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## Tuberculosis and health systems

### The issue

A health system consists of all organizations, people and actions whose primary intent is to promote, restore or maintain health. This includes efforts to influence determinants of health as well as more direct health-improving activities.

The overall goal of a health system is to improve health and health equity in ways that are responsive and financially fair, and make the best – or most efficient – use of available resources. To achieve this goal, regardless of how it is organized, a health system should work on the basis of six building blocks: leadership/governance (“stewardship”), health financing, health service delivery, health workforce, medical products/technologies, and health information.

The fighting against tuberculosis (TB) is based on the Stop TB Strategy. One of the six components of this Strategy is to “contribute to health system strengthening”, acknowledging that effective and sustainable TB control relies on the strength of the general health system.

Health care reforms aimed at strengthening health systems offer several opportunities for making TB control more effective. However, global experiences over the past decades show that some types of health system reforms, if not carried out with due concern for the importance of specific disease control functions, may lead to severe crises for TB control.

Well-designed and well-executed TB control strategies can help strengthen the general health system, for example, by improving laboratory networks, drug distribution systems and human resource capacity, and by providing quality services integrated into primary health care. A prerequisite for this is that TB control activities should be coordinated and harmonized with wider efforts to strengthen the health system.

### The facts

- The socioeconomic crisis and the deterioration of health systems performance in the countries of eastern and central Europe during the 1990s resulted in the resurgence of many diseases, including TB, and an inadequate response to the problem. In western Europe, health systems are challenged by the need to address TB in marginalized and socially disadvantaged groups living in pockets of deprivation in many major cosmopolitan cities, asylum seekers and migrant workers.
- Almost everywhere in Europe, governments have undertaken health system reforms. Although the range and depth of the challenges faced have varied between countries, some are common to many of them: ensuring leadership and governance in the health sector, together with sustainable financing and the priority development of delivery of primary health care and

services for disadvantaged populations, motivating and retaining health staff, and promoting evidence-based care.

- Strengthening TB control services through national and additional international funding has been necessary in many countries in Europe to ensure effective implementation of disease control interventions and to address regional challenges such as anti-TB drug resistance. However, system-wide weaknesses have been demonstrated to be major obstacles for effective TB control. At the same time, highly centralized, vertical TB control programmes inherited from the Soviet system are difficult to integrate with the general health services because of insufficient funding, irrational allocation of available resources, poorly developed primary health care services and, often, psychological resistance on the part of TB specialists.
- TB programmes are an important part of health systems and can contribute substantially to health system strengthening. The World Health Organization has recently begun to revise existing frameworks for strengthening health systems to improve health outcomes, with specific reference to TB control.

### **The policy considerations**

Contributing to health system strengthening is an integral part of the implementation of the Stop TB Strategy. This implies that TB programme staff should take a proactive part in processes to strengthen the general health system.

TB programmes can contribute to strengthening health systems through investments in laboratory infrastructure and training of health staff, as well as by developing innovative service delivery strategies such as the Practical Approach to Lung Health, public-public and public-private partnerships, and community-based care, in response to specific health systems barriers.

TB programmes may further contribute to strengthening health systems by considering a set of guiding “dos and don’ts for health systems strengthening” that promotes: harmonization of the TB control planning and budgeting process, with sector-wide planning frameworks; optimization of the use of shared resources such as frontline health staff; and reduction of duplicate structures.

While striving for further harmonization and integration, TB programmes must, however, ensure that core TB control activities are not compromised. This requires preserving some “non-negotiable” TB-specific functions. The balance between integration and the retention of key “vertical” elements varies across countries, depending in particular on the developing capacity of the general health system.

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