



World Health Organization

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

Year 1 Report
Oct. 2011 – Dec. 2012



EUROPEAN UNION

Abbreviations

AFRO/IST	World Health Organization Africa Regional Office/Inter-country Support Team
CHPP	Country Health Policy Process
CoIA	Commission on Information and Accountability
EU	European Union
HPG	Health Partnership Group
HQ	Headquarters
IHP+	International Health Partnership
JHR	Joint Annual Health Review
JANS	Joint Assessment of National Strategies
M&E	Monitoring and Evaluation
MoH	Ministry of Health
MOHSW	Ministry of Health and Social Welfare
NHPSP	National Health Plan/Strategic Plan
NHSSP	National Health Sector Strategic Plan
NHSWPP	National Health and Social Welfare Policy and Plan
PHC	Primary Health Care
PND	Plan National du Développement Sanitaire
PNS	Politique Nationale Sanitaire
RO	Regional Office
SO	Specific Objective
TA	Technical Assistant
UC	Universal Coverage
UHC	Universal Health Coverage
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
WCO	World Health Organization Country Office
WHO	World Health Organization
WR	World Health Organization Representative

Country Report

Vietnam

Year 1 Report

EU-WHO Policy Dialogue Programme

Date: April 2013	Prepared by: WHO CO/RO/HQ
Reporting Period: October 2011 – December 2012	
Main activities as planned in the Road Map. <ol style="list-style-type: none">1. Strengthening the Ministry of Health (MOH) in its leadership role for convening stakeholders for policy dialogue at the national level.<ol style="list-style-type: none">1.1 Renewal of the Statement of Intent1.2 Support for the implementation of the SOI Milestones1.3 Support for Health Partnership Group (HPG) processes2. Monitoring and evaluation of 5-year Health Plan;<ol style="list-style-type: none">1.1 Strengthen the role of the Joint Annual Health Review (JAHR) as part of the monitoring process for the 5 year health plan3. Harmonization and alignment of sub-national planning with over-all national health planning and budgeting processes<ol style="list-style-type: none">1.1 Facilitate mechanisms to ensure consistency between sub-national and national learning processes;1.2 Strengthen planning and budgeting capacity at the sub-national level2. Support for preparation of next 5-year Health Plan<ol style="list-style-type: none">2.1 Document lessons learnt from the previous development and implementation of the plan2.2 Preparation for the next Joint Assessment of National Strategy (JANS) for the next 5 year plan)	
Main activities achieved and progress made: <p><i>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) Please describe expected outcomes, targets and specify partners What are some concrete and visible outputs of policy dialogue? (ex: annual review report, key</i></p>	

policy changes that may be under way as a result of the processes described; has there been or will there be any likely improvement in service delivery outputs?)

What are some concrete and visible outputs of other activities (linked to policy dialogue)?

1. Strengthening the Ministry of Health (MOH) in its leadership role for convening stakeholders for policy dialogue at the national level.

1.1. Renewal of the Statement of Intent

The first Statement of Intent was adopted in 2009. It adopted the principles of the Paris Declaration on Aid Effectiveness, the Accra Agenda for Action and the Hanoi Core Statement. The objective of the SOI was to bind the commitment of the HPG members for better harmonization and alignment of development aid, as well as greater use of country systems in the implementation of development programmes. The SOI was adopted in the spirit of mutual accountability but is not legally binding or enforceable.

In 2013, Viet Nam adopted the Viet Nam Partnership Document (VPD) which renewed the principles of donor coordination, aid effectiveness and development partnership in Viet Nam. The development of the VPD was premised on the need for Viet Nam to sustain its economic and development growth through a broader and more inclusive partnership in development. It localized the draws on principles of the Hanoi Core Statement & principles of the Busan Partnership for Effective Development Cooperation (BPD).

Upon this context, the HPG has collectively moved on the renewal of the SOI to contextualize the VPD in the health sector. In addition the renewal of the SOI will re-align the partner's commitment to the changing needs and continued strengthening of the health sector.

WHO plays a leading role in the renewal of the SOI in 2 aspects:

a) It supports the International Cooperation Department (ICD), the HPG secretariat to initiate the technical and administrative processes for the SOI. WHO has developed the framework for the SOI renewal, and supported ICD in the development of Terms of Reference (TOR) including the organization of the team which will start its work in June 1, 2013.

b) It coordinates the decision making processes in the SOI renewal within the HPG Core Group and the whole of HPG

The funding of this activity is supported by the development partners, such as, GIZ covered the team of consultants, while the series of consultation will be partly funded by WHO and the EU-WHO Policy Dialogue Programme. The EU Country mission has indicated possibility of additional funding for the consultations when

needed.

The expected outcome and visible output for this activity is a new Statement of Intent that reflects the principles of the VPD and the changing needs and development context of the health sector.

1.2. Support for the implementation of the SOI Milestones

One of the milestones under the 2009 SOI was the establishment of the Technical Working Groups (TWG's). In 2010, the HPG started to the (TWG's). The objective was to provide technical support to the policy dialogue in the HPG and at the same time to follow up implementation of recommendations and actions at the technical and operational level. The TWG's are organized around specific themes or topics, based on the expressed need of the government. They are expected to interact with departments and agencies within and outside the MOH which are working around these themes.

To date the TWG's include the following:

- a. Human Resources
- b. Health Information Systems
- c. Planning and Financing
- d. Reproductive Health Group
- e. Health Environment Management
- f. Medical Equipment
- g. Aid Coordination and Effectiveness
- h. Local Health Systems
- i. Pharmaceuticals

As of this date, the TWG's on Human Resources, Health Information Systems, Planning and Financing and Reproductive Health are actively meeting. The TOR for the TWG in Pharmaceuticals has been developed and the first meeting will be organized in the 3rd week of May.

WHO provides technical guidance and actively participates in the technical discussions and work of the HPG. In order to strengthen the role of the TWG's and the linkages to the policy discussions in the HPG, WHO is drafting a general guidance or framework for the operations of the TWG's. The EU under its ongoing Health Sector Capacity Strengthening Programme (HSCSP) provided consultants to start-up the operations of the TWG's.

The expected output of the TWG's include:

- a. Strengthened linkages of the key technical areas to the high level policy dialogue of the HPG;
- b. Availability of technical support, guidance and evidence for each of the policy

- agenda of the HPG;
- c. Initiated follow-up action for concerned departments, agencies and partners on key decisions and recommendations of the HPG;
- d. Technical guidance and coordination in the operationalization of recommendations at the technical and operational level

1.3. Support for Health Partnership Group (HPG) processes

The HPG is the main mechanism through which high level policy dialogue, donor coordination, aid effectiveness and partnerships are carried in Viet Nam's health sector. It is composed of around 26 international and bilateral development partners and government institutions working in the area of health.

The HPG is a government-led process. It meets every quarter with the agenda agreed between the MOH and the HPG. Each of the meetings is chaired by the Minister or a Vice-Minister and the co-chair is alternately taken on by heads of agencies (partner's side). Key policies and recommendations are discussed during the meetings which are then followed up through the TWG's or through individual departments of the MOH.

WHO performs the following roles and/or provides the following support to the HPG process:

- a) Support the MOH and coordinates among the HPG members on the development of the agenda and key topics for discussions during the HPG meetings;
- b) Convenes the partners for the pre-HPG meetings. These meetings serve as a venue for the partners to discuss and identify key issues that will be discussed with the government and policy options and proposals for action. In addition the collective stand or response of the partners to key issues/challenges and policies of the government are also discussed and agreed;
- c) Prepares the collective and consolidated response to the government on key issues and policies and coordinates the identification of partners who are interested to deliver individual responses on specific topics;
- d) Reviews the minutes of the HPG meeting prior to circulation to all partners;
- e) Coordinate follow-up action among the HPG members, TWG and concerned departments of the government.

In order to strengthen the effectiveness of the partner's support to the government and to ensure follow-up of actions, WHO this year, has initiated the following:

- a) Development of a short annual report (for 2012) of the HPG's contribution to the health sector;
- b) Development of a framework for the follow-up of the government's response and action on key recommendations or conclusions arrived at in the HPG meetings;
- c) Translating recommendations into key action areas and/or defining course of follow-through actions for partners and the government.

The expected output of the HPG meetings include:

- a) Strengthened coordination and aid effectiveness in the health sector;
- b) Enhanced policy dialogue among government and partners;
- c) Improved alignment, synergies and convergence of action in the health sector among partners and government;

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,...).

One of the initial challenges in the implementation of the programme was the delay in the approval process of the roadmap. Due to such delays, MOH has determined the order of priority for the activities as indicated in Annex .

The implementation of the activities in 2012 were slow and only 2 HPG meetings were undertaken instead of four (quarterly). By 2013 however, the HPG quarterly meetings have been put back on track. The first meeting was held in March 2013, and the second quarterly meeting is scheduled in 5 July 2013. In addition, all the activities in the prioritized workplan are now being implemented.

Proposed modifications to Programme Road Map resulting from changes above:

The activities in the road map have been prioritized by MOH as reflected in Annex hereof, and as mentioned above.

1. SOI renewal
2. Support for the implementation of new SOI milestones
3. Facilitate mechanisms to ensure consistency between sub-national and national planning processes (Assist development of processes for coherent planning processes between DPF and Provinces)
4. Strengthen planning and budgeting capacity at sub-national level (Link to EU-HSCSP)
5. Provincial HPG meetings
6. Development and publication of papers on HPG performance on aid effectiveness and other achievements

The reprioritization of the activities has been led by the MOH and agreed upon by the EU Country Mission.

Lessons learned:

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

1. The EU-WHO Policy Dialogue Programme (referred to here as Programme), has taken into account the existence of the HPG as a mechanism for donor coordination

and aid effectiveness, and that policy dialogue has been carried out through this mechanism. The Programme therefore should be used to strengthen government's ownership and capacity to lead the process and as a mechanism to strengthen the HPG process itself and to ensure broader participation and inclusiveness among partners.

2. It is important to maintain close communication and coordination across WHO (CO, RO and HQ) on the implementation of activities at the country level and in resolving issues and challenges in the implementation of the programme.
3. The regular meetings between WHO and the EU Mission at the country level has been very helpful in terms of the EU's support to WHO for leading this programme in the country and in improving the process of the policy dialogue.
4. The role of WHO is important, in terms of convening the development partners in health, providing technical support pertaining to key issues tackled in the policy dialogue and in providing operational support and guidance to the secretariat. In addition, the DP's looks at the role of WHO as the main coordinator of this process.
5. An effective policy dialogue draws upon a robust involvement of experts at the technical level which can support the development partners in the dialogue process, and to follow up how recommendations can be carried out both at the policy and operational level. This context has driven the establishment of the technical working group.
6. A meaningful policy dialogue can be achieved when goals are clear and when the partner's commitment to key guiding principles is clearly expressed. In the case of Viet Nam, this is done through the adoption of the Statement of Intent (SOI).

Road Map and timeline for 2013 (Refer to annex):

Please refer to Annex

Visibility and communication

Please give a short overview of visibility and communication events that took place and attach evidence (scanned newspapers, pictures, brochure,...). Please describe how communication of programme results to the public has been ensured

1. Launch of the EU-WHO Policy Dialogue Programme on the 28th of June 2012. A press release for the launching is attached in the Annex
2. Joint Annual Health Review (JAHR) Reports, which can be accessed at: <http://jahr.org.vn/>
3. The HPG website (<http://hpg.icdmoh.gov.vn/>)
4. Minutes of the regular meetings of the Health Partnership Group

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 aim of the collaboration is to build Viet Nam's capacity to develop, negotiate, implement, monitor and evaluate robust and comprehensive national health policies, strategies and plans, with a view of promoting universal coverage, people-centered care, and health in all policies. Making development cooperation in the sector more coordinated and effective is an essential contribution to this approach.¹

This goal has been successfully achieved through the EU-WHO Dialogue programme, primarily through the support to the HPG. The HPG has served as the primary forum and mechanism through which support to the government's priorities has been strengthened. This resulted into concrete outputs and policy directions which include among others:

1. The achievement of the MDG Goals, and the acceleration of the MDG's towards 2015. Partners have supported national assessments on the MDGs, multisectoral dialogue (beyond MOH) and mobilized funding to support programmes for the health-related MDG's.
2. Policy dialogue towards universal health coverage and assessment on inequities, which have led to key directions for the MOH and the One UN, World Bank, EU and other partners to focus resources and technical support to reach the vulnerable populations, ethnic minorities and hard to reach communities;
3. The ongoing development of the national comprehensive health information system which has been closely supported by members of the HPG. The technical working group on Health Information under the HPG has served as a strong technical arm for the development of the health information system.
4. A more robust and inclusive planning process between the national and sub-national levels has been facilitated.
5. The establishment of the technical working groups has driven the convergence of technical expertise among development partners to support the MOH in key issues such as health information system (mentioned above), planning and financing, human resources, and reproductive and maternal health.

WHO's role in the policy dialogue has been clearly demonstrated at three different levels:

- 1) Convening a high level policy dialogue among government and development partners;

¹ Press release: "EU-WHO Health Policy Dialogue Programme Initiated Today", 28 June, 2012, Hanoi, http://eeas.europa.eu/delegations/vietnam/documents/press_corner/2012/20120628_en.pdf

- 2) Serving as a leading technical agency in health and as a convenor in technical matters- where collaboration among technical agencies is needed. This include areas such us universal health coverage, health financing, pharmaceuticals, emergency surveillance and response, health systems strengthening, non-communicable diseases and primary health care among others;
- 3) Coordinating partners and providing operational support to the secretariat.

WHO in particular has been closely supporting the government on the policy dialogue in universal health care. In 2012, it organized a high level forum in collaboration with the government on UHC. The forum which served as the launching meeting of the UHC agenda was attended by the Regional Director of the Western Pacific Region, Dr Shin Young-soo, the Minister of Health of Viet Nam and other international experts. This was followed by a side event, on UHC during the WHO Regional Committee Meeting (RCM) in Viet Nam.

WHO continues to lead partners in the series of policy dialogue on UHC. It is also providing the leading support in the ongoing consultations on the revision of the Health Insurance Law and the Pharmaceutical Law.