



THIRTY-FIRST WORLD HEALTH ASSEMBLY

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MEDIUM-TERM PROGRAMME FOR HEALTH MANPOWER DEVELOPMENT

Report by the Director-General

This document contains the medium-term (1978-1983) programme for health manpower development (MTP/HMD), which was prepared as requested by resolution WHA29.72 on the basis of guidelines given in that resolution as well as in resolutions WHA29.20 and WHA29.48, and which represents a complete reorientation towards increased social relevance and technical cooperation with countries. The document was discussed at the sixteenth, seventeenth and twenty-first meetings of the sixty-first session of the Executive Board. In compliance with resolution EB61.R27<sup>1</sup> it is submitted to the Thirty-first World Health Assembly with changes suggested by Board members at that session.

This document describes the new principles and aims which evolved in the reorientation process and which guided the development of MTP/HMD as well as its targets and content. It comments on the process that has been followed in its preparation, the functions it is expected to fulfil in the Organization's endeavours, the advantages seen and/or expected and the problems encountered. It then draws some conclusions.

The global MTP/HMD is annexed to this document. Annexes giving details of the regional programmes will be available in the meeting room for consultation, together with a separate programme for HMD research.

1. Introduction

1.1 This medium-term programme, for the period 1978-1983, is based on the Sixth General Programme of Work of the Organization and covers the same period. It is also based on the policy and long-term programme of health manpower development contained in document A29/15 presented to, and endorsed by, the Twenty-ninth World Health Assembly in 1976 by resolution WHA29.72. It translates the principles, policy and philosophy contained in those documents into an action programme and shows the operative actions to be undertaken by the Organization, in collaboration with Member States, to facilitate the attainment of the aims, objectives and targets stipulated, taking into account the priorities and complete programme reorientation as set forth in those documents and in the document on "Policy and strategy for the development of technical cooperation" endorsed by the Executive Board at its fifty-ninth session.<sup>2</sup>

<sup>1</sup> WHO Official Records, No. 244, 1978, p. 18.

<sup>2</sup> WHO Official Records, No. 238, 1977, pp. 181-209.

1.2 A collaborative effort between Member States and the different echelons of the Secretariat has led to the emergence of a single, coherent WHO programme, consisting of national, regional and global components; the contributions of the different echelons of the Organization in order to achieve agreed common targets can be seen clearly for the first time.

1.3 The programme reflects the principles, aims, objectives and priorities stipulated by the Twenty-ninth World Health Assembly. Thus its basic principle is that the Organization should collaborate with Member States, at their request, in satisfying the health needs of their entire populations through health services composed of teams of health personnel, on the principle that all health activities should be undertaken, at the most peripheral level of the health services as is practicable, by the workers most suitably trained to carry out these activities.

1.4 The main aim in the coming years should be to effect a radical change and reorientation in health manpower development that will make it relevant to present and foreseeable future community health needs. The change should result in a sound health manpower system that will plan, develop and manage/utilize efficiently the right "mix" of health personnel to man well-conceived health and other services, continuously monitor whether they are functioning properly, and adjust the planning and "production" system on the basis of such monitoring. It is understood that changes can only be carried out in the countries and by the countries themselves, WHO playing its constitutional role as directing and coordinating authority and functioning as an agent of change, stimulating thought and action, and promoting innovations, if necessary in the face of conventional wisdom.

1.5 The two main objectives of an integrated, coherent programme of health manpower development as defined by the Sixth General Programme of Work, each broken down into its detailed objectives, are:

(a) to promote the development of appropriate health personnel, to meet the needs of entire populations:

- to promote the planning for and training of the various types of health personnel composing "health teams", with the proper knowledge, skills and attitudes for the execution of national health plans and programmes, including personnel with appropriate levels of skills and the provision of primary health care, as well as environmental health personnel;
- to promote the integration of health manpower planning, production and utilization within the context of plans for national health and socioeconomic development, in collaboration with the general education system; and
- to promote optimum utilization and reduce undesirable migration of trained manpower.

(b) to promote the development and application of relevant processes for basic and continuing education:

- to promote curriculum development, planning, methodology and evaluation of basic and continuing educational processes for all categories of health personnel; and
- to promote the development of national teaching staff and educational technologists able to apply a systematic approach to educational processes.

1.6 The first priority for the Organization in health manpower development is to contribute to the solution of the health problems of the most seriously affected population groups by collaborating in the planning and implementation of the right solution. In addition to the priority given to the problems of developing countries, attention should also be given to the problems of developed countries, and it should be kept in mind that there are many intermediate degrees in a broad spectrum of development. Two other main priorities are:

- (a) to orient the development of all categories of health personnel towards the satisfaction of the health needs and demands of people and not towards professional interest;
- (b) to meet the health needs of the most deprived, particularly rural, communities, by means of personnel with the appropriate level of skills - first of all primary health care workers, and those responsible for their supervision within the framework of comprehensive national health services.

This means that, in addition to the emphasis laid on training of "classical" categories of health workers (physicians, nurses, etc.), a new, strong emphasis will be laid on the training and utilization of auxiliary and community health workers and their supervisors. This new emphasis derives from the realization that the mere training of more physicians and nurses, generally hospital- and disease-oriented, will not solve the health problems of developing countries in the foreseeable future. However, the number of physicians, nurses and other "classical" categories of health workers will also have to be increased. Their role and importance will increase, and their education must be properly geared to the progress of science and must be made relevant to community health needs and demands without its basic quality being reduced.

1.7 If targets are to be achieved, action will be required in each of the three main areas of the health manpower development process, namely: (a) health manpower planning; (b) manpower resources development (health manpower "production", education and training); and (c) health manpower management (administration), which should be integrated into a single process geared to the development of health services. The realization of this concept of integrated development of health services and health manpower is a precondition for the success of activities undertaken in any of the above areas. For this purpose, there is a need for a country-specific permanent mechanism for the functional integration of health services and manpower development that will foster a permanent dialogue, ensure efficient collaboration and coordination between the various governmental and nongovernmental departments, institutions and other bodies responsible for the different aspects of development of health services and health manpower, and bring them together for the purposes of planning, management, and decision-making in health services and manpower development.

## 2. Targets and activities

2.1 The 11 closely interdependent global targets reflect the regional targets which in their turn are based, wherever feasible, on country targets. These targets endeavour to express what Member countries will have achieved by the end of the six-year period (1978-1983) in cooperation with WHO, it being recognized that in the achievement of those targets WHO's collaboration will be just one promoting factor. Targets are quantified to the extent possible at country and regional level but quantification at global level was not possible. The targets are grouped in three programme areas, which are closely interrelated. Together they cover all the health manpower development objectives stated in the Sixth General Programme of Work and, being so closely interrelated, are meant to be attacked in an integrated manner. (The description of programme areas within the HMD major programme as well as global targets are described in pages 7-9 of document HMD/77.7 Rev.4: Global WHO Medium-Term Programme (MTP) for Health Manpower Development, annexed hereto.)

2.2 The global activities are summarized in tables which show year by year what the different elements of the WHO Secretariat will do, in cooperation with Member States, to facilitate the achievement of the targets. A certain number of global activities are defined for each global target and a table is established for each global activity. The activities in each case represent a logical sequence of actions which facilitate the achievement of the target concerned.

## 3. Advantages resulting from the development of a medium-term programme for health manpower development

3.1 For the first time, a serious attempt has been made to define targets which express what Member States intend to achieve by 1983 in cooperation with WHO. These targets are quantified

at country and regional level and at each level they include a built-in evaluation element in the form of parameters against which accomplishments can be assessed. The process itself has stimulated countries to think in the long-term and to define precise and quantified targets for themselves. The targets cover not only the education and training ("production") domain, but the whole health manpower development process (planning, "production" and management), in which relevance to health service needs and, through them, to the real health needs and demands of the people has been the prime consideration. They translate policy into measurable objectives, which include such sensitive political issues as the cooperation and coordination of the different sectors interested in health services and health manpower development. As they focus on the interrelationships between health services and health manpower development, they necessarily involve coordination in the planning processes of those responsible for training and of the authorities charged with development and functioning of health services. The targets reflect the view that all activities of the Organization should have a significant impact in health terms at country level relevant to the real health needs and demands of the country's population. This is, in fact, the gist of the reorientation process that underlines the preparation of MTP/HMD, i.e. increased social relevance as a component of technical cooperation at country level.

3.2 The preparation of the medium-term programmes encourages countries to think in terms of broad programmes rather than of individual projects.

3.3 Since the medium-term programme clarifies the approaches needed to meet specified country requirements, it should do much to increase the relevance of country requests for technical cooperation with WHO and other agencies to the real health needs and demands of their populations, while at the same time facilitating negotiations with donor agencies.

3.4 It is also expected that it will enhance the efficiency, effectiveness and productivity of this technical cooperation as the latter may now be geared towards the achievement of relevant targets clearly defined together with governments; this process ensures their commitment to the achievement of those targets. In the same sense, it is hoped that it will also facilitate technical cooperation among developing countries (TCDC).

3.5 It will serve not only as a planning but also as a management tool in the hands of the governing bodies (World Health Assembly, Executive Board, Regional Committees) and the Secretariat, whereby progress can be measured, problems in implementation identified and solutions to overcome them actively sought.

3.6 It will serve as a basis for biennial budgeting, thus making the latter an integral part of a medium-term programming process aimed at the achievement of long-term targets.

3.7 The programming process has already improved mutual understanding, collaboration and coordination among all elements of the Secretariat, and this is expected to increase during the implementation process.

3.8 The process of preparation of a medium-term programme necessarily leads to:

- greater precision of objectives both at country level and within the Organization;
- clarification of the unique mission that the Organization has in relation to the improvement of the health status of the population;
- assessment through continuous dialogue between countries and WHO of actions most urgently needed to meet the health services and manpower development requirements of Member States.

#### 4. Problems encountered

4.1 Programming is an iterative process, and it was recognized that, as consultations with Member States continued, more and new data would become available and, therefore, the medium-term programme for health manpower development would have to be refined and adjusted to the ever-changing situations and needs.

4.2 The fact that Member States have a great diversity of planning processes and programme/budget schedules made it difficult in certain cases to adapt their plans to the six-year horizon (1978-1983) of the Programme.

4.3 World Health Assembly resolutions form the basis for action by the Organization, including the preparation of the medium-term programme for health manpower development. However, there seems to be a need to recognize that there may be a difference in the attitude towards the implementation of these resolutions in the sense that most Member States and the Secretariat are desirous to implement them faithfully while some Member States may be reluctant to do so.

4.4 Health manpower development is fundamental to every programme area in the health sector. It would therefore have been preferable to develop the health manpower development component as a part of an overall medium-term programme with all other major programmes of the Organization and particularly with general health services. However, health manpower development was given the mandate by the governing bodies as the first group to carry out medium-term programming. Although every attempt was made to broaden the content of the programme and to involve representatives of other major programme areas in all phases of the planning process, it will now be necessary to develop close coordination with those programme areas as they evolve their own medium-term programmes.

4.5 It has proved difficult to make budget estimates six years in advance. Nevertheless, some of the regions have made attempts in this direction, in certain cases in some detail (for example the Regional Office for the Americas). It was fully realized however that, if targets were to be achieved, considerable extrabudgetary funds would be required, and the regular budget allocation, with the exception of regional fellowship funds, would provide only "seed money", especially for research and development.

## 5. Conclusions

5.1 Medium-term programming in one complex major programme proved to be feasible. Though it is well understood that this programme is a first attempt, a preliminary effort with many defects, it still represents a considerable step forward in coordinated planning. As it is improved year by year in full consultation with Member States, it will eventually allow for the development of a rational programme which will really meet the needs of countries.

5.2 Medium-term programming should be seen as a continuous process which is now only at its beginning. It has already revealed many gaps in knowledge and understanding which impede effective planning. As the process continues during the implementation period, with more information coming from the countries many of these gaps will be filled and new problems and needs will emerge. The programme will be constantly and continuously refined, improved and adapted to the ever-changing real health needs and demands of the countries. Seen in this light, as a continuing collaborative effort between the Member States and the whole Secretariat, the medium-term programme process should provide the management instrument needed to ensure the most useful and rational contribution of WHO to national programmes.

5.3 The real value of the medium-term programme for health manpower development will, of course, have to be assessed in three or four years' time when the first results and problems in programme implementation will become evident. A proper evaluation will take even longer. The yardstick of assessment will always have to be the development and the actual progress in the Member States.

5.4 The medium-term programme accordingly needs constant monitoring mechanisms at all levels to make possible a continuous assessment and readjustment. One of these could be a meeting of responsible officers of the Organization with nationals to discuss problems of implementation, including coordination of action and cooperation at all levels.<sup>1</sup>

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<sup>1</sup> A global meeting of this type is already planned for 1978.

GLOBAL WHO MEDIUM-TERM PROGRAMME (MTP) FOR  
HEALTH MANPOWER DEVELOPMENT

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GLOBAL WHO MEDIUM-TERM PROGRAMME (MTP) FOR  
HEALTH MANPOWER DEVELOPMENT

Introduction

This document has been prepared in response to World Health Assembly resolutions WHA29.20 and WHA29.72, after a complete reorientation of the programme, and is presented in the form of a global programme statement with seven annexes<sup>1</sup> giving more detailed MTPs for each region and for headquarters. This medium-term programme, for the period 1978-83, is based on the Sixth General Programme of Work of the Organization which covers the same period. It is also based on the long-term programme of health manpower development policy contained in Part II of document A29/15<sup>1</sup> presented to and endorsed by the Twenty-ninth World Health Assembly in 1976 as well as on resolution WHA29.48 and on the guidelines given in the document on "Policy and strategy for the development of technical cooperation" endorsed by the Executive Board at its fifty-ninth session.<sup>2</sup>

The following document, the first global HMD medium-term programme, consists of a situation analysis, a list of targets and activities, and a breakdown of specific actions to be taken by regions and headquarters in order to achieve each target, expressed in tabular form.

There have been many constraints which have affected the production of this programme statement, and these should be borne in mind when the MTP is read. The document is therefore submitted with the understanding that the whole ensemble of the global, regional and headquarters MTPs represents a preliminary effort. In spite of this, it still represents a considerable step forward in coordinated planning which, as it is improved year by year in full consultation with Member States, will eventually allow for a rational programme which will meet the needs of countries. The relationship between regional and headquarters programmes in developing each of the 23 global activities becomes much clearer when seen in a global framework. If properly applied, this mechanism should provide an excellent opportunity for technical cooperation between countries, including between developing countries (TCDC).

Medium-term programming should be seen as a continuous process which is only at its beginning. It has already served to underline the many gaps in knowledge and understanding which impede effective planning. As the process continues, many of these gaps will be filled and new problems and needs will emerge. Seen in this light, as a continuing collaborative effort between the whole Secretariat and the Member States, the MTP process should provide the management instrument needed to assure the most useful and rational contribution of WHO to national programmes.

A. Situation analysis

The aim of this presentation is to give a general idea of the problems and environment in which this programme statement has been prepared, and also of the problems that will be tackled by the activities listed in the global MTP. This general statement of the situation has been illustrated with just a few selected examples from the regional situation analyses. More detailed information can be gathered from study of the Annexes.<sup>1</sup> As regional examples have only the purpose of illustrating a general statement of problem based on discussion in Part II of document A29/15, failure to mention a region by name does not necessarily mean that the problem is absent there.

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<sup>1</sup> Not attached; available for reference.

<sup>2</sup> WHO Official Records, No. 238, 1977, pp. 181-209.

1. General problems faced in the development of health manpower

A sufficiency of health personnel whose training has been directly relevant to the needs of the population they are to serve is the basis for health action. Despite extensive efforts on the part of Member countries, and WHO collaboration over the years, an overall shortage, substantial imbalance and severe degree of maldistribution between urban and rural areas continue to characterize the health manpower situation throughout the world. There is a mounting awareness of the need for considerably more effective planning, within the context of overall national health planning, of the types and numbers of personnel required. It is clear that each country will define its own objectives in a different way, taking into account its own priorities as defined in country health programming, national health planning or some similar process. WHO can collaborate in the systematic identification of priority health problems, in the specification of operational objectives for the solution of those problems, and in the translation of such objectives into programmes as well as in their implementation. The process of programming and its implementation, however, remain entirely a national responsibility.

The problems to be tackled in meeting this situation are many. They are however interrelated, not only with each other but also with a wide range of political, socio-economic, cultural and health service problems. Some of the most important of these latter problems, as currently recognized, are as follows:

- a) The relatively low status accorded to the health component in national socioeconomic plans.
- b) The absence of well-formulated health policies and plans and of coordination both within the health sector and with other sectors.
- c) The lack of involvement of the community in the planning, provision and evaluation of health services.
- d) The uneconomic utilization of health staff, the imbalance between different disciplines, categories and levels, and the inequities in geographical distribution, aggravated by the migration of qualified staff.
- e) The lack of clear definition of functions of, and interrelationship between, the various categories of personnel engaged in the delivery of health care.
- f) The lack of policy in furthering the "health team" concept, both in training and in service.
- g) A failure to make use of the best elements of those practising traditional medicine.
- h) As a consequence of the above, an inadequate health coverage characterized by limited or no access to health services for very large population groups in the developing countries; also by deficiencies in quality and quantity of health care provided for certain population groups in a number of developed countries.

2. Manpower planning and management

A number of problems have been identified in this programme area, of which some of the most important are as follows:

- a) The inadequacy of national health manpower policies leading to the absence of a well conceived national health manpower system developed in relation to the overall health plan, and in accordance with progress in other sectors.
- b) A lack of collaboration and understanding between the different elements of the health manpower development process (planning, production and management). As a result, there has been little relationship between those planning for, and managing, the services, and those responsible for the training of health manpower.

- c) The absence of any systematic monitoring of health workers' activities. There has therefore been no feedback to enable necessary adjustment of the planning and training processes.
- d) Unattractive working, service and living conditions for health workers, particularly in rural areas, together with a lack of career prospects and job satisfaction.
- e) Inadequate management training for top- and middle-level health administrators who are responsible for planning, management and evaluation of health programmes.
- f) The absence of provision for continuing education for all categories of staff as an integral part of the health care and educational systems.

To illustrate these problems, a number of examples are cited from the regions:

EMRO stressed the lack of collaboration and coordination between those responsible for training and for the health services: this had led to a lack of agreement on common objectives, how to achieve them and how to evaluate the results. This was confirmed in WPRO where, in two countries, the planned expansion of training institutions will have no possibility of meeting the projected staffing needs of the health services in a few years' time. Similarly in AFRO, available resources will not permit the establishment of training programmes which will meet the minimum staffing requirements by the year 2000. Planning must therefore be more realistic, so that health care needs can be met by categories of well trained staff which the countries can afford.

In contrast to the other regions, most countries in AMRO have established some mechanisms, formal or informal, for the coordination of training of manpower and its utilization in the health services. Fourteen countries have recently established, in the Ministries of Health, divisions or departments of Human Resources with a general responsibility for health manpower coordination and planning at the national level.

In some parts of EURO, the overall planning is made more difficult by the existence of a number of international bodies such as EEC and OECD which have certain responsibilities in the HMD field.

In WPRO, although there are courses for management training conducted in seven countries, these are insufficient to meet the growing need for this training within the region. The need for such training is also widely recognized in AMRO, where 70% of hospitals with more than 100 beds are under the direction of staff with no training in administration.

Although there is considerable evidence of continuing education activity, it is sporadic in nature and limited to a small section of health staff. In Latin America and the Caribbean, 155 separate programmes have been identified. They are however episodic, are directed mainly towards some categories of professional staff, and reach less than 5% of health personnel in the region. Although continuing education efforts in AMRO have been most active in the family health field, they are often independent programmes which are not properly integrated into the overall services, and fluctuate in quality and quantity according to available funding and local interest. In both SEARO and WPRO, programmes are limited to provision for top level personnel, and are directed towards meeting ill-defined professional demand rather than health care needs. Middle-level auxiliaries and basic health staff, whose needs, in the absence of proper supervision, are greatest for continuing education, are not catered for in national or voluntary programmes.

### 3. Promotion of training

This programme area includes the provision of adequate facilities for training, including the award of fellowships, in response to the long-term planned requirements for health staff. The major problems recognized in the area are as follows:

- a) The lack of proper planning of health teams, both in training and in service. This is combined with undue emphasis on conventional training of certain categories of health personnel (particularly physicians and nurses), at the expense of other categories.
- b) Shortage of facilities to train the required type and number of health personnel needed by the health services, accentuated by excessive student numbers in some health personnel schools.
- c) Lack of planning for the training of new categories of health personnel, required to meet recognized health care needs. There is also little provision for re-orienting and re-training those personnel already in service.
- d) As a result of the dichotomy between responsibilities for training and for health care delivery, educational programmes tend to develop in isolation, and are frequently irrelevant to the needs of the community for health care.
- e) Professional groups often oppose radical changes in education and training of health staff, even though such changes are community- and team-approach-oriented, and based on established service needs.

In AFRO, promotion of integrated, multidisciplinary training has made slow progress, in spite of the existence of a number of schools of health sciences. This has been due mainly to resistance to the change and innovation which team training demands. In WPRO, it has been recognized that the provision of more physicians, with all the budgetary and time implications of training this category, cannot make good the huge deficit in staffing to provide a universal health care. In this region, the acceptance by the population of auxiliary staff has been unsatisfactory, partly due to the failure of professionals to delegate to them the responsibility for health care, which would necessitate a radical change in their training.

In EURO, the task of training is made more difficult by the great diversification and specialization within the health sector. There are more than 80 specialties in medicine alone, and over 150 different categories of health staff. In SEARO, training programmes are currently almost entirely curative in context, while emphasis is increasingly being placed on the preventive and promotive aspects of health care of the rural community. In this context, the WHO emphasis on primary health care has led in many countries to the development of village level health workers who provide a limited form of health care at the periphery. The integration of this new category into the health services and the provision of an effective chain of supervision is likely to be a major problem during the period of this medium-term programme.

It will be noted, on studying the regional contributions, that the concept of health team training and service, as well as community- and problem-based education, is accepted as a principle by WHO governing bodies. However, the difficulties in, and resistance to, implementation of this concept at country level have been considerable, and there are few examples of successful programmes of this type. A major aim in this programme area is therefore to bring about the needed change in behaviour, and to develop feasible methodologies, which will permit the widespread introduction of the desired changes in training programmes and services.

4. Educational development and support

The problems in this area are largely concerned with relevance and with effectiveness of the educational process. The principal problems are as follows:

- a) Shortage of teachers in the health sciences with the dual competence - in educational planning and processes, and in their own subject specialty.
- b) As reflected in the previous programme area, a wide divergence exists between academic and training goals on the one hand and service requirements, consumer expectations and the general socioeconomic situation on the other.
- c) As a result of (b) there is a widespread unsuitability of curricula, teaching methods and evaluation instruments for the effective team training of health workers to meet community health needs. Educational programmes are primarily directed towards institutional curative care rather than to health promotion, prevention and rehabilitation.
- d) There is an overall and serious shortage of teaching and learning materials for all categories of health worker. This embraces textbooks and manuals, audiovisual media, self-instructional packages and other innovative ways of facilitating learning.

The regional teacher training programmes have made considerable progress since 1970. There are now 8 regional teacher training centres in five regions, and the next phase in the programme, the establishment of national centres, has already begun. However, the main emphasis so far has been on the training of medical school teachers, although 8 countries in WPRO have been operating programmes for the training of nurse educators. In WPRO, as in other regions, there is as yet no generally adopted policy requiring all teachers to undergo special preparation in educational principles and methods before they are appointed; promotions are still usually made on the basis of research skills and achievements. The number of those motivated towards the new concepts through the activities of the regional teacher training programme is impressive at a first glance, and over 600 medical teachers in WPRO have attended courses and workshops on educational method since 1973. It is however a small proportion of the vast number of institution staff dealing with the training of various categories of health personnel in the region.

Teaching in many countries is carried out in a language other than the mother tongue of the students. This requires additional effort and investment. However, those teaching in their national language often suffer from a lack of adequate reference and resource materials. This problem of shortage of teaching and learning materials is universally recognized. A recent needs and resources survey in two countries in EMRO has shown just how serious is the situation. AMRO has attempted to meet the shortage by means of the medical textbook programme, but this has reached only a small part of the health staff in training. Auxiliaries and their teachers are particularly ill-served in the materials for their training, and for reference. Continuing education programmes and the development of self-instructional units are alike hampered by the absence of expertise in design and facilities for reproduction and dissemination.

EURO has drawn attention to the low priority afforded to the evaluation of educational programmes. This is not limited to programmes. Instruments for the evaluation of students and teachers are often ill-adapted to local situations. There are no simple and effective techniques for evaluating learning materials, especially those developed systematically in the form of self-instructional packages, which could be universally applied and so facilitate transfer between institutions.

In two of the regions, AMRO and EMRO, health literature services (including regional library developments) and the provision of biomedical information are included as essential elements of the health manpower component. In AMRO, the Regional Library of Medicine and the Health Services (RLMHS) and its network of regional libraries are involved in disseminating selective information on health services, primary care and related areas. Effective levels of dissemination to the potential 700 000 users have however not yet been achieved. Very little information is available on recent educational experience in Latin America, and almost nothing on rural development and community participation in the health sector.

#### B. Targets and activities

It is understood that, in the case of all targets and activities listed in this framework, WHO will collaborate with Member States in their efforts to achieve these targets and carry out the activities. This statement has not been repeated in each case.

Each target includes a phrase indicating the priority areas for measuring its achievement. For completeness, the targets should be read together with the activities.\*

#### Programme Area A

Manpower planning and management to meet health service requirements (including the promotion of mechanisms for integrating health service and manpower development, and development of systems of continuing education).

WHO will collaborate with countries to facilitate the achievement of the following targets, and in the carrying out of the related activities:

- A.1 Effective coordination between educational and service institutions engaged in health activities, as measured by evidence of a greater number of programmes based on common policies, resources and goals.
  - A.1.1 Promotion of dialogue among all sectors involved in health services and manpower development.
  - A.1.2 Promotion of studies by national groups on coordination between existing health services and manpower development mechanisms.
  - A.1.3 Development of mechanisms for coordination of health services and manpower development.
- A.2 Development of health manpower planning capability as evidenced by an increased number of countries developing soundly based national health planning, including the prediction of manpower requirements.

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\* Note: As a result of experience, it was found necessary, in the interest of clarity, to blend a number of the 32 global activities previously formulated. In part C, the global breakdown of the programme of activities during the six-year period, there are only 23 activities featured. The seven annexes however adhere to the original formula as this was the manner in which they were presented and discussed in the Regional Committees concerned.

- A.2.1 Development of manpower planning methodology and policy analysis.
- A.2.2 Development of information systems to monitor manpower requirements, including the analysis of tasks to be performed by defined categories of health workers.
- A.2.3 Training in health manpower planning.
- A.3 Development of management training capability as evidenced by the increase and improvement of existing programmes in the area, leading to an increase in the number of competent health services managers, and their utilization.
  - A.3.1 Selection, planning and evaluation of, and support to, programmes for training in management.
- A.4 Establishment of career development and continuing education as evidenced by clearly defined career structures for health personnel linked to comprehensive national programmes of in-service education.
  - A.4.1 Assessment of existing patterns of career development and design of alternative schemes, as well as schemes for the monitoring of health manpower utilization.
  - A.4.2 Development of alternative procedures for the implementation of systems of continuing education.
- A.5 Discouragement of undesirable migration of health personnel as evidenced by the location and retention of them in the countries, and places within the countries, where they are most needed.
  - A.5.1 Assessment of present systems of mutual recognition of qualifications and diplomas.
  - A.5.2 Collaboration in implementing strategies to control undesirable migration in response to country request.

#### Programme Area B

Promotion of training for all categories of health staff (including the promotion of health teams for primary health care).

WHO will collaborate with countries to facilitate the achievement of the following targets, and in the carrying out of the related activities:

- B.1 Development of educational institutions with emphasis on the intermediate and auxiliary levels, as evidenced by the increase of total health personnel, particularly those in charge of primary health care services to underserved populations.
  - B.1.1 Collection, maintenance and distribution of information regarding training institutions.
  - B.1.2 Establishment of criteria for, and support to, the development of new training institutions as well as the reform and strengthening of existing ones.
  - B.1.3 Comparative analysis of, and support through networks of national groups to, non-traditional schemes of institutional and programme development.

- B.2 Design and development of task- and community-oriented training programmes for all levels of health personnel which are specially relevant to needs of under-served populations and have potential for replication, as reflected by the number of programmes which have been developed and/or changed accordingly.
- B.3 Advanced education for health personnel including the subject matter component of teacher training, as reflected by the increase in the number of supervisors and educators in the various areas of health work effectively trained for their specific tasks.
  - B.3.1 Identification of referral and supervisory systems, and of training needs for instruction and supervision of different levels of health workers, and promotion of appropriate systems.
  - B.3.2 Evaluation, follow-up and improvement of postgraduate/postbasic training, particularly in public health and community health.
  - B.3.3 Continuous review and improvement of the administration of the fellowship programme and national postgraduate/postbasic programmes.

### Programme Area C

Educational development and support (including educational planning, teaching/learning methods and materials, teacher training, and evaluation).

WHO will collaborate with countries to facilitate the achievement of the following targets, and in the carrying out of the related activities:

- C.1 Development of a systematic approach to educational planning and technology, including teacher-training, as measured by improved performance and appropriateness of training programmes.
  - C.1.1 Identification and assessment of, and support to, educational systems, methodological approaches, evaluation schemes and related technologies to strengthen health personnel training and research programmes.
  - C.1.2 Development of teacher-training programmes at regional and/or national level.
- C.2 Development and/or provision of relevant health instructional material, including textbooks, reflected by the increase in student utilization of the same and a clear feedback on effectiveness.
  - C.2.1 Survey and assessment of existing learning materials, identification of priority requirements for new learning materials for all categories of personnel, and investigation of design and reproduction facilities.
  - C.2.2 Selection, adaptation, production, promotion and provision of learning materials with emphasis on priority areas and on self-instructional approaches.
- C.3 Development of a scientific and technological documentation system and distribution of selective information as evidenced by a broader and increased utilization of bibliographic information.
  - C.3.1 Development of criteria for, and subsequent implementation of, a regional network to provide scientific and technological information in priority areas related to health.
  - C.3.2 Establishment of HMD Information Service on health manpower programmes and processes.

C. Global breakdown of activities by region 1978-1983

TARGET A.1 EFFECTIVE COORDINATION BETWEEN EDUCATIONAL AND SERVICE INSTITUTIONS ENGAGED IN HEALTH ACTIVITIES AS MEASURED BY EVIDENCE OF A GREATER NUMBER OF PROGRAMMES BASED ON COMMON POLICIES, RESOURCES AND GOALS

ACTIVITY A.1.1 Promotion of dialogue among all sectors involved in health services and manpower development (HSMD)

	1978	1979	1980	1981	1982	1983
AFRO	Exchange of information between WHO and national authorities through WR meetings with reference to HSMD	Follow-up	Participation in World Conference on Education and Health Care, coordinated by World Federation of Medical Education (WFME) Cf. A.1.3	Follow-up	Follow-up	Follow-up
AMRO	Plan Regional Meeting on Education and Health Care	Regional Seminar in preparation for the WFME conference Introduction of intersectoral approaches in the preparation of the WFME conference	Participation in the WFME conference	Follow-up of the proposals and recommendations of the WFME conference	Preparation of integrated educational and services inputs to the Pan American Conference on Health Manpower Planning	Follow-up
EMRO	Regional seminar in preparation for WFME Conference Ministerial consultation between those responsible for health professional education and those responsible for health services	Follow-up Cf A.1.3	WFME conference participation	Follow-up	Follow-up	Follow-up
EURO	Regional seminar in preparation for WFME conference Third meeting of Advisory Committee (with participation from Health Services and Manpower Development field) on Medium-Term Programme (MTP) in Nursing/Midwifery in Europe Cf A.2.1 Third liaison meeting with Nursing/Midwifery Associations, representing HSMD concerns, on WHO's European Nursing/midwifery Programmes Follow-up on 1977 studies on communication and collaboration mechanisms; working group on Working Relations in Provision of Community Health Care Cf A.1.2	Follow-up Follow-up Follow-up Conference on Communication and collaboration between and within Health and Education Systems	Participation in WFME conference Fourth Meeting of Advisory Committee on MTP in Nursing/Midwifery in Europe Fourth liaison meeting with Nursing/Midwifery Associations on WHO's European Nursing/Midwifery Programmes Follow-up	Follow-up Follow-up Follow-up Follow-up	Follow-up Follow-up Fifth liaison meeting with Nursing/Midwifery Associations on WHO's European Nursing/Midwifery Programmes Conference on Nursing/Midwifery health delivery sub-systems and the education of personnel	Follow-up Fifth meeting of Advisory Committee on MTP in Nursing/Midwifery in Europe Follow-up Follow-up

ACTIVITY A.1.1 (Continued)

	1978	1979	1980	1981	1982	1983
SEARO	Regional seminar in preparation for WFME conference	Follow-up	Participation in WFME conference	Follow-up	Follow-up	Follow-up
WPRO	Regional workshop on HSMD concept for key personnel in health and educational sectors	National workshop on HSMD concept to establish national committees to work on country HSMD mechanisms	As for 1979 Establish HSMD Mechanisms in a number of countries/ areas; strengthen already existing ones	Convene regional working groups to assess effectiveness of established and proposed HSMD links	Continue evaluation of HSMD links	As for 1982
	Plan regional seminar in preparation for WFME conference	Conduct regional seminar and formulate strategy for action	Participation in WFME conference	Implement Plan of Action and follow-up implementation	As for 1981	As for 1982
HQ	Participate in planning and preparation of WFME conference  Continue collaboration with regional seminars in preparation for WFME conference	Participate in final planning for WFME conference	Participation in WFME conference; promulgation of plan of action for integrated health services and manpower development relevant to national needs	Participation in issuing and distributing proceedings and recommendations; development of inter-agency plan for follow-up	Promotion of development of cooperative mechanisms for evaluation of impact at national and local levels	Follow-up

TARGET A.1 EFFECTIVE COORDINATION BETWEEN EDUCATIONAL AND SERVICE INSTITUTIONS ENGAGED IN HEALTH ACTIVITIES AS MEASURED BY EVIDENCE OF A GREATER NUMBER OF PROGRAMMES BASED ON COMMON POLICIES, RESOURCES AND GOALS

ACTIVITY A.1.2 Promotion of Studies by national groups on coordination between existing health services and manpower development mechanisms

	1978	1979	1980	1981	1982	1983
AFRO	Collaboration in country studies on coordination of health services and manpower development activities	Studies continued; promote establishment of coordination mechanisms	Continued	Studies completed and results analysed; follow-up	Follow-up	Review of achievements
	Prepare and issue one country case study describing coordinated health services and manpower development mechanism to promote exchange of experience	Prepare and issue an additional country case study	Prepare and issue one more country case study	Issue of edited series of country case studies and national strategies	Assess utilization of publication	Follow-up in all countries concerned
AMRO	Stimulation of national studies on coordination between health services and manpower development  Preliminary study of mechanisms used in the coordination of Health Services institutions and Manpower Development programmes in selected countries through national groups	Continuation of activities with the Health Education Research and Development Nucleus (NIDES)	Follow-up in A.1.3  Continued activities with NIDES  Evaluate results and experience through special meeting of representatives from different coordination committees	Design strategy to expand national experience in selected countries	Analysis of results and design of new mechanisms of coordination, training and evaluation for all categories of health personnel  Evaluation of results through special meetings with representatives of different coordination groups and development of new strategies for technical cooperation	

	1978	1979	1980	1981	1982	1983
EMRO	Identify suitable institutions for collaboration in research on HSMD	Support WHO collaborating centres in developing research models	Identify one country for operational research in HSMD; select site, train nationals in methodology	Support operational research on HSMD	Continued	Review progress; publish results of previous two years operational research studies
EURO	Collaboration with five selected countries in case studies of mechanisms for coordinating health services and manpower development	Continued Issue of study reports	Study the feasibility of HSMD concept as adapted to problems of environmental health protection  Collaboration continued with other countries	Continued  Continued	Follow-up  Continued	Follow-up  Continued
SEARO	Evaluation of existing country mechanisms for coordinating health services and manpower in at least two countries	Continued in two more countries	Continued in three more countries	Continued in remaining countries	Publication of country case studies and national strategies	Follow-up in A.1.3
WPRO	Cf A.1.1 and A.1.3					
HQ	Promote preparation of country studies describing coordinated HSMD in direct collaboration especially with AFRO, EMRO and SEARO  Collaborate in planning country studies on coordination of services and education for a single category of health worker  Finalize protocol for research in methods of institution strengthening and organizational development (including management research).	Continued (additional case studies)  Implementation of studies  Implement research and development programme in selected countries.	Continued (additional case studies)  Inter-regional workshop to analyse country strategies  Continued	Analysis of studies and national strategies; report  Studies completed and results analysed  Meeting of task force to monitor programme; issue report on progress	Assess utilisation of report by questionnaire  Follow-up in A.1.3  Continued research and development	Follow-up including inter-regional seminar to evaluate coordinated programme development  Continued

TARGET A.1 EFFECTIVE COORDINATION BETWEEN EDUCATIONAL AND SERVICE INSTITUTIONS ENGAGED IN HEALTH ACTIVITIES AS MEASURED BY EVIDENCE OF A GREATER NUMBER OF PROGRAMMES BASED ON COMMON POLICIES, RESOURCES AND GOALS

ACTIVITY A.1.3 Development of mechanisms for coordination of health services and manpower development (HSMD)

	1978	1979	1980	1981	1982	1983
AFRO		Promotion of the establishment of coordination mechanisms	Continued  (Follow-up in A.1.1 and A.1.2)	Continued	Continued	Review of achievements
AMRO	Promotion within the Latin American Programme of Educational Development in Health (PLADES) of informal inter-sectoral committees for the coordination and support of integrated activities in manpower development, within the framework of health services; participation of teachers and students in the health care delivery and realisation of integrated research. Periodical evaluation of the functioning and productivity of existing committees.					
	Promote participation of teaching institutions in health manpower planning processes	Continued  Two seminars on HSMD and manpower planning for teaching institutions (Areas IV and V)	Continued and follow-up from A.1.2  Continued in Areas II and VI  Prepare manpower units of Ministries of Health for inter-institutional participation in planning	Promote inter-institutional planning groups in four countries  Continued Cf. A.2.1	Promote collaboration among the four inter-institutional planning groups  Continued Cf. A.2.1	Promote participation of additional teaching institutions in health manpower planning  Continued Cf. A.2.1
EMRO	Identify three countries interested in developing an integrated HSMD mechanism; secure agreement to initiate studies	Cooperate with identified countries in situation analysis	Collaborate with three countries in planning and implementation of country strategies	Continue collaboration, adapt instruments to evaluate country mechanisms	Evaluation of mechanisms established; analyze results; prepare and distribute reports	Inter-country group meeting to exchange experiences and review country strategies
EURO	Promote mechanisms for planning and implementation of country strategies for coordination of health services and manpower development in one country  Collaboration with interested countries in HSMD field	Continued in second country  Continued	Continued in third country  Continued  Study of the feasibility of enlarging HSMD concept to include Environmental Health	Continued in fourth country  Continued  Follow-up	Follow-up  Continued  Follow-up	Follow-up  Continued  Follow-up
SEARO	Develop approaches for coordination of health services and manpower development in two countries	Continued in two additional countries  Consultation to review mechanisms and approaches; issue guidelines for implementing coordination	Continued in three additional countries  Implementation of recommendations	Continued in remaining countries  Implementation of recommendations	Follow-up	Evaluation of the established HSMD mechanisms and their functional role in planning, production and management of health personnel in the countries

	1978	1979	1980	1981	1982	1983
WPRO	Creation of a National Teacher Training Centre (NTTC) in Malaysia with a manpower unit to undertake manpower planning, utilization, and management studies Cf. A.1.2 Cf. C.1.2	Evaluate operation of Centre and make modifications as necessary	Follow-up	Follow-up	Follow-up	Follow-up
HQ	Develop approaches to evaluate country mechanisms for coordinating HSMD	Continued	Promote field testing of developed approaches	Field testing completed and results analysed	Consultation to review procedures and approaches Issue guidelines	Follow-up and Cf. A.1.2

TARGET: A.2 DEVELOPMENT OF HEALTH MANPOWER PLANNING CAPABILITY AS EVIDENCED BY AN INCREASED NUMBER OF COUNTRIES DEVELOPING SOUNDLY BASED NATIONAL HEALTH PLANNING, INCLUDING THE PREDICTION OF MANPOWER REQUIREMENTS

ACTIVITY: A.2.1 Development of manpower planning methodology and policy analysis

	1978	1979	1980	1981	1982	1983
AFRO	Develop with selected institutions techniques for forecasting health manpower requirements; develop guidelines for activity analysis and projection of job requirements.	Test forecasting techniques in at least two countries; issue guidelines.	Continued	Analysis of the studies; revision of guidelines.	Issue revised guidelines on simple forecasting techniques and guidelines for activity analysis and projection of job requirements.	Assessment of the utilization of guidelines.
AMRO	Workshop on the assessment of human resources.  Sub-regional seminar on health manpower planning for Central America.  Development of health manpower policy analysis and formulation in three countries.	Workshop on health manpower policy analysis and formulation.  Continued for the Andean area.  Continued in 8 additional countries.  Development of health manpower standards analysis, and formulation in eight countries.  Formulation of health manpower plans in 2 countries	Workshop on health manpower standards, analysis and formulation.  Continued for the Caribbean Area.  Continued in 9 additional countries.  Continued in 9 additional countries.  Continued in 6 additional countries.	Workshop on national educational planning and its relation to health manpower planning.  Continued for Areas V and VI.  Continued in 7 additional countries.  Continued in 7 additional countries.  Continued in 6 additional countries.	Workshop on analytical and formulation techniques in health manpower plans.  Preparation of the II Pan American Conference on Health Manpower Planning (PACHMP).  Continued in 2 additional countries.  Continued in the rest of the countries.  Continued in 6 additional countries.	Final preparation, realization and follow-up of the II PACHMP. Overall planning for 1984-89.  Follow-up  Follow-up  Continued in the rest of the countries.
EMRO	Working group on health manpower planning to prepare guidelines. National workshops on country health programming (CHP). Conduct national workshops on methodology of CHP.	Field test guidelines in one country.  Continued.  Continued training of nationals in CHP.	Revise guidelines.  Continued	Publish and distribute guidelines and initiate support to governments.  Continued	Continued support.  Intercountry consultation to review methodology of CHP.	Assess utilization of guidelines; collect and publish results of studies achieved.  Publish and distribute report of consultation.
EURO	Cooperation with governments and non-governmental organizations (NGO's), health management planning agencies.  Follow-up of 1976 Working Group on CHP as a determinant of Health Manpower Development Policies.	Continued  Working group on the design of Training in Health Planning and Management within the frame of Strengthening of Health Services (SHS).  Continued	Continued  Follow-up  Continued	Continued  Follow-up  Survey of manpower planning systems in the European region.	Continued  Conference on Health Planning and Management Systems.  Support to national training programmes in manpower planning methods.	Continued  Implementation of new methods and policies.  Evaluation of situation.

TARGET A.2, ACTIVITY A.2.1 (continued)

	1978	1979	1980	1981	1982	1983
EURO (cont'd)	<p>Identification of and contact with agencies, centres, associations and individuals participating in field trials within the MTP on Nursing/Midwifery in Europe. c.f. A.1.1</p> <p>Advisory Services on the Programming and Management of Health Services (Training).</p>	<p>Technical Advisory Group on Resource Planning in the MTP on Nursing/Midwifery.</p> <p>First WHO-sponsored course in health planning concentrating on planning for resources related to nursing/midwifery.</p> <p>Continued</p>	<p>Follow-up</p> <p>Follow-up</p> <p>Continued</p>	<p>Follow-up</p> <p>2nd WHO-sponsored course in health planning concentrating on planning for resources related to nursing/midwifery.</p> <p>Continued</p>	<p>2nd Technical Advisory Group on Resource Planning in the MTP on Nursing/Midwifery.</p> <p>Follow-up</p> <p>Continued</p>	<p>Follow-up</p> <p>Evaluation</p> <p>Continued</p>
SEARO	<p>Working group on health manpower planning to prepare guidelines for manpower policy analysis and planning. Adapt guidelines.</p> <p>Review in at least two countries the health manpower policy and planning (where appropriate as part of CHP).</p>	<p>Field test guidelines in at least one country.</p> <p>Continued in 2 additional countries.</p> <p>Alternative approaches studied and elaboration of health manpower plans promoted in 2 countries reviewed in 1978.</p>	<p>Revise guidelines. Travelling seminar to study health manpower planning in specific settings.</p> <p>Continued in 3 additional countries.</p> <p>Elaboration continued in 2 additional countries reviewed in 1979.</p>	<p>Issue of revised guidelines; assess status of manpower planning by field visits to countries.</p> <p>Continued in remaining countries.</p> <p>Elaboration continued in 3 additional countries reviewed in 1980.</p>	<p>Assess utilization of guidelines; consultation on health manpower planning.</p> <p>Follow-up</p> <p>Elaboration continued in remaining countries reviewed in 1981.</p>	<p>Follow-up in implementing recommendations of the consultation.</p> <p>Follow-up</p> <p>Follow-up</p>
WPRO	<p>Convene working group to study strengthening of health manpower planning component in CHP methodology. c.f. A.2.2</p>	<p>Study completed and report issued.</p>	<p>Regional seminar on health manpower planning. Implement health manpower planning activities in a number of countries.</p>	<p>Continued</p>	<p>Evaluate validity of methodology; make necessary modifications.</p>	<p>Continued</p>
HQ	<p>Collaborate with institutions to develop techniques including simulation models for forecasting health team requirements. Issue guidelines for manpower planning and policy analysis; complete bibliography on health manpower planning, monitoring and management.</p>	<p>Promote field testing of forecasting techniques in two countries; develop guidelines. Field test guidelines.</p>	<p>Continue studies and field testing of guidelines.</p> <p>Seminar to study health manpower planning in a specific setting.</p>	<p>Analyze and issue results of study for comments; revision of guidelines.</p> <p>Assess status of manpower planning by field visits to selected countries; issue of revised guidelines.</p>	<p>Revise and issue publication on simple forecasting techniques and guidelines for activity analysis and projection of job requirements.</p> <p>Expert committee on health manpower planning; assess the utilization of guidelines.</p>	<p>Assess utilization of publication.</p> <p>Follow-up in implementing recommendations of expert committee.</p>

TARGET: A.2 DEVELOPMENT OF HEALTH MANPOWER PLANNING CAPABILITY AS EVIDENCED BY AN INCREASED NUMBER OF COUNTRIES DEVELOPING SOUNDLY BASED NATIONAL HEALTH PLANNING, INCLUDING THE PREDICTION OF MANPOWER REQUIREMENTS

ACTIVITY: A.2.2 Development of information systems to monitor manpower requirements, including the analysis of tasks to be performed by defined categories of health workers

	1978	1979	1980	1981	1982	1983
AFRO	Develop principles of information systems to monitor manpower requirements (including production and utilization). C.f.A.3.1	Promote development and monitoring of national health manpower information systems	Continued	Continued	Revision of the system.	Follow-up
AMRO	Improvement of data collection, storage and retrieval in 7 countries.  Preparatory work to 1979 development.	Continued in 10 additional countries.  Development of standard analytical processing of health manpower data in five countries.	Continued in three additional countries.  Continued in seven additional countries.	Continued in two additional countries.  Continued in four additional countries.	Follow-up  Continued in two additional countries,	Follow-up  Continued in two additional countries.
EMRO	Support manpower studies in two to four countries, and develop their methodology for refining the process of country health programming (CHP) and develop associated information systems.	Continued	Assess impact on quality of CHP.	Support manpower studies in two other countries.	Continued	Assess impact on quality of CHP.
EURO	Collection and collation of HMD information. Nursing personnel information systems (follow-up on 1977 Joint EEC/WHO meeting). Study methods of determining health manpower requirements.	Continued  Follow-up  Continued	Continued  Continued  Working group on information systems for monitoring health manpower utilization.	Continued  Continued  Follow-up	Continued  Continued  Conference on information systems	Continued  Continued  Evaluation of progress in establishing information systems on health manpower monitoring.
SEARO	Review prevailing situation regarding monitoring and evaluation systems for health manpower management in countries of the region, and develop appropriate information systems.	Consultation to develop guidelines for elaboration of monitoring and evaluation systems for health manpower management.	Field test guidelines in a few countries; analysis of findings; recommendations for improvement.	Issue of guidelines for developing monitoring and evaluation systems for health manpower management.	Assess utilization of guidelines and implementation, and effectiveness of information system.	Follow-up
WPRO	Review possible monitoring mechanisms (information systems) for manpower requirements for regional use by working group. C.f. A.2.1	Report of review issued.				
HC	Develop principles of information systems to monitor manpower requirements, supply (including production) and utilization. (c.f.A.4.1)	Promote implementation of national health manpower information systems; revise international classification of health occupations.	Continued	Consultation to review experience since 1978; issue of revised international classification.	Follow-up on implementing recommendations of consultation.	Follow-up.

**TARGET:** A.2 DEVELOPMENT OF HEALTH MANPOWER PLANNING CAPABILITY AS EVIDENCED BY AN INCREASED NUMBER OF COUNTRIES DEVELOPING SOUNDLY BASED NATIONAL HEALTH PLANNING, INCLUDING THE PREDICTION OF MANPOWER REQUIREMENTS

**ACTIVITY:** A.2.3 Training in health manpower planning

	1978	1979	1980	1981	1982	1983
AFRO	Critical review and analysis of already existing training situations in manpower planning in the region; develop a strategy for training at the national level.	Integrate health manpower planning (HMP) training in management programmes.	Continue integrated training programmes and development of learning materials. c.f. C.2.2.	Continued	Continued	Continued
AMRO	First course on HMP.	Second course on HMP and evaluation.	Third course on HMP and evaluation. Two training sessions in specialized aspects of HMP.	Fourth course on HMP and evaluation. Continued (two training sessions).	Continued (two training sessions).	Continued (two training sessions).
EMRO	C.f. A.2.1 and A.3.1					
EURO	Training courses for Senior Health Professionals in Planning and Management of Health Services  Stimulate national or sub-regional training centres to increase health planning and evaluation capacity in a number of countries.	Continued  Continued.	Evaluation of courses held in 1978 and 1979; courses continued.  Continued	Continued  Continued	Evaluation of courses held in 1980 and 1981; courses continued.  Continued	Evaluation of all courses held up to 1982.  Continued
	Identify with 3 countries their specific needs for training in manpower planning.	Cooperate with these countries in developing training programmes in manpower planning methods.	Follow-up	Follow-up	Follow-up	Follow-up
SEARO	Review HMP capability in countries of the region and develop a strategy for training in the national context.	Assist in implementation of training strategy.	Continued	Continued	Continued	Continued
WPRO	C.f. WPRO Comprehensive Health Services MTP					
HQ	Assess experiences in training in health and manpower planning and develop a strategy for training. c.f. A.2.1 and A.3.1.	Promote integration of training in HMP with training in management programme.	Continue promotion and development of learning materials (c.f. C.2.2).	Continued	Continued	Continued



	1978	1979	1980	1981	1982	1983	
EMRO	Collaboration on training of personnel in health planning with special emphasis on management and health manpower planning.	Continued	Conduct two regional workshops on management and planning.	National workshops on management and planning.	Support establishment of further national training programmes in health services and manpower planning and management.	Evaluate the training programmes.	
EURO	Working Group on training of Senior Public Health Administrators.	Follow-up on 1977 Study on Training Patterns for Public Health Medical Officers; assessment of the managerial aspects of public health medical officers' tasks.	Study of relevance of existing management training of public health medical officers.	Training schemes to cover managerial needs in at least 2 countries.	Continued in two additional countries.	Continued in two additional countries.	
	Courses for public health administrators	Continued	Continued	Continued	Continued	Continued	
	Organization of training courses on management for cardiovascular disease control (CVD) programme staff. Management courses, c.f.A.2.3.	Continued; organize training courses for Mental Health Services (MNH) staff.	Continued	Continued	Continued	Continued	Continued
	Improve the management capacity of selected countries by: - training in the methodology of organization and administration of research; - training in the management of community control programmes.	Continued	Continued	Continued	Continued	Continued	Continued
SEARO	Identification of learning opportunities at national, regional and inter-regional levels for top and middle level health planners and managers.	Collaboration with selected schools of public health; development of training programmes for planners and managers.	Implementation of training programmes for planners and managers.	Continued	Continued	Assessment of the training programmes for planners and managers.	
		Develop programmes for training in health manpower management; development of learning material. (c.f.C.2.2)	Implementation of integrated training programme; evaluate learning material and continue development.	Continued	Evaluation of programme.	Follow-up of recommendations.	
		Adaptation of learning material in planning and management training. Travelling seminar to exchange experiences on management training.	Continued Distribution of learning material. Follow-up	Continued Travelling seminar to exchange experiences on management training.	Continued Consultation to evaluate the learning material Follow-up	Implementation of changes proposed by the consultation. Travelling seminar to exchange experiences on management training.	
WPRO	Training in planning and management, responsibility of another programme area.						

TARGET A.3, ACTIVITY A.3.1 (continued)

	1978	1979	1980	1981	1982	1983
HC	<p>Following 1977 consultation, meeting with potential donors to finance "International Programme for Training in Health Management" (including training in health manpower planning).</p> <p>Complete inventory of management training programmes.</p> <p>Inventory of management teaching/ learning packages available; continued development of learning material for Training in Health Management.</p> <p>Promote development of national accreditation procedures to recognize non-institutionalized training.</p>	<p>Coordination of regional programmes; integrate training in health management with training in health manpower planning and country health programming (CHP).</p> <p>Coordination of regional directories of health management training programmes.</p> <p>Select packages for local adaptation in selected countries; develop learning materials. C.f. A.2.3, C.2.2.</p> <p>Continued</p>	<p>Meeting with donors and programme directors for coordination.</p> <p>Preparation and updating of World Directory of management training programmes and schools of public health.</p> <p>Field test for local adaptation and develop new packages and learning materials.</p> <p>Continued</p>	<p>Coordination of regional programmes.</p> <p>Assess utilization</p> <p>Continued</p> <p>Continued</p>	<p>Meeting with programme directors and donors for evaluation of programmes.</p> <p>Follow-up</p> <p>Continued</p> <p>Continued</p>	<p>Continue coordination activities.</p> <p>Follow-up</p> <p>Continued</p> <p>Continued</p>

TARGET: A.4 ESTABLISHMENT OF CAREER DEVELOPMENT AND INCENTIVE SCHEMES AND CONTINUING EDUCATION SYSTEMS AS EVIDENCED BY CLEARLY DEFINED CAREER STRUCTURES FOR HEALTH PERSONNEL LINKED TO COMPREHENSIVE NATIONAL PROGRAMMES OF IN-SERVICE EDUCATION.

ACTIVITY: A.4.1 Assessment of existing patterns of career development and design of alternative schemes, as well as schemes for the monitoring of health manpower utilization.

	1978	1979	1980	1981	1982	1983
AFRO	Collaborate with national authorities to design alternative patterns of career development and incentive schemes at the national level.	Continued	Analyze data and experience to date.  Collaborate with HQ in field testing schemes in selected countries.	Distribute results of analysis to all countries.	Continued collaboration in utilization of results.	Continued collaboration.
AMRO	Regional study on health manpower expenditures.  Workshop "manpower management and administration of personnel".	Regional study on career patterns in health occupations.  Workshops on health manpower economics.  Comparative study on patterns of manpower administration.	Workshop on career patterns in the regionalized health system.  Prepare guidelines for the analysis of manpower investments and recurrent costs.  Prepare guidelines on manpower management.	Preparation of guidelines for the design of career ladders & lattices in the regionalized health system.  Collaboration with countries in utilization of the guidelines.  Prepare manuals for the review of salary scales.	Cooperation with countries in the field of career development.  Continued  Technical cooperation with the Ministries of Health in manpower management.	Continued
EMRO	cf A.4.2					
EURO	Working Group on continuing education of health personnel as a factor in career development (cf A.4.2)  Follow-up of studies on principles and methods of quality control in health care.	Follow-up  Recommendations of Working Group on methods of quality control in health care.	Conference on continuing education and specialized training in relation to community health needs (cf A.4.2)  Follow-up  Working Group on Career Development of Health Personnel.  Study of socio-geographical distribution of trained personnel.	Follow-up  Study on determinants of job satisfaction in career expectations.  Cooperate with 3 countries in designing career development schemes.  Follow-up	Follow-up  Involvement of at least 2 countries in the implementation of recommendations.  Continued  Follow-up	Follow-up  Experiments with more economical use of trained health personnel in at least 2 countries.  Continued  Follow-up

ACTIVITY: A.4.1 Continued

	1978	1979	1980	1981	1982	1983
SEARO	<p>Review of service and working conditions of all categories of health personnel in at least 2 countries.</p> <p>cf A.2.2</p>	<p>Continued in 2 additional countries.</p> <p>Elaboration of plan for the management of health personnel and of health teams with a view of optimal utilization in the 2 countries reviewed in 1978.</p>	<p>Continued in 3 additional countries.</p> <p>Continued for the 2 countries reviewed in 1979.</p>	<p>Continued review in remaining countries.</p> <p>Continued for the 3 countries reviewed in 1980.</p>	<p>Continued for the remaining countries reviewed in 1981.</p>	<p>Review of the implementation of the health manpower management plans in the countries.</p>
WPRO	<p>Convene Working Group to study methods of promoting optimum utilization of health personnel (special reference to nursing in South Pacific in initial study)</p>	<p>Dialogue with national authorities to formulate areas of collaboration in developing monitoring schemes for health personnel utilization</p>	<p>Implement schemes drawn up in 1979.</p>	<p>Continued</p>	<p>Continued</p>	<p>Regional Working Group to review and evaluate impact of collaboration.</p>
HQ	<p>Promote studies on employment and working conditions of selected occupations in selected countries.</p> <p>Develop alternative methods for monitoring the utilization of health workers, including the supply, distribution and productivity of health manpower.</p> <p>cf A.2.2 and cf B.3.3</p>	<p>Design alternative patterns of career development and incentive schemes in the national context jointly with ILO, and develop evaluation criteria.</p> <p>Promote implementation of methods developed (cf A.2.2)</p>	<p>Field test schemes in selected countries.</p> <p>Continued</p>	<p>Continued</p> <p>Consultation to review experience as in A.2.2.</p>	<p>Analyze data and experience collected to date.</p> <p>Promote the application of revised methods.</p>	<p>Review of strategies of career development and incentive schemes applied by countries.</p> <p>Follow-up</p>

**TARGET:** A.4 ESTABLISHMENT OF CAREER DEVELOPMENT AND INCENTIVE SCHEMES AND CONTINUING EDUCATION SYSTEMS AS EVIDENCED BY CLEARLY DEFINED CAREER STRUCTURES FOR HEALTH PERSONNEL LINKED TO COMPREHENSIVE NATIONAL PROGRAMMES OF IN-SERVICE EDUCATION.

**ACTIVITY:** A.4.2 Development of alternative procedures for the implementation of systems of continuing education

	1978	1979	1980	1981	1982	1983
AFRO	Collaborate with countries to develop procedures to implement alternative systems of continuing education.	Test at country level the feasibility of a selected number of systems of continuing education.	Continued.	Develop evaluation procedure.	Implement evaluation procedure.	Follow-up.
	Strengthening of existing programmes of continuing education	Coordination and synchronization between programmes in each country.	Extend geographic coverage of the programmes.	Expansion of scope of programmes.	Incorporation of continuing education in the subsystems of health manpower management.	Progressive decentralization of programmes.
AMRO	Phase I - Group A. Implementation and evaluation of programme in 4 countries (Columbia, Honduras, Guatemala, Ecuador) - Establish one reference centre. Preparation of country projects for Group B.	Phase I - Group B - Implementation and evaluation of programmes in 4 countries (Bolivia, Dominican Republic, Nicaragua, Peru). Negotiation of Phase II - Preparation of country projects for Group C.	Phase II - Group C - Implementation and evaluation of programmes in 4 countries (Caribbean (2), El Salvador, Paraguay) Establish a new reference centre. Preparation of country projects for Group D.	Phase II - Group D - Implementation and evaluation of programmes in 4 countries (Costa Rica, Mexico, Panama, Surinam)		
	Prepare first cycle of continuing education in MCH, nutrition, and environmental sanitation.	Testing and utilization of the first cycle in 6 countries.  Prepare first cycle in communicable diseases, laboratory services and malaria.	Prepare second cycle in MCH, nutrition and environmental sanitation.  Testing of first cycle in communicable diseases in 3 countries.	Utilization of second cycle in 3 countries.  Prepare second cycle in disease control.	Expand cycles to comprehensive family health and environmental health.  Utilize second cycle of disease control in 3 countries.	Incorporate cycles in the country programmes in the remaining countries.
EMRO		Develop guidelines for the planning and implementation of continuing education programmes for various categories of health personnel including primary health workers.	Collaborate with at least one country in field testing the guidelines and give support to the development of continuing education programmes.	Issue revised guidelines; intercountry workshop on their use for the planning and implementation of continuing education programme.	Support the development of continuing education programmes in more countries of the region.	Continued support to the development of continuing education programmes in the region.

ACTIVITY: A.4.2 (Continued)

	1978	1979	1980	1981	1982	1983
EURO	Study patterns and alternative systems of continuing education.	Follow-up; assessment of alternative systems of continuing education	cf A.4.1; follow-up	Follow-up	Follow-up	Follow-up
SEARO	Identify the needs for continuing education of various categories of health personnel and elaborate action plans in at least 2 countries.	Continued in 2 additional countries.  Design training programmes for selected categories of health personnel in countries with action plans.  Prepare learning materials for training programmes. (cf C.2.2)	Continued in 3 additional countries.  Continued for other categories of health personnel.  Continued, with assessment and revision of materials.  Collaborate in implementation of designed training programmes.	Continued in remaining countries.  Continued  Continued  Continued	Follow-up  Continued  Continued  Evaluation of training programmes already implemented.	Follow-up  Continued  Continued  Follow-up
WPRO	Sensitize countries as to the need to set up systems for assessing quality of health care maintenance of efficiency of health workers, and the provision of continuing education by distribution of relevant literature.	Regional seminar on peer review of quality care assessment and role of continuing education.	National seminars on the same subjects discussed in the 1979 regional seminar.	Continued; Set up system for peer review in some countries	Continued	Seminar to review progress; modify programmes based on findings of seminars and experience at country level.
HQ	Field test guidelines on development of continuing education programmes for selected categories of health workers based on 1977 work (i.e. nursing/midwifery).  Develop procedures to implement alternative systems of continuing education (cf B.3.3)	Issue of revised guidelines.  Design field tests of a selected number of systems of continuing education.	Follow-up utilization of guidelines, including application to other categories of health workers; design study to investigate ways of strengthening institutions to implement continuing education programmes.  Field test in selected countries.	Continued: collaboration with selected institutions for implementation of study.  Field testing continued. Develop evaluation procedures, and issue preliminary guideline.	Analysis of user data and issue of revised guidelines; study continued.  Field testing continued. Implement evaluation procedures.	Evaluate experiences and prepare strategy for implementation of continuing education at national level.  Analyze data; consultation to evaluation experience.

**TARGET:** A.5 DISCOURAGEMENT OF UNDESIRABLE MIGRATION OF HEALTH PERSONNEL AS EVIDENCED BY THE LOCATION AND RETENTION OF THEM IN THE COUNTRIES, AND PLACES WITHIN COUNTRIES, WHERE THEY ARE MOST NEEDED

**ACTIVITY:** A.5.1 Assessment of present systems of mutual recognition of qualifications and diplomas

	1978	1979	1980	1981	1982	1983
AFRO	No activities envisaged					
AMRO	Technical and budgetary preparation from Inter-American study on certification	Inter-American study on certification in selected fields	First working group on certification in selected fields	Expansion of the Inter-American study on certification	2 <sup>nd</sup> Working group on certification in selected fields	Follow-up
EMRO	No activities envisaged					
EURO	Cooperation with international organizations in Europe on mutual recognition of qualifications and diplomas	continued	continued	continued	continued	continued
SEARO		Develop protocol for study on the international compatibility of degrees and diplomas to facilitate their mutual recognition within the region	Implement study	continued	Analysis of study results and review by consultation	Implementation of meeting recommendations
WPRO	No activities envisaged					
HQ	Implementation of international study of present recognition of qualifications and diplomas  Collaboration with UNESCO in promoting and developing regional conventions and regional and national mechanisms for mutual recognition of qualifications and diplomas	Completion of study; analysis of results and preparation of report  continued	Issue of report and follow-up of implementation of recommendations  continued	Follow-up. Supplementary study on the status of present recognition of qualifications  continued	Follow-up. Analysis of results of study and preparation of report  continued	Follow-up. Issue report  continued

TARGET: A.5 DISCOURAGEMENT OF UNDESIRABLE MIGRATION OF HEALTH PERSONNEL AS EVIDENCED BY THE LOCATION AND RETENTION OF THEM IN THE COUNTRIES AND PLACES WITHIN COUNTRIES, WHERE THEY ARE MOST NEEDED

ACTIVITY: A.5.2 Collaboration in implementing strategies to control undesirable migration in response to country requests

	1978	1979	1980	1981	1982	1983
AFRO	No activities envisaged					
AMRO		Seminar on the study of health manpower migration	Follow-up with promotion of technical cooperation between countries	Caribbean conference on health manpower migration continued	continued	continued
EMRO	No activities envisaged					
EURO	c.f. A.5.1		Study of socio-geographical distribution of trained health personnel	Evaluation	Promotion of implementation of recommendations	continued
SEARO	Develop intervention strategies to control undesirable migration of health manpower in countries	Promote implementation in a few countries	Continued implementation; consultation on health manpower migration	Follow-up recommendations of consultation	Consultation to assess experience in implementing intervention strategies	Report issued on revised intervention strategies
WPRO	No activities envisaged					
HQ	Collaboration in implementing strategies in response to regional requests on the basis of results of WHO multinational study on the international migration of physicians and nurses	continued	continued	continued	continued	continued

TARGET: B.1 DEVELOPMENT OF EDUCATIONAL INSTITUTIONS WITH EMPHASIS ON THE INTERMEDIATE AND AUXILIARY LEVELS AS EVIDENCED BY THE INCREASE OF TOTAL HEALTH PERSONNEL, PARTICULARLY THOSE IN CHARGE OF PRIMARY HEALTH CARE SERVICES TO UNDERSERVED POPULATIONS

ACTIVITY: B.1.1 Collection, maintenance and distribution of information regarding training institutions

	1978	1979	1980	1981	1982	1983
AFRO	Issue regional directory of training institutions and related resources.	Update	Update	Update	Update	Update
AMRO	Issue regional directory of schools of medicine and public health.  Continued updating and dissemination of information on training programmes for technical auxiliary personnel,	Issue regional directory of schools of nursing and midwifery,	Issue regional directory of schools of dentistry and pharmacy.	Issue regional directory of training programmes in environmental health and veterinary medicine.	Update regional directory of schools of medicine and public health.	Update regional directory of schools of nursing and midwifery.
EMRO	Up-date registry/directory of educational and training programmes for health personnel.  Up-date registry on nurses.	Prepare questionnaire on the utilization and analyze results.  Continued	Follow-up  Continued	Prepare revised directory.  Continued	Issue revised directory.  Continued	Continued revision.  Continued
EURO	Determine criteria for including training programmes in information systems.  Continue development of the nursing information system including register of post-basic courses for nurses and midwives,	Identify actual and potential suitable training programmes particularly in primary health care applying those criteria.  Continued	Continued  Continued	Continued  Continued	Continued  Continued	Continued  Continued
SEARO	Prepare inventory of training facilities/programmes in each country in relation to their needs and resources.	Issue regional directory of training facilities/programmes for various categories of health workers (including teacher training programmes).  c.f. C.1.2	Update	Update	Update	Issue revised directory.
WPRO	Updating of 1977 edition of registry of training courses for health staff.	Issue of new edition of registry of training courses.	Update	Issue revised edition.	Update	Issue revised edition.
HQ	Working group on WHO policies and procedures for preparation, publication and evaluation of world directories.	Continuation of preparation and issue of world directories according to agreed cycle.	Continued	Continued	Continued	Continued

TARGET: B.1 DEVELOPMENT OF EDUCATIONAL INSTITUTIONS WITH EMPHASIS ON THE INTERMEDIATE AND AUXILIARY LEVELS, AS EVIDENCED BY THE INCREASE OF TOTAL HEALTH PERSONNEL, PARTICULARLY THOSE IN CHARGE OF PRIMARY HEALTH CARE SERVICES TO UNDERSERVED POPULATIONS

ACTIVITY: B.1.2 Establishment of criteria for, and support to, the development of new training institutions as well as the reform and strengthening of existing ones

	1978	1979	1980	1981	1982	1983
AFRO	<p>Design of studies to identify factors that favour or impede improvement in the quality and quantity of health workers, including mechanisms available that influence changes in the educational systems such as: (a) range in strategies and environments to which students are exposed and their relation to goals of primary health care; (b) evaluation/reward system.</p> <p>Collaborate with countries in conducting national and inter-country training programmes for all categories of health workers at basic, post-basic and post-graduate levels with regular evaluation.</p>	<p>Implementation of studies in at least 3 countries.</p> <p>Continued; evaluation; revision of programmes.</p>	<p>Studies continued</p> <p>Continued</p>	<p>Analysis of results of field studies. Collaborate with HQ in preparing guidelines on alternative approaches to strengthen training programmes and institutions including the development of programmes for new categories of health workers.</p> <p>Continued</p>	<p>Draft guidelines issued for review and comments.</p> <p>Continued</p>	<p>Issue revised guidelines.</p> <p>Continued</p>
AMRO	<p>Collaboration with countries in institutional and programme development.</p> <p>Collaboration with countries in identifying the needs for nurse practitioners and other categories of health personnel and support to existing courses for nurse practitioners.</p> <p>Follow up the elaboration of a guide for training of rural health auxiliary nursing personnel and regional courses for instructors of auxiliary programmes.</p> <p>Selection of centres and trial of new models and techniques for the preparation of rural health auxiliaries and nursing personnel on programmes based on problem-solving and interaction (auxiliary-community)</p> <p>Development of short courses for training the teachers of selected countries in the new approach to auxiliary training.</p> <p>Follow-up of workshop on training and education of technical and auxiliary personnel and related activities in 1977.</p>	<p>Collaboration continued</p>	<p>Continued</p> <p>Review and/or establishment of criteria for organizational changes in existing institutions.</p> <p>Review of experiences and achievements on training and utilization of technical and auxiliary personnel in selected countries or areas.</p>	<p>Continued</p> <p>Extension of the project design for the evaluation of different approaches in training rural health auxiliaries; development of guidelines and recommendations.</p> <p>Revision of curriculum, adjusted according to identified needs. Continuation of teachers' training through in-service education programmes. c.f. C.1.2</p>	<p>Continued</p>	<p>Continued</p> <p>Comparison of teams in different country situations at different levels of health services.</p>

ACTIVITY: B.1.2 - continued

	1978	1979	1980	1981	1982	1983
EMRO	<p>Continued support of health manpower development institutions (HMDI) in six countries.</p> <p>Continue to collaborate in the planning and development of new health training institutions and promote the reform of existing ones.</p> <p>Continued collaboration with selected multi-professional health training institutions which have specific innovative programmes.</p>	<p>Continued</p> <p>Continued</p> <p>Continued</p> <p>Convene a working group to study the obstacles to reform of educational practices and the delay factors in the implementation of innovations.</p>	<p>Continued</p> <p>Continued</p> <p>Continued</p> <p>Collaborate with one country in field testing recommendations based on case studies (prepared by HQ in 1978) on innovative training programmes for health professionals and auxiliaries.</p>	<p>Continued</p> <p>Continued</p> <p>Continued</p> <p>Analyse results of field testing and prepare guidelines on alternative approaches (cf HQ B.1.3)</p>	<p>Continued</p> <p>Continued</p> <p>Continued</p> <p>Review guidelines</p>	<p>Continued</p> <p>Continued</p> <p>Continued</p> <p>Publish and distribute revised guidelines to all countries in the Region.</p>
EURO	<p>Assessment of needs for setting up environmental health training institutions.</p> <p>Collaboration with selected Member States and specific institutions within those states to strengthen the development of training institutions and fill gaps in team development.</p>	<p>Continued</p> <p>Continued</p> <p>Collaboration with HQ in the implementation of studies in selected countries on the establishment of criteria and guidelines for the development of new institutions and the reforming and strengthening of existing ones.</p>	<p>Continued</p> <p>Collaboration with countries in setting up environmental health institutions.</p> <p>Continued</p> <p>Continued</p>	<p>Continued</p> <p>Continued</p> <p>Continued</p>	<p>Continued</p> <p>Continued</p> <p>Continued</p>	<p>Continued</p> <p>Continued</p> <p>Continued</p>
SEARO	<p>Establish criteria for creation of new training institutions/programmes for professional and auxiliary health personnel and make recommendations for improvement and expansion of existing ones in at least 2 countries.</p>	<p>Continued in 2 additional countries.</p> <p>Implement recommendations for improvement in countries where review has been completed.</p>	<p>Continued in 3 additional countries.</p> <p>Continued</p>	<p>Continued in remaining countries.</p> <p>Continued</p>	<p>Continued</p>	<p>Evaluation of the programme.</p>

ACTIVITY: B.1.2 - continued

	1978	1979	1980	1981	1982	1983
SEARO (cont.)	<p>Review of field practice areas in at least 2 countries; recommendations made for establishment or improvement.</p> <p>Identify institutions and programmes oriented towards team training and team work; elaborate pilot project on multi-professional training programmes for community health teams.</p>	<p>Continued in 2 additional countries.</p> <p>Implement recommendations in countries where reviews and recommendations made.</p> <p>Collaboration in developing and/or strengthening these institutions or programmes.</p> <p>Implement pilot project.</p> <p>Travelling seminar for teachers on team training and teamwork. c.f. C.1.2</p>	<p>Continued in 3 additional countries</p> <p>Continued</p> <p>Continued</p> <p>Continued</p> <p>Follow-up</p>	<p>Continued in remaining countries</p> <p>Continued</p> <p>Continued</p> <p>Continued</p> <p>Travelling seminar for teachers on team training and teamwork.</p>	<p>Continued</p> <p>Continued</p> <p>Evaluate pilot project</p> <p>Follow-up</p>	<p>Evaluation of the programme.</p> <p>Continued</p> <p>Follow up recommendations.</p> <p>Travelling seminar for teachers on team training and teamwork.</p>
WPRO	<p>Promote utilization of auxiliary health personnel especially medical assistants.</p> <p>Cf B.2</p> <p>Continue support to training institutions for all categories of health personnel.</p>	<p>Collaborate with countries in establishing training programmes for auxiliary personnel; evaluate effectiveness of already existing ones and modify as necessary.</p> <p>Continued</p>	<p>Continued</p> <p>Continued</p>	<p>Continued</p> <p>Continued</p>	<p>Continued</p> <p>Continued</p>	<p>Continued</p> <p>Continued</p>
HQ	<p>Design studies for the establishment of criteria and guidelines for the development of new training institutions and the reform of existing ones.</p> <p>Inter-regional workshop to define strategies for health team development.</p> <p>c.f. B.2</p>	<p>Collaborate in implementing studies in selected countries and institutions.</p> <p>Protocol for research in methods of institution strengthening and organizational development.</p> <p>Adaptation of strategies for implementation at country level.</p>	<p>Studies continued: analysis of field studies; preparation of draft guidelines.</p> <p>Collaborate in implementing studies in selected countries.</p> <p>Follow-up</p>	<p>Issue revised guidelines.</p> <p>Studies continued; analysis and preparation of report.</p> <p>Follow-up</p>	<p>Follow-up</p> <p>Consultation for planning strategies for implementing recommendations of report.</p> <p>Evaluation of effectiveness of various strategies used for health team development.</p>	<p>Follow-up</p> <p>Follow-up</p> <p>Issue of guidelines; identification of new team training methods.</p>

TARGET: B.1 DEVELOPMENT OF EDUCATIONAL INSTITUTIONS WITH EMPHASIS ON THE INTERMEDIATE AND AUXILIARY LEVELS AS EVIDENCED BY THE INCREASE OF TOTAL HEALTH PERSONNEL, PARTICULARLY THOSE IN CHARGE OF PRIMARY HEALTH CARE SERVICES TO UNDERSERVED POPULATIONS

ACTIVITY: B.1.3 Comparative analysis of, and support through networks of national groups to, non-traditional schemes of institutional and programme development

1978

1979

1980

1981

1982

1983

AFRO	Preparation of case studies on non-traditional types of training programmes for health professionals and auxiliaries (e.g. competency based curricula).	Continued	Editing and issue of case studies.	Follow-up on B.1.2		
AMRO	Research and development by national groups on inter-institutional coordination. Follow-up of activities in 1976/77 with the Latin-American Programme of Educational Development in Health (PLADES). Develop strategies of technical cooperation; identify new national groups; exchange experiences; evaluation.  c.f. A.1.3		Analysis of experience with inter-professional approach in the teaching/learning process as related to health services and community development.	Implement mechanisms of coordination through national groups; support the establishment of national networks of integrating training with services. Development of strategy to improve cooperation and rationale on the utilization of international resources in HMD	Comparative review of inter-professional models in education and training.	
EMRO	Continued collaboration with selected multi-professional health training institutions which have specific innovative programmes.	Continued	Continued	Continued	Continued	Continued
EURO	Identify innovative programmes; promote planning process for new programmes and institutions.	Study selected programmes and develop evaluation criteria.	Issue reports with evaluation criteria.	Develop cross-national evaluation studies.	Implement studies.  Use selected programmes to train educational administrators and managers.	Consultation on study results  Continued
SEARO	c.f. B.1.2					
WPRO	Multidisciplinary inputs involving management training and support; primary health care; and HMD in the progressive education programme at the Tacloban College of Health Services, Philippines.					
HQ	Collection of information on innovative educational programmes and development of network for collaboration, information exchange and support in overcoming resistance to change.	Consultation to review innovative educational programmes, design related research studies, and propose improved mechanisms for network.	Improvement in and continued collaboration and support to network.	Continued	Continued; follow-up consultation to review progress, and issue of report.	Network modified following 1982 consultation; feedback on report from user institutions.

TARGET: B.2 DESIGN AND DEVELOPMENT OF TASK- AND COMMUNITY-ORIENTED TRAINING PROGRAMMES FOR ALL LEVELS OF HEALTH PERSONNEL WHICH ARE SPECIALLY RELEVANT TO NEEDS OF UNDERSERVED POPULATIONS AND HAVE POTENTIAL FOR REPLICATION, AS REFLECTED BY THE NUMBER OF PROGRAMMES WHICH HAVE BEEN DEVELOPED AND/OR CHANGED ACCORDINGLY

	1978	1979	1980	1981	1982	1983
AFRO	<p>Follow-up of 1977 Regional Expert Committee for HMD. Workshops at country level to prepare strategy for multi-professional health team development.</p> <p>Collaborate with countries in the review of systems of education of health workers, especially those involved in primary health care (PHC).</p> <p>Preparation of case studies in illustrating different approaches to health team development such as multi-professional training.</p>	<p>Responses on strategy from countries. Meeting of Expert Committee "teaching of health sciences &amp; multi-professional training".</p> <p>Development of guidelines in collaboration with HQ for the preparation of task-based and community-oriented curricula.</p> <p>Case studies continued.</p>	<p>Issue of report on revised health team development strategy; meeting of deans of medical schools and directors of University centres for health sciences to review health team strategy.</p> <p>Development of guidelines continued; collaborate with institutions to prepare model curricula &amp; supportive learning materials based on community health problems and needs.</p> <p>Editing of case studies.</p>	<p>Follow-up of application. Monitor trends in development of teams in health care services.</p> <p>Issue guidelines on development of community-oriented curricula; field trials of model curricula &amp; learning materials completed; continued development of new materials. of HQ seminar</p> <p>Follow-up in C.2.2.</p>	<p>Studies in effectiveness of various patterns of teams in different health care settings and levels.</p> <p>Follow-up; issue of field-tested learning materials; continued development of others.</p>	<p>Analysis of studies &amp; issue of report; collaboration with countries in identification of new team training methods for further cycle of studies.</p> <p>Continued.</p>
AMRO	<p>Development of strategies for a new role of nurses in the delivery of health care, and cooperation with schools of nursing in the development of basic curricula accordingly.</p> <p>Identify institutional experiences and needs for different health care levels in training technical &amp; auxiliary personnel.</p> <p>Develop strategies and guidelines for the design and implementation of community-health oriented curricula in the schools of nursing/dentistry.</p> <p>IIInd regional course for instructors of nursing programmes in community health.</p> <p>Follow-up studies of compulsory rural service ("social service") for graduates in medicine and nursing and development of strategies to improve the effectiveness of such services.</p> <p>Assistance to improve new training programmes and strengthening of existing programmes in medicine, veterinary medicine, dentistry and sanitary engineering for different levels of personnel.</p> <p>Development of training programmes in water supply and sewerage.</p>	<p>Follow-up.</p> <p>IIIInd regional course for instructors of nursing programmes in community health.</p> <p>Promote coordination among educational departments and health services in the supervision of compulsory rural service (of A.1.1 and HQ seminar)</p>	<p>Follow-up.</p> <p>Institutionalization at country level of the post-basic training of nurses in community health and PHC.</p> <p>Regional seminar "training in solid waste disposal"</p>	<p>Promote new task-oriented programmes for technical and auxiliary personnel with emphasis on PHC.</p> <p>Implementation of policies for the training in solid waste disposal.</p>	<p>Continued.</p> <p>Develop models &amp; general guidelines for a better utilization of compulsory services in rural areas.</p> <p>Exchange of experiences, evaluation and issue of recommendations on training programmes in water supply, sewerage and solid waste disposal.</p>	<p>Continued.</p>

	1978	1979	1980	1981	1982	1983
EMRO	<p>Collaborate with at least 2 training institutions (1 professional and 1 auxiliary level) to determine relevance and effectiveness in meeting health needs of the population.</p> <p>Survey of existing patterns and systems of nursing in 6 countries of the Region.</p> <p>Develop modular curricula in 2 midwifery education programmes and test modules developed in 1977 workshop.</p> <p>Support manpower studies to determine requirements for dental health workers based on community needs.</p> <p>Conduct study on the regional training needs (all categories) and resources in environmental health in half of the countries of the Region.</p> <p>Conduct, in 2 countries where training of primary health workers is a national priority, workshops on the use/adaptation/translation of manual on training and utilization of primary health workers.</p>	<p>Support the institutions in defining their objectives on the basis of true health needs and preparing task-based community-oriented curricula.</p> <p>Meeting of the Regional Advisory Panel on Nursing (REAPN) to evaluate nursing involvement in PHC.</p> <p>Edit, revise and distribute modules to other countries. Collaborate in development of other modules.</p> <p>Continued support to member countries; conduct study on regional needs for dental care.</p> <p>Continued in the other half of the countries of the Region.</p> <p>Conduct workshops for the training of the required numbers of teachers of primary health workers.</p>	<p>Continued support to the institutions in implementation of new curricula; develop guidelines on the preparation of task-based, community-oriented curricula.</p> <p>Support the activities of the REAPN.</p> <p>Develop in 2 countries training areas to demonstrate safe effective nursing care.</p> <p>Develop in 1 country job descriptions and procedure manuals for training of and services by middle level nurses.</p> <p>Support at least 2 interested countries in using the modular curriculum.</p> <p>Issue report on study; prepare and issue guidelines on development of training programmes for dental health workers.</p> <p>Issue report on study; prepare and issue guidelines on the revision and/or development of training programmes for environmental health workers, according to identified needs.</p> <p>Support implementation of training programme, develop criteria for evaluation of programme of C.I.L.I.</p>	<p>Collaborate in evaluation of training programmes in 2 other countries; issue guidelines on the development of task-based, community-oriented curricula.</p> <p>Develop criteria for evaluation of the role of nursing in PHC.</p> <p>Continued in at least 2 other countries.</p> <p>Support the application of job descriptions and manuals.</p> <p>Continued support; develop criteria for evaluation of progress.</p> <p>Collaborate with countries in development of basic training programmes for dental health workers to meet priority needs identified in the study.</p> <p>Collaborate with at least 2 countries in using guidelines to develop appropriate training programmes for various levels of environmental health workers according to identified needs.</p> <p>Follow up implementation and evaluate programmes.</p>	<p>Support institutions in the development of task-based, community-oriented curricula.</p> <p>Evaluate the role of nursing in PHC.</p> <p>Evaluate developed training areas.</p> <p>Evaluate the impact of application of job descriptions and use of manuals.</p> <p>Extend support to other interested countries. Evaluate progress in the first two countries.</p> <p>Continued support for training of dental health workers.</p> <p>Support countries in the implementation of training programmes.</p> <p>Support countries in making necessary revision in programme and teaching/learning materials.</p>	<p>Working Group to review progress and experiences in the development and implementation of task-based community-oriented curricula; revise guidelines.</p> <p>Issue report on evaluation.</p> <p>Issue report on experience gained.</p> <p>Issue report on experience gained.</p> <p>Continued support and evaluation.</p> <p>Follow up progress in training programmes.</p> <p>Continued support to implementation of training programmes and assessment of progress in the 2 countries.</p> <p>Monitor progress and make available revised programme and materials to other countries in the region embarking on the training of primary health care workers of HQ seminar.</p>

ACTIVITY: B.2. (continued)

	1978	1979	1980	1981	1982	1983
EURO	Cooperation with HQ in establishing guidelines for programme development.	Continued.	Implementation of guidelines in 1 country at all levels of health personnel.	Continued.	Continued, implementation in a second country.	Continued.
		Working group on the team approach to primary care.	Implementation at country level in 1 country.	Continued in another country.	Evaluation of implementation in first country.	Evaluation of implementation in second country.
	Initiate project for systematic training of educational programme planners and/or faculty development.	Continued.	Continued.	Continued.	Continued.	Evaluation.
	Cf C.1.2					
	Training programme in environmental science with special reference to task-oriented training programmes.	Continued.	Training in new methods of environmental pollution control.	Continued.	Continued.	Continued.
			Working group on the preparation and use of auxiliaries in the provision of nursing/midwifery services in the European Region.	Follow-up.	Follow-up.	Follow-up.
	Preparation for training in quality control of drugs.	Training in the quality control of drugs.	Reassessment of and preparation for training in the quality control of drugs.	Continued.	Continued.	Continued.
	Evaluation of present teaching practice in a symposium on the teaching of epidemiology and health statistics.	Evaluation.	Follow-up in C.1.2.			
Training in epidemiology and health statistics.	Continued.	Continued.	Continued.	Continued.	Continued.	
				Working Group on the identification and development of learning experiences in the clinical practice of nursing.	Follow-up.	

## ACTIVITY: B.2 (continued)

	1978	1979	1980	1981	1982	1983
SEARO	<p>Review &amp; analysis of curricula of existing training programmes as to their task and community orientation in at least 2 countries</p> <p>Elaboration of training programmes for new categories of health workers (including practitioners of traditional medicine) especially for primary health care in at least 2 countries.</p>	<p>Continued in 2 additional countries.</p> <p>Elaboration of new curricula and development of learning materials in countries where review completed. Cf C.2.2.</p> <p>Continued in 2 additional countries.</p> <p>Preparation of learning materials for these training programmes. Cf C.2.2</p>	<p>Continued in 3 additional countries.</p> <p>Continued.</p> <p>Review and revision of learning materials produced.</p> <p>Continued in 3 additional countries.</p> <p>Continued; review &amp; revision of learning materials.</p> <p>Implementation of programmes when learning materials developed. Cf HQ seminar.</p>	<p>Continued in remaining countries.</p> <p>Continued.</p> <p>Continued in remaining countries.</p> <p>Continued.</p> <p>Continued.</p>	<p>Continued.</p> <p>Continued.</p> <p>Continued</p>	<p>Continued.</p> <p>Continued.</p> <p>Assessment of training programmes.</p>
WPRO	No activities envisaged. Cf	HQ seminars.				
HQ	<p>Based on material (systems &amp; curricula) collected 1977/78 consultation to review systems of education of health professionals &amp; auxiliaries especially those involved in primary health care. Issue of report.</p> <p>Design of studies for the establishment of criteria &amp; guidelines for the development of new programmes &amp; the redesigning of old ones.</p> <p>Preparation of case studies illustrating different approaches to health team development such as multi-professional training.</p> <p>Preparation for data collection on educational programme planning directed towards community health problems.</p> <p>Inter-regional (IR) seminar on PHC workers in WPRO.</p>	<p>Consultation for review of curricula from different programmes &amp; development of a strategy to ensure task-based &amp; community-oriented approaches. Development of guidelines for preparation of curricula.</p> <p>Implementation of studies in selected countries.</p> <p>Case studies continued.</p> <p>Collection of data.</p> <p>IR seminar on training for rural maternity care in AMRO.</p>	<p>Development of guidelines continued; collaboration with institutions for preparation of basic models of curricula &amp; supportive learning materials based on country health problems and needs. Cf C.2.2.</p> <p>Studies continued.</p> <p>Editing &amp; issue of case studies, with guidelines for health team development in different contexts.</p> <p>Preparation of case studies describing the advantages &amp; limitations of such educational programme planning.</p> <p>IR seminar on community/problem-based curricula for nurses in SEARO.</p>	<p>Issue of guidelines on development of community-oriented curricula; field trials of model curricula &amp; learning materials completed; continued development of new materials.</p> <p>Analysis of results of field studies. Preparation and issue of draft guidelines for review &amp; comments.</p> <p>Collaboration with institutions to prepare specific learning materials for training health teams in selected situations. Cf C.2.2</p> <p>Issue case studies; prepare preliminary guidelines on planning of educational programmes relevant to solution of community health problems.</p> <p>IR seminar on health team development in AFRO; IR seminar on community/problem based curricula for physicians in AMRO and EMRO.</p>	<p>Follow up. Issue of field-tested learning materials &amp; continued development of new materials.</p> <p>Issue of revised guidelines.</p> <p>Field trials of completed learning materials and continued development of new material.</p> <p>Promote regional &amp; national workshops on local application of guidelines; collect feedback from workshops &amp; users; revise guidelines.</p> <p>IR seminar on feldshers in EURO.</p>	<p>Consultation to assess experience to date. Issue of field-tested learning materials &amp; continued development of new materials.</p> <p>Follow-up.</p> <p>Issue of revised learning packages; field trial of new materials &amp; continued development of others.</p> <p>Evaluation of the impact of workshops; issue of revised guidelines.</p> <p>IR seminar on Traditional Birth Attendants (TBAs) as PHC workers in EMRO.</p>

TARGET B.3

ADVANCED EDUCATION FOR HEALTH PERSONNEL INCLUDING THE SUBJECT MATTER COMPONENT OF TEACHER TRAINING, AS REFLECTED BY THE INCREASE IN THE NUMBER OF SUPERVISORS AND EDUCATORS IN THE VARIOUS AREAS OF HEALTH WORK EFFECTIVELY TRAINED FOR THEIR SPECIFIC TASKS

ACTIVITY B.3.1

Identification of referral and supervisory systems, and of training needs for instruction and supervision of different levels of health workers, and promotion of appropriate systems

	1978	1979	1980	1981	1982	1983
AFRO	Design of comparative study in collaboration with HQ on referral and supervisory systems, staffing patterns and competencies etc. for health teams and identification of indicators to measure responsiveness of services to community needs.	Implementation of study in at least two countries.	Study continued.	Analysis of study results; and collaboration with HQ in the preparation of guidelines for referral and supervisory systems, staffing patterns, etc. Meeting of Expert Committee (review of Regional Experiences -(Health Services Manpower Development) of A.1.2	Preparation of report on strategies and guidelines for application.	Expert Committee Meeting on "New health team training methods"
AMRO	Comparison of referral and supervisory systems and identification of training needs for instruction and supervision at different levels in selected groups and countries each year, with subsequent improvement of teachers' and tutors' training programmes in different health professions (medicine, nursing, dentistry). Review of specific needs for teachers and tutors' training in specific programmes.	Development of studies on referral and supervision methods applied to different personnel. Development of appropriate systems.	Development of studies on referral and supervision methods applied to different categories of appropriate systems.	Analysis of evaluation methods as applied to supervision and referral systems.	as applied to supervision and referral systems.	Review of needs and new training methods for supervision. Evaluation of the degree of relationship between activities, training experience and regional priorities.
EMRO	No activities envisaged					
EURO	No activities envisaged					
SEARO	Collaboration with HQ on design of comparative study on referral and supervisory systems, staffing patterns and competencies for health teams.	Implementation of study in at least one country.	Study continued.	Analysis of results; consultation to recommend alternative strategies and prepare guidelines.	Issue of report on strategies and guidelines.	Follow-up.
WPRO	No activities envisaged					
HQ	Design a comparative study on: referral and supervisory systems, staffing patterns and competencies, etc. for health teams, and identification of indicators to measure responsiveness of service to community needs.	Implementation of study in selected countries.	Study continued; meeting of principal investigators.	Analysis of study results; consultation to recommend alternative strategies and prepare guidelines for referral and supervisory systems, staffing patterns, etc.	Issue of report on strategies and guidelines for application.	Follow-up.

**TARGET:** B.3 ADVANCED EDUCATION FOR HEALTH PERSONNEL INCLUDING THE SUBJECT MATTER COMPONENT OF TEACHER TRAINING, AS REFLECTED BY THE INCREASE IN THE NUMBER OF SUPERVISORS AND EDUCATORS IN THE VARIOUS AREAS OF HEALTH WORK EFFECTIVELY TRAINED FOR THEIR SPECIFIC TASKS

**ACTIVITY:** B.3.2 Evaluation, follow-up and improvement of post-graduate/post-basic training, particularly in public health and community health

	1978	1979	1980	1981	1982	1983
AFRO		Evaluation and revision of post-basic and post-graduate training (Kampala, Cotonou, Lomé, Lagos).  Participate in 8th Meeting of Directors of Schools of Public Health.	Continued.	Survey on utilization of trainees.  Host 9th Meeting of Directors of Schools of Public Health.	Results of survey analysed.	Follow-up.  Participate in 10th Meeting of Directors of Schools of Public Health.
AMRO	Continued collaboration with non-Governmental Organizations (NGOs) - e.g. Asociacion Latino-americana de Escuelas de Salud Publica (ALAESP); Federacion Panamericana de Asociaciones de Facultades y Escuelas de Medicina (FEPAFEM); and Union de Universidades Latino americanas (UDUAL); World Federation for Medical Education (WFME), etc.  X ALAESP Conference.  Follow-up of Latin American experience with teaching of Public Health preventive and social medicine; community-oriented training in regionalized health service areas for all health-related professions. Continued cooperation with schools of public health and social medicine.	Follow-up.  Exchange of teaching personnel, material and experiences among post-graduate courses in social medicine.	XI ALAESP Conference.	Follow-up.	XII ALAESP Conference.	Follow-up.  curriculum and recent approaches of in-service public health and post-graduate courses in preventive and social medicine.
EMRO	Regional Working Group on post-graduate education in public health; issue of report.	Collaborate with at least one school of public health in the Region in evaluation of its programme.  Participate in 8th Meeting of Directors of Schools of Public Health.	Support schools of public health in implementing necessary changes in the programme to meet health services and community needs.	Continued support; follow-up implementation.  Participate in 9th Meeting of Directors of Schools of Public Health.	Review progress made in post-graduate education in public health.	Encourage and support more schools of public health in the evaluation of their programmes.  Participate in 10th Meeting of Directors of Schools of Public Health.
EURO	Assessment of training pattern of schools of public health.  Technical cooperation with the Association of Schools of Public Health in the European Region (ASPHER) in developing guidelines for post-graduate training in public health.  Support teaching staff development for public health education; promote post-graduate courses in different disciplines.	Collaboration in improving training patterns in schools of public health.  Continued.  Continued.	Continued.  Follow-up.  Continued.	Continued.  Continued.  Continued.	Continued.  Continued.  Continued.	Continued.  Continued.  Continued.

ACTIVITY: B.3.2 (Continued)

	1978	1979	1980	1981	1982	1983
SEARO	Inter-country meeting to review the various aspects of developing post-graduate training centres in the region.	Follow-up recommendations of inter-country meeting.  Host the 8th Meeting of Directors of Schools of Public Health.	Continued.	Continued.  Participate in 9th Meeting of Directors of Schools of Public Health.	Evaluate developmental efforts.	Follow-up.  Participate in 10th Meeting of Directors of Schools of Public Health.
WPRO	Continue to support the development of the Institute of Public Health, Philippines.	Participate in the 8th Meeting of Directors of Schools of Public Health.  Evaluate effectiveness of graduates in collaboration with the Department of Health.	Continue evaluation and negotiate modifications in the curriculum.	Participate in the 9th Meeting of Directors of Schools of Public Health.  Implement curriculum changes.	Plan the 10th Meeting of Directors of Schools of Public Health in WPRO.  Continued.	Host the 10th Meeting of Directors of Schools of Public Health.  Continued.
HQ		Comparative survey of post-graduate training programme in public health.	Continued.	Study Group to review and assess findings for relevance and future direction: issue of report.	Follow-up.	Follow-up.

TARGET: B.3 ADVANCED EDUCATION FOR HEALTH PERSONNEL INCLUDING THE SUBJECT MATTER COMPONENT OF TEACHER TRAINING, AS REFLECTED BY THE INCREASE IN THE NUMBER OF SUPERVISORS AND EDUCATORS IN THE VARIOUS AREAS OF HEALTH WORK EFFECTIVELY TRAINED FOR THEIR SPECIFIC TASKS

ACTIVITY: B.3.3 Continuous review and improvement of the administration of the fellowship programme and national postgraduate/post-basic programmes

	1978	1979	1980	1981	1982	1983
AFRO	Continue monitoring of WHO Fellowship programme. Award of travelling fellowship to Primary Health Care trainers.	Continued. Continued.	Continued. Continued.	Continued. Continued.	Continued. Continued.	Continued. Continued.
AMRO	Issue Directory of Training Programmes in the Health fields in Latin America and the Caribbean, to facilitate fellowship programme. Establish preliminary approach for better utilization of different institutions regarding training programmes through PAHO/WHO fellowship programme.	Continue administrative processing of PAHO/WHO fellowship programme. Review directory of training programmes and redesign for special information based on countries needs and continued updating. Implement coordination schemes of training for selected candidates in fellowship programme.	Improve information on training resources, updating continued. Expand the coordination with institutions in the region in advanced international public health.	Evaluation of coordinated advanced training in international public health; study and develop strategies for expansion to include other regions.	Continued. Refinement of information systems on training resources in countries of the region. Implement coordinated training in advanced international public health with institutions in other regions.	Continued. Evaluation and recommendations for improvement of training programmes coordinated with PAHO/WHO fellowships.
EMRO	Continued support of development of existing and new post-graduate training of physicians relevant to the health needs of the region in at least five countries as identified in the survey of 1975. Award fellowships for the training of health personnel at various levels in accordance with the health service needs of countries giving special emphasis to categories that are at present deficient.	Continued support to post-graduate training programmes of physicians Collaborate with at least one country in the region in evaluating its post-graduate programme for physicians to determine their relevance and effectiveness in meeting the health needs of the population. Continued. Meeting of national fellowships Officers to review programme. Prepare a questionnaire and guidelines to assess utilization of fellowships by member countries of the region in previous ten years.	Support collaborating medical schools in defining objectives of their post-graduate training programmes for physicians on the basis of health care needs, and preparing competency-based task-oriented curricula to meet them Cf. B.2. Collaborate with at least two countries in the region in developing or expanding post-graduate training programmes for health personnel other than physicians. Continued, Introduce necessary improvements in the administration of fellowships on basis of review. Continued.	Support implementation of post-graduate curriculum developed by collaborating schools. Encourage medical schools to participate in post-graduate training of health personnel other than physicians and support development of relevant curricula for the training of such personnel in accordance with national priority needs. Continued. Meeting of national fellowships officers to review draft questionnaire and agree on appropriate ways of its administration in countries.	Continue support and follow-up implementation. Continued encouragement of multi-professional training and support to implementation of developed curricula. Continued. Administer questionnaire and analyse results.	Continued support; follow-up implementation of post-graduate programmes for personnel other than physicians. Continued. Meeting of national fellowships officers to discuss results of utilization study and suggest effective and practical ways of improving utilization of WHO fellowships by member countries.

ACTIVITY: B.3.3 (Continued)

	1978	1979	1980	1981	1982	1983
EURO	Exchange of information between providing and receiving countries on placement, supervision and follow-up of WHO fellows.	Continued.	Continued.	Continued.	Continued.	Continued.
	Development of postgraduate training programmes in environmental science.	Continued.	Continued.	Continued.	Continued.	Continued.
	Postgraduate courses in food hygiene for participants from European and developing countries.	Continued.	Continued.	Continued.	Continued.	Continued.
	Prepare meeting of national fellowship administrators of the European Region.	Regional meeting of national fellowship administrators	Meeting on the criteria of selection of WHO fellows: feedback from the four main receivers of WHO fellows.	Regional meeting of national fellowship administrators.	Meeting of selected WHO fellows in leading positions to reconsider scope and purpose of EURO fellowship programme.	Regional meeting of national fellowship administrators.
	Review of main institutions receiving fellows; distribution of information.	Continued.	Continued.	Continued.	Continued.	Continued.
	Specify criteria for evaluating impact, effectiveness and efficiency of the fellowship programme.	Continued evaluation of the fellowship programme.	Continued.	Continued.	Continued.	Continued.
SEARO	Continued evaluation of the fellowship programme.	Follow-up on recommendations.  Develop methodology for more effective evaluation.	Field testing.	Analysis of results.  Issue guidelines.	Evaluation of fellowship programme.	Follow-up on recommendations of evaluation.
	Review of the fellowship programme by the Regional Committee.	Implementation of recommendations.	Continued.	Prepare report and other materials for submission to HQ.	Discussion by Executive Board of the 10 year evaluation report of WPRO's fellowship programme.	Follow-up.
HQ	Develop guidelines to implement alternative systems of postgraduate and postbasic education, including supportive materials for use in continuing programmes (cf A.4.2 and C.2.2).	Design field tests of a number of systems of continuing education.	Field test in selected countries.	Field testing continued; develop evaluation procedures.	Field testing continued; implement evaluation procedures.	Analyze data: consultation to evaluate experience.
	Continued monitoring of WHO fellowship policies and programmes.	Continued.	10 year evaluation study of the fellowship programme.	Prepare evaluation report for Executive Board.	Present report to Executive Board.	Monitoring continued.

TARGET: C.1 DEVELOPMENT OF A SYSTEMATIC APPROACH TO EDUCATIONAL PLANNING AND TECHNOLOGY, INCLUDING TEACHER-TRAINING, AS MEASURED BY IMPROVED PERFORMANCE AND APPROPRIATENESS OF TRAINING PROGRAMMES

ACTIVITY: C.1.1 Identification and assessment of, and support to, educational systems, methodological approaches, evaluation schemes and related technologies to strengthen health personnel training and research programmes.

	1978	1979	1980	1981	1982	1983
AFRO	C.f. C.1.2  Award grants to teachers for studies on application of selected educational methods.	Follow up from C.1.2. Continued promotion.  Field trials of selected innovative educational approaches (cf HQ below).  Continued.	Collaboration with at least three countries to conduct studies on the provision of "comprehensive" educational centres serving national needs.  Continued.  Completion of studies and issue of reports on results.	Promotion continued including incorporation of centres into Country Health Programmes (CHP); analysis of the study by institutions in the three countries.  Assessment.  Further cycle of grants awarded.	Promotion continued; collation of data from whole programme and analysis.  Follow-up.  Continued special studies.	Review of functions and activities of centres for health manpower development institutions (HMDIs).  Follow-up.  Completion of studies; issue of report and results.
AMRO	Diagnosis of requirement of new educational methodologies in auxiliary schools and training programmes.  Promoted by Latin American Centres for Educational Technology for Health (CLATES Rio and Mexico), development of network of national Health Education Research and Development Nuclei (NIDES) to effect research and development in medical, nursing, dental, health engineering and auxiliary education. 10 NIDES	Development of standards, criteria and alternative plans for incorporating this educational methodology.  Meeting of specialists in evaluation.  12 NIDES	Promotion of alternative plans in five countries of the region each year. Meetings of specialists in sub-regions for local adaptation of alternative plans (two each year) and for evaluation of programme (two each year).  15 NIDES			Evaluation of training institutions and programmes. Meeting of specialists.  Evaluation of the network.
	Development of Nursing Educational Technology sub-centres 15 sub-centres	Development of Nursing Educational Technology sub-centres 20 sub-centres	Implementation of the network at country level.	Implementation of new Nursing Educational Technology sub-centres in the countries		
	Development of network in environmental health (education,		information and technological programmes) in two selected			
EMRO	Continued support to four existing centres/units in educational research and development and teacher-training; promote the establishment of four additional centres.	Workshop on curriculum design at a HMDI.  Prepare and issue guidelines for programmes of educational procedures' evaluation.  Identify three programmes needing diagnostic evaluation.  Continued in the eight centres/units, with emphasis on a selected pair	Promote revised curricula for health workers.  Development of collaborating programmes in evaluation and offer evaluation services to other countries.  Continued with revision of activities as recommended by 1979 working group.	Workshops in another HMDI.  Continued.  Continued with emphasis on another selected pair.	Continued promotion of curricula.  Continued.  Continued with emphasis on another selected pair. Identify centres in two other countries.	Evaluation of impact.  Working group of centre directors to review progress.  Continued with emphasis on another selected pair. Support establishment of identified centres.

ACTIVITY: C.1.1 (continued)

	1978	1979	1980	1981	1982	1983
EMRO (cont)		Working group to establish criteria and guidelines on the role of centres in a collaborative network of research and development.				Working group of centre directors to review progress.
EURO	Preparation of a Study on Documentation of the Nursing Process as a basis for a systematic approach to educational planning.	Meeting of a Working Group on Documentation of the Nursing Process.	Follow-up.	Follow-up.	Preparation of a study on the use of case records/histories to improve nursing midwifery patient/client care	Follow-up.
	Development and field-testing of designs in documentation of the nursing process and training of staff in the participating centres.	Application of designs.	Technical Advisory Group on the Nursing Process. Continued.	Follow-up. Continued.	Technical Advisory Group on the Nursing Process. Continued.	Follow-up. Continued.
SEARO	Collaborate with HQ on development of evaluation instruments for students, teachers and programmes.	Continued.	Field-test evaluation instruments.	Promote utilization of tested instruments.		
	Workshop on educational research methodology. Develop protocols for research in evaluating innovative educational programmes.	Follow-up. Implement research.	Workshop on educational research methodology. Continued.	Follow-up. Continued.	Workshop on educational research methodology. Analysis of results; feedback and recommendations.	Follow-up. Follow-up.
WPRO	Implement recommendations of first Working Group on Educational Strategies.	Convene second meeting of Working Group to evaluate and make recommendations.	Implement modifications.	Convene third meeting of Working Group.	Implement revised recommendations.	Follow-up.
HQ	Analysis of study of learning objectives in medical and nursing education.	Issue of report on study: Promotion of definition of learning objectives for schools of health personnel	Development of case studies on the use of learning objectives in programme construction. Continue promotion.	Issue of case studies; consultation to review the use of objectives in programme construction. Continue promotion.	Issue of report; user follow-up. Continue promotion.	Continued.
	Consultation to select innovative educational approaches.	Collaboration in field trials.	Continued.	Assessment and issue of preliminary report.	Consultation to review results.	Follow-up.
	Study on student selection procedures.	Consultation on alternative selection procedures.	Issue of report.	Field studies on application of alternative selection procedures.	Continued studies.	Analysis, and issue of guidelines on student selection procedures.
	Consultation on methodology of teacher evaluation, and issue of manual on evaluation of student performance.	Issue of guidelines on teacher evaluation, and field trial of manual.	Collaboration with institutions for application of teacher evaluation procedures, and revision of manual.	Analysis of results.	Study groups on teacher evaluation, and evaluation of skills of patient management at auxiliary level.	Issue and follow-up of reports.

ACTIVITY: C.1.1 (continued)

	1978	1979	1980	1981	1982	1983
HQ (cont)	<p>Continued design and field-testing of management flowcharts in selected developing countries.</p> <p>Continuation of communication transfer and related projects for continuous education in remote areas in developing countries.</p> <p>Collaboration in the establishment of national Health Manpower Development Institutions (HMDI).</p>	<p>Continued; consultation on use of flowcharts; revision of training manuals.</p> <p>Interregional workshop to develop guidelines for adapting methods and materials to local situations.</p> <p>Continued collaboration; preparation and issue of case studies on alternative approaches to institutional provision of comprehensive educational services.</p>	<p>Continued.</p> <p>Collaboration in field studies to adapt flowchart and other methods to use by village health workers.</p> <p>Issue of guidelines; field trials of selected methods and media in a number of developing countries.</p> <p>Continued collaboration; assistance to selected institutions to conduct studies on the provision of comprehensive educational centres serving national needs.</p>	<p>Continued.</p> <p>Field studies implemented.</p> <p>Continued.</p> <p>Continued collaboration, including incorporation of centres into country health programmes; analysis of studies by the selected institutions.</p>	<p>Continued.</p> <p>Preparation and issue of guidelines for local adaptation.</p> <p>Preparation of guidelines for local adaptation of second series of methods and materials.</p> <p>Continued collaboration; collation of data from whole programme and analysis and issue of report.</p>	<p>Consultation to review programme and identify other promising educational tools for improving patient management and health practice.</p> <p>Follow-up.</p> <p>Issue of guidelines and user follow-up.</p> <p>Consultation to review functioning and activities of HMDIs.</p>

TARGET: C.1 DEVELOPMENT OF A SYSTEMATIC APPROACH TO EDUCATIONAL PLANNING AND TECHNOLOGY INCLUDING TEACHER-TRAINING AS MEASURED BY IMPROVED PERFORMANCE AND APPROPRIATENESS OF TRAINING PROGRAMMES

ACTIVITY: C.1.2 Development of teacher-training programmes at regional and/or national level

	1978	1979	1980	1981	1982	1983
AFRO	<p>Review impact of WHO Teacher Training Programme; promote establishment of national health manpower development institutions (HMDIs).</p> <p>Continued collaboration with countries for development of teacher-training programme at regional and national levels. cf C.1.1.</p>	<p>Follow-up in C.1.1</p> <p>Continued.</p>	Continued.	Continued.	Continued.	Continued.
AMRO	<p>Teacher training courses by Latin American Centre for Educational Technology of Health (CLATES) (Rio and Mexico) centrally and locally, with provision of technical advisory services (with emphasis on training teachers of technical and auxiliary personnel, and on teachers of environmental engineering).</p> <p>Develop large scale training systems (LSTS).</p> <p>Workshop on "teacher evaluation and profiles".</p> <p>Faculty specialization; identification of needs and resources in management.</p>	<p>Programming of LSTS in priority areas. Local adaptation of LSTS in Central American countries.</p> <p>Workshop on "task analysis techniques".</p> <p>Workshops for faculty members in management methods.</p>	<p>Implementation of LSTS. Local adaptation of LSTS in Andean area and Mexico.</p> <p>Workshop on "objective analysis and instructional goals".</p> <p>Specialization of faculty through academic training and inter-country exchange of faculty.</p>	<p>Local adaptation of LSTS in Argentina, Chile, Paraguay, Uruguay, Dominican Republic and the Caribbean.</p> <p>Workshop on "micro-education technique".</p>	<p>Local operation of LSTS in the countries.</p> <p>Workshop on "teaching material development".</p>	<p>Continued local operation; evolution of LSTS.</p> <p>Workshop on "use of audiovisuals".</p>
EMRO	<p>Continued exposure of staff to educational planning and technology through regional workshops; follow-up of participants.</p> <p>Identify resource persons suitable for further training to manage new centres and arrange training for them.</p> <p>Regional and national workshops on training in educational management.</p> <p>Continued supply of guidelines publications and equipment; organize exchange visits between staff of centres; collaborate in the use of centre staff; provide fellowships for staff development; stimulate inter-centre collaboration.</p>	<p>Continued.</p> <p>Working group on role of centres.</p> <p>Continued.</p> <p>Continued, (with emphasis on national and local efforts).</p> <p>Continued as in 1978 and as input to 1979 working group.</p>	<p>Continued.</p> <p>Continued.</p> <p>Continued, (with emphasis on obstacles to educational reforms).</p> <p>Continued; revise if necessary on basis of recommendations of 1979 working group.</p>	<p>Continued.</p> <p>Continued.</p> <p>Support training in educational management.</p> <p>Continued as in 1980; develop criteria for evaluation.</p>	<p>Continued.</p> <p>Continued.</p> <p>Assess impact of training on management.</p> <p>Continued; on the basis of evaluation criteria, carry out on-site evaluation.</p>	<p>Continued.</p> <p>Continued.</p> <p>Continue training and revise programme if necessary.</p> <p>Continued; revised if necessary on basis of report and evaluation of 1983 working group.</p>

ACTIVITY: C.1.2 (continued)

	1978	1979	1980	1981	1982	1983
EURO	Continued collaboration with educational research centres.  Promote the establishment of centres for teacher-training and collaborate with other centres where teachers receive short or long courses.  Collaboration with occupational health and industrial hygiene training centres.  Follow-up of 1977 studies of specific problems of teacher-training programmes and centres.	Continued.  Continued.  Continued.  Meeting of Directors of Teacher-Training Centres.	Continued.  Continued.  Continued.  Evaluation of centres' performance and activities.	Continued.  Continued.  Continued.  Continued.	Continued.  Continued.  Continued.  Continued.	Continued.  Continued.  Continued.  Continued.
SEARO	Review of existing teacher-training facilities and programmes.  Elaboration of plan of action for training of teachers for all categories of health personnel in two countries where reviews completed.        Workshops to initiate teachers of all categories of health personnel to modern educational planning and processes.	Preparation of directory of teacher-training facilities and programmes of B.I.L.  Continued in two countries.  Implementation of teacher-training programmes including programmes for continuing education in two countries for which plans were drawn up in 1978.  Continued.	Up-date.  Continued in three additional countries.  Continued in two countries for which plans were drawn up in 1979.  Continued.	Up-date.  Continued in remaining countries.  Continued in three countries for which plans were drawn up in 1980.  Continued.	Up-date.    Continued in remaining countries for which plans were drawn up in 1981.  Continued.	New edition issued.    Evaluation of teacher-training programme.  Continued.
WPRO	Continued support of Regional Teacher Training Centre (RTTC), Sydney, Australia.  Provide fellowships to undertake the Master's degree in health personnel education and investigate feasibility of setting up diploma level course.  Collaborate with 7 countries in developing Phase II of the teacher training programme with UNDP assistance (establishment of national and institutional centres).	Continued.  Set up diploma level course for teachers of health personnel and provide fellowships for attendance.  Implementation of Phase II of the teacher training programme.	Continued.  Continued support for teachers studying diploma and degree level.  Continued.	Continued.  Continued.  Support for maintenance activities of teacher training centres.	Continued.  Continued.  Continued.	Continued.  Continued.  Continued.

ACTIVITY: C.1.2 (Continued)

	1978	1979	1980	1981	1982	1983
WPRO (cont)	Completion of collaborative progress study on the global teacher training programme with HQ.	Implement changes as identified in progress study as reflected in Phase II of teacher training programme.	Follow-up.	Follow-up.	Follow-up.	Follow-up.
	Completion of feasibility study and establishment of National Teacher Training Centre (NTTC) or teacher training unit, (Malaysia). cf A.1.3.	Prepare national staff for NTTC. Establish links with the university medical and health sciences faculties.	Continued support to NTTC.	Continued support.	Continued.	Continued.
	Develop NTTC in Philippines.	Provide services to institutions for training in health manpower as specified in NTTC agreement.	Negotiate with local institutions for support.	Further support to NTTC.	Continued.	Continued.
	Conduct educational workshops in Singapore to train university faculty in educational planning and processes.	Provide additional training to the same group. Investigate possibility of combining activities with Ministry of Health.	Investigate possibility of establishing NTTC. Staff development continued.	Support to the establishment of NTTC.	Further support to NTTC.	Continued.
HQ	Consultation to review impact of WHO teacher training programme, based on 1977/1978 evaluation; issue of report.	Continue in C.1.1.				

TARGET: C.2 DEVELOPMENT AND/OR PROVISION OF RELEVANT HEALTH INSTRUCTIONAL MATERIAL, INCLUDING TEXTBOOKS, REFLECTED BY THE INCREASE IN STUDENT UTILIZATION OF THE SAME AND A CLEAR FEEDBACK ON EFFECTIVENESS

ACTIVITY: C.2.1 Survey and assessment of existing learning materials, identification of priority requirements for new learning materials for all categories of personnel, and investigation of design and reproduction facilities

	1978	1979	1980	1981	1982	1983
AFRO	Following the meeting of Deans of Medical Schools and Directors of University Centres for Health Sciences (1977), collaboration with institutions in a coordinated programme for the preparation of learning materials. Workshops for training staff from 5 countries in the preparation of learning materials.	Continued collaboration with planning workshop in at least 5 other countries.  Follow up in C.2.2	Development of new materials and field trial of materials developed in 1979.	Development of new materials and field trial of materials developed in 1980; issue of modified 1979 material and units.	Development of new materials and field trial of materials developed in 1981; issue of modified 1980 material and units.	Development of new materials and field trial of materials developed in 1982; issue of modified 1981 material and units.
AMRO	Survey for programme for extending quality and quantity of instructional materials needed for training for all categories of health personnel; identification of local groups, etc.  Development of standards and criteria for the production and use of instructional materials.	Meeting with specialists from Andean Pact and Central American countries on local application of materials.	Meeting with specialists on local application - Brazil, Mexico, Cuba and Dominican Republic.  Beginning of continuing evaluation of programme.	Meeting with specialists from Argentina, Chile, Uruguay and Paraguay on local application of materials.  Implementation of the evaluation.	Follow-up.  Continued.	Final evaluation meeting.  Continued.
EMRO	Conduct needs and resources survey in at least 2 countries for all categories of health personnel; analyse data and establish priorities in collaboration with governments.	Analyse data in first group of countries, determine priorities in consultation with governments; formulate plan of action.	Surveys continued in 2 additional countries  Collaborate in implementing plan of action (c.f. C.2.2).	Analyse data collected in second group of countries; determine priorities in consultation with governments; formulate plan of action.	Collaboration in implementation continued.	
EURO	Survey and assessment of existing learning materials with UN agencies concerned and with research and development centres.	Continued.	Continued.  Study of student and teacher judgment on the effectiveness of educational media.	Continued.  Study cost effectiveness of educational media.	Continued.  Follow-up.	Continued.  Follow-up.
SEARO	Needs and resources survey of learning materials conducted in at least 3 countries.	Continued in remaining countries.	Follow-up in C.2.2			

ACTIVITY: C.2.1 (continued)  
1978

	1978	1979	1980	1981	1982	1983
WPRO	Needs and resources survey of learning materials for basic and middle level health workers in selected countries of the region.	Survey continued and report issued with recommendations to correct deficiencies; explore ways of implementing recommendations.	Continue to improve areas where deficiencies have been identified.	Continued.	Continued.	Continued.
HC	Collaboration in regional needs and resources surveys of learning materials.  Inter-regional workshop on the production of learning material.	Continued collaboration.  Follow-up.	Continued collaboration.  Follow-up.	Continued collaboration.  Follow-up.	Continued collaboration.  Inter-regional workshop to review effectiveness of material production process and plan programme revision.	Continued collaboration.  Implementation of revised plan of action.

TARGET: C.2 DEVELOPMENT AND/OR PROVISION OF RELEVANT HEALTH INSTRUCTIONAL MATERIAL, INCLUDING TEXTBOOKS, REFLECTED BY THE INCREASE IN STUDENT UTILIZATION OF THE SAME AND A CLEAR FEEDBACK ON EFFECTIVENESS

ACTIVITY: C.2.2 Selection, adaptation, production, promotion and provision of learning materials with emphasis on priority areas and on self-instructional approaches

	1978	1979	1980	1981	1982	1983
AFRO		Follow up from C.2.1. Development of learning materials begins in the 10 selected institutions.	Continued.	Continued.  Follow-up from B.2. Collaboration with institutions to prepare learning materials for training health team members particularly for those working in primary health care.	Continued.  Field trial of completed learning materials and continued development of new material.	Review of programme in collaboration with HQ.  Issue of revised learning packages, field trial of new materials and continued development of new ones.
AMRO	Production of instructional materials for large-scale training system (LSTS) and their local adaptation with the guidance and technical advice of the Latin American Centres for Educational Technology of Health (CLATES) (Rio and Mexico).  Develop national groups for local adaptation of instructional material.  Prepare modules and instructional materials for different areas (Maternal and Child Health in Costa Rica; community health nursing in Chile; adult nursing in Ecuador).  Production and sale of 7 books and/or manuals and 25 audio-visual aids and other instructional material in priority areas.  Provide instructional equipment for groups and/or individual use (40 schools).	Continued development of national groups.    Continued (14 books and manuals and 50 a/v aids and materials).  Continued (another 40 schools)	Continued.    Continued (12 books and manuals and 75 a/v aids and materials).  Continued.	Continued.  Test nursing materials.  Continued (8 books and manuals and 50 a/v aids and materials).  Continued.	Local production of instructional materials.  Establish bank of instructional materials for nursing; adaptation of module.  Continued (8 books and manuals and 50 a/v aids and materials).  Continued.	Coordination meetings and evaluation of the programme. Continued.  Evaluate programme.  Continued (8 books and manuals and 25 a/v aids and materials).  Continued.

ACTIVITY: C.2.2 (continued)

	1978	1979	1980	1981	1982	1983
EMRO	<p>Support the design, testing, duplication, dissemination, of teaching/learning self-instructional materials and packages.</p> <p>c.f. C.2.1</p> <p>Research into the adaptability, transferability and development of teaching/learning materials including research in communication transfer.</p> <p>Collaborate with nationals in 1 country preparing manuals for training of Traditional Birth Attendants (TBAs) in accordance with country's needs.</p>	<p>Support continued.</p> <p>Select potential authors and form panels for the preparation of learning materials for auxiliary training programmes.</p> <p>Conduct workshops on production of learning materials for panels and nationals.</p> <p>Establish agreement with panels to prepare materials; supply panels with available learning materials.</p> <p>Transfer methodology to other settings.</p> <p>Support country in preparing manuals.</p>	<p>Support continued.</p> <p>Follow-up preparation of learning materials by panels for 2 countries.</p> <p>Follow-up</p> <p>Continued.</p> <p>Support field use of the manual.</p> <p>Develop criteria for evaluation of manual.</p>	<p>Support continued.</p> <p>Working group to evaluate the programme.</p> <p>Select panels of authors for preparation of learning materials identified as first 3 priorities.</p> <p>2nd workshop for new participants.</p> <p>As in 1979; ensure completion of material preparation.</p> <p>Continued.</p> <p>Evaluate the manual</p>	<p>Support continued.</p> <p>Revision of programme and support in accordance with recommendations of working group.</p> <p>Follow-up preparation of materials in 2 more countries.</p> <p>In collaboration with countries, arrange meeting of donors to fund production and distribution of materials.</p> <p>Test learning materials prepared for the first 2 countries; make revisions if necessary.</p> <p>Follow-up.</p> <p>Continued.</p> <p>Revise manual and make available to other countries.</p>	<p>Support continued.</p> <p>Large scale production and distribution of materials in the first 2 countries; continued preparation of materials in the second 2 countries.</p> <p>Arrange meeting between 4 countries, donors and WHO to review progress and make recommendations for future action.</p> <p>Test and revise materials produced for the second 2 countries; arrange with donors for large scale production and distribution.</p> <p>Ensure completion of new cycle of material preparation.</p> <p>Continued.</p> <p>Continued support to the utilization of TBAs.</p>
EURO	<p>Working group on the preparation and production of national teaching and reference materials for nursing/midwifery.</p>	<p>Apply strategies recommended by working group.</p>	<p>Continued.</p>	<p>Continued.</p>	<p>Continued.</p>	<p>Apply predetermined evaluation designs with the target population representing both students and practitioners.</p>

ACTIVITY: C.2.2 (continued)

	1978	1979	1980	1981	1982	1983
SEARO	<p>Workshop on the production of self-instructional learning materials.</p> <p>Elaborate plan for development of local capability to produce learning materials in 2 countries.</p>	<p>Issue guidelines on the production of manuals and learning materials.</p> <p>Continued in 2 additional countries.</p> <p>Implement prepared plans to produce learning materials in the 2 countries.</p>	<p>Workshop on the production of learning materials.</p> <p>Follow-up.</p> <p>Continued in 3 additional countries.</p> <p>Continued in 2 additional countries.</p>	<p>Guidelines revised.</p> <p>Continued in remaining countries.</p> <p>Continued in 3 additional countries.</p>	<p>Workshop on the production of learning materials.</p> <p>Follow-up.</p> <p>Continued in remaining countries.</p> <p>Evaluation of programme in countries where programme started 3 years earlier.</p>	<p>Follow-up.</p> <p>Continued.</p>
WPRO		<p>Regional workshop on skills in producing self-instructional materials; promote ability of nursing/midwifery teachers to use self-paced individualized instruction.</p>	<p>Provide supplies and equipment to countries for use in the production of instructional materials.</p>	<p>Evaluation of produced learning materials; modify and develop additional material.</p>	<p>Continued.</p>	<p>Continued.</p>
HQ	<p>Adaptation of Turin Centre teacher-training package completed.</p> <p>Coordinated programme for preparation of self-instructional units with related training for staff of selected institutions.</p> <p>Coordination of overall health learning materials programme.</p>	<p>Consultation to review training packages, and collaboration in development of new packages.</p> <p>Collaboration with selected institutions in production of self-instructional units.</p> <p>Continued.</p>	<p>Field trial of completed packages and completion of new packages.</p> <p>Development of new units and field trial of completed units.</p> <p>Continued.</p>	<p>Field trial of new packages; analysis of results of field trials.</p> <p>Development of new units, field trial of completed units, issue of modified 1979 units.</p> <p>Consultation to review progress in the health learning materials programme.</p>	<p>Packages modified, translated and issued; issue of guidelines for users.</p> <p>Development of new units, field trial of completed units, issue of modified 1980 units.</p> <p>Recommendations of consultation implemented; coordination continued.</p>	<p>Follow-up.</p> <p>Development of new units, field trial of completed units, issue of modified 1981 units; consultation to review programme and recommend further action.</p> <p>Continued.</p>

**TARGET C.3:** DEVELOPMENT OF A SCIENTIFIC AND TECHNOLOGICAL DOCUMENTATION SYSTEM AND DISTRIBUTION OF SELECTIVE INFORMATION AS EVIDENCED BY A BROADER AND INCREASED UTILIZATION OF BIBLIOGRAPHIC INFORMATION

**ACTIVITY C.3.1:** Development of criteria for, and subsequent implementation of, a regional network to provide scientific and technological information in priority areas related to health (This activity is an integral part of the HMD programme in two regions: AMR, EMR)

1978 1979 1980 1981 1982 1983

	1978	1979	1980	1981	1982	1983
AFRO	No activities envisaged					
	Development of standards and criteria for operating, and of a plan for evaluating the impact of, the network of National Information and Documentation Centres (CNID)/ Regional Library of Medicine and the Health Sciences (BIREME).	Meeting on evaluation of network, Development of, and support to, existing and new CNID's.	Continued.	evaluation of network. Continued.	Continued.	Analysis of evaluation over period. Continued.
AMRO	Evaluation of CNID in operation,  Coordination meetings Development of BIREME: Compilation, analysis Study for introducing MEDLINE in Latin America (LA). Start selective dissemination of information (SDI) on national and child health and nutrition. Meeting BIREME/Scientific Advisory Committee (SAC).	Operate 10 CNID in countries, Introduction of 4 new CNID Workshop on "library role and policies",  Meeting countries/financial sources for establishing Medline in LA. Continued SDI on: health services; maternal/child health and nutrition; communicable diseases; environmental health. Meeting BIREME/SAC.	Operate 14 CNID in countries. Workshop on "library users and sensibilization".  Introduce Medline system in LA,  Meeting BIREME/SAC. Interdivisional Working Group for selecting material to be disseminated.	Operate and support 10 countries for 18 CNID. Workshop on "librarian training",  Continued SDI in four priority areas, Meeting BIREME/SAC.	Workshop on "library and bio-medical information systems".  Conducted annually, and dissemination of selective information; training of librarians; Medline; support for CNID. Operation of Medline in LA countries; evaluation, Meeting BIREME/SAC.	Workshop on "library evaluation methods".  Evaluation of programme. Continued SDI in four priority areas; evaluation. Meeting BIREME/SAC.
EMRO	On the basis of 1977 study, select first WHO Regional Library (WHORL).  In accordance with 1977 guidelines, conduct feasibility study of libraries with potential to be sub-regional libraries within the regional system.	Support operation of WHORL.  Formulate agreement with at least four sub-regional libraries; support operation of sub-regional libraries as members of the system.	Continued support to WHORL and select second WHORL. Compile list of resource persons in health service libraries.  Monitor development and continue to support operation of sub-regional libraries.	Continued support to first WHORL; formulate agreement with second WHORL. Up-date list of resource persons. Develop criteria for evaluation of regional library system operation and utilization.  Continued support to sub-regional libraries; develop criteria for evaluation of sub-regional library operation and utilization.	Continued support to first WHORL; support operation of second WHORL. Up-date list of resource persons. Evaluate on-site the first WHORL as input to 1983 Working Group.  Evaluate on-site regional sub-regional library system as input to 1983 Working Group.	Working Group to assess the Regional Library System, its staffing and training of personnel; discuss and agree on inter-library cooperation.

TARGET: C.3.1 (continued)

	1978	1979	1980	1980	1981	1982
	<p>Support training of level II libraries using manual developed in 1977.</p> <p>Continued support to the training of level I librarians through fellowships within the region or abroad.</p> <p>Identify categories of health science library manpower needed other than levels I and II librarians.</p>	<p>Prepare operational guidelines on facilitation of biomedical and health services research through literature provision.</p> <p>Expand training of level II librarians in more countries; develop criteria for evaluation of level II librarian training programmes.</p> <p>Training continued for level I librarians.</p> <p>Collaborate with at least one country in defining job descriptions for categories identified other than levels I and II librarians.</p> <p>Establish guidelines for continuing education programmes.</p> <p>Assess utilization of the list by libraries.</p> <p>Continued.</p> <p>Finalize list of sources.</p>	<p>Distribute tested model for research facilitation.</p> <p>Evaluate on-site of level II librarian training.</p> <p>Continued.</p> <p>Support countries in the development and implementation of training programmes for these categories.</p> <p>Support development of continuing education programmes in at least one country.</p> <p>Revise the list if necessary; continue to provide lists.</p> <p>Continued.</p> <p>Provide list of sources.</p>	<p>Continued to facilitate research through effective exchange of information.</p> <p>Continued support to national training programmes for level II librarians.</p> <p>Continued.</p> <p>Continued support to national training programmes for level II librarians.</p> <p>Support continued; revise guidelines on the basis of experience in the collaborating country.</p> <p>Continued; expand list to include other health professional faculties (e.g. dentistry, pharmacy).</p> <p>Continued.</p> <p>Support the utilization of the list of sources.</p>	<p>Continued.</p> <p>Assess impact of the training programmes on the availability of qualified levels I and II librarians, as an input to the 1983 Working Group.</p> <p>Assess progress of training of these categories as input to the 1983 Working Group.</p> <p>Distribute revised guidelines and expand support to the continuing education of library personnel.</p> <p>Distribute expanded list.</p> <p>Continued.</p> <p>Assess the utilization of the "list of sources".</p>	<p>Continued.</p> <p>Continued support to the training of levels I and II librarians.</p> <p>Continued support on improved training.</p> <p>Assess impact of continuing education programmes.</p> <p>Assess utilization of expanded list.</p> <p>Continued.</p> <p>Revise list, if necessary, and continue to support utilization.</p>
EMRO (cont'd)	<p>Identify needs and resources in the region for continuing education of various categories of health science library personnel.</p> <p>Provide "list of sources" for basic medical faculty libraries in English.</p> <p>Continue to review, advise on and supply literature to strengthen libraries in health manpower development institutions</p> <p>Prepare "list of sources" for middle-level HMI.</p>					
EURO	<p>Continued activity; preparation and updating of annotated bibliographic materials in the medium term programme on nursing/midwifery.</p>	Continued.	Continued.	Continued.	Continued.	Continued.
SEARO	No activities envisaged.					
WPRO	No activities envisaged.					
HQ	Activities performed by the Health and Biomedical Information Programme and special purpose information subsystems of the WHO Information Systems Programme (ISP).					

TARGET C.3

DEVELOPMENT OF A SCIENTIFIC AND TECHNOLOGICAL DOCUMENTATION SYSTEM AND DISTRIBUTION OF SELECTIVE INFORMATION AS EVIDENCED BY A BROADER AND INCREASED UTILIZATION OF BIBLIOGRAPHIC INFORMATION

ACTIVITY C.3.2

Establishment of HMD Information Service on health manpower programmes and processes

	1978	1979	1980	1981	1982	1983
AFRO	No activities envisaged.					
AMRO	Planning of a mechanism for collection and dissemination of information on HMD.	Development of a data bank in the Latin American Center for Educational Technology (CLATES) and the Regional Library of Medicine and the Health Sciences (BIREME).  publication on a quarterly basis of "Educacion Medica y Salud" as a medium to disseminate information.		Dissemination of information on HMD in the Region.		
EMRO	Cf C.3.1					
EURO	Technical cooperation with countries and HQ to develop criteria for a network of HMD information.	Follow-up in A.2.2				
SEARO	Inventory of available and regularly collected information in the field of HMD; review the information system and draw up plan of action for its improvement in the context of the overall national health services information system in at least two countries.	Continued in two additional countries. Implement plan of action drawn up for two countries.	Continued in three additional countries. Implement plan of action drawn up for two additional countries.	Continued in remaining countries. Implement plan of action drawn up for three additional countries. Consultation to review the HMD information service.	Implement plan of action drawn up for remaining countries. Follow-up recommendation of consultation.	Follow-up.
WPRO	No activities envisaged.					
HQ	Development of HMD Information Service to promote the exchange among Member States of relevant information related to health manpower development and to coordinate the development and operation of appropriate mechanisms, whether existing or new, for this purpose (emphasis on information sources of health manpower plans, management, teaching/learning materials & programmes, evaluation instruments and processes, training institutions and other learning facilities).  Issue of bibliographies, standards (e.g. for educational equipment), and directories.	Collaboration with existing sources of information and promotion of the development of national HMD information services.  Continued.	Continued.	Continued.	Consultation to evaluate the HMD Information Service.  Continued.	Follow-up.  Continued.