

Equitap

“Equity in Asia-Pacific Health Systems” & APNHAN

Experience and lessons learned

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**International Consultation to Design a Collaborative Community
on Health Metrics and Evaluation**

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□ Asia-Pacific NHA Network

- Network of NHA Experts involved in producing official NHA estimates at the national level
- Country expert-led initiative
 - Started 1998 by experts from 8 countries with a mutual interest in regional collaboration and peer-to-peer information sharing
 - Emphasis on knowledge sharing not training, with approach that has evolved to resemble OECD practices
- 2008:
 - Dual membership strategy: (1) Technical experts involved in production, & (2) Official agencies who mandate NHA
 - 25 territories: Bangladesh, India ...China, Mongolia, Hong Kong, Taiwan, Japan, Korea, Australia ... Solomon Islands, Tonga

APNHAN Key Activities

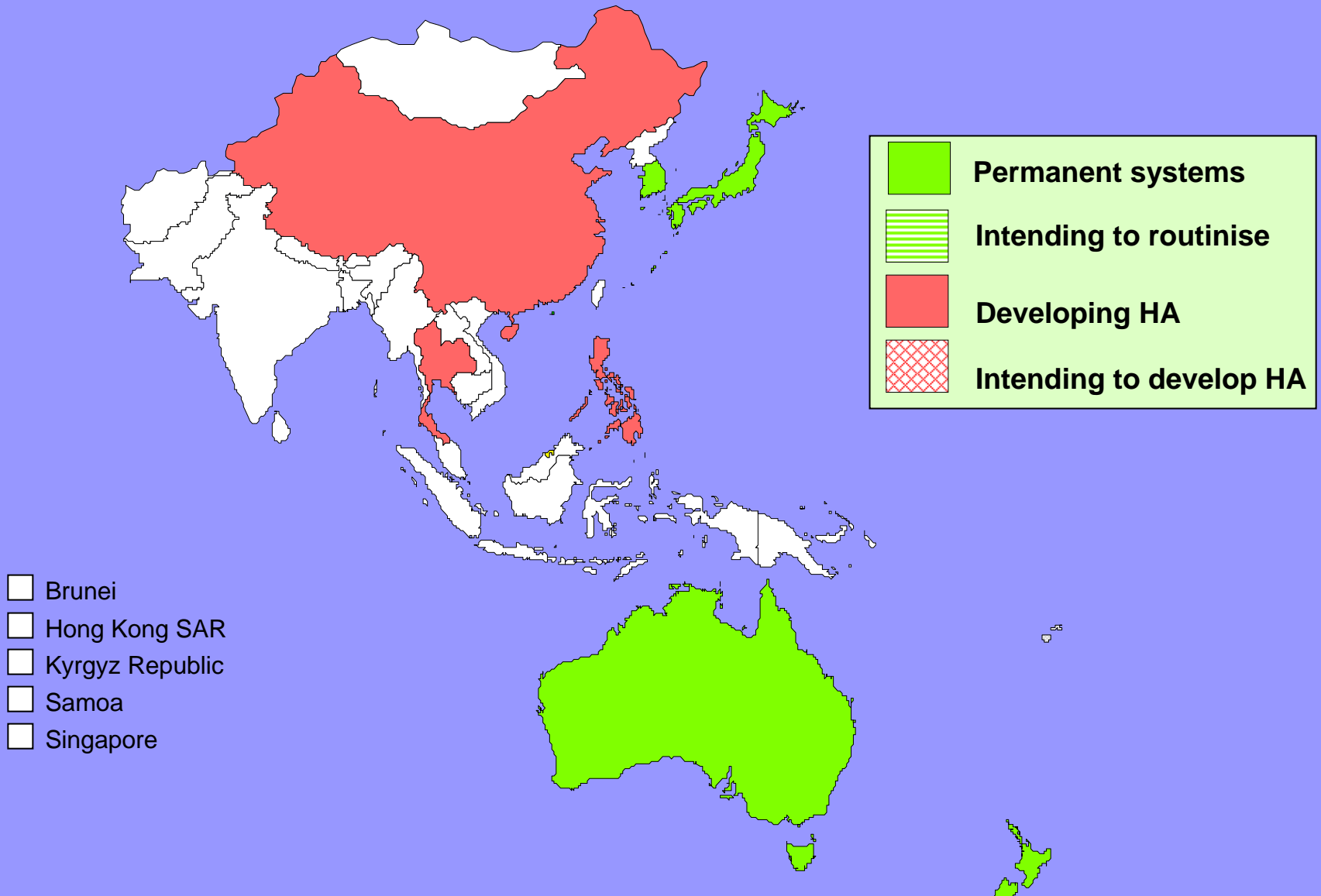
Collaborative projects

- Regional HA data collection complementing WHO
- *New - Improving quality of OOP measurements*
- *New - Asia-Pacific Health Data modeled on OECD Health Data*
- **Equitap**

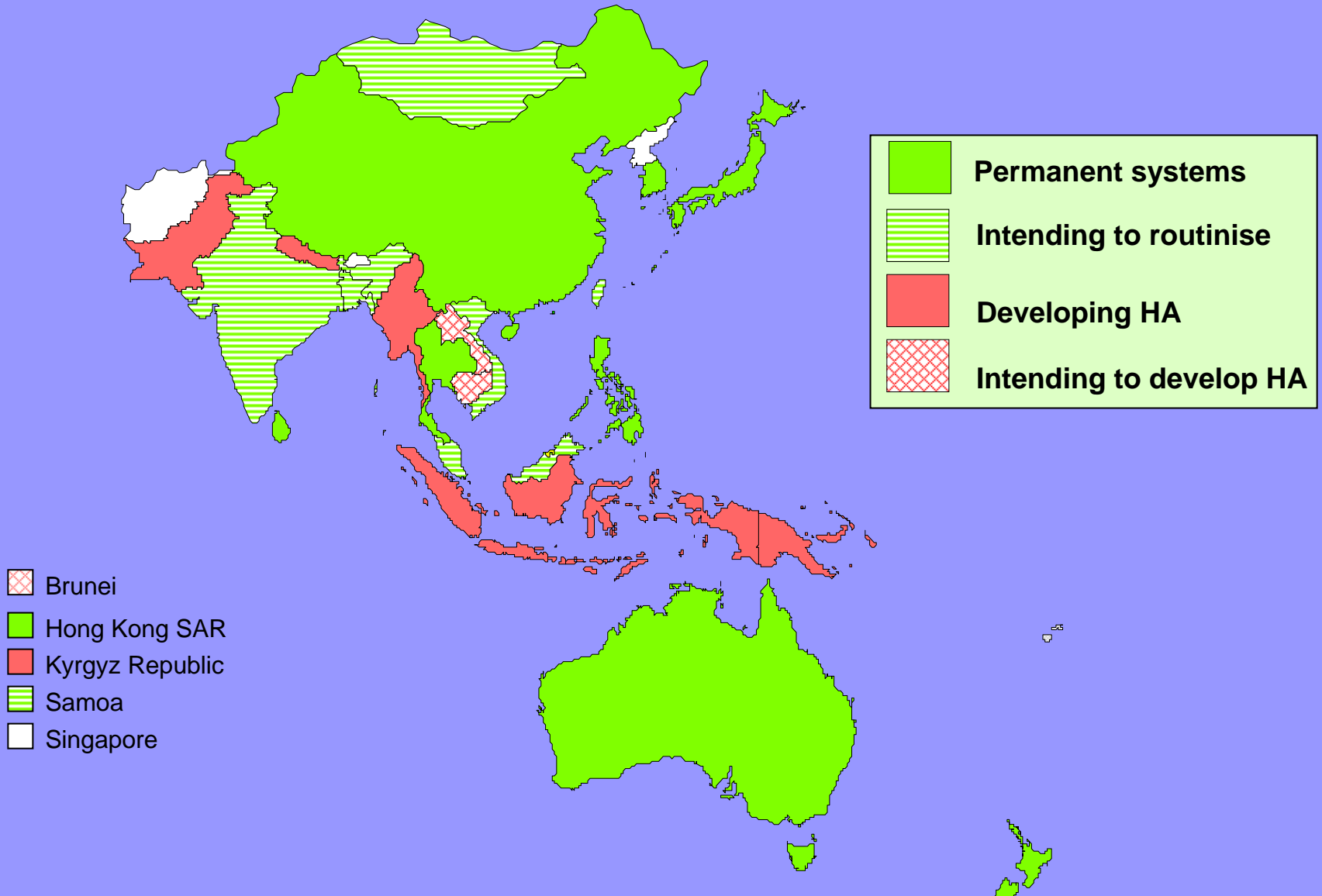
Support for adoption of standards

- Focal point for OECD dialogue on development and testing of System of Health Accounts (SHA)
- Largest uptake of SHA standards outside OECD

Health Accounts Status in Asia-Pacific 1995



Health Accounts Status in Asia-Pacific 2008



Equitap origins

- Started as APNHAN project, but transitioned to separate network
- Motivations
 - Many APNHAN partners linked to national policy processes - Common interest in equity issues
 - Model of earlier cooperation in comparative study in Bangladesh, Nepal, Sri Lanka
 - Example of ECuity network in Europe

Equitap goals

- Strengthen national institutional capacity for health equity measurement and research
- Undertake a sustained comparative assessment of national health systems
- Promote regional partnership
- Promote improved equity in health in Asia-Pacific

Phase 1 2000-2006

- Funding
 - EU INCO-DEV grant supplemented by other national and regional funding
- Membership
 - Bangladesh, Nepal, India, Sri Lanka, Thailand, Malaysia, Philippines, Indonesia, China, Hong Kong SAR, Kyrgyz, Mongolia, Taiwan, Korea, Japan
 - *Invited European collaborators: Erasmus University, London School of Economics*
- Activities
 - Development of standard methods
 - Building of technical capacities in partner teams
 - Comparative analyses of health equity using standardized protocols

Phase 2 2007-2011

- Expansion of network to Mekong and South Pacific countries
 - Cambodia, Laos, Vietnam
 - Solomon Islands
 - Papua New Guinea, Fiji, Samoa, Tonga?
- Funding from AusAID and IDRC research grants
- New analytic domains
 - Health outcomes
 - MNCH inequities
- New external collaborators
 - AIHW, Australia

QuickTime™ and a
TIFF (Uncompressed) decompressor
are needed to see this picture.



Equitap - original



Equitap - new

Activities

- Standardized comparative analyses
 - Profiles of health financing using OECD SHA
 - Distribution of payments for health care, including tax progressivity
 - Targeting of government health spending - BIA
 - Catastrophic & Impoverishing impacts
 - Equal treatment for equal need (ETEN)
 - Views of public and policy-makers, including polling
 - Health outcomes including mortality
- Dissemination
 - Website, Working papers, peer-reviewed journals, books
 - Policy dialogues

Use of Equitap Research

- National
 - Used significantly in several territories for ongoing policy reforms and evaluation, E.g., Indonesia, Thailand, etc
- Scientific audiences
 - Probably the definitive source of data on health financing/delivery inequalities in Asia
 - Technical guidelines published by World Bank in its new Health Equity Methods book
- International partners
 - Results used extensively by WHO, World Bank, ESCAP, ILO, High Level Asian MDG meetings, etc
 - DFID - Evidence used in committing UK DFID to support abolition of user fees at global level

How we have worked

- Development of standard protocols for analysis
 - Stress on scientific standards and replicability
 - Using existing household survey data
- Stress on analysis by country teams
 - Support for teams through direct training support, mentoring, email consultations, help clinics at network meetings
 - Own-analysis prioritized higher than publication
- Coordination via website, list-serve, technical protocols
- Choice of partners
 - Must be country-based with long-term interest in equity research
 - Must have links to policy-makers and ability to translate research

Lessons learned 1

- Capacity building critical to long-term sustainability of work
 - Starts with appropriate choice of partners
 - Continues with allowing space for ownership and learning
 - Lack of national institutions for HSPR key constraint
- Success depends on shared motivations and values
 - Need to know when not to pursue collaboration

Lessons learned 2

- Successful partnerships require:
 - Trust and mutual respect
 - Willingness of some partners to act as drivers
 - Appreciation of partnership dynamics
 - Time to build social capital
- Importance of managing balance between network independence and external relationships with official agencies
 - Technical independence brings advantages, but also challenges

Lessons learned 3

- Policy linkages
 - Effective relationships between research teams and national policy makers vital to have local impact and to frame results
 - Choice of institutional partner matters
- Production of high quality, comparable results generates local investment
 - Most Equitap partners have generated substantial follow-up domestic buy-in
- Measurement of system inequalities in turn generating new agenda to explain systematic inequalities which requires local knowledge