

SCALING-UP FOR BETTER HEALTH (IHP+)

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HIGHLIGHTS

In this third issue of the Scaling-up for Better Health (IHP+) bi-weekly update, we profile Kenya, provide information on two important new initiatives related to IHP+, and summarize the UN Secretary-General's new MDG Africa Initiative.

COUNTRY PROFILE – KENYA



The Health Sector in Kenya operates under a broad Health Policy Framework that was launched in 1994. This policy has been implemented through successive 5-yearly National Health Sector Strategic Plans (NHSSP). The most current NHSSP II covers the period 2005 – 2010. This was used, in October 2005, to develop the concept of the Kenya Health SWAp, with a common planning, budgeting and implementation framework, and a common monitoring processes amongst all actors in the sector.

By the time of the launch of the International Health Partnership (IHP) in September 2007, these frameworks were underway and sectoral Annual Operational Plans are now being elaborated jointly with health development partners. Resources that are off budget and that can not be reflected in the Medium Term Expenditure framework are now captured in a “shadow budget”. Joint monitoring reviews are in place. The Government and its partners have elaborated a joint Code of Conduct instrument to guide the engagement of different actors in the health sector.

The Mid-Term Review of the NHSSP II is under way to review progress with implementation of the strategic objectives, highlight challenges, and make recommendations on how to improve implementation.

Not all partners in the sector were utilizing the coordination frameworks, and there needs to be wider buy-in to the use of the Kenya Health SWAp processes. The commitments made in the IHP are very opportune as they re-emphasized the need for better coordination, harmonization and alignment in line with Kenya SWAp and the Paris Declaration on aid effectiveness. After the launch of the IHP the government organized in-country briefings and discussions on IHP involving all key partners in the health sector. It was agreed by all parties concerned that the implementation of the IHP would be in line with ongoing country processes for alignment, and partnership strengthening. It was agreed that the Mid Term Review offered an excellent opportunity to assess the situation in the country in line with the issues and commitments in the IHP..

The MTR in 2nd week of November recommended strategies for accelerating the implementation of interventions for better health outcomes. These strategies together with their implementation matrix outlining milestones, resource requirements, roles and responsibilities of Government and its partners will provide the basis for the IHP compact for Kenya that will be completed in December 2007. The Kenya compact will therefore consist of:

- The status of implementation of NHSSP II objectives and key issues and challenges affecting the rate of implementation
- Key recommendations from the Mid Term Review
- Strategies for acceleration of implementation
- The implementation mechanism and matrix to guide follow up
- Resource implications

It has been agreed that financing of these strategies shall be prioritized by Government and partners during the remaining 2 and a half years of the NHSSP II. There is also now increased buy-in of other partners. Monitoring and review shall be done in the context of the normal sectoral monitoring and review processes and reports on progress shall be made as part of the normal monitoring reports of the sector.

Useful links: [Ministry of Health, Kenya](#) | [WHO Kenya](#) | [UNICEF Kenya](#) | [UNAIDS Kenya](#) | [World Bank Kenya](#)

NEW INITIATIVES TO STRENGTHEN NATIONAL HEALTH SYSTEMS

The Catalytic Initiative: On 26 November, the Canadian government announced \$105 million in funding to UNICEF for the International [Catalytic Initiative](#) to Save a Million Lives. Working with national ministries of health and other partners, UNICEF will use the funds to accelerate progress in building the capacity of national health systems to deliver essential primary health care services for children and pregnant women, and to reducing child mortality and illness.

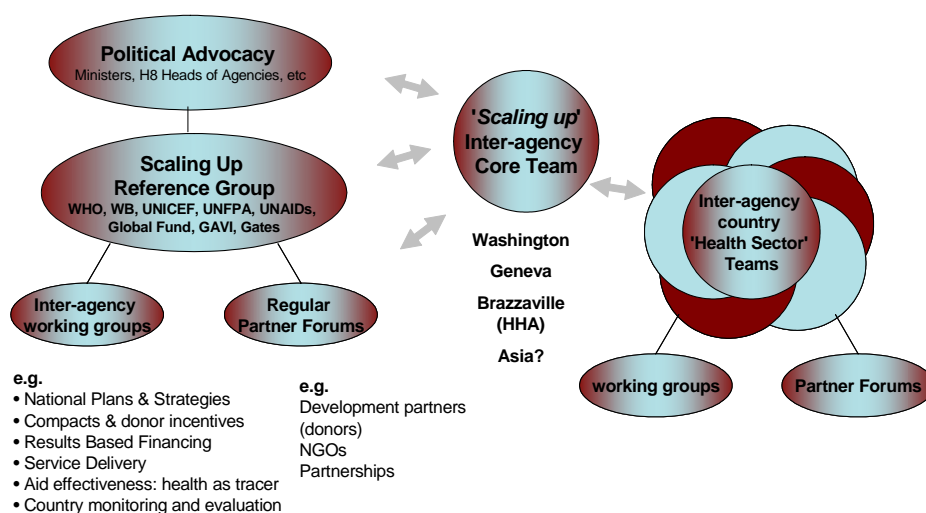
Innovative Results-Based Financing: Norway announced on 27 November a grant of US\$ 105m to the World Bank, to explore [innovative ways to improve health-care systems](#) in low-income countries - focusing particularly on maternal and child health. Prime Minister Jens Stoltenberg said, "Norway is investing a significant amount of money in the World Bank to help poor countries strengthen their health systems so that mothers can survive their pregnancies and safely deliver babies who live beyond their first weeks of life. We look to the Bank to champion greater use of financial incentives to improve care for women and children".

UN Secretary-General's MDG Africa Initiative

The UN Secretary-General recently launched the [MDG Africa Initiative](#). Three core objectives are: (i) Strengthening international mechanisms to support policy design and mobilize financing in health, education, agriculture and food security, infrastructure and trade facilitation, and statistical systems; (ii) Improving the predictability of aid; (iii) Enhancing the coordination of joint country-level work. WHO and UNICEF will coordinate the work of the thematic group on health, and provide the link to existing coordination mechanisms.

UPDATE ON IHP MANAGEMENT

International Health Partnership



IN-COUNTRY HEALTH SECTOR TEAMS: Most work will be taken forward by the inter-agency teams that already exist in countries, under the leadership of government, involving development partners, civil society and the private sector. Technical assistance to address constraints will be demand driven by country teams.

INTER-AGENCY CORE TEAM: The IHP+ Inter-agency Core Team, based in Washington, Geneva and Brazzaville, had its first face-to-face meeting in Geneva on 13-14 November. It will be responsible for coordinating the efforts of the international health agencies and support for country health sector teams. Its work will be overseen by the Scaling Up Reference Group, see 2nd IHP+ UPDATE.

HARMONIZATION FOR HEALTH IN AFRICA (HHA) On 23 November, Africa Regional Directors from the six regional agencies - WHO, UNICEF, UNAIDS, UNFPA, African Development Bank and World Bank - met in Nairobi to review progress in taking forward the Harmonization for Health in Africa Initiative, announced in 2006. They endorsed a [Concept Note](#), and wrote to all their country representatives, calling on them to work together to:

- Strengthen national health plans and strategies to support the achievement of the health MDGs and assist in their development where these do not already exist. The plans and strategies must be evidence based, results focused with clear targets, and must be costed.
- Identify and address health system bottlenecks for the scaling up of effective public health interventions.
- Strengthen national monitoring and evaluation mechanisms that track progress towards achieving the health MDGs.
- Align and harmonize donor and partner support for national strategies.

ROLE OF DONOR GOVERNMENTS:

Recent consultations with donor governments have clarified their role: To support the implementation of the IHP in country, as part of country sector teams, to hold multilaterals, GAVI and GFATM to account through their boards, to take part in regular meetings with members of SuRG, to provide financial and technical support to the global IHP+ work-plan.

COMING UP

- 13 December, 15.00 hrs GMT, video-conference with development partners
- 10-11 January 2008: Presentation of draft Country M&E Framework and implementation strategy, Geneva
- 29 Feb-1 Mar 2008: IHP+ country health sector team meeting (details to be confirmed)
- [Version Française](#) du 1^{er} bulletin - *Accroître les efforts et les ressources pour la santé (IHP+)* - now on the IHP website

What is a Country compact?

Dialogue continues across IHP first wave countries on the nature of these compacts, and a consensus is beginning to emerge. It encompasses a negotiated agreement between government, donors and other national stakeholders, covering:

- a focus on *national strategic plans* as a template around which to align national and external resources;
- identifying and mobilizing the resources to act on *health systems and agency constraints* for the achievement of more ambitious health outcomes – particularly in relation to the health MDGs;
- *better use of existing aid resources* through the application of the Paris Principles in the health sector; and
- *more effective accountability* between government, development partners and civil society.

Countries are at various stages in developing this compact, and timetables for the way forward are being agreed country by country.