Author's response to reviews

Title: What can global health institutions do to help strengthen health systems in low income countries?

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Author's response to reviews:

Thanks for the very helpful comments, which we have now addressed. We also took the opportunity to update with additional references published since submission.

Reviewer 1

The paper presents a well structured, comprehensive international literature review on health Systems strengthening approaches and experiences in developing countries. The role of health systems research and of research systems to make use of findings is well developed throughout the paper and focused in the conclusions. The paper provides a useful guideline for discussion by actors interested in health systems strengthening at national and global levels and particularly by researchers interested in addressing and supporting health systems strengthening.

>Thank you

Minor essential revisions:

This paper presents mostly research evidence on health systems strengthening from derived from international journals and English language books. Further details on the compilation methods and on the strengths and limitations of this approach should be addressed.

> We have added a paragraph describing how we undertook the review and noting the limitation of using only English language literature, although as you review cannot be comprehensive, we believe that this is more of a theoretical than practical concern.

Given the research-base review and the focus on health systems research, the
health research system should be further discussed as an important component of the broader health system, possibly within the resource generation function.

> We have added a new paragraph and referred to the resolution at the 2008 Global Ministerial Forum at Bamako

Its specific situation could be analyzed with respect to the dominance of developed country institutions, funding and research capacity strengthening. An effort could be made in the conclusions to go beyond a call for applied health systems research, to address how various disciplines and research approaches could be encouraged, at various levels. There is some evidence published in Health Systems Research and Policies that could be useful for the literature review of these aspects, some it co-authored by authors of this paper.

> We have added a reference to the paper in PLOS Med on health systems research by Sanders and Haines, which we think is the one being referred to here, and added some text to the relevant paragraph.

Discretionary Revisions

The definition of health system strength in terms of the system's capacity to address diverse health determinants and desirable outcomes could be further addressed, particularly in relation to the social determinants of health and to the alignment of health system outcomes with equity and development needs. How can research contribute to assess health system strength indicators, and how can health system strengthening approaches and indicators be devised and evaluated on this basis? Answers to such questions could help determine the extent to which health ministries should invest on intersectoral leadership and in aligning the health sector to broader development policies.

> We agree that this is interesting but we feel that it is not directly related to the main subject of the paper.

Recent contributions by Rifat Atun and cols. as well as by de Savigny & Adams address systems thinking that could be useful to discuss the role of health systems strengthening. This approach has been useful to identify paths towards integration which could help nuance the author's recommendations for the integration of interventions and programs. See:


> We are delighted to add the reference to Atun & Menabde, especially as it was in a book one of us edited. We have also added a sentence summarising the main implication for this paper.

The paper’s references are incomplete, particularly those citing books.

> We realise that a glitch in EndNote created some formatting problems just before submission. We have now downloaded the Biomed Central EndNote style and this seems to have resolved the problem.

Some frases are not properly written i.e. “He we review the challenges…”

> We have corrected this and a few other typos we found.

Reviewer 2

Reviewer response:

In general, I found this to be a very important contribution to the literature. This paper address key issues in health systems governance and institutions that the literature to date has inadequately addressed. New questions and insights into the historical, institutional, financial and leadership constraints to health systems change are introduced, which also provides insight into future research. Please see below some minor suggestions to improving the paper, which I believe should be published immediately.

> Thank you

In the introduction, it would be helpful to clearly define what the authors mean by “strengthening health systems.” What is the ‘strengthening’ component the author(s) are referring? E.g., institutional strengthening, and if so, what aspects of institutions?

Ok, in the second section, “Health Systems Diagnosis,” the authors explain what aspects of health systems strengthening they are talking about. They include financing, provision, resource generation and priority setting, stewardship, etc. I suggest that you put this in the introduction.

> We have now added a new paragraph to the introduction and edited the second section for consistency.

With regards to the pooling of funds: I agree with the authors that a lack of fiscal capacity to generate sufficient funds forces nations to become more dependent on foreign aid and/or out of pocket expenses. One issue that we haven’t looked at is the mismatch between fiscal regimes, i.e., administration and its legacies,
and how this conflicts with new needs for health systems financing. The authors want to insert a sentence here on this issue – not necessary, just a suggestion.

> We are not entirely sure what is being asked for here. We would welcome clarification

Also, and just as a minor side note, what do the authors think of those nations where there is a high capacity to collect revenue yet at the same time show a high level of private out-of-pocket payments and donor aid assistance? Arguably one can say that China exhibits such a system?

> We have made several changes to this paragraph that we think captures this issue, although we have not singled out any particular country because, as the reviewer notes, the identification of China as an example is arguable.

With regards to resource generation and priority setting, I very much enjoyed the authors’ point about absorptive resource capacity and human resources. In my current research, I also highlight this problem and explain how institutional legacies generate obstacles for changing human resource practices, such as hiring, for greater effectiveness. To what extent do the authors think that legacies matter? Essentially what I’m asking is the following: what are the reasons for why HR systems cannot change, and why is reforming the bureaucracy so difficult for increasing absorptive capacity? One or two sentence suggesting why this is a problem may be helpful.

> We fully agree and have added a sentence and references to some of our previous work that identifies this problem.

With regards to stewardship, again an excellent point. However, you may want to clarify what aspects of stewardship you are talking about? Are you considering presidential/executive leadership, the bureaucracy?

> We have clarified that we mean “in the country as a whole”

In the section titled Current Efforts, I think you raise a critical issue: differences in power and objectives between international agencies, which, in turn, hamper harmonization. You may want to insert a sentence or two explaining what you mean by differences in power relations. Is it that some nations and/or international institutions possess more resources than others and, realizing this, consequently seek to periodically pursue their own interests? This is certainly food for thought and the authors may want to consider this.

> We have added a sentence: Put simply, some donors are more powerful than others, either as a consequence of the resources they command or because of
their status in the geo-political context. For example, a development agency from
a particular country will be more influential if that country is also contributing to
the defence of the recipient country.”

On page 8, sentence beginning with “This highlights the importance of paying
attention....” This is an excellent point. You are essentially addressing the need to
better understand why HR systems cannot be changed, a need for better
understanding context, history, and legacy. You also mention the need to
address belief and motivation. I wholeheartedly agree. In a paper I am currently
writing, I explain how path dependency and institutional change theory provides
frameworks for us to better assess this process. You may want to mention how
we as a policy community need to consider new social science frameworks that
take into account these normative, ideological and historical institutional
challenges.

On page 9, my request has been answered! You do mention Path Dependency.
Excellent work.

> We think that the second comment means that we have addressed the first
one!

In the conclusion, several key issues are raised. I agree with the authors’ point
that greater clarity is needed in understanding which international health
organizations will take the lead on addressing health systems capacity and
reform. As I understand it, the WHO has been very clear in seeing itself as taking
such a leadership approach. Would you agree?

> We have added the sentence “Although the WHO views itself, and is viewed by
many others, as occupying a position of leadership in global health, the
complementarities of the many specialized institutions involved means that there
may be different leaders in different situations.”

I also agree that there is a greater need for synergy between health sectors, and
a focus on long term relationships with patients. Yet this requires both an
infrastructural and especially political transformation, where AIDS sector officials
are willing to share resources and attention with other sectors. You may want to
mention – in a brief sentence – that this is a power struggle and requires a
change in leadership mindset that will be difficult to achieve.

> We have added a sentence “. However, in many cases this will require a new
mindset among those involved.”

In closing, this paper is very strong and draws attention to issues that have been
ignored in the health systems literature. The point about the need to focus on
transforming health institutions and better understanding the beliefs and motivates of actors is vital for our understanding of the capacity to change health systems. This is the only paper where I have seen an explicit attempt to address the need for such an approach to health systems change. The issue of international donor and domestic government alignments is also important, and I learned lot from it.

That said, I recommend publication of this paper. It is a very important contribution and needless to say, very timely.