Annex 1: Country PRSPs reviewed

Full PRSPs


- Niger Full Poverty Reduction Strategy Niamey, January 2002

Interim PRSPs

Annex 2: Framework questions used for the review

Poverty context
- How does the PRSP define poverty?
- Is health a factor within the definition of poverty?
- Does the PRSP draw on findings from a qualitative poverty assessment (QPA)?
- Are the poorest geographical regions identified?
- What particular groups of people are identified as poor?
- Is gender identified as a social dimension of poverty?

Poverty and health
- Is poverty recognized as a cause of ill-health?
- Is ill health recognized as a cause of poverty?
- Is better health recognized as a means of poverty reduction & economic growth?
- Is better health, implicitly or explicitly, one of the principle strategies of the PRSP?

Overall objectives
- What are the overall objectives of the strategy and how are they subdivided into pillars of themes?
- Is the health strategy budgeted and what level of detail is presented?

Health components
The review addressed health issues through the following four sections extracting information, strategy objectives and indicators from PRSPs. It then analyzed this information using the questions in Box A.

1. Communicable and noncommunicable diseases of the poor (including HIV/AIDS, malaria, TB and other diseases)
2. Health-related sectors (including water and sanitation, nutrition and health-related education).
3. Maternal and child health (including reproductive health, population and fertility; infant and child health).
4. Health services (including non-financial and financial constraints to health care; quality, management and regulation; extent of non-state provision and formal health care charges).

The framework also asked, Are there strategies in other sectors that will have an impact on health

Box A: Outline of analysis
- Quantity, detail and depth of data
- Coherence and consistency of strategy
- Are the named poorest regions targeted in the health strategies?
- Are the named poorest groups targeted in the health strategies?
- Are poor women’s health needs identified?
- What’s missing?
outcomes? (e.g. education; environment; food security; occupation/livelihood tasks). In particular:

- Does the health ministry have a role?
- To what extent are poor people targeted?

**BOX B: targeted health issues**

- HIV/AIDS
- Smoking
- Other communicable diseases
- Reproductive health
- Child health
- Financial barriers to health care
- Improvement of water and sanitation
- Nutrition
- Reallocating resources to poorer regions
- Reallocating resources to lower tiers of health delivery system

In order to generate a summary information sheet, the health issues in Box B were specifically targeted for analysis through the following questions (answered yes/no):

(a) Is it addressed in strategy?
(b) Is it targeted at poor/vulnerable groups and/or poor regions?
(c) Is there a monitoring indicator identified to measure progress?
(d) Are the indicators linked to the MDGs?
(e) Is the pro-poor targeting reflected in monitoring indicators?
Bibliography


