

IDS Health & Development Information

one of a family of knowledge services from the Institute of Development Studies, Sussex, UK

[Health Resource Guide](#)
[Health Systems Resource Guide](#)
[HIV and AIDS Resource Guide](#)
[id21 Health](#)

HEALTH SYSTEMS REPORTER: focus on aid architecture in health

26 June 2007

produced by the [IDS Health and Development Information](#) team in collaboration with [Eldis](#) and the [DFID Health Resource Centre](#)

This is our monthly email bulletin, bringing together research to inform policy debates on health in developing countries.

The Health Systems Reporter aims to provide readers with a more in-depth look at a particular area of health policy. This month's theme is on [aid architecture in health](#). The bulletin also features summaries of new documents and other additions to the [Health Systems Resource Guide](#).

[Health Systems Reporter archive](#) - an archive is now available on the Health Systems Resource Guide. See previous issues of the Health Systems Reporter at www.eldis.org/go/topics/resource-guides/health-systems/health-systems-reporter

All documents listed below are available free on the web. If you are unable to access any of these materials online and would like to receive a copy of a document as an email attachment, please contact r.wolfe@ids.ac.uk.

Contents:

- [Feature: aid architecture in health](#)
- [Recommended readings on aid architecture in health](#)
 1. [Aid effectiveness and health](#)
 2. [The Global Fund operating in a SWAp through a common fund: issues and lessons from Mozambique](#)
 3. [TB and malaria: trends in donor funding](#)
 4. [Which Way the Future of Aid? Southern Civil Society Perspectives on Current Debates on Reform to the International Aid System](#)
 5. [Financial factors affecting slow progress in reaching agreed targets on HIV/AIDS, TB and Malaria in Africa](#)
 6. [Effective development assistance: a guide to aid instruments](#)
- [Other documents from the health systems resource guide](#)
 1. [Strengthening of health systems for equity and development in Africa](#)
 2. [Learning from experience: health care financing in low- and middle-income countries](#)
 3. [A review of non-financial incentives for health worker retention in East and Southern Africa](#)
 4. [Global Drug Facility achievements report](#)

5. [Joint statement on community-based management of severe acute malnutrition](#)

- [Announcements](#)

Feature: aid architecture in health

In recent years donors have committed substantial additional resources towards scaling up efforts to achieve the health related Millennium Development Goals. With this additional funding, there is also growing consideration about the effectiveness and impact of the institutions, systems and tools used to structure and deliver aid - the aid architecture in health.

Aid architecture has become increasingly complex with the emergence of new channels of funding such as global health partnerships and foundations. The proliferation of donors, along with changing trends in instruments used for delivering money (e.g. direct and sector budget support, financial aid, technical cooperation) have contributed to the challenges that donors and recipient countries face towards improving the effectiveness and impact of aid.

Challenges include deciding which combination of channels and instruments will best generate improved health outcomes for poor people; ensuring that financing is sustainable; maintaining a focus on health systems; and assessing performance at country and global levels.

Improvements in aid delivery are likely to come through mechanisms to improve collaboration and division of labour within and between donors and recipients, rather than major and radical reform of the overall architecture. The 'Paris Declaration on Aid Effectiveness' is an important framework for strengthening the performance of donor agencies and measuring the impact of aid. Its key principles are ownership, alignment, harmonisation, managing for results and mutual accountability. These can help ensure that aid fits better with national priorities and existing health systems, making it more likely to impact positively on health and development objectives.

Many thanks to Clive Gabay from the DFID Health Resource Centre for writing this introduction and selecting key readings.

For more information see:

- Health systems resource guide section on health sector financing
www.eldis.org/go/topics/resource-guides/health-systems/health-sector-financing
- Aid resource guide section on aid effectiveness
www.eldis.org/go/topics/resource-guides/aid/aid-effectiveness
- HLSP Institute section on aid effectiveness
www.hlspinstitute.org/aideffectiveness
- Governance and Social Development Resource Centre section on aid instruments & aid effectiveness
www.gsdr.org/go/topic-guides/aid-instruments-and-aid-effectiveness

[Back to list](#)

Recommended readings on aid architecture in health

Aid effectiveness and health

Authors: R. Dodd; G. Schieber; A. Cassels
Publisher: World Health Organization, 2007

This paper discusses the key challenges in the provision of more effective aid for health. It examines the complexities of the health sector, the challenges to making aid effective and recent efforts to address these issues. The paper demonstrates that aid effectiveness is particularly challenging in health, partly because of the inherent

complexities of the sector itself. It highlights the Paris Declaration, as an important approach for improving aid effectiveness in health. The Paris Declaration lays down a roadmap to improve the quality of aid and its impact on development. Its key principles include: ownership; alignment; harmonisation; managing for results; and mutual accountability.

The paper concludes that creating an effective aid architecture in health helps make the case that 'aid works' and should leverage further resources for the sector. A key challenge is to demonstrate the link between the aid effectiveness agenda and better health outcomes. The authors recommend that efforts are needed at the country level to develop instruments for mutual accountability between donors and countries. These efforts should be initiated by the health community, but look beyond the sector and aim to ensure alignment of health strategies and goals with other development objectives.

Available online at: www.eldis.org/go/topics/resource-guides/health-systems&id=31984&type=Document

[Back to list](#)

The Global Fund operating in SWAp through a common fund: issues and lessons from Mozambique

Authors: C. Dickinson, J. Martinez, D. Whitaker and M. Pearson

Publisher: HLSP Institute, UK, 2007

This policy brief, published by HLSP, presents the main lessons learned from integrating the Global Fund with broader health sector support and pooled funding arrangements. It is based on a review of literature, key informant interviews and a country visit to Mozambique. The paper examines how the Global Fund model is adapting to country systems and suggests conditions that are conducive to the integration of the Global Fund into a Sector Wide approach (SWAp). These include: the existence of a clear Code of Conduct and of harmonisation mechanisms; relatively robust and transparent reporting and accounting systems; an improving monitoring and evaluation system; positions of influence of all sides occupied by individuals with the leadership, vision and determination to pursue this agenda.

The authors conclude that alignment of global programmes' activities (such as the Global Fund) with national development strategies is essential for effective implementation. Coordination mechanisms should support an agreed sector strategy and strive for inclusiveness if aid is to be made more effective. Although the specific factors conducive to integration of funds are determined by country context, the Mozambique experience is a good example of how global programmes with a unique business model can fit with country led harmonisation and alignment arrangements. [adapted from author]

Available online at: www.eldis.org/go/topics/resource-guides/health-systems&id=31995&type=Document

[Back to list](#)

TB and malaria: trends in donor funding

Publisher: HLSP Institute, 2006

This technical brief considers the implications of increasing donor assistance for tuberculosis (TB) and malaria. Based on three recent studies, the brief considers key questions: is funding for communicable diseases increasing; how is the support through global health partnerships (GHPs) impacting on the overall allocation of development assistance; are global processes undermining country level processes; what are appropriate governance arrangements; and is funding being channelled to countries and people in the greatest need, and to the most cost-effective interventions?

The authors argue that although GHPs have resulted in additional resources for TB and malaria programmes they have still been unable to provide enough financial means to deliver even a basic level of services. Donors will need to decide how to channel their support between competing mechanisms and uses. For instance, should donors focus their efforts on GHP expansion or should they put assistance into budget or sector support? Key factors in this decision will include: overall performance of GHP; specific programmes or directions being promoted by the GHP; extent of existing funding imbalances; the merits of country versus global funding approaches; and the political fallout from not supporting or reducing support to a particular GHP.

Available online at: www.eldis.org/go/topics/resource-guides/health-systems&id=23448&type=Document

[Back to list](#)

Which way the future of aid?: southern civil society perspectives on current debates on reform to the international aid system

Authors: A. Rocha Menocal; A. Rogerson

Publisher: Overseas Development Institute, London, 2006

Drawing on comments made by southern civil society organisations (CSO) representatives involved in the project, this working paper aims to provide an analysis of the forces shaping the structure and operations of the international aid system. It examines current (mostly northern) perceptions of problems inherent in and reforms necessary to the aid architecture, and explores southern responses to this, focusing particularly on views and proposals from CSOs based in the South.

The authors argue that in recognition of the failure of official development assistance (ODA) to produce better and more sustainable developmental outcomes over the past few decades, donors have come to reconsider their engagement with poor countries. A new paradigm of 'effective aid' has emerged that, at least in principle, is based on the concepts of country ownership, a compact between donors and recipient countries to work in partnership to promote development, and mutual accountability.

The paper additionally argues that encouraging southern CSO engagement in the 'effective aid' debate is essential, against the backdrop of the future scaling-up of aid and the consequent need for a more responsive and appropriate way to address the needs of the poor. [adapted from author]

Available online at: www.eldis.org/go/topics/resource-guides/health-systems&id=22326&type=Document

[Back to list](#)

Financial factors affecting slow progress in reaching agreed targets on HIV/AIDS, TB and Malaria in Africa

Authors: C. Atim

Publisher: African Union , 2006

This paper, written for the Special Summit of African Union on HIV/AIDS, Tuberculosis and Malaria in May 2006, assesses the financial factors affecting the slow progress in reaching agreed health targets in Africa. The author finds that most African countries are spending very low amounts on health. Consequently, out of pocket spending is especially high. The author outlines how increased public health spending is necessary not only to reduce out of pocket expenditure but also to achieve the international health targets, such as the Abuja Declaration, the Commission on Macroeconomics and Health (CMH) targets and the Millennium Development Goals (MDGs).

While achieving the Abuja target is important, the author argues that it would still not be enough in many African countries to ensure a decent package of health services to the population. Moreover, the gap between what is currently available and what is needed to meet the targets is more than what many countries could mobilise under any realistic scenario. The author describes how the advent of the new global health partnerships and increased bi- and multilateral assistance for specific health interventions has resulted in accentuating problems associated with international aid architecture, including: unpredictability; lack of integration; increased actors and donors; and lack of donor accountability. The author also demonstrates how the recurrent costs of Global Health Partnership investments, such as human resources, new treatment centres and vaccine and drug costs, are not sustainable for many low-income countries.

Available online at: www.eldis.org/go/topics/resource-guides/health-systems&id=23299&type=Document

[Back to list](#)

Effective development assistance: a guide to aid instruments

Publisher: HLSP Institute, UK, 2005

This CD-Rom, produced by HLSP provides a structured overview of the key aid instrument and development assistance issues. The CD has five modules covering:

- the development context: poverty, the architecture of international aid, the Millennium Development Goals, Poverty Reduction Strategy Papers;
- aid instruments such as projects, sector-wide approaches and direct budget support, exploring their pros and cons, and considering when and where each is applicable;
- practical issues such as partnership working, fiduciary risk, procurement and monitoring.

Designed for self-directed learning, the CD-Rom enables users to work at their own pace, or to move rapidly through familiar sections. The CD-Rom also contains exercises, a bibliography and a series of key web links.

Available online at: www.eldis.org/go/topics/resource-guides/health-systems&id=31989&type=Document

[Back to list](#)

Other documents from the health systems resource guide

Strengthening of health systems for equity and development in Africa

Publisher: African Union, 2007

This strategy paper sets out the objectives and strategic approaches of the African Union ministers of health in order to improve the health of its people and ensure access to essential health care for all Africans, especially the poorest and most marginalised by 2015. It provides an overarching framework to enable coherence within and between countries, civil society and the international community.

The paper explores challenges to reducing the burden of disease and improving development and also draws on existing opportunities. It sets out health systems factors that undermine efforts to reduce the disease burden in Africa including:

- insufficient sustainable financial resources and the efficient allocation of resources
- lack of social protection for vulnerable groups, especially those in catastrophic situations
- a shortage of appropriately trained and motivated health workers
- poor commodity security and supply systems and unfair trade practices favouring rich countries
- capacity of the private sector including non-governmental organisations is not fully mobilised.

The overall objective of the strategy is to strengthen health systems in order to reduce ill-health and accelerate progress towards the attainment of the Millennium Development Goals in Africa. More specifically:

- to facilitate the development of initiatives to strengthen national health systems in member states by 2009
- to facilitate stronger collaboration between the health and other sectors to improve the socio-economic and political environment for improving health
- to facilitate the scaling up of health interventions in member states including through regional and intergovernmental bodies.

The paper describes the strategic approaches that are required to achieve these objectives. It discusses issues relating to governance, financing, human resources, supply systems, community participation and empowerment, partnerships and health management information and research.

Available online at: www.eldis.org/go/topics/resource-guides/health-systems&id=32094&type=Document

[Back to list](#)

Learning from experience: health care financing in low- and middle-income countries

Authors: D. McIntyre

Publisher: Global Forum for Health Research, 2007

This report reviews health care financing in low- and middle-income countries. It offers a framework to assess the performance of a health care financing system focusing on three functions: revenue collection, pooling of funds and purchasing. The paper assesses the feasibility, equity, efficiency and sustainability of these functions and presents a range of country case studies that highlight some of the factors that have contributed to their set-up and implementation.

The paper concludes that each financing mechanism has advantages and disadvantages and each can be structured differently in order to enhance its potential for achieving specific objectives and for minimising the risk of adverse consequences. The author recommends that every effort should be made to achieve universal health care coverage. A health care financing mechanism should provide sufficient financial protection, so that no household is impoverished because of a need to use health services. One way of providing such protection is by incorporating a risk-sharing plan in the health care financing mechanism, whereby the risk of incurring unexpected health care expenditure does not fall solely on an individual or household.

The report is available in English, French, Spanish, Portuguese and Chinese.

Available online at: www.eldis.org/go/topics/resource-guides/health-systems&id=32097&type=Document

[Back to list](#)

A review of non-financial incentives for health worker retention in East and Southern Africa

Authors: Y. M. Dambisya

Publisher: EQUINET: Network for Equity in Health in Southern Africa, 2007

This Equinet paper reviews evidence on the use of non-financial incentives for health worker retention in 16 countries in East and Southern Africa (ESA). Health workers are offered a variety of non-financial incentives including: training and career path-related incentives; incentives that address social needs (staff transport, childcare facilities, free food); improved working conditions and access to health care including anti-retroviral therapy. The paper finds that these incentives are not systematically documented in terms of their aims, design, implementation, monitoring and evaluation and timeframes.

The paper concludes that retention strategies improve the performance of the health system by increasing the pool of available skilled health workers and by increasing staff responsiveness to the needs of the patients. From an equity perspective, these strategies are crucial, as they are necessary for retaining health workers in the public sectors and in rural facilities, which largely serve the poorer members of the population.

The author recommends that: ESA countries continue to develop human resources for health information systems and personnel management systems; countries introduce incentive packages; countries use sustainable funding mechanisms to fund incentive schemes, such as national budgets or sector-wide approaches; managers take periodic review of their incentive schemes.

Available online at: www.eldis.org/go/topics/resource-guides/health-systems&id=32041&type=Document

[Back to list](#)

Global Drug Facility achievements report

Publisher: Stop TB Partnership, 2007

This report highlights the accomplishments of the Global Drug Facility (GDF) - the drug supply arm for the Stop TB partnership which works to eliminate Tuberculosis (TB). The GDF provides countries with the drugs and supplies needed to diagnose and treat adults and children with both drug-sensitive and drug-resistant TB. Along with drug provision it provides direct technical assistance on drug management. The GDF focuses on improving access to medicines for poor and underprivileged communities by providing drugs free of charge to patients and grants to low income countries.

The report reveals that the GDF has provided anti-TB drug treatments for 10 million people to 78 countries in the past six years. This reliable supply of drugs has been crucial both for preventing deaths and for fighting the spread of drug-resistant TB. The report also discusses other achievements of the GDF. These include: helping to build the capacity of national TB programmes world wide; responding quickly to emergencies and urgent needs for drugs; and promoting better standards of treatment for TB patients.

Available online at: www.eldis.org/go/topics/resource-guides/health-systems&id=31830&type=Document

[Back to list](#)

Joint statement on community-based management of severe acute malnutrition

Publisher: United Nations [UN] Children's Fund , 2007

This joint statement, issued by the World Health Organization (WHO), World Food Program (WFP), the UN Standing Committee on Nutrition (SCN) and UNICEF, discusses how identification and treatment of severe acute malnutrition can be done in the community for children with uncomplicated forms of the condition. The statement outlines what countries can do to save children's lives including: adopting and promoting national policies and programmes that ensure that the management of severe acute malnutrition has a strong community-based component which complements facility-based activities; providing the resources needed for management of severe acute malnutrition; and integrating this management with other health services.

The statement also sets out how the WHO, WFP, SCN, UNICEF and other partners will support these actions. Activities include: facilitating the local production or procurement of ready-to-use therapeutic food (RUTF) for countries with a high prevalence of severe acute malnutrition and in communities where access to nutrient-dense food is limited; and supporting the development and evaluation of nutrition rehabilitation protocols based on local foods in countries where poor families have access to nutrient-dense foods.

Available online at: www.eldis.org/go/topics/resource-guides/health-systems&id=32096&type=Document

[Back to list](#)

Announcements

4th Asia Pacific Conference on Reproductive and Sexual Health and Rights: "Exploring New Frontiers in Sexual and Reproductive Health and Rights", 29 - 31 October, 2007, Hyderabad, India

The conference will provide a platform for people with diverse perspectives, expertise and experience to exchange ideas, discuss and debate issues of concern, and learn from each other about sexual and reproductive health and rights, with specific reference to the implementation of the Programme of Action of the International Conference on Population and Development (ICPD, 1994).

For further information go to: www.eldis.org/go/topics/resource-guides/health/health-events-and-announcements&id=32000&type=Item/

Course: TB/HIV Collaborative Activities Management, 13 - 17 August, 2007

This training programme, organised by German Leprosy and TB Relief Association (GLRA), Fondazione Maugeri, University of Brescia and All African Leprosy and Rehabilitation Training Centre (ALERT), will provide TB and HIV/AIDS managers with the necessary skills to plan, budget, implement and monitor TB/HIV collaborative projects and programmes.

For more information go to: www.eldis.org/go/topics/resource-guides/health/health-events-and-announcements&id=32009&type=Item/

See the complete list of new additions, announcements, job adverts at:

<http://www.med.monash.edu.au/spppm/conference/index.html>

The Health Systems Reporter is produced by the IDS Health and Development Information team in collaboration with the DFID Health Resource Centre (HRC) and Eldis.

The IDS Health and Development Information team promotes health and equity in developing countries through the provision of high quality, accessible information to policymakers and practitioners. IDS Health and Development Information currently has three flagship products:

- Health Resource Guide - www.eldis.org/health
- Health Systems Resource Guide - www.eldis.org/healthsystems
- HIV and AIDS Resource Guide - www.eldis.org/hiv aids

The HRC provides access to technical assistance and information for the Department for International Development (DFID UK), and its partners, in support of pro-poor health policies as well as health systems, service delivery and public health topics and programmes.

Eldis currently includes descriptions and links to over 4,500 organisations and over 16,000 full-text online documents covering development and environmental issues. It can be searched or browsed free over the Internet.

You are welcome to re-use material from this bulletin on your own website, provided that it is accompanied by an acknowledgement to Eldis and a link to the Eldis website (either to our home page or to the home page of one of our Resource Guides). An alternative way to add Eldis content to your website is by adding one of our [newsfeeds](#).

If you are unable to access any of these materials online and would like to receive a copy of a document as an email attachment, please contact our editor at the email address given below.

Eldis is funded by DFID, Sida, SDC and NORAD, and hosted by the Institute of Development Studies, Sussex, UK.

If you like the Health Systems Reporter, you may also be interested in subscribing to the other Reporters produced by the IDS Health and Development Information Team:

- To subscribe to HIV and AIDS Reporter send an email to lyris@lyris.ids.ac.uk with "subscribe eldis-hiv aids FirstName LastName" in the body
- To subscribe to Health Reporter send an email to lyris@lyris.ids.ac.uk with "subscribe eldis-health FirstName LastName" in the body

To unsubscribe please send a message to lyris@lyris.ids.ac.uk with the subject: unsubscribe eldis-healthsystems

Please forward this email bulletin to colleagues and networks who may be interested.

Contact details:

Rebecca Wolfe
IDS Health and Development Information Team
Institute of Development Studies, Sussex
Brighton BN1 9RE, UK

Email: r.wolfe@ids.ac.uk
Tel: 44 1273 877 540
Fax: 44 1273 621202