress, planned), with timeline for implementation and responsible office for follow up and reporting

July 2024

Final MR published and disseminated

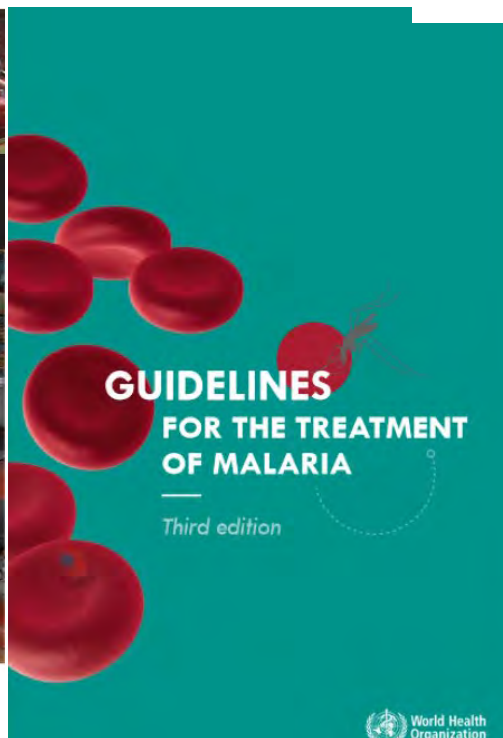
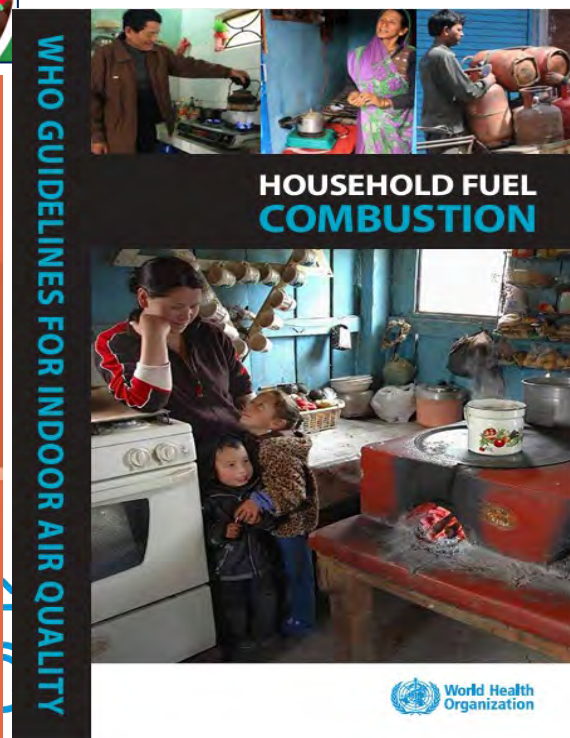
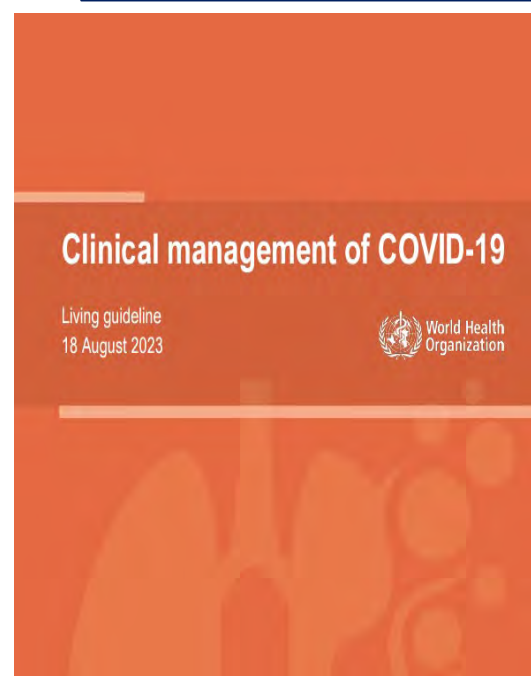
Our goal is to improve the uptake and optimize impact of WHO Normative Products



The selection and use of essential medicines 2023
Web Annex A

World Health Organization
Model List of Essential Medicines

23rd list
(2023)



Thank you!!

Remarks on the evaluation of WHO's normative function at country level

Dr Arash Rashidian, Director, Science, Information and
Dissemination, Eastern Mediterranean Region

Dr Theopista KABUTENI, a.i WHO Representative, Rwanda



Facilitated discussion and wrap-up

Facilitator: Mr Riccardo Polastro, Chief Evaluation Officer, WHO Evaluation Office



Theme 2: Evaluations of WHO contribution at country level

Synthesis of Findings from Djibouti, Iraq and Tunisia and plans for 2024-2025



Dr Rana Hajjeh

**Director,
Programme
Management,
WHO Eastern
mediterranean
region**



Why Strategic Evaluation?

**Evaluation of WHO's Contribution at Country
Level in EMRO**

Success factors and lessons learnt

Looking forward

Synthesis of Findings from Djibouti, Iraq and Tunisia and plans for 2024-2025

Mr Amr El-Tarek – Regional Adviser, Planning, Budget, Monitoring & Evaluation

Dr Calistus Wanjala – Regional Evaluation Officer

Evaluation reports and related documents are available:

<https://www.who.int/about/evaluation/corporate-evaluations/office-specific-evaluations>

Outline

Purpose & scope

Approach & Key findings

Evaluation uses and next steps

Purpose & scope

Asses WHO's contribution in each country to enhance: Accountability & organizational learning

Three separate independent evaluations (DJI, IRQ, TUN)

Timeframe: GPW13 2019–2023

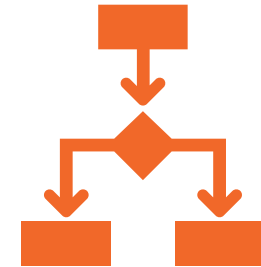
Approach & Methods



Theory-based, Participatory,
Appreciative inquiry, Forward-
looking

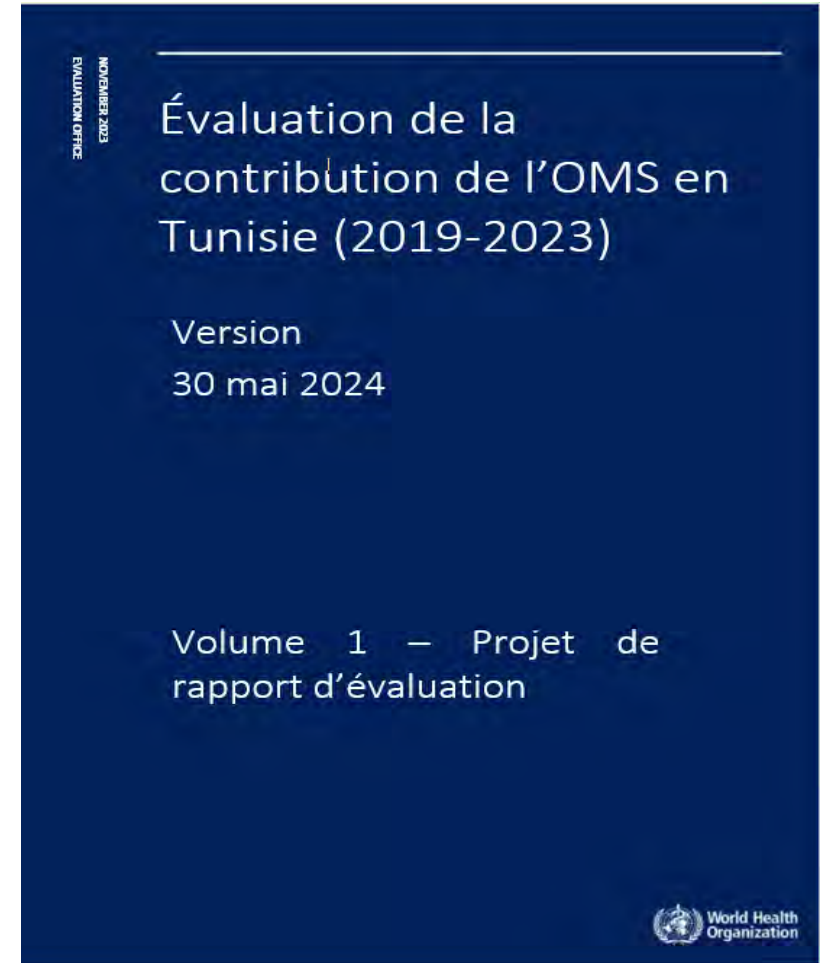
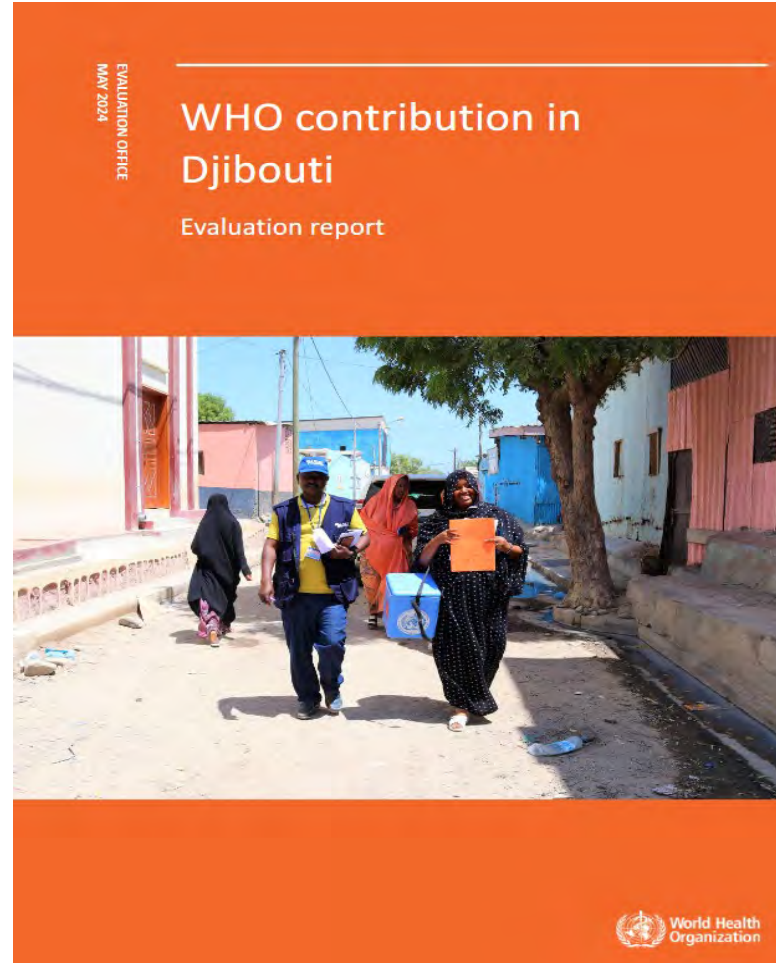


Mixed methods: Document
reviews, KII, GD, written
submissions; country visit



Fact check/validation,
Triangulation & co-creation
workshops

Key Findings



Access the published reports here: [Iraq](#), [Djibouti](#)

Key Findings: Strategic



Strong relevance to country health needs, alignment with national policies and UNCT objectives



Lack of CCS or formalized vision agreed with government



RBM gaps affected the ability to measure contribution to health goals



GEHR and SDH approaches require strengthening



Whole-of-society, whole-of-government multisectoral approach beyond traditional counterparts need strengthening

Key Findings: Programmatic

Many achievements across GPW 13 pillars

Excellent Covid-19 emergency response and lessons

Supported Hard-to-reach populations, collaboration with national partners, but needs 'responsible disengagement'

Verticalized/disease-specific programmes limit strategic approach/collaboration vs cross-cutting health systems/UHC

Strengthen support to MoHs leadership, planning, coordination

Health sector leadership within UNCT, and inter-agency Cluster for humanitarian actions to be strengthened

Key Findings: Operational

Functional review implementation alongside evaluation recommendations

New HR and funding configurations needed

Good support from HQ/EMRO when needed; streamlining of RO support needed

Added value: Technical expertise, tools adaptation to national context, motivation, networking

Limited role clarity, response times, administrative procedures, and misalignment with national context

Evaluation Use & Next Steps

Dissemination:
country/regional
workshops; publication

WRs: Management
response (MR) /
Implementation tracking

Implementing proposed
actions: develop CCS,
improve GPW14 strategic
planning and RBM capacity,
pilot joint assessment

**Dr KI-ZERBO,
Georges Alfred**

**WHO
Representative
and Head of
Mission in Iraq**



Iraq Country Evaluation Experience

Reflection on Key Recommendations

Management Response and Next Steps

Evaluation reports of WHO's contribution at country level and communication materials can be accessed from here:

<https://www.who.int/about/evaluation/corporate-evaluations/office-specific-evaluations>



Facilitated discussion and wrap-up

Facilitator: Mr Riccardo Polastro, Chief Evaluation Officer, WHO Evaluation Office

