Matching the power of Global Health Initiatives and health systems to increase access to health services

Carissa Etienne
Assistant Director-General
Health Systems and Services
World Health Organization
Global progress on MDG 4

Sub-Saharan Africa

Deaths per 1,000 live births

South Asia

Deaths per 1,000 live births

East Asia & Pacific

Deaths per 1,000 live births

Latin America & Caribbean

Deaths per 1,000 live births

Europe & Central Asia

Deaths per 1,000 live births

Middle East & North Africa

Deaths per 1,000 live births

Source: World Development Indicators.
Global progress on MDG 5

Sub-Saharan Africa
Deaths per 100,000 live births

East Asia & Pacific
Deaths per 100,000 live births

Europe & Central Asia
Deaths per 100,000 live births

South Asia
Deaths per 100,000 live births

Latin America & Caribbean
Deaths per 100,000 live births

Middle East & North Africa
Deaths per 100,000 live births

Source: World Development Indicators.
Scope of Unfinished Agenda on Maternal Mortality in Latin America & the Caribbean

USA trend

maternal mortality (ratio per 100,000 live births)


Global progress on ART

People in need of ART in millions

- Target
- Actual progress

Timeline:
- Dec 2003 to Dec 2007

World Health Organization
The challenges to scale up services for HIV, TB, malaria, and immunization

HIV/UA assessment report
- Inadequate financing
- HR crisis
- Affordable commodities
- Stigma, discrimination...
- Accountability

Global Plan to stop TB
- Partnership alignment
- Inadequate financing
- Laboratory capacity
- HR crisis
- Quality drugs

World Malaria report
- Drug efficacy
- Information system
- Inadequate financing
- HRH and Community services
- M&E

GAVI/Norad report
- HR crisis
- Inadequate financing
- Leadership and management
- Inter-agency coordination
Health systems building blocks

- Leadership/governance
- Health workforce
- Information
- Service delivery
- Financing
- Medical products, vaccines and technologies
- People
Systems performance

- Scale
- Scope
- Distribution
- Quality/Safety
- Systems capabilities
Why are poorer populations...

- Two times more likely to have TB?
- Three times less likely to access care for TB?
- Four times less likely to complete TB treatment?
- Five times more likely to incur impoverishing payments for TB care?
The need to look at the big picture
Not vertical, not horizontal – it’s the results that matter

- False dichotomy between GHIs and Health Systems
- Complementarity should be the drive
- Good health outcomes: the shared objective
Total annual resources available for AIDS 1986 - 2005

- Signing 2001 UN Declaration of Commitment on HIV/AIDS (UNGASS)
- World Bank MAP launch
- UNAIDS
- 1623
- Global Fund
- PEPFAR
- 8297

Notes:
1. 1986-2000 figures are for international funds only
2. Domestic funds are included from 2001 onwards

Recommended expenditure: >$60/capita (Brundtland); >$34/capita (CMH)

<table>
<thead>
<tr>
<th>Number of countries</th>
<th>Amount of spending</th>
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<tbody>
<tr>
<td>4</td>
<td>&gt; $60</td>
</tr>
<tr>
<td>2</td>
<td>$34 - $60</td>
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<tr>
<td>11</td>
<td>$12 - $34</td>
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<tr>
<td>18</td>
<td>&lt; $12</td>
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<tr>
<td>13</td>
<td>Data not available or population &lt;1.5 million</td>
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Health outcomes and health spending

Infant mortality rate vs total health spending per capita

Variability but overall trend

Source: World Development Indicators, WHO 2007
Note: Health spending per capita in current US$; Log scale
Life Expectancy vs. Spending

The graph illustrates the relationship between life expectancy and per capita health care spending in international dollars. Countries such as Cuba, Singapore, Japan, Switzerland, United States, Namibia, South Africa, Botswana, and Sierra Leone are marked on the graph, showing a trend where higher spending correlates with longer life expectancy.

Source: World Health Organization
Donor Aid: Volatile and Unpredictable

Try to manage this...
Domestic resources for health in low income countries

Majority of financial resources for health are domestic
The response: the “Paris Principles”

- Countries in the lead
- Single plan, in context of country development framework
- “Harmonization” and “Alignment”
- Predictability of donor funding (long-term commitments)
What does IHP offer?

• ‘Country compacts’
• Knowledge, guidance and tools
• Enhanced coordination and efficiency
• Accountability and monitoring performance
"The issue"

...we face a formidable gap between innovations in health (vaccines, drugs and strategies for care) and their delivery to communities in the developing world...

Madon et al. Science December 2007
A new field of knowledge?

- Based on evidence
  - Beyond the RCT?
  - Illuminating the black box of delivery?

- Driving change of mindset
  - On gold standards
  - On global health
Evidences of positive spill-overs

- **Patients**: empowered, treated with respect
- **Providers**: improved CARE
- **Information**: EMR, SMS alerts…
- **Supplies**: improved procurement, distribution ..
- **Infrastructure**: new and better …
- **Financing**: largely free
"Evidences" of negative spill-overs

- **Patients:** Stigma prevails...
- **Providers:** Better paid projects...
- **Information:** Multiple reporting...
- **Supplies:** Stock outs ...
- **Infrastructure:** HIV labs...
- **Financing:** Selective free services...
Key Questions

- **Health systems and Global Health Initiatives- the state of affairs**
  - Are there positive synergies between GHIs and HSS?
  - Are these synergies being exploited to assure maximum, mutual added value?

- **The need for systematic evidence**
  - Are there knowledge gaps and, if so, can they be identified?
  - How best can current experience be mapped using existing evidence?
  - What research is needed to develop the evidence base?

- **The search for a logical framework for investigation**
  - Can we develop appropriate research methodology?
  - Can we construct a logical framework for investigation?
GAVI and Health Systems Strengthening

- Injection safety US$ 134 million
- Immunisation services US$ 380.7 million
- Health system strengthening US$ 408.9
- New and underused vaccines US$ 2.6 billion

- 74%
- 11%
- 11%
- 4%
Using APOC's networks for multiple Interventions

Reaching the poorest...

> 27 million people treated with multiple health interventions
Polio mainstreaming is already happening

The new 'R.E.D.' strategy, using polio approaches, raised DPT3 >15% in Africa in 2003-6

- Polio approaches to deliver bednets
- Polio approaches to deliver other vaccines on Mekong
- Polio approaches to build a global VPD lab network
- Polio approach to run measles campaigns
- Polio system fights Avian Flu
Synergies leading to systems transformation
Success story: Central Plateau, Haiti

Integrated HIV/TB programme strengthens primary health care including immunization coverage


Aligning budgets with priorities in Tanzania

1996-1997: Before basket funding and planning tools...

2000-2001: After basket funding and planning tools...
Framework for PHC reforms

The social values that drive PHC: what citizens expect for themselves and their families, what they aspire to for their society

Health equity
Solidarity
Social inclusion
(Universal Coverage reforms)

People – centred care
(Primary Care reforms)

What citizens aspire to for their society

Health authorities one can rely on
(Leadership reforms)

Communities where health is secured
(Public Policy reforms)

What citizens expect for their personal life and that of their families

Participation
Thank you