Health Systems Governance and Management for Universal Health Coverage

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Objectives and Agenda

• **Objective**
  - Advocating the need to take more actions to develop governance and management solutions conducive to Universal Health Coverage

• **Agenda**
  - Background and definitions
  - Governance
  - Management
  - Key (selected) issues
Background

• UHC can only be attained by strengthening all building blocks of health systems (systemic approach)

• Adequate funding and appropriate professional skills insufficient to provide UHC

• Decision making and administration crucial for successful UHC (rather uninvestigated blocks)
Definitions

• **Governance (G):** “the set of processes, customs, policies and laws formally or informally activated to direct, administer and control the health system”

• **Management (M):** “the activities such as planning, directing, motivating, co-ordinating, controlling, measuring and accounting for the work of people in organised setting for a defined purpose”
Overlapping and common issues

- Overlaps and inter-dependencies between management and governance
  - Decision Making structures and processes
  - Translation of policy into actions & regular "administration"

- But specialised areas of knowledge

- Focus on “how” rather than on “why” or “what”

- Non neutrality of G and M practices in relation to UHC
Overall governance structure

• Three main issues in Developing Countries (DC)
  – National + international donors + global stakeholders
  – (Lack of) Multi-sectoral actions to improve populations’ health
  – Difficulties in involving the marginalised constituencies in decision making
Governance: Two focuses

• **Institutional Structure**: design and maintenance of funding, regulation, purchasing and delivery arrangements (the 4 knobs)
  - Need of coherent solutions
  - Centrality of universality concerns
  - Decentralisation

• **The role of the private sector**
  - Variety of organizations
  - Full exploitation of their potentials
  - Need of an adequate framework coherent with UHC (Public Institutions)
Management: the Legacy

• Lack of attention on management issues in healthcare
  – Professional driven organizations
  – Administration culture and practices migrated from the public sector

• External “management” fads in DC public healthcare administrations
  – Traditional European models (colonial period) – with variations (see UK versus France)
  – New Public Management and the “private” lessons
Management: the Challenges

• “How” as important as “What” (attention to how resources and professional skills are used)

• Weak evidence on health management practices and their transferability

• Design of contextualised management systems, based on a full understanding of local values, traditions and practices

• Need of adequate “tools” to understand contexts and to ground management practices
Key issues in governance and management

1. Developing (a) the culture of universalism
   • (values, ethical tension, leadership…not only incentives … including donors)

2. Strengthening institutions and public sectors capability to govern health systems
   • Overcoming public/private government/market antinomies
   • Institutional capacities to engage the private sector

3. Promoting inclusiveness in decision making processes
   • Inclusiveness of the variety of actors (within and outside political/public institutions)
   • But attention to maintaining efficiency and effectiveness of decision making

4. Investing in healthcare management capacity building
   • Need to tackle implementation failures
   • Understanding management capabilities to design policies
   • Management models and cultures to based on local cultures and values
   • Universalism in management culture and values