Global Action for Measurement of Adolescent health (GAMA)
Terms of Reference and Workplan

Background

Improving health outcomes for adolescents aged 10-19 years is a priority for WHO and its partners, as outlined in the Global Accelerated Action for the Health of Adolescents (AA-HA!). To track progress towards this goal, measurement of health behaviours and determinants, outcomes, and policy and programme implementation is essential.

The increased priority accorded to adolescent health by the global health community is reflected in an increase in the number of organizations collecting data to monitor adolescent health in countries across a wide range of domains, including education, sexual and reproductive health, and nutrition, to name a few. However, data collection efforts have largely occurred in siloes with little collaboration between initiatives, often leading to duplication of work in some areas, and lack of data in other areas. As a result, adolescent health indicators are often not standardized or consistently used across countries and populations, limiting the comparability, sharing and use of the data. Furthermore, many countries report an increased burden of reporting to various international aid partners and other organizations.

To address these issues and improve capacity for measurement, WHO, in collaboration with the UN H6+ partnership agencies (UNAIDS, UNESCO, UNFPA, UNICEF, UN Women, the World Bank, and the World Food Programme (WFP)), has established the Global Action for Measurement of Adolescent health (GAMA) Advisory Group, as well as a similar group for child health measurement, the Child Health Accountability Tracking (CHAT) Advisory Group, following the example of the Mother and Newborn Information for Tracking Outcomes and Results (MoNITOR) Advisory Group that was created in 2016.

Goals

- To provide technical guidance to WHO, UN H6+ agencies and other relevant measurement groups to define a core set of adolescent health indicators, for the purpose of harmonising efforts around adolescent health measurement and reporting;
- To promote harmonised guidance for adolescent health measurement, supporting countries and technical organizations in collecting useful data to track progress in the improvement of adolescent health.
2-year Objectives

1. To define the scope of GAMA’s work by April 2019;
2. To undertake a mapping of initiatives and measurement groups relevant to adolescent health measurement by June 2019;
3. To define priority areas for adolescent health measurement by August 2019;
4. To develop a plan for dissemination of information by September 2019;
5. To develop a plan for engagement with countries and relevant measurement groups by September 2019;
6. To conduct an indicator mapping against the priority areas by November 2019;
7. To identify a set of priority indicators, and provide technical guidance on their measurement to WHO, UN H6+ agencies and other relevant measurement groups by April 2020;
8. To develop a way forward to harmonize measurement of priority indicators by April 2020;
9. To identify measurement and data gaps, and to propose a way forward of filling them by July 2020.

Longer-term Objectives

10. To provide technical guidance to WHO, UN H6+ agencies and other relevant measurement groups on filling the identified measurement and data gaps;
11. To provide technical guidance to WHO, UN H6+ agencies and other relevant measurement groups on developing a systematic framework for reporting;
12. To provide technical guidance to WHO, UN H6+ agencies and other relevant measurement groups for research on indicators needing further development.

Membership of the GAMA Advisory Group

For the GAMA Advisory Group, 12 experts, 1 representative of the MoNITOR Advisory Group, and 4 young professionals have been selected through a selection process, based on technical knowledge, including broad knowledge of adolescent health epidemiology, monitoring and evaluation, familiarity with methods for generating information on adolescent health, and the functioning of health information systems. Consideration was given to experience of working at the national level in adolescent health, gender and geographical balance, as well as broad coverage across the group regarding the main health issues adolescents face.

Members of the Advisory Group shall serve in their individual capacities to represent the broad range of disciplines relevant to the group’s functions and objectives. WHO and UN staff members are not eligible to serve on the Advisory Group.

Members of the Advisory Group were appointed to serve for an initial term of two years.
Terms of Reference of the GAMA Advisory Group

Members of the GAMA Advisory Group are expected to

- Participate in meetings of the group that are planned to take place twice per year;
- Determine the overarching strategy, the workplan and the deliverables to reach the goals and defined objectives of the GAMA;
- Suggest a defined set of tasks to the Secretariat;
- Support the delivery of products defined in the workplan, and contribute to drafting documents;
- Review progress according to the workplan;
- Act as advocates for and representatives of GAMA’s work;
- Collaborate closely with the MoNITOR and CHAT Advisory Groups, as well as existing adolescent health measurement initiatives.

Additional Terms of Reference for the GAMA Advisory Group Co-chairs

In addition to the Terms of Reference of the GAMA Advisory Group, the three co-chairs of the group are expected to

- Participate in monthly conference calls organized by the Secretariat;
- Provide written comments on meeting reports;
- Engage in product development and dissemination of information produced by the GAMA.

Secretariat

The Secretariat of the Advisory Group is ensured by WHO’s Departments of Maternal, Newborn, Child and Adolescent Health (MCA) and Reproductive Health and Research (RHR), with support of the Steering Committee consisting of representatives of the UN H6+ agencies, including UNAIDS, UNESCO, UNFPA, UNICEF, UN Women, the World Bank, and WFP. Tasks of the Secretariat include

- Develop products according to GAMA’s workplan;
- Organize meetings of the GAMA Advisory Group twice per year;
- Chair meetings and share meeting reports;
- Arrange monthly conference calls with the GAMA Advisory Group co-chairs, and share conference call notes with the Advisory Group.

The Secretariat will also ensure compensation of reasonable expenses of GAMA Advisory Group members, such as travel expenses incurred by attendance at Advisory Group meetings or related meetings.
## Workplan of the GAMA

### Until September 2019

#### 1. Definition of the scope of GAMA’s work
- WHO to draft the scope of GAMA’s work by March 2019, including:
  - Definition of adolescence;
  - Measurement focus (health, wellbeing, determinants);
  - Types of indicators (process, input, output, outcome);
  - Coverage of adolescent population subgroups;
  - Disaggregation of indicators.
- GAMA Advisory Group to comment on the draft scope by mid-April 2019.
- WHO to finalize scope and share with the GAMA Advisory Group and the UN Steering Committee by the end of April 2019.

#### 2. Mapping of relevant initiatives and measurement groups
- WHO to conduct a draft mapping of relevant initiatives and measurement groups by the end of April 2019.
- GAMA Advisory Group and UN Steering Committee to comment on the draft mapping by the end of May 2019.
- WHO to finalize draft mapping, and to present it at the second GAMA Advisory Group meeting in June 2019.

#### 3. Definition of priority areas for global adolescent health measurement
- WHO and GAMA co-chairs to specify criteria for definition of priority areas;
- WHO to define draft priority areas, considering:
  - adolescent’s mortality, morbidity, and risk factor burden;
  - sex, age, and adolescent subgroup- and setting-specific priority domains for adolescent health measurement;
  - existing policies and programmes;
  - existing relevant initiatives and measurement groups;
  - priorities of UN H6+ agencies;
  - priorities of adolescents themselves, by the end of June 2019.
- WHO to present draft priority areas at the second GAMA Advisory Group meeting in June 2019 for comment.
- WHO to finalize priority areas by August 2019.

#### 4. Dissemination of information
- WHO to propose a way forward to disseminate information produced by the GAMA, including through development of a website, by the end of June 2019;
- GAMA Advisory Group and UN Steering Committee to comment on proposed way forward to disseminate information.
- WHO to finalize a plan on disseminating information by the end of September 2019, and to ensure information is disseminated accordingly.

#### 5. Engagement with countries and relevant measurement groups
- GAMA Advisory Group to advise WHO and UN Steering Committee on a way forward to engage with countries and relevant measurement groups, by the end of June 2019.
- WHO to finalize a plan on engaging with countries and relevant measurement groups by the end of September 2019.
<table>
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<tr>
<th>October 2019-July 2020</th>
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<tr>
<td>6. Mapping of indicators against priority areas</td>
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<td>- WHO to conduct a detailed indicator mapping by adolescent health measurement initiatives, topics, and type of indicator (process, input, output, outcome) against the priority areas by the end of October 2019.</td>
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<td>- GAMA Advisory Group to comment on the draft indicator mapping by mid-November 2019.</td>
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<td>- WHO to finalize indicator mapping, and to present it at the third GAMA Advisory Group meeting planned for the end of the year 2019.</td>
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<td>7. Prioritization of adolescent health indicators</td>
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<td>- GAMA Advisory Group to advise WHO and UN Steering Committee on a way forward to prioritize adolescent health indicators, and on developing technical guidance for countries and measurement groups for the prioritized indicators by the end of December 2019; including</td>
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<td>- Criteria for selection of core, expanded and additional indicators;</td>
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<td>- Process for selection of indicators;</td>
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<td>- Process for developing technical guidance on measurement of the selected indicators.</td>
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<td>- WHO to prioritize indicators, and to develop a technical guidance for their measurement by the end of April 2020.</td>
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<td>8. Harmonization of measurement of priority indicators</td>
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<td>- GAMA Advisory Group to advise WHO and UN Steering Committee on a way forward to harmonize the measurement of the priority indicators by the end of December 2019; including</td>
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<td>- Defining rationale for harmonization;</td>
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<td>- Methods for harmonization.</td>
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<td>- WHO to develop guidance document on harmonization of measurement of priority indicators by the end of April 2020.</td>
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<td>9. Identification of gaps in the measurement of the priority areas, and development of a way forward on filling those gaps</td>
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<td>- GAMA Advisory Group to advise WHO and UN Steering Committee on measurement gaps of the priority areas, and on a way forward to fill those gaps by the end of May 2019.</td>
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<td>- WHO to systematically document adolescent health measurement gaps and proposed way of filling them by July 2020.</td>
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Beyond July 2020

10. Guidance on filling the identified measurement and data gaps of adolescent health measurement.

11. Development of a systematic framework for routine reporting for countries and measurement groups.

12. Identification of research agenda around indicators needing further development.
Deliverables by July 2020

1. Defined scope of GAMA’s work by April 2019;
2. Mapping of initiatives and measurement groups relevant to adolescent health by June 2019;
3. Defined priority areas for adolescent health measurement by August 2019;
4. Plan on dissemination of information by September 2019;
5. Plan on engagement of countries and relevant measurement groups by September 2019;
6. Indicator mapping by November 2019;
7. Prioritized adolescent health indicators by April 2020;
8. Guidance document on harmonizing measurement of priority indicators by April 2020;
9. List of measurement gaps in the defined priority areas, and documentation of a way forward to fill those gaps by July 2020.

Timelines of the Initiative

The time commitment for this work has been set to an initial period of two years, ending in July 2020.