

Royal Tropical Institute

Assessment of readiness for a sector-wide approach in fragile states

A methodological framework

Ines Rothmann Ann Canavan

KIT Working Papers

KIT Working Papers cover topical issues in international development. The aim of the series is to share the results of KIT's action research in preliminary form with development practitioners, researchers and policy makers, and encourage discussion and input before final publication. We welcome your feedback.

Copyright

This work is licensed under a Creative Commons Attribution-Noncommercial-No Derivative Works 3.0 Unported Licence. © Royal Tropical Institute 2008

Correct citation

Please reference this work as follows:

Rothmann, I. and A. Canavan (2009) Assessment of readiness for a sector-wide approach in fragile states. A methodological framework. KIT Working Papers Series H4. Amsterdam: KIT

Contact the author

Ann Canavan. a.canavan@kit.nl

Download

The paper can be downloaded from www.kit.nl/workingpapers.



About KIT Development Policy & Practice

KIT Development Policy & Practice is the Royal Tropical Institute's main department for international development. Our aim is to contribute to reducing poverty and inequality in the world and to support sustainable development. We carry out research and provide advisory services and training on a wide range of development issues, including health, education, social development and gender equity, and sustainable economic development. www.kit.nl/development

Related publications:

Canavan, A., P. Vergeer and O. Bornemisza (2008) *Post-conflict health sectors:* the myth and reality of transitional funding gaps. Amsterdam: KIT Publishers http://www.kit.nl/smartsite.shtml?&id=SINGLEPUBLICATION&ItemID=2593

Canavan, A., P. Vergeer and I. Rothmann (2009) *A rethink on the use of aid mechanisms in health sector early recovery*. Amsterdam: KIT. http://www.kit.nl/smartsite.shtml?&id=SINGLEPUBLICATION&ItemID=2623

More KIT publications: www.kit.nl/publications

Table of contents

1 Introduction	4
2 Methodological approach	5
2.1 Analytical framework	5
2.2 Phases of the research study	10
References	11

1 Introduction

In the framework of support to health systems development in fragile states, the Royal Tropical Institute (KIT) has undertaken operational research to identify the status of transitional funding aid mechanisms and explore determinants of aid effectiveness for health sectors recovering from prolonged conflict. Publications related to this research include:

- Canavan, A., Vergeer, P. & Bornemisza, O., 2008, Post-conflict Health Sectors: The Myth and Reality of Transitional Funding Gaps, Royal Tropical Institute, Netherlands, in collaboration with the Health and Fragile States Network and funded by DFID.
- Canavan, A., Vergeer, P. & Rothmann, I., 2009. *A rethink on the use of aid mechanisms in health sector early recovery*. Royal Tropical Institute, Netherlands funded by the Dutch Ministry of Foreign Affairs (DGIS).

KIT aims to continue to support the work in fragile states while identifying priorities in collaboration with governments, donors and other stakeholders. One of the priority areas identified is to generate a better understanding of the progress that has been made with moving towards Sector Wide Approaches (SWAPs) in the early recovery health sector and how such practices can promote health systems recovery and service delivery. The findings will enable the Ministry of Health (MOH) and partners to develop a roadmap for improved policy and management within their health system that will contribute to more aid effective arrangements between the government and development partners. This Methodological Framework sets out the analytical process which will be undertaken to study the basic requirements of health sectors that are in the recovery phase and use mixed aid modalities in moving towards SWAPs.

2 Methodological approach

2.1 Analytical framework

The overall objective of the research is to generate a better understanding of the basic requirements for a SWAP while assessing the progress that has been made in an early recovery health sector and how such practices can promote health systems strengthening and service delivery.

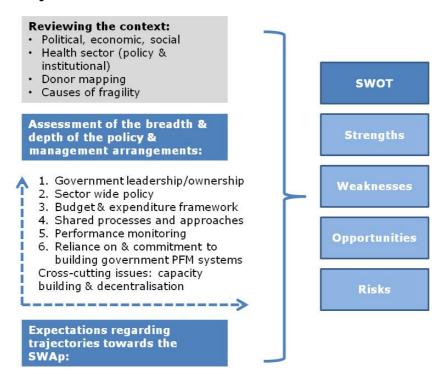
This will be achieved by learning from experiences with health sector SWAPs in non-fragile states and determining how the "lessons learned" can be used by countries undergoing recovery of health systems. To attain this aim, a review of the literature will identify the status, results and lessons learned from health SWAPs in non-fragile states.

Then, a full review of the essential components that are commonly included within a sector wide approach will be undertaken for the health sector of the fragile state in question, with a concrete assessment of the existing structures and processes that are regarded as SWAP elements¹. An evaluation of the expectations regarding the different trajectories of moving towards a fully-fledged SWAP will be conducted with all relevant stakeholders in the health sector, including relevant line ministries and sub-national authorities, supporting donors and non-state actors.

In addition, a SWOT analysis will be undertaken which will identify the achievements and challenges of the sector-wide efforts as well as the risks and opportunities in moving ahead, in order to identify good practices and lessons for improved implementation.

The analytical framework is graphically presented in *Figure 1* below with more detailed information on each of the steps in following paragraphs.

Figure 1 Analytical framework



¹ Key elements: Sector policy, a budget & expenditure framework, government leadership, shared processes and approaches, performance monitoring, greater reliance on government PFM systems. Assessment of readiness for a sector-wide approach in fragile states; A methodological framework

Evaluation of the breadth and depth of SWAP

Different development partners have defined SWAPs and its key elements in slightly different ways. One of the more commonly quoted definitions is:

All significant funding for the sector supports a single sector policy and expenditure programme, under government leadership, adopting common approaches across the sector and progressing towards relying on Government procedures for all funds.

(Foster, M. 2000)².

In fact, SWAP are – as the European Commission highlights in its Guidelines on Sector Programmes³ – a way of working together between government, development partners and other key sector stakeholders. It is a process aiming at broadening government and national ownership over public sector policy and resource allocation decisions within the sector, increasing the coherence between policy, spending and results, and reducing transaction costs.

Different descriptions of the core elements of a SWAP exist, but all are quite comparable. Table 1 on the next page presents a selection of the different definitions of core SWAP elements by various donor agencies or research institutions.

 $^{^{2}}$ Mick Foster (2000), Experience with implementing sector wide approaches, Overseas Development Institute, UK.

³ EC (2007), Guidelines Support to Sector Programmes.

Table 1 Comparison of definitions of SWAP core elements

OECD DAC ⁴	EC ⁵	KIT SPR Tool ⁶	Walford ⁷
A clear nationally-owned sector policy and strategy.	Sector policy and strategy	 Mission and policy The mission statement Pro-poor approach Gender mainstreaming 	All significant funding agencies support a shared sector wide policy and strategy
A medium-term expenditure programme that reflects the sector strategy.	Sector budget and its medium-term perspective	StrategiesLinkingstrategies andmissionPriority setting	A medium-term expenditure framework or budget which supports this policy
Systematic arrangements for programming the resources that support the sector.	Sector coordination framework under the leadership of the government	Structure and organization Definition of the sector Coherence of the sector National ownership Donor coordination mechanisms Involvement of civil society	Government leadership in a sustained partnership
A performance monitoring system that measures progress and strengthens accountability.	Institutional setting and capacities linked to capacity development	Systems Resource envelop* Use of data Human resources development	Shared processes and approaches for implementing and managing the sector strategy
Broad consultation mechanisms that involve all significant stakeholders.	Results-based performance monitoring system		Commitment to move to greater reliance on government financial management & accountability systems
A formalized government- led process for aid co- ordination and dialogue at the sector level.	Stable macroeconomic environment		
An agreed process for moving towards harmonized systems for reporting, budgeting, financial management and procurement	Improving public finance management (PFM) systems.		

For the purpose of this study we define – based on a comparison of the different definitions as presented in Table 1 - the core elements of a SWAP as follows:

- 1. Government leadership of the sector in a sustained partnership
- 2. A clear nationally-owned **sector policy** and strategy, derived from broad-based stakeholder consultation and which is supported by all significant funding agencies
- 3. A (medium-term) budget and **expenditure framework** which reflects the sector policy

⁶ KIT (2005), Sector Policy Review Tool, Royal Tropical Institute Netherlands.

⁴ OECD/DAC (2006), Harmonizing Donor Practices for Effective Aid Delivery, Volume 2.

⁵ EC (2007), Guidelines Support to Sector Programmes.

Walford, V. (2003), Defining and Evaluating SWAps, A paper for the Inter-Agency Group on SWAps and Development Cooperation, Institute for Health Sector Development. UK.

- Shared processes and approaches for planning, implementing, managing the sector strategy
- A sector performance framework monitoring against jointly agreed targets
- 6. Commitment to move to greater reliance on government **financial management and accountability systems**.

It is frequently highlighted that a SWAP should not be seen as a blueprint, but rather as a framework setting a direction of change - towards better coordinated and more effective organisation of the health services. This means that, at a given point in time, sectors and countries with SWAPs may not have all the above elements in place, or, at least, not to the same degree. Walford (2003) suggests that the stage of SWAP development can be characterized by looking at its 'breadth' and 'depth' of the approach:

- **Breadth** of the SWAP refers to whether a sector has all or only some of the six elements outlined above in place
- **Depth** refers to how important each of those elements is, and how effectively they are being implemented.

Each of the six SWAP elements will be analysed in terms of breath and depth. This will help us to identify not only the stage of development of the health SWAPs in terms of breadth and depth but also in terms of scope of existing approaches (sector-wide versus sub-sector-wide) and average timeframes needed to bring a SWAP to its full potential.

Part of each analysis of the six elements will take a cross-cutting approach to assess institutional capacity within the Ministry of Health, as well as decentralisation.

As part of the contextual analysis, external forces that permeate and influence the direction and pace of developments for the health sector and beyond will be reviewed (e.g. changing political dynamics, public-private partnership reform).

Furthermore, a mapping of the engagement of the various stakeholders in the health sector will be undertaken, building on existing information (e.g. structure and function of the Health Sector Coordination Group, National Aid Coordination body etc.).

Scoring of each element (e.g. sector policy, budget, PFM etc) will be undertaken based on an aggregate score applied for each of the sub-criteria (see Table 2). Table 2 below presents a preliminary overview of the key issues to be assessed and tools to be used for each of the six core elements of the SWAPs.

Table 2 Assessment of the key issues for SWAP readiness

SWAP Element	Issues to be assessed	Tools
A clear nationally-owned sector policy and	Nationally owned	Review of documents
strategy, derived from broad-based	Consultative & widely shared (central & local government, donors, civil	Interviews
stakeholder consultation and which is	society groups, community, private sector)	
supported by all significant funding	Policy coherence (i.e. link with PRSP, MDGs)	
agencies;	Alignment of donor support with sector policy	
	Sufficiently pro-poor	
	Results-focused & monitorable	
Government leadership of the sector in a	Strength of leadership	Review of documents
sustained partnership;	Involvement in preparation, implementation, monitoring of health strategy	Interviews
	MOH coordination mechanisms	
	Commitment of own resources for capacity development	
A (medium term) budget & expenditure	Consistency of policy with budget allocations & actual spending (i.e. level &	Review of documents
framework which reflects the sector policy;	composition inter & intrasectorall)	Interviews
	Domestic and external financing in relation to public and private health	NHA Review
	spending	Mapping of sector financing
	Existence of a supporting (multi-annual) budgeting process/MTEF	
	Alignment & predictability of donor contributions	
	MOF & MOH relations within budgetary process	
Shared processes and approaches for	Stakeholder mapping within the sector	Stakeholder analysis
planning, implementing, managing the	Joint planning, financing & managing processes	Review of documents
sector strategy	Sector coordination mechanisms	Interviews
	Level of harmonisation between donors, NGOs	
	Shared information & analytical work Shared information & analytical work Shared information & analytical work Shared information & analytical work Shared information & analytical work Shared information & analytical work Shared information & analytical work Shared information & analytical work Shared information & analytical work Shared information & analytical work Shared information & analytical work Shared information & analytical work Shared information & analytical work Shared information & analytical work Shared information & analytical work Shared information & analytical work Shared information & analytical work Shared information & analytical work Shared information & analytical work Shared information & Shared information	
	Joint, comprehensive capacity building approach The state of	
A sector performance framework monitoring	Existence of M&E tools (sectoral, PRS, MDG) and coherence among them	Review of documents
against jointly agreed targets;	Institutional arrangement / relationships for monitoring financial & non- financial information.	Interviews
	financial information	
Committee and to make the many to make the many	Strength of Health Management Information System	Davison of decomposite (i.e. DEEA
Commitment to move to greater reliance on	Share of aid going through national system (systems alignment)	Review of documents (i.e. PEFA
and to build government financial	Improved budget processes Ingressed allocation % appreciance officiency.	& other PFM assessment)
management and accountability systems.	Increased allocation & operational efficiency Prodictability of any approach funding to consider delivery unit	Interviews MOF & MOH
	Predictability of government funding to service delivery unit	

2.2 Phases of the research study

The research study will be divided into 5 phases (illustrated also in Table 3 below):

- 1. Refining the methodological approach and terms of reference for the country
- Literature review
 Field study including all stages of the methodological process for SWAp assessment of readiness
- 4. Synthesising experiences based on the findings and comparing with the lessons identified from non-fragile states. This will generate lessons on how effectively SWAP practices can promote health systems strengthening and service delivery in the early recovery health sector
- 5. Dissemination of report at both national and international levels

Our methods of data collection will include:

- Literature review desk study
- Face-to-face and/or telephone interviews with development partners at headquarter and field level
- Collecting quantitative secondary data as regards the financing of the health sector in early recovery situations from relevant sector donor coordination forums and other government stakeholders
- Consultative processes with all key stakeholders whereby briefing and debrief workshops will be conducted

Table 3. Indicative workplan for SWAp assessment of readiness

Ph	ase	Activities	Inputs Economist/Aid Effectiveness expert	Inputs Health Sector expert	Timeline
1.	Methodological approach and terms of reference	Development of analytical framework and approach to study implementation	2 days	2 days	March 2009
2.	Literature review		5 days	5 days	March 2009
3.	Field phase (indicative for one case study country)	-Field mission -Report writing & follow-up	10 days 4 days	10 days 3 days	June/July 2009
4.	Synthesis reporting (in case of cross-country comparison)	Synthesis and Articles for publication.	5 days	3 days	August 2009
5.	Dissemination	Dissemination at conferences, within wider donor and academic/ research network	2 days	2 days	September- December 2009
Tot	tal		30 days	37 days	67 Days

References

Brown, A., Foster, M., Norton, A., Naschold, F., (2001) *The Status of Sector Wide Approaches.* Centre for Aid and Public Expenditure. Working paper 142 ODI

Canavan, A. Vergeer, P. (2008) *Fragile States and Aid effectiveness, Annotated bibliography.* Royal Tropical Institute, Netherlands

Canavan, A., Vergeer, P. and Bornemisza, O. (2008) *Post-conflict Health Sectors: The Myth and Reality of Transitional Funding Gaps.* Royal Tropical Institute, Netherlands in collaboration with the Health and Fragile States Network.

Cassels, A., Janovsky, K. (1998) Better Health in developing countries: Are sector-wide approaches the way of the future?' *The Lancet*, 352: 1777 - 1779

Cassels, A. (1997) A guide to sector-wide approaches for health development, concept issues and working arrangements. Rome: WHO.

European Commission (2007) *Guidelines Support to Sector Programmes.* Brussels.

Foster, M. (2000) New Approaches to Development Co-operation: What can we learn from experience with implementing Sector Wide Approaches? Centre for Aid and Public Expenditure. Working paper 140 ODI

Foster, M., Brown, A., Conway, T. (2000) Sector-Wide Approaches for Health and Development. A review of Experience; Geneva: WHO

Foster, M., (2000) Experience with implementing sector wide approaches, ODI.

OECD/DAC (2006) Harmonising Donor Practices for Effective Aid Delivery, Volume 2. SWAps and Development Cooperation, Institute for Health Sector Development.

Vergeer, P. Canavan, A. Rothman, I. (2008) *A Rethink of aid mechanisms for the health sector in early recovery.* Royal Tropical Institute, Netherlands.

Walford,V. (2003) *Defining and Evaluating SWAps*, A paper for the Inter-Agency Group on SWAps and Development Cooperation, Institute for Health Sector Development, UK.