

*This document provides a short synopsis of the sessions, major highlights, and key messages shared throughout the MLI Learning Collaborative Forum. A more detailed report will be available in February 2011.*

### **MLI Learning Collaborative Forum**

A distinctive element of MLI's approach to building capacity and fostering greater country ownership and leadership is *south to south peer learning*. Using this approach, MLI hosted its first **Learning Collaborative Forum** in Addis Ababa, Ethiopia, from November 29 - December 3, 2010. The Forum brought together twenty-four senior health ministry leaders from the five MLI countries (Mali, Nepal, Senegal, Sierra Leone, and Ethiopia) to share experiences in highly interactive sessions that addressed the three MLI policy areas: *health financing for equity; donor alignment and coordination; and reproductive health*. Each country delegation included representatives with a range of skills and expertise in these three areas.

The Forum built upon previous MLI peer learning opportunities and allowed countries to highlight successful initiatives of mutual interest and strengthen relationships among MLI country delegates and global staff to help meet each country's MLI goals. The program also solidified learning partnerships that will last well beyond the lifetime of MLI.

### **Overview of Forum Sessions**

The MLI Forum commenced with a welcome reception which included opening remarks by MLI's Director, Rosann Wisman. The next morning the Honorable State Minister of Health from Ethiopia, Kebede Worku, formally welcomed the participants. The week of peer learning and sharing featured MLI country presentations including: *Moving towards Universal Health Coverage – the Mali case; Communicating a Major Health Reform - the Sierra Leone Free Care Case; Donor Harmonization and Alignment – the Senegal Case; and Negotiating with Development Partners – Lessons from Nepal*. During the week, delegates participated in site visits to see first-hand how two of Ethiopia's major health initiatives —the Balanced Scorecard and the Health Extension Program – are being implemented.

The Forum also included a session on *Successes and Challenges in Achieving Health Reform: the Role of Leadership* as well as a lively discussion on *Achieving MDG5: a Focus on Family Planning and the Health of Women and Girls*, which provided an opportunity for delegates to discuss the key issues and challenges they are facing with achieving MDG 5.

The weeklong Forum concluded with a policy roundtable on *Country Ownership and Strong Stewardship* chaired by Dr. Francis Omaswa, MLI Senior Advisor and President of the African Center for Global Health and Social Transformation (ACHEST). Participants, which included representatives from Ethiopian and regional development partners, were welcomed by Dr. Medhin Zewdu, Director General of the Office of the Minister at the Federal Ministry of Health in Ethiopia. The roundtable featured a keynote speech by the Hon. Minister Tedros Adhanom Ghebreyesus, Minister of Health of Ethiopia. The final program agenda is available in [French](#) and [English](#) on MLI's website.

### **Major Highlights, Key Points and Emerging Messages from the MLI Forum**

#### Recognizing the Importance of South-to-South Peer Learning

Although the Forum was not the first time ministerial leaders from the MLI countries were brought together, it was the first time that many of these senior ministry officials had such a focused and extended period of time together to share, discuss, collaborate, and learn from one another. One of the highlights of the Forum was

the openness of country delegations to discuss not only their achievements, but also their challenges. The delegates shared their approaches, lessons learned, and advice in addressing challenges. The peer learning component of MLI's approach was recognized by participants as one of MLI's most important assets and an element that should continue and be deepened and broadened to include additional countries beyond the five MLI focus countries in the future.

### Improving Negotiation Skills

Following a presentation by the Nepal delegation on their successful series of trainings to improve negotiations skills with development partners and other internal and external stakeholders, the other four MLI country delegations expressed interest in expanding their training in negotiations. This led to a broader conversation on the importance of development diplomacy and the need for developing countries to shift away from a more passive, recipient role with development partners and more confidently state their priorities and negotiate in a clear and convincing manner.

### Committing to the Principles of Country Ownership and Leadership

While the MLI Forum provided senior ministry officials from the five MLI countries the opportunity to share country experiences including progress made and challenges confronted in specific policy areas, a major highlight of the Forum was that it offered participants the space to discuss the broader issues of leadership and country ownership in advancing health reform.

On the final day of the Forum during the policy roundtable on **Country Ownership and Strong Stewardship**, Hon. Minister Tedros of Ethiopia provided a keynote speech which outlined the four steps Ethiopia has followed to achieve greater country ownership. These included 1) having a good vision: knowing what it wanted to achieve and believing passionately in it, 2) resourcing its plan and knowing what to fund, 3) ensuring that implementation was led and owned by the country and not development partners, and 4) institutionalizing a strong monitoring and evaluation system to hold both the country and the development partners accountable. Minister Tedros emphasized that the greatest obstacle to achieving country ownership is the lack of commitment by countries themselves. He suggested the four steps outlined above should be used as indicators to measure whether a country is truly moving forward with the principles of country ownership.

During the roundtable, participants reflected on discussions from the week. Some of the key points highlighted by MLI country delegates and participating Ethiopian and regional development partners included:

- **The key role leadership plays in policy reform in the health sector.**
- **The need for using different types of leadership** (political, operational or technical, catalytic, and collective) **necessary to transform a given health policy reform.**
- **The recognition that achieving greater country ownership is a way of reinforcing commitment and attaining better health outcomes.**
- **The need to better understand how development partners can support and promote country ownership to advance ministerial leadership, agendas and priorities, and improve overall development practice.**

Two of the key "take away" messages that emerged from the roundtable included a comment from a development partner representative, who stated *"We [development partners/donors] want to be led"* and concluding remarks from Dr. Francis Omaswa who emphasized that *"This question of country ownership and strong stewardship is central. When a country is clear, country's expectations can be addressed."*

The **Ministerial Leadership Initiative for Global Health** (MLI) works with ministries of health in Ethiopia, Mali, Nepal, Senegal, and Sierra Leone to advance country ownership and leadership in three inter-related policy areas: health financing to ensure sustainable health care for all; donor alignment to ensure that donors work together to support country led priorities; and reproductive health because the health of women is central to the health and stability of communities and nations. MLI is a program of **Aspen Global Health and Development**, a legacy program of Realizing Rights and is funded by the Bill & Melinda Gates Foundation and the David and Lucile Packard Foundation. MLI partners are the **Results for Development Institute** and the **Council of Women World Leaders**.