

**The Equity Gauge:  
An Approach to Monitoring Equity in Health and Health Care in Developing  
Countries**

**Report of a Meeting held in South Africa, August 17<sup>th</sup> to 20<sup>th</sup>**

*An Equity Gauge is an approach to promoting equity which includes monitoring of key indicators, coupled with advocacy and community participation to ensure that information is acted upon. In August 2000 about 70 people from twenty countries came together in South Africa for a working meeting. Fourteen “Equity Gauge” projects made presentations, highlighting their main areas of focus, key stakeholder involvement and major activities. The foci of the Gauges represented at the meeting can be broadly grouped as follows: three have a city-wide focus, two an emphasis on community involvement, two an emphasis on resource allocation, and the remaining six are national survey related. A technical advisory team, providing expertise in measurement and data analysis, advocacy, and community participation, offered suggestions as to how the various Gauges could be strengthened. As a result of the discussions which took place during the meeting greater clarity on the essential components of an “Equity Gauge” has been achieved. Planning has now begun on developing a Global Equity Gauge Alliance which will promote equity by, among other things, providing support and technical expertise to current and emerging gauges.*

## **Background**

### *Global Health Equity Initiative (GHEI)*

The Global Health Equity Initiative (GHEI), started by a small group of researchers in 1996 has evolved into a network linking over 100 researchers from more than 15 countries who are unified by their concern over growing inequities in health within countries. Funded by the Rockefeller Foundation and the Swedish International Development Authority (Sida), the GHEI took on the following goals:

- to articulate the concepts and values underlying equity in health;
- to develop measures and tools for health research and policy to help analyze equity and inequity in health;
- to encourage empirical research on health inequities within countries in the developing world;
- to establish a scientific foundation for proactive advocacy, policies and programmes; and
- to stimulate action to reduce inequities in health at all levels of society, by providing decision-makers with knowledge and concrete suggestions for change.

### *The Puyuhuapi Measurement meeting, Chile*

The GHEI has evolved from a research-focused initiative to an action-based programme (called Health Equity Frontiers) aimed at policy-oriented monitoring and remediation of inequities in health. Under the auspices of this programme a group of practitioners and technical experts met in Chile in November 1999. The vision emanating from that meeting was that:

*“By the year 2015 every country should have an integrated system for monitoring health inequities that informs, monitors and evaluates health and other socio-economic policies. The systems should be responsive to the national or local contexts in terms of priority indicators to be monitored and strengthened by access to a common global fund of knowledge and technical expertise.”*

### *The Kwa Maritane Meeting, South Africa*

Following the Chile meeting the Health Systems Trust was asked to host a meeting with the aim of establishing health equity monitoring initiatives in other countries. A call for letters of intent was widely circulated. 30 letters of intent were received from 28 countries. An international advisory group, comprising technical experts in community action, advocacy and health monitoring, reviewed submissions. A total of 13 countries were asked to develop full proposals. These proposals were presented to the meeting by a two or three person team comprising representation from the project stakeholders. Individuals from a further 8 projects were invited to participate in the meeting.

The objectives of the meeting were to:

- Exchange ideas and experiences amongst equity monitoring initiatives;
- Strengthen participants' expertise in monitoring equity;
- Lay the foundations for country monitoring activities via three working groups-technical, advocacy and policy;
- Identify rationale and logistics for longer-term collaboration between the national initiatives.

## **Conceptual Underpinning of the Meeting**

### *What is Equity?*

Equity is essentially about fairness, and implies that the most vulnerable and needy groups within a society require access to greater resources than those communities that are more robust. In relation to health, such an approach is intended to improve the health of the most vulnerable at a faster rate than those whose health status is “better”, thereby reducing the gap.

### *What Constitutes an Equity Gauge?*

An Equity Gauge is above all a means of tracking gaps in health status at national or sub-national levels. A gauge is centered around a component which is about measuring and monitoring a set of agreed upon indicators. However for such a tool to be effective in promoting equity, a number of other components are required to ensure that the information is used. Five core elements of an equity gauge were identified. These include:

- Fair distribution as a fundamental organizing principle of the work
- Key health systems' stakeholders be involved in the development and implementation of the project
- Community ownership is integral to the gauge
- The technical component, with regard to both the scope of the gauge and its measures, is valid, reliable and sustainable
- The work informs decision-making in a way that is timely, user friendly, and accessible, and takes cognisance of current levels of awareness and demand within countries.

## **The South African Equity Gauge Project**

The South African Equity Gauge Project (EGP) provided the inspiration for the meeting. This on-going project, is a partnership between the Health Systems Trust, (an NGO), and legislators from both national and provincial levels. The project was developed during 1998 following a series of meetings which brought together South African legislators and technical experts from South African and internationally.. Funded by the Kaiser Family Foundation and the Rockefeller Foundation, the project commenced in 1999. The EGP aims to promote equity in health and health care through measuring and monitoring a series of key equity indicators and disseminating this information. Data on indicators is drawn from routine surveys and commissioned research. Activities of the project to date have included publications, workshops, site visits, and media launches. In keeping with the project's aim of empowering legislators, emphasis is placed upon ensuring that technical information is provided in a usable and accessible format, and wherever possible linked to practical experience, thereby encouraging maximum impact on policy development and implementation.

## The Gauges

The 14 Gauges which were presented at this meeting were diverse in terms of focus and approach. There were several city-wide gauges, a few which focused primarily on resource allocation, a number which were centered around national survey-related data and a couple which planned for substantial community involvement. The table below summarises the gauges presented to the meeting with respect to the key focus, stakeholder involvement, indicators to be monitored and project activities.

### City-wide Gauges

	Stakeholders	Indicators	Project Activities
Cape Town	Academics, "Unicity" and provincial Department of Health, Non Governmental Organisations, Community Based organisations and Community Health Committees	Health need, health resources, quality of care	HIV used as a tracer condition to identify discrepancies between health needs and distribution of health care resources as well as access to health care
Ecuador	ALDES, Academics, Municipality, Indigenous organisations	Social macro-determinants, social participation, health status	Creating a new municipality-based monitoring system for monitoring social and health inequalities particularly gender and ethnic disparities.
Kenya	APHRC/PC, NCPD, Nairobi City Council	Health status, quality of care	Analysis of District Health System and Nairobi cross sectional survey, production of pamphlets, wall charts etc, workshops for parliamentarians, consensus building seminar and donor consultative meeting

### Gauges Focussing on Resource Allocation

Thailand	Academics, Health System Research Institute, Provincial Department of Health, Health Care Reform Project	Health status indicators, service utilization indicators. Resource allocation indicators	Analysis of secondary national data sets; commissioning of primary research via small grants scheme; comparison with benchmarks of fairness; dissemination via a national workshop and the media
Zimbabwe	Training And Research SC, Ministries of Health and Finance, Parliamentary Budget and Health Committees, Local Authority Associations, health providers and civic groups	Distribution of resources (finance, personnel, drugs), health status, health infrastructure	Stakeholder steering committee; review and analysis of budget data involving public participation, benchmark setting, capacity building, networking, dissemination via reports, advocacy meetings, workshops and site visits

### Gauges Focussing on Community Involvement

Malawi	Ministry of Health, Christian Health Assoc. Non Governmental Organisations, Human Rights Organisations	Access to and utilization of health services, Distribution of personnel, quality assurance	Community participation in needs assessment including story-telling at community level to elucidate needs and concerns
Philippines	Social Weather Stations, Non Governmental Organisations, Bureau of Health, Department of Health	Traditional/Administrative health data, non-traditional indicators to be designed by Social Weather Stations	Gathering secondary data on health inequities; undertake primary national research; sample province wide surveys; Participatory Research Appraisal and focus groups to obtain local level data; develop health policy recommendations

## National /Survey Related Gauges

	Stakeholders	Indicators	Project Activities
Bangladesh	ICDDR,B: Centre for Health and Population Research, Bangladesh Rural Advance Committee, Bangladesh Institute of Development Studies and Bureau of Statistics	Health status, access to healthcare, health seeking behaviour, expenditure on healthcare, socioeconomic status	Incorporation of equity into existing surveys; establishment of a new equity monitoring system; dissemination of findings; capacity development to carry out equity research
Chile	National Committee for a Better Health, Ministry of Planning, National Institute of Statistics, Academics	Comparison of relative and absolute differences in health status, proximate and health system determinants by income and educational level quintile	Enhancement of existing national survey, analysis of routine data, inventory of policy levers, dissemination via discussions and workshops with government and Non Governmental organisations.
China	Ministry of Health, Centre for Health Statistics and Information, Academics	Socioeconomic status, health status, access to, and perceived quality and distribution of healthcare, social capital	Creation of an equity monitoring Newsletter Development of a National Survey capacity for monitoring equity in health and health care
Cuba	Academics, Ministry of Health, Provincial and municipal Department of Health, community organisations	Disparities in distribution of health and health determinants	Routine data analysis; municipality level monitoring; quarterly dissemination through workshops and mass media
South Africa	National and Provincial Legislators, Local Councillors, Non Governmental Organisations, Academics	Private versus public sector; health status; financing; access; quality of care; race-inequalities; rural/urban inequity	Routine data analysis; commissioned surveys; site visits; workshops; publications; mass media; informal liaison and support of parliamentary committees
Uganda	Ministries of Health, Finance, Local Government, Gender, and Water, Non Governmental Organisations	Health status, quality of care, health financing, access to care	District and national level monitoring; workshops with community involvement; site visits to assess compliance with guidelines and standards
Zambia	Parliament, House of Chiefs, Non Governmental Organisations, Churches, Medical Council of Zambia, Women for Change,	Health Status, Health Financing, in the Public Sector, Access, Quality of care, Socio-economic status, gender inequity	Routine data analysis, commissioned research, publications, workshops

All the proposed gauges presented at the meeting anticipated a combination of activities including gathering of technical data accompanied by information dissemination. Depending on their specific needs some proposals placed greater emphasis upon the technical data, while others gave more weight to stakeholder participation and effective information dissemination.

## **Issues and challenges**

Discussions on technical, advocacy, and community participation aspects of the proposals led to the identification of a number of common issues and potential guidelines for equity gauge development.

### *Technical Methodology*

- The gauges need to have a well defined purpose with a focus on a small number of clearly identified indicators arrived at by a consultative process involving all stakeholders
- Wherever possible gauges should utilize simpler measures that are methodologically valid, by making creative use of existing data-sets, experience and expertise rather than using more sophisticated constructs or collecting new data.
- Attention needs to be given to the use of participative methodologies and the challenge of using non-traditional indicators
- In order to better inform policy, information from the gauges needs to be of high quality with particular attention given to methodological concerns regarding causal inferences, confounding and bias in drawing valid conclusions at international, national and local levels.

### *Advocacy*

- Great importance is attached to understanding the “political space” in which the equity gauge is to be created and used, as well as understanding the socio-political context.
- A stakeholder analysis needs to be undertaken with early involvement of all stakeholders at all stages of the planning, implementation and evaluation process. In understanding and organising stakeholders, financial conflict of interest between stakeholders should be avoided. There is also a need to explore different models, viewing stakeholders as convenors, and appreciating top down and bottom up approaches as complementary rather than as alternatives.
- The difficulty of engaging the disadvantaged from the beginning is acknowledged. Given the importance of having a proactive community, capacity building for action is likely to be an important part of a gauge
- Sustaining partnerships is essential and ensuring an effective participation process is likely to involve building alliances, institution building, and capacity building. All different kinds of networks can be used, not only formal meetings.
- The identification and compilation of the various policy levers, as well as a clear articulation of the corresponding actionable elements of information gained under the auspices of the gauge, will assist projects in achieving their goals.
- Findings need to be returned to the community via briefings and intersectoral meetings, as well as by providing access to data in a format that is easily understood. There is need for a careful socio-political calculus around the release of sensitive findings. Creative forms of dissemination are to be encouraged, for

example using drama, puppets, or scripts to convey messages as a means of advocacy.

- The tension in advocacy was acknowledged. It can benefit the already rich and powerful, mirroring the operation of an ‘inverse advocacy law’. The real challenge is to engage and involve the ‘haves’ in advocacy on behalf of the ‘have-nots’, and in highlighting the importance that reducing inequity benefits the whole of society:

**“If you come here to help me then you are wasting your time, but if you come here because your liberation is bound up in mine, then let us begin.”**

**-Lily Walkers, Australian Aboriginal Leader**

### *Community involvement*

- The link between the scope of a gauge and the extent of community participation that is possible was highlighted. The local and national political spaces will affect the possibilities for community involvement. It was recognised that Local level gauges have greater potential for community involvement, and can be combined with a community development approach to become community-led rather than just community-based.
- The need for resources to allow for community participation and development was recognized. The challenge of mobilising resources for community-led gauges includes exploring possibilities involving both donor and locally solicited funds. A further challenge lies in achieving sustainability and replicability.
- It was also recognised that communities can be place-based or interest-based, and that not all communities are geographically bounded and self-contained. Different communities can overlap and co-exist in the same geographical space.
- The challenge of collecting and presenting ‘elite’ information can support the achievement of equity if the process is inclusive. The easy accessibility, use and presentation of information to communities and the development of adequate community capacity to mobilise around this requires more attention.

## **The Way Forward – An Equity Gauge Network**

A number of equity gauges were presented at the meeting, each of which had specific plans for moving forward. To strengthen the impact and capacity of individual country gauges the need for an equity gauge network was mooted. Participants brainstormed a variety of issues that were critical for the development of a network. It was also recommended that the network needs to be organised to encompass specific focus areas or hubs which will serve to anchor the various gauges and to promote more focussed action directed at promoting equity. Further conceptualization is needed on these focus areas to incorporate the spectrum of gauge activities envisioned. The network is likely to be supported by a team of technical advisory experts focussing on the three areas of need identified at this meeting viz., technical methods, advocacy and community participation.

In order to refine the concept of an equity gauge network, consultants will be asked to develop a clear brief for the network. The activities to be included in the remit of the network, come out of suggestions from the meeting. These suggestions are grouped into four categories below.

### *Funding and Resource Mobilization,*

- Stimulating debate on, and marketing the concept of, an Equity Gauge and assisting gauges in accessing resources F&R

### *Technical Considerations*

- Information sharing including information generated from GHEI
- Developing and strengthening technical expertise in areas required by equity gauges, eg around linking household databases as well as facilitate sharing of information on lessons learnt
- Instituting of an award to countries for progress in achieving Health Equity, and a good practice award towards Equity Gauge development
- Stimulating improved skills and resources to assist (eg publications) for engaging communities
- Mapping of advocacy groups
- Assisting with political mapping – developing a typology of “political space” for Equity Gauges in countries
- Exploring the potential of standardising indicators internationally

### *Communications*

- Facilitating exchanges among gauges in geographic areas as well as internationally
- Creation of a web site

### *Accessing Key Partners*

- Mobilising international NGO’s to engage community groups local NGO’s in terms of Equity Gauges
- Explore mechanisms for linking the network to other networks and involving others in the work

- Extending WHO monitoring work
- Facilitating links with other relevant groups/movements eg. Amnesty International, Health for All

Over the next year HST with support from the Henry J Kaiser Family Foundation and the Rockefeller Foundation will work towards the further development of the Equity Gauge Network.

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