
EU-Luxemburg-WHO Universal Health Coverage Partnership:
Supporting policy dialogue on national health policies, strategies and
plans and universal coverage

Year 2 Report

Jan. 2013 -- Dec. 2013

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LE GOUVERNEMENT
DU GRAND-DUCHÉ DE LUXEMBOURG



Country: Mozambique

EU-LUX-WHO Universal Health Coverage Partnership

Date: March 2014

Prepared by: WCO Mozambique

Reporting Period: July (end of the inception phase)-December 2013

Main activities as planned in the Road Map.

Activities in the Road map reflects Health Financing areas in the Universal Health Coverage, namely:

1. Analytical work as basis for the HF strategy development, e.g. analysis of OOP and catastrophic expenditure, NHA report and NHA institutionalization, analysis of innovative financing mechanisms.
2. Capacity strengthening of different stakeholders (critical mass of staff to undertake sound HF policy analysis; awareness raising of parliamentarians)
3. HF strategy development: consultations, drafting, validation
4. Communication and visibility activities

Main activities achieved and progress made:

Activities started immediately after WHO inception Mission. The road map developed was discussed with Ministry of Health and other health development partners and was fully harmonized in a single Country roadmap to develop the Health Financing strategy in Mozambique. This process was officially launched in December 2013.

National Health Accounts exercise using 2012 data

A reference NHA team was trained on SHA 2011 and new Health Accounts Production Tool as well as a joint collaboration with HQ. The team comprised professionals from Ministry of Health (planning and programs) Statistics Bureau, Ministry of Finance and Research/Academic Institutions. Donors involved on this exercise includes UNAIDS and USAID. In the course of the training Government expenditure data was customized and a follow up matrix for completion was agreed upon, which included:

Data collection at Provincial level, expenditure by different diseases, contact with other providers to check what type of service they provide, number of health facilities, expenditures on medicine and medical goods, expenditures by diseases/functions and surveys(Donors, NGOs, Health Insurance companies, Employers).

Study on Incidence of Catastrophic health expenditures:

This study aims at contribute on generation of evidence on financial risk protection and will be used as analytical work to feed the development of Health Financing Strategy. It is a joint work between WHO and the National Statistics Bureau, through a DFC, and applies methodologies developed at WHO.

Following finalization of agreement the study team composed by professionals from Statistics Bureau, Ministry of Health and National Institute of Health was formed. The approved chronogram for 6 months implementation included key initial activities, namely understanding of objectives of analysis and of methodology and preparation of datasets which have been accomplished. Cleaned data sets will be sent for review and the analysis will then follow.

The subsequent steps include: consultation of preliminary findings, revision, review and validation of data prior to writing of main report chapter.

HF strategy development consultations:

In addition to activities reported above, the focal points have engaged with Health Financing Steering Committee on definition of its Terms of Reference and consensus building for the process. This involved meetings with partners, Ministry of Finance and MoH Units for sensitization and agreement on the most appropriate architecture for the process given its importance in the Institutional reforms outlined in the Health Sector Strategic Plan 2014-19. Partners Task force includes the World Bank, UNICEF, DFID, USAID and recently Swiss Development Cooperation. A workplan for the entire process was agreed and approved by the Ministry. With HQ support ToRs for various studies (analytical work) were completed to enable the Country office to initiate recruitment of consultant(s) or engage with specific experts networks(eg P4H) to support implementation of Health financing road map.

In addition, the following health policy and planning activities received heavy WCO support to the MoH:

- Set up a steering committee and a Technical working group to assess the ending NHPSP and develop a new ten year NHPSP
- Introduced the JANS tool to the ministry of health staff and local development partner representatives
- Carried out the JANS to assess and improve the quality of the new ten NHPSP

Please explain any changes in circumstances or programme implementation challenges encountered affecting the original plan:

Please provide information on activities eliminated, changed, added or postponed. Please list them and provide the reasons for each of them (obstacles encountered, remedial measures taken,...).

Activities selection were based on ongoing WCO Program Budget and taking in to account the remaining 6 months for closing of the biennium. With regards to analytical work (Health financing situation and Innovative financing studies) Terms of Reference were developed and agreed for recruitment of consultants in 2014.

Proposed modifications to Programme Road Map resulting from changes above:

If the changes above have implications for future work, please attach the new roadmap to this report and confirm that the changes have been discussed with the MoH and EU delegation.

No major changes to report as the implementation period was short and no activities were targeted for completion in 2013. An updated Road map harmonized with WCO Programme Budget 2014-15 will be proposed following regular consultations with Ministry of Health and EU delegation.

There will be general elections in October 15, 2014. It is unlikely that a HF strategy document will be validated before that, as decision-making will be postponed. There is thus need to change the approach. The time until October will be used to produce a maximum of analytical work in order to feed into the reflection process and in order to have data and results available once decisions are made.

Lessons learned:

Please describe the principal lessons learned during the first year of implementation of the Policy

Dialogue Programme:

1. High prioritization of activities in the Roadmap enabled successful implementation of the dialogue process. The consultation with Ministry of Health, other Government institutions (Ministry of Finance, Planning and Development) and other partners was very successful give the fact that there was an ongoing process of developing the Health Sector Strategic Plan for the next 5 year where Health Financing Reforms are among top priority.
2. Health financing is a top priority of the government. Nonetheless, the Ministry of Health seemed to be reluctant in pushing forward the UHC agenda.

Road Map and timeline for 2014:

Please list here the work plan activities as well as the time frame for those activities for the calendar year 2014

Please list the activities for 2014:

1. Capacity strengthening of steering committee members
2. Undertake a HF situation analysis and summarize core issues (incl. devolution, PBF, medical aid

- scheme for civil servants), and also explore various options (pros and cons) of user charge increases, SHI, CBHI, PHI regulation, oil revenues for health,
3. Undertake a study of "innovative" financing mechanisms
 4. Knowledge exchange/training for ministerial staff (MoH, MoF, MoLG, Mo Labour, Planning) and other representatives
 5. Develop talking points for MOH to be well prepare for dialogue with MOF
 6. Strengthen HF policy analysis capacity within the MOH/Directorate Planning and Cooperation (TA in MOH Directorate for Planning)
 7. Provide a HF course module at university
 8. Organize a series of consultation workshops for dissemination of NHA & Study findings and explore various HF options that strengthen efficiency and equity
 9. Other studies/workshop activities to support implementation/production of manuals
 10. Information provision and sensitization of the public
 11. Visibility activities: organize media/press coverage, webpage
 12. Evaluation

Visibility and communication

WHO Mozambique is increasingly focusing on visibility. The website of the country office has been updated and news about events and progress in the health sector are regularly being uploaded. This included an update on the National Health Account (link: <http://www.afro.who.int/en/mozambique/press-materials/item/5913-mozambique%E2%80%99s-national-health-accounts.html>).

A list of all posted news can be found via:

<http://www.afro.who.int/en/mozambique/press-materials.html>

Furthermore, WHO Mozambique has produced, printed visibility materials for partners, donors and the office. This includes printed info folders about our programs and our mission in Mozambique, information posters with photos and achievements in the health sector, and post cards with health statistics. These are all available in the WHO country office. WHO has been confirmed as the Vice Focal Health Partner in the Sector Wide Approach Coordination. This will ensure increased visibility in the future through leadership in the health sector and active participation in all health working groups advocating for Universal Health Coverage.

Preliminary impact assessment:

Please explain to which extent country level activities have already contributed towards achieving the overall programme objectives. Please demonstrate how WHO strengthened its role as facilitator/ convener of policy dialogue and contributed, through its sector expertise, to improved UHC (in its three dimensions) at country level. Where possible, please use short stories /field voices box / quotes (MoH, district level officials, health workers etc) / press releases to illustrate the impact and added value of the programme and WHO action in the policy dialogue process.

The EU_WHO program gave new impetus to WHO to continue convene by bringing the policy

dialogue on Health Financing as top priority with partners and Government Institutions (Health, Planning, and Finance) and act a key/lead role in the HF task force, where it ensures information exchange and coordination. The WHO country staff brings up critical and urgent HF policy themes on the agenda in its regular discussion with MOH (Department of Planning), namely BP review, health accounts, catastrophic health expenditure, review of HF options, and thus has helped to make the policy agenda move forward. There is now increased awareness of the need to have a sound and clear HF strategy document that spells out the Government's vision. The update health accounts for the year 2012/2013 will help monitor and evaluation progress towards UHC with respect to pooled government health expenditure and out-of-pocket expenditure

