AFGHANISTAN
The CCF works well even in an unstable situation for Human Resources for Health (HRH)

Country Coordination and Facilitation (CCF)

Moving towards well-organised stakeholder coordination through the CCF process

Coordination mechanisms previously used to develop HRH strategies

Challenges
- Adverse security situation due to war and conflict;
- Multiple partners with complex relations;
- Sustained coordination and engagement of stakeholders;
- Conflicting interest of stakeholders;
- Sustainability of the CCF activities;
- Weak institutional capacity;
- Competing priorities against limited resources;
- Multiple partners with complex relations;
- Adverse security situation due to war and conflict;
- Political commitment and national ownership is key for successful CCF implementation;
- The CCF brings diverse stakeholders on a common agenda;
- The GHWA role is essential in initiating the CCF process.

Lessons Learnt
- The CCF can be implemented even in fragile and unstable situations;
- Political commitment and national ownership is key for successful CCF implementation;
- The CCF brings diverse stakeholders on a common agenda;
- The GHWA role is essential in initiating the CCF process;
- There are 2.2 times more health workers per 10,000 population in rural areas, compared with 3.2 in urban areas.
- There are 0.45 health workers per 1000 population in rural areas.
- There are 0.3 health workers per 1000 population in rural areas.

Way Forward
- Improve skills of stakeholders on the CCF;
- Improve coordination among the stakeholders;
- Address gaps identified through stakeholder analysis;
- Bring all stakeholders around the broad HRH agenda through the HRH forum;
- Improved coordination among the stakeholders;
- Improved skills of stakeholders on the CCF;
- Develop an evidence-based comprehensive and costed HRH plan.