Multi-Disciplinary Evidence on Coordination and Health Systems Strengthening (HSS) in Countries under Stress

A LITERATURE REVIEW AND SOME REFLECTIONS ON THE FINDINGS

First Face-to-Face Meeting of the UHC2030 Working Group on Support to Countries with Fragile or Challenging Operating Environments
8-9 November 2017 | Geneva, Switzerland









"Development of guidance for improved coordination of development and humanitarian partners around resilient health systems strengthening in fragile countries"

Literature Review

Coordination & Health Systems Strengthening in Countries under Stress

"What does the literature evidence tell us about what works in health systems strengthening and actor coordination in countries with fragile environments? How? Why?"

Objectives of the Report

Multi-Disciplinary Evidence on Coordination and Health Systems Strengthening (HSS) in Countries under Stress: A literature review and some reflections on the findings

UNDERSTAND

- Drivers of health systems strengthening interventions in fragile or challenging operational environments
- Mechanisms driving government stewardship, engagement with nonstate-actors and accountability

EXPLORE

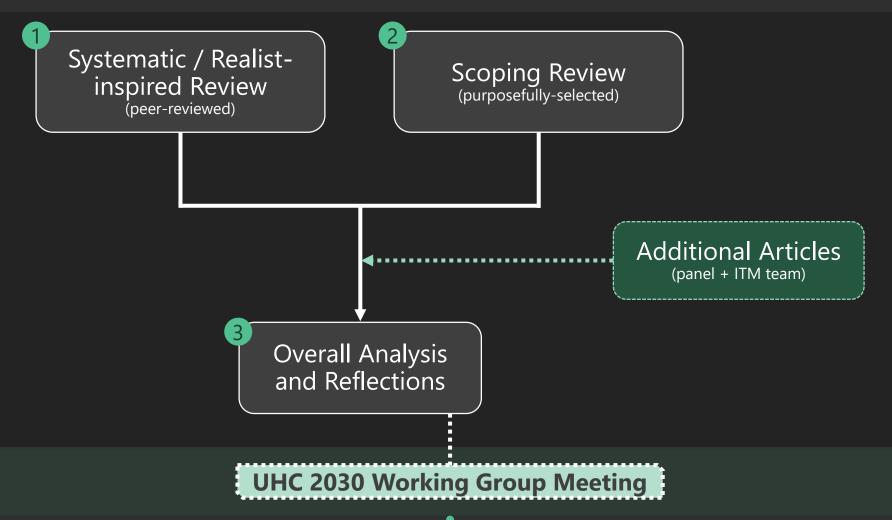
- Humanitarian actor coordination and modes of operation
- Configuration and coordination between actors
- Modes of operation in the transition phase from relief to development





Methodology

3 PHASES



Types of Interventions

FINDINGS OF THE STUDY



Rapid Health Service Delivery



Health Systems
Strengthening



Actor Coordination

Types of Interventions

FINDINGS OF THE STUDY

■ Health Systems
Strengthening

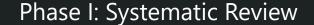
■ Rapid Health

Actor

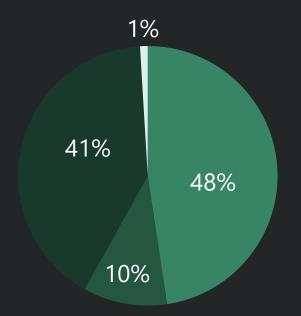
■ Others

Service Delivery

Coordination

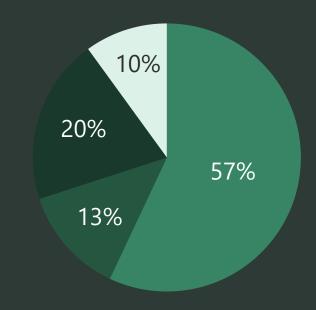


n = 105 studies



Phase II: Scoping Review

n = 99 studies





Rapid Health Service Delivery

FINDINGS OF THE STUDY: TYPES OF INTERVENTIONS

Some recurring interventions:

- Basic Package of Essential Health Services
- Contracting out to NGOs
- Strengthening community-based health workers





Health Systems Strengthening

FINDINGS OF THE STUDY: TYPES OF INTERVENTIONS

VARIOUS HSS INTERVENTIONS

Governance

Financing

Human Resources

Health Service Delivery

Information Systems Medical Products & Technologies "These different health systems elements complement each other and needs are highly context dependent"



Health Systems Strengthening

EXAMPLES OF HSS INTERVENTIONS

International Actors, GHIs, Vertical Programs

Financing

Human Resources

Governance

Health Service Delivery

- Cash-based support
- Emergency funds
- Vertical programs
- Fee-exemption policies
- Performancebased financing
- Multi-donor trust funds
- Strengthening workforce performance
- Equitable HRH distribution
- Training of CHWs

- Community scorecards
- District-level management & planning
- Basic package of health services
- Operational tools
- Health facility assessment

"Government leadership is crucial"

"Be mindful of system-wide effects and health system preparation"

"Capacity building at mid-level"

"Issues of legitimacy of actors and interventions"

"Gaps in monitoring and evaluation (ie HMIS)"



Actor Coordination

FINDINGS OF THE STUDY: TYPES OF INTERVENTIONS

EXAMPLES OF ACTOR COORDINATION INTERVENTIONS

- Sector Wide Approach (SWAP)
- Sector Wide Management (SWIM)
- Inter-Sectoral Partnerships
- Pooled Funds
- Poverty Reduction Strategy Papers (PRSPs)
- Global Health Partnerships
- Advocacy Coalitions
- Transitional Programming

- Health Clusters
- Financing Mechanisms (e.g. contracting)
- Programme Grant Agreements
- UN Development Assistance Frameworks
- Country Programs/Instruments
- Inter-Agency Consultations and Coordination Committee, Bilateral Meetings



Actor Coordination

FINDINGS OF THE STUDY: TYPES OF INTERVENTIONS

Variety of service delivery models, decisionmaking and funding dispersion

"One sees a lack of alignment and coordination between government, donors, and humanitarian and development actors."

Informal power structures Diversified Lack of supporting bodies informationsharing between actors Inadequate linkage humanitarian and development aid streams



Contextual Factors



Type of Fragility

Level of Government Engagement





Sociocultural and Political Factors

Geography





Gender Issues

Regional Dynamics



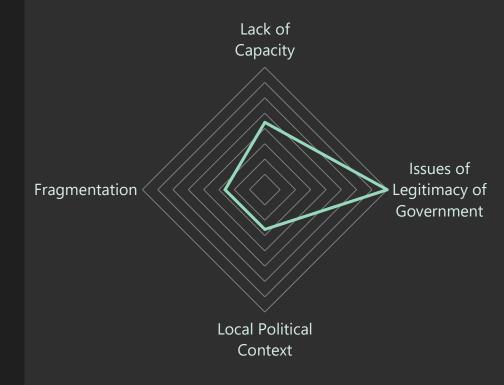


Spontaneous Developments

Level of Government Engagement



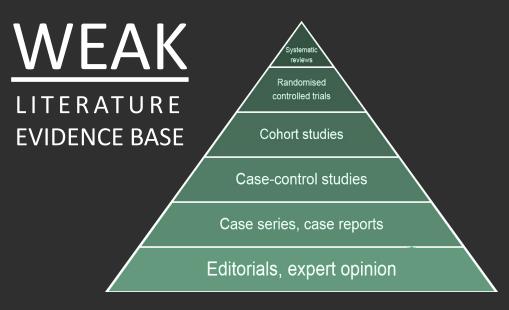
Governance Issues by Theme (Phase II)







Discussion



Weak evidence in published public health literature due to:

- 1) limited research capacity
- challenges relating to insecurity
- B) low prioritisation of research

Understandable lack of **solid e**vidence, given subject and context

"Unfortunately, the circumstances that make information collection so important are precisely those that make it extremely difficult to do."

Clarke, Paul Knox, and James Darcy. "INSUFFICIENT EVIDENCE? The Quality and Use of Evidence in Humanitarian Action: ALNAP Study." London, 2014.





[Humanitarian] Health System Challenges



Local Perspective



Local Perspective

"Local partners treated not as true partners but as sub-contractors"

"Illiteracy" on demand side: Lack of capacity to grasp local ideas? Fear of participation: Why would opinions be volunteered?

Opportunistic reasons:
Publication bias?

Issue of growing importance:

- Upward & downward accountability
- Input & output Legitimacy
- Expulsion, sustainability and equity are global issues
- In a multipolar world, values are contested

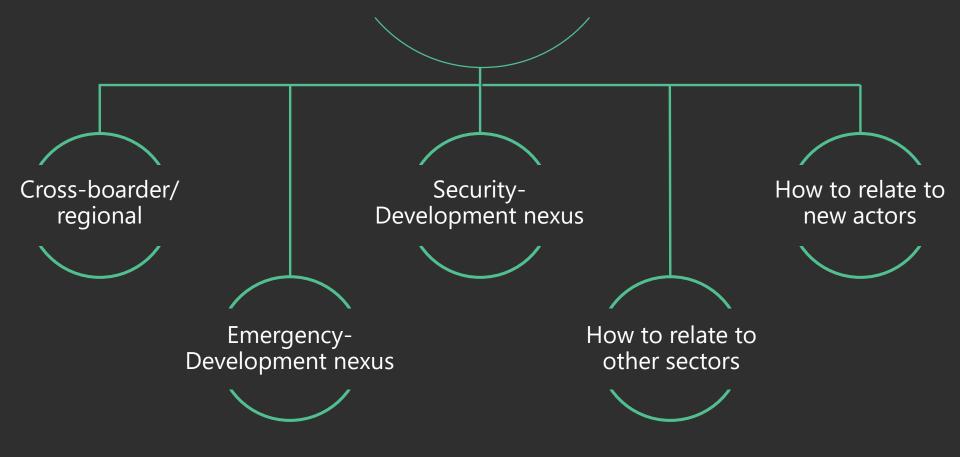


"Accountability is not going to be improved through more 'tweaking' with technical or procedural fixes. It requires a change in mind-set to acknowledge that each and every person affected by and engaged in humanitarian crises has different roles and responsibilities to play, and that they need to be accountable to one another as well as to the collective goals"

CHS Alliance, "On the Road to Istanbul: How Can the World Humanitarian Summit Make Humanitarian Response More Effective?

- 1) of all actors and their intentions?
- 2) of New Actors?
- 3) of Coordination Mechanisms?
- 4) of Global Politics?
- 5) of Conflicting Values?

Some of the challenges in the [Humanitarian] Health System



Security-Development



The nexus between counter terrorism, development and Agenda 2030 brings together CdM Members and decision makers from the EU and the UN

September 14, 2017

Former Presidents and Prime Ministers Joyce Banda (Malawi), Hamadi Jebali (Tunisia), Olusegun Obasanjo (Nigeria) Mary Robinson (Ireland) and Danilo Turk (Slovenia) will engage next Tuesday 19th of September in New York in a debate about the critical nexus between security and development, with high level intergovernmental policy makers from both the European Union and United Nations

- After 9/11, security became priority (funds follow)
- The military is part of humanitarian agenda
- Aid = politics
- Motives are seen as suspicious
- Governmental inclusion more problematic

Emergency-Development



There are lots of recommendations to improve LRRD



How to move forward?



Tailored Knowledge Response Management

High-intensity Conflict Settings

Lack of basic infrastructure

Logistics

Lack of access

Too few aid organisations in area – those which are there feel overburdened

High population movements

Low Intensity Conflict Settings

Funding scarcity

Differing priorities state vs INGOs

Unsustainability of programs
Overstretching of INGO
portfolios to get funding

Low capacity local actors and high rotation of international staff

Post Conflict Settings

INGOs and competition are overwhelmed

Culturally inappropriate programs

No exit program

Lack of basic infrastructure

Political sensitivities below surface that cannot be openly considered 'conflict' or reported about

CONFIRMED IN ALL MODELLING: DIFFERENT SETTINGS, DIFFERENT RESPONSES

HIC

High-intensity Conflict

Mobility

Adaptive management

Lowering expectations

Strictly defining projects

LIC

Low-intensity Conflict

Groundedness

Cultural understanding

Local networks

Working with local NGOs on sensitive issues

PC

Post Conflict

Long-term development

Prevention

Working with civil society groups

Exit programs

WORLD HUMANITARIAN SUMMIT

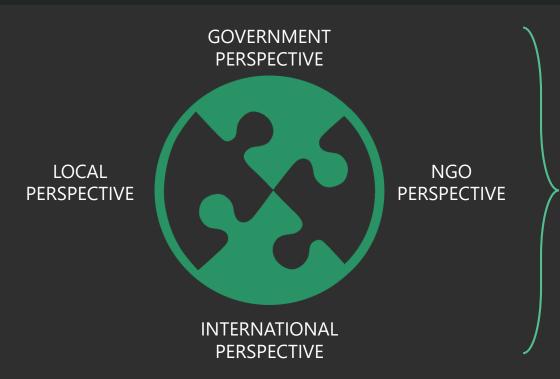
"The notion of **collective outcomes** has been placed at the centre of the **commitment** to implement the New Way of Working." (WHS, 2016)



Guidance for practitioners?

"joint sense-making"

COLLECTIVE THINKING



New approaches / practices:

- Problem-driven iterative adaptation
- Capability traps
- Applying complexity thinking
- Collaborative intelligence



How to move forward?

The Nature of Evidence, Data & Research

EVIDENCE

DATA

RESEARCH



BIG DATA



- Strengthen the quality of evidence
- Not always 'scientific evidence'
- Building data commons
- Data Mining & Analytics
- Utilizing social media

- Apply apt research designs and evaluation methods
- Utilize action research

Conclusions

WHAT TO ADDRESS

Legitimacy and Accountability

Local Perspective

[Humanitarian] Health System Challenges HOW TO DO IT

New methods of evaluation

Data revolution in the aid industry





Food for Thought

- 1. What is our common ground?
- 2. What are the innovative or promising ways of working according to you?
- 3. How to engage with new actors?
- 4. How to collaborate on producing knowledge?
- 5. How do we align our agenda to the UHC 2030 Forum in Tokyo?





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