

Year 6 Report (2017 activities)

An annex of the Specific Objectives (SO) and Expected Results (ER) has been prepared at the end of the document for your convenience

Country: Guinea Bissau

EU-Luxembourg-WHO UHC Partnership

Date: January 2, 2018

Reporting Period: 01-01-2017 to 31-12-2017.

Prepared by: Mie Okamura, HSS Adviser

SECTION I: RESULTS

Under the EU-LUX-WHO Partnership Guinea Bissau is enabled with key documents for policies, strategic planning and funding mobilization. The National Health Policy (NHP) 2017 was developed and validated by the Steering Committee in April 2017; The first version of the NHP was developed in 1993 and remained as a draft until the present day, therefore the an official document was needed to guide the national priorities. The new NHP 2017 is waiting for approval by the Council of Ministers and to be enacted by the Parliament.

The narrative document of the National Health Development Plan 2018-2022 – was developed and validated; The costing of the Plan is ongoing using the OneHealth Tool.

The country was also able to document and trace the health expenditure through the implementation of the National Health Accounts. This is the first exercise and continuous efforts have been done to mobilize funds to institutionalize the activity in a yearly basis.

Health sector coordination capacity was enhanced through the creation of Health Systems Strengthening Working Group under leadership of General Directorate of Health Systems Administration (GDHSA). New funding proposals as World Bank and EU are aligned with the mission and vision of the NHDPIII 2018-2022.

SECTION II: ACTIVITIES

Main activities achieved and progress made:

Please estimate **approximate percentage of achievement** for each roadmap activity.

Please note which activities were undertaken with the technical support of WCO, potentially in collaboration with existing initiatives of UN agencies, NGOs etc.

What are some concrete and visible outputs of Partnership activities (e.g. annual review report, plans and strategies, case studies, publications)?

Please relate all undertaken activities to SO I, SO II or SO III, to an expected result (ER1-ER6) and report progress on the indicators as per the roadmap. This can be presented in a table format or in bullet points.

SO I: To support the development and implementation of robust national health policies, strategies and plans to increase coverage with essential health services, financial risk protection and health equity.

ER 1: Countries will have prepared/developed/updated/adapted their NHPSP through an inclusive policy dialogue process leading to better coverage with essential health services, financial risk protection and health equity.

Roadmap Activity: Development of National Health Policy

100% of completion

Activities undertaken: WCO provided technical and financial support to the development and validation of National Health Policy (NHP) 2017. The document was validated on April 5th by Steering Committee (Comité de Pilotagem) after an inclusive and broad consultative process. The Committee was chaired by the Minister of Public Health and joined by Minister of Public Administration, Labor and Administrative Reform; Ministry of Defense; Secretary of State of Internal Affairs and WHO Representative in the presence of broad range of national and international stakeholders. This is the first NHP validated since 1993. The previous document remained as a draft until the present day. The new NHP 2017 is waiting for approval by the Council of Ministers and to be enacted by the Parliament.

Key Outputs:

National Health Policy (NHP) 2017 developed and validated

Roadmap Activity: Development of National Health Development Plan III – 2018 – 2022 (PNDSIII)

60 % of completion

Activities undertaken: Through EU-LUX-WHO Partnership technical and financial support was provided to the development of PNDS III; International consultant was hired and the narrative document was developed and validated by technical group; Costing exercise of the PNDS III has been carried out by an international consultant using OneHealth Tool and phase I and II is finished; Phase III is expected for the first month of 2018 followed by the M&E framework; ToR to develop M&E framework was drafted and shared among

Key Outputs:

Narrative document of National Health Development Plan III – 2018 – 2022 developed

partners.	
ER 2: Countries will have put in place expertise, monitoring and evaluation systems and annual health sector reviews.	
Non Roadmap Activity: Workshop on health employment and economic growth in the UEMOA space	100 % of completion
Activities undertaken: Resource was mobilized from WHO-HQ Office to organize the workshop on health employment and economic growth in the UEMOA space; The regional action plan was validated and country priority activities defined and budgeted. The plan will be discussed in Abidjan in January 22 to 24th.	Key Outputs: Country priority activities defined and budgeted
Non Roadmap Activity: <i>Improve health information capacity in Guinea Bissau</i>	5 % of completion
Activities undertaken: First meeting of Monitoring and Implementation of Research Results led by National Institute of Health was convened. WHO as the vice-president of the committee actively participated and Priority Health Research Agenda, use of knowledge and evidences, mapping strategies of research in health and 1st Epidemiology Conference was discussed.	Key Outputs: Monitoring and Implementation of Research Results Committee kicked off.
SO II: To improve technical and institutional capacities, knowledge and information for health systems and services adaptation and related policy dialogue	
ER 3: Countries requesting health financing (HF) support will have modified their financing strategies and systems to move more rapidly towards universal coverage (UC), with a particular focus on the poor and vulnerable.	
Roadmap Activity: Institutionalization of National Health Accounts	90 % of completion
Activities undertaken: Through EU-LUX-WHO Partnership technical and financial support was provided to the National Health Accounts - 2011 exercise; this activity started in the last quarter of 2016 and during the revision of the report WHO IST/WA signalized that important data were missing; Therefore additional funds were mobilized at IST/WA level to finalize the activity which was due on August 2017; Comments were addressed and final version of the report ongoing;	Key Outputs: Draft of the final report developed
Roadmap Activity: Provide technical support and collaboration among development partners	100 % of completion
Activities undertaken: In collaboration with other partners, WCO supported United Nations Integrated Peacebuilding Office in Guinea-Bissau (UNIOGBIS) to develop the "Right to Health in Guinea Bissau – 2017 – Report". Key recommendations were widely discussed with broad participation of Bissau-Guinean civil society and government.	Key Outputs: Right to Health in Guinea Bissau – 2017 - report developed;

In collaboration with UNFPA, supported Office of the High Commissioner for Human Rights (OHCHR) on developing a USD 1.8 million joint concept note in the context of the Gender and Youth Promotion Initiative - 2017 Peace Building fund (PBF) call for applications. The proposal was based, among others, on the findings of the report.	Concept note for funding mobilization developed and submitted;
Non Roadmap Activity: Provide technical support to the National Directorate of Universal Health Coverage (UHC)	100 % of completion
Activities undertaken: WCO provided technical and financial support to the newly created National Directorate of Universal Health Coverage (NDUHC); The NDUHC Director's office was enabled with basic equipment (computer, printer, data projector) for functioning; Joint visits with NDUHC members, WHO and UNDP to 11/11 health regions was undertaken; The new directorate was introduced to all regional directors, staff and some implementing partners at regional level as well as the importance of UHC; Data was collected to get a snapshot of the current health situation in different regions in order to develop strategies towards UHC in Guinea Bissau.	Key Outputs: 11/11 health regions visited
Non Roadmap Activity: Directors of Policy and Planning Meeting on Health Systems Development for Universal Health Coverage (UHC) and Sustainable Development Goals (SDGs).	100% of completion
Activities undertaken: AFRO provided financial support to the participation of General Directors of Health System Administration, Prevention and Promotion Programs and HSS advisor for in the meeting in Brazzaville. The meeting aimed to deliberate on how to take forward the Regional Actions Framework on strengthening health systems for UHC and SDGs defined during the Windhoek Forum and its recommendations.	Key Outputs: General Directors of Health System Administration, Prevention and Promotion Programs fully engaged
ER 4: Countries receiving HF support will have implemented financing reforms to facilitate UC.	
Roadmap Activity: None	% of completion
Activities undertaken:	Key Outputs:
ER 5: Accurate, up-to-date evidence on what works and what does not work regarding health financing reforms for universal coverage is available and shared across countries.	
Roadmap Activity: None	% of completion
	Key Outputs:
SO III: To ensure international and national stakeholders are increasingly aligned around NHPSP and adhere to other aid effectiveness principles.	
ER 6: At country level, alignment and harmonization of health aid according to national health plans is consolidated and accelerated.	
Roadmap Activity: Support MoPH – General Directorate of Health Systems Administration (GDHSA) to establish/strengthen the coordination mechanisms	10 % of completion

<p>Activities undertaken: As leader of the OG-3 health and nutrition subgroup, HHS adviser actively participated in the UNDAF – 2016 evaluation process and planning for the 2017 cycle. The UNDAF 2016-2020 is fully aligned with national priorities stated in the government strategic and operations plan 2015-2020 “Terra Ranka”.</p> <p>Supported MoPH on developing procedures and tools for partners mapping based on the “Resource Mapping Tool” to improve the coordination mechanism;</p> <p>In coordination with other partners, provided technical support to MoPH to review and update the current Global Fund budget and activities for 2018-2020 cycle. Funding request submitted to Global Fund as part of the Prioritized Above Allocation Request (PAAR) to support the institutionalization of National Health Accounts from 2018 to 2020 was approved to WHO and is to be mobilized.</p> <p>Supported MoPH on developing the investment plan for health as part of the Public Investment Program exercise - 2018;</p> <p>Developed a coordinated United Nations proposal for AIDS response under Unified Budget, Results and Accountability Framework (UBRAF);</p> <p>Technical support to MoPH to organize the 1st Health System Strengthening Working Group led by GDHSA. 15 participants from Government, private sector, civil society participated in the meeting. ToR of the working group was shared among stakeholders and mapping of strategies per partner following the six building blocks was started.</p> <p>WCO as vice-president of Multisector Coordination Committee (CCM) analysed and reviewed the updated version of CCM’s ToR developed by an international consultant.</p> <p>A draft of the ToR for the Comprehensive Institutional Assessment of MoPH was developed and shared among partners;</p> <p>HSS technical advisory is supporting the MoPH on developing the World Bank (WB) 24 million USD project for health (2018-2022) and EU 3 million EUR project for health system strengthening;</p> <p>WCO actively participated in the Health Sector Partners meeting convened in a bimonthly basis and hosted by World</p>	<p>Key Outputs: HHS adviser Appointed as OG3 health and nutrition subgroup leader;</p> <p>18 of 24 (75%) implementing partners mapped</p> <p>an amount of 90,049 EUR was approved.</p> <p>510.000 XOF plan developed</p> <p>48.000 USD proposal submitted</p> <p>HSS working group created;</p> <p>Updated ToR of CCM validated and approved;</p>
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<p>Bank;</p> <p>WCO has actively participated in the conference call with GAVI and country team held twice a month and hosted by UNICEF to discuss the progress of EPI activities; WCO also integrated and coordinated efforts with the international consultant sent by GAVI aiming to revitalize Inter-Agency Coordination Committee (CCIA).</p> <p>WCO has supported Health Sector Coordination Committee (HSCC) at regional level, mainly in the health regions under H4+ Initiative to discuss the quality of care and maternal mortality; however the Committee at central level has not convened due to the availability of Minister of Health as its president.</p> <p>WCO actively participated in the IHP+ 2017 monitoring cycle;</p>	
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Changes in circumstances or problems encountered that affected the original plan:

HHS advisor was hired under EU-LUX UHC Partnership and present on duty on April 3rd, 2017. In mid-July, 2017 AFRO informed WCO to update the roadmap as a basis for the 2017 funding allocation. In July 25th, 2017 an updated roadmap was submitted following the guidance. The activities in the original roadmap were implemented with the funds of 75.000USD received at the beginning of the Award in 2016, and the updated roadmap activities were partially implemented with regular funds and AFRO support.

Activities eliminated, changed, postponed

Roadmap Activity	Reasoning to eliminate/change/postpone activity

Activities added

<p>Added Activity 1: Organizational assessment of the General Directorate of Health Systems Administration (GDHSA) – procurement of fixed assets</p>	<p>80 % of completion</p>
<p>Activities undertaken: MoPH provided an office inside the building to HSS advisor work closely to GDHSA and national counterpart will work in the same room. Basic equipment and furniture needed to the office be fully functional; Procurement of equipment and furniture was finalized;</p>	<p>Key outputs: Procurement finalized to office be fully functional</p>
<p>Added Activity 2: Support MoPH to develop Human Resources for Health policy</p>	<p>0 % of completion</p>

Activities undertaken:	Key outputs:
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Lessons learned:

Please describe the principal lessons learned during the last 12 months of the implementation of the UHC Partnership.

The instability of the country's socio-political context with frequent changes at the MoPH leadership level and the lack of qualified human resources poses challenges to the fully implementation of the activities in the roadmap. WCO is making efforts towards continuous integration and coordination with a wide range of stakeholders to achieve the expected results.

Foremost, the buy in from the MoPH and excellent relationship with WCO has been crucial to the activities implementation and the director of GDHSA as the main counterpart of the HSS adviser has been a key player. His ability to listen, share ideas, build partnerships and manage resources has attracted attention of donors and financial partners in the country. However, the lack of human resources in his directorate and non-existence of Planning, Monitoring and Evaluation Unit has hindered the effective implementation of the activities. Therefore a rapid placement of technical staff has been considered as necessary to support GDHSA to move forward as well as a broad assessment of the Ministry of Health to review its structure and organigram.

The fact that the MoPH has provided an office inside the government building to the HSS advisor work closely is a great advantage for better communication and coordination and it has been greeted by the government counterparts.

Finally, the comprehensive support and collaboration from all development partners and other stakeholders has been an important component to fill the gaps and to achieve the results.

Visibility and communication:

Please give a short overview of visibility and communication events that took place and attach evidence: scanned newspapers, pictures, brochures, etc.; also if only available in the local language. Please describe how communication of the programme results to the public has been ensured.

SECTION III: IMPACT ASSESSMENT / RESULT CHAIN

Impact assessment / results chain:

The General Director of Health Systems Administration acknowledged that under the EU-LUX-WHO Partnership the MoPH could enhance the coordination capacity and improve the involvement of different stakeholders in different processes within the MoPH.

SECTION IV: ROADMAP 2018

Roadmap/timeline for 2018:

Please list here the work plan activities as well as the time frame for those activities for the calendar year 2018. **These activities should be related to SO's/ER's and have clear timeline and indicators.**

If applicable, we also advise you to define key milestones for each activity, to be able to report on key achievements/progress made on the road towards completion of an activity. In this regard, an 'activity' means a distinct output of the UHC Partnership program, meaningful in terms of the UHC Partnership's overall specific objectives and expected results, and constituted by a report, a document, etc. A "milestone" means control points within an activity that help to chart progress. Milestones may correspond to the completion of a key sub-activity, allowing the next phase of the work to begin. They may also be needed at intermediary points so that, if problems have arisen, corrective measures can be taken. A milestone may be a critical decision point within an activity where, for example, the consortium must decide which of several options to adopt for further development.

SO I: To support the development and implementation of robust national health policies, strategies and plans to increase coverage with essential health services, financial risk protection and health equity.

ER 1: Countries will have prepared/developed/updated/adapted their NHPSP through an inclusive policy dialogue process leading to better coverage with essential health services, financial risk protection and health equity.

Roadmap Activity: 1.1 Publication and dissemination of National Health Policy 2017

Roadmap Activity: 1.2 Support Ministry of Public Health (MoPH) on developing National Health Development Plan III (PNDSIII) 2018-2022, including costing, M&E framework and operational plan

Roadmap Activity: 1.3 Development of National Compact UHC2030

Roadmap Activity: 1.4 Support realization of Joint Assessment of National Strategy (JANS)

Roadmap Activity: 1.5 Support MoPH on implementation of PNDSIII 2018-2022

Roadmap Activity: 1.6 Update essential package of care

ER 2: Countries will have put in place expertise, monitoring and evaluation systems and annual health sector reviews.

Roadmap Activity: 2.1 Support MoPH to develop national HRH policy

Roadmap Activity: 2.2 Support implementation of Service Availability and Rediness Assessment (SARA)

Roadmap Activity: 2.3 Support realization of Joint annual Review (JAR): will be reported during CCSS 2nd meeting

SO II: To improve technical and institutional capacities, knowledge and information for health systems and services adaptation and related policy dialogue

ER 3: Countries requesting health financing (HF) support will have modified their financing strategies and systems to move more rapidly towards universal coverage (UC), with a particular focus on the poor and vulnerable.
Roadmap Activity: 3.1 Support MoPH on National Health Accounts (NHA) annual exercise
ER 4: Countries receiving HF support will have implemented financing reforms to facilitate UC.
Roadmap Activity: 4.1 Support advanced training on health financing for Universal Health Coverage
ER 5: Accurate, up-to-date evidence on what works and what does not work regarding health financing reforms for universal coverage is available and shared across countries.
SO III: To ensure international and national stakeholders are increasingly aligned around NHPSP and adhere to other aid effectiveness principles.
ER 6: At country level, alignment and harmonization of health aid according to national health plans is consolidated and accelerated.
Roadmap Activity: 6.1 Support MoPH (GDHSA) to establish/strengthen the coordination mechanisms
Roadmap Activity: 6.2 Support the operationalization of Health Sector Coordinating Committee (CCSS) - Health Summit
Roadmap Activity: 6.3 Provide basic office supplies and communication

Annex:

Specific Objectives and Expected Results of the EU-Luxembourg- WHO Universal Health Coverage Partnership

Specific objectives (SO)	Expected Results (ER)
<p>SO I. To support the development and implementation of robust national health policies, strategies and plans to increase coverage with essential health services, financial risk protection and health equity.</p>	<p>ER 1. Countries will have prepared/developed/updated/adapted their NHPSP through an inclusive policy dialogue process leading to better coverage with essential health services, financial risk protection and health equity.</p> <p>ER 2. Countries will have put in place expertise, monitoring and evaluation systems and annual health sector reviews.</p>
<p>SO II. To improve technical and institutional capacities, knowledge and information for health systems and services adaptation and related policy dialogue.</p>	<p>ER 3. Countries requesting health financing (HF) support will have modified their financing strategies and systems to move more rapidly towards universal coverage (UC), with a particular focus on the poor and vulnerable.</p> <p>ER 4. Countries receiving HF support will have implemented financing reforms to facilitate UC.</p> <p>ER 5. Accurate, up-to-date evidence on what works and what does not work regarding health financing reforms for universal coverage is available and shared across countries.</p>
<p>SO III. To ensure international and national stakeholders are increasingly aligned around NHPSP and adhere to other aid effectiveness principles.</p>	<p>ER 6. At country level, alignment and harmonization of health aid according to national health plans is consolidated and accelerated.</p>