BACKUP Health

BACKUP intervention area: health systems strengthening – building resilient and sustainable systems for health

Background

According to the World Health Organization (WHO), a health system consists of all the organisations, institutions, resources and people whose primary purpose is to improve health.1 The WHO framework describes health systems in terms of six building blocks:2 service delivery, health workforce, information, medicines, financing, and governance. Health systems strengthening is (i) the process of identifying and implementing changes in the policy and practice of a country's health system, so that the country can better respond to its health and health system challenges;3 (ii) any array of initiatives and strategies that improves one or more of the functions of the health system and that leads to better health through improvements in access, coverage, quality, or efficiency.4

Based on the WHO framework, the German Government has set the goal of improving access to health services, health-related information and healthy living conditions in its development cooperation partner-countries. Particular attention is therefore being paid to ensure provision for poor and vulnerable population groups. German development cooperation’s priorities5 with regard to establishing health systems are to:

- work with partner countries to draw up health policy strategies that align with the economic and overall social conditions prevailing in that country;
- work with partner countries to draw up staff development plans, adapt frameworks and promote training and advanced training;
- strengthen the management skills of staff working in the health system;
- involve the public in decision-making on health and social policy;
- work with partner countries to guarantee access to and the provision of adequate, high-quality services;
- establish social protection systems (e.g. social health insurance).

The Global Fund is one of the world’s largest finance instruments for disease control programmes on HIV, tuberculosis and malaria with linkages to reproductive, maternal, newborn and child health programming. More than one-third of Global Fund investments6 support countries in building resilient and sustainable systems for health that strengthen their ability to protect citizens from all diseases and to better respond to outbreaks. According to the Global Fund’s latest strategy, ‘systems for health’ differ from ‘health systems’ as they go beyond clinical facilities and aim to reach communities and vulnerable and marginalised groups.7 Based on its experience and on lessons learned from previous successes and failures, the Global Fund’s work to help countries build resilient and sustainable systems for health is now focused on seven main approaches.8

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1 http://www.who.int/healthsystems/topics/en
2 http://www.who.int/healthsystems/hss_glossary/en/index5.html
5 http://www.bmz.de/en/what_we_do/issues/Health/gesundheitssysteme/deutscher_beitrag/index.html
7 Ibid.
8 Ibid.
• Supporting national health strategies and national strategic plans to control HIV, tuberculosis and malaria.
• Focusing on a person, not just a disease by supporting integrated service delivery.
• Supporting specific aspects of a resilient health system central to the Global Fund's mission and core competencies such as procurement and supply chain management, the quality assurance of programmes through strong data management and human resources, and financial and risk management.
• Capturing and catalysing innovation from across all sectors to ensure greater impact and value for money.
• Promoting and reinforcing community responses and involving communities in national decision-making.
• Supporting countries to increase domestic financing and leveraging international financing for health.
• Tailoring investments to the unique stage a country is at along the development continuum, to its specific health system and to the unique constellation of partners in each nation.

**BACKUP definition of the intervention area**

The overall objective of health system strengthening (HSS) is to improve health outcomes. As this can only be achieved in the long term, one crucial aspect of HSS is sustainability. BACKUP defines its contribution to HSS as (a) enabling health systems to provide sustainable, accessible, equal, equitably financed and high-quality services to HIV, tuberculosis or malaria infected and affected persons and (b) contributing to the integration of these services with other health services. Disease control for the three diseases should form an integral part of the overall health service portfolio. BACKUP is particularly interested in supporting projects that focus on health system policy and governance issues.

WHO also defines sustainable interventions to be those that focus on interactions between the single components of a health system. Approaches for achieving this goal can focus on one or several building blocks at the same time. If interventions target one building block of the health system, it is important to consider how this interacts with other building blocks and its impact — be it positive or negative — on these. Additionally, it is important to differentiate between health system support and health system strengthening. This is especially relevant in the context of Global Fund activities. While health system support comprises short-term problem-solving interventions, measures can be deemed to strengthen a health system if they:9

- benefit the health care system in its entirety, having an impact beyond a single disease;
- target identified weaknesses in the system and/or strengthen collaboration between the building blocks;
- trigger long-term changes beyond the time frame of the intervention;
- are country specific, taking into account the cultural context and the division of labour of national institutions.

While HIV, tuberculosis and malaria may be very different diseases, they are linked in one key aspect: groups such as prisoners, migrants, men who have sex with men (MSM), transgender people, and women and girls face high risk and burden in one, two or all three of the diseases. Coupled with this, social inequality, marginalisation, stigma, discrimination and criminalisation often end up limiting or preventing these groups’ access to available prevention, treatment and care. BACKUP technical support therefore targets projects that follow a human rights-based approach and benefit vulnerable and underserved groups and promote gender equality.

Capacity development is a key focus of the human-rights-based approach adopted by BACKUP in its health systems strengthening work. This approach involves strengthening the capacities of health sector stakeholders and organisations, many of which are represented by civil society bodies. In practice, stakeholders are enabled to claim their rights through, for example, their participation in an inclusive country dialogue that meaningfully integrates commonly marginalised groups like MSM or people living with the diseases.

More information on BACKUP’s focus on community, rights and gender is available in the application guidelines under the section on crosscutting themes.

**Results framework and selection criteria**

The overriding objective of BACKUP’s HSS-related work is to support the selected countries in implementing HSS and gender-related interventions through Global Fund grants. The achievement of this objective will be assessed using a number of criteria, for example: the consideration of the Global Fund strategy’s seven main approaches for building resilient and sustainable systems for health, a focus on integrated systems and services, the rationalisation of duplicated structures to increase sustainability, and country dialogue based more strongly around broader consensus processes.

HSS interventions should help to put in place the right conditions for health systems strengthening to be delivered through Global Fund grants (and with the participation of public and civil society actors). Projects should operate in line with (a) BACKUP’s definition of HSS, (b) the Global Fund’s strategy to build resilient and sustainable systems for health and (c) the WHO framework underpinning (a) and (b). This will be measured using the following indicators:

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In the selected countries, civil society organisations and the representatives of key populations have put forward the HSS needs and positions defined with and by their constituencies.

In the selected countries, HSS interventions in the context of transition have been planned.

In the selected countries, the recommendations arising from the HSS needs analysis have been addressed in the country dialogue.

In the selected countries, HSS modules in grants include the needs of women and sexual minorities.

In the selected countries, potentials for cooperation between Global Fund and GAVI have been identified.

**Some examples of activities**

- Analytical and advisory services and training on resilient and sustainable systems for health.
- Support for sustainability and transition planning.
- Mapping health services that target key populations to facilitate the programming of Global Fund grants.
- Supporting the inclusion of HSS aspects into funding requests.
- Developing the capacities of civil society organisations to enhance their cooperation with national institutions (country dialogue, funding request development, development of national strategic plans).

**Contact**

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