The summary report of the review on the use and utility of six regional health system strategies can be accessed on the webpage of the WHO regional office for the Western Pacific Region at: http://www.wpro.who.int/health_services/documents/guiding_health_system_development_western_pacific/en/

Hard copies can be obtained by contacting:
Public Information Office at pio@wpro.who.int
Health Services Development Unit at hiddenwpro.who.int

Six regional strategies guiding health system development in the Western Pacific

Guiding health systems development in the Western Pacific

Lessons for WHO and Member States

Effective technical partnership

WHO Secretariat processes and work in country

Technical knowledge and learning networks

Basis for working with partners

Lessons on what works and do not work

\( \text{Louis Menand, The Marketplace of Ideas} \)

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Guiding health systems development in the Western Pacific

The pursuit, production, how we keep our feet on the ground social beings and how we change—It is how we reproduce ourselves as characteristic of humans. The ability to create knowledge and connection to the past; and it is central activities of a civilization. Preservation of knowledge are the core activities of a civilization.

Louis Menand, The Marketplace of Ideas

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Rationale and the Review of the Process

In recent years, WHO in the Western Pacific Region has developed and been guided by six regional strategies and action frameworks related to health systems. The six strategies underpin the technical knowledge component of the WHO Secretariat’s partnerships with Member States in strengthening health systems.

The strategies recommend actions for Member States in the areas of human resources, health financing, communication, and advocacy, to ultimately achieve better health outcomes. The strategies are based on the values of primary health care. All the strategies have a common goal to support health system functioning for better health, health equity and financial protection—all key components of universal health coverage (UHC).

In 2012–2013 an extensive review was conducted with several aims:

- to assess the value of the strategies to the ten participating countries;
- to help the countries to assess their own policies and plans addressing the areas covered by the six strategies;
- to help the WHO Secretariat improve its work on behalf of all Member States by identifying gaps that may jeopardize the effectiveness of the strategies and of WHO’s technical support.

Ten low- and middle-income countries were included representing diversity in the Region: Cambodia, China, Fiji, Fiji Islands, Indonesia, Laos, Mongolia, Papua New Guinea, the Philippines, Solomon Islands and Viet Nam. Methods included desk review of WHO sources, national strategies and policies, and extensive dialogue with the respective Member States Regional technical units. Key informant interviews with 61 senior national health sector officials in eight of the ten Review countries explored their views on WHO’s strategies and health system development work.

A Summary Report, Guiding Health System Development in the Western Pacific: Summary of a Review on the Use and Utility of Six Regional Health System Strategies has been published, based upon the full technical report produced by the review. A High-level Consultation on the Review held in Manila in July 2013 was attended by 25 representatives of 18 Member States, as well as WHO Secretariat staff. Review findings were presented at the 64th Regional Committee Meeting in Manila in October, 2013.

Findings - The value and role of the strategies

The Review found that guidance from WHO is generally highly regarded and the health system strategies and frameworks are seen as valuable sources of evidence-based policy options and ideas, and as support for advocacy. Most of the ten countries include universal health coverage as a strategic priority in their health sector plans.

Many of the other recommended actions and principles from the strategies are also included in national plans. However, WHO health system teams should better monitor whether their inclusion in national plans is always realistic and whether funding for implementation is available.

While WHO strategies provide policy options and ideas, ultimately countries’ own health and development plans are of foremost importance. The Review highlighted that the implementation of any strategy depends upon context. All global and regional strategies and action frameworks must be flexible and adaptable to the context of each country. WHO can work with Member States on the appropriate and realistic adoption and adaptation of strategy components.

Findings - The role of WHO and its staff

WHO staff are seen as equally or even more important than the WHO health system strategies themselves. It is the WHO staff who work with countries to adapt strategy recommendations to national contexts and to sequence recommended actions to achieve balanced progress in functioning of health systems.

Management of staff can be a weak spot for WHO. Frequent staff turnover and poor orientation of incoming staff were seen as problematic by some Member State interviewees, leading to discontinuation or disruption of work.

Findings - “Whole-of-system” and multi-sectoral approaches

The six regional health system strategies provide little guidance on integrated services or “whole-of-system” approaches, including effective engagement with non-state actors in health or with non-health sectors.

Integrated services and horizontal “whole-of-system” approaches offer opportunities for more effective delivery of services and more efficient use of resources within health systems and beyond. National health systems could engage more fully with non-state sectors in health and non-health sectors to mitigate the negative effects of social, environmental and economic determinants of health. WHO needs to provide more support in these areas. The demographic, socioeconomic and epidemiological transitions occurring in the Region mean that health systems alone cannot achieve healthier societies. Even in developed countries, the rise of noncommunicable diseases, antimicrobial resistance and increasing numbers demonstrating failures in health systems and other sectors.

The Review found that the WHO Secretariat should be more agile and adaptable in its work with Member States, including reduction in the strongly vertical nature of Secretariat functioning.

Findings - Knowledge management

The Review found that while WHO’s technical knowledge, it is weak in gathering and synthesizing information on previous and current health system development work by countries, WHO or partners. Although a great deal of information is available, it is not synthesized and organized so that it is easily accessible and of practical use.

With high WHO staff turnover, systematic recording and synthesis of information about previous work is vital to facilitate orientation of new staff. However, countries’ national strategies and handbooks valuable knowledge and experience is lost when experienced staff members leave. This undermines capacity for consistent, continuous and seamless support by their replacements. Key informants in a number of countries expressed frustration at work that is forgotten or the need for repeated orientation resulting from WHO staff turnover.

Findings - Knowledge and learning networks

More and more efficient sharing of knowledge, ideas and lessons on health sector development will depend on WHO Member States and the Secretariat together making optimum use of new information technologies. WHO has an essential future role in promoting and supporting networking of Member States and exchange of information and knowledge in health systems and other sectors. Where WHO is a strong leader in health sector resilience—the ability of health systems to learn, adapt and respond appropriately to changing needs and challenges in a timely manner. The evidence base of policy options and technical information is dynamic, and countries requested the WHO Secretariat to support timely availability of information so that they can stay abreast of advances.

Measuring health system performance

The Review collated data on many of the indicators proposed in the six regional health system strategies in order to describe the context for the Review and to assess the ten countries’ current status in health system strengthening.

In the table below, the latest data for 2004–2012 are presented on 33 of the 47 indicators proposed by WHO headquarters for monitoring health system performance and universal health coverage. Underlying shades indicate better performance. The country columns are ordered from left to right according to total health expenditures (THE) per capita (top row). Countries with higher THE per capita appear to have better outcomes on service delivery such as skilled attendance at birth and U5F immunization coverage and on indicators such as maternal and child mortality and life expectancy. The Review also found generally positive trends over time in the ten countries.

The Review also produced analyses of national data relating to access to essential medicines, human resources for health, financing, traditional medicines and data. Essential medicines show many positive results, but less progress on some aspects of drug control that could have devastating consequences, such as antimicrobial resistance, which has the potential to create even more health problems for the future. Continuing inequities in distribution of health workers have progressively compounding negative effects on health outcomes. All the Review countries need better information disaggregated by key social stratifiers to properly monitor and take action on inequities in health.

Data on 33 of 47 indicators to monitor health systems performance, 2004–2012

(latest available data for each country from within the period)