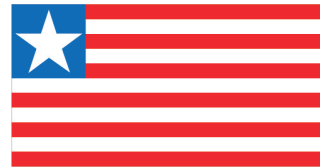


LIBERIA



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 (9 DPs out of 15 participated), civil society organisations (14 CSOs participated) and private sector representatives (6 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/liberia.



NATIONAL HEALTH EXPENDITURE

Total health expenditure per capita

\$46.27

Sources of national health expenditure

DOMESTIC
50.9%



49.1%
EXTERNAL

PUBLIC
31.5%



68.5%
PRIVATE

Source: WHO, National Health Accounts 2014

COMMITMENT

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



PARTNERS SUPPORT A SINGLE NATIONAL HEALTH STRATEGY

Alignment of support against the Health Sector Strategy



100% of participating DPs confirm they align their support with the national (or sub-national /sector) Health Sector Strategy.

Was the national health sector plan jointly assessed?

DPs **57%**

CSOs

PS

Stakeholders that supported the joint assessment

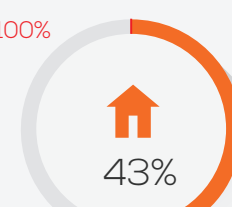
Around half of DPs consider that subsector assessments are necessary to ensure accountability and transparency.



MUTUAL ACCOUNTABILITY IS STRENGTHENED

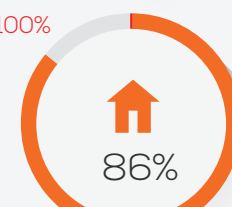
A national M&E plan for the National Health Strategy exists?

Target 100%



43% of participating DPs only use national health sector indicators to monitor their support.

Target 100%



86% of participating DPs confirm they participated in the mutual accountability processes

There are some constraints to use the national M&E system such as the lack of updated information, unavailability of required indicators and the quality of data.

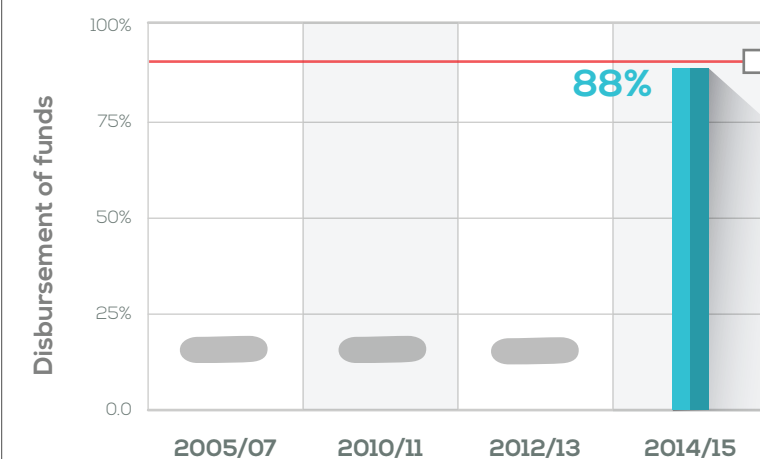
COMMITMENT

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

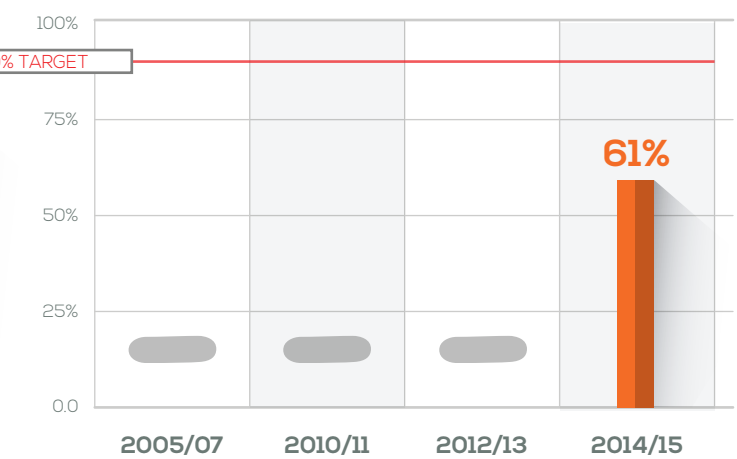


HEALTH DEVELOPMENT COOPERATION IS MORE PREDICTABLE

Government funds disbursed according to agreed schedules



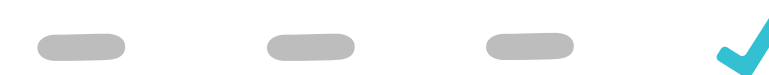
DP funds disbursed to the government according to agreed schedules



Predictability of funds for the future

Rolling 3 year budget or Mid-Term Expenditure Framework in place:

2005/07 2010/11 2012/13 2014/2015



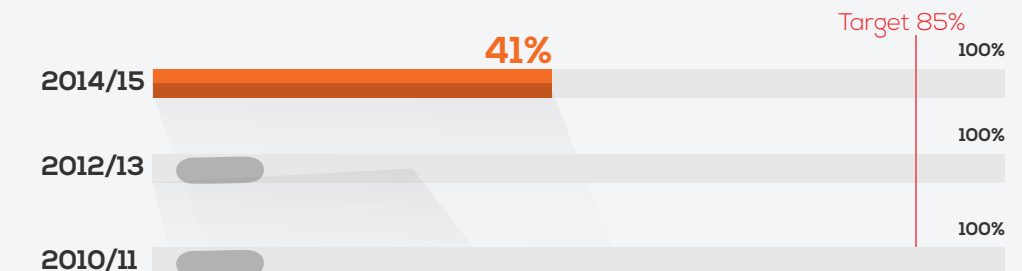
71% of participating DPs have communicated their planned resources for the next 3 years to the MoH.

Over disbursement by some DPs through supplementary budget or special funds for emergencies due to the Ebola crisis.



HEALTH AID IS ON BUDGET

% of DP funds reported on budget



There are discrepancies between the data provided by the Government and the 8 DP's (28%) regarding DP funds recorded on budget.

LEGEND

Data colour codes



Government



Private Sector



Development Partners

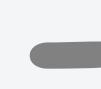


Civil Society

Symbols



Yes



No



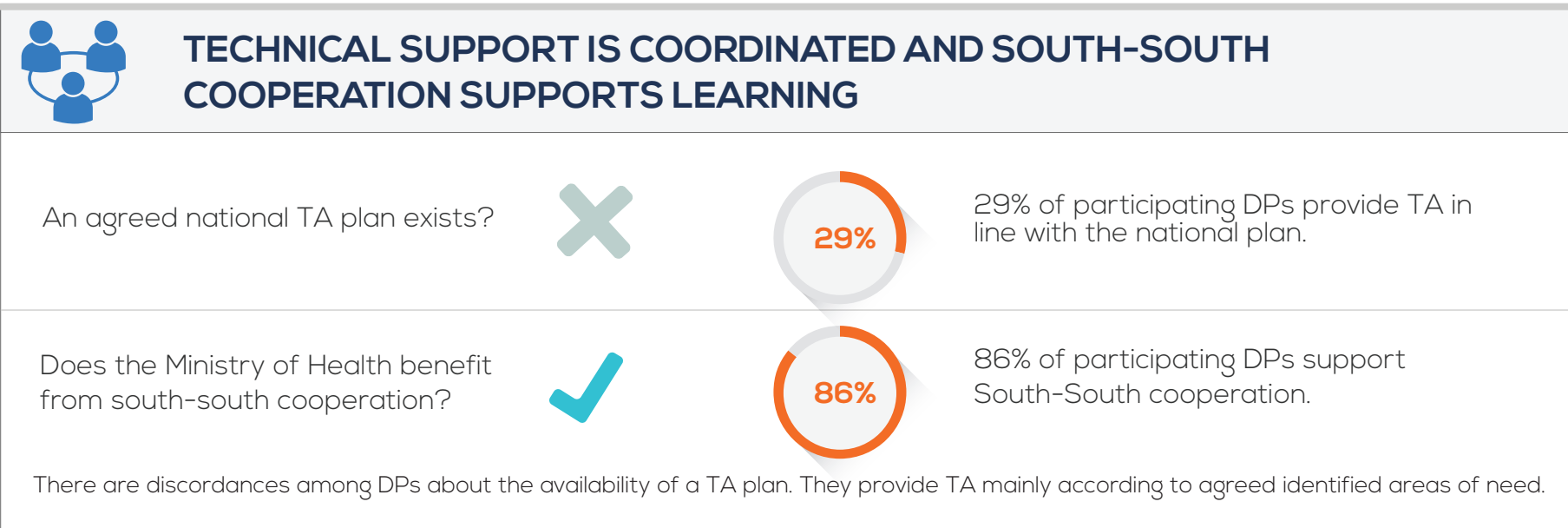
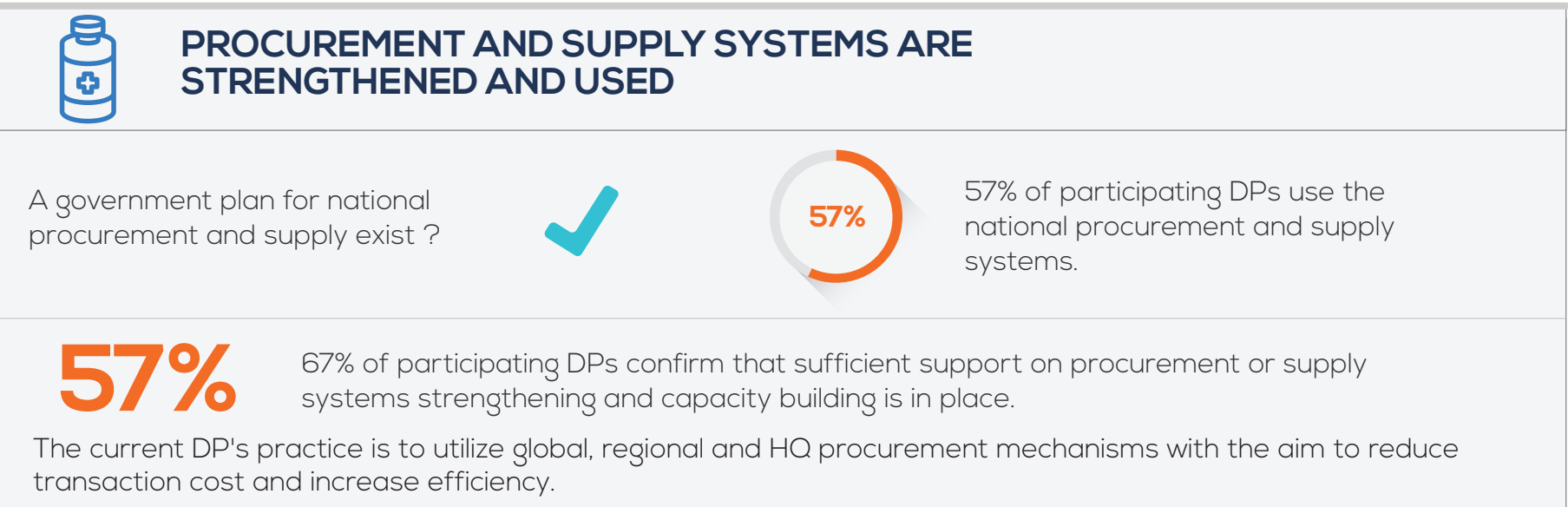
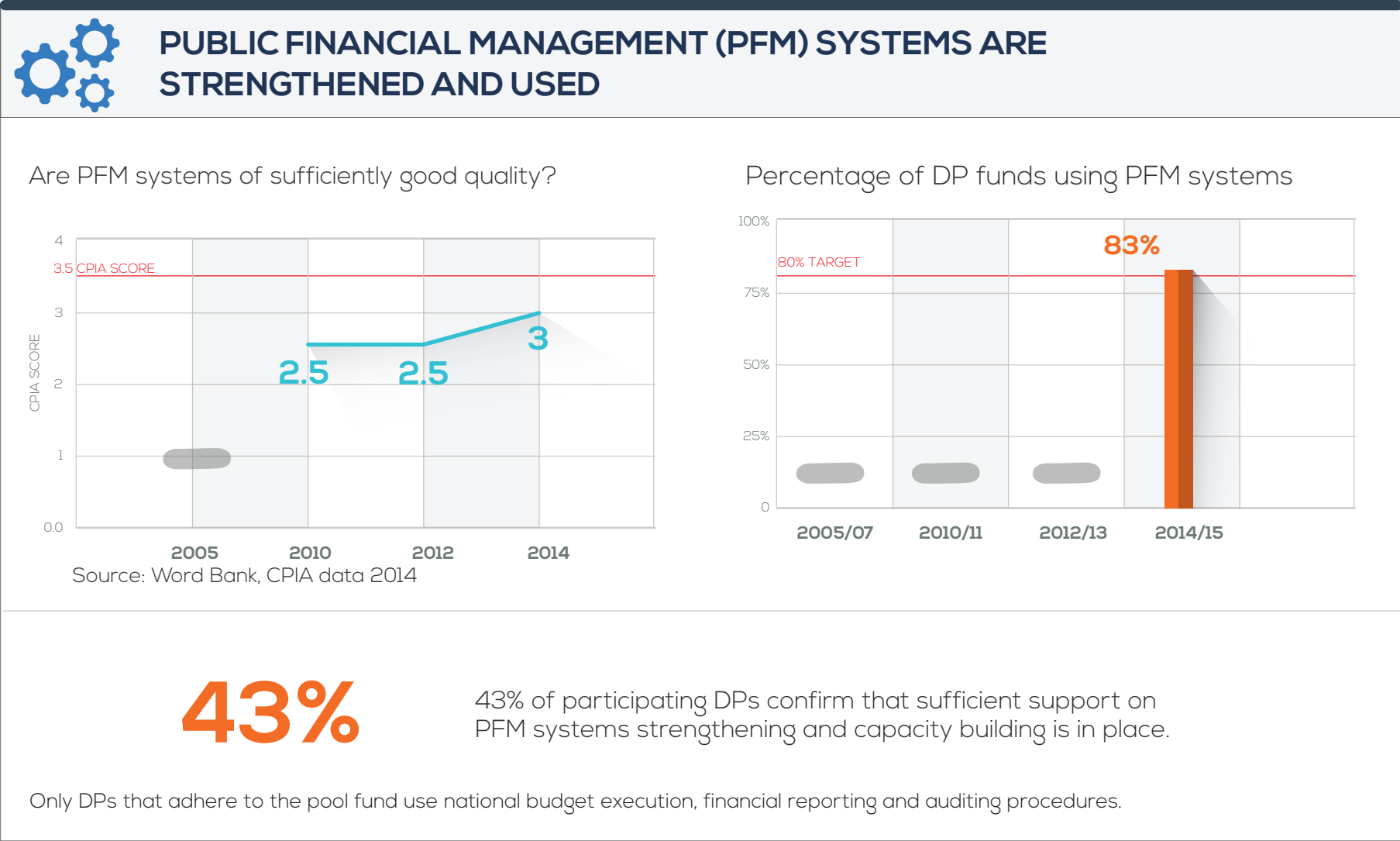
Unknown or not applicable

2016 IHP+ MONITORING ROUND

ihp results

COMMITMENT

TO ESTABLISH, STRENGTHEN AND USE COUNTRY SYSTEMS



COMMITMENT

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

