

Country Office Evaluation - Romania

Context

Country office evaluations were included in the Organization-wide evaluation workplan for 2018-2019, approved by the Executive Board in January 2018. They encompass the entirety of WHO activities during a specific period and aim to provide findings, recommendations and lessons that can be used in the design of new strategies and programmes in-country.

Objectives and scope the Evaluation

The main purpose of this evaluation was to identify achievements, challenges and gaps and document best practices and innovations of WHO in Romania on the basis of its achievements over the period 2014-2017. These included not only results achieved by the WHO Country Office (WCO) but also contributions at regional and global levels to the country programme of work.

Key findings and conclusions

Question 1: Were the strategic choices made in the Biennial Collaborative Agreements (BCA) addressing Romania's health needs and coherent with government and partners' priorities?

WHO's priorities identified in the BCAs for 2014-2015 and 2016-2017 were relevant, address important health needs in Romania and were aligned with the National Health Strategy 2014-2020. They were also coherent with Health 2020, the twelfth General Programme of Work and the general directions of the Sustainable Development Goal agenda. However, the short-term vision and operational approach of the BCAs are not well suited to address the more systemic and long-term needs of Romania.

WHO operations in Romania are limited by the relatively narrow scope of WHO's work in Member States of the European Union, despite the large burden of disease in the country and the need for critical support as it embarks on long-term health system reform. An additional challenge derives from the changes that have taken place in the Government of Romania during the period under review, which have resulted in changing priorities of the Ministry of Health and additional requests for WHO support.

WHO has been able to raise important health issues with the Government of Romania and has been effective in supporting the Ministry of Health in policy development and articulating health priorities. However, a broader, more systematic engagement of stakeholders in the WHO strategic planning process could ensure greater relevance of the strategic choices

and the wider engagement of Romanian health actors

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in its implementation.

Inequities in access to care as well as health inequalities among vulnerable populations are important issues in Romania. The BCAs addressed health inequities, with a particular focus on the Roma population in the 2014-2015 BCA in the context of the decade on Roma inclusion and European Union work on Roma. While there was no explicit reference to gender issues or gender-affirmative approaches in the BCAs, gender equality is considered part and parcel of WHO's work and approaches.

Question 2: What is the contribution/added value of WHO toward addressing the country's health needs and priorities?

WHO has significant influence and credibility in the health sector and is considered a trusted and responsive partner by health actors in Romania. WHO is seen as an essential partner as well as an ally at the policy and technical levels and its technical support is highly valued by Romanian policy makers and health professionals. Likewise, WHO's leadership is considered essential to advance the national health agenda.

Specific WHO achievements in support of the formulation of Romanian health policies include the development of the National Health Strategy 2014-2020 and, more recently, the legislation on tobacco control. WHO has made significant contributions in all categories contained in the BCA, notably in the areas of immunization, tuberculosis, and communicable diseases in general. However, greater support is required to address noncommunicable diseases, in particular from the perspective of prevention strategies.

Health systems reform constitutes a priority area for the Ministry of Health. However, this is an area where national implementation is slower and lagging behind national stakeholder expectations. Key issues include limited access to health care in rural areas and for vulnerable populations, the need to move from predominant hospital-based care towards primary care, preventive services and community care, and the sustainability of health financing and human resources for health. WHO is now working with the Ministry of Health to promote legislation for community health care and the integrated delivery of health services.

Changing priorities as a result of changes of Government pose a challenge for the effectiveness and sustainability of WHO's contributions. In order to provide continuity of commitments, WHO needs to balance responsiveness with the need to sustain critical longer-term projects.

WHO's efforts to support cross-border interaction to build coalitions and strengthen capacity building through exchange of knowledge, information, best practices and experiences across countries is welcomed and an area for further strengthening.

Question 3: How did WHO achieve the results?

Key contributions of core functions: WHO's contribution to Romania results from the close and successful collaboration between the WCO, the Regional Office for Europe and its geographically dispersed offices. Articulation of policy options was one of the most important core functions of the WCO. with WHO guidelines, norms and standards being highly regarded. WHO's leadership, convening power and technical support were considered very effective and relevant. Efforts in respect of research and monitoring the health situation were less substantial. Staffing: WHO staff were recognised for their hard and work dedication, technical competence, responsiveness and their ability to establish positive and collaborative relationships with relevant health actors in Romania. The Regional Office for Europe's business model, with small WCOs and close collaboration with the Regional Office and its geographically dispersed offices for technical assistance, is effective. However, the current staffing levels in the WCO need to be strengthened in order to better support health sector reform in Romania. Funding: Given the significant unaddressed health needs of the country, WHO funding for Romania should be reconsidered notwithstanding its European Union member status. WHO and the Government of Romania are exploring ways to include elements of WHO technical assistance and capacity building within the European Union funding for Romania.

Strategic planning: In order to address the long-term needs for health care reform in Romania, especially in a changing environment, WHO's work in Romania would benefit from a longer-term strategic planning instrument (4-5 years), which would include a theory of change and a results framework.

Programme management challenges: The difficulty in measuring results against planned targets and assessing WHO's contributions to the targets are indications of a number of systemic challenges in planning and monitoring processes in WHO at both corporate and country levels. This weakens WHO's capacity to demonstrate results and its contribution to improvements in any given country. Partnerships: WHO's main partner is the Ministry of Health. In the absence of a common United Nations framework, collaboration with United Nations agencies is more informal and established around specific projects. The WCO also has close cooperation with the Romanian Presidency (Department of Public Health). WHO has partnered less extensively with civil society, academia and other non-State actors. The evaluation shows potential for broader strategic engagement with other partners, including intersectoral action, in support of health priorities. Of particular importance is the partnership with the European Union, and Romania's upcoming Presidency of the European Union is an opportunity to advance common health priorities.

Recommendations

Recommendation 1: The Regional Office for Europe and the Head of the WHO country office should consider a new, longer-term, 4-5 year strategic planning instrument to address the more systemic and long-term needs of Romania, the directions set by the its Government, the 13th General Programme of Work, the Sustainable Development Goals and WHO's comparative advantage.

Recommendation 2: The WHO Secretariat should ensure that the WHO country office has the requisite capacity and resources to provide critical support to Romania as it embarks on long-term health system reform.

Recommendation 3: To increase and sustain effectiveness of WHO support to Romania, the Regional Office for Europe and the WHO country office should strengthen those core functions that would help WHO deliver more effectively.

Recommendation 4: The WHO country office should enhance its strategic partnerships at country level to include a broader range of partners and national stakeholders in order to better contribute towards improving the health status in Romania.

Contacts

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The full evaluation report is available here: https://www.who.int/about/evaluation/romania_country_office_evaluation_report.pdf