

# Health Systems Action Network



## Highlights...

- ◇ XVII International AIDS Conference Hub
- ◇ Q&A from Ask the Expert session 3
- ◇ Global Health Council's Health Systems Initiative working group

## HSAN to Host Hub for XVII International AIDS Conference

HSAN has been accepted by the XVII International AIDS Conference to host a conference “hub” where interested parties can be connected to the conference locally. The hubs are designed to bring together local participants to watch selected sessions from the conference, either live or delayed, and then offer an opportunity for a moderated discussion on content following the screening. Discussion notes from each hub will be promoted through the conference website. Hubs have been created by schools, faith-based organizations, AIDS societies, and non-profit organizations. The purpose of the hubs is to expand participation and access to conference content, generate local media interest and provoke discussions about AIDS issues, expand the overall scope of the

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## HSAN Members Address Global Health Initiatives for Health Systems Strengthening

The chosen topic for HSAN's third Ask the Expert session was the role of global health initiatives (GHIs) in health systems strengthening (HSS), particularly looking at the experiences of GAVI and the Global Fund for AIDS, tuberculosis and malaria. The session was led by two HSAN founding members: Dr. Frank Nyonator, a public health physician from Ghana who is specialized as a health systems expert, and Dr. LeeNah Hsu, a transdisciplinary systems and policy specialist with extensive experience in strategic planning, program design and monitoring and evaluation. Craig Burgess of GAVI also contributed to the discussion. Questions and comments, along with responses, were posted to HSAN's public website (see [www.hsnet.org](http://www.hsnet.org)).

Key issues discussed during the session included:

- ◇ GAVI's role in effectively extending the reach and quality of immunization services
- ◇ How to overcome key challenges such as procurement, low capacity and bureaucracy
- ◇ GHIs in the context of SWAPs
- ◇ How best to foster health research and to effectively link research to health systems
- ◇ The need for and potential of HSAN to lead development of a standardized curriculum to teach soon-to-be-doctors the most relevant skills needed to strengthen health systems from the beginning of their careers

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#### Q&A #1 (Afghanistan)

*How can we tackle the issues of low capacity and bureaucracy which is common in developing countries against absorption and utilization of this fund?*

**Frank Nyonator response:** GAVI HSS funds are aligned with country procedures and systems as outlined in the 10 key principles that guide the HSS support. These principles are designed to overcome the issues of low capacity and bureaucracy which is common in developing countries against absorption and utilization of this fund. These are:

1. **Country-driven:** GAVI HSS should address problems identified by countries themselves.
2. **Country-aligned:** GAVI HSS should be consistent with the objectives, strategies and planning cycles of existing government health sector policies and frameworks.
3. **Harmonized:** GAVI HSS should add value to or complement (but not compete with) current or planned efforts to strengthen the health system by government, civil society and health sector partners.
4. **Predictable:** GAVI HSS support is, in principle, available for the life of the National Health Sector Plan (or country equivalent).
5. **Additional:** GAVI HSS funds must be additional to the government's existing budget and the funds should not displace resources previously allocated to the health sector.
6. **Inclusive and collaborative:** All key stakeholders in health system strengthening (beyond the immunization program) should be involved in GAVI HSS.
7. **Catalytic:** GAVI HSS is not intended to stimulate the creation of stand-alone independently managed projects.



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8. **Innovative:** GAVI encourages the development of innovative models or approaches.
9. **Results-oriented:** Countries must link their strategies for tackling “bottlenecks” or barriers in the health system with specific indicators that can show how the GAVI HSS funds will ultimately result in improved immunization coverage and other child and maternal health outcomes.
10. **Sustainability-conscious:** Countries should consider the financial and technical sustainability of GAVI HSS support and describe how they expect to sustain the recurrent costs and impact of GAVI HSS support beyond the life of GAVI funding where relevant.

If these principles are followed, I believe some of your difficulties might be overcome. Your Health Sector Coordinating Committee is expected to provide leadership to ensure that these principles are adhered to. On the issue of low capacity, other countries are using the HSS funds, as part of the flexibility of the fund to build in-country capacity and Afghanistan may want to consider that.

#### Q&A #2

*How does a country undergoing a SWAp (Sector-Wide Approach) integrate global financing initiatives (GFIs) into its national health priorities to ensure more efficient and effective financing of its health programs and avoid overlaps in the health sector?*

**LeeNah Hsu (LNH) response:** The question is an excellent one and a complex one. There is no single ready answer. Rather, it is country-specific and situation-specific. As there is no standard one size fits all SWAp mechanism, there is also not one formula to address the question. How does a country integrate GHI to its

SWAp process? The reality has to take into account the political, financial, historical systems context as well as the constraints in a country in its implementation of both SWAp and GHI, where relevant.

Ideally, a rational approach should be taken and the GHI will facilitate the overall sector plan and support it. However, issues relevant to health and health related indicators are influenced by factors and sectors beyond health. Thus a truly effective GHI would require incorporation and collaboration with non-health sectors while a health sector SWAp would only address the health sector portion of the issue. This underlines the importance of multisectoral collaboration to achieve even the health indicators and MDGs.

### Q&A #3

*What do you suggest should be the core competencies advocated for students interested in Health Systems Development from a global perspective? Would it not be appropriate to incorporate in the training sessions on health systems entrepreneurship from a development perspective, as well as, health systems analysis, health systems assessment, and policy development?*

**LNH Response:** HSS competency is not a medical professional issue. Rather, it is a systems approach to managing health sector functions and responses to diverse diseases, illness and health promotion. There are several levels from communities to global. The relevant disciplinary aspects include, but are not limited to, health care financing, health economics, health work force management including projection, compensation, quality assurance and worker migration in addition to health technology and logistics aspects (such as procurement, ware-

housing, and transport to ensure timely and appropriate supply of essential medical commodities as well as

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## Addressing US Policy Gaps: A Role for HSAN?

Many global health experts have claimed that policy-makers in the US and other countries do not always understand the need for policy that addresses cross-cutting issues such as the importance of strengthening health systems. Trying to address this gap, the Global Health Council recently held a two hour organizational meeting to discuss establishing a Health Systems Initiative working group, designed to advocate for the importance of HSS among policy-makers, in the same way that vertical programs (HIV/AIDS, malaria, TB, etc) are advocated for.

Dr. Edwin Bolastig, a founding member of HSAN, attended the Health Systems Initiative's first working group meeting in Washington, DC on March 12, 2008. The other participants in attendance were a mix of mainly US-based technical health systems experts, as well as a few policy advocates and transnational pharmaceutical/medical supply company representatives. HSAN was the only organization that represented a global network of health systems professionals from developed and developing countries.

HSAN, being a global network of on-the-ground HSS practitioners, represents the "demand side" needed to properly represent specific developing country priorities and is appropriately placed to provide such input to the working group. Given the technical expertise of its members, its wide membership base, as well as an interactive website, HSAN could potentially provide the country-level perspective needed for a truly accurate portrayal of the needs of developing countries and the issues worth advocating for.

It is anticipated that HSAN will coordinate further with the Health Systems Initiative working group and the GHC in the near future to determine exactly how HSAN can best complement/provide input to the working group as it begins to grow. ■

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conference and link regions across the world to the IAC in an interactive and engaging way.

HSAN plans to hold its hub virtually through [hsanet.org](http://hsanet.org) to allow HSAN members and other interested HSS practitioners from around the world to download the selected sessions and post their comments via the website. The sessions will be moderated by current HSAN members and the discussion compiled and sent to the IAC secretariat.

The XVII AIDS Conference will be held in Mexico City August 3-8, 2008. Before the start of the conference HSAN will post logistical details on [hsanet.org](http://hsanet.org) on how to register for and become a part of the HSAN hub. General information about IAC hubs is available on the official AIDS conference website at [www.aids2008.org](http://www.aids2008.org). ■

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pricing of medications which would involve trade issues). HSS also includes the health sector infrastructures and health data (biostatistics and epidemiologic surveillance structure) and health management information systems. It is also critical for the health system to have enabling policies and regulations to facilitate the functioning of the system.

A strong health system needs a certain level of flexibility in order to adjust to the changing dynamics of disease patterns (emerging and re emerging diseases) as well as demographic shifts. Above all, a much less discussed aspect of strengthening health systems is the preparedness of the system which is critical in a rapidly evolving world under threat of climate change induced diseases outbreaks. ■

## Upcoming HSAN Events

Int'l AIDS Conference Hub  
August 3-8, 2008

To register or for more information, please send an email to [info@hsanet.org](mailto:info@hsanet.org).

## HSAN Voices

Do you have a topic for ATE that you would like featured on the website?

Email [info@hsanet.com](mailto:info@hsanet.com) to send your suggestions.

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HSAN's quarterly e-newsletter provides regular overviews of current issues in health systems strengthening, and updates on ongoing and upcoming HSAN activities. To learn more about HSAN, become a member and/or join the mailing list, please go to [www.hsanet.org](http://www.hsanet.org).