

## Global overview of health and welfare systems (2)

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Dr U Ko Ko

Special Advisor, WHO Kobe Centre

### Abstract

Medicine has been taught and practised for thousands of years since the days of Hippocrates and Susruta, but health care as a system was conceived only about 100 years ago. National health services were only established in 1948, after an integrated health and welfare system was implemented in the United Kingdom. Countries all over the world have made attempts to establish their own health systems, with varying degrees of competence and success. In 1978, the *Alma Ata Declaration* urged governments and the world community to endeavour to develop Health for All (HFA) strategies, in which the central theme was an assessment of functioning of health systems for further improvement. The WHO Seventh and Eighth General Programmes of Work, responding to the HFA strategy, supported the strengthening of health systems based on primary health care for the delivery of health programmes, using appropriate technology and with a high degree of community involvement.

The ushering in of the year 2000, amidst tremendous changes and scientific advances, saw man looking ahead with expectations of better health. There had been negative aspects such as the deteriorating environment, the population explosion, and the double burden of diseases. Medical science and technology, on the other hand, had advanced tremendously. However, the question was could the existing health systems make them accessible and affordable?

It was at this crucial time that WHO propounded the concept of evidence-based health systems development – a new universalism. In developing the conceptual basis for health systems performance, eight topics were considered: the boundaries of the health systems; the difference between intrinsic and instrumental goals; mapping between social systems and social goals; the main goals of a health system; the instrumental goals for health systems; the concept of performance and efficiency; the concept of performance in subsystems and institutions; and, lastly, the key factors influencing health system performance.

The concept of performance is centred around three goals: improving health, responsiveness to expectations of the population, and assuring fairness of financial contribution. There can be an extensive list of determinants of health system performance, among them technical, organizational and institutional factors. Health systems perform the following four basic functions, which are the key factors in determining performance:

- health system financing, covering revenue collection, fund pooling and purchasing, which includes allocations to service providers;
- provision of health services, personal and non-personal;
- resource generation, encompassing human resources or personnel, physical resources and knowledge and technology; and
- stewardship, the most important of all, with six subfunctions: overall system design, performance assessment, priority setting, intersectoral advocacy, regulation and consumer protection.