

# **REGIONAL COMMITTEE FOR AFRICA**

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# SHARING BEST PRACTICES IN STRENGTHENING LOCAL OR DISTRICT HEALTH SYSTEMS

**Round Table** 

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## BACKGROUND

1. Meeting the basic health needs of the people requires that governments define policies and ensure their successful implementation at local or district level. A "health district" means a clearly defined administrative area covering a population at whose level some form of local government or administration takes over many responsibilities from central government departments.<sup>1</sup>

2. The concept of District Health Systems (DHS) has been widely promoted by  $WHO^2$  in the firm conviction that the district is the most important level for improving efficiency and responding to local health priorities and needs with focus on high-impact health interventions. The district is in the best position to address local challenges through seizing local opportunities and responding to people's health needs.

3. Experiences with decentralization in countries in the African Region have shown mixed results. In some countries, decentralization has been accompanied by effective transfer of authority and responsibility from the central level to the local/district level while in others weaknesses in institutional capabilities coupled with instability in policy and environment have undermined the performance of DHS.

4. The 2008 Ouagadougou Declaration on Primary Health Care (PHC) and Health Systems in Africa<sup>3</sup> and the 2008 World Health Report on  $PHC^4$  have generated a new momentum for strengthening district health systems using the PHC approach. The additional resources that Global Alliance for Vaccines and Immunization (GAVI), the Global Fund and others are providing will contribute to strengthening DHS. Therefore, it is important for countries that have scaled up utilisation of high-impact health interventions through strengthening their DHS to share their experiences.

5. The purpose of this document is to put forward discussion points for sharing best practices<sup>5</sup> towards strengthening DHS in order to scale up utilization of high-impact health interventions.

## **ISSUES AND CHALLENGES**

6. Strengthening district health systems requires long-term, sustained efforts and support. Jointly learning from the experiences of one another will enable Member States to better address the following issues and challenges:

(a) Putting people at the centre of health care by shifting from fragmented health care delivery to comprehensive, continuous and integrated health care. Health services must respond

<sup>&</sup>lt;sup>1</sup> Document AFR/RC37/TD/1 on the role of the district level in accelerating HFA/2000 for all Africans, World Health Organization, Regional Office for Africa, 1987.

<sup>&</sup>lt;sup>2</sup> WHO, Accelerating the achievement of Health for All Africans: the Three-Phase Health development Scenario, World Health Organization, Regional Office for Africa, January 1989.

<sup>&</sup>lt;sup>3</sup> WHO, Ouagadougou Declaration on Primary Health Care and Health Systems in Africa: Achieving better Health for Africa in the New Millennium, A declaration by Member States of the WHO African Region, World Health Organization, Regional Office for Africa, 2008.

<sup>&</sup>lt;sup>4</sup> WHO, the World Health Report 2008, *Primary Health Care*, Now More than Ever, World Health Organization, Geneva, 2008.

<sup>&</sup>lt;sup>5</sup> WHO, *Guide for Documenting and Sharing "Best Practices" in Health Programmes*, Brazzaville, World Health Organization, Regional Office for Africa, 2008.

better to people's needs and expectations, including health promotion, disease prevention and delivery of curative care services.

- (b) Orienting public policies towards strengthening health districts, focusing on: (i) policies regarding leadership, financing, workforce, health information, health technologies and service delivery; and (ii) promoting a positive impact on health through improved public policies within other sectors that affect health and health systems.
- (c) Improving health equity and reducing exclusion by striving to achieve universal coverage. This will involve: (i) rolling out the health district, expanding the supply of services and removing obstacles to access and uptake; and (ii) developing equitable financing mechanisms that guarantee protection against catastrophic health expenditure.
- (d) Building the capacity for more participatory, inclusive and proactive leadership of the health sector. This is necessary to empower District Health Management Teams to carry out context- and equity-sensitive planning and evaluation, resource allocation and management.
- (e) Ensuring that health authorities find the right balance between the competing demands of (i) ensuring that district health systems deliver rapid and visible results; (ii) ensuring that the DHS through which these are achieved are robust and sustainable; (iii) promoting effective participation of the population and collaboration with civil society organizations; and (iv) ensuring that development partners contribute to strengthening district health systems.

## POINTS FOR DISCUSSION

7. During the round table, the following questions will be discussed to address the challenges involved in strengthening DHS:

- (a) What concrete actions have countries undertaken to strengthen DHS in order to scale up high-impact health interventions?
- (b) What are the enabling factors that have contributed to the strengthening of DHS?
- (c) What are the factors that have hampered efforts to strengthen DHS?
- (d) How have countries measured the performance of DHS and used the results to review their decentralization policy?
- (e) What are the strategies implemented that have the potential to be replicated or adapted to other settings?

## **EXPECTED OUTCOMES**

- 8. The expected outcomes are as follows:
  - (a) concrete actions that countries have undertaken to strengthen DHS in order to scale up high-impact health interventions shared among Member States;
  - (b) enabling factors that have contributed to the strengthening of DHS shared among Member States;

- (c) factors that have hampered the strengthening of DHS identified;
- (d) countries' approaches to performance measurement and utilization of results for reviewing their decentralization policies identified;
- (e) strategies that have the potential to be replicated or adapted to other settings identified.