

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 (13 DPs out of 24 participated), civil society organisations (18 CSOs participated) and private sector representatives (8 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/nigeria



2016 IHP+ MONITORING ROUND

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



CSOs

PS

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?



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Target 100%

Target 100%

Π

38%

П

77%

MUTUAL ACCOUNTABILITY IS STRENGTHENED

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

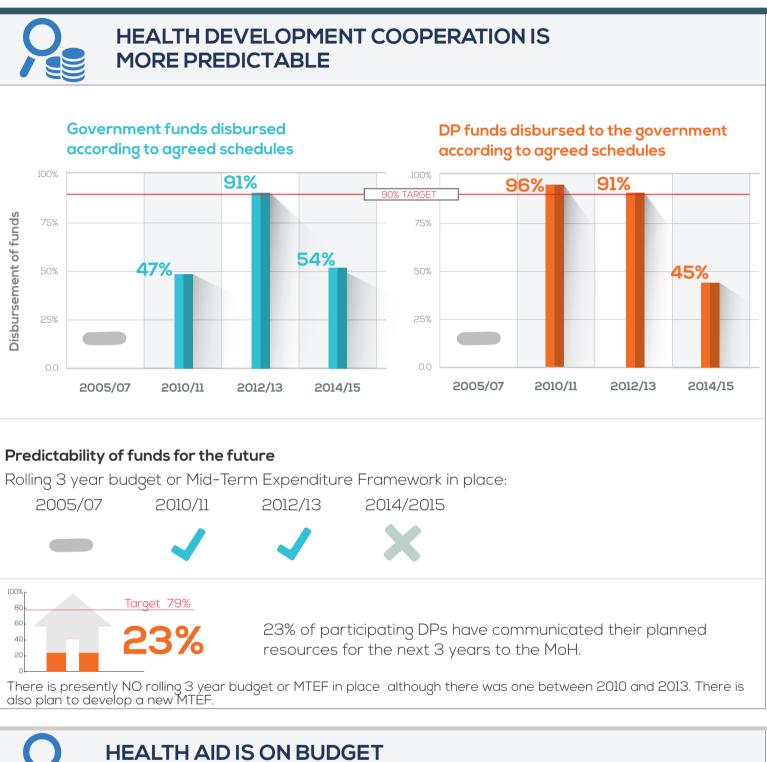
> 38% of participating DPs only use national health sector indicators to monitor their support.

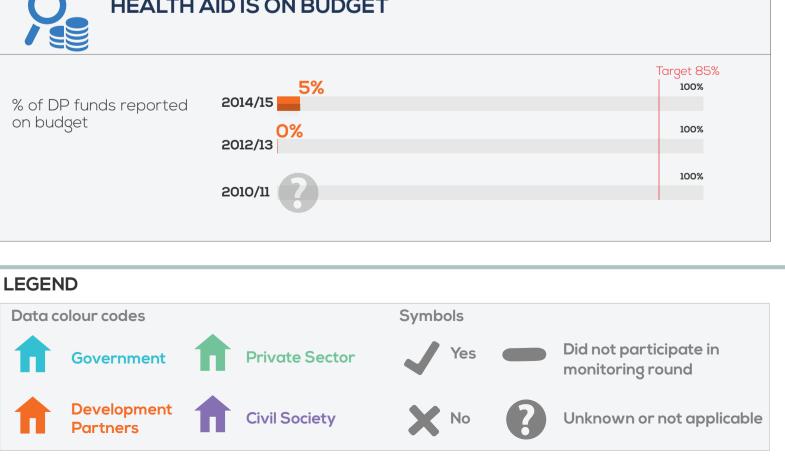
77% of participating DPs confirm they participated in the mutual accountability processes

Only the UN agencies and CDC reportedly use national health sector indicators. MA processes include Joint Annual Reviews, Accountability Framework, Health Partners Coordinating Committee, etc.

COMMITMENT

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

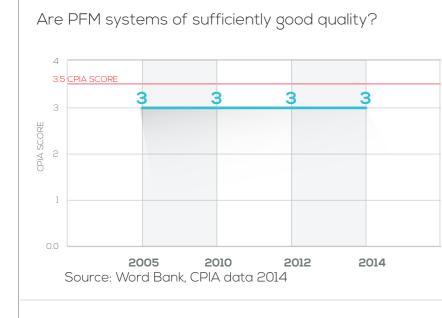




COMMITMENT

TO ESTABLISH, STRENGTHEN AND USE COUNTRY SYSTEMS

PUBLIC FINANCIAL MANAGEMENT (PFM) SYSTEMS ARE STRENGTHENED AND USED

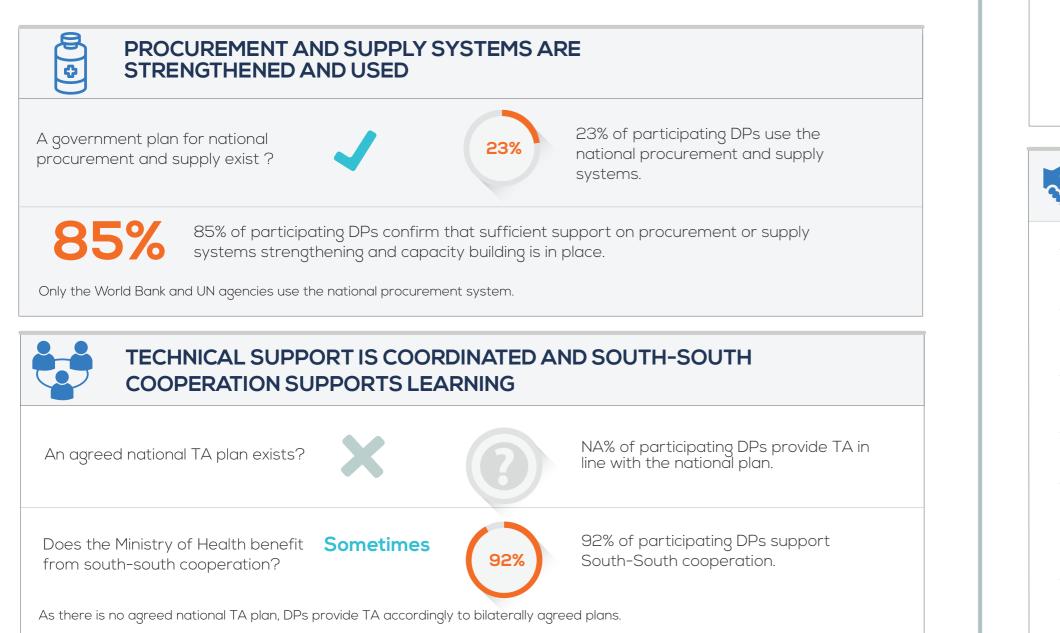


80% TARGET 17% 0% 2014/15 2005/07 2010/11 2012/13

Percentage of DP funds using PFM systems

85% of participating DPs confirm that sufficient support on PFM systems strengthening and capacity building is in place.

5 DPs reported on the use of PFM systems (WB, UNICEF, UNFPA, WHO and CDC) and only UNFPA, WHO and CDC actually use the PFM system. PFM systems are less used when the CPIA score is under 3.5, unless to strengthen the system.



COMMITMENT



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The national legal and regulatory environment is highly conducive to maximising private sector contributions to national health policy. Private sector organisations have the freedom to organise themselves, and individuals who want to establish new groups are free to do so.

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

profession, specialty, and special interest: Most organisations have subgroups/affiliates focusing on private sector members exclusively.

Separate regulatory bodies, backed up by national laws, exist for each health professional group; the private sector is represented in most regulatory bodies.

The private sector rarely shares information with the MoH, except service data.

Greater openness and more consistent interaction between the government and private sector can improve private sector engagement with policy.



www.internationalhealthpartnership.net/nigeria