COUNTRY REPORT ON COMMISSION ON INFORMATION AND ACCOUNTABILITY ON WOMEN’S AND CHILDREN’S HEALTH, THE GAMBIA

2013
Contents

Background ........................................................................................................................................ 2
Proceedings ........................................................................................................................................ 2
The National COIA task force members ......................................................................................... 3
Key priorities .................................................................................................................................... 3
Civil Registration and Vital Statistics ............................................................................................... 3
Maternal Death Surveillance and Response ...................................................................................... 4
e-Health and Innovations .................................................................................................................. 5
Tracking of Resources ..................................................................................................................... 5
Monitoring of Results ...................................................................................................................... 5
Annual and other reviews .................................................................................................................. 5
Advocacy and Outreach .................................................................................................................... 5
Recommendations from the Workshop ............................................................................................ 5
WHO Involvement ............................................................................................................................. 6
Other stakeholder/partner involvement ............................................................................................. 6
Countdown to 2015 ........................................................................................................................... 6
Appendix A: Agenda ........................................................................................................................ 6
Appendix B: Next steps ...................................................................................................................... 6
Appendix C: Governance ................................................................................................................... 6
Background

In September 2011, the UN Secretary General Dr Ban Ki-Moon released report from the Commission on Information and Accountability for Women's and Children's Health. The Commission gives ten recommendations to strengthen accountability for resources and results. The Commission's work draws on the IHP+ work on endorsing the principles of national leadership and ownership of results, strengthening country capacity in monitoring, evaluation and review, and reducing the reporting burden.

The Gambia participated in the multi-country workshop which was held in Harare, Zimbabwe 1st-3rd October 2012. A draft roadmap was developed to implement the accountability framework according to country specific needs and priorities.

The recommendations have been translated into a strategic work plan in identified priority focus areas for better information and more accountability: monitoring of results; strengthening use of ICT; resource tracking; registration of births and deaths and causes of death; maternal death surveillance and review, national mechanisms for reviews and for advocacy. Participants reviewed and finalised the draft four year roadmap on COIA.

The Gambia Roadmap aims to improve the health of women and children as well as strengthening the health system as a whole

Proceedings

The meeting was officially opened by the Program Manager Reproductive and Child Health Programme Unit Ministry of Health & Social Welfare. The representative of WR Mr Momodou Ceesay, the National professional officer for health economist from WHO country office presented on the progress made towards achieving MDGs 4 and 5 and country’s commitment to global strategy for women’s and children’s health. Participants came from the Ministry of Health and Social Welfare, Gambia Bureau of Statistics, Ministry of Justice, World Health Organization, UNICEF, UNFPA, CSOs and representatives from all the health regions of the country. Plenary presentations on the background were made by the Country Team that attended the COIA meeting in Zimbabwe.

Following the Harare workshop, a National Stakeholders’ Workshop was held September 2013 in Banjul, The Gambia with the following objectives:

1. Present results of the assessment performed at the COIA Multicounty Workshop; including background documents (COIA report, Country commitments, and draft actions)

2. Present the draft roadmap 2012 for review and update
3. Discuss priority actions for the roadmap;

4. Finalize roadmap and budget activities (include catalytic resources of $250,000 and in country resources) & submit (WHO / HQ through Regional Office).

**The National COIA task force members:**
Convenor: Bakary Tijan Jargo (Co-chair WHO/The Gambia)

1. Civil registration and vital statistics
   - Mr Omar Ceesay
2. Monitoring results
   - Mr Bakary Tijan Jargo
3. Maternal, new-born and child health (RMNCAH)
   - Bafoday Jawara
   - Bakary Tijan Jargo
4. eHealth and innovation
   - Mr Nfamara Keita
5. Tracking resources
   - Mr Momodou Ceesay
   - Mr Vincent Mendy
6. Annual reviews
   - Mr Yero Bah
   - Mr Momodou Ceesay
7. Advocacy
   - Mr Yero Bah
   - Mr Fabakary Kalleh

**Key priorities:**

The draft country roadmap was reviewed with stakeholders in line with the recommendations of the Commission on Information and Accountability for Women’s and Children’s Health. During the process of developing the roadmap, the participants were grouped under the following sections to finalize the draft roadmap:

1. **Civil Registration and Vital Statistics**

   **Strengthening Civil Registration and Vital Statistics (CRVS)**

   The meeting came with the following priorities:

   Conduct a full CRVS assessment and develop an improvement plan; strengthen community reporting of births and deaths and implement innovative approaches; and strengthen the analytical capacity of vital statistics office, including data quality assessment. To address these, the following actions are proposed:

   - Apply a full assessment tool and develop an improvement plan;
   - Short list of variables for births and death reporting should be identified using Health metrics network WHO generic tool.
   - Training of staff in data analyses
CRVS assessment: There are challenges associated with the CRVS system (e.g. Inadequate skilled personnel to establish the cause of death, socio-cultural barriers on death reporting) focusing on registration of births, deaths and causes of death. Conducting a full assessment of the system is recommended by the workshop.

Registration of births and deaths in facilities, International Classification of Diseases-10 (ICD-10 coding): The Workshop suggests that the capacity of HMIS should be strengthened in collecting health information by instituting electronic reporting system in hospitals and by establishing linkages for registration of births and deaths. Furthermore it is suggested to conduct training on electronic reporting on ICD 10 coding for hospital staffs, and training of medical records officers from health facilities on reporting of births and deaths.

It was recommended to strengthen community reporting of births and deaths by implementing innovative approaches including ICT techniques (e.g. use of mobile phones) and training of the public health officers to computerize all registrations. A need for improving community reporting through use of Verbal Autopsy (VA) by training of more MDFTs PHOs and other community workers was recommended.

2. Maternal Death Surveillance and Response (MDSR)

There is no routine MDSR system in place but maternal death audit/reviews are conducted in some facilities. The workshop recommended the following priority areas:

- Establish facility, referral and national MDSR Committees.
- Review and update data collection tools for MDSR.
- To strengthen hospital/health facility capacity and practices, including the private sector in MDSR.
- Institute and enforce MDSR system in all hospital/health facilities both public and private facilities and include maternal death as a reportable condition
- To develop/strengthen Verbal Autopsy (VA) for maternal deaths in communities.
- To support and strengthen review system including dissemination and use of the report.
- Institutionalize routine reviews/audits and training on VA at community level.
- Conduct quarterly facility (Hospitals, and Major Health Centers) and community maternal death audit review meetings
- Conduct quality of care assessment every two years and dissemination findings for planning
- Training of trainers on maternal death audit, ICD 10 and verbal autopsy. This is to be followed by Regional and facility training.
- Conduct quality of care assessment every five years and dissemination findings for planning.

3. e-Health and Innovations
E-Health is a cross-cutting issue. It relates to many other subjects, like electronic gathering of information through the HMIS, electronic tools for reporting births, deaths or doing Verbal Autopsy in communities.

It was recommended by the Workshop to develop national e-Health strategy plan with country leadership and broad buy in from stakeholders. Further to ensure leadership commitment and manage the process leading to development of a national e-Health strategy.

The meeting recommended situational assessment to inform next steps and to develop and support a strong effective coordination and governance mechanism, including CSOs, media and development partners. It further it recommends to establish a national steering Team for e-Health, strengthen analytical capacity, and compilation of statistics with data quality assessment from health facilities.

4. Tracking of Resources

Stakeholders suggested at the workshop for the strengthening of the NHA framework, by setting up a steering committee. It was recommended, at the meeting, to train staff on system of health accounts 2011 with technical support from WHO. The recommendations include:

- Develop/strengthen database for production of NHA
- Strengthen analytical capacity on the use of the SHA in MohSW.
- Train MOH&SW staff on NHA and system of health accounts.

5. Monitoring of Results

It was recommended to develop a comprehensive M&E plan and to conduct annual facility survey for data verification and service readiness as top priorities. Furthermore it was recommended to review the M&E component and a sample survey of all health facilities based on WHO/IHP+ standard instruments.

6. Annual and other reviews

National reviews will be institutionalized with the IHP+ mechanism which The Gambia has become a member. There is a need to strengthen the capacity of health staff to prepare analytical reports prior to the reviews. This can be achieved through training workshops including field visits and data analysis.

7. Advocacy and Outreach

Parliamentarians should be engaged in Reproductive, Maternal, Newborn and Child Health (RMNCH) accountability, especially on financing, support, capacity building of civil society to synthesize evidence and disseminate messages. The UN agencies (H4+) and other partners encouraged/support national stakeholder to plan national countdown. This can be achieved by orienting parliamentarians on RMNCH, accountability and financing, giving training, research and advocacy, and by forming a countdown committee.
Recommendations from the Workshop:

The workshop proposed to establish a Steering Committee on CoIA to take the work further. The Steering Committee will include the members of the team that attended the CoIA Workshop in Harare, the Planning Committee for the Workshop as well as representatives from other stakeholders, e.g. from the Civil Society Organizations.

The Director of Health Services to consider establishing an Independent Monitoring Group to oversee the progress on the CoIA roadmap. Such a group may also oversee the progress on the recommendations on Life-Saving Commodities. A TOR will be developed for the various committees.

WHO Involvement:

WHO will continue to provide technical support, facilitate the release of the COIA catalytic funds and mobilize resources with other UN agencies for the implementation of the country roadmap.

Other stakeholder/partner involvement

It was recommended that the involvement of the wider stakeholders throughout the processes is crucial. Partners should share their expenditure on health with the MOH&SW. Private/donor funding may be substantial component of the country's health financing. Hence, it is important to include them in the data used to guide the policies and priorities of the MOH&SW.

Countdown to 2015

UN agencies (H4+), and other partners are committed to support national stakeholders to plan a national Countdown. It was recommended to organize annual national countdown meetings and prepare Countdown report.