



USAID VISION FOR HEALTH SYSTEM STRENGTHENING

2030

USAID envisions joining country governments and development partners in mobilizing a whole-of-society approach to address the challenges faced by country health systems, especially given the COVID-19 pandemic.

To do so, a common vision is needed that ensures the resilience of health systems and advances preventive, promotive, and curative care. This Vision frames the collaborative effort among communities and public health and health care institutions that is required to improve health.

The Vision recognizes that health systems must be able to adjust resources, policy, and focus in response to constantly emerging challenges. Such resilience must be built for an effective response to ongoing health demands; acute, time-bound events; and longer-term destabilizing dynamics.

SHIFTING FOCUS TO OUTCOMES

In this Vision, USAID shifts focus from strengthening individual functions — inputs or building blocks — of the health system to a focus on intermediate outcomes, which USAID defines as Equity, Quality, and Resource Optimization.

Health system strengthening (HSS) remains critical to the achievement of USAID's goals of Preventing Maternal and Child Deaths, Controlling the HIV/AIDS Epidemic, and Combating Infectious Disease. HSS is also fundamental for supporting country commitments to the Sustainable Development Goals, including target 3.8 that calls for achievement of universal health coverage, defined as "financial risk protection, access to quality essential health-care services, and access to safe, effective, quality, and affordable essential medicines and vaccines for all." In the past, activities designed to strengthen individual functions focused too narrowly on improving the functionality of siloed areas and lost sight of the interconnectedness within the whole health system.



USAID
FROM THE AMERICAN PEOPLE

THEORY OF CHANGE FOR DEVELOPING HIGH-PERFORMING HEALTH SYSTEMS

Programming for health system improvement is as much about what activities are undertaken as it is about how and why those activities are chosen. All HSS activities must be grounded in a theory of change, including the overall Vision.

Desired outcomes of HSS activities

High-performing health systems that support progress on both USAID and partner countries' national goals do so by promoting equity (targeting efforts toward vulnerable and underserved populations), quality (ensuring care is as effective, safe, and people-centered as possible), and resource optimization (efficiently aligning financing, workforce, and supplies toward underserved populations and priority care).

Focus on outcomes and design of integrated activities

Shifting focus along the input-outcome-impact continuum away from attention to individual health system functions and toward prioritization of desired intermediate outcomes (equity, quality, resource optimization) is essential. The shift is expected to result in more integrated activities that address and impact multiple functions of the health system simultaneously. [Annex I outlines further background information regarding previous HSS approaches that focused primarily on improvements through the six WHO building blocks (financing, governance, information, human resources, service delivery and medical products, vaccines and technologies) and the need for shifting focus].

Use of approaches that build sustainability

Implementation of more integrated activities will increase the sustainability of results through particular attention to three overarching approaches. First, they should be strongly grounded in locally derived solutions led by local organizations. National, regional, and other health system leaders including district and facility managers, leaders of public nonprofit and faith-based health care organizations, and local communities need to be empowered and capable of identifying and collaborating to resolve health care problems

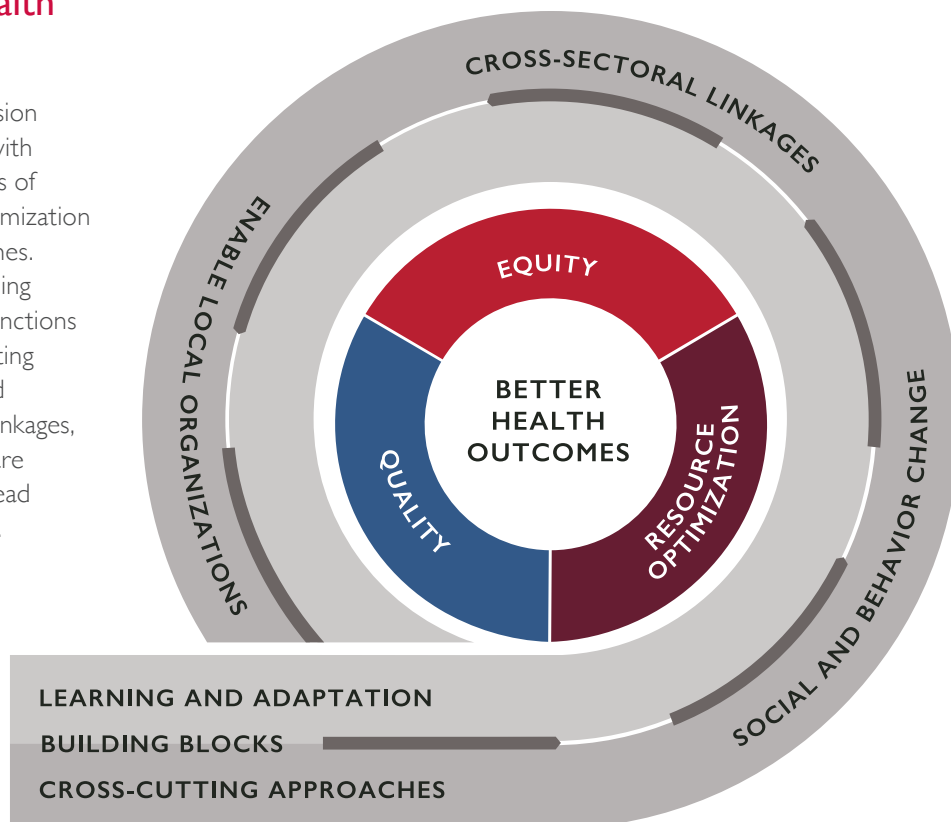
as they occur. Second, social and behavior change methods and approaches should be more explicitly incorporated into integrated activities. Across HSS efforts there is a need to shape and empower demand, while also addressing and supporting the behaviors of health care providers at both clinical and managerial levels who are essential to the equitable provision of quality care. This cultivates a shared responsibility for health between the health system and its beneficiaries. Third, national health priorities are more likely to be achieved if they are enacted through inclusive, country-led partnerships. The creation and support of links among relevant stakeholders inclusive of communities, the public- and private-sectors, and across all levels of the health system will increase impact and sustainability.

Inclusive implementation that accounts for multiple perspectives and stakeholders

Shifting the focus of HSS from discrete functions of the health system to desired outcomes, and developing a whole-of-society effort toward improved systems performance by working through local organizations and their behaviors increases the complexity of efforts. Systems practice allows for continuous improvement of these approaches, regardless of the level of complexity or baseline performance. Systems practice includes context analysis, problem identification, and theory-of-change development. Inclusive processes for identification of challenges, program design, and monitoring ensures that stakeholder voices are heard and lead the way, and increases the likelihood of a responsive, accountable, and user-centered experience that builds on and strengthens country governance. An inclusive and localized approach also allows stakeholders to design for the conditions specific to their setting, and account for gender, youth, disability, and other factors that may influence access to health care.

USAID's Vision for Health System Strengthening

Graphical depiction of USAID's Vision for Health System Strengthening with the desired intermediate outcomes of Equity, Quality, and Resource Optimization that lead to positive health outcomes. Learning and Adaptation, the Building Blocks representing the six core functions of a health system, and Cross-Cutting Approaches that include Social and Behavior Change, Cross-Sectoral Linkages, and Enabling Local Organizations are critical elements of activities that lead to high-performing health systems.



Transitioning to Local Partners

In 2017, USAID provided assistance to the Government of Mozambique to revise its 19-year-old pharmaceutical law. The revised law introduced a bill establishing the Directorate of Pharmacy (DNF) under the Ministry of Health as a single regulatory authority that oversees the governance and quality, safety, and efficacy of pharmaceutical supplies in the country, an essential public health function. USAID continues to support this directorate with technical expertise and capacity development with the goal of enabling the DNF to become an autonomous National Medicines Regulatory Authority according to Mozambique law and to become fully functional per the WHO Global Benchmarking Tool for evaluation of national regulatory systems.

BETTER ALIGNMENT OF HEALTH SYSTEMS TERMS AND CONCEPTS

The theory of change for USAID’s HSS Vision and overall approach to HSS helps to bring clarity to a range of associated concepts and terms that are often used interchangeably within health systems dialogue.

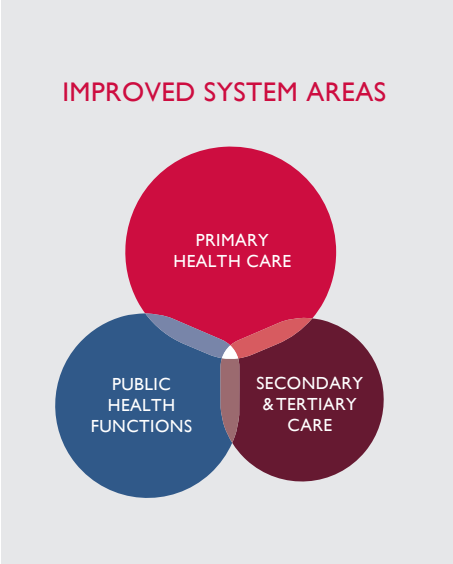
At the Global level, the Universal Health Coverage (UHC) concept and target within the SDGs is most commonly associated with HSS. Primary health care (PHC) is seen as the engine through which to achieve UHC and is also a critical starting point for building strong health systems.

The COVID-19 pandemic has resulted in closer alignment between UHC and Global Health Security by demonstrating the interdependencies within systems areas such as public health and service delivery at primary, secondary, and tertiary levels. Increasingly, the goals of Universal Health Coverage, Global Health Security, and Health Systems Resilience are all

used when articulating the need for strong health systems. Traditionally, however, UHC-associated HSS efforts have not strongly emphasized public health capacities (e.g., laboratory systems, surveillance), which are required for Health Security. In turn, Health Security efforts fall short in recognizing the role that traditional HSS efforts play in building security and resilience. What is needed is for all of these goals and the interventions employed to achieve them to work together.

USAID’s previously released High-Performing Health Care framework is a starting point to bridge across these concepts as it describes the expected characteristics that would be observable when different systems areas are effectively working together. The approach described in this Vision for HSS is another step forward in bringing these concepts together.

High-Performing Health Care is Accountable, Affordable, Accessible, and Reliable.



Factors Critical to the Success of HSS Efforts

These factors serve as a backbone to HSS efforts by highlighting and carrying through the focus on outcomes, approaches, and continuous learning.

Health System Resilience – Increasing the ability for a health system to withstand and effectively respond to shocks and stressors is critical to achieving this Vision for HSS and to maintaining progress to date on priority health outcomes. To be resilient, health institutions must be flexible to adjust resources, policy, and focus in response to constantly emerging challenges. USAID recognizes the need to build resilience to acute, time-bound events as well as to longer-term dynamics.

Public Health – Pursuing collaborative efforts among public health, communities, and both public and private health care institutions can transform the health system. A high-performing health system should advance public health capacities, including preventing, detecting, and responding to infectious disease threats, in ways that maintain and improve population health. USAID supports these essential public health functions through HSS efforts that strengthen the capacity of the public- and private-sectors to continually learn and adapt.

Whole-of-Society perspective – Achieving strategic outcomes requires a high-performing health system that is accountable, affordable, accessible, and reliable. A high-quality health system that is accountable means society as a whole plays a role in ensuring that the health care provided meets people's needs. Health systems that are affordable ensure that money spent on health provides the best value possible. Health care that is accessible is available when and where people need it. Health systems that are reliable deliver high-quality health care in a timely and confidential manner that ensures dignity and respect for all patients. Collectively these are the necessary characteristics for health systems to achieve progress toward sustainable and positive health outcomes.

Digitalization – Digital tools support both health care and management decision making in health systems. Digitalization efforts are an important aspect of developing high-performing health systems. Digitalization efforts in the health sector should strengthen country and regional digital health capacity, planning, and architecture, wherever possible through the use of evidence-based and scalable software systems. Digitalization also should improve and enhance the ability of local organizations and health institutions to collect, analyze, and use data for decision making throughout the health system.



MEASURING PROGRESS TOWARD USAID'S HSS VISION

This Vision for Health System Strengthening will be achieved when country health systems are able to learn, adapt, and improve in response to changing circumstances. Success is defined by creating the conditions and processes by which countries themselves are able to continually improve system outcomes.

For cross-country comparisons around common metrics, USAID endorses existing World Bank and World Health Organization efforts to track national progress toward Universal Health Coverage via two separate, but important, indices: service coverage and financial protection. USAID supports improving the availability and use of the underlying indicators that make up these indices as an important resource to track progress.

These global indicators, while useful for measuring and comparing country-level progress, provide less actionable information to inform improvement efforts related to country health system development. Processes that make the health system accountable, accessible, affordable, and reliable, outlined by the High-performing Health care framework are not given attention and measured regularly. These processes are the backbone for creating and sustaining quality, equity, resource optimization, and other outcomes and impact. USAID is rolling out a tool for monitoring the perceived functionality of these processes and their contributions to health system outcomes.

USAID looks forward to a decade of innovative collaboration with partners to better measure, document, and learn from progress toward achieving this Vision.



Photo: Gonzalo Guajardo / Communication for Development Ltd

Optimizing Resources for Improved Affordability and Reliability

The Government of Indonesia (GoI) began expanding National Health Insurance (JKN) in 2014 to achieve its commitment to universal health coverage. Under this expansion, the need for cost savings became critical. USAID assisted the Indonesian Ministry of Health (MoH) to develop long-term revenue and expenditure forecasts. These forecasts enabled the MoH to effectively advocate for the appropriate resources for the health sector and for JKN to make needed changes to its insurance design so that more private-sector health providers would enroll. In addition to increased funding overall, gains in efficiency were achieved through capitation for primary health care, reduction of out-of-pocket expenditure, and improvements to information systems. As of Indonesia's Fiscal Year (FY) 2019, the number of private-sector health care providers using JKN rose to 14,000, and the GoI plans to increase that figure to 20,000 in FY 2020. An increase in health providers using JKN means more Indonesians can access affordable and reliable health care.



Strengthening Systems to Improve Equity

In 178 health zones in the Democratic Republic of Congo, which cover nearly a third of the population, USAID works in partnership with the government to strengthen health systems and governance at provincial and facility levels. These efforts are helping to increase access for millions of Congolese to quality, integrated health care and medical products and to increase adoption of healthy behaviors such as sleeping under bed nets and utilizing available quality health care.

Quality Improvement Through Health System Strengthening

USAID supported high-volume health facilities in three districts in northern Uganda to improve quality of care for integrated management of health to address the main causes of childhood and neonatal mortality. Quality improvement teams were formed, composed of health care providers across the continuum of care (delivery, postnatal, well child/vaccination, nutrition, and outpatient sick child), including village health team representatives. The teams received bi-weekly coaching and mentorship sessions on how to identify gaps in care processes and organization of care, how to prioritize areas for improvement, and how to develop, test, and eventually implement change ideas that had the potential to bring about improvement. The improvement teams met regularly in peer-to-peer learning sessions to share their experiences, insights, and good practices. From the baseline in July 2015 to the endline in March 2017, correct and comprehensive assessment (meeting all assessment standards) of vital and danger signs (e.g., respiratory rate, temperature) improved from 0 percent of sick children to over 80 percent of sick children. In addition, prescription of unnecessary antibiotics decreased by 29-57 percent (varying by diagnosis), and the availability of essential medicines improved as a result. For example, cotrimoxazole stock-outs decreased 85 percent.

COVID-19: Impacts and Opportunities for Health Systems

This Vision for HSS is both timely and important in light of the global COVID-19 pandemic. To date, COVID-19 has had—and will continue to have—an extraordinary impact on the countries to which USAID provides support. These health systems are severely strained by the pandemic. Many were already fraught by a high incidence of non-communicable and infectious diseases, an inability to adequately provide high-quality primary and speciality health care, and escalating costs. The pandemic and the associated economic impacts have decreased public revenues and increased debt, affecting the public health budget, as well as contributing to other national challenges, including civil strife. These factors continue to steadily undermine access to equitable and quality essential health care, and place further strain on human and financial resources in the health sector. All of these factors underscore the imperative to maximize development assistance for health by supporting country capacity to implement low-cost, high-impact activities; coordinate across the health sector as well as with other sectors such as education and water, sanitation, and hygiene (WASH); and mobilize whole-of-society efforts that include the public- and private-sectors, and communities in these efforts.

Regardless of the ultimate duration of the COVID-19 pandemic, ongoing stress on health systems exacerbates the ability to respond to and adequately control other diseases, resulting in millions of people becoming vulnerable to dying from insufficient access to prevention and treatment. Health systems will also continue to face an existential threat from misinformation about the virus. While the issues differ, misinformation and rumors about COVID-19 are present in every region and undermine trust in health care. At the center of this health emergency is the fragility and inequality of many countries' health systems.

Despite these critical concerns, there is also a real opportunity to use the worldwide roll-out of COVID-19 vaccines to put into practice the HSS approaches included in this document to improve and strengthen country health systems and better align primary health care, public health capacity, and health system resilience. For example, COVID-19 vaccination will require an approach capable of reaching the entire population; it will require a substantial increase in the number of trained vaccinators and supervisory staff. The likely need for ongoing vaccination efforts will require incorporating the supply chain, human resource, information, and financing arrangements into the core primary health care system for ongoing services. Failing to coordinate and integrate these efforts would represent a real missed opportunity; routine immunization capacity with wide coverage, capable of reaching vulnerable populations would provide an excellent example of this Vision in action. Missing this opportunity would severely limit a country's ability to bounce back and build stronger systems for the future.

Making Health Systems More Resilient

In response to the 2020 COVID-19 pandemic, USAID quickly mobilized resilience capacity strategies in more than 30 countries to address infection prevention and control in health facilities, strengthen laboratory diagnostics, improve public health screening at points of entry, promote risk communications and engagement with communities, improve the management of COVID-19 cases, and support surveillance, rapid response, and emergency operations. These measures helped countries cope with the challenges associated with COVID-19 while also laying a foundation to provide effective care for emergency and routine health needs in the future.