

G8 and HSS

new global health towards NHSS

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1

G8 and HSS

- highly laudable efforts to aim at HSS, not only (selected) health burden reduction
- 2 governments efforts to critically appraisal and explore new ways of working
- critical look, honest feedback, attempt to clarify and propose
- still limited to “experts” and “governmental” frame of thinking

2

Key questions and ideas

- how G8 should support countries in health in order to ensure HSS.
- 3 important and inter-related goals and concepts
 - human security (and investment for health)
 - health (care) system strengthening
 - 3 essential components - FHI
 - lots on each of the 3, separately => strong FHI = strong health system?

4*4 of Desirable HSS

- Goal = 4 “sustainable” characteristics
 - fair, efficient, affordable and accountable
- Entry points = 4 essential components
 - accessible and affordable technologies
 - adequate, capable, and well distributed HRH
 - adequate and fair financing
 - good management practices (KHTF)

**A strong health system
is not the one with
adequate and good
KHTF combined**

5

**A strong health system
is the one that knows
and can make good use
of KHTF**

6

it is not enough to shift
from specific problems
to specific system
components

7

outsiders need to
understand context
while trying to help
move the system
=> time, process and
(equitable) partnership

8

HSS according to Context

- STRENGTH - stewardship and mgmt.
 - failed state
 - weak system
 - relatively stronger
- ECONOMY - health financing (in accordance with their economic reality)
- SOCIETY/POLITICS - civil society, media, academics.

9

key messages

- HSS not by shifting from vertical problems to horizontal components
- capacity in planning is not everything. management capacity is as, if not more, important
- strong health systems goes beyond strong governments
- equitable partnership is everything

10

what the G8 should do?

I

- THE RIGHT ATTITUDE/PARADIGM
- Countries need and can determine their own context-specific and continuously evolving health system strengthening
- Resist the 5 beasts - temptation to aim at imposed, selected, short term, measurable, political gain

II

what the G8 should do?

II

- AIM FOR THE ULTIMATE OUTCOME (self reliance in HSS,
- countries' ability to assess (any forms of "knowledge"), adapt (to own context) and manage (towards CSI - continuous system improvement), not only (temporary) BOD reduction)
- don't limit to access and understanding of "research evidence" or only make money, computers and experts available

what the G8 should do?

III

- EMPHASIZE ON PARTICIPATORY PROCESS RATHER THAN CONTENT
- support catalytic activities and not direct programme operational cost (only)
- Ensure ownership of each process. No parachute programme implementation nor (external) experts driven models
- “direct” programmes actions necessary in exceptional conditions - humanitarian purposes and crisis¹³

what the G8 should do?

IV

- WORK BEYOND GOVERNMENTS
- support (policy development) NGO's, civil society wherever possible.
- aim at participatory policy development environment and learning

what the G8 should do?



- DON'T PUSH OR FORCE.....
- don't offer/push loan for public finance of health insurance of any kind (SHI, UC)
- don't push policy options/models (even from “research evidences” done somewhere else)
- no SAL please
-

15

more learning

- about “how to” strengthen health system in different context and states (not stages) of development, either thru vertical programmes or specific system component.
- on how to work with countries to best achieve self reliance in HSS.
- on how to move towards “equitable partners” in global development for health.

16

• what is global health?

Global health is not about developed countries working “at global levels” to guide, influence or help developing countries.

It is about working “with and in” countries to find different ways and means to improve health, at the same time building a strong health system.

17



To Future Global Health

18