

Towards shared principles for assessment and reporting the health impacts of development aid

Consultative workshop organised jointly by ASPHER/EAGHA, the European Commission Development Cooperation – Europe Aid and The Lancet

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Workshop Report

As the workshop was held using the Chatham House Rule participants were not named in this report but their comments were recorded as accurately as possible.

I. Background and objectives

Development agencies are increasingly required by their governments and tax-payers to provide evidence on the impact of their investments in global health and to communicate health impacts in an intelligible way to non- technical politicians and the public. One commonly used approach to assess and report the impacts of health aid is in terms of lives saved. Such reporting may appear simple, timely, and appealing to donor constituencies; however, when reported directly by donor agencies, key contributions of the underlying health system of recipient countries happen to be omitted at times. The lives saved approach also has the potential for double- counting, whereby some of the lives saved may have been claimed by different donors or by the Ministry of Health. New approaches to assessment and reporting the health impacts of aid should allow for the attribution of health impacts to both donors and recipient countries, minimise double counting, reflect the importance of health systems funding (as distinct from the funding of commodities) and at the same time be transparent and intelligible to non-experts.

The **objectives** of this workshop were to 1) achieve a first step towards international agreement on good practice in reporting health impacts arising from development aid and health investments; 2) explore readiness of international development partners to embark on this exercise; and 3) explore the capacity and readiness of the European and other academic global health institutions to get involved in this work.

II. Developing shared principles for the assessment of the health impacts of aid

Centrality of countries

There was strong support for the idea that any approach to assessment and reporting should primarily respond to country needs, rather than responding primarily to donors' needs, consistent with aid effectiveness commitments. Assessment of the health impacts of aid should recognize the centrality of countries and explicitly focus on strengthening country ownership, building capacity, and supporting sustainability. Assessment of health impacts of aid should build upon country-owned monitoring and evaluation platforms and should contribute to strengthening national health strategies and existing review mechanisms. However, when getting beneficiary countries more heavily involved in the assessment of the health impacts of aid, it will be important to avoid overloading them with demanding

requirements which are difficult to implement. It will be necessary to balance the requirements for rigour with feasibility with the aim of regularly reviewing and improving the approach in the light of experience. Every effort should be made to capitalize on the positive side effects of such involvement such as by refocusing overly process-oriented activities and dialogues on the ultimate goal of health impact.

Health impact of aid is the product of a mix of causes.

Assessment of health impacts of aid should identify the contextual factors that contribute to the observed results. This would enable a better understanding of the theory of change underpinning how development aid works. It would also capture the wider contributions of the health system in which programmes and interventions are embedded.

III. Moving from reporting the impact of programmes and interventions to strengthening of capacity and of health systems

Improved approaches to the assessment and reporting of health impacts of aid could be based on the use of algorithms similar to those currently in use by some donors but applied to a wider spectrum of diseases/ interventions and outputs. One such approach, the **Health Impact Accounts (HIAs)**, was presented in the workshop. It is intended to systematically assess the health impact of an investment portfolio compared to the counterfactual, and to identify and assess all investments in the critical value chain (stewardship, procurement, training, etc...) involved in the implementation of the intervention. The suggested approach is in an early stage of development; in its further elaboration feasibility under conditions of limited capacity needs to be considered. It is also important that assessment approaches take into account potential health system wide effects of aid for example as a result of differential pay and conditions between services for donor priority diseases and other health problems.

The **International Health Partnerships (IHP+)**, aims at donor harmonization and alignment around single country led health plans. Its activities encompass the assessment of the strengths and weaknesses of a national health plan and involve multiple stakeholders including government, civil society and development partners/donors. It promotes approaches that are aligned with existing country processes and presents summaries of results in visually attractive scorecards and stories about country changes. The extent to which the IHP+ support to improved monitoring of the national health strategies produces improved output information that could serve as a basis for further health impact assessment remains to be explored.

Whatever the methodology applied, or the institutional context chosen, there was strong agreement that applying health impact assessment to a broader spectrum of health systems outputs at the country level should precede any donors' claims of health impact.

IV. Proposed next steps

The workshop was intended to set the scene for future collaborative work between stakeholders rather than to agree on a specific set of next steps; the subsequent paragraphs therefore constitute elements for further reflection rather than an agreed set of comprehensive recommendations.

Designing strategies for communicating the impact of aid to policymakers and the public

Understanding the factors that influence policymaking in donor countries and recipient countries is key for designing strategies for communicating the impact of aid. Crosscutting and timely themes that appeal to policymakers and stakeholders, and that go beyond impact data, such as universal health care coverage, may help build a more comprehensive framework for communicating the need for health systems strengthening. Other strategies to communicate impact of aid to policymakers and the public may include using simple messages and indicators and identifying champions to influence policymakers.

Testing approaches to assessment and reporting of health impacts of aid in real life settings

The different approaches to the assessment and reporting of health impacts of aid should be discussed with interested partners to examine their feasibility in local settings and the readiness of stakeholders to use them. Approaches to assessment and reporting of health impacts of aid need to be adapted to different settings and needs. It is also important to collaborate with academics from various fields, including the political sciences and practitioners, for example in humanitarian aid, to develop and test the different approaches in both stable and fragile states. Approaches should also take into account the indirect health impacts of the social determinants of health such as education, income, and household environment.

Engaging recipient countries

Further contacts will be established with interested institutions in low income countries; having a practical methodology elaborated would facilitate such contacts.

Collaborating with development partners/donors

It is important to collaborate with major development partners/donors to build on their own assessment activities and to achieve agreement on approaches for assessment and reporting of health impacts of aid in compliance with the Paris Declaration and the Accra Agenda for Action.

V. Follow up plan

The results of this workshop will be shared with other development agencies including the Bill and Melinda Gates Foundation and the Global Fund. The workshop will be followed up with a meeting to engage Southern partners at the Global Forum in Cape Town in April 2012. We aim to develop a paper for publication which outlines the principles that should be used to assess the impact of development aid on health and to illustrate how these could guide efforts to achieve this goal. Based on these and other contacts the feasibility of support to pilot this approach in interested low income countries will be further explored.