

ALIGNING FOR BETTER RESULTS IHP+ STRATEGIC DIRECTIONS 2014/15

VISION

Better health results for the population is the overarching goal of all actors in the health sector: citizens, their governments and development partners. And it is the ultimate goal of IHP+.

Partners in IHP+ believe that the most efficient way to reach this goal is through aligned support for good quality country health strategies, and that the key to sustainable success is strengthening and aligning with country systems. With the adoption of the Paris, Accra and Busan agreements, this view is shared by almost all countries and development partners.

The logic is simple: countries will only achieve optimal results by having a good quality strategy that all actors support in a harmonized way, and with efficient systems to deliver it. Getting there requires:

- high level **political commitment** and concrete **organizational action** to change partners' behaviour;
- technically sound **approaches and tools** to support high quality plans and effective, robust systems.
- accountability for **results**, at country level

IHP+ partners¹ work on all these areas. The following snapshot of the current status of the partnership is followed by short descriptions of the core elements of IHP+'s strategic directions. The strategy is guided by feedback on the added value of IHP+, as a neutral sector-specific platform where development actors work together to solve practical problems on alignment, harmonization and coordination in health development co-operation, and through which all partners are held to account for their commitments to change. A work programme for 2014/15 is available, outlining more detailed actions under each of the strategic directions, as well as an overview of IHP+'s arrangements for oversight, operations and communications, and an indicative budget for the biennium.

IHP+ STATUS AND RECENT DEVELOPMENTS

NEED FOR INTENSIFIED ACTION BY ALL DEVELOPMENT PARTNERS

IHP+'s achievements are well documented². However, a key message from IHP+'s 4th Country Health Teams Meeting in Nairobi 2012 was that progress on effective development cooperation in health is slower than anticipated. And, overall, countries have moved further in implementing commitments than international development partners. The meeting stressed that faster progress requires action by *all* development actors to put principles into practice. This requires political and organisational action as well as technical tools. It requires action by governments, NGOs, CSOs, private sector actors, and – especially - by international development agencies. The messages from Nairobi were taken up by global

¹ Developing country governments, international development partners, Civil Society Organizations (CSOs) and other non-state actors. For full list see <http://www.internationalhealthpartnership.net/en/>

² IHP+Results Reports; Core Team Reports; <http://www.internationalhealthpartnership.net/en/results-evidence/>

health leaders, and have become known as the ‘seven behaviours’³ (see Box 1). These behaviours are not new, but they do crystallize key areas for action that will – if implemented - lead to visible results.

Box 1: The seven behaviours

1. Agreement on priorities that are reflected in a single national health strategy and underpinning sub-sector strategies, through a process of inclusive development and joint assessment, and a reduction in separate exercises.
2. Resource inputs recorded on budget and in line with national priorities
3. Financial management systems harmonized and aligned; requisite capacity building done or underway, and country systems strengthened and used.
4. Procurement/supply systems harmonized and aligned, parallel systems phased out, country systems strengthened and used with a focus on best value for money. National ownership can include benefiting from global procurement.
5. Joint monitoring of process and results is based on one information and accountability platform including joint annual reviews that define actions that are implemented and reinforce mutual accountability.
6. Opportunities for systematic learning between countries developed and supported by agencies (south-south/triangular cooperation).
7. Provision of strategically planned and well-coordinated technical support.

In April and May 2013 meetings hosted by WHO’s Director-General and the World Bank President in Washington and at the World Health Assembly endorsed these behaviours. A twin-track approach to intensified action to deliver positive and sustained change on these seven behaviours followed⁴. This approach involves diagnosis and action on the seven behaviours in countries, and within international development agencies. Experience to date shows that the seven behaviours are a useful, concise way to identify areas for possible action, and that the rationale for the twin-track approach remains valid. However some adjustments are needed.

Feedback from the reviews in countries identifies where there are agency-based obstacles to progress, which are shared with agency HQs. On the other track, review of performance on the behaviours within individual agency HQs, action has been limited so far. Realizing this, heads of agencies have, however, recently agreed to take *collective* intensified action in one specific area: streamlining the measurement of results and accountability, with the goal of improving monitoring of sector performance and reducing the reporting burden on countries. The Director-General of WHO is chairing a group of 19 international health agencies that aims to have a plan for sun-setting unnecessary measures by April 2014.

IHP+ GOVERNANCE REVISED

The new IHP+ Steering Committee will serve as an important platform for setting strategic directions, reviewing progress and maintaining the political momentum for change within agencies and at country level. It has members from countries, international agencies and CSOs. Representation of the private sector in the Steering Committee will be examined by the Steering Committee once it is operational.

³ <http://www.internationalhealthpartnership.net/en/news-events/article/seven-behaviours-how-development-partners-can-change-for-the-better-325359/>

⁴ IHP+ Road Map for Intensified Action by All Development Partners, July 2013. This strategy document supercedes the Road Map.

A. POLITICAL AND ORGANIZATIONAL ACTION

1. Intensified action among global agencies

The current high level of commitment to IHP+ and its principles is key to obtaining agency change. As described above, global action is being taken by agencies to streamline global reporting requirements, as part of a concerted effort from countries and development partners to improve measurement of results and linkages to decision-making. Other actions needed by global agencies include: harmonized investment in country information systems; and use of these systems. This agenda is being taken forward at country level using frameworks and approaches developed through IHP+, and linked to follow up of the Commission on Information and Accountability for Women's and Children's Health. The second area in which a similar degree of 'high level' sponsorship is expected in order to make progress is the harmonization and alignment of financial management.

Finally, it remains a priority that communication on the seven behaviours within agencies is improved, and that agencies look critically at their own policies and practices in relation to these behaviours, and develop plans to remove bottlenecks to working better together with other agencies in support of countries' health strategies and plans.

2. Intensified action and lesson learning in selected countries

Taking local problems with development cooperation as the starting point and using the seven behaviours as the frame of reference, diagnoses of priority issues plus agreement on practical next steps have taken place in 3 countries - Senegal, Myanmar and Sierra Leone⁵.

In 2014/15, it is proposed that 1-2 more countries participate in this intensified approach to action on the seven behaviours, and feed back to the global level highlighting agency bottlenecks to more harmonized and aligned support, thereby advancing harmonisation in-country as well as drawing lessons to share globally. New thinking on approaches to follow up, support and documentation of progress and results against agreed benchmarks and targets, is also needed.

3. Global trends in effective development cooperation in health, and the place of IHP+

IHP+ will make greater use of its independent status to identify, profile and comment upon emerging patterns and trends in health development cooperation and global aid architecture. This will include: (a) defining the role of IHP+ within the future health development architecture, as well as (b) sharing the experience and lessons learned of IHP+ with the wider development effectiveness community. IHP+'s place in the emerging aid architecture and the post 2015 agenda will be clarified.

B. APPROACHES AND TOOLS

IHP+ has a substantial body of tools and approaches to support systems strengthening and alignment with national health strategies and systems. Reviews of experience have demonstrated their added

⁵ With some less ambitious initial work taking place in Haiti

value as well as their limitations in stimulating behaviour change. Below is an outline of their purpose; status of development and use, and priorities for further work.

1. Approaches needing intensified effort

1.1. One country platform for monitoring and accountability

This platform brings together all the elements of monitoring implementation of a national health strategy. It aims to improve effective measurement of health sector performance; use of data for decision making; reduce duplication and transaction costs and improve accountability.

Status: Guidance on strengthening a "Country-led Platform for Information and Accountability", developed through IHP+⁶, is now used in countries as a framework for improving information systems. Multiple players are involved in these efforts – in country, within international agencies and among CSOs. The Joint Annual Review (JAR) is in many countries an important element of using results and improving accountability, and experience with different modalities of JARs has been documented by IHP+.

Mutual accountability - holding each other to account for progress and results - has been central to IHP+ since it began. National partnership agreements and, globally, the IHP+ Global Compact, set out agreed ways in which governments and their development partners will support the national health strategy. Indicators and approaches to measure progress on these commitments have been developed. However, country discussions of progress on commitments remain the exception rather than the rule.

Priorities for 2014/15: Support current work - spearheaded by the global health leaders - on rationalizing/aligning development partners' reporting requirements, improving efficiency of sector performance monitoring and ensuring harmonized investments in information systems. Based on the review of experience in 2012, develop a guidance paper on ways to do Joint Annual Reviews, taking into account that JARs are country-specific processes. Catalyze country action to strengthen systems for mutual accountability for more effective development co-operation and results.

1.2. Financial management harmonization and alignment

Harmonizing and ultimately aligning development partners' financial management systems will make national health budgeting and budget execution more effective; reduce transaction costs; and increase transparency and oversight. All of which will contribute to better results. Any actions to strengthen public financial management are done as part of a government-wide strategy, but nevertheless there are a number of actions that can be taken within the health sector to improve capacity, and harmonization and alignment. IHP+ focuses on these.

Status: A process for Joint Financial Management Assessment has been developed and is being used, and being further developed as experience accumulates.

Priorities for 2014/15: Agencies and countries assess the feasibility for adopting Joint Financial Management Assessments as their preferred option. Agencies assess the possibility for harmonized support for Financial Management system strengthening. An IHP+ Financial Management Technical

⁶ http://www.internationalhealthpartnership.net/fileadmin/uploads/ihp/Documents/Tools/M_E_Framework/M%26E.framework.2011.pdf

Working Group will be established, with one of its tasks to provide best practices, options and guidance to countries that wish to get more development partners to use harmonized financial management systems, e.g. in the form of Joint Fiduciary Arrangements. As part of starting up this work, IHP+ will upon request during the next 1-2 years facilitate support to countries for financial management harmonization and alignment

2. Consolidation and continuation of established approaches

2.1 JANS and Compacts

JANS (Joint Assessment of National Strategies & plans) was designed to enhance the quality of national health strategies and increase confidence in them, and to reduce transaction costs by having fewer separate agency assessments. Compacts codify agreements between partners (governments, external development partners, CSOs) on ways in which they will support the national health strategy.

Status: Country experience with using both these tools has been positive and is well-documented, and tools and guidance have been updated. There has been progress on 'One JANS', in which an assessment of sub-sector strategies, their priorities and 'fit' with an overall sector strategy, is included as an essential part of the sector strategy assessment. The depth of assessment of sub-sector strategies within a JANS depends on a country's specific objectives from a JANS.

The private sector is an important factor in improving health systems performance and in achieving better results. IHP+ has been challenged to think about the role of the private sector at the country level in policy and accountability processes.

Priorities for 2014/15: To encourage countries and agencies to adopt joint approaches to assessment of national strategies and plans as the preferred form of assessment. Second, encourage increased private sector engagement in national health plan and compact development. Otherwise IHP+'s role in these two approaches is largely complete.

2.2 Improving CSO engagement in national policy dialogue and performance monitoring processes

CSO engagement in country policy dialogue can improve the quality of strategies and plans as well as monitoring, transparency and accountability for results.

Status: Small grants for national CSOs to better engage in country processes have been given through the IHP+ Health Policy Action Fund since 2010. A recent independent review of this approach found that grants have helped CSOs overcome obstacles to engagement, but that some changes to the approach would increase its effectiveness.

Priorities for 2014/15: Funding to support national CSO engagement in policy processes will be continued, but some strategic changes to the current approach are needed, to capitalise more widely on the benefits and increase lesson sharing. These will be developed in 2014.

2.3 Procurement

There is a new proposal for restarting work through IHP+, in a specific area of procurement: the use by multiple development agencies of a jointly developed tool for quality assurance of national procurement agencies. This is expected to result in more consistent assessment standards and

reduced transaction costs from separate exercises. This will be explored by a small working group and a proposal submitted to the Steering Committee.

Priority for 2014/15: Discuss possible role of IHP+ in more depth and present proposal to Steering Committee in June 2014.

3. New areas of work

3.1 South-South co-operation for health development

Countries increasingly seek experience and expertise from other developing countries when developing approaches to improve health services and systems. IHP+ was asked at the Country Health Teams Meeting in Nairobi to play a more active role in facilitating south-south and triangular cooperation in health.

Priorities for 2014/15: Work has been commissioned to better understand issues and current practice in south-south and triangular cooperation. An expert consultation will follow, leading to a clearly defined role for IHP+.

3.2 Strategically planned and well-coordinated technical assistance

IHP+ work will be based on the premise that the ultimate purpose of technical assistance (TA) is to enable better delivery of services, and focus on optimising alignment of TA to much more effectively take forward the national strategy. Exploratory work has been started with a review of existing literature and available data on TA.

Priorities for 2014/15: A preliminary brainstorming of international experts will lead to a larger consultation with countries and development agencies, facilitated by IHP+. The eventual deliverable will be an 'issues and options' paper for countries and development agencies on how to deliver effective and better-aligned TA in today's changing environment.

C. ACCOUNTABILITY FOR RESULTS

In the next two years all IHP+ partners - governments, international development agencies, CSOs and others - have major roles to play in accelerating alignment for better results, through the agenda outlined here. Follow up on IHP+ strategic directions for 2014/15 will be done as follows:

1. IHP+ partners' progress on commitments to effective development cooperation in health periodically monitored with a focus on monitoring results at country level. All signatories will be invited to participate in the next round of monitoring of progress on commitments to effective development cooperation in health in mid-2014. This will provide sector specific data for a small set of indicators derived from the Global Partnership for Effective Development Cooperation.
2. Country based documentation of progress, results and lessons learned on changing the seven behaviours.
3. IHP+ Core Team to track progress on agreed deliverables and report to Steering Committee.