



EMBRACING THE POLITICAL REALITIES OF HEALTH SYSTEMS STRENGTHENING

How to apply 'Thinking and Working Politically' in systems strengthening

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PURPOSE AND FOCUS

The Malawi Health Sector Programme – Technical Assistance component (MHSP-TA) is a UKAid-funded health system strengthening technical assistance programme.

The Malawi political, social and economic context presents numerous challenges for ensuring the effectiveness of development assistance. TA programmes are not always sensitive to the political-economy environment they work within, often satisfied with meeting technical targets rather than fostering genuine change. We suggest that health systems focused TA must understand and act 'politically' to be effective. The presentation describes how MHSP-TA has applied Thinking and Working Politically (TWP), and a learning and adaptive approach, to our support for strengthening Malawi's health system.

MHSP-TA Adaptation of D. Green's TWP Update Spectrum

Revolutionary uptake

Wholesale shift away from traditional, technical approaches

Evolutionary uptake

More attention to politics within traditional technical approaches

Mobilise reform minded coalitions at community and central levels

Focus on areas where elite interests align with change and reform

Political Economy Analysis integrated into programme strategy development

Highly flexible models to respond to political/reform opportunities

Alternative funding streams that discourage/disrupt resource abuses

Partner with, and develop capacity of, reform minded individuals

Technical approaches informed by political awareness

LESSONS LEARNED – WHY IS THIS IMPORTANT

MHSP-TA's experience has demonstrated that being adaptive, "thinking politically", providing evidence, on-demand technical assistance and financial resources, can facilitate change in both 'form' and 'function'. Success factors include:

- Flexibility in programme design and budgets to adjust interventions and budgets to respond to emerging needs and changing contexts;
- Make on-going assessments of whom to work with and how, especially given frequent staff turn-over
- When tackling something as ambitious and sensitive as drug theft or health centre management it's important to build broader coalitions for change, e.g. for drug theft need also to work with Ministry of Justice and for health centre management with district health managers

KEY ELEMENTS OF MHSP-TA

Based on a politically sensitive Theory of Change, which emphasises identifying and working with key change agents in government and other health actors;

Interventions based around three outcome areas:

- Strengthened stewardship, coordination and action in the health sector
- Enhanced financial management and democratic accountability in the health sector
- Strengthened health service planning and monitoring

APPLYING 'THINKING AND WORKING POLITICALLY'

Some examples:

Political analysis integrated into programme strategy development - MHSP-TA used political analysis to define the programme's theory of change;

Technical approaches informed by political awareness – MHSP-TA sought appropriate entry points for strengthening district financial management as two critical local government agencies were merging

Alternative funding streams that discourage/disrupt resource abuse – MHSP-TA provided substantial technical assistance for setting up an alternative pooled donor fund when sector budget support was suspended, and then supporting operationalisation of funded activities;

Focus on areas where elite interests align with reform – MHSP-TA has worked with senior MOH individuals on setting up a Drug Theft Investigation Unit to tackle pilferage of medicines from health facilities;

Partner with and build capacity of reform minded individuals - MHSP-TA supported the Minister of Health's own reform agenda, especially setting the stage for tertiary hospital autonomy and service level agreements with faith based health facilities;

Mobilise reform minded coalitions at community level – MHSP-TA has supported the reconstitution and training of health facility committees thereby increasing community voice and strengthening accountability of health providers to health service users