# Country-Led Development in Health: Practical Steps Forward

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We, the countries of Ethiopia, Mali, Nepal, Senegal, and Sierra Leone, have learned essential lessons about country-led development in health. This document shares those lessons in hopes that our experiences will increase country ownership and aid effectiveness toward improving health outcomes in all developing countries.

We are strongly committed to the global commitments to country-led development that are outlined in the *Paris Declaration for Aid Effectiveness* in 2005 and the *Accra Agenda for Action* in 2008. We have signed the global International Health Partnership (IHP+) Compact and we are working hard to develop

our health programs around one single plan supported by our development partners.

In order to improve the health of our populations, we must take the lead. Strong leadership fosters accountability, demonstrates the government's commitment and is a prerequisite for country-led development. It is in this context that in 2008 we became part of the Ministerial Leadership Initiative for Global Health (MLI).

## A Shared Responsibility

Still, country-led development is the responsibility of both countries and development partners. A country, through its

# The Paris Declaration for Aid Effectiveness and the Accra Agenda for Action

In 2005, over one hundred Ministers, heads of agencies and other senior officials came together to discuss and identify actions to significantly increase efforts in aid harmonization, alignment and managing aid for results with a set of actions and indicators to be monitored. **The Paris Declaration** is an international agreement that clearly identifies key areas for improvement and fundamental principles of partnership commitment necessary for success in aid management reform, including:

- 1. Ownership
- 2. Alignment
- 3. Harmonization
- 4. Managing for Results; and
- 5. Mutual Accountability

At the Third High Level Forum on Aid Effectiveness in Accra in September 2008, donors and developing countries endorsed the **Accra Agenda for Action**. This included ambitious commitments by development partners and developing countries to accelerate the process of achieving the Paris Declaration's pledges.

senior government leaders, and with input from development partners, civil society and other constituents, must articulate sound policies and advocate for them to become common priorities. Development partners must be willing to listen to and support those priorities. If both parties take a shared role and hold one another accountable, then a relationship built on trust emerges and the outcome is something everyone wants: a country that is improving the health of its population with a clear national health strategy that both the government and development partners support.

#### Health Ministries Making a Difference

Our own recent experience demonstrates that strong country leadership and ownership advances effective health reform and contributes to broader development goals. With MLI's support, we were able to mobilize donors to join our efforts. Each of our countries has taken bold steps to advance one or

more of our specific priorities including: establishing a major health sector strategic planning and performance management system; galvanizing national actors and partners to scale up community-based health insurance under a new government strategy; leveling the playing field between the government and development partners by improving negotiation skills of senior ministry staff; engaging development partners to actively support the government-led national health program; and with country political leadership from the highest levels, launching a maternal and child health free care initiative.

## Reaffirming the Paris Principles and Accra Agenda

Our experience confirms that countries must become the captain of the entire effort, steering the design, implementation, monitoring, and evaluation of their master plans with supportive assistance from partners. These same players must work together to ensure robust monitoring of progress toward country-led development, holding one another accountable through mutually set indicators, and seeking opportunities for dialogue and continuous learning from one another. Finally, they must reaffirm their commitments to form trusting relationships through patience, flexibility, and the willingness to listen.

## A Shared Vision and Common Challenges

In our discussions with one another in the five MLI partner ministries, we arrived at a shared vision for supporting country-led development. We also found common challenges. An important one is an underlying lack of trust between development partners and country governments. This gap is not born out of ill-will, but a combination of differing policy priorities and a short-term time horizon on the part of development partners. This gap happens in all countries to varying degrees. We found one major antidote against distrust: strong country-led development that called for the alignment of all health programs in a country, and ongoing documentation and evidence demonstrating that such an approach produced better health for people in our countries.

#### Practical Steps Forward from our Experience

We, as representatives from the five MLI country ministries, are committed to advance the dialogue and champion the importance of country-led development at other high-level global forums. Our experience with MLI reveals several bold, yet practical steps to make the Paris Principles and Accra Agenda a reality, increase country-led development, and help health ministries harness their talents to save lives. We call on country governments, donors, policymakers and researchers to firmly commit to these steps.

1. Government leaders, including Ministers and their senior teams, must be clear about their priorities. In our partnership with MLI we identified a few specific capacity gaps and we tailored MLI's assistance to our needs, requesting technical support only if it would help strengthen our capacity to lead and improve program performance. With this clarity, we were able to galvanize other donor assistance to support our common goals.

- 2. Development partners must be flexible, willing to listen and follow the priorities defined by country leaders. Critically, MLI supported our endeavors by flexibly responding to our requests, while still holding us accountable. Through demand-driven technical assistance, our ministerial senior teams had the opportunity to build skills to lead more effectively and become stronger advocates for our people. We managed and monitored our technical assistance budgets and work plans with guidance and support from MLI. We frequently reflected on what worked and the challenges we faced and with MLI, we made adjustments as needed.
- 3. Countries must be given greater opportunities to learn from each other, developing ongoing relationships between leaders. In leader-to-leader exchanges through MLI, we learned from and supported each other to become more effective leaders with the establishment of a community of practice among our countries. MLI also amplified our voices through the media and brought greater international attention to our work in improving healthcare in our countries.

# **Signatories**

This statement was developed by ministries of health of the countries participating in the Ministerial Leadership Initiative for Global Health. Those endorsing this statement include:

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