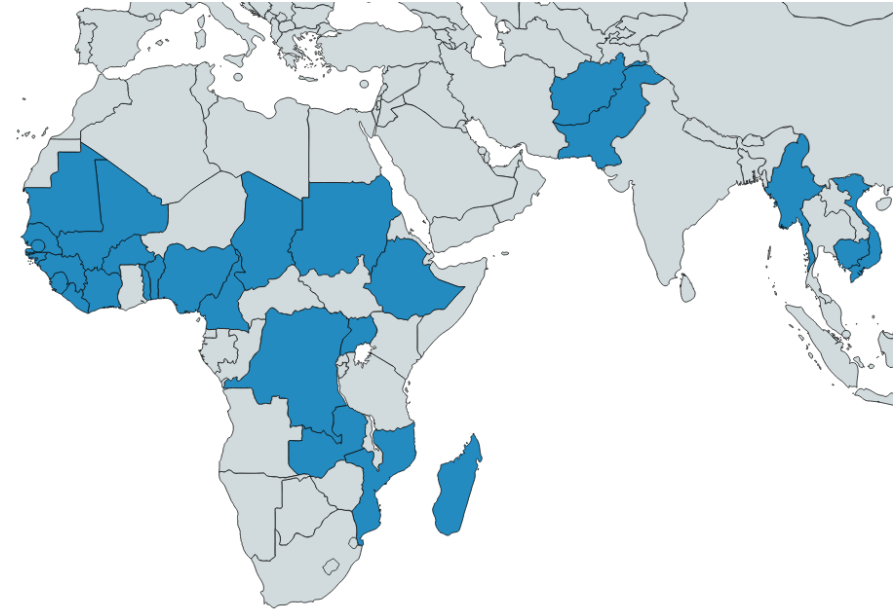


IHP+ Monitoring

Monitoring of Commitments
on Effective Development
Cooperation in Health

**Process and
anticipated outcomes**

Vancouver, November 2016





Five monitoring rounds

- Approach and methodology evolved since Round 1 (2008) which was designed as an external performance evaluation
- Since then, national ownership of the monitoring process became increasingly important
- Participation increased: 9 countries in 2008 → 30 in 2016
- Round 5 (2016) focuses on stimulating and informing a national dialogue on development cooperation in health
- Progressively more inclusion of civil society organisations and of the private sector in the monitoring process

Recall: 6 messages from the the
4th Round of monitoring in 2014

24 countries and 37 development partners participated in 2014

1. IHP+ membership was associated with better country performance in relation to development cooperation effectiveness
2. Performance by governments and development partners were correlated



3. Countries generally made progress in meeting commitments, particularly in the area of developing tools for accountability and engaging civil society. BUT: wide variation, and CSOs often did not agree
4. Many countries increased their domestic funding for health and developed medium term budget forecasts, BUT: limited progress on improving financial management systems
5. Compared to 2012, some development partners scored worse particularly on the financing indicators; again there was variation in performance
6. **Need to use the findings from this monitoring as a tool for strengthening accountability, especially at country level,**

What are we monitoring in the 5th Round?

Eight EDC practices	Four commitments
1. Partners support a single national health strategy	1. Establish strong health sector strategies which are jointly assessed, and strengthen accountability
2. Mutual accountability is strengthened	
3. Health development cooperation is more predictable and health aid is on budget	2. Improve the financing, predictability and financial management of the health sector
4. Public financial management (PFM) systems are strengthened and used	3. Establish, strengthen and use country systems
5. Procurement and supply systems are strengthened and used	
6. Technical support is coordinated and south-south cooperation supports learning	
7. Civil society organisations are engaged	4. Create an enabling environment for CSO and PS participation
8. The private sector is engaged	

How are we monitoring
the commitments?



Ministry of Health in charge of data collection

- IHP+R recruited a consultant in each country to support the Ministry of Health
- Consultants supported by a team of international experts
- Government and development partners completed detailed questionnaires on EDC practices with consultant support
- Data validated by Ministry of Health
- CSO on-line survey in each country in national languages
- Focus group discussions with CSOs and private sector representatives

What are the monitoring outputs?



Plasmodia



2016 IHP+ MONITORING ROUND National performance review

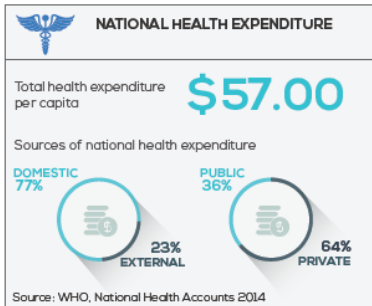
HOW TO READ THE COUNTRY PROFILE

All data presented on this visual aid are self-reported by the Ministry of Health (MoH), development partners (7 DPs out of 13 participated), civil society organisations (9 CSOs participated) and private sector representatives (2 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/afghanistan.



COMMITMENT

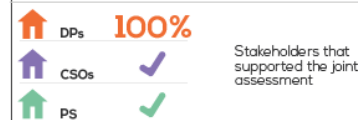
TO ESTABLISH STRONG HEALTH SECTOR STRATEGIES WHICH ARE JOINTLY ASSESSED, AND STRENGTHEN ACCOUNTABILITY

PARTNERS SUPPORT A SINGLE NATIONAL HEALTH STRATEGY

Alignment of support against the Health Sector Strategy



Was the national health sector plan jointly assessed?



Participating CSOs stated that they participate in sub-sector strategies but not significantly in national health sector planning.

MUTUAL ACCOUNTABILITY IS STRENGTHENED

A national MBE plan for the National Health Strategy exists?

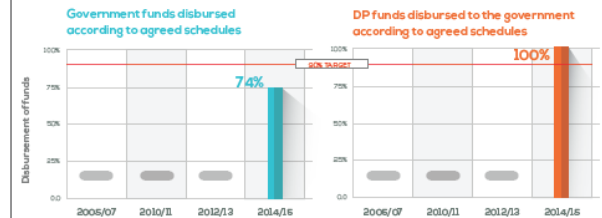


The MoPH has developed the MBE framework for the new national health strategy, but it is not yet implemented.

COMMITMENT

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

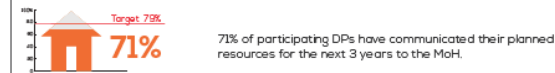
HEALTH DEVELOPMENT COOPERATION IS MORE PREDICTABLE



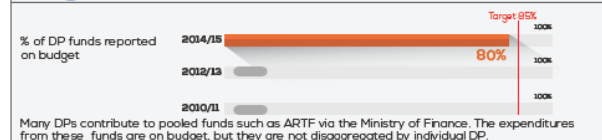
Predictability of funds for the future

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

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



HEALTH AID IS ON BUDGET

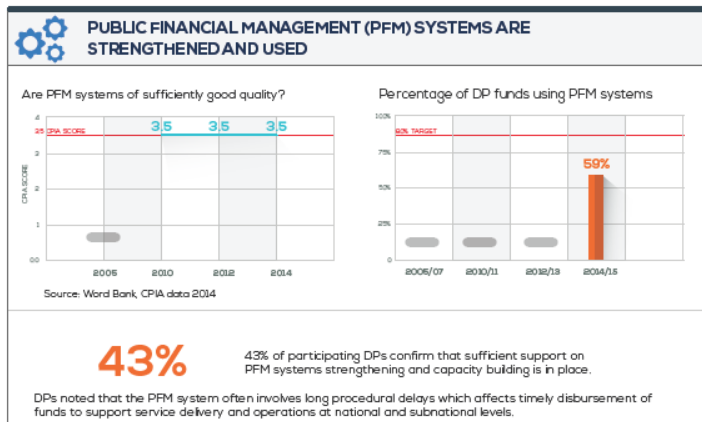


LEGEND

Data colour codes	Symbols
Government	<input checked="" type="checkbox"/> Yes
Private Sector	<input type="checkbox"/> Did not participate in monitoring round
Development Partners	<input type="checkbox"/> No
Civil Society	<input type="checkbox"/> Unknown or not applicable

COMMITMENT

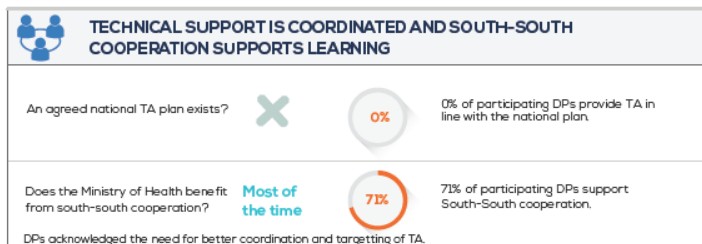
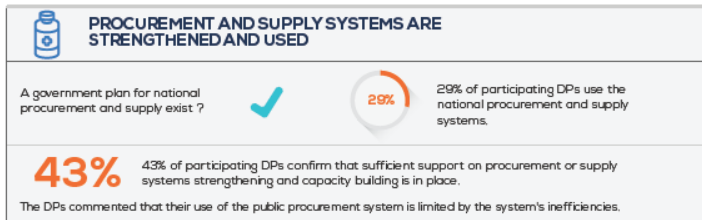
TO ESTABLISH, STRENGTHEN AND USE COUNTRY SYSTEMS



43%

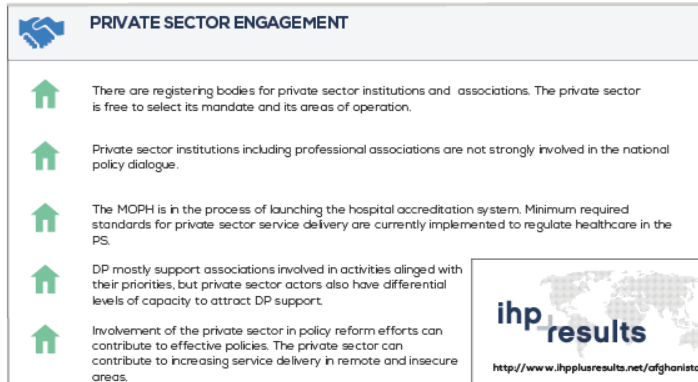
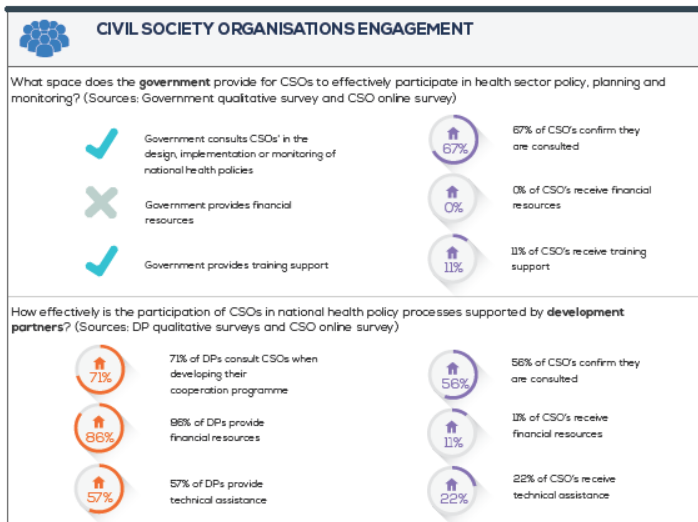
43% of participating DPs confirm that sufficient support on PFM systems strengthening and capacity building is in place.

DPs noted that the PFM system often involves long procedural delays which affects timely disbursement of funds to support service delivery and operations at national and subnational levels.



COMMITMENT

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



Presentation of findings to health partners on PowerPoint

2016 IHP+ Monitoring Round

Monitoring of Commitments
on Effective Development
Cooperation in Health

**Presentation of the
findings for Plasmodia**











What happens
next?



Meeting of health partners

- On invitation by the Ministry of Health
- Broad participation of government ministries, development partners, CSOs, and private sector representatives
- Discussion and validation of findings
- Development of an action plan to strengthen cooperation for health sector development
- In a select number of countries: Continued support by IHP+R to integrate EDC indicators in routine national health sector performance framework

Development of an action plan

EDC PRACTICE	ISSUES IDENTIFIED	ACTION TO BE TAKEN	RESPONSIBLE FOR IMPLEMENTATION	DEADLINE	HOW WILL IT BE MONITORED?	COMMENTS
 EDC 1						
 EDC 2						
 EDC 3						
 EDC 4						
 EDC 5						
 EDC 6						
 EDC 7						
 EDC 8						
OTHER ACTIONS						

Our experience so far



Early in the process

- Only four countries have had a meeting of partners to validate the results – final reports are not yet available
- Participation of development partners has been variable
- Initial enthusiasm for Paris principles on EDC among development partners appears to have flattened compared to earlier rounds
- Perceptions about civil society participation often differ between CSOs, government and development partners
- Further progress will depend on country leadership and on international support that can be provided to these countries



Thank You

Any questions?

You can find us at www.ihpplusresults.org/
or email helpdesk@ihpplusresults.org

