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HEALTH SYSTEMS: IMPROVING PERFORMANCE

Report on Round Table 1

Introduction

1. The round table on “Health Systems: Improving Performance” was held under the chairmanship of Dr Traore Fatoumata, Minister of Health, Mali. Dr Nil Ayite Coleman of Ghana was elected Rapporteur. The round table was supported by Professor Joseph Wangombe as facilitator. About 60 participants, who including ministers of health, actively participated in the discussions. Following a brief introduction by the Chairman, a presentation was made by the facilitator.

Issues Raised

2. Concerning the use of WHO framework for health systems performance assessment, participants raised the following issues:

- (a) There was need to define a health system that was adapted to the context and reality of the African continent, as a prerequisite to all health systems performance assessment.
- (b) The reliability of the estimates worked out for assessing health systems performance as was done in World Health Report 2000 as well as the non-involvement of countries in the exercise was questioned.
- (c) The pertinence of the interval for assessing health systems performance was also queried.
- (d) The negative political impact of classifying countries on the basis of their performance and the use made of the classification was of concern to many participants.

3. Concerning these issues, delegates insisted that performance assessment should not be considered as an end in itself. They also accepted the relevance of the framework and requested that the exercise be accorded importance by countries themselves. In addition, WHO the Regional Office for Africa was asked to pay particular attention to the definition of health systems. The issue of strengthening national health systems as an essential prerequisite to all health systems performance assessment was raised. A clear connection between health systems assessment and formulation of policies and preparation of reforms should be central to the concerns of the Region.

Care delivery

4. Concerning care delivery, the attention of the participants was focused on both the geographical and financial accessibility in the context of poverty. Certain peculiar situations such as population mobility and its impact on health coverage were raised.

5. The decentralization of health services in order to facilitate access was one of the issues discussed. Country experiences that were reported emphasized the need to encourage simultaneous decentralization in the other sectors so that the health sector can have an impact.

6. Furthermore, the participants emphasized the importance that must be given to traditional medicine as an integral part of the health systems.

Human resources

7. Human resources seemed to be a common denominator for all the countries. Participants addressed issues such as the negative impact of structural adjustment programmes on staff recruitment, brain drain, poor motivation, the difficulties involved in posting health workers to the remote areas of countries and in providing suitable training in countries which lack training structures.

8. Innovative solutions have been tried by some countries. However, the countries are still expecting strong support from WHO in this area particularly as concerns facilitating exchanges and creating a cooperation framework to promote the shared use of training institutions by countries.

9. The forthcoming meeting between the World Bank, WHO and the institutions in charge of training will be an occasion to address these issues and propose appropriate solutions. Moreover, the strategies developed by countries to fight poverty should include human resources development as a priority issue.

Health financing

10. Cost recovery was introduced as part of structural adjustment programmes and today, with increasing poverty, the limited use of health services due to the lack of financial means has prompted a review of the relevance of cost recovery strategies which have produced so many outcasts. Prepayment mechanisms have been established by several countries. WHO is requested to provide technical support for the development of these systems.

11. The level of financing needed to guarantee efficient health services should be determined. Despite the commitment made by the Heads of State to increase the budgets allocated to health, very few countries have been able to reach the 15% level. The participants voiced their concern about project financing by partners in accordance with the partners' own priorities and expressed the wish for a more integrated approach in the action of all the stakeholders by which due respect would be given to the priorities of the countries. Some countries related their experiences with regard to a common fund within the context of the Sectoral Approach. These approaches can be explored within the framework of health sector reforms.

General administration

12. Participants underscored the role of the ministries of health in formulating policies, monitoring the implementation of such policies and coordinating the actors including the external partners and NGOs. The multisectoral approach was considered as the approach that would enable the health systems to maximise the impact that these actions would have on the health of the populations.

Conclusion

13. The participants unanimously recognised the importance of health systems as the instrument of development and the privileged area of investment for States. The countries committed themselves to carrying out activities that could help strengthen their health systems and, in this regard, requested support from WHO.