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Report of the Intersecretariat Working Group on Health Statistics

Note by the Secretary-General

In accordance with a request of the Statistical Commission at its forty-first session (see E/2010/24, chap. I.A), the Secretary-General has the honour to transmit the report of the Intersecretariat Working Group on Health Statistics, which is presented to the Commission for information. The Commission is requested to take note of the report.

* E/CN.3/2011/1.





Report of the Intersecretariat Working Group on Health Statistics

1. At the fortieth session of the Statistical Commission, held in February 2009, the Intersecretariat Working Group on Health Statistics presented a draft Framework for health statistics. The Commission expressed appreciation for the efforts made by the Working Group in developing the Framework and encouraged the Group to finalize it. The Commission recognized the complexity of developing such a framework and urged the Working Group to ensure that the Framework (a) is easy to use and identifies areas of priority; (b) contributes to the enhanced comparability of health statistics and indicators that should be internationally comparable; (c) is of practical utility; (d) is synchronized with international standards; (e) is developed in coordination with all relevant stakeholders; and (f) takes into account the different circumstances prevailing in different countries.¹

2. The Framework outlines the content of health statistics and the relationship between content and the most common sources of health data. Representatives of the following countries were involved in its development: Australia, Brazil, Canada, Norway, the Philippines, South Africa and the United States of America. The Framework was developed in response to the lack of core health statistics for use by countries and for cross-national comparisons. It will facilitate greater coordination between the national statistical authorities and ministries of health. The Framework will also provide a mechanism whereby the funding provided by international agencies and other donors that supports a significant amount of health data collection can be directed towards providing health information for use at the country and international levels. The lack of coordination between ministries and national statistical offices as well as the importance of donors in the process of funding data collection are particularly significant in the area of health statistics. A proper framework would also improve the quality of data collection, analysis and dissemination as well as foster the development of statistical capacity at the country level.

3. The Framework provides a structure for identifying the kind of information that should be collected as well as data gaps and for determining where international standards are needed so as to support the collection of high-quality information. Specifically, the Framework clarifies the content of health statistics; reflects the nature of relationships between and within content areas; makes it possible to identify an overall and coherent data-collection system that would provide information on a range of topics, so that piecemeal or silo statistical systems can be eliminated; and facilitates the identification of areas where innovative approaches to data collection are needed.

4. Although it has not been possible for the Intersecretariat Working Group on Health Statistics to meet as a group, an article describing the Framework has been submitted for publication in a special issue of the *Journal of the International Association of Official Statistics* on health statistics.

5. Work on the Framework itself has progressed slowly, but several members of the Working Group have been involved in efforts by related groups that will provide input into the Framework. It should be noted that the Washington Group on

¹ See E/2009/24, chap. I.B, decision 40/107.

Disability Statistics and the Budapest Initiative on Measuring Health Status recently finalized a core question set for the measurement of functional status across a range of domains. That work will have a direct impact on the further development of the Framework.

6. Membership in the Intersecretariat Working Group on Health Statistics is open to all countries and international organizations with an interest in the topic and the willingness to devote time to solving long-standing problems. It is essential that membership of the Working Group be balanced in terms of geographic distribution and the level of development of statistical systems. In addition, several members of the Working Group have retired. While some countries have identified replacements for them, others have not. It will be key in the coming year to confirm the continuing participation of current members and to identify new members, not only from countries that have participated in the past but also from any other countries that would like to participate. Interested countries should contact the chair of the Intersecretariat Working Group on Health Statistics² or the United Nations Statistics Division.³ Over the next several years, the work of the Group will be greatly facilitated by a limited number of face-to-face meetings. Some funding will be needed to offset the travel costs of certain participants.

7. The goal of the Intersecretariat Working Group on Health Statistics is to finalize the Framework. In addition, the Working Group will provide a mechanism that will facilitate the institutionalization of health statistics by acting as a link between the statistical system and organizations interested in health and health data, particularly ministries of health, and the World Health Organization and other United Nations agencies. Rather than duplicate the work done in the area of health statistics by other organizations, the Working Group can suggest new initiatives when necessary and could act to vet proposals made by other groups. The Working Group promotes broader accountability, given that country members represent their national statistical authorities and the Working Group reports to the United Nations Statistical Commission.

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