

Session 1:

Health Planning: Perspectives and general approach

Introduction

Welcome to this first session of *Unit: Health Planning*.

Planning is one of the major administrative functions as part of the management process. Since after your graduation you will occupy different management positions in different health institutions where you will lead or participate to health planning process, it is important to equip you with knowledge and skills that will help you to accomplish your roles and responsibilities.

In this session you will be finding out about the general concepts of health planning to provide you with grounding to elaborate a strategic or operational plan in Health Sector.

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1 LEARNING OUTCOMES FOR THE SESSION

By the end of this session, you should be able to:

- Explain the concept of Health according to different approaches
- Develop an understanding of different determinants of Health and their contribution to potential improvement of Health of Population
- Explain the Reference Framework for planning from Health Needs
- Define Planning and explain its general characteristics
- Identify appropriate type of planning according to the level or scope of the approach

Note: The following icons provide a visual guide for you as you progress through the sessions in this unit.

	Reading This refers to academic reading you will do by referring to the Module Resources folder.
	Online reading This refers to reading that you need to access through the internet.
	Video This refers to a video you need to access through the internet.
	Individual activity This is an activity that you complete by yourself.
	Workplace activity This refers to an activity you complete in your workplace or a nearby facility.
	Additional resources These are extra resources you can refer to for further reading and investigation.

2 PURPOSE OF PLANNING: HEALTH

Before approaching planning, it is important to first specify the purpose of the Planning and make it clear where we are going in terms of planning in the domain of health. We consider that the starting point for any approach to health planning, whether it concerns prevention or care services or programs, must be health .

2.1. Concept of health

The planner concerned about the action must be able to understand health in a way that helps him/her identify what constitutes a health problem. To do this, he/she must first be able to define the “health”.

Definition

Health: There are different connotations according to the authors.

Goldberg class the majority of definitions according to the following approaches:

- A perceptual approach, which defines health as a perception of well-being. The definition of World Health Organization (WHO) is based on this concept (*a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity*).
- A functional approach: the capacity to function well or the state of optimal capacity of an individual in regard to the accomplishment (with effective performance) of the roles and tasks for what he/she has been socialized.
- An approach that uses the concept of adaptation: successful and permanent adjustment of an organism to its environment. The disease is a lack of adjustment.

It is an operational definition of health that we will choose in health planning.

In this regard, the deprivation/lack of health as measured by indicators of mortality, morbidity, risk factors and disability is the more operational measure currently available to us.

We join then the notion of health the way it was formulated by Dubos: an adaptation of the individual to the environment/community.

According to this definition, "*an individual in good health is one who is able to work as effectively as possible in his/her environment (workplace) and to devote himself/herself fully to his/her projects.*"

2.2. Determinants of Health

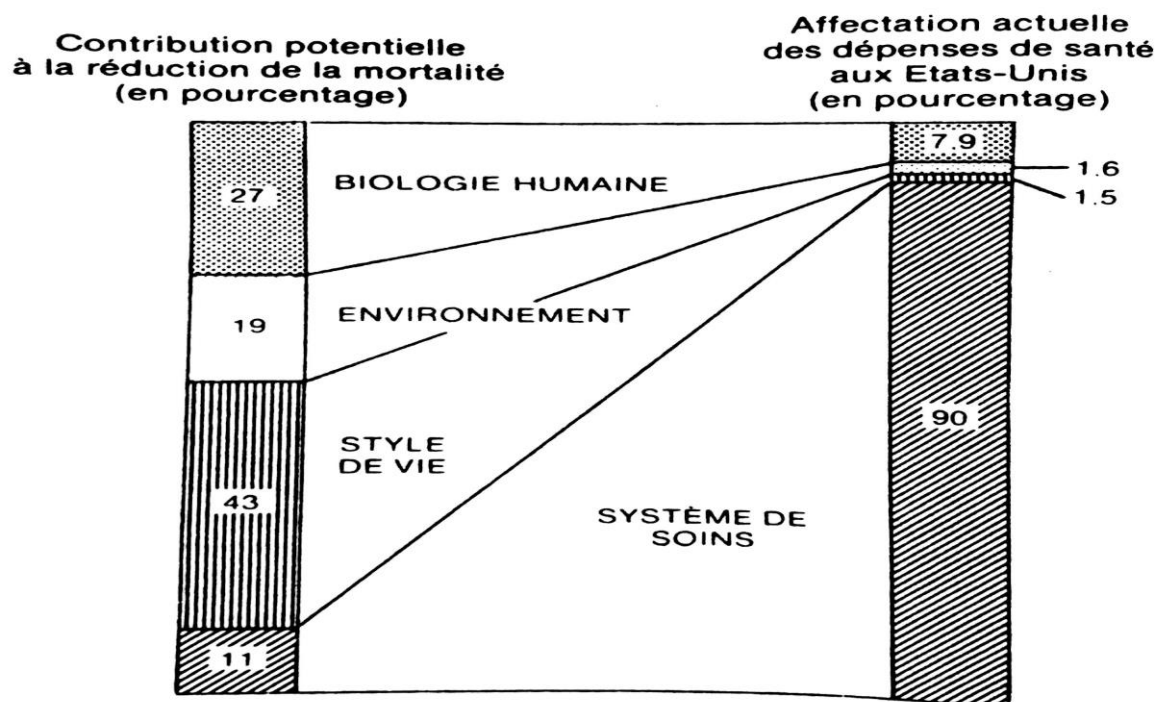
Our approach is to adopt health as a starting point. The model that inspires this approach is fairly classic.

The model locates health as a dependent variable, influenced by different factors or determinants:

- Biological factors or endogenous;
- Factors related to the environment;
- Factors related to lifestyle;
- Factors related to the Healthcare system.

The contribution of these factors to the potential improvement of health of population is not necessarily related to the money that are currently allocated to them.

FIGURE 1.1
Déterminants de la santé et affectation des ressources



Tiré de Dever G.E.A. «An Epidemiological Model for Health Policy Analysis», Soc. Ind. Res., 1976, vol. 2, p. 465.

Thus, the left side of Figure 1.1. shows the contribution of each of these factors, assuming that 100% reduction in mortality represents a maximum that can be achieved with the means available in the United States. We note that the gains the most important possible ones come from changes in lifestyle (style de vie). To the other extreme, we note that the potential impact of the healthcare system (systeme de soins), in an industrialized country like the United States remains marginal.

On the right side of Figure 1.1., we can see the distribution of health spending in the USA, corresponding to each of the determinants of health.

We can observe that the Healthcare system consumes 90% of health expenditures, while spending on lifestyle and the environment represent only 1.5 and 1.6% each.

These data are likely to make us think the marginal performance of investments in health.

3 REFERENCE FRAMEWORK FOR PLANNING FROM THE HEALTH NEEDS

A health program includes three main components: (1) an objective of health, expressed in terms of state of health, (2) activities or services; and (3) human, physical and financial resources.

On the other hand, the essential task of the Planner consists of establishment of plans, for the future, from the current situation

Reference Framework for planning from the health needs

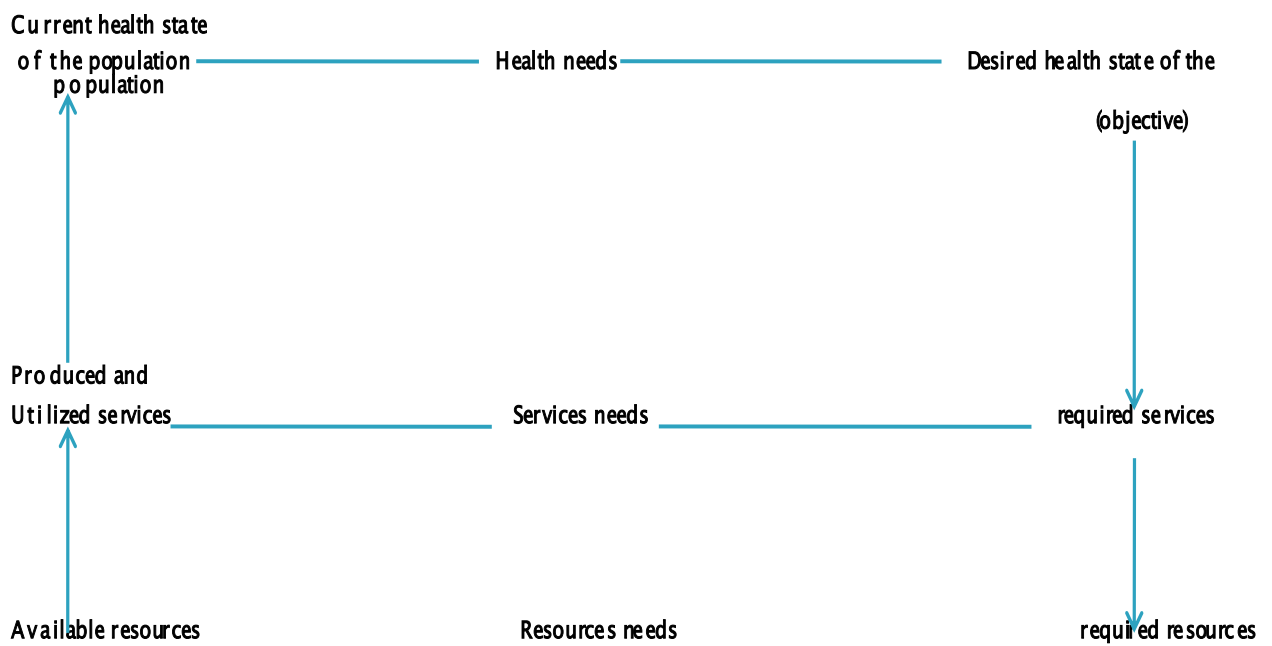


Figure 1: Model of planning health programs and services based on Health needs

In this model, the concept of need appears clear.

The need is the gap between what exists and what is desirable in terms of health, services and resources.

4 CHARACTERISTICS OF PLANNING

➤ 4.1. **Planning is about the future** (prospective nature of planning)

“to plan, is to apply a process which leads to decide what to do, how to do and how to evaluate what will be done before the action, before doing it“ (Begin).

➤ **Causal relationship between undertaken action and expected results**

The plausible or demonstrated relationship between the proposed actions and objectives.

➤ **Action:** the plan resulting from the approach should not only be a well written, logical and well-presented document. The ultimate purpose of planning is the action, change. Unfortunately, the plan can be placed on a table and never lead to the implementation. A plan that does not result in the action is unnecessary and can be a source of frustration for the planner and other stakeholders involved in the process.

➤ **Planning is a continuous and dynamic process**

The approach must continuously adapt to particular situations. In addition, an assessment/evaluation process must be an integral part of the approach

➤ **The multidisciplinary** nature of the planning process

Difference in interest and point of view of Economist, administrator, political scientist,. Despite the difficulties resulting from multidisciplinary, it is clear that taking into account different perspectives of planning can lead to a much richer analysis of situations and decisions.

5

DEFINITION OF PLANNING

The health planning can be defined as:

- A continuing process of forecasting resources and services required to achieve goals determined by an established order of priority, to choose the best among several alternatives solutions: these choices take into account the context of constraints, internal and external, currently known or foreseeable in the future (Pineault and Daveluy).
- A methodic process of defining a problem by analysis, identify unmet needs and demands that constitute the problem, to set realistic and achievable goals, to determine the order of priority, to identify the resources needed to achieve them, and project administrative actions considering various possible strategies to solve the problem.

6 TYPES OF PLANNING

According to the level or scope of the approach:

The planning can be defined by the scope of its approach. More specifically, what level of objectives does it concern?

- It can be at the **highest level**, of the mission of an organization, i.e. the General guidance/orientation that should be adopted. The mission indicates a direction but not necessarily feasible. In the action, this level of concern is reflected by a policy which trace the broad guidelines to follow.

This planning is qualified as **normative or policy** (normative or policy planning).

This type of planning can go so far as to include the change in values or ideologies to achieve certain objectives of the system, as, for example, the equity or equality.

It is more at high level of an organization such as a Government or its Ministries that we found this type of planning. It is rather in the long term than the short term.

- At the second level are the **goals**, representing a greater degree of specification than the mission: at this level, some choices have been made.

This is no longer the conditional (what should we do?); instead of the ideal, it is possible. At this level you decide priorities for action and the choice between the different orientations that will be taken in the future. It is the planning of important decisions which will have long-term consequences: it is the **strategic planning**.

- Finally, in very concrete terms of the operationalization and implementation of the program, you must set operational objectives.

This is the purpose of the **operational planning**, i.e. decisions more short term concerning the progress of the activities, the schedule, the management of the resources.

7. STAGES OF PLANNING PROCESS

Most authors generally agree on the planning process and its stages, although the terms used and the number of stages may vary. So, we can identify six steps:

1. Planning of planning, i.e. the preliminary phase, including the establishment of a planning team;
2. Collection of information contributing to the identification of problems (situation analysis);
3. Determination of priorities among the health problems identified;
4. Development of the plan of the program and plan of operations
5. Implementation
6. Evaluation of the implementation process and evaluation of the program

The planning should lead to the writing of a document that all the parties commit to respect. For this reason, this document should be written with extreme care and with the participation of the main actors (stakeholders) in the health sector. The Ministry of health or the regional health authorities can encourage this process by preparing clear guidelines and availing experienced facilitators for planning teams.



8 ADDITIONAL RESOURCES

You will find more details and complementary information in following resources:

1. *Green, Andrew* **An introduction to health planning for developing health systems.** New York: Oxford University Press, 2007 LIBRIS-ID: 17395721
2. *Raynald Pineault, Carole Daveluy* **La planification de la santé. concepts, méthodes, stratégies.** Montréal Québec : Editions nouvelles AMS, 1995 ISBN :2-921696-05-3
3. Other provided teaching materials (PDF and power point notes).