

- Data is readily available and/or the resources are available to collect any extra data regularly
- Data is collected at least every two years
- Data is available at the lowest unit of equity comparison required, i.e. for individual health subdistricts
- Data quality is good: it is a valid measure and accurately measured
- There is consensus among the major stakeholders that the variable is an important measure of health need
- The resource implication of the health need is large
- The indicator is a proxy for a group of measures of need
- The indicator is an independent contributor to increased need for health resources