WHO health inequality monitoring at global and national levels

By Ahmad Reza Hosseinpoor
WHO health inequality monitoring at global and national levels

Ahmad Reza Hosseinpooor

Information, Evidence and Research Department (IER) &
Gender, Equity and Human Rights Team (GER) 

World Health Organization
Equity is at the heart of the Sustainable Development Agenda

- In pledging to achieve the SDGs, countries have committed to leave no one behind.
  - SDG 10 Reduce inequality within and among countries
  - SDG 5 Achieve gender equality
  - SDG 3 Ensure healthy lives and promote well-being for all at all ages
  - SDG Target 3.8 Achieve universal health coverage
  - SDG Target 17.18 Enhance capacity-building support to developing countries to increase the availability of disaggregated data
Health inequality monitoring is essential to achieve health equity

Select health indicators & inequality dimensions

Collect data

Analyse data

Report and use results

Global monitoring

National monitoring
Health inequality monitoring: Challenges

- Indicators/dimensions selection
  - What and how many indicators/dimensions?
  - Complexity of defining the disadvantaged population

Metrics to Define Economic Status (as an example)

- Individual/household income
- Household expenditure
- Household assets
- Area-level measures e.g. deprivation index
Health inequality monitoring: Challenges

- Indicators/dimensions selection
  - What and how many indicators/dimensions?
  - Complexity of defining the disadvantaged population

- Data collection
  - Lacking data in many countries

- Data sources must contain both health indicators & inequality dimensions
- Possibility to link data sources must exist
## Data availability for SDG3 indicators – WHS2016

<table>
<thead>
<tr>
<th>Indicator topic</th>
<th>Country data availability</th>
<th>Disaggregation</th>
<th>Comparable estimates</th>
<th>Source estimates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternal mortality</td>
<td>Good</td>
<td>Poor</td>
<td>Annual</td>
<td>UN MMEIG</td>
</tr>
<tr>
<td>Skilled birth attendance</td>
<td>Good</td>
<td>Fair</td>
<td>In preparation</td>
<td>UNICEF, WHO</td>
</tr>
<tr>
<td>Under-five mortality rate</td>
<td>Good</td>
<td>Fair</td>
<td>Annual</td>
<td>UN IGME</td>
</tr>
<tr>
<td>Neonatal mortality rate</td>
<td>Good</td>
<td>Fair</td>
<td>Annual</td>
<td>UN IGME</td>
</tr>
<tr>
<td>HIV incidence</td>
<td>Fair</td>
<td>Fair</td>
<td>Annual</td>
<td>UNAIDS, WHO</td>
</tr>
<tr>
<td>Tuberculosis incidence</td>
<td>Fair</td>
<td>Poor</td>
<td>Annual</td>
<td>WHO</td>
</tr>
<tr>
<td>Malaria incidence</td>
<td>Fair</td>
<td>Fair</td>
<td>Annual</td>
<td>WHO</td>
</tr>
<tr>
<td>Hepatitis B incidence</td>
<td>Poor</td>
<td>Poor</td>
<td>In preparation</td>
<td>WHO</td>
</tr>
<tr>
<td>People requiring interventions against NTDs</td>
<td>Good</td>
<td>Poor</td>
<td>Annual</td>
<td>WHO</td>
</tr>
<tr>
<td>Mortality due to NCDs</td>
<td>Fair</td>
<td>Poor</td>
<td>Every 2–3 years</td>
<td>WHO</td>
</tr>
<tr>
<td>Suicide mortality rate</td>
<td>Fair</td>
<td>Poor</td>
<td>Every 2–3 years</td>
<td>WHO</td>
</tr>
<tr>
<td>Treatment substance use disorders</td>
<td>Poor</td>
<td>Poor</td>
<td>Not available</td>
<td>UNODC, WHO</td>
</tr>
<tr>
<td>Harmful use of alcohol</td>
<td>Good</td>
<td>Fair</td>
<td>Annual</td>
<td>WHO</td>
</tr>
<tr>
<td>Road traffic injury deaths</td>
<td>Good</td>
<td>Poor</td>
<td>Every 2–3 years</td>
<td>WHO</td>
</tr>
<tr>
<td>Family planning</td>
<td>Fair</td>
<td>Fair</td>
<td>Annual</td>
<td>UN Population Division</td>
</tr>
<tr>
<td>Adolescent birth rate</td>
<td>Good</td>
<td>Fair</td>
<td>Annual</td>
<td>UN Population Division</td>
</tr>
<tr>
<td>Coverage index UHC</td>
<td>Fair</td>
<td>Poor</td>
<td>In preparation</td>
<td>WHO, World Bank</td>
</tr>
<tr>
<td>Financial protection</td>
<td>Poor</td>
<td>Poor</td>
<td>In preparation</td>
<td>WHO, World Bank</td>
</tr>
<tr>
<td>Mortality due to air pollution</td>
<td>Fair</td>
<td>Poor</td>
<td>Every 2–3 years</td>
<td>WHO</td>
</tr>
<tr>
<td>Mortality due to WASH</td>
<td>Fair</td>
<td>Poor</td>
<td>Every 2–3 years</td>
<td>WHO</td>
</tr>
<tr>
<td>Mortality due unintentional poisoning</td>
<td>Fair</td>
<td>Poor</td>
<td>Every 2–3 years</td>
<td>WHO</td>
</tr>
<tr>
<td>Tobacco use</td>
<td>Good</td>
<td>Fair</td>
<td>Every 2–3 years</td>
<td>WHO</td>
</tr>
<tr>
<td>Access to medicines and vaccines</td>
<td>Poor</td>
<td>Poor</td>
<td>Not available</td>
<td>WHO</td>
</tr>
<tr>
<td>ODA for medical research</td>
<td>Good</td>
<td>Not applicable</td>
<td>In preparation</td>
<td>OECD, WHO</td>
</tr>
<tr>
<td>Health workers</td>
<td>Fair</td>
<td>Poor</td>
<td>Not available</td>
<td>WHO</td>
</tr>
<tr>
<td>IHR capacity and emergency preparedness</td>
<td>Good</td>
<td>Not applicable</td>
<td>Not applicable</td>
<td>WHO</td>
</tr>
</tbody>
</table>
Health inequality monitoring: Challenges

- Indicators/dimensions selection
  - What and how many indicators/dimensions?
  - Complexity of defining the disadvantaged population

- Data collection
  - Lacking data in many countries
  - Data quality and harmonization issues
Health inequality monitoring: **Challenges**

- **Indicators/dimensions selection**
  - What and how many indicators/dimensions?
  - Complexity of defining the disadvantaged population

- **Data collection**
  - Lacking data in many countries
  - Data quality and harmonization issues

- **Data analysis**
  - Lacking capacity to calculate disaggregated estimates and summary measures of inequality
Health inequality monitoring: Challenges

- Indicators/dimensions selection
  - What and how many indictors/dimensions?
  - Complexity of defining the disadvantaged population

- Data collection
  - Lacking data in many countries
  - Data quality and harmonization issues

- Data analysis
  - Lacking capacity to calculate disaggregated estimates and summary measures of inequality

- Reporting
  - Communicating complex and large amount of information to diverse audiences including policy makers
Handbook and eLearning module on health inequality monitoring
• Global database on disaggregated health data
• Interactive visualizations including country profiles
• Other resources/tools/publications
The Health Equity Assessment Toolkit (HEAT)

- Software to facilitate analysis, interpretation and reporting within-country inequalities
- Inequalities can be assessed using disaggregated data and 15 summary measures
- Available as an online application and as a standalone version for use offline
- The “Built-in Database Edition” uses data from the WHO Health Equity Monitor database
- The “Upload Database Edition” – under development - will allow users to upload and work with their own data
WHO health inequality monitoring - references

- WHO Health Equity Monitor:
  http://www.who.int/gho/health_equity/en/


- The Health Equity Assessment Toolkit (HEAT):
  http://www.who.int/gho/health_equity/assessment_toolkit/