

Sector Wide Approaches

Context

The Sector Wide Approach seeks to increase efficiency in the resource allocation, management and quality of health service provision in a country, while putting the ownership of health policy, planning and implementation firmly in the hands of the government of that country. The SWAp sought to replace a 'project' approach whereby donors directly funded health projects usually in areas that the donor believed were of the most importance to the 'recipient' country but which may not have been the area which the MoH would have prioritised. At its most basic level, the SWAp seeks to combat these negative outcomes through promotion of a 'Three Ones' approach: One strategic plan for the whole sector; One unit for coordination of inputs to the planning and implementation process; One annual monitoring and evaluation process for the plan. Reinforced by the Paris Declaration for Aid Effectiveness of 2005, the key is that Ministries of Health take the ownership of the health strategic planning process and leadership of its implementation. At its most advanced level, donors cease funding projects and instead provide budget or sectoral support directly to the recipient government to help them implement a strategic plan in which the donors have had a major input in shaping; donors and other funding agencies are regarded as collaborating partners and have a role in the annual monitoring and evaluation process and a seat on fora that meet at regular intervals to discuss progress and problems. However in making the journey towards the advanced stage, donors may begin by agreeing to work more collaboratively with the recipient ministry, and align their projects much more closely with the strategic plan to complement what the ministry and other partners are doing. Some donors may 'pool' their resources around certain themes e.g. in a sub-sectoral SWAp around Safe Motherhood, or at state or district levels and this pool funding can co-exist with inputs from donors who continue to directly fund projects.

A key building block needed for a SWAp to function is robust MoH financial management and procurement capacity so that any donor providing budget or sectoral support has confidence that their funds are being managed transparently in line with standard accounting practice while all procurement processes are transparent, robust and effectively managed. Constraints to an effective SWAp include personnel changes particularly at senior MoH level resulting in reduced ownership and large funding agents offering significant new resources in the old 'project' mode that may weaken the SWAp.

What We Offer

LATH has been involved at the very outset of journeys towards the SWAp in Malawi, Mozambique and Kenya. As such we have been able to gain valuable insights into what works well and what does not. We have regularly provided short-term consultants to participate in evaluations of SWAP progress in other countries including Uganda, Zambia, and Bangladesh. We offer expertise and experience in the following aspects of the SWAp:

These include:

- SWAp design and implementation
- Strategic Planning
- Financial management
- Procurement systems
- Human resource planning, management and development
- Monitoring and Evaluation
- Institutional development

Selected Examples of Experience:

County	Client	Date	Programme/Project
Malawi	DFID, Dutch and Norwegian	2002	Design of a Health SWAp for Malawi Support to MOHP to design a health sector reform strategy using a SWAp. Extensive stakeholder

	governments		consultation throughout phased process. Fielded multinational team of 25 consultants over 8 months, in 6 sub-teams – HR/ID/Financial Management/ Health Financing/ Technical Services/Procurement. Design accepted and became basis for Programme of Work.
Malawi	DFID	2005-08	<p>Support to SWAp Implementation</p> <p>Reinforcing the underlying SWAp theme of MoH ownership, LATH facilitated the recruitment of 14 national and international experts to be integrated within the MoH, working to MoH Line Managers in support of their Annual Operational Plans while strengthening capacity to manage and implement a SWAp. Technical Assistants were provided in:</p> <ul style="list-style-type: none"> • Health Policy and Planning • Financial Management • Procurement • Human Resources in Health • Monitoring and Evaluation • Laboratory systems strengthening • Maternal and neonatal Health
Mozambique	World Bank	2005-08	<p>Support to Revision of Tools and Processes for Health Planning</p> <p>Support to the Planning Department of the MoH to revise the health sector strategic plan, evaluate strategic planning methods, develop planning tools and cycles, and build institutional capacity. To date, the health sector strategic plan (2005 - 2012) has been revised and costed with inputs from all key stakeholders. Following on from that, LATH consultants worked at Provincial and District Levels to develop capacity for strategic planning. This will result in the development of district and provincial plans that each feed into the national level strategic plan. The next phase will be to develop a transparent, needs-based resource allocation mechanism from Central to Provincial levels, to Districts and within Districts.</p>
Mozambique	DFID	2000-04	<p>Support to Health Planning Phases 1 – 3</p> <p>Support to MoH in developing and implementing a 10-year Strategic Plan for Health based on a SWAp. TA provided in flexible responsive way which promoted MoH leadership. STTA included: Health planning, HMIS, SWAp Financing, Gender Mainstreaming in SWAp, Role of Special Clinics in SWAp, Regulatory Framework, Decentralisation, QA systems, Communications Strategy. The final phase focused entirely on functional analysis and restructuring of MoH in light of SWAp and other reform.</p>
Kenya	DFID	2005-11	<p>Support to Essential Health Services</p> <p>International and national long-term technical assistants are supporting the MoH at central, provincial and district level to strengthen health systems in line with MoH strategic plans and decision to adopt a SWAp. Support is primarily in health systems and maternal and neonatal health. With regard to the former the former Secretary for Health Malawi is the primary mover working closely in support of the MoH senior management team to progress the SWAp. This has included to date advising on ToR for Joint Design and Joint Review Missions; providing STTA in:</p> <ul style="list-style-type: none"> • Public Expenditure Tracking Surveys • Human Resources in Health Strategy • Communications Strategy • Procurement • Institutional Development