

movement and ensure that global health principles are guiding university priorities.

Summary/Conclusion: Building a robust global health agenda for the training of talent, extension of relationships across multiple borders, and the mobilization of new ideas among higher education institutions and partners is what will unquestionably benefit our domestic community and foster global stability. Approaching internationalization of higher education where sector issues, like global health are core is a much richer, more relevant, and necessary approach to strategy development.

Health systems strengthening in the post-2015 global development agenda

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Background: The United Nations (UN) Millennium Development Goals (MDGs) were created in 2000 to address the world's most pressing development challenges. Though successful in some regards, all three health MDGs are not on track to meet their objectives by 2015. One possible explanation is the lack of emphasis on health systems strengthening (HSS) in global health (GH) efforts. In 2007, the World Health Organization (WHO) described an HSS framework, including six building blocks: service delivery; workforce; information; medical products, vaccines, and technologies; financing; and leadership/governance. Many GH organizations have subsequently advocated for HSS (Hafner and Jeremey, 2012). The UN post-2015 agenda provides an opportunity to prioritize HSS; the extent to which this is occurring in the post-2015 dialogue is unclear.

Citations:

World Health Organization. Everybody's Business: Strengthening Health Systems to Improve Health Outcomes. 2007.

Hafner, Tamara and Shiffman, Jeremey. The Emergence of Global Attention to Health Systems Strengthening. *Health Policy and Planning* 2012;1–10.

Structure/Method/Design: Published post-2015 reports were reviewed from the following web pages (December, 2013):

UN: Beyond 2015 (<http://www.un.org/millenniumgoals/beyond2015-overview.shtml>)

UN: Sustainable development knowledge platform, health and population dynamics (<http://sustainabledevelopment.un.org/index.php?page=view&type=9502&menu=1565&nr=6>)

WHO: Health in the post-2015 UN development agenda (http://www.who.int/topics/millennium_development_goals/post2015/en/)

World We Want: Health Thematic Consultation (<http://www.worldwewant2015.org/health>)

Reports were examined if they discussed health goals for the post-2015 agenda.

These reports were searched for "health systems" and statements supporting the building blocks of HSS. Quotes were extracted and assessed for 1) the degree of support for HSS in the post-2015 agenda, 2) HSS metrics, and 3) the context arguing for HSS. Degree of support was categorized as absent (HSS not mentioned), weak (HSS mentioned but no building blocks included), or strong (HSS mentioned including at least one building block).

Results (Scientific Abstract)/Collaborative Partners (Programmatic Abstract): A total of 12 reports met the inclusion criteria. Four of the 12 reports were classified as "strong" in their support for HSS; 5 were weak and 3 made no mention of HSS. No reports suggested metrics for HSS. When HSS was mentioned, it was most often included in the context of calling for universal health coverage

rather than other potential development goals, such as addressing noncommunicable diseases or accelerating the MDGs.

Summary/Conclusion: HSS appears to be mentioned in the majority of reports addressing health in the post-2015, although a robust roadmap for its incorporation is lacking. To insure that HSS is realized, subsequent steps in the post-2015 process should aim to 1) develop metrics to measure success and 2) broaden ways in which HSS can support all health-related development goals.

An NGO code of conduct for health systems strengthening: Maximizing the performance of nongovernmental organizations to support broad health system development

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Background: Health systems in the developing world are often characterized by severe shortages of human resources, inadequate infrastructure, and limited capacity. Despite a growing donor focus on "health systems strengthening," programs like PEPFAR and the Global Fund continue to preferentially seek out nongovernmental organization (NGO) partners. In addition, the growing global focus on the end of AIDS in a post-Millennium Development Goals (MDG) world often results in vertically funded programs that can have detrimental effects on public-sector human resources. The rise of NGO-driven service delivery has led to a proliferation of different projects and approaches, often with poor follow-up, limited oversight, and varied levels of success.

Structure/Method/Design: In May 2008, a group of health-focused organizations launched the "NGO Code of Conduct for Health Systems Strengthening." This voluntary strategy aims to ensure that NGOs "do no harm" and contribute maximally to building public health systems. We will present the process of developing the code, key elements and rationale, and concerns that have arisen during the adoption and implementation of Code policies.

Results (Scientific Abstract)/Collaborative Partners (Programmatic Abstract): Our own experience in implementing the Code, as well as the results of a 2010 evaluation among a sample of the 57 signatories, has shown that the current donor environment—which funnels financing toward international NGOs rather than long-term investments into the public sector—makes it extremely difficult for signatory NGOs to implement more equitable hiring processes. Barriers to implementation include recruiting qualified staff to implement NGO programs without damaging the public-sector workforce and providing comparable salaries to MOH staff.

Summary/Conclusion: In the areas of hiring practices, compensation schemes, training and support, reduction of management burden, and assistance in integrating communities into the formal health system, international NGOs have an opportunity to support public-sector health system strengthening through sustainable practices promoted in the NGO Code of Conduct. To effectively implement these practices, however, donors must be called on to also sign and make the implementation of the NGO Code of Conduct a requirement for recipient organizations as a condition of funding.

Generating political priority for urban health and nutrition: Application of a policy framework

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