

**Maximizing Positive Synergies
between Health Systems and Global Health Initiatives**

Initial Recommendations

- 1. Be bold**
- 2. Set targets**
- 3. Enhance leadership**
- 4. Engage communities**
- 5. Improve evidence**

Introduction

The Venice Recommendations lay the foundations for a new paradigm in global public health — one in which more consistently productive and constructive interactions between Global Health Initiatives (GHIs) and country health systems will mean better value for money and better health outcomes. The recommendations recognise that GHIs work within health systems, and that their success is dependent on the strength of those systems. They aim to lay to rest the counter-productive debate around the interplay of GHIs and health systems. The recommendations are the product of extensive evidence gathering, analysis and consultation. A wide range of stakeholders, involved in both GHIs and country health systems, have participated in their development. They are consistent with other existing global recommendations and will add weight to related efforts to improve the alignment of different aid modalities with country needs and plans. The recommendations are also consistent with the values of primary health care and will contribute to progress in the four policy directions of the primary health care agenda (universal coverage; service delivery; public policy; and leadership) which emphasise that health equity, social justice, social participation, and inter-sectoral collaboration must lie at the heart of all efforts to achieve good quality healthcare that is accessible to all. Implementing the Venice Recommendations will demand that those involved in GHIs, and those involved in health systems strengthening, work together as strong and fair partners, in mutual trust, in an effort to rapidly strengthen health systems while also keeping up the momentum to deliver on disease-specific targets through maximizing the synergies between them. Each of the five recommendations implies the need for adaptation in the ways in which GHIs currently operate and also for modifications to health systems that will serve to make the interface between the two more productive. Measures for implementation of the recommendations are discussed in the second section of this document entitled “Implementing the Venice Recommendations”.

The evidence that informs these recommendations has been compiled as part of the WHO-led effort on Maximizing Positive Synergies between health systems and Global Health Initiatives. The evidence is assessed and presented in a report “An assessment of interactions between global health initiatives and country health systems” which is published in the 20 June issue of the international medical journal, the Lancet.

Recommendation 1 - “Be bold”

Infuse the health systems strengthening agenda with the sense of ambition, the scale, the speed, and the increased resources that have characterized the GHIs

Comment: People’s appetite for better health services has never been greater. Growing expectations for health care that is more accessible, more equitable and more efficient will only be met if these objectives are firmly embedded in ambitious country health plans that generate the confidence and support of all stakeholders.

The GHIs have been characterized by an impressive sense of urgency and purpose. In many cases, the scale of the resources they have been able to mobilize, the speed and agility of their approach to implementation, and the emphasis they have placed on quality have raised the benchmarks for global public health and generated confidence among external investors. GHIs

have also shown the potential benefits that can be derived from the inclusion of new partners such as civil society (including affected populations) and the private sector. Paradoxically, the chronic weaknesses of country health systems are limiting the ambitious scale-up supported by GHI investments. Furthermore, weak systems can be further undermined by the pressures involved in supporting disease-specific efforts. There is now recognition that meeting the global commitment to the Millennium Development Goals, as well as responding to the threats posed by global pandemics and contributing to economic growth and human development, will require ambitious global and national efforts by all international partners and national authorities to strengthen health systems. This means mobilizing the highest-level political and social commitment. The growth in external funding for health in recent years, along with increases in domestic spending on health in most countries, is encouraging. However, achieving agreed health targets will require continued growth in both international and domestic sources of funding for disease-specific work and health systems strengthening for many years to come. At a national level, in addition to clear targets for health spending, such as those agreed at Abuja, long-term financing strategies for health are required. These must place a priority on pre-payment mechanisms and be responsive to the comprehensive needs and expectations of populations. This also implies a need to address the emerging gap in the availability and quality of services for different health needs. Strategies should be developed in such a way that the principle of additionality is paramount and that there is no risk of, or room for, external investments crowding out or substituting for the growth of domestic resource mobilization. Macroeconomic policies merit re-examination to ensure the necessary growth in national health spending.

Given the scale of the short-falls in essential investments in health in many low-income countries, the global public health community must recognize that further mobilization of resources is imperative — notwithstanding the current economic climate.

While more money for health is essential, equally important is the use of all resources in the most effective and equitable way to produce maximum returns on investment. Better alignment of future initiatives with national health strategies and plans, and commitment of resources in a predictable manner, will help to ensure that all investments work more efficiently towards meeting the shared goals of increased access and equity in health services.

Within national financing strategies, greater clarity is required on the role GHIs will play over time in supporting the equitable and sustainable growth of the health sector.

The spirit of global solidarity which has been a key factor in the scale-up of the disease-specific response must now infuse a broader public health agenda that can also address the needs of those who remain relatively underserved. Driving forward the necessary improvements in health systems will demand shared effort, renewed trust, and mutual respect between GHIs, national authorities, and other international partners. It will also require concerted efforts to build country capacity in health systems governance and leadership. Emphasis should be on inclusive governance that extends the engagement of civil society and strengthens community systems. A multi-sectoral approach will also help to bring wider influences to bear on health systems strengthening efforts.

Recommendation 2 - “Set targets”

Agree on clear targets and indicators for health systems strengthening

Comment: Target-setting and results-based programming are thought to be significant factors in the success of the GHIs. However, while clear targets exist to link inputs to results in disease-specific work (including the measurement of grant performance in relation to GHI disbursements), there are far fewer equivalent targets for the strengthening of health systems.

Target-setting demands identification, harmonization and agreement on appropriate indicators at the outset. The current lack of widely agreed indicators to measure the performance of health systems, or to assess the impact and outcomes of health systems strengthening efforts against agreed benchmarks, inhibits the setting of targets. Identifying and agreeing on a series of measurable indicators for each of the key building blocks of health systems (service delivery; governance; financing; health workforce; health information; and supply management) will serve to redress the imbalance and accelerate action by all international partners (including GHIs and other donors) and national authorities on health systems. Targets should also be set for measuring community engagement with GHIs and national governments in their health system strengthening efforts and for measuring the impact of GHIs in strengthening community systems that promote and deliver health-related services. Health systems strengthening targets and indicators will make it possible for GHIs to assess more effectively whether their interactions with health systems are positive or negative.

There is also an urgent need for improvements in national health information systems for the collection and analysis of necessary data so that progress towards disease-specific and health systems targets can be more reliably assessed.

Recommendation 3 - “Enhance leadership”

Promote country capacity for strong national planning processes and better alignment of resources with national planning processes

Comment: The disease-specific investments of GHIs can produce either fortuitous or planned benefits for wider systems strengthening. However, the priority that GHIs place on achieving their own specific targets can also result in varying degrees of duplication and displacement. This is particularly evident in the areas of human resources for health, health information, and supply management where different GHIs have contributed to a proliferation of parallel systems. Greater effort is needed to ensure that resources flowing from GHIs are closely matched to country priorities as expressed in national health and HIV/AIDS strategic plans. Diverse commitments on health systems strengthening, including different external partners and national programmes, should align around a clear plan for national systems building which should prioritize the key components of health information, the health workforce and supply management. Efforts to improve accountability and transparency, and to reach agreement on

systems for shared accountability between donors and implementers in public health, must also be accelerated.

To achieve these aims there will be a need for transparent and participatory governing structures with clear accountability, including the involvement of the community and civil society organizations, as well as local governments. It is essential to enhance sustainable national leadership capacity to analyse, synthesize, formulate, and implement their own national health targets and plans, and to ensure their negotiation capacity to align the targets and management systems of all GHIs and development partners to the national health strategies and plans. This national capacity should also include the internal capacity to produce enough human resources for health as well as effectively retain them in the health systems.

The growing awareness of the importance of comprehensive country strategies for health that are collectively supported by external actors and linked to tangible results represents an important opportunity for GHIs to support country health systems more effectively. Through their existing links to national disease control programmes and by identifying specific wider health systems strategies (such as those for building and sustaining the health workforce and for information systems development), GHIs can add directly to national health plans. In supporting country health systems, GHIs need not stray from their focus but rather, where appropriate, work with partners with greater expertise in health systems strengthening.

Recommendation 4 - “Engage communities”

Promote the meaningful involvement of communities and civil society organisations in the governance of health systems and the delivery of health services

Comment: Civil society organizations have played a significant role in advocating for more resources for health and have been catalytic in the formation and development of some of the major disease-specific GHIs. GHIs have contributed towards building capacity outside the state sector and have improved community participation in the governance of public health. Efforts must now be made to leverage the influence of communities, including service users, for health systems strengthening and to deploy the full range of resources and expertise available through partnerships between the public and private sectors and civil society organizations. Community engagement and the increased involvement of civil society organisations, including service users, can generate a range of benefits for disease-specific programmes and other health services. Civil society has played an effective role in monitoring for good governance and increasing responsiveness to community health priorities. However, complex processes make it difficult for smaller, indigenous NGOs, especially those working at the community and grassroots levels, to influence funding decisions and access resources and these obstacles to more inclusive governance must be addressed.

Greater effort will also be needed to ensure that the representation of service users in health systems governance extends beyond the users of the disease-specific services targeted by GHIs.

Recommendation 5 - “Improve evidence”

Improve evidence-based decision making in health by building the capacity of countries to generate and use knowledge.

Comment: A key element in accelerating funding for disease-specific programmes has been the generation of data on resource needs and evidence on how to best use limited resources and improve returns on investment. If health systems are to generate a complementary funding surge, effort is now required to systematically assess the effectiveness of health systems investments to help guide the optimal allocation of health systems strengthening resources.

Efforts to assess the quality and effectiveness of health systems and of the complex and context-specific interactions between health systems and GHIs are challenged, in part, by a lack of appropriate tools for analysis. Evidence generation is also dependent on the collection of good quality data through well-functioning country health information systems. New approaches to health systems strengthening, and to scaling up services for targeted diseases, must be accompanied by appropriate country-based operational research that can support better evaluation with an emphasis on interactive learning and “learning by doing”.

If new evidence is to be translated into action it will be important that decision makers at all levels, ranging from policy makers to practitioners, participate in formulating a research agenda that is relevant and responsive to need and that promotes the principles of continuous improvement and participatory learning. Involving new actors, including civil society and researchers from other disciplines, will expand and strengthen the evidence base

Implementing the Venice Recommendations

Achieving greater synergy between GHIs and health systems will require swift translation of the five overarching Venice Recommendations into policy and action. This will necessitate concomitant implementation of measures, and country-specific adaptation of these measures as appropriate, at different levels: among international partners; policy makers; programme managers; communities; and by researchers.

The measures outlined here are not exhaustive but are intended to be indicative of areas that merit particular attention.

International Partners

International partners — including GHIs, other multilateral and bilateral donors, United Nations agencies and non-governmental organizations — will need to pledge new political, technical and financial commitments to health systems strengthening and ensure a pronounced emphasis on health systems strengthening in the context of ongoing support for GHIs. Identifying and agreeing between each other, and with countries, on areas of comparative advantage will help to enhance synergies.

Agreement on resource requirements for global costs related to building and sustaining well-functioning health systems, and agreement on the share to be supported by GHIs, will be important.

Commitment to increasing the levels and proportion of predictable funding for short, medium and long term investment will facilitate improved planning for health systems strengthening. In order to make best use of resources, international partners will need to cooperate around the channelling of funding from diverse sources through the most efficient mechanisms. Renewed efforts are needed to address macroeconomic policy constraints including fiscal policies, trade agreements and limits on the recruitment of human resources for health, among others, in order to facilitate swift strengthening of health systems

International partners should agree clear and time bound targets for health systems strengthening that are linked to the current disease-specific targets of the GHIs. Joint reporting systems will be needed to monitor progress on health systems in the context of investment by GHIs.

International partners should build on their current efforts to improve alignment. First and foremost, it is essential to support work that will strengthen inclusive country-led processes, create space for meaningful civil society engagement, and lead to the development of robust and comprehensive national health plans. Agreement is needed on a set of planning instruments that will allow for a clear point of engagement through which resources from GHIs, and fiscal inflows from other development channels, can flow into country planning instruments.

Current efforts to improve harmonization among donors and to reach agreement on systems for shared accountability between donors and implementers in public health should be accelerated. In addition, international partners, along with national counterparts, should establish shared performance indicators and other strategies that can help to harmonize disbursements for health systems strengthening. These measures among others will serve to improve alignment of planning processes and resource allocations between GHIs and country health systems.

Focus is needed on investment and greater coordination of efforts to build and sustain the health workforce so that there are sufficient appropriately trained health workers for the delivery of all needed health services. These efforts must include increasing the production of new health workers (including professional cadres) as well as training and retention.

Other necessary measures include evaluating whether existing technical support is producing the maximum return on investment in country health systems and, if necessary, identifying new ways of providing technical support, including strengthening local capacity and joint planning.

Concerted efforts to adopt transparent and accountable procurement and recruitment procedures and to prioritize the use of local systems will build further synergies.

International partners have an important role to play in efforts to generate evidence that can inform policy making. This will include agreeing on the integration of a strong research component on health programmes in general, and GHIs in particular, and committing a share of the resources which are allocated to GHIs to be used for research purposes.

National Policy Makers

National policy makers can help to demystify health systems by promoting enhanced pedagogy and greater in-depth technical and strategic literacy targeting ministries of health, finance and other line ministries and GHIs. They can also play a strong role in linking GHIs to national health planning processes.

National policy makers will need to play an active role to increase finance by taking responsibility for developing policies and strategies to increase domestic funding for health. Decreasing out of pocket payments in the financing of health care expenditures and improving risk pooling financing mechanisms will be priorities in this regard. National policy makers will need to promote clear accountability mechanisms that are applicable to all stakeholders and can incentivise both disease-specific and wider health systems strengthening efforts. National policy makers can contribute to improving alignment by developing, adopting, modifying and strengthening national policies in order to create a supportive policy environment that can facilitate strong links between GHIs and national health planning processes. This will necessitate investing in capacity building to ensure strong national health development policies and strategies.

National policy makers need to contribute to generating evidence by developing policies and strategies which will favour increased interest and investment on health systems research.

Programme Managers

Programme managers will have a crucial role to play in generating a coordinated and unified response to addressing the existing constraints to improving health outcomes. This will include efforts to ensure that national systems are designed to better support GHIs and that GHIs do not operate in isolation of the overall health system.

In the effort to increase finance, it will be the responsibility of programme managers to create harmonized mechanism to monitor the flow of funds for health from diverse origins.

Programme managers should incentivize and support progress to meeting new targets by establishing common monitoring systems by which to evaluate outputs and outcomes in relation to inputs for both disease-specific and systems strengthening programmes.

Programme managers should work to improve alignment between GHIs and country systems, particularly in the functions where the potential for negative impacts of targeted interventions on other services is most clear. Increasing capacity for the management of human resources for health throughout the health system, including production, recruitment, and retention is essential. Increasing local capacity in technical consultation and supply of commodities and in strengthening health information are also of the utmost importance. With regard to overall planning, programme managers need to collaborate with different key players to facilitate joint operational planning. This will include identifying the distinct roles and comparative advantages

of different players in the field of health care delivery. These measures will help to generate a coordinated and unified response to addressing constraints to improving health outcomes.

With regard to generating evidence, programme managers should invest in and facilitate better operations research. This will demand efforts to develop networks and build capacity to support in-country research on the interaction between health systems and GHIs.

Communities

Community members, including service users, should drive forward an ambitious health systems strengthening agenda that is guided by the principles of equity and social justice, is enriched by an understanding of diversity, and is responsive to need. Community members should look for opportunities to extend their current role in the delivery of disease-specific services (through strategies such as task-shifting) so as to also support a wider range of health services at the community level.

Civil society organizations need to launch new efforts to lever more finance for health systems strengthening and also renew advocacy for increases in additional international and domestic resources for disease-specific work. Civil society should work collaboratively to extend models of inclusive governance (building on models of good practice that have been pioneered by GHIs) and establish more effective mechanisms for participation in planning and coordination processes at regional, national, and international level. Building on advocacy for scaling up disease-specific responses, civil society can help ensure that new targets for health systems strengthening put communities firmly at the centre. Civil society organizations should work towards enhancing their status by adopting measures to improve their own accountability, legitimacy and transparency if and when this is found lacking.

Civil society organizations should participate through fact finding to generate evidence on the interactions between health systems and GHIs, including their interface with communities.

Researchers

The global research community, including researchers in low- and middle-income countries and community level researchers, will need to support efforts to invigorate the health systems strengthening agenda.

First, a short and long term research agenda that is based on country priorities and relevant to country contexts should be defined and costed. As part of this agenda, researchers should cooperate to design and agree on rigorous methods for understanding how to measure health systems performance and by which to better evaluate the interactions between GHIs and country health systems. This will require the development of a robust logical framework to better understand the health systems functions and help in the development of mechanisms to generate data that can support monitoring and evaluation of the interactions of GHIs and health systems.

Researchers will also need to undertake operational research for continuous evaluation and feedback on efforts to synergize implementation of disease-specific and other health interventions. The research community should foster greater community participation in refining and testing research hypotheses.

New and unconventional sources and methods for knowledge generation should be used to enhance established research methodologies. These should explore new approaches to monitoring progress and seek to facilitate the assessment of country health systems as a whole, rather than as a series of fragmented components.

Additional information

Further information on Maximizing Positive Synergies between health systems and Global Health Initiatives, including consultation reports, is available at:
www.who.healthsystems/GHIsynergies/en/index.html

The work of WHO on Maximizing Positive Synergies between health systems and GHIs is being undertaken in collaboration and with the financial support of the Directorate General for Development Cooperation, Ministry of Foreign Affairs, Italy