

Second Annual Inter-Agency Country Health Sector Teams' Meeting Improving Implementation Bamako 15 -16 June 2009

MEETING REPORT

Introduction

This was the second IHP+ Country Health teams meeting (the first being in Lusaka in March 2008). It focused on the Africa region, and objectives were as follows: to share progress and lessons learned in moving the aid effectiveness agenda since Lusaka; to identify persistent or new challenges and opportunities, and to outline priority actions for the next year. Participants came from Ministries of Health and Finance, civil society and development agencies. This note summarizes a number of recurring themes and the main conclusions on key topics that were discussed. A back-to-back meeting organized by the Harmonization for Health in Africa (HHA) Initiative discussed ways to coordinate technical support around national health strategies.

Recurring themes

- *IHP+ builds on existing country health strategies and aid coordination mechanisms.*
This is a founding principle of IHP+, but it was clear that this is not always being as well communicated as it could be.
- *Moving the aid effectiveness agenda is difficult but worth the effort, and commitment remains high.*
There were repeated reminders that, while improving aid effectiveness is a large, difficult agenda that requires considerable political and technical support, the underlying premise is sound - that real changes in behavior will help accelerate progress towards the MDGs. IHP+ was seen by some as a potential role model for modern development co-operation, though it was noted that it still has a way to go.
- *There is indeed progress but it is quite slow, and the window of opportunity is limited.*
There was a strong message that IHP+ has to be seen to deliver results sooner rather than later. Several countries provided examples of how IHP+ is helping move the aid effectiveness agenda. There were reminders that change is usually incremental, and that the need is for steady but sustained progress. Associated with this were calls for IHP+ to 'close the gap' between global and country level activities by focusing more on what is happening on the ground, and to get more specific both on understanding the causes of slow or no change, and on how best to address them.

Main messages on specific topics

Country compacts: enhancing mutual accountability for results?

Strong government leadership was cited as the most important pre-requisite for effective partner agreements, whether they are formally called county compacts or go by another name. There was an extensive discussion of the added value of country compacts, especially in those countries with existing Memoranda of Understanding with development partners. The need for any compact to build on existing agreements between different parties was repeatedly stressed. In some countries with well-developed MOUs or Codes of Conduct, the compact development process has been a relatively light

exercise involving a review of the agreement against the benchmarks of a 'good compact' provided by IHP+, and then identifying aspects which might benefit from revision and how this will be handled. In other countries the Ministry of Health has used the process as an opportunity for a more substantial review and dialogue with different partners. The main benefits identified were: bringing more and new actors together in support of a single country plan - including in some instances more active civil society engagement; more explicit commitments by both government and development partners on ways in which they will support implementation of that national health plan; on more predictable funding, and on simplified funding modalities and clearer divisions of labour. Lastly, the use of country compacts as a tool for ensuring accountability was discussed, with a reminder that there are always several lines of accountability e.g. to citizens, partners, financiers. What the compact was seen to offer is a way to enhance mutual (rather than one-way) accountability between all signatories, including peer group accountability between agencies - in colloquial terms, a sort of 'SWAp with teeth'.

Joint Assessment of Country Health Strategies

This was the most contentious discussion and there were several clear messages from participants. First, joint assessment is not a new exercise - annual health sector reviews commonly involve both government and development partners, and may or may not involve civil society. Second, the main comments were not about the **purpose** of the proposed joint assessment (to reduce transaction costs of multiple assessments, and increase the credibility of national plans in the eyes of potential investors), nor about the **tool** that has been developed by the inter-agency working group on joint assessment (the tool was regarded as potentially useful if properly handled), but about the proposed **process** of how joint assessment would be done. There was real concern that this could become an externally driven and over-complex exercise, and that there was a need to distinguish external from independent assessment. Third, there were concerns that the costs might outweigh the benefits. Country actors underlined the need to stick to IHP+ principles and start from local processes and experts. At the same time, it was acknowledged that independence / objectivity would be strengthened by involvement of some independent experts. There was a strong message to avoid any new international bureaucracy to 'run the show'. Lastly, there was a recommendation to begin joint assessments with a few interested countries as soon as possible.

Tracking results: reducing transaction costs of reporting

The meeting expressed strong support for simplifying reporting and reducing transaction costs by more joint monitoring of health sector performance - several countries reported on the joint monitoring processes already in place. The 'common framework for monitoring performance of health systems' presented by the interagency working group was accepted as a good basis for assessing national joint monitoring frameworks and looking for any gaps and aspects where improvements might be needed. What was stressed was the need to move from framework development to giving more support to countries in reviewing and rationalising their monitoring frameworks, and managing negotiations for change and improvement in the quality, completeness and use of data. Speakers noted that this would need to engage not only those in charge of the national health information system, and funding partners, but also programme managers; policy makers who use the information; civil society and other government ministries. An important distinction was made between the utility of having a limited indicator set for periodic joint monitoring of the overall implementation of the national health strategy, and the continued need for more specific indicators in more specific and detailed sub-sector reviews.

Financing national health strategies

The global economic environment and the work by the Taskforce for Innovative Financing for Health Systems was discussed. There was cautious optimism about continuing global attention to health, and some possibility of fresh sources of external funding - but it was stressed that this would probably not be very large. The need for countries to be able to make strong cases for additional health funding - including demonstrable progress in terms of improved results was stressed. Participants also raised

the importance of looking at securing greater domestic revenues for health. There was an extended discussion about using existing money more efficiently - the earlier discussions on joint assessment and improved joint performance monitoring were brought into this debate.

Holding the IHP+ partnership accountable

The partnership has put great emphasis on finding concrete ways to hold all signatories accountable for the commitments they have made in the global and country compacts. As a complement to existing country processes, it has commissioned an independent consortium called IHP+ Results (consisting of the London School of Hygiene and Tropical Medicine, and the NGOs Responsible Action and Oxfam) to undertake an independent annual monitoring of progress against the global and country compact commitments, which will be discussed at the annual Ministerial Review. There is clear agreement that this exercise will be as light as possible at country level, using existing data and processes supplemented by interviews. The approach, and the partner 'score cards' which will summarize progress, were presented. Multiple country representatives emphasized that they expect IHP+ Results to help get important issues around partner behaviour that are blocking progress on the IHP+ agenda and on achievement of the MDGs in their countries more clearly 'on the table'.

After Bamako - Next Steps

Country priorities in the next year

Participating country teams each agreed two priority areas in which action was needed over the next twelve months in order to move the aid effectiveness agenda forward within their own countries, and two priority actions they would like to see undertaken at global level, to get more effective support from development partners. Priorities varied but recurring themes at country level were moving to a single monitoring framework with agreement on a limited set of indicators, and greater transparency and tracking of financial resources including aid flows. Country teams' views on the most important steps to be taken by global level development partners included more predictable funding, more flexible funding and timely releases of funds. The full set of country team priorities are set out in annex 1.

New membership, greater support to existing signatories

IHP+ is not meant to be an exclusive club, and is growing. Engagement with additional players who are supporters but not yet signatories is being actively encouraged and will continue. More thought is needed on ways to enable IHP+ signatories that do not have country representation to use country processes as much as possible for making their funding decisions.

Improved communication

The partnership is already providing a platform for frank discussion across all partners, which is shaping the future directions of IHP+. There remains a real need to generate greater common understanding of IHP+ principles and practice both in countries and with other partners, and this will be a priority over the next six months.

Joint assessment of national strategies: will move ahead building on existing country processes

It is urgent to move now to country application with a few interested countries, so that the approach can be further developed and securely anchored in existing country processes. The meeting clearly stated that no new architecture needs to be built - existing mechanisms can get the process moving.

The concept of mutual accountability has to be operationalised.

Frustrations are building in some countries that development partners are not changing as fast as was expected. IHP+ Results will play an important role in promoting mutual accountability, as will civil society organisations at country level. The first report from IHP+ Results will be out at the end of 2009. Other means for promoting mutual accountability are through country team meetings, the Ministerial reviews as well as events within countries.

Annex 1 Country commitments for accelerating progress in the next 12 months,

Session 6: Next Steps: Questions posed to country teams

In the view of your country team, based on a quick discussion of existing obstacles to moving the aid effectiveness agenda forward in the next 12 months after Bamako:

What are the 2 most critical changes that you need in your country over the next 12 months (focus on development partners, government, and civil society)?

What are the 2 most important steps that need to be taken by global development partners to support countries in this endeavor?

Country Team - Mali

In your view, over the next 12 months after Bamako...

(A) What are the 2 most critical changes you want in your country?

Government planning at all levels based on priorities, in conformity with MTEF
Timely and reliable monitoring of results
Respect planning timetable

(B) What are the 2 most important steps global development partners agree to?

Make committed resources available on time
Adapt funding procedures to the 3 modalities outlined in the compact
Single framework for monitoring and respect for time tables
Program support in holistic fashion

Country Team – Burkina Faso

In your view, over the next 12 months after Bamako...

(A) What are the 2 most critical changes you want in your country?

Joining and adhering to IHP+ and development of compact
Alignment of health sector planning cycle to the national budget cycle

(B) What are the 2 most important steps global development partners agree to?

Ensure better coordination at country level among partners, using alignment of missions and reviews, esp. division of labor, simplification of fiduciary procedures, integration of M&E system
Partners' support to the development of the compact

Country Team - Rwanda

In your view, over the next 12 months after Bamako...

(A) What are the 2 most critical changes you want in your country?

Mechanism for a common fund for donor financing (pooled fund for general health system strengthening)
Increase domestic resources to fund health sector (identify solidarity action, partly increase state funds, social and private insurance, community health insurance)

(B) What are the 2 most important steps global development partners agree to?

Transform global approach to finance HSS (not disease specific)
Identify other additional resources (contribution of tobacco industry into an MDG fund) and other modalities for funding

Annex 1 - continued

Country Team - Benin

In your view, over the next 12 months after Bamako...

(A) What are the 2 most critical changes you want in your country?

- Redefine and reach consensus on national priorities by all stakeholders
- Focus on human resources, accountability, transparency and expenditure tracking to improve governance

(B) What are the 2 most important steps (*global development partners agree to*)?

- To join IHP+
- Getting support from all technical and financing partners to develop compact

Country Team - Nigeria

In your view, over the next 12 months after Bamako...

(A) What are the 2 most critical changes you want in your country?

- Complete national strategic health development plan process with costed federal and state plans by September 2009, initiate the process of signing the country compact
- Change the platform for aid coordination and track resources at the federal and selected states as pilot
- Develop a robust M&E system

(B) What are the 2 most important steps global development partners agree to?

- Convene an expanded health partners' coordinating committee meeting shared by the Hon Minister to review outcome of the Bamako meeting and deliberate on the above actions (see A.)
- Propose convening of health care financing by the national planning commission with the following stakeholders: FMOF, FMOH, NPC, reps of partners, NASS and CSOs
- Financial and technical support for the process through the HHA and CSOs to promote both technical and advocacy support

Country Team - Burundi

In your view, over the next 12 months after Bamako...

(A) What are the 2 most critical changes you want in your country?

- Establish integration of vertical interventions through a common programme (develop a code of conduct; accelerate development of country compact including a single monitoring framework)
- Strengthen joint programming to improve predictability of aid (pledges of support for 5 years, development of common basket)

(B) What are the 2 most important steps global development partners agree to?

- Establish common basket/fund at the global level, harmonize approaches by donors
- Funding for strengthening health systems (akin to diseases), with focus on sector level

Country Team - Niger

In your view, over the next 12 months after Bamako...

(A) What are the 2 most critical changes you want in your country?

- Better allocation and utilization of resources
- Reinforce leadership
- Reinforce capacity of civil society to play greater role (esp. monitoring and evaluation)
- Partners strengthen alignment and better coordination

(B) What are the 2 most important steps (*global development partners agree to*)?

- Revise national health plan and prepare new MTEF
- Civil society: elaborate a code of conduct
- Review the partnership framework and elaborate code of conduct

Annex 1 - continued

Country Team - Kenya

In your view, over the next 12 months after Bamako...

(A) What are the 2 most critical changes you want in your country?

Bring back dialogue for improved health sector coordination (code of conduct), establish a secretariat

Establish mechanisms to monitor and target financial flows to health sector (beyond government and development partners; incl implementing partners) Health facility mapping

Develop "shadow" budget

MTEF and annual operational plan development

(B) What are the 2 most important steps global development partners agree to?

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Country Team - Ghana

In your view, over the next 12 months after Bamako...

(A) What are the 2 most critical changes you want in your country?

Harmonization of GAVI and GF into country mechanism, aligned to national planning/strategy (proposals)

Strengthen community structures to improve the use of resources (high impact rapid delivery, incl skill development, infrastructure)

(B) What are the 2 most important steps global development partners agree to?

Reduce earmarked funding

Facilitate timely release of funds by partners (focus not just on pledges, but actual disbursements)

Country Team - Uganda

In your view, over the next 12 months after Bamako...

(A) What are the 2 most critical changes you want in your country?

Strengthen procurement and pharmacy units in MoH to effectively coordinate execution of plan for medicines, supplies and monitoring distribution (incl CSO)

Get all stakeholders to finalize and roll out the system to manage development assistance for health (long - term institutional arrangements), promoting harmonization for the health sector

(B) What are the 2 most important steps global development partners agree to?

Provide robust and detailed info on projected funding consistent with planning

Reporting on budget execution, esp. off - budget funding

Country Team - Djibouti

In your view, over the next 12 months after Bamako...

(A) What are the 2 most critical changes you want in your country?

Effective implementation of the medium term expenditure plan supported by operational measures

Put in place a common monitoring and evaluation system with all partners with a view to reduce the frequency of evaluation missions (using framework of M&E presented in Bamako)

(B) What are the 2 most important steps global development partners agree to?

Support to compact development and other support measures

Development partners should announce their pledges to support the MTEF

Annex 1 - continued

Country Team –Zambia

In your view, over the next 12 months after Bamako...

(A) What are the 2 most critical changes you want in your country?

Govt must put in place a mutually agreed results and accountability system, quality finance management systems at all levels and a fiduciary risk management framework

Need to adopt one country strategy, as reflected in costed national health strategic plan and mutually agreed results and accountability framework

(B) What are the 2 most important steps global development partners agree to?

High level commitment by all partners to IHP compact, with clear instructions for local representatives of signatories (to sign country compact)

Enhance predictability of funding through commitment of intents

Country Team - Ethiopia

In your view, over the next 12 months after Bamako...

(A) What are the 2 most critical changes you want in your country?

Better engagement from all stakeholders in IHP process (incl civil society and the private sector)

Making newly established MDG fund a success in operational terms (high performance by government)

(B) What are the 2 most important steps global development partners agree to?

Global partners will keep up their commitments made at different levels (code of conduct and health harmonization manual), measured in visible scaling up of funding (more flexible, unearmarked)

Global IHP partners and core team should use opportunity to participate in the formulation of the 4th health sector development program in Ethiopia

Annex 2



International Health Partnership and Related Initiatives (IHP+)
Harmonization for Health in Africa (HHA)

***Second Annual Inter-Agency Country Health Sector
Teams' Meeting:
Improving Implementation***

Bamako, Mali, June 15-16, 2009

Agenda
Revised June 9, 2009

Monday June 15, 2009	
Time	
8:00	Registration Opens
8:30	<p>Opening</p> <ul style="list-style-type: none"> - Welcome – Salif Samake, Director of Planning, Ministry of Health, Mali - Opening Remarks: <ul style="list-style-type: none"> Namita Pradhan, Assistant Director-General - Partnerships and UN Reform, WHO Yaw Ansu, Director Human Development, Africa Region, World Bank Marcel Rudasingwa, Representative of the Executive Director, UNICEF - Key Note Address – Oumar Ibrahim Toure, Minister of Health, Mali
9:45	<p>Session 1: How Far Have We Come? What Lies Ahead? Chair: Namita Pradhan, Assistant Director-General - Partnerships and UN Reform, WHO</p> <ul style="list-style-type: none"> - Meeting Objectives –Kampeta Sayinzoga, Phil Hay, Salif Samake - How far have we come since Lusaka – perspectives? Chris Mwikisa, WHO/HHA and Representative from Mali Team - What challenges lie ahead? –Julian Schweitzer, HNP Director, World Bank - Discussion - Wrap Up – Kampeta Sayinzoga, Phil Hay, Salif Samake <p>Session Objective: Outline meeting objectives and review progress since Lusaka.</p>
10:45	Coffee/Tea Break

<p>11:15</p>	<p>Session 2: The Country Compact: Enhancing Mutual Accountability for Results? Chair: Namita Pradhan, Assistant Director-General - Partnerships and UN Reform, WHO</p> <ul style="list-style-type: none"> - What is the value-added of a Country Compact – Salif Samake, Director of Planning, Ministry of Health, Mali. - Panel Reflections: Civil Society, GAVI, Germany, Kenya, Niger - Discussion - Wrap-Up – Phil Hay and Kampeta Sayinzoga <p>Session Objective: Reaffirm understanding and potential value-added of the Country Compact; identify critical bottlenecks in developing Country Compacts, and outline ways of removing such bottlenecks.</p>
<p>12:45 – 14:15</p>	<p>Lunch</p> <p>Lunch Presentation on Holding the IHP+ Accountable Presenter: Tim Shorten, North-South Consortium</p>
<p>14:15</p>	<p>Session 3: Jointly Assessing Country Health Strategies Chair: Tshinko Ilunga, Manager, Health Division, African Development Bank</p> <ul style="list-style-type: none"> - How “good” are our current strategies? Perspectives from Ethiopia and Rwanda – Nejmudin Kedir, Head of Planning and Programming, Ministry of Health, Ethiopia; Representative from Rwanda Team - Current thinking on the process of Joint Assessment – Gerard Schmets, Chair of the Inter-Agency Working Group on Joint Assessment - Panel Reflections – Burundi, Civil Society, Ghana, Global Fund, Zambia, United Kingdom. - Discussion - Wrap-Up - Phil Hay and Kampeta Sayinzoga <p>Session Objective: Overview of what constitutes a good country health strategy; review and solicit feedback on proposed process of joint assessment of country health strategies.</p>
<p>17:30 – 18:00</p>	<p>Closing: Day 1</p> <ul style="list-style-type: none"> - Summing Up of Day 1 and Preview of Day 2 – Phil Hay and Kampeta Sayinzoga
<p>19:00</p>	<p>Cocktails and Dinner</p>

Tuesday June 16, 2009	
Time	
8:30	<p>Session 4: Tracking Results: How Can We Reduce the Transaction Costs of Reporting? Chair: Faustin Yao, Head of the Sub-Regional Office for Western and Central Africa, UNFPA</p> <ul style="list-style-type: none"> - Strengths and weaknesses of current monitoring and evaluation processes Representative from Uganda Team - Using the common framework for reducing transaction costs of monitoring and evaluation at the country level – Fern Greenwell, Inter-Agency Working Group on Monitoring and Evaluation - Panel Reflections: Benin, Burkina Faso, Civil Society, France, OECD, UNAIDS, USA. - Discussion - Wrap-Up – Phil Hay and Salif Samake <p>Session Objective: Moving towards implementation of common M&E frameworks at the country-level.</p>
10:00	Coffee/Tea Break
10:30	<p>Session 5: Financing the Strategy Chair: Kampeta Sayinzoga, Director of Macroeconomic Policy Unit, Ministry of Finance and Economic Planning, Rwanda</p> <ul style="list-style-type: none"> - Brief Overview of Options for Mobilizing and Channeling Resources – Julian Schweitzer, HNP Director, World Bank - Panel Reflections: African Development Bank, Civil Society, European Commission, Ethiopia, Mali, Netherlands, Nigeria, United Kingdom. - Discussion - Wrap-Up - Phil Hay and Salif Samake <p>Session Objective: Discuss opportunities for raising more money for health and attaining better health results for the money; provide feedback on different mechanisms for channeling funds to countries.</p>
12:00	Lunch

<p>13:30</p>	<p>Session 6: How to Accelerate Progress in Implementing the Paris Declaration on Aid Effectiveness? Chair: European Commission (TBC)</p> <ul style="list-style-type: none"> - Introduction to Country Teams Discussion – Phil Hay and Salif Samake - Country Teams Discussion on difficulties and next steps in implementing the Paris Declaration on Aid Effectiveness and the Accra Agenda for Action. - Plenary Discussion: What are the major challenges? What changes need to take place? - Wrap-Up - Phil Hay and Salif Samake <p>Session Objective: Outline concrete steps to accelerate progress by governments, development partners, and civil society in implementing the Paris Declaration for Aid Effectiveness and the Accra Agenda for Action.</p>
<p>16:00</p>	<p>Coffee/Tea Break</p>
<p>16:30</p>	<p>Closing: Summing up and Next Steps</p> <ul style="list-style-type: none"> - Summarizing the Way Forward for all partners – IHP+ Core Team - Discussion - Closing Statements – Oumar Ibrahim Toure, Minister of Health, Mali <p>Objectives: Discuss outcome of meeting, including next steps and key messages for political and financial audiences.</p>
<p>17:30</p>	<p>Departure</p>

Annex 3

International Health Partnership (IHP), June 15 – 16, 2009 Harmonization for Health in Africa (HHA), June 17-18, 2009 Bamako, Mali

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