
EVERYBODY'S BUSINESS

STRENGTHENING HEALTH SYSTEMS TO IMPROVE HEALTH OUTCOMES

WHO'S FRAMEWORK FOR ACTION



WHO Library Cataloguing-in-Publication Data :

Everybody business : strengthening health systems to improve health outcomes : WHO's framework for action.

1.Delivery of health care - trends. 2.Health systems plans. 3.Outcome assessment (health care).
4. Health policy. I.World Health Organization.

ISBN 978 92 4 159607 7

(NLM classification: W 84.3)

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Printed by the WHO Document Production Services, Geneva, Switzerland

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LIST OF ABBREVIATIONS

ACRONYM	FULL TITLE
AU	African Union
CCS	WHO Country Cooperation Strategies
EURO	WHO, Regional Office for Europe
GATS	General Agreement Trade in Services
GAVI	Global Alliance on Vaccines Initiative
GAVI-HSS	GAVI Health System Strengthening
GDP	Gross Domestic Product
GHPs	Global Health Partnerships
GOARN	Global Outbreak And Response Network
HIV/AIDS	Human Immunodeficiency Virus / Acquired Immunodeficiency Syndrome
HSAN	Health Systems Action Network
IMAI	Integrated Management of Adult Illness
IMCI	Integrated Management of Child Illness
LHW	Lady Health Worker
MDG	Millennium Development Goal
MOH	Ministry of Health
MTSP	Medium-Term Strategic Plan
NEPAD	New Partnership for Africa's Development
NGO	Non-Governmental Organization
OECD	Organisation for Economic Co-operation and Development
SARS	Severe Acute Respiratory Syndrome
TB	Tuberculosis
TTR	Treat, Train and Retain initiative
UN	United Nations
UNITAID	International Drug Purchasing Facility
WHO	World Health Organization

FOREWORD

The strengthening of health systems is one of six items on my Agenda for WHO. The strategic importance of Strengthening Health Systems is absolute.

The world has never possessed such a sophisticated arsenal of interventions and technologies for curing disease and prolonging life. Yet the gaps in health outcomes continue to widen. Much of the ill health, disease, premature death, and suffering we see on such a large scale is needless, as effective and affordable interventions are available for prevention and treatment.

The reality is straightforward. The power of existing interventions is not matched by the power of health systems to deliver them to those in greatest need, in a comprehensive way, and on an adequate scale.

This Framework for Action addresses the urgent need to improve the performance of health systems. It is issued at the midpoint in the countdown to 2015, the year given so much significance and promise by the Millennium Declaration and its Goals. On present trends, the health-related Goals are the least likely to be met, despite the availability of powerful drugs, vaccines and other tools to support their attainment.

The best measure of a health system's performance is its impact on health outcomes. International consensus is growing: without urgent improvements in the performance of health systems, the world will fail to meet the health-related Goals. As just one example, the number of maternal deaths has stayed stubbornly high despite more than two decades of efforts. This number will not fall significantly until more women have access to skilled attendants at birth and to emergency obstetric care.

As health systems are highly context-specific, there is no single set of best practices that can be put forward as a model for improved performance. But health systems that function well have certain shared characteristics. They have procurement and distribution systems that actually deliver interventions to those in need. They are staffed with sufficient health workers having the right skills and motivation. And they operate with financing systems that are sustainable, inclusive, and fair. The costs of health care should not force impoverished households even deeper into poverty.

This Framework for Action moves WHO in the right direction, on a course that must be given the highest international priority. WHO staff, working at all levels of the Organization, are its principal audience, but basic concepts, including the fundamental "building blocks" of health systems, should prove useful to policy-makers within countries and in other agencies.

Margaret Chan
Director-General



EXECUTIVE SUMMARY

It will be impossible to achieve national and international goals – including the *Millennium Development Goals* (MDGs) – without greater and more effective investment in health systems and services. While more resources are needed, government ministers are also looking for ways of doing more with existing resources. They are seeking innovative ways of harnessing and focusing the energies of communities, non-governmental organizations (NGOs) and the private sector. They recognize that there is no guarantee the poor will benefit from reforms unless they are carefully designed with this end in mind. Furthermore, they acknowledge that only limited success will result unless the efforts of other sectors are brought to bear on achieving better health outcomes. All these are health systems issues.

The World Health Organization (WHO) faces many of the same challenges faced by countries: making the health system strengthening agenda clear and concrete; creating better functional links between programmes with mandates defined in terms of specific health outcomes and those with health systems as their core business; ensuring that the Organization has the capacity to respond to current issues and identify future challenges; and ensuring that institutional assets at each level of the Organization (staff, resources, convening power) are used most effectively.

The primary aim of this Framework for Action is to clarify and strengthen WHO's role in health systems in a changing world. There is continuity in the values that underpin it from its constitution, the Alma Ata Declaration of Health For All, and the principles of Primary Health Care. Consultations over the last year have emphasized the importance of WHO's institutional role in relationship to health systems. The *General Programme of Work (2006-2015)* and *Medium-term Strategic Plan 2008-2013* (MTSP) focus on what needs to be done. While reaffirming the technical agenda, this Framework concentrates more on how the WHO secretariat can provide more effective support to Member States and partners in this domain.

There are four pillars to WHO's response, each with its set of strategic directions:

A single Framework with six building blocks

A key purpose of the Framework is to promote common understanding of what a health system is and what constitutes health systems strengthening. Clear definition and communication is essential. If it is argued that health systems need to be strengthened, it is essential to be clear about the problems, where and why investment is needed, what will happen as a result, and by what means change can be monitored. The approach of this Framework is to define a discrete number of "building blocks" that make up the system. These are based on the functions defined in World health report 2000. The building blocks are: **service delivery; health workforce; information; medical products, vaccines and technologies; financing; and leadership and governance (stewardship).**

The building blocks serve three purposes. First, they allow a definition of desirable attributes – what a health system should have the capacity to do in terms of, for example, health financing. Second, they provide one way of defining WHO's priorities. Third, by setting out the entirety of the health systems agenda, they provide a means for identifying gaps in WHO support.

While the building blocks provide a useful way of clarifying essential functions, the challenges facing countries rarely manifest themselves in this way. Rather, they require a more integrated response that recognizes the inter-dependence of each part of the health system.

THE SIX BUILDING BLOCKS OF A HEALTH SYSTEM

- Good **health services** are those which deliver effective, safe, quality personal and non-personal health interventions to those that need them, when and where needed, with minimum waste of resources.
- A well-performing **health workforce** is one that works in ways that are responsive, fair and efficient to achieve the best health outcomes possible, given available resources and circumstances (i.e. there are sufficient staff, fairly distributed; they are competent, responsive and productive).
- A well-functioning **health information** system is one that ensures the production, analysis, dissemination and use of reliable and timely information on health determinants, health system performance and health status.
- A well-functioning health system ensures equitable access to essential **medical products, vaccines and technologies** of assured quality, safety, efficacy and cost-effectiveness, and their scientifically sound and cost-effective use.
- A good **health financing** system raises adequate funds for health, in ways that ensure people can use needed services, and are protected from financial catastrophe or impoverishment associated with having to pay for them. It provides incentives for providers and users to be efficient.
- **Leadership and governance** involves ensuring strategic policy frameworks exist and are combined with effective oversight, coalition-building, regulation, attention to system-design and accountability.

Health systems and health outcome programmes: getting results

WHO's involvement in all aspects of health and health systems constitutes a comparative advantage. Nevertheless, it is clear that, in too many instances, WHO's support can be fragmented between advice focusing on particular health conditions (that may not always take systems or service delivery issues into account) and advice on particular aspects of health systems provided in isolation. While there are good examples of how both streams of activity can work together, the challenge is to develop a more systematic and sustained approach that responds better to the needs of Member States.

Several productive relationships have been established, bringing together “programme” and “systems” expertise. These include work on costing and cost-effectiveness; the *Treat, Train and Retain (TTR)* initiative linking systems work on health service staffing with improving access to HIV/AIDS care and treatment, and the work across WHO stimulated by the Global Alliance on Vaccines Initiative (GAVI) Health Systems Strengthening window.

Three complementary directions to a more strategic response are proposed: extending existing interactions; better and more systematic communication and awareness among all WHO staff on how to think systematically about health system processes, constraints and what to do about them; and greater consistency, quality and efficiency in the production of methods, tools and data management

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