

International Health Partnership (IHP+)
Business Scaling-up Reference Group (SuRG) Meeting
24 March 2009

Participants included representatives of:

Civil Society	UNAIDS
Gates Foundation	UNFPA
GAVI	UNICEF
Global Fund	WHO
HHA	World Bank

Action Points

- Core Team to update and circulate the Phase I Report.
- A special SuRG will be scheduled for discussion of the process of Joint Assessment of national health strategies.
- The next Business SuRG will be on April 20, 2009.

1. IHP+ Phase I Report

Kate Krackenberg (World Bank) introduced the narrative section of the Phase I Report, noting new signatories to the Global Compact, the signing of three Country Compacts, and highlighting work taken forward during Phase I (common results framework, independent review, analysis of country health teams, attributes of national strategies, etc.). IHP+-related achievements were also noted, including the establishment of the High-Level Taskforce on Innovative International Financing for Health Systems. Moving forward, work will continue Core Team finalizes the Workplan for Phase II of the IHP+ process, taking into account comments made by partners.

Bob Fryatt (WHO) followed up with the financial section of the Phase I Report, noting expenses and outputs by action area. The work carried out under Action Area 1 made up the bulk of Phase I expenses. An analysis of the use of these funds was recently contracted and a more thorough report on expenses at the country-level will be ready in April. Activities carried out through Action Area 2 were based on requests for funding from inter-agency working groups. Differences between the level requested and expended show that demand was not as high as expected in Phase I, though funds requested were noted to be well spent. The costs in Action Areas 3 and 4 covered the costs of management of the Core Team, the Lusaka country teams meeting, the Civil Society consultation meeting, the external review, contracting of the North-South Consortium, and the First Ministerial Review meeting of the IHP+.

Comments/Discussion:

- It was noted that this report, when finalized, will be a public document and will serve as a report to donors and other IHP+ partners.
- It was suggested that mention be made in the report of the ongoing analysis of activities financed under Action Area 1. It was further noted that mention should also be made of the proposals submitted by country teams for additional financial support to the IHP+ process at country level (all proposals are public on the IHP+ website).

2. Report on the Second Meeting of the High-Level Taskforce on Innovative International Financing for Health Systems and related Civil Society consultation

Julian Schweitzer (World Bank) gave a brief summary of the second meeting of the Taskforce and suggested all partners read the note for the record on the IHP+ website. He noted the suggestion of Italy to employ a tax linked to VAT (De-Tax). He also noted that the Taskforce had received a letter from the Global Fund and GAVI suggesting the possibility of harmonizing HSS work across the Bank, the Global Fund, and GAVI. WHO offered to facilitate this, and a response from the co-chairs of the Taskforce is forthcoming. The next meeting will be on May 29 in Paris.

Nicole Klingen (World Bank) gave an update on the Taskforce's Civil Society Consultation, noting that CS representatives from a variety of areas (all health MDGs) were present, both from the North and South. She noted that CS worked towards a common statement, which was difficult due to limited time.

Comments/Discussion:

- Civil Society representatives added that CS should have more time to prepare for future consultations and that CS should be better engaged in the planning process. It was also noted that the CS pre-meeting went well, but that CS representatives to the SuRG were unclear regarding their role at the Taskforce consultation and that the meeting could have been better facilitated. Civil Society also requested a response from the TF regarding their submissions to the TF and working groups.
- The World Bank referred to the CS consultation page on the TF website and suggested CS feedback through this mechanism.
 - Civil Society noted that this is not sufficient for members of southern CS and that other mechanisms need to be used.
- The Gates Foundation requested clarification regarding Italy's proposal and how the linking of GAVI, Global Fund, and the Bank would take place under the HSS workplan.
 - It was noted that Italy's proposal was on the TF website and all SuRG members were encouraged to read it there.
 - Discussion of possible mechanisms to link GAVI, Global Fund, and the Bank is ongoing and a response to the GAVI-Global Fund letter will go out shortly.
- Civil Society inquired whether the May consultation was for Civil Society and suggested that, if so, there should be some mechanisms for engaging at the country level.
 - The Bank noted that the consultation will be for Civil Society, and suggested that it is necessary to rely on the TF members to represent the country-level (Sirleaf, Ghebreyesus, Machel, etc.). WHO also noted the opportunity for additional consultations around the World Health Assembly in May.

3. Inter-Agency Working Groups

Ties Boerma (WHO) gave a brief update on the **WG on Monitoring and Evaluation**, noting the development of the common evaluation framework during Phase I, which has been used as general guidance at the country level and which has also been operationalized in the results framework of the Catalytic Initiative. He noted, however, that this needs to build on country situations. This has been examined in Zambia and Ethiopia, and a few issues have been raised:

1. A number of demand-side issues have been raised, namely the need to reduce indicators and refrain from introducing new ones, and the question of how to strengthen data quality and use.
2. Supply-side issues were also raised, including: analysis of data sources to strengthen monitoring; addressing gaps in information.
3. Issues around capacity building also emerged, including chronic underinvestment by partners in central statistics organizations (not necessarily government). It was suggested that the private sector could potentially play a role in this area.

Ties also highlighted the need for country guidance regarding how to strengthen monitoring – a dashboard may be useful in assisting countries to synthesize information. It was also noted that (Country Health Systems Survey (CHeSS) may prove to be a practical way forward.

Ed Bos (World Bank) added the need for work to be more targeted, with clearer indications of needs and opportunities. While the consortium meeting in London focused on processes, it was suggested that the M&E WG be re-enlisted to take this work to the country level and support implementation of country compacts.

Comments/Discussion:

- Civil Society raised the issue of the relationship between the M&E framework and overall accountability within the IHP+. Civil Society also requested that CS be engaged in the M&E process, particularly at the country level.
- UNFPA noted that linkages should be strengthened between the various IHP+ working groups, suggesting meetings of the working group chairs and joint missions.

Daniel Davies (Global Fund) gave a brief update on the **WG on Joint Assessment of National Strategies**. To date, the working group has developed a document outlining the key attributes of national strategies. Country consultations have been taken forward in Ethiopia, Ghana, and Mali (see website). The next phase of this work will examine applicability at the country level, looking at Burundi, Cambodia, Tajikistan, Vietnam and Zambia. Sue Perez (Civil Society) noted that the WG name is now Joint Assessment, in light of strong reactions against the term 'validation' during the Ministerial Review.

Jacqueline Mahon (UNFPA) noted that the third phase of this work will involve piloting of the joint assessment tool in countries to determine next steps. This will take place throughout CY2009.

Comments/Discussion:

- A separate SuRG was proposed to address the workplan and progress of this WG.
- UNICEF noted the seemingly growing number of working groups and lack of coherence. It was suggested that the parameters of working groups be put forth, particularly their relationships to work being carried out at the country level.
- The World Bank noted that some results from the WG on National Strategies should factor into the upcoming third meeting of the Taskforce. It was further noted that partners should not use footnote 5 of the "Joint Assessment of National Strategies" document ¹ as a loophole, but should
 - Daniel will bring this back to the working group for consideration.
 - UNAIDS suggested that partners be prepared to address footnote 5 explicitly. GAVI agreed, suggesting that the next SuRG discussion on joint assessment should involved high-level representatives from IHP+ partners in order to make decisions regarding these issues.
- GAVI noted the need to better engage all members of the working group.
- UNAIDS stated that the technique for joint assessment needs to be strengthened, with a particular emphasis on linking the process to the national joint review process and the long-term vision of health results at the country level.
 - Daniel noted the importance of the link to national strategies, particularly regarding the timing of joint assessment, and will also bring this back to the working group.

4. *Harmonization for Health in Africa*

Due to limited time, Chris Mwikisa (WHO) gave a brief update on the work of the HHA. As the first step towards a comprehensive website for communities of practice in Africa, a web database has been created and will be finalized in the next month. Additionally, the next meeting on performance-based financing will take place in Kigali this coming April. Previous meetings were geared towards implementers, but this meeting will be a consultation for partners and will focus on topics such as fiscal space and health financing. The HHA will join the next Business SuRG meeting to give a more detailed update of progress and events of the HHA.

¹ External funders may have to take additional steps before a funding decision is made, depending on their own internal decision processes. However, it is expected that these steps would be considerably lightened for those countries with jointly assessed strategies.