STATES PARTIES SELF-ASSESSMENT ANNUAL REPORTING TOOL

BACKGROUND

The States Parties Self-Assessment Annual Reporting Tool (SPAR) summarizes a countries ability to prevent, detect, and respond to public health risks. States Parties to the International Health Regulations (IHR) (2005) report these capacity scores to the World Health Assembly annually. It is a core component of the IHR Monitoring and Evaluation Framework (IHRMEF).

The SPAR consists of 35 indicators across 15 technical areas, each scored out of 100 (0 – "No Capacity"; 100 – "Sustainable Capacity")

An annual reporting questionnaire has been used since 2010. Major revisions occurred in 2018 (SPAR 1st Edition) and again in 2021 (SPAR 2nd Edition). These reports can be accessed through the World Health Organization eSPAR portal.

SPAR PRINCIPLES

The SPAR used to:

- Inform country-level planning and priority-setting through the development or realignment of Strategic and Operational National Action Plans for Health Security
- Promote mutual accountability between the States Parties and WHO when reporting to WHO under Article 54 of the IHR (2005)
- □ Assess progress on work implemented across the IHR capacities
- Complement other assessments of the IHRMEF including Joint External Evaluation, Simulation Exercises, and Action Reviews.

TOOL AND TECHNICAL AREAS

The SPAR consists of 15 technical areas (known in the tool as capacities). For each indicator, a country assesses themselves based on the given criteria and provide supporting documentation to the eSPAR portal.

The SPAR tool aligns with JEE technical areas and indicators. This is especially true for the current SPAR (2nd Edition) and JEE (3rd Edition).

The e-SPAR tool is classified as a percentage of performance along the "1 to 5" scale, e.g., for a country selecting level 3 for indicator 2.1, the level of performance is expressed as: 3/5*100=60%



Capacity



Capacity



Developed

Capacity



Capacity



Sustainable Capacity

PURPOSE

The SPAR is a self-assessment of a country's capacity to prevent, detect, and respond to public health risks.

A SPAR can identify strengths and weaknesses, can highlight the most critical gaps, and can help prioritize activities for enhanced preparedness and response.

instruments to implement IHRcontrolC2. IHR coordination and National IHR Focal PointC10. Risk communication community engagementC3. FinancingC11. Points of en and border healC4. LaboratoryC12. Zoonotic di C13. Food safety C13. Food safety C14. Chemical en C15. Radiation emergenciesC7. Health Emergency managementC15. Radiation emergencies	ntry Ith isease Y
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SPAR Technical Areas

ACCESSING SPAR DATA

The implementation status of IHR capacities is presented to the WHO Executive Board, the World Health Assembly, and to Regional Committees.

The WHO Secretariat is responsible for coordinating submission and reporting of SPARs. In 2021, 184 (94%) of countries submitted a SPAR. Reports broken down by country and capacity can be found on the **eSPAR Portal**, updated each year in April.

SPARs AND THE OPERATIONAL PLANNING TOOLKIT

The Operational Planning Toolkit helps a country go from assessment to action by targeting priority gaps in health security. SPARs inform and monitor progress in national planning.

Operational Plans (also called NAPHS Operational Plans) list sub-activities, have identified program managers, define timelines for implementation, and identify funding sources. They focus on short-term implementation (e.g. 6-12 months) and are expected to be updated regularly.



COMPARISONS OF SPAR AND JEE

	SPAR	JEE
Overview	Qualitative and quantitative self-assessment to evaluate national health security capacities	Qualitative and quantitative self-assessment to evaluate national health security capacities, that is reviewed by a team of international experts
Frequency	Annually since 2010 (obligation to IHR (2005))	Every 5 years since 2016 (on a voluntary basis)
Scope	35 indicators in 15 technical areas	54 indicators in 19 technical areas
Reliability	No international verification process means there is wider variation in SPAR scores between years.	Peer-to-peerevaluationfrominternationalexpertsimprovesidentification of gaps and priority actions.

ADDITIONAL INFORMATION

- Overview of SPAR Tool 2nd edition : <u>International health regulations (2005): state party</u> <u>self-assessment annual reporting tool, 2nd ed (who.int)</u>
- Electronic SPAR Tool (e-SPAR): <u>e-SPAR Public (who.int)</u>
- □ WHO Strategic Partnership Portal: <u>https://extranet.who.int/spp/</u>