

Preparation of SOM 2012

Titles: In-country collaboration on Health Systems Strengthening in Developing Countries

Key elements of the agreement: EC and WHO agreed to:

- *use the 2011 WHO EB resolution ‘strengthening national policy dialogue to build more robust health policies strategies and plans’, together with the principles of the international health partnership as the framework for improved support to HSS by both organizations .*
- *intensify and systematise exchange, at regional and global level, on the technical challenges, the process aspects, and strategic information gained from HSS experiences across the world, with a view of identifying and sharing lessons learnt;*
- *Intensify their dialogue and common understanding with a view of improving the design and management of global health aid in line with the principles of the International Health Partnership (IHP+), and its contribution to HSS. EC and WHO agreed to contribute to the development of the international health partnership workplan 2012 – 2013 with a view of further roll out and uptake of JANS and country compacts.*
- *design the joint EC/WHO programme “supporting policy dialogue on national health policies, strategies and plans in selected countries”, in line with IHP+ principles, to support the implementation of their policy intentions regarding improved HSS aligned with country priorities and country ownership;*
- *take measures to ensure a smooth collaboration between themselves and the governments*
- *collaborate on the documentation of the return on investment of HSS efforts (reporting on results and outcomes);*

Update on the progress made with the implementation of the agreement so far (context, main issues, most recent activities, upcoming activities, WHO/EC joint activities, opportunities for WHO/EC collaboration, other partners engaged or to be engaged etc)

Strengthening national policy dialogue to build more robust health policies strategies and plans

- The focus on national health planning has gained momentum during the last two years.
- Country support for health planning and policy dialogue reviews has intensified. To date more than 60 countries have received direct country support, and more than 40 countries have received multi-country support through inter-country workshops.
- WHO has developed a number of tools to support countries and partners, among others the Country Planning Cycle Database and Repository, which now also includes key information on EU funded projects.
- The Global Learning Programme launched in June 2010 with the aim of building WHO capacity to engage in meaningful sectoral and intersectoral policy dialogue among national stakeholders and their global partners has now reached 617 staff in WHO country offices with its first phase. This first phase has resulted in road maps for increased engagement of the WHO country offices with the stakeholders (domestic and external, including EU delegations) of the national planning cycles in their countries.
- In response to resolution WHA64.9, the Secretariat has consulted widely with Member States, civil society, multilateral and bilateral partners. A plan of action has been developed that focuses on

supporting Member States to review their situation in relation to universal coverage; to assess how their health financing systems can be developed further to move closer to that goal; to implement and monitor changes that are identified as necessary; and to develop strong synergies with national health plans and strategies. In the last year over 50 Member States have contacted WHO, enquiring about technical support in the area of health systems financing. The plan of action outlines how WHO will scale up its support to countries by providing information on best practices, facilitating the sharing of experiences and lessons learnt, and developing national capacities to track resources, to assess financing strategies and policies and to implement and monitor change. WHO has strengthened its collaboration with bilateral and multilateral partners, academia and civil society, including the Providing for Health initiative on social health protection (P4H).

- The work on National Health Plans has made it possible, within WHO, to start building a different kind of collaboration between the health systems community and the programmes, particularly in MNCH and immunisation.

Intensify technical exchange

- In June 2011, the Commission organized the first "EU Global Health Seminar" between health officials from Commission Services and professionals working in EU Delegations, in EU MS (both in European capitals, as well as in Embassies) and in implementing agencies in third countries. The EU Global Health Policy Framework was confirmed as the basis for joint EU work on Global Health matters at global and at country level. The discussions and forging of common purpose there preceded a later meeting with WHO officials.
- The WHO/GHWA/EU collaboration on human resources for health has been in effect since January 2009 and is currently being evaluated. Essential elements of the structure and processes necessary to promote decision making and action at national, regional (African and Eastern Mediterranean), and global levels have been put in place (evidence and knowledge about HRH problems; national networks and observatories backed up by regional observatories; and tools and methodologies that ensure comparability of evidence and action. To date, 10 national observatories are reported to be functioning in the African Region and a further 13 in process; and 4 are functioning in the Eastern Mediterranean Region. Thirty-six country profiles have been prepared, of which 10 have been validated by national technical committees. Important HRH products include the Code of Practice on International Recruitment of Health Personnel, the GHWA/CCF process for engaging stakeholders, as well as various guidelines and advocacy materials derived from country experiences.
- The Commission and WHO are renewing their partnership in the area of essential medicines. This is a follow-on to the 6 year EC/ACP/WHO Partnership on Pharmaceutical Policies that ended in 2010, which included all ACP countries. This agreement will be for 4 years and only for African ACP countries.

IHP+

- WHO and the Commission further enhanced their collaboration on aid effectiveness in the health sector through the International Health Partnership (IHP+). The Commission is currently preparing the cooperation with the IHP+ secretariat to support the work plan 2012-2013. This includes reinforced support to countries to assess health sector strategies using the JANS approach. As member of the Executive Team and the Focal Point for the development partner constituency, the Commission participates in the Executive Team, for which WHO and the World Bank ensure the secretariat.
- Joint Assessments of National Strategies (JANS) were successfully conducted by 10 countries¹. Increased focus has been placed on strengthening the availability of information and evidence to support policy decision-making through the organization of participatory mechanisms for assessing strengths and weaknesses of the situation, and formulating strategic recommendations related to the various health and health system components, as well as facilitating the priority setting process. There has been progress on developing plans for one M&E Platform through WHO and other partners - to date, 8 countries have M&E road maps. WHO also facilitated harmonization of fiduciary and/or M&E mechanisms of GAVI, Global Fund, the World Bank and other relevant in-country partners as well as these agencies' alignment to national systems in six countries².

¹ Ethiopia, Ghana, Kyrgyzstan, Malawi, Nepal, Rwanda, Togo, Uganda, Viet Nam, Zambia.

² Benin, Cambodia, Democratic Republic of Congo, Nepal, Senegal and Sierra Leone.

- The Commission has participated in the intensive preparation of the February 2012 Hammamet meeting on JANS. EC and WHO positioning has been consistent and coordinated during the negotiations before and during the meeting.

EC/WHO programme on "supporting policy dialogue on national health policies, strategies and plans in selected countries"

- The first phase of the EC/WHO programme on "supporting policy dialogue on national health policies, strategies and plans in selected countries" supporting under the Investing in People 2012 programme has been signed and the first 7 countries (Liberia, Moldova, Sierra Leone, North Sudan, Togo, Tunisia, Vietnam) which will benefit from the programme were identified; an expansion of the programme (additional 5-8 countries) is in preparation. To date, 6 roadmaps have been developed. Areas of human resources for health and medicines have been systematically identified as priority areas for policy dialogue in these countries. The Inception Report on initial country experiences is expected in March. A follow up meeting in Brussels is planned.
- Collaboration with the EU Delegations in establishing the programme has been positive and constructive.
- In some of these countries (Sierra Leone, Togo) Delegations have expressed expectations for collaboration with WHO country offices that include: support to the EU programmes for achieving the MDGs and follow-up of health related indicators for general budget support by the EU.
- Based on the plan of action developed by WHO in consultation with major stakeholders, the EC and WHO are preparing a programme, "Supporting country universal health coverage dialogue, development of health financing strategies and implementation of universal coverage reforms" to support about 10 countries in further developing their health financing strategies to increase more rapidly the coverage of basic health care services while applying an equity approach.

Measures to ensure smooth collaboration between EU and WHO at country level

- There have been increased proactive efforts from WHO country offices to establish working relations with EU delegations responsible for their countries. This has happened in the countries where the EC/WHO programme on policy dialogue is operational, but also, in countries such as Myanmar, Maldives, Bolivia, DRC, Sri Lanka, Chad, Niger, Guyana, Cabo Verde, Malawi, Namibia.

Document return on investment

- The EC in collaboration with the European Global Health Alliance (EAGHA) and The Lancet has organized a workshop on how to improve the measurement of the impact of development aid in health ("Towards shared principles for reporting health impacts of development aid - How can Public Health Sciences contribute to mutual accountability of both donors and health ministries and enhance the communication of results?") in order to set the scene for future collaboration with partners in this field. WHO and IHP+ participated.
- The first EU Global Health Seminar which the EC organized in 2011 looked at the technical challenges, the process aspects, and strategic information gained from HSS experiences across the world, and provided a platform for lessons learnt for EU health professionals.
- The WHO EURO Regional Director S. Jakab met Commissioner Andris Piebalgs in August 2011. The meeting recognized the positive evolution of the partnership on health and development. It underlined the need for a more strategic approach of the cooperation between WHO and Commission for better in-country support for health systems strengthening and progress towards equitable access to essential health services, thereby improving health outcomes.

Major challenges (context, main issues)

- The global environment currently seems to put less emphasis on the importance of health for development than has been the case in the last decade.
- The implementation of the Paris-Accra agenda and the IHP+ principles continues to dominate the

landscape at country level, while discussion of the consensus at global level is heavily influenced by the unfavorable global context and the recent changes at the Global Fund.

- The growing presence of BRIC on the South-South collaboration scene, in the past largely outside of the Paris-Accra and IHP+ frameworks, is set to become more integrated after Busan. This will require creative approaches to more effective collaboration.
- The increasing pressure for immediate, visible and quantified outcomes is at odds with the time scale and complexity of the political change required for effective strengthening of health systems. While awareness of this disconnect is growing, a suitable response has not as yet been developed.
- Despite real progress, there are still countries where easy communication and cooperation between EU Delegations and WHO Country has not yet become a habit.

Future steps (expected results, suggestions on how to move forward, possible changes of direction required, specific objectives, subthemes to be covered etc)

- In order to ensure more coherence between the different EU support programmes carried out jointly between EC and WHO, and in order to reduce fragmentation, the EC and WHO aim for a single comprehensive cooperation programme covering the strategic issues in health systems strengthening (strategic health policy planning, health sector policy dialogue, human resources for health, universal coverage, essential medicines, aid effectiveness in health etc.), designed and implemented under one single umbrella. A specific visit to Geneva at senior level in the coming weeks should further prepare this approach. What weight EC and WHO give to specific global initiatives (such as the SGMNCH strategy) and specific HSS challenges (such as strengthening health information systems) will be equally discussed at that meeting. Improving possible synergies at country level is a key concern of this cooperation.
- EC and WHO will jointly develop an appropriate approach to manage the EC/WHO programme portfolio on health systems support.
- Support to the development of sound national health policies, strategies and plans will continue, in line with IHP+ principles, and with increased focus on least developed countries. EC-WHO cooperation at country level is not to be confined to the countries that are formally part of the EC-WHO programme policy dialogue, but other opportunities for closer collaboration should be pursued as well.
- EC and WHO will take stock of the lessons learnt from the evaluation of the WHO/GHWA/EU collaboration on human resources for health and the EC/ACP/WHO health MDGs partnership programme. These evaluations may be complemented with a stock taking exercise of the overall experience of EC-WHO collaboration regarding developing countries..