BURKINA FASO





2016 IHP+ MONITORING ROUND National performance review

HOW TO READ THE COUNTRY PROFILE

All data presented on this visual aid are self-reported by the Ministry of Health (MoH), development partners (6 DPs out of 19 participated), civil society organisations (21 CSOs participated) and private sector representatives (5 PS participated) supporting the health sector. All data provided by DPs, CSOs and PS have in principle been validated by MoH.

The 8 Effective Development Cooperation (EDC) practices in health are captured in 4 commitments. The first three commitments present the performance of the government and DPs against 6 EDC practices. The last commitment also includes the opinion of the CSOs and PS on the EDC practices relevant to their engagement.

Where possible, trends in performance are documented over 4 monitoring rounds (2007, 2011, 2013 and 2015). When relevant, a comment relative to the EDC practice is provided in a text box.

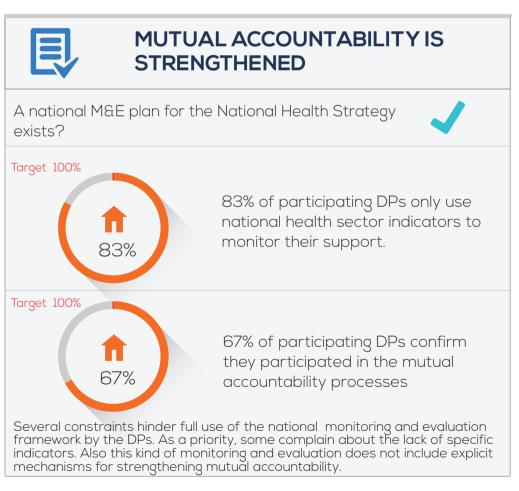
For more detailed and disaggregated information on the data presented please visit www.internationalhealthpartnership.net/burkinafaso.



COMMITMENT

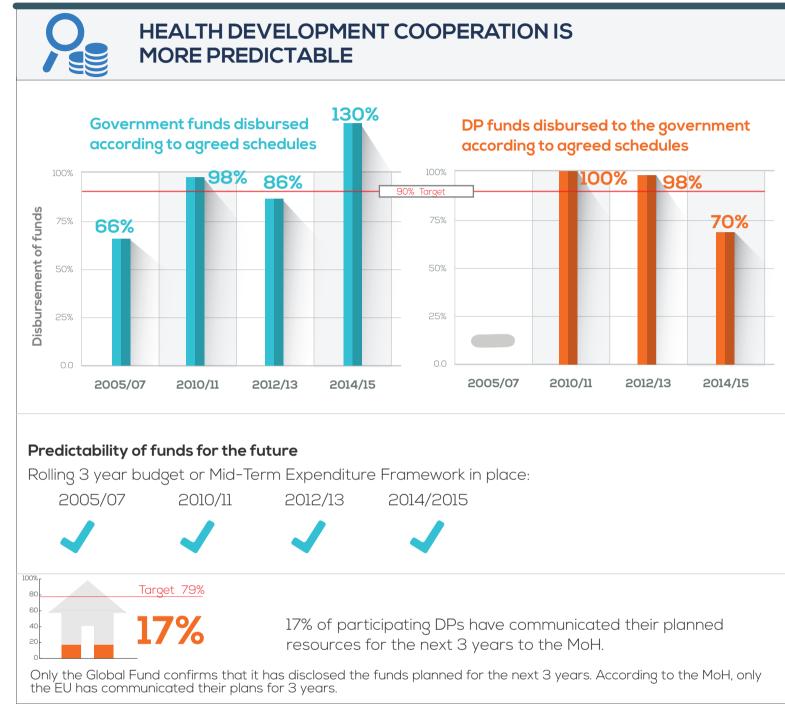
TO ESTABLISH STRONG HEALTH SECTOR STRATEGIES WHICH ARE JOINTLY ASSESSED, AND STRENGTHEN ACCOUNTABILITY

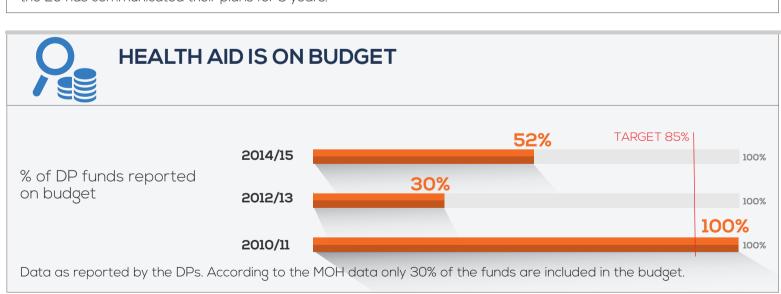




COMMITMENT

TO IMPROVE THE FINANCING, PREDICTABILITY AND FINANCIAL MANAGEMENT OF THE HEALTH SECTOR

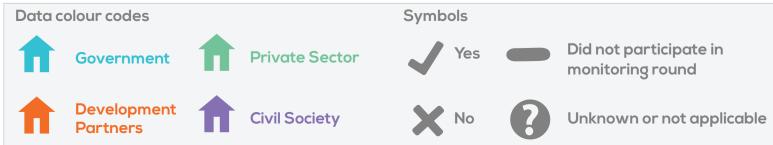




2016 IHP+ MONITORING ROUND

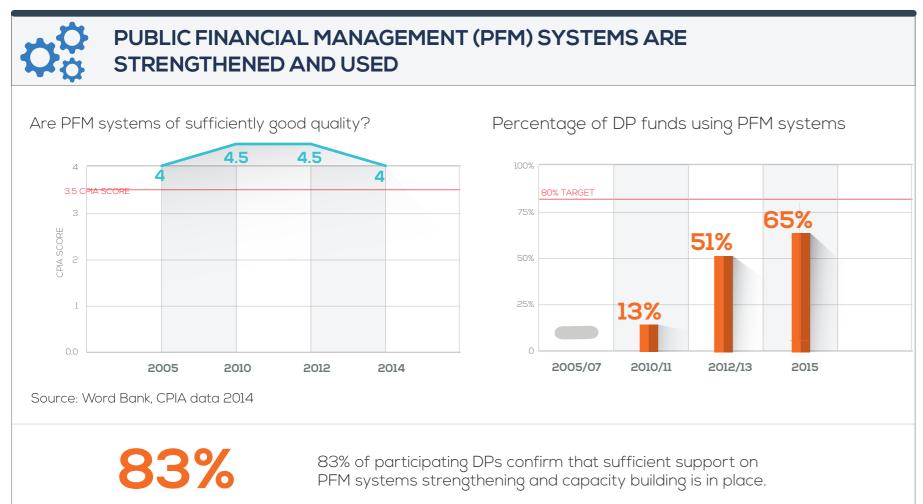






COMMITMENT

TO ESTABLISH, STRENGTHEN AND USE COUNTRY SYSTEMS



Important reforms guaranteeing the reliability of the PFM system are necessary in order to improve the use of this system by DPs.



PROCUREMENT AND SUPPLY SYSTEMS ARE STRENGTHENED AND USED

A government plan for national procurement and supply exist?





33% of participating DPs use the national procurement and supply systems.

50%

50% of participating DPs confirm that sufficient support on procurement or supply systems strengthening and capacity building is in place.

Administrative burden and lack of confidence by DPs in national procurement procedures would explain their low use by DPs.



TECHNICAL SUPPORT IS COORDINATED AND SOUTH-SOUTH COOPERATION SUPPORTS LEARNING

An agreed national TA plan exists?





N/A of participating DPs provide TA in line with the national plan.

Does the Ministry of Health benefit from south-south cooperation?

ALWAYS



100% of participating DPs support South-South cooperation.

Existence of South-South Partnership Agreements in the field of health with some countries. Examples: Co-operation Agreement with Cuba, technical assistance project proposals with South Africa, Algeria and Egypt, but still being at the project stage (ECD 6-1).

COMMITMENT

TO CREATE AN ENABLING ENVIRONMENT FOR CIVIL SOCIETY ORGANISATIONS AND PRIVATE SECTOR PARTICIPATION IN THE HEALTH SECTOR



CIVIL SOCIETY ORGANISATIONS ENGAGEMENT

What space does the **government** provide for CSOs to effectively participate in health sector policy, planning and monitoring? (Sources: Government qualitative survey and CSO online survey)



Government consults CSOs in the design, implementation or monitoring of national health policies



Government provides financial resources



Government provides training support



61% of CSOs confirm they are consulted



52% of CSOs receive financial resources



30% of CSOs receive training

How effectively is the participation of CSOs in national health policy processes supported by **development partners**? (Sources: DP qualitative surveys and CSO online survey)



100% of DPs consult CSOs when developing their cooperation programme



83% of DPs provide financial resources



50% of DPs provide technical assistance



58% of CSO's confirm they are consulted



41% of CSO's receive financial resources



31% of CSO's receive technical assistance



PRIVATE SECTOR ENGAGEMENT



Poor perception by private sector participants of government involvement in private sector health policy processes.



Insufficient inspection of private health organisations by the Ministry of Health.



Inadequate government and DP support for increased private sector contribution to health policy processes.



The regulatory and legislative framework favours the creation and engagement of private health structures, but administrative procedures for establishment are rather lengthy.



Lack of communication and fairly conflicting relations between private sector and government actors.



http://www.ihpplusresults.net/burkinafaso