
Case study: Humanitarian Development Nexus in Sudan

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Collective action for better health outcomes
- The humanitarian situation in Sudan remains *complex specially in Darfur region*
- Almost 5.5 million people are in need of *humanitarian assistance*
- A large number of organizations involved in delivering aid across the country
- Sudan *health system* is a three-tier system.
Humanitarian-Development Peace Nexus for health in Sudan

- HDPN for Health in Sudan – the **national** and **multi-sectoral** process
  - *Global policy developments; in-country national assessments* including the OCHA-donor mission to Sudan (October 2015), the Darfur Stock take organized by DFID & UNOCHA (December 2015); Sudan Health Partners Forum Nov 2016; New Way of Working and Coordination Mission – Sudan April 2017; From funding to financing Strategy Mission Report – Sudan May 2017; have *provided impetus to the HDPN approach* in Sudan.

- **Humanitarian aspect:**

- **Development aspect:**
  - National health policies and guidance; National Health Insurance Funds (NHIF), Health Financing, accreditation, Essential Packages of Health Services (EPHS), 2018-21 United Nations Development Assistance Framework (UNDAF) etc.
National Health Coordination Council
chaired by the Prime Minister

Health Sector Partners Forum
chaired by Federal Minister of Health

Oversight Committee
Technical Assistance and Resources Mobilization Committee
Health Emergency and humanitarian action coordination committee
Development Programmes steering Committee

Technical Committees
Country Coordination Mechanism CCM
Gavi HSS/ICC Committee
Scaling Up Nutrition SUN Networks
DHSS Technical Working Group
EU Technical Working Group

Executive Mechanism
chaired by the Federal Minister of health

Established in Nov 2016
Major challenges and opportunities in implementation of HDPN

• Challenges:
  – HRH: *distribution, brain drain, skill mix imbalance*
  – Out-of-pocket (OOP): *75.5% Household health expenditure*
  – About 42% of population, covered through *insurance schemes*
  – *Inequitably distributed health services* between and within states.
  – Some areas of *inaccessibility*
  – *Inadequate capacities* particularly, at sub-national levels (conflict and emergency affected states) with great variation between states;
  – Majority of health sector/cluster partners in conflict affected states are supporting only *emergency response*

• Opportunities:
  – High-level *commitments*
  – Development of a vision for Universal Health Coverage (NHP 2017 - 2030)
  – Existence of joint monitoring mechanisms (Joint Annual Review)
  – Development of a roadmap to implement Health in All Policies (HiAPs)
Humanitarian-Development Peace Nexus for health in Sudan

- **Collective outcomes (COs) in Sudan**: Provides preliminary Strategic Vision and set of Collective Outcomes and COs 2&4 addresses access to basic health services and DRR; SDG3, UHC and health systems resilience as CO; Alignment with National Health Policy 2017-2030; Health in all policies; and Risk Management for all hazards, including health security.

- **Coordination/partnership**: Current coordination architecture at the Federal and State level provides links between humanitarian and development agencies.

- **Proposed elements for HDNP in health**: Benefit package (accreditation) and health financing with social & financial protection (insurance), priority health programs such as MCH, address HRH challenges during transition, all hazard risk management and IHR core capacities.

- **Roadmap for implementation**: Agreement on priority states & localities with integrated approach to all vulnerable groups

- **Funding; Capacity development; and Commitment to humanitarian principles & principles for Aid Effectiveness**
Collective action for better health outcomes

Collective Outcomes – Sudan

<table>
<thead>
<tr>
<th>Sudan Response Plan / Framework / Strategic vision</th>
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<tr>
<td>Mutual Accountability Framework (all stakeholders)</td>
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<tr>
<th>EMERGENCY RESPONSE (immediate life-saving)</th>
<th>COLLECTIVE OUTCOMES (2022)</th>
<th>FULL-FLEDGED DEVELOPMENT</th>
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<tbody>
<tr>
<td>Sudden onset</td>
<td>Collective outcome 1</td>
<td>Elements of UNDAF / National Development Plans</td>
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<td>• Flash Appeals</td>
<td>Collective outcome 2</td>
<td>Full fledged development with no link to humanitarian response</td>
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<td>• Ref. Resp. Plan</td>
<td>Collective outcome 3</td>
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<tr>
<td>• CHF / CERF</td>
<td>Collective outcome 4</td>
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<td>Conflict areas</td>
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<td>Predictable</td>
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<td>• Recurrent droughts, floods, epidemics</td>
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Collective outcomes will encompass protracted humanitarian needs that are currently under HRP but that require a longer-term approach and financing to be adequately addressed as well as elements of the UNDAF that are not purely development. An overarching framework/plan/strategic vision coupled with a Strategic Multi-stakeholder Forum (working title) will ensure timely graduation from emergency response to and absorption by longer-term approaches.

CROSS-CUTTING
What clusters can do to implement the HDPN

Heath Cluster can:

- **Encourage** health development partners (HDPs) to join health cluster/sector and invite HDPs at the monthly health cluster/sector coordination meeting, both at the Federal and State level.

- **Sensitise** in-country health cluster/sector partners including donor agencies in addressing the DRM for Health (DRM-H) focussing on prevention, preparedness, response and recovery, not just stick to response.

- **Refer** specially MYHS and UNDAF while developing the HNO and HRP.

- **Build capacity** of National NGOs to engage in the cluster work

- **Engage** various directorates of the Ministry of Health (MoH) and other relevant ministries to work with the health sector/cluster.

- **Work closely** with WCO’s various teams specially Health Systems Strengthening, and WHE to support the MoH in implementation of HDN.

- **Encourage Member States** to adopt New Ways of Working (One plan); focus on Universal Health Coverage; and address Health in All Policies.
Thank you for your attention

Please visit : http://www.who.int/health-cluster/countries/sudan/en/