

Contextual determinants of policy and resources for equitable health systems

Adnan A. Hyder, MD MPH PhD

*Johns Hopkins University, Bloomberg
School of Public Health, USA*

&

Future Health Systems Consortium

5-Questions

- Who?
- Evidence?
- How?
- Evidence?
- What?
-lots of questions for discussion!

Who cares about equity?

- *Who* cares often determines what happens to equity – both as a principle of health system delivery and as a goal
- Do **donors** care about equity or how changes in health status are achieved?
- We assume that **policy makers** care about equity (the *rationalist* or *humanist* model)?
- **People** *do* care about equity because it affects them!

Evidence about caring for equity?

- For donors:
 - Changing landscape; doing the talk for sure, but are they investing in strategies? (Rockefeller; DFID 2008)
- For policy makers:
 - Severe lack of *empirical* information; knowledge gap that needs focused research (Hyder AA et al 2007)
- For people:
 - Several ‘movements’ demonstrate how closely people monitor inequity (Bhuiya A et al, 2007)

How do we stimulate action on equity?

- Pro-poor health policies?
 - Defining and implementing social safety nets for vulnerable groups (Bloom G et al, 2008)
- Equity promoting interventions?
 - Measuring who benefits *first*, and who benefits *most* from implementation (Bishai D et al, 2005)
- Explicit monitoring of performance for equity?
 - Indicators for assessing *how* health systems respond to inequity (Peters D et al, 2008)

The evidence for action?

- Issues of scale
 - Much work needs to be done; good examples now in low-middle income countries (Syed et al, 2008)
- Issues of measurement
 - How do we measure inequity for health systems; do we need new metrics? (Frenk & Murray, 2008)
- Issues of trust/accountability
 - The context is important; benchmarks of fairness for health sector reform (Daniels et al, 2001)

Discussion Items...

- Acknowledge that we have assumptions!
- We need more **evidence** to validate our assumptions about policy and resources
- We need to become better at making the case that **equitable systems** are “efficient”, “effective”, & “cost-effective” health systems
- Do we need to contextualize this ‘movement’ in the **community** – values of PHC?

Thank you!

ahyder@jhsph.edu