

EU-WHO Policy Dialogue Programme Inception report March 2012

Background and Introduction

WHO entered into a collaborative agreement with the European Commission (EC) in October 2011 to 'support policy dialogue on national health policies, strategies, and plans (NHPSP) in selected countries'. This collaboration, hereafter called the 'EU-WHO Policy Dialogue Programme' or 'Programme', aims at building country capacities for the development, negotiation, implementation, monitoring and evaluation of robust and comprehensive national health policies, strategies and plans, with a view of promoting universal coverage, peoplecentred care, and health in all policies. It aims at strengthening country processes, as well as, where appropriate, aid effectiveness in line with the principles of the International Health Partnership (IHP+). By building synergies between WHO's response and the EC's aid, the overall objective is to ultimately improve health sector results in concerned countries.

The focus on national health planning has gained momentum on the global agenda during the last two years, leading to more intensified WHO country support for health planning and policy dialogue reviews. The recent 2011 meeting of Senior Officials of the European Commission and World Health Organization confirmed this trend; both institutions agreed to base their joint work on the 2011 WHO Executive Board 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 health systems strengthening (HSS) by both institutions.

The EU-WHO Agreement, comes with a 5 183 000 EUR budget envelope, 5 000 000 EUR of which is the EU contribution. This envelope is to cover 7 countries, namely Liberia, Moldova, Sierra Leone, Sudan, Togo, Tunisia, and Vietnam, over a 3-year period. Three of the selected countries are 'light mode' countries; they receive seed funding of approximately 100 000 - 150 000 EUR per country per year to smoothen the policy dialogue process. The four remaining countries are 'full mode' countries and receive a full-time Technical Assistant placement in addition to the seed funding. Both full and light mode countries are back-stopped by WHO's strong technical support on the ground (Country Office -- CO) as well as through its network of Regional Offices (RO) and Headquarters (HQ). WHO takes advantage of its key brokering role to effectively utilize these funds to catalyze critical sectoral processes and events.

Preparation of Inception Phase

Conceptualization

Internal WHO headquarter (HQ) meetings as well as intense communication with Regional Offices between November 2011 and February 2012 helped structure the Inception Phase over a period of several weeks following signature of the Agreement in October 2011. A template for the Country Road Maps as well as the accompanying Road Map narrative were developed, and a meeting was organized for the 7 target countries' WHO Representatives (WRs) during the annual

gathering of WRs at WHO HQ in November 2011. Regional Health Systems Advisors participated at this meeting by teleconference.

WRs Meeting, November 2011

The WRs were brought together with their regional colleagues in order to enter into a common understanding on the EU-WHO Policy Dialogue Programme and discuss inception phase expectations and schedule, financial arrangements, and technical assistance placements for full mode countries. A consensus on the content and level of detail needed for the Road Map was reached. The importance of communication and visibility for this Programme was recognized and it was agreed that this issue would be explicitly addressed during the WHO HQ inception missions as well as during Road Maps formulation.

Technical Assistant (TA) recruitment

A new global recruitment process compatible to the WR Roster is being set up in collaboration with the Regional Offices. The vision behind this roster is to ensure placement of high-quality, experienced candidates in the full mode countries. In the meantime, as technical staff is necessary now for implementation of the Programme in countries, a more pragmatic approach was agreed upon with the ROs and COs, including engagement of a National Professional Officer on a short-term basis. This gives the COs immediate technical support as well as valuable local health sector knowledge, experience, and linkages. The flexibility of the local EU delegations regarding the modalities of the Technical Assistant recruitments is much appreciated.

To date, international Technical Assistant candidates' curriculum vitae have gone through a thorough process of pre-selection. The WHO Western Pacific Regional Office has already selected their candidate for Vietnam and he will be beginning his contract in April 2012. It is expected that by April-May 2012, the 3 remaining posts will be filled.

Financial

An initial tranche of funds (1.8 million EUR) was received by WHO on 27 October 2011. 56% of these funds have been transferred to countries for 1st quarter 2012 activities and TA recruitment. The remaining funds have been allocated within the WHO Global Management System (GSM) to HQ activities as well as specific 2012 Road Map activities according to the timeline stipulated by each country.

Inception phase

Extensive preparations were undertaken in the target countries by the WHO Country Offices well before the official launch of the inception phase in November 2011.

The inception phase of the EU-WHO Policy Dialogue Programme actually commenced after the WRs' meeting in November 2011 with the **objective** of formulating a **Programme Road Map** in all 7 target countries, inclusive of an activity timeline and disaggregated yearly funding needs.

In Vietnam and Sudan, inception phase activities were carried out by the WRs and their teams; in the other 5 countries, ROs and HQ provided additional technical support via joint missions.

The WHO COs and the EU delegation held meetings with the local Ministry of Health (MoH) to inform and scope possible focus areas for Programme implementation. The MoH, CO and the EU delegations then brainstormed together on the elaboration of the Programme Road Maps. In many countries, the process of Road Map formulation itself proved to be a decisive impulse to put in place or improve policy dialogue structures and local coordinating mechanisms.

The Road Maps evince varying degrees of detail (see annex) -- In **Liberia, Moldova, Sierra Leone, Sudan, and Togo**, the MoH, EU delegation, and CO were able to come together and collaborate over several working sessions, leading to a strong consensus on focus areas for the Programme, a detailed activity list, and budget information.

In **Tunisia**, initial delays due to a vacillating political situation were overcome through the leadership of the WR. WHO Tunisia facilitated the necessary policy-level dialogue with the MoH, the National Public Health Research Institute (INRSP), the National Health Observatory, and civil society organizations (CSO) on expectations from the EU-WHO Policy Dialogue Programme. The Programme has received the full support of the newly appointed Minister of Health, which led to the appointment of a MoH National Focal Point, the formation of a steering group headed by the Director-General for Health, and a first draft of the Road Map. An EU-WHO co-organized meeting bringing together all health partners in January 2012 presented this Programme and debated on the proposed Programme Road Map. A budget elaboration is pending MoH approval of the Road Map. The next major milestone in health sector development is a public announcement on the chain of events which will lead to the *Etats Généraux de la Santé* (National Health Conference).

In **Vietnam**, the annual extended holiday period led to delays in an official MoH consensus on the Road Map; however, informal discussions with them have culminated in a preliminary working draft, which includes the technical input of the EU delegation.

Several common themes emerge across the 7 countries, despite their vast differences in income levels and political and health systems. Monitoring & evaluation (M&E) and health financing/costing competencies appear to be weak in Ministries across regions. Solid technical support from WHO, in the form of Joint Assessment of National Strategies (JANS), M&E plans, costing trainings, etc. have been clearly prioritized, as indicated by their salience across Road Maps. A definitive allocation of EU-WHO Policy Dialogue Programme funds to decentralization processes and decentralized planning has been explicitly planned. Building MoH capacity to effectively lead policy dialogue structures also featured prominently in the Programme Road Maps. Issues related to generic essential medicines, drugs pricing, and medicines policies came

up in both middle-income (Moldova, Sudan) and low-income countries (Togo). Finally, the lack of adequate numbers and quality of **human resources for health** as well as deficient **financial management mechanisms** were both cited as focus areas for improvement in more than one Road Map.

International Health Partnership (IHP+)

The International Health Partnership provided an important impetus in Sierra Leone, Sudan, and Togo for a comprehensive WHO-facilitated process of health sector reviews/situation analysis and national strategy formulation. In Liberia, the vision of unifying and harmonizing various subnational and sub-sectoral plans is reflected in the inclusion of IHP+ adherence into the Programme Road Map. In Vietnam, the IHP+ JANS approach to prepare for the next 5-Year Health Plan will be facilitated by the EU-WHO Policy Dialogue Programme.

Commission on Information and Accountability for Women's and Children's Health (CoIA)

Critical support for M&E processes for NHPSPs in the 7 target countries will be provided by cofunding from the CoIA, a high-level commission to improve global reporting, oversight and accountability for women's and children's health¹. Although the Commission's focus is on women and children, country technical support and funding for streamlining of M&E frameworks is linked explicitly to a country's NHPSP as a whole. Implementation of CoIA's *Global Strategy for Women's and Children's Health* includes a series of regional and country technical workshops, led by WHO headquarters, to newly formulate or improve the monitoring & evaluation plan for the NHPSP. The EU-WHO Policy Dialogue Programme is working closely with CoIA at both the global and regional/country level to ensure synergies with CoIA's technical support and funding for the paramount Road Map area of M&E.

Collaboration with other EU-funded programmes

Linkages have been actively sought with other EU-funded activities in-country, as demonstrated by Programme Road Maps (see annex). In Vietnam, the EU Health Sector Capacity Support Project is providing vital technical knowledge and funding for sub-national planning and health sector technical working groups, valuable activities which feed into local implementation of the EU-WHO Policy Dialogue Programme. In Sierra Leone, the Strengthening Health Workforce Development EC Project is facilitating a key area in their Programme Road Map. In Moldova, the EU Health Sector Budget Support Related Technical Assistance as well as the EU-funded Better managing the mobility of health professionals in the Republic of Moldova are co-funding several policy dialogue activities. In Tunisia, the MoH National Focal Point has been made responsible for all other EU-funded programmes on health in order to facilitate synergies and coordination.

The close cooperation and input from the local EU delegations have been indispensable in achieving these synergies. WHO is cognizant of the significant potential of the seed funding

 $^{^1\,}http://www.who.int/topics/millennium_development_goals/accountability_commission/en/$

provided by the EU-WHO Policy Dialogue Programme, despite its modest amounts per country, to catapult broader policy dialogue processes to center stage and thereby bring in and harmonize larger funding and technical assistance.

Visibility

WHO is fully conscious of the need to adequately communicate on national health policy and planning activities to the local population and development community. Five of the Programme target countries have integrated the elaboration of a Communications Plan into their Road Maps and have consulted communications experts, when present, in the local EU delegations. Communications support for each of the key activities in the Programme Road Maps will be worked out locally and also deliberated upon at WHO HQ with the Department of Communications for all 7 countries as a whole. An official media launch of the EU-WHO Policy Dialogue Programme is planned for the 2nd quarter of 2012 in Togo and Moldova.

			EU-WHO Policy	Dialogue Programme	target countries		
Key Programme Activities	Liberia	Sierra Leone	Togo	Tunisia	Sudan	Vietnam	Moldova
			Support to MoH	Support to MoH for		Support to MoH	Sector
			in coordinating	policy dialogue		to take over	coordination &
			health sector	during		coordination and	coherent policy
MoH capacity-building			committees	implementation of		leadership role	development
Wiorr capacity ballaning				new National Health		for technical	
				Policy		working groups	
						and Health	
						Partners Forum	
				Programme Road	Policy dialogue on		Health forum
Strategic national planning				Map	future of Darfur		
				Situation analysis			Policy studies
							on selected
							health issues
				National Health			
				Assembly			
				Current f			
				Support for			
				National Health			
				Policy formulation			
				Support for			
				operational and			
				strategic plans			
			District-		Institutionalization	Sub-national	Sub-national
Decentralization			/regional-level		of decentralization	planning	workshops on
			policy dialogue				health policy
Monitoring & Evaluation	M&E	M&E	M&E	M&E		M&E	
Financial management		Joint financing	Financial				
systems		agreement	management				
			assessment				
IHP+	IHP+ adherence	JANS				JANS	
	Planning &	Costing			Health financing		Dialogue on
Health financing	budgeting;				policy		health
ricalti ililalitilig	Operationalization						insurance fund
	of health financing						
		HRH database;			Policy dialogue on		
Human resources for		Finalization of			retention		
health (HRH)		HRH Policy &			strategies for HRH		
ricular (rinary		Strategic Plan					
			D				
			Policy dialogue		Drug pricing		Medicines
Medicines			on generic				Policy
			essential				development
	Media, news flash,	Mobilize and	medicines Documentation	Documentation and			Documentation
	MoH newsletter &	communicate	and media	media coverage of			and media
	web site to raise	with	coverage of key	key debates and			coverage of
Visibility	visibility of EU-	communities	debates and	health policy events			key debates
visibility	WHO	on policy	health policy	meanin policy events			and health
	collaboration	dialogue for	events				policy events
	Condition	health	CVCIICS				poncy events
	Health component				Health laws and		
	of Poverty	Health			regulations		
Others	Reduction	Observatory]		
	Strategy II and	, 					
	Responsiveness of						
	health services to						
	people's needs						
	and demands						
	and demands						

Way forward

Finalization of the Programme Road Maps in Tunisia and Vietnam will be the priority for WHO within the next few weeks, along with the beginning of **Programme implementation** in the other 5 countries. In addition, WHO headquarters plans to bring together all 7 WHO Representatives, along with their Technical Assistants (for full mode countries) and regional counterparts for a **meeting** in Geneva **in April 2012**. This meeting will serve as a **platform for exchange between the countries** on progress to date and impediments encountered. 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, WHO will take advantage of this April meeting to bring specific WHO in-house expertise (especially in the essential focus areas of M&E and health financing) to the WRs and explore the possibility of synchronizing certain activities on WHO work plans with Programme Road Maps.

WHO HQ will continue to closely accompany and technically support all 7 countries in Programme implementation through monitoring missions and active telecommunication with the COs, MoHs, and the local EU delegations.

Finally, WHO HQ aims to produce **guidelines on** how to conduct and organize **policy dialogue** as well as thorough documentation on **lessons learned** in the policy dialogue process in the 7 target countries. Data and information will be closely monitored and gathered during the course of the 3-year Programme to adequately feed back into these activities.