

systems in different countries is likely to cause vigorous debate.

Dr Gro Harlem Brundtland, Director-General of the World Health Organization, commented: "Dollar for dollar spent on health, many countries are falling short of their performance potential. The result is a large number of preventable deaths ... The impact of this failure is born disproportionately by the poor." What is needed, she argues, is a means of evaluating health system performance to tackle the inherent deficiencies: "Ultimate responsibility for the performance of a country's health system lies with government."

*The world health report 2000* presents, for the first time, an index of national health systems' performance in trying to achieve three overall goals: good health; responsiveness to the expectations of the population; and fairness of financial contribution. Progress towards achieving these goals, it argues, depends on four functions: providing health services; generating resources that make service delivery possible; raising and pooling resources used to pay for health care; and stewardship — the setting and enforcing of rules to provide strategic direction to all parties involved.

The data presented are based on established and new measurement systems including disability-adjusted life expectancy. Disability-adjusted life expectancy has been selected by WHO since it permits assessment of overall population health, not just mortality, in order to shift the focus to healthy years of life rather than only length of life. It has the advantage of readily allowing comparisons across different populations. While data and methods to do so are still imperfect, few would dispute the need to perform this type of analysis.

Kei Kawabata, of WHO's Global Programme on Evidence for Health Policy, who was involved in preparing the report, remarked: "For the first time, WHO is stating explicitly that there are other consequences of good or bad health systems that matter. It matters how responsive health systems are to the people they are supposed to serve." She adds: "Health systems have a responsibility to ensure that the services they provide are affordable for the individuals that need to access them — whether they are rich or poor. No one should have to make a choice between forgoing treatment or becoming impoverished or in debt to get that treatment."

The measurement of health systems performance will be a regular feature of future *World health reports*. ■

Barry Whyte, *Bulletin*

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### ***World health report 2000:* improving health system performance**

France has the best overall health system performance based on data published in *The world health report 2000 – Health systems: improving performance* released on 21 June. Surprisingly, the United States is ranked in 37th place. Many health ministers will be looking at this year's *World health report* to find out where their countries stand. The report sets out to answer the following questions: What makes for a good health system, what makes a health system fair, and how do we evaluate the performance of existing health systems? Ambitious in scope, any ranking of health