High Quality Health Systems are Accountable to People

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Access to care is not enough

Newborn mortality ratio (per 1000 births)

- Comoros
- Zimbabwe
- Malawi
- DRC
- Nicaragua
- Solomon Islands
- Vanuatu
- Honduras
- Indonesia
- Bolivia
- Tajikistan
- Cambodia
- Swaziland
- Djibouti
- Samoa
- Peru
- Namibia
- Gabon

Newborn mortality
What is a high quality health system?

Health systems are for people. A high quality health system optimizes health in a given context by

• **consistently** delivering care that improves or maintains health,
• **being valued and trusted by all** people,
• responding to changing population needs.
More and more complex health needs

- deaths of newborns and children
- malnutrition, stunting, and wasting
- noncommunicable diseases
- national and global health risks
- illnesses from hazardous chemicals and pollution
- vaccines and medicines
- sexual and reproductive health
- AIDS, tuberculosis, malaria, and neglected tropical diseases
- injuries and accidents
- hepatitis, waterborne diseases, and other communicable diseases
- maternal mortality
- mental health and well-being
- substance and alcohol abuse
- tobacco control
- universal health coverage
- health workforce

Residual mortality harder to avert
8.6 million deaths from treatable conditions: 60% due to poor quality among people using care

Preventable through public health 7.0 m
Amenable to health care 8.6 m
Non-utilization 3.6 m
Poor quality 5.0 m

Health providers perform 1/2 of basic clinical actions for common conditions

Poor quality for the poor

1 in 3 patients experience disrespectful care, short consultations, poor communication or long wait times

Health workers yell at us like a slave... That is the reason why people do not want to go to the hospital although they have a letter of referral*
- Timor-Leste patient

"People always say that the nurses are shouting too much, and saying bad things to them, and maybe they don’t want to treat them"
- Ghanaian patient

"The hospital is like a prison"
- Russian patient

“This woman! She acts as if this is her first pregnancy. Did you deliver previous pregnancies without labor pain?"
- Tanzanian nurse
How can health systems be more accountable to people?
1. Measure what matters, when it matters

Functions not inputs
- Real time registries of health system assets, health needs
- Health system competence not buildings, provider competence not numbers

Performance in normal and crisis times
- Health system quality dashboards shared with people
- Service provision, quality, mortality for index AND routine needs during crisis

People’s voice and values
- User experience, confidence, endorsement
- Function (not presence) of feedback channels
“If you or your child is very sick tomorrow, can you get the health care you need?”

2. Move beyond micro-level fixes

**Micro (point-of-care)**
- Facility-level
- Behavior change
- Short term
- Local scale
- Project based

**Macro (structural)**
- System-level
- Foundation change
- Long term
- Large scale
- Nationally led
Four opportunities

- Redesign service delivery
- Ignite demand
- Modernize education
- Govern for quality
3. Ignite demand for quality

Anthony is a 45-year old man with high blood pressure who needs a regular check up. At the health facility the nurse does greet him and introduce herself and change his medication. She does not ask about his symptoms or check his blood pressure.