



World Health Organization

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**Proposed Luxembourg-WHO collaboration:**

**Supporting policy dialogue on national health policies,  
strategies and plans in West Africa**

## I. INTRODUCTION

Effective national health systems require national health policies, strategies and plans (NHPSPs) which are in line with Poverty Reduction Strategy Papers (PRSPs), improve access to quality care, and enhance equity. WHO has been receiving increasing requests for technical support for the development, negotiation, implementation and monitoring and evaluation of robust, comprehensive and well balanced NHPSPs. Given the growing buy-in into the Paris Declaration, the Accra Agenda for Action<sup>1</sup>, and the International Health Partnership (IHP+) principles of partner harmonization and alignment, country ownership and mutual accountability, it is expected that such requests for support will continue to increase.

As identified in the *Luxembourg Development Cooperation's health sector strategy*<sup>2</sup>, one of the major problems facing health systems in developing countries is fragmentation. Decades of project-oriented health sector funding, sometimes well justified, have contributed to this lack of coherence across health sector activities. Problems associated with a fragmented approach to policy formulation, planning and implementation lead to duplication of services, parallel systems and waste of resources across programmes in countries. OECD data demonstrate that on average, disease-specific funding has increased substantially over 'other health' funding in most of the aid-recipient countries<sup>3</sup>. The Paris Declaration principles are difficult to achieve in practice without an able Ministry of Health capable of steering all stakeholders towards national priorities. WHO's work with countries has demonstrated that developing NHPSPs that captures all priorities in a balanced way to address significant health systems bottlenecks constitutes a major challenge for countries.

The present proposed programme *“Supporting policy dialogue on national health policies, strategies and plans in West Africa”* aims at enabling WHO to better support countries in building their capacities for the development, negotiation, implementation and monitoring and evaluation of robust and comprehensive NHPSP, to put into practice IHP+ principles, to strengthen health systems based on Primary Health Care (PHC) renewal principles and to support countries to move more rapidly towards universal coverage.

This programme is part of a wider programme of technical support by WHO to national health plans, strategies and plans, as envisioned in the Twelfth General Programme of Work for 2014-2019.

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<sup>1</sup> [http://www.oecd.org/document/18/0,3343,en\\_2649\\_3236398\\_35401554\\_1\\_1\\_1\\_1,00.html](http://www.oecd.org/document/18/0,3343,en_2649_3236398_35401554_1_1_1_1,00.html)

<sup>2</sup> *Santé, Stratégies et orientations 09*, La Coopération Luxembourgeoise au Développement

<sup>3</sup> *From whom to whom? Official development assistance for health, Commitments 2002-2009*, World Health Organization, 2011

## i. WHO support to NHPSP processes in countries

As part of WHO's Programme of Reform, ensuring equitable and sustainable health systems has been identified as one of the five technical programme priorities agreed by WHO Member States. The Twelfth General Programme of Work for 2014-2019 which embodies the technical element of the reform agenda, clearly states that *"WHO should play a stronger role in helping national authorities to prepare national health policies, strategies and plans. This is in line with WHO's convening and leadership role"*.

WHO is recognized as a neutral technical expert in this area through its years of support for planning processes including development of NHPSPs, mid-term reviews, joint annual reviews, joint assessments and more recently, through the implementation of the Global Learning Programme, an internal WHO-specific initiative aimed at developing the capacities of WHO country office and regional staff in the area of NHPSP.

In order to face the growing demand by member states for technical support in this area, WHO's global target for the period 2013-2015 is to enhance WHO capacities in headquarters (HQ), Regional Offices (ROs), and 40 WHO country offices in order to efficiently support 40 low and middle-income countries to develop realistic and robust NHPSPs which can serve as a foundation for the implementation of the Paris Declaration in the health sector. A consortium of partners is being sought to support these 40 WHO country offices, with the European Union (EU) already having committed to a joint programme consisting of intensified support to WHO country offices of 7 countries in 2012 and a further 8 in 2013.

The present proposed Luxembourg-WHO collaboration strategically supports the above-mentioned reform and will cover an important part of the overall workplan. The Luxembourg-WHO policy dialogue programme will complement the EU-WHO programme already in place. It will cover capacity building and normative work in HQ and Regional Offices as well as operational policy work at WHO country offices' level of 5 Luxembourg partner countries in the West African region (Burkina Faso, Mali, Niger, Senegal and Cape Verde). Very importantly, it will develop, at the Western Africa level, a platform for exchanges of experience and for South-South collaboration among the 5 targeted countries. In total, the combined Luxembourg and EU contribution will thus allow coverage 20 WHO country offices, or 50% of the overall target of 40 WHO country offices.

The 5 proposed countries have been chosen because, thanks to the previous Luxembourg-funded programmes managed by the WHO Health Systems and Services Cluster, WHO has built up a solid trusting relationship with the Ministries of Health (MoHs) and launched important dynamics that the proposed programme will institutionalize at country level. Reinforcing this dynamic by strengthening WHO country offices is a clear demand from the 5 proposed countries for the continuation of WHO technical support that would focus on policy processes.

## ii. Complementary actions to the Luxembourg Development Cooperation

The proposed programme is in line with the Luxembourg Development Cooperation's health sector strategy and Luxembourg's commitment *"to continue and strengthen the bilateral and multilateral efforts aimed at supporting the definition and implementation of sectoral health policies that are relevant, planned and budgeted"*<sup>4</sup>. The proposed programme has a regional focus and is complementary to the bilateral projects in the Indicative Cooperation Programmes (ICP), focussing on building and enforcing the institutional capacities of health sector authorities for planning, management and implementation.

Bilateral commitments of Luxembourg, as indicated in the various Indicative Cooperation Programmes (ICP)<sup>5</sup>, include: to improve decentralized planning and management capacities and the operationalization of basic health packages in Mali; to improve institutional planning, management and implementing capacities of districts and regions in Senegal; to support the implementation of the Health Development Plan in Niger; to support the implementation of the National Plan for School Health in Cape Verde; and to support the integration of the National Centre for Blood Transfusion in Burkina Faso's health system. WHO's commitment to promoting participatory and inclusive policy dialogues is in line with the crosscutting commitment by Luxembourg in all its ICPs to support good governance, participative democracy and citizenship. The proposed programme further reinforces Luxembourg's commitment to the Paris Declaration principles and to aligning with the national policies, strategies and plans of its partner countries. This regional programme will allow for better cross regional exchange and South-South collaboration on NHPSP and Aid Effectiveness, particularly between the 5 targeted countries.

This programme builds on previous work of the *"Strengthening healthcare technology management for optimized health service delivery (HIT)"* project, that has supported the formulation and revision of Health Infrastructure and Technology (HIT) Policies in participating partner countries through an active and participatory policy dialogue. The general feedback from countries for HIT-related technical support was very positive, and a major recommendation was to extend WHO's support on broader health systems strengthening activities.

Also, and more specifically, this programme builds on the achievements of the *"Santé, Réduction de la Pauvreté et Développement Economique (SPRDE)"* project, implemented

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<sup>4</sup> *Santé, Stratégies et orientations 09*, La Coopération Luxembourgeoise au Développement, p16.

<sup>5</sup> *Indicative Cooperation Programmes* between Luxembourg and its partner countries Mali, Senegal, Niger, Cape Verde and Burkina Faso, as consulted on the website <http://cooperation.mae.lu/fr/Politique-de-Cooperation-et-d-Action-humanitaire/Programmes-indicatifs-de-cooperation>

between 2008 and 2011. The focus of the SPRDE project has been to develop national capacity to strengthen health systems so as to address poverty, and on supporting those parts of the national health plan specifically targeting access to health services and service delivery for the poor. The project has significantly contributed to policy dialogue at country level, resulting in new national equitable and pro-poor health policies in Niger and Mali, in a consensus on an implementation plan for health in Burkina Faso, in an increased MoH capacity for inter-sectoral dialogue in Senegal and in the signing of IHP+ compacts in Burkina Faso, Mali, Niger, Senegal and Cape Verde. The evidence gathered from this experience has informed the formulation and adoption of the resolution WHA64.8 on Strengthening national policy dialogue to build more robust health policies, strategies and plans<sup>6</sup>.

## II. THE PROPOSED LUXEMBOURG -WHO PROGRAMME

### i. Objectives

The overall objective is to develop WHO capacity to efficiently support countries ***improved and equitable health sector results in selected countries in West Africa***<sup>7</sup>.

WHO will draw on its global convening role, institutional capacity and experience, as well as country presence - reinforced through the placement 2 long term senior experts in West Africa (exact location of the 2 experts to be decided at the end of the inception phase) - to support selected countries where the national challenges to policy making and implementation of national plans are such that they cannot adequately be dealt with only through current back up by the regional offices, sub-regional offices and HQ teams. The expertise will support the country offices providing sector-wide advice to facilitate national health policy dialogue across programmes and systems.

The programme will work on achieving the following **three specific objectives**:

- I. To support the development and implementation of robust national health policies, strategies and plans that aim to increase access to quality care, increase financial risk protection, and increase health equity
- II. To increase technical and institution capacities, knowledge and information for health systems and services adaptation and related policy dialogue
- III. To ensure that international and national stakeholders are increasingly aligned, and donors are increasingly harmonized around NHPSP

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<sup>6</sup> More details on the achievements of this project in the *final report Santé Réduction de la Pauvreté et Développement Economique*, dated May 2012.

<sup>7</sup> Burkina Faso, Cape Verde, Mali, Niger and Senegal

The target group for the programme in terms of the building of institutional and technical capacities for policy dialogue, are the Ministries of health, development and finance, as well as other actors involved in the health sector (civil society, private sector, health professionals associations) and technical and financial partners (UN family, donors, international NGOs, etc).

## ii. Expected results

The general expected result is: ***Institutional capacity for comprehensive participation in and management of the political and technical NHPSP cycles and health financing reforms for universal coverage enhanced.***

Expected results:

- Countries have prepared / developed / updated / adapted their NHPSP through an inclusive policy dialogue process towards an increased coverage with needed health services, financial risk protection and health equity;
- Countries have put in place expertise, M&E systems, annual health sector reviews and effective corrective mechanisms that allow taking rapidly actions in case of assessed issues;
- Countries have developed plans to move more rapidly towards universal coverage (UC), with a particular focus on the poor and vulnerable;
- Accurate, up to date evidence is available and shared across countries on what works and what does not work in relation to HF reforms for universal coverage;
- Harmonization and alignment of health aid with national health plans is consolidated and accelerated.

## iii. Activities for three years

The Luxembourg financial support will contribute to the following activities of the overall workplan:

- 1) To develop, fine-tune, test and implement in countries the capacity building programme on NHPSP;
- 2) To gather evidence for good practice on Situation analysis, National Health Assemblies, priority setting, costing, operational policy dialogue mechanisms, Monitoring and Evaluation;
- 3) Backstopping: to provide WHO HQ and Regional Offices Health Systems teams with necessary resources to ensure proper backstopping of WHO country offices;
- 4) Operational support to Country offices: to provide the 5 WHO country offices of Burkina Faso, Mali, Niger, Senegal and Cape Verde with technical support on NHPSP over a period of 3 years and seed funding for activities.

More specifically, key activities include:

***Inception phase:*** To (re-)assess and update the situation of the National Health Planning Cycle, the on-going policy dialogue process, the aid effectiveness agenda and the specific needs in terms of capacity building and technical assistance for each of the 5 target country of the current proposal;

***Component 1:*** To develop and implement a capacity building programme on NHPSPs for the target countries and to develop and implement a country-based monitoring system on the implementation of the national health policy, strategy and plan;

***Component 2:*** To provide capacity building technical assistance to countries such as (to be specified for each country in inception phase report):

- To support countries to undertake comprehensive situation analysis of the different components of their health systems (including financing and universal coverage issues);
- To support and facilitate the organization of a process for multi-stakeholder involvement in the country health policy dialogue process;
- To support countries to define NHPSP activities, interventions and their costs, aiming at health universal coverage;
- To support countries in the monitoring and evaluation of the implementation and management of their NHPSP;
- To support and facilitate mechanisms to capture population's opinion on health issues and priorities;
- To support countries to communicate national health sector improvements and results to the general public;
- To facilitate South-South (West Africa) learning and sharing of experience (inter country workshops, peer-reviews of plans, etc);
- To support and facilitate the development and implementation of the country IHP+ compact and the monitoring of the implementation;
- To facilitate the organization of the Joint Assessment of National Strategies (JANS) or equivalent agreed mechanisms, and related negotiations;

***Component 3:*** WHO's normative work on NHPSPs, technical coordination, reporting and management.