

## **Bellagio Consensus Statement:**

### **Use of a Complex Adaptive Systems Lens for Health System Strengthening**

*27<sup>th</sup> to 31<sup>st</sup> August 2012*

**Preamble:** A group of 22 health professionals and stewards, representing 15 countries, gathered in Bellagio, Italy from August 27-31, 2012, concerned about the attainment of the highest possible level of health as a most important world-wide social goal whose realization requires universal health coverage, as well as the action of many other social and economic sectors in addition to the traditional health sector. Central to achieving this goal are robust and dynamic health systems. After our discussions and deliberations, we agreed upon the following seven points, which we believe warrant serious consideration at all levels of global health practice, research, policy, and education:

1. Health systems are complex adaptive social systems that are comprised of a wide variety of people, organizations and networks, each with its set of values and interests that must be aligned to achieve health and other health systems goals.

2. Health systems strengthening (HSS) has emerged in recent years as central to promoting and protecting health and relieving suffering. HSS is a complex, iterative, and learning process wherein the interactions between actors, structures, services, and subsystems are optimized over time while striving for health systems goals. As such, this process:

- Is highly contextual and influenced fundamentally by institutional relationships at local, national, and global levels, and will differ greatly from country to country and within countries at different times.
- Involves people and organizations outside of what is generally thought of as a health system, including health-related sectors; the private sector; agriculture; education; and others.

3. The process of health systems strengthening depends fundamentally on the ability of in country organizations to learn over time; adapt to emerging challenges; and optimize interactions with citizens, communities and other organizations to reach health systems goals. These organizations should become “learning organizations,” organizations that are continuously expanding their capacity to create their own future.<sup>1</sup> While technical capacity is very important, other capacities are also key, eg:

- Prioritizing Needs
- Taking Risks
- Mobilizing
- Advocating
- Identifying and Supporting Participatory Leadership

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<sup>1</sup> The Fifth Discipline, Peter Senge, p. 14.

- Maximizing Synergies Between Sectors and Disciplines

4. The relationship between external global players such as donors and in-country organizations has been dominated by a focus on short-term, results-driven actions. Such a focus too often undermines local organizational capacity and leads to fragmented efforts.

5. We as a global health community can do much better to strengthen organizational capacity that leads to strengthened health systems around the world.

6. The CAS approach deserves serious consideration and testing in terms of its application to organizational capacity building for HSS because of its analytical and transformational potential. Key CAS themes in social systems have been neglected in much of health systems activities, such as:

- Collaboration Across Sectors and Disciplines Around a Shared Vision
- Feedback Loops between Interconnected Components
- Social and Organizational Networks
- Transformational, Systems Level Leadership at all Levels
- Ongoing, Iterative Learning
- Creation of a Local Environment that Encourages Emergent Self-Organization and Innovation

7. We hope that all global health stakeholders from practice, academia, policy, and education will consider the points above, and make appropriate changes within their sphere of influence to increase local organizational capacity and strengthen health systems around the world.