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HEALTH SYSTEMS: IMPROVING PERFORMANCE

Round Table 1

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INTRODUCTION

1. The improvement of health systems performance remains one of the main challenges in the African Region. This document aims to stimulate debate among ministers of health attending the fifty-first session of the WHO Regional Committee for Africa on the subject of health systems performance, to generate recommendations that will help countries in their health development work, and to also help the Regional Office and other partners in their ability to support countries.

BACKGROUND

2. When countries in the African Region attained independence about four decades ago, the main challenge was to build national health systems more oriented to solving the health problems faced then, such as the heavy burden of infectious diseases, lack of health care facilities and lack of human resources for health. Ensuring equal access to health care for all citizens was one of the goals set by the new governments. This principle was expressed explicitly or implicitly in the health policies adopted. The Alma Ata Declaration¹ and the subsequent adoption of the Primary Health Care Strategy² guided the achievement of the social goal of health for all. Several initiatives were launched thereafter to help countries achieve health for all. Examples are the Bamako Initiative³ and the Three-Phase African Health Development Scenario.⁴

3. During the last four decades, countries have spent a lot of resources to develop human resources, build health infrastructure and create legal instruments to support health. This has enabled countries to achieve some important results even though conflicts and socio-political instability, natural disasters, and poor economic performance have often compromised the achievements.

4. The countries, dissatisfied with the performance of national health systems, and as part of the economic adjustment programmes, embarked on health sector reforms. Although these were aimed at improving the performance of health systems, most approaches have been piecemeal, not holistic. This is partly reflected in the failures in implementation, especially at district level.

5. In spite of all these efforts, health systems in the WHO African Region remain weak. This was highlighted in the World Health Report 2000⁵ where out of the 191 WHO Member States 39 of the 46 countries in the Region ranked worse than 130th in all the parameters assessed. These results were based on the WHO framework for health systems performance assessment, a new conceptual framework for assessing achievement on each of the goals of the health systems, namely, Health, Fair Financing and Responsiveness.

¹World Health Organization. *Primary Health Care: Declaration of Alma-Ata*, Geneva, 1978.

²World Health Organization. *Global Strategy for Health for All by the year 2000*, Geneva, 1981.

³Resolution AFR/RC37/R6, women and children's health through the funding and management of essential drugs at community level B Bamako Initiative, 1987.

⁴WHO/AFRO, Accelerating the Achievement of Health for All Africans. The Three-Phase Health Development Scenario. Brazzaville, 1989.

⁵WHO World Health Report 2000. *Health systems: improving performance.*

An important innovation is how the framework proposes to measure health systems performance whereby goal attainment for each country is rated against what could have been achieved given the level of resources available in that country. This rating can then be used to compare the performance of health systems of countries, which may be at different levels of development.

6. There has, however, been a lot of debate about the new framework especially concerning the need to improve or develop the methodologies. After debate at the 107th session of the Executive Board, it was agreed that the framework is a major development, methodologies for measuring the goals of health systems needed significant improvement and that methodologies for measuring functions should be developed. It was recommended to have a scientific peer-review of health systems performance assessment, including updating methodologies and identifying appropriate data sources to be used, as part of the technical consultation process.

7. To this end, a tool for assessing the operationality⁶ of district health systems has been developed in the African Region. It is a practical guide to help district management teams to generate evidence, which they can use in decision making. Further work in developing additional tools to measure the functioning of health systems will be undertaken in the Region in line with the Executive Board's decision.

8. These developments concerning new ways of measuring the goals and functioning of health systems provide opportunities for the generation of important information that can be used for policy dialogue and decision-making. The tools will also help policy makers and technical staff to comprehensively assess health systems. It is hoped that with a complete picture of the system, solutions suggested will also be comprehensive.

FRAMEWORK AND CHALLENGES

9. The vision of the regional health for all policy for the 21st Century⁷ is to overcome diseases related to poverty, exclusion and ignorance through good governance and development of sustainable, autonomous and proactive health systems which will help the people lead a decent and worthy life, by year the 2020. To achieve this, some conditions need to be met such as adequate mobilization, equitable allocation and efficient management of resources, and creation of a stable and enabling political and socio-economic environment for sustainable health development.

10. One of the strategic directions of Agenda 2020^7 is to undertake health systems reform by drawing upon primary health care principles. This means that national health systems in the Region have to improve health and reduce inequity, while assuring fairness of financing and enhancing responsiveness to legitimate expectations of the people.

11. A major task requiring more attention of the national authorities is the delivery of quality health care to all. It is important to obtain evidence on how health systems are performing and subsequently use such evidence for policy debate and for defining the most appropriate interventions for improving health systems response. Use of the new WHO framework for health system performance assessment will require significant investment in health information systems and research, especially at operational level.

- 12. The challenges that countries in the Region will face are as follows:
 - (a) how to cope with the double burden of disease due to communicable and noncommunicable diseases;

⁶WHO/AFRO, District operationality assessment tools, 2000.

⁷AFR/RC50/8, Health for all policy for the 21st Century in the African Region: agenda 2020.

- (b) how to meet the health needs of the poorest; and
- (c) how to finance health systems so that they can respond to the health demands of the majority.
- 13. In addressing the high burden of health problems in the Region, countries have to:
 - (a) choose and implement cost-effective priority health interventions that address HIV/AIDS, tuberculosis, malaria, childbearing and childbood diseases, nutrition, tobacco effects and other noncommunicable diseases in order to reduce health inequalities and increase healthy life expectancies;
 - (b) increase fairness in financial contributions and budget allocations to health, promote allocative and technical efficiencies and define prepayment and risk pooling mechanisms which could benefit all the population while drastically reducing out-of-pocket payments, particularly for the poorest and most disadvantaged; and
 - (c) increase the responsiveness of health systems to people=s legitimate expectations.

14. To attain these objectives, countries have to strengthen their capacity to carry out the health system functions, which are service provision, resource generation, financing and stewardship. Although much work has been done in this area in the past, there are still gaps in terms of the mechanisms for measuring how well the functions are being undertaken.

DISCUSSION POINTS

15. What are the main constraints that countries face in generating and using evidence for the development of their health systems? What should be the main areas of focus for improving the capacity of countries to generate evidence on health system performance? How can cooperation between countries contribute to improve this work in the Region?

16. The health systems are facing an increased burden of diseases such as HIV/AIDS, malaria, problems related to childbearing, childhood and noncommunicable diseases including, malnutrition and the catastrophic consequences of tobacco use. Countries need to revisit the strategic design of their health services and identify appropriate institutional arrangements for improving service delivery. This means that they must find ways to expand health services coverage, integrating traditional medicine, home care and self-care and involving other providers such as the private sector. How can countries improve the provision of services and, at the same time, pay attention to all these issues?

17. Countries must play a strategic role in ensuring that the health resources produced contribute to the achievement of health system goals. Concerning human resources for health, how can countries best address issues in education and training, regulation of the health professional labour force and incentives in order to retain staff and improve their productivity?

18. Another issue concerns how to obtain other resources (drugs, supplies, etc.) as well as pay attention to their quality. How can countries improve the efficiency of the procurement systems in the Region? Regarding this aspect, some organised markets, e.g. ECOWAS and SADC, could serve as avenues for the improvement of procurement policies. How can the Region use these opportunities to purchase drugs, for example?

19. The Governments in the Region have to ensure fairness in the financing of health services while ensuring that the poorest have access on a sustainable basis. The strategic options would be to develop mechanisms for risk pooling which will benefit the poor, and yet avoid catastrophic expenditures on health. How do countries see this problem? What experiences are available and what are the suggestions for solving

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the problems? In light of available experiences, what could be the strategic options for the Region? What kind of support do countries need? What factors could positively influence the role of governments?

20. Since governments have to play a more significant role in ensuring transparency in the collection and utilization of financial resources, how can ministry of health play their role? Does it require a change in the institutional mandate of ministries of health and what could be the implications of such new responsibilities?

21. Stewardship is defined as a "function of a government responsible for the welfare of the population, and concerned about the trust and legitimacy with which its activities are viewed by the citizenry".⁸ It requires vision, intelligence and influence, primarily by the health ministry, which must oversee and guide the working and development of the nation's health actions on governments; behalf. The role of government may be seen as "proactive", i.e., regulating in advance to prevent certain outcomes or "reactive" i.e., regulating in response to emerging outcomes in order to minimize any negative effects. Thus, stewardship is a major concern for the less developed countries. What kind of strategic orientation should be defined to enhance the stewardship function of national health systems? The management of information, including improved registration systems, constitutes one of the important stewardship roles of governments.

EXPECTED OUTCOMES

22. The need to assess health systems performance and how to use the evidence generated in policy debates will have been clarified.

23. Key issues to be addressed in order to improve health systems performance as well as critical issues related to each of the core health system functions (provision of care, resource generation, fair financing and stewardship) in the Region will have been identified and orientations to address them given.

24. Orientations on the work of the Regional Office and country offices concerning the enhancement of health system performance will have been defined and the commitment of national authorities to participate obtained.

⁸Saltman, R B, Ferroussier-Davis, O. On the concept of stewardship in health policy. *Bulletin of the World Health Organisation*, 2000; 78: (6).