There is growing international agreement on the need to strengthen health systems in all countries and that financing of health care should be seen as an investment rather than merely expenditure. The recent World Health Organization (WHO)-hosted Ministerial Summit on Health Systems Research held in Mexico City on 16 - 20 November 2004, attended by a delegation from the Department of Health led by the Minister of Health, Dr Manto Tshabalala-Msimang, was the latest forum to urge countries to take steps to strengthen their health systems as part of the strategy to achieve the Millennium Development Goals (MDGs) for health.

The Millennium Declaration was signed by 147 heads of state including President Mbeki on behalf of South Africa, at the United Nations Millennium Summit in September 2001. The MDGs were produced out of the Millennium Declaration and represent goals and quantifiable targets aimed at measuring progress towards ending extreme poverty by 2015.

The key health and health-related MDG goals are: halve, between 1990 and 2015, the proportion of people who suffer from hunger; reduce by two-thirds, between 1990 and 2015, the under-5 mortality rate; reduce by three-quarters, between 1990 and 2015, the maternal mortality ratio; have halted by 2015 and begun to reverse the spread of HIV and AIDS; have halted by 2015 and begun to reverse the incidence of malaria and other major diseases; half by 2015 the proportion of people without sustainable access to safe drinking water; achieve by 2020 a significant improvement in the lives of at least 100 million slum dwellers; and in co-operation with pharmaceutical companies, provide access to affordable, essential drugs in developing countries.

In a recent World Bank publication Wagstaff and Claeson1 (2004) list a series of interventions that can contribute to the achievement of the MDG targets, two of which include improving health service delivery and strengthening core public health functions. Both of these are clearly central to strengthening the health system.

The Mexico Ministerial Summit Statement on Health Research endorsed by Ministers of Health and other participants from 58 countries recognised that ‘strong national health systems are needed to deliver health care interventions to achieve the health-related MDGs; to address other communicable and noncommunicable diseases, sexual and reproductive health, injuries, violence, and mental ill health; and to improve health and health equity’.2

But what constitutes a strong national health system? Some examples of the parts of the health system critical to the delivery of HIV and AIDS (and other services) are listed in the section on guiding principles in the Comprehensive HIV and AIDS Care, Management and Treatment Plan for South Africa3 adopted by the Cabinet in November 2003. Among the thirteen guiding principles of the Plan is ‘strengthening the national health system’. Six critical issues are raised in the Plan with respect to the need to strengthen the national health system (pp. 18 - 19). These are:

1. A fundamental principle is the strengthening of the national health system as a whole in order to ensure the effective delivery of comprehensive HIV and AIDS care and treatment. It is also essential to ensure that this plan is not implemented at the expense of other equally important healthcare priorities and programmes.

2. Prior to 1994, the provision of health care for the majority of South Africans was woefully inadequate and skewed. While the public health system in South Africa has made great strides since then, significant staffing and facility upgrades are still necessary to meet the health needs of South Africa’s people.

3. Government is currently pursuing plans to upgrade...
public hospitals, consolidate the National Health Laboratory Service, refurbish and build health facilities, upgrade patient and health information systems, improve drug procurement and distribution, and enhance management systems.

4. This operational plan calls for significant additional investments to improve the capacity and capabilities of the national health care system, in particular the strengthening of human resource capacity, and providing incentives to recruit and retain health professionals in historically under-served areas.

5. Comprehensive care and treatment for HIV and AIDS needs to be delivered in an integrated fashion within a coherent overarching public health policy framework for the provision of basic social services as part of the continuum of care.

6. More than half of the total expenditures envisaged in this plan will go toward strengthening the national health system, emphasising prevention and promoting health lifestyles. These funds will not only allow for the delivery of comprehensive care and treatment for those infected with HIV, but also improve the overall capabilities of the health system.

Recently the importance of patient safety has been acknowledged as an area that requires strengthening, and the WHO has adopted a resolution to this effect. In a recent article in the *Bulletin of the World Health Organization,* Sir Donald Liam suggests that patient safety can only be improved if the focus is on the entire health system: ‘Every point in the process of care-giving contains an inherent lack of safety. Adverse events may therefore be the result of problems in practice, products, procedures or systems. Current conceptual thinking on the safety of patients places the prime responsibility for adverse events on deficiencies in system design, organization and operation rather than on individual practitioners or products. For those who work on systems, adverse events are shaped and provoked by “upstream” systemic factors, which include the particular organization’s strategy, culture, working practices, approach to quality management, risk prevention and capacity for learning from failures. Countermeasures based on changes in the system are, therefore, more productive than those that target the behaviour of individuals and their propensity to commit errors.’

Clearly the South African comprehensive HIV and AIDS plan stole a march on the deliberations at the Mexico Summit with respect to the need to strengthen health systems as the only way sustainable progress can be made in delivering on the MDGs.

The case for strengthening the health system to ensure better health has been made, but what next? Clearly there is a need to develop a programme of action to strengthen the health system. The strategic priorities for the next 5 years adopted by the Department of Health in April 2004 and discussed at its recently held Health Summit (2 - 3 December) contain the necessary ingredients of the action plan to strengthen the health system. What is needed is a robust partnership with all sectors of society to work together to deliver on the strategic priorities.

More than 450 delegates representing the private, NGO, organised labour, academic and research sectors discussed what is needed to strengthen the health system over two days. Key areas for discussion were strengthening the national health system to deliver on the MDGs; strengthening of priority programmes to meet the MDGs targets; human resource planning, development and management; and strengthening the social contract and partnerships, including a discussion on the framework for a health charter. After robust discussion a list of key recommendations were made by the Summit for further discussion and adoption by the Minister of Health and her provincial counterparts.

We know what needs to be done technically. We believe that the political will exists to strengthen delivery of services to the people of South Africa. A common vision and strong partnerships will ensure that the health system in South Africa is strengthened.