

# Health System Process Goals: A tool for HSS evaluation



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Health systems strengthening (HSS) is widely understood to be key to achieving universal health coverage and to ensuring robust responses to health emergencies. In recent decades, global health investors have put more attention and investment towards HSS, leading to accelerated efforts to evaluate HSS policies and programs initiated by those investments. Yet, a common definition and framework for how to evaluate HSS interventions remains elusive, hampering efforts to strengthen, coordinate and amplify HSS programs.

The Health Systems Strengthening Evaluation Collaborative (HSSEC) brings together key global and national stakeholders to suggest ways to strengthen the quality of evaluations of health systems strengthening (HSS) investments in LMICs and to improve coordination across stakeholders in this space.

## **This technical brief focuses on developing and operationalising a list of health system process goals as a tool for HSS monitoring, evaluation and learning.**

It is difficult to determine the role of HSS investments in triggering or contributing to systems-level change as there are so many factors involved. Changes in health outputs or outcomes will take a long time and be difficult to attribute to a specific HSS investment. HSSEC members identified the need for strong intermediate systems indicators as a tool to help understand movement along this causal chain better, earlier and in a comprehensive way (i.e., not limited to one “building block” of the system, but looking at system-level change). They also stressed that understanding the features of a strong health system was important in its own right.

We undertook a series of steps to develop this conceptual tool; 1) we conducted a rapid review of the literature on health systems, HSS and HSS evaluation frameworks, 2) we prepared a synthesis of ‘intermediate outcome indicators’/process indicators that are markers of progress towards health system strengthening, which we called “health system (HS) process goals”, and 3) we developed two case studies to test this conceptual work with real-life examples of HSS interventions.

## **Key gaps in the literature and areas for further development**

Many diverse frameworks to conceptualise health systems and health system strengthening have been developed. Despite progress in this theoretical work, the understanding of HSS and HSS interventions is still often organised along the lines of the “building blocks”, focusing on infrastructural and resource-related elements of health systems rather than relational elements such as power, trust, social values and norms. In terms of HSS evaluation, there is often a focus on outputs, health outcomes, and impacts. Less work has been done to focus on more upstream elements in order to assess early signs or markers of HSS progress.

## **A Simple model for Health Systems Strengthening**

Building on the findings and gaps highlighted by the literature review, we designed an overarching model of health system strengthening.

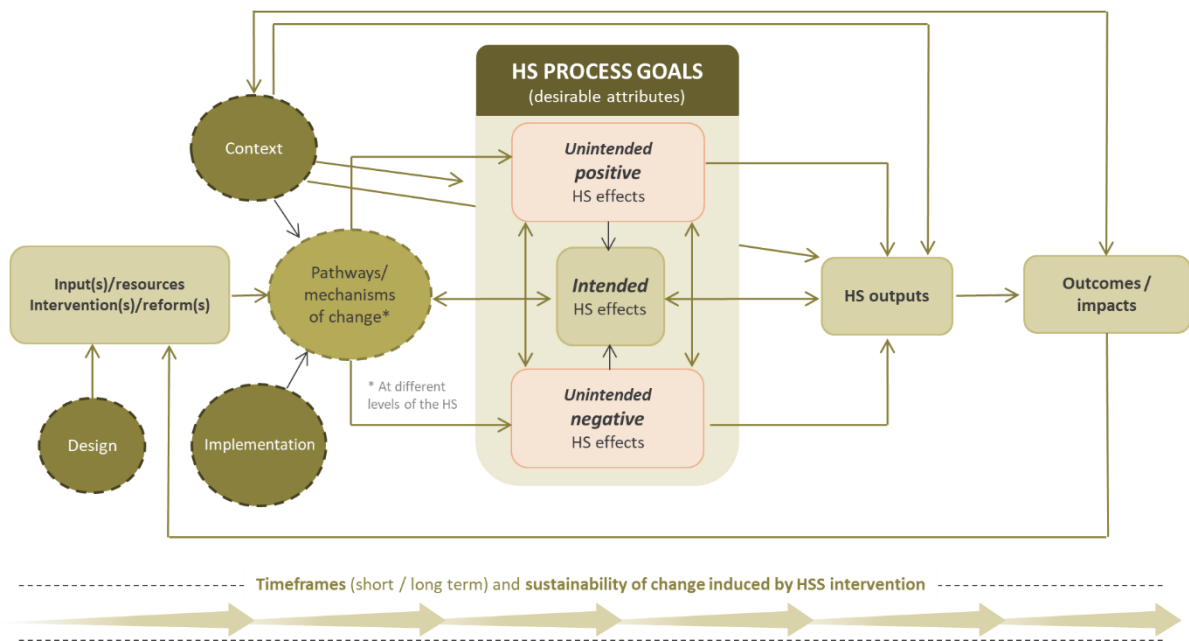


Figure 1 Health system strengthening model

The purposefully simple model above draws a visual path of how health systems are shaped (leading to health system outputs and health impacts) and highlights essential steps and elements that influence health system strengthening. We aim to keep the model simple to allow it to represent a highly generalisable situation that can be adapted to the evaluation of different HSS approaches, ranging from specific (narrow) HSS interventions to broader health system reforms.

The HSS model helped us establish our focus on the **HSS processes** that sit between the inputs and mechanisms of change and the health system outputs. We refer to this level as the **health system strengthening processes and effects** and we believe this level is crucial for HSS evaluation. Based on this, we developed a list of **health system process goals** which capture the normative ideals or the “desirable attributes” of what health systems should look like. The HS process goals (or rather, progress towards them) are influenced by positive/negative, intended/unintended effects generated by HSS interventions.

### Health System Process Goals

Health system process goals are both markers of progress towards health system strengthening and features of a strong health system. They are worded using standardised, aspirational language (i.e., as an active sentence rather than an indicator or an area for assessment) to represent the features towards which the health system should aim and that any health system intervention or reform should contribute to. Some goals might sound unrealistic for discrete HSS interventions. Still, the aim is not to assess whether the goal has been fully achieved or not, but rather to provide information about the direction of travel.

A total of 22 goals were defined based on the review of the literature and expert opinions and organised under four broad domains, covering ‘ownership, participation and accountability’, ‘learning and resilience’, ‘use of resources’, and ‘service delivery’.

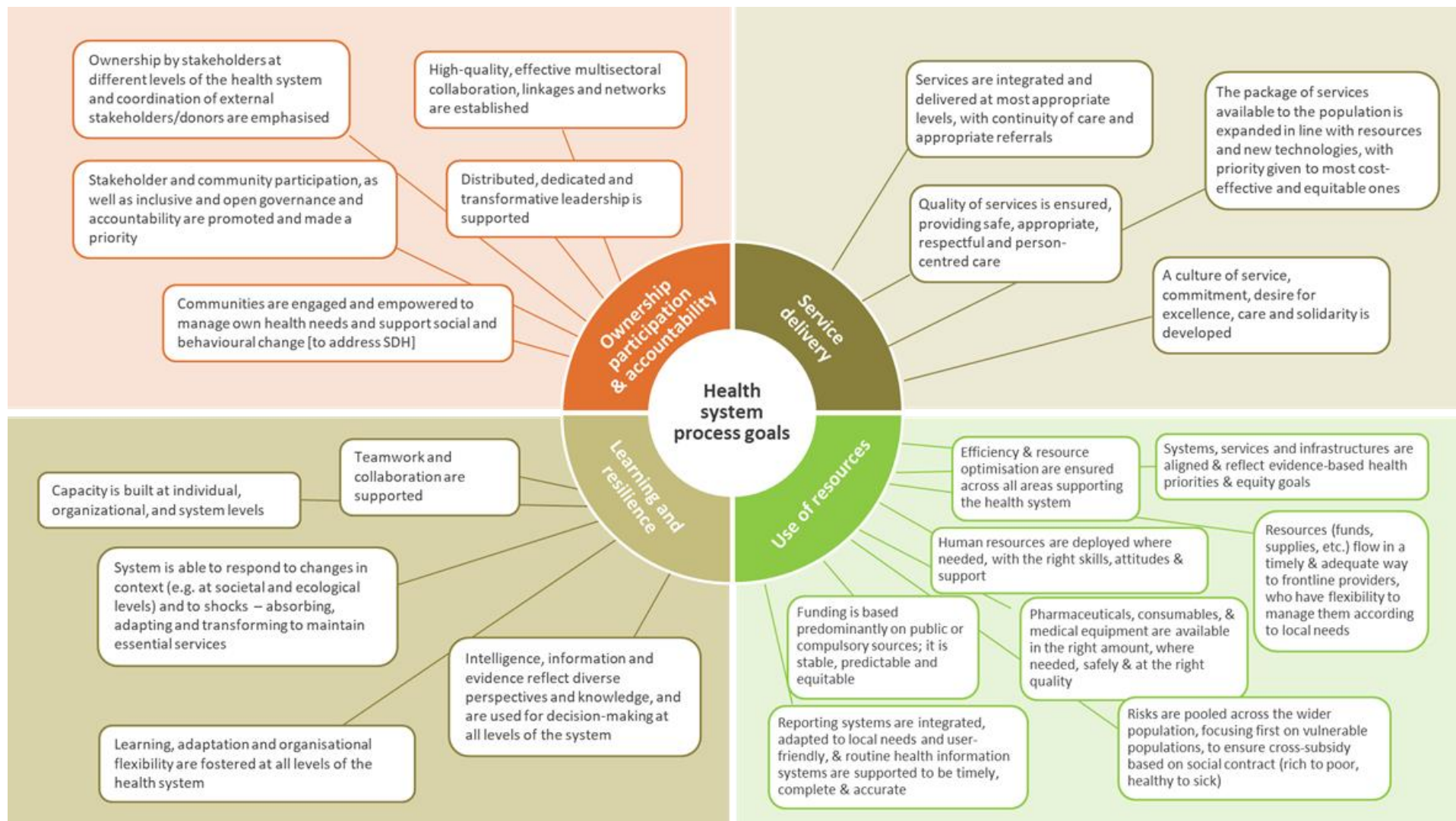


Figure 2 Health system process goals

The list of HS process goals is meant to be broad and indicative of the areas of HSS evaluation, and it covers elements that are thought to be essential for health system strengthening and therefore a marker for HSS.

The main advantage of using the HS process goals to guide HSS monitoring, learning, and evaluation is that it allows looking at markers of progress and performance that are more 'upstream' than HS outputs, outcomes, and impacts. This entails a more rapid assessment of whether and how HSS is happening (or will happen – if the tool is used prospectively) by using the HS process goals as proxies or signs of HSS, understanding the 'direction of change' and unpacking how progress is made towards them. In addition, by focusing on broad dimensions of HSS with reference to processes across the complexities of the health system, the HS process goals move beyond the building blocks and a functional, programme-specific approach to capture HSS more comprehensively. This also allows capturing spill-over effects of interventions, their contribution to meeting overarching health system process goals and therefore ensuring health system strengthening. It also allows the focus on the system itself to be restored.

### **Health system process goals as a tool for HSS evaluation**

The list of HS process goals can be operationalised as a conceptual tool for HSS monitoring, evaluation, research, and learning, and applied to assessing HSS interventions. Building on the lessons learned from testing the list of HS process goals by applying it to two real-life interventions, we found that the list can be effectively used for both the retrospective evaluation of concluded or ongoing interventions and the prospective evaluation of future interventions, or more generally for reflections and learning on the direction of health system development. In particular, the potential for prospective use (i.e., applied before or during implementation) makes it a potentially useful tool to learn and adapt HSS interventions' design and implementation practices. We think that the list of HS process goals can benefit from being applied in a participatory way by a group representing different views and perspectives. This can open spaces for dialogue and constructive debate and further its potential as a collective learning tool.

### **What have we learned and what is next?**

We believe that the list of HS process goals is a helpful tool for the prospective or retrospective assessment of HSS interventions, particularly in allowing monitoring of and learning about HSS (as well as formative evaluation) and opening a space for participatory, inclusive policy dialogue about HSS. Compared to other existing tools, it has the advantage of being applicable at design or initial stages of implementation, without having to wait for effects to be evident on HS outputs, outcomes or impacts at a population level.

Further work could be pursued to further test and refine the list of HS process goals, as well as to develop quantitative indicators or qualitative measures of (some of) its key concepts. Guidance could be developed to further operationalise the list, including on how to apply it in conjunction with other approaches for HSS evaluation, such as outcome harvesting or contribution analysis. Further guidance could also be developed on how to structure participatory discussions

For more information, read the full HSS evaluation - conceptual model and monitoring & learning tool report.



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