Role of CSOs and their providers in Malaria and Health System Strengthening

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- It is a true pleasure appearing here and enjoy the honor and privilege to contribute to this important webinar.

- How do we define "health system"? In today's complex world, it can be difficult to say exactly what a health system is, what it consists of, and where it begins and ends. The WHO defines the health system as "A health system consists of all organizations, people and actions whose primary intent is to promote, restore, or maintain health". Using the system framework, WHO describes six building blocks or essential functions of a health system. These include, service delivery, health workforce, information and data systems, medical products, vaccines and technologies and financing, and leadership/stewardship.

- One thing that is so important is that these essential functions need to be strong to achieve the overall goals of a health system, which were **improved health**; **responsiveness** (that is, how well the system responds to changing health needs or other changes in the system); **social and financial risk protection**; and **improved efficiency**. Intermediate goals are **access**, **coverage**, **quality** and **safety**. These are important to understand if we are to work towards strengthening the system.

- When we look at the health sector governance and policy, we usually assess that against the public policy and how that policy supported the health sector and vice-versa. But the 'national health system' is not limited to the public sector. The past couple of decades have seen an important shift, mainly due to the fast expansion of private for-profit provider's and the proliferation of NGOs as charitable providers and community health workers. Although the public providers are usually referred to as the "backbone" of the health care system, in most health systems, providers constitute a complex mixture.
- Thus the key point to here is that the health system is a pluralistic system that acknowledges the importance of public and private sector – both private for-profit and private not-for – profit.

- From my topic thus, where do we place civil society organizations (SCOs) within the context of providing malaria services, as a contribution to strengthening the health system? CSO, by their very nature cut across these six building blocks….for they do provide health services, they constitute a veritable, low-cost labour for health service delivery, especially in remote hard to reach places (forest areas in terms of malaria control and elimination); and where they are developed, they can easily be plugged into the existing data systems for reporting; they can be trained to use new technologies (all the new malaria testing tools) and given their organizational capacity, SCOs can be relied upon as a true partner in delivering malaria and other health services because they live with the beneficiaries of the health system. In fact CSOs can even be tapped as a source of resource mobilization to finance strengthening the health service. etc.

- Thus the contribution of CSO to health system strengthening can be summarized in five types of contributions with a widening scope, ranging from
  1. Expanding the geographic and population coverages with health service and thus contributing not only to disease control but other packages of health services and consequently realizing universal health access. Example of health services delivery were highlighted by other speakers
  2. Supporting health workface through direct hiring and deploying of skilled health cadre to work within the public sector (seconded staff) and supporting and supervising community health workers.
  3. Transferring knowledge, training and deskilling – migrate delivery of services to less extensively qualified professionals where the risk of transition are felt to be minimum. One example of the substitution of nurses in place of medical doctors.
  4. Strengthening health information including disease surveillance. CSO working in malaria elimination implementing malaria surveillance including case and foci investigation. CSO is well positioned to support Community COVID-19 surveillance.
  5. Contributing to health support systems: strengthening the supply and delivery of health products and commodities. Expanding laboratory capacity. Some CSO have infrastructure and capacities capable of COVID-19 testing.

Future challenges for engagement of CSO in health system strengthening:

- Expanding individual and communities' participation in public policy: stewardship is the most important in the health system functions. Though the ultimate responsibility for the overall performance of a country's health lies with the government, the CSO are increasingly contributing to health policy goals. Also CSO need to continue to advocate for certain population groups or for allocating resources to priority and emerging diseases and health condition. Though, CSOs themselves may be restricted in activities such providing specific services.
- Sustainability: Supporting the transition from external funding/donor to a more sustainable health system: the example of health service integration, surveillance, knowledge transferring and deskilling are key activities to support this transition.