

Glossary and terms

This glossary is intended to help users of the toolkit to understand and use the terms referred to below. The terms used in this toolkit are derived from three main sources:

- Health systems strengthening glossary. Geneva: WHO (https://www.who.int/healthsystems/Glossary_January2011.pdf?ua=1)
- A glossary of terms for community health care and services for older persons. Kobe: WHO Centre for Health Development; 2004 (<https://apps.who.int/iris/handle/10665/68896>).
- Glossary of terms. Health & Budgets (workshop). Washington DC: International Budget Partnership; undated (<https://www.internationalbudget.org/wp-content/uploads/Glossary-of-Terms.pdf>).

Advocacy for health. A combination of individual and social actions designed to gain political commitment, policy support, social acceptance and systems support for a particular health goal or programme.

Advocate. A person who acts on behalf of another, usually for a cause or plea, to support or suggest an idea, development or way of doing something.

Access (to health care). The ability of an individual or a defined population to obtain or receive appropriate health care. This includes the availability of programmes, services, facilities and records. Access can be influenced by such factors as finances (insufficient monetary resources), geography (distance to providers), education (lack of knowledge of services available), the appropriateness and acceptability of a service to individuals and population and sociological factors (discrimination, language or cultural barriers).

Accountability: the result of the process which ensures that health actors take responsibility of what they are obliged to do and are made answerable for their actions.

Administrative classification. A way of categorizing expenditure in a budget according to the administrative unit responsible for spending funds, such as a department or programme.

Auditor-general (supreme audit institution). Person who reports on the accounts, financial statements and financial management of ministries, departments and agencies.

Budget. Government's planned expenditures and anticipated revenues, reflecting its priorities for the financial year.

Budget cycle. Comprises four stages: formulation, when the executive branch puts together the budget plan; enactment, when the legislature debates, alters and approves the budget plan; execution, when the government implements the policies in the budget; and auditing and legislative assessment, when the national audit institution and the legislature account for and assess expenditure under the budget.

Budget deficit. The difference between budget expenditure and budgeted revenues.

Capital. Fixed or durable non-labour inputs or factors used in the production of goods and services, the value of such factors or the money specifically allocated for their acquisition or development. Capital costs include, for example, the buildings, beds and equipment used in the provision of hospital services. Capital assets are usually permanent and durable, as distinguished from consumables, such as supplies.

Capital expenditure. Expenditure on an asset that lasts for more than 1 year; includes equipment, land, buildings and legal expenses and other transfer costs associated with property.

Catastrophic health expenditure. Out-of-pocket payment for health can cause households to incur catastrophic expenditures, which can push them into poverty. Out-of-pocket payment can also dissuade households from seeking care when they need it. SDG indicator 3.8. 2 defines the incidence of catastrophic health spending as “the proportion of the population with large household expenditure on health as a share of total household expenditure or income.” (greater than 10% or 25% of total household consumption or income)

Co-payment. The specified portion (cost or percentage) that a health insurance company or a service programme requires people to pay towards their medical bills or services.

Costing. Methods and processes for calculating the costs (actual and estimated) of certain goals or those necessary to obtain certain products, carry out certain processes or maintain the health service.

Country health programming. A managerial process for selecting priority health problems, specification of operational objectives and translation of the objectives into activities, resource needs and organization.

Direct tax. Tax charged on the taxable income of individuals and legal entities.

Economic classification. Classification of expenditures (or expenses) and the acquisition and disposal of assets into economic categories, which underlines the economic nature of the transaction (salaries, interest, transfers, etc.).

Effective, effectiveness. The degree to which a treatment plan, programme or project has achieved its purpose within the limits set for reaching it. For example, an expression of the desired effect of a programme, service or institution in reducing a health problem or improving an unsatisfactory health situation.

Evidence-based care. The conscientious, explicit, judicious use of current best evidence in making decisions about the care of individuals. In this approach, the best external evidence must be balanced with the desires of the individual and the clinical expertise of health-care providers.

Evidence-based decision-making. In a policy context, application of the best available scientific evidence to policy decisions on specific treatments or care, as well as changes to the delivery system.

Financing. Function of a health system concerned with the mobilization, accumulation and allocation of money to cover the health needs of the people in the care system, individually and collectively.

Global budgeting. A limit on total health care spending from all sources of funds for a given unit of population.

Governance. The exercise of political, economic and administrative authority in the management of an organization’s affairs at all levels.

Health insurance. Financial protection against the health care costs arising from disease or accidental bodily injury. Usually covers all or part of the costs of treating the disease or injury. Insurance may be obtained on either an individual or a group basis.

National health accounts. Information, usually in the form of indicators, that a country may collect on its health expenditures. Indicators may include total health expenditure, public expenditure, private expenditure, out-of-pocket expenditure, tax-funded and other public expenditure, and social security expenditure.

Functional classification. Classification of expenditure (and expense) transactions, acquisitions and disposals of financial assets according to the purpose for which the transactions are undertaken. A functional classification is independent of the administrative organizations or units that carry out the activities or transactions concerned.

Health. The state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. Health has many dimensions (anatomical, physiological and mental) and is largely culturally defined.

Health care. Services provided to individuals or communities by health service providers for the purpose of promoting, maintaining, monitoring or restoring health.

Health information system. Generation and use of appropriate health information to support decision-making, health-care delivery and management of health services at national and subnational levels.

Health literacy. Health literacy implies the achievement of a level of knowledge, personal skills and confidence to take action to improve personal and community health by changing personal lifestyles and living conditions. Thus, health literacy means more than being able to read pamphlets and make appointments. By improving people's access to health information, and their capacity to use it effectively, health literacy is critical to empowerment

Health outcome. Changes in health status that result from the provision of health (or other) services.

Health policy. A formal statement or procedure in an institution (notably government) that defines goals, priorities and the parameters for action in response to health needs, within the available resources.

Health programme. Organized activities for the attainment of defined health objectives and targets.

Health promotion. Any combination of health education and related organizational, political and economic interventions designed to facilitate behavioural and environmental adaptations that will improve or protect health.

Health resources. All the means available for operation of the health system, including human resources, buildings, equipment, supplies, funds, knowledge and technology.

Health sector. Consists of organized public and private health services (including health promotion, disease prevention, diagnostic, treatment and care services), the policies and activities of health departments and ministries, health-related nongovernmental organizations (NGOs) and community groups, and professional associations.

Health service. Service provided by health care professionals or by others under their direction for the purpose of promoting, maintaining or restoring health.

Integrated care. The methods and strategies for linking and coordinating the various aspects of care delivered by different systems, such as general practice, primary and specialty care, preventive and curative services and acute and long-term care, as well as physical and mental health services and social care, to meet the multiple needs and problems of an individual or a category of people with similar needs or problems.

National strategy. Based on national health policy, a set of decisions that includes the broad lines of action required in all sectors involved to realize the national health policy and indicates the problems and ways of dealing with them.

Out-of-pocket payment. Represents the share of the expenses that a patient or a family pays directly to a health-care provider, without a third party (insurer or state). Usually, the family bears the cost, with no risk-sharing or solidarity mechanism involved and no possibility of spreading the cost over time.

Policy. A policy is typically described as a deliberate plan of action to guide decisions and achieve rational outcome(s). The term may also be used to denote what is actually done, even though it is unplanned. For example, the health policy of a government reflects its understanding of the health

situation and recommends actions to be taken to improve the situation for the larger benefit of society.

Programme budgeting. Making resources available to attain the objectives of programmes. Programme budgeting differs from other budgeting in that the emphasis is on the results to be achieved rather than on unconnected budgetary items. The objectives and targets of the programme are defined clearly, and, in order to attain them, the resources required are grouped, those who will receive them specified and their sources determined.

Public budget. Government's planned expenditures and anticipated revenues, reflecting its policy priorities for the financial year.

Resource management. Actions to attain the most rational use of human resources, knowledge, facilities and funds to achieve the intended purposes with the least outlay.

Revenue. Gross earnings received by an entity for operation of a specific activity. It does not include deductions for such items as expenses, bad debts or contractual allowances.

Resource allocation. Deciding what is needed to carry out an activity and providing for those needs. Can include making provision for financial resources (money), capital resources (such as buildings and computer hardware) and staff resources (including the number of staff and the skill mix required).

Sustainable development. Development that meets the needs of the present generation without compromising the ability of future generations to meet their needs.

GLOSSARY OF TERMS FOR THE MEDIA

Advocate: Someone who speaks up (or writes) publicly about how things are and how they should be. Promotes change towards a particular goal.

Audience: May be as small as one person or as large as billions of people around the world consuming any type of media content.

Blog: Online journal, diary or a mini-website that allows expression of opinions; to cover news, share photos, videos and even audio recordings; and to provide links to other websites considered relevant for the specific audience and message.

Citizen journalist: Anyone who plays an active role in collecting, reporting, analysing and disseminating news and information.

Civil society organization: Non-State, not-for-profit, voluntary entities formed by people in the social sphere who are separate from the State and the market. Represent a wide range of interests and ties.

Closing civic space: Erection by governments of legal and logistical barriers to democracy and rights programmes, public vilification and harassment of their domestic and international civil society organizations (CSOs), media, human rights and aid groups. As a result, the space for manoeuvre of media and civil society has been seriously reduced.

Health budget advocacy: Lobbying and campaigning to influence the size and distribution of government health budgets.

Mass media: Technologies used to communicate across distances and time to a large audience. Include broadcast, digital, outdoor and print media.

Media: Means or channels of communication outlets or tools used to store and deliver information, data or entertainment in society.

Media content: Films, dramas, documentaries, talk shows, advertisements, social media posts, blogs, web pages, radio programmes, newspaper articles and so forth that can reach millions of people and create a positive change.

Parliamentarian: Member of a parliament

Twitter: Service that allows the user to send very short messages to people who “follow” them.

YouTube: Virtual platform that allows the creation, sharing and viewing of videos online.