



**World Health  
Organization**

REGIONAL OFFICE FOR **Africa**

**AFR/RC58/INF.DOC/6**

15 April 2008

**REGIONAL COMMITTEE FOR AFRICA**

**ORIGINAL: ENGLISH**

Fifty-eighth session

Yaounde, Republic of Cameroon, 1–5 September 2008

Provisional agenda item 8.6

**HARMONIZATION FOR HEALTH IN AFRICA:  
PROGRESS REPORT**

**Information document**

**CONTENTS**

	<b>Paragraphs</b>
BACKGROUND .....	1–4
PROGRESS MADE.....	5–9
NEXT STEPS .....	10–11



## **BACKGROUND**

1. A series of high-level forums held between 2003 and 2006<sup>1</sup> identified critical policy-level constraints that must be addressed to accelerate progress towards the health Millennium Development Goals (MDGs). The post-high-level forum meeting held in Tunis in June 2006 recommended that partners and countries work together to strengthen regional capacity to provide demand-driven technical support to countries as well as opportunities to exchange experiences. Another recommendation was establishment of a mechanism that will facilitate and coordinate the process of country-led development of evidence-based policies and plans for the accelerated attainment of the MDGs.

2. The African Development Bank, UNAIDS, UNFPA, UNICEF, WHO and World Bank agreed in 2006 to jointly set up a regional mechanism known as Harmonization for Health in Africa (HHA). This mechanism aims to support countries and development partners to facilitate: (i) evidence- and country-based planning, costing and budgeting for health outcomes, (ii) alignment with country processes and harmonization; and (iii) removal of health system bottlenecks. The functioning of the HHA is overseen by the regional directors of the collaborating institutions. They have designated a technical oversight committee to oversee the implementation of a rolling workplan and to report on progress.

3. Harmonization for Health in Africa pro-actively collaborates with other initiatives and projects engaged in the accelerated attainment of the health MDGs. These include: International Health Partnership, Catalytic Initiative to Save a Million Lives, Deliver Now for Women and Children, Providing of Health Initiative, GAVI Health System Strengthening, Global Campaign for the Health Millennium Development Goals, Global Fund National Strategy Application, Global Health Workforce Alliance, Health Metrics Network and the Secretary-General's MDG Africa Initiative.

4. This document focuses on Harmonization for Health in Africa and provides an overview of the main achievements and perspectives.

## **PROGRESS MADE**

5. Since its launch, Harmonization for Health in Africa has been presented to ministers of health during the fifty-sixth and fifty-seventh sessions of the WHO Regional Committee for Africa. The ministers discussed HHA and endorsed it as a coordinated response to address policy-level constraints. They encouraged other partners to collaborate in this initiative, harmonize their practices and align their goals with country priorities.

6. The regional directors of the partner institutions have met twice to assess progress and further plan the way forward. After the first meeting held in Dakar (February 2007), they called on their country representatives to work closely with national counterparts and development partners to help support policy, operational and partnership conditions conducive to the timely achievement of the health MDGs. The second meeting held in Nairobi (November 2007) was followed by a joint communiqué calling on country representatives of the collaborating institutions to actively engage with their counterparts to support national efforts to strengthen national plans and strategies; align and harmonize partner support for implementation of plans and strategies; identify and address health

---

<sup>1</sup> See [www.hlfhealthmdgs.org](http://www.hlfhealthmdgs.org)

system bottlenecks; and develop national monitoring and evaluation mechanisms to track progress towards achieving the health MDGs.

7. The HHA supported at least 18 countries<sup>2</sup> to develop or review medium-term expenditure frameworks, donor mapping, costing and budget reviews, health sector plans, sector-wide approaches, poverty reduction strategy papers, joint results frameworks and human resources development plans. Ethiopia and Mozambique were supported to draw up road maps towards finalization of the new contractual framework or compact. The compact is a contract between a recipient country and development partners around a common results-based plan of mutual accountability.

8. At the end of February 2008, HHA in collaboration with other partners organized an interregional country health sector teams meeting in Lusaka, Zambia. Thirteen country teams met with development partners and civil society representatives to share experiences. They also agreed on a common understanding of compacts and further discussed the way forward in advancing harmonization and alignment in line with the Paris Declaration. Recommendations of the meeting were that: development partners must change the way they do business as agreed in the global compact signed in September 2007; key stakeholders of civil society should be part of the dialogue with countries and development partners; and HHA should develop country-driven approaches for technical support that responds to country needs.

9. The coordination team maintained an Intranet web site for all HHA information, facilitated partner communication and information flow, and pro-actively tracked progress on the workplan.

## **NEXT STEPS**

10. HHA will continue to support countries. The aims are to contribute to advancing progress towards the MDGs; encouraging country ownership and leadership; supporting single national results-focused, evidence-based and well-costed plans; scaling up more sustainable systems and effective interventions; and providing viable mechanisms for resource mobilization and donor coordination.

11. Further efforts will be made to strengthen the coordination, team with more resources to support countries to develop the capacities required, and to build up synergy with all the opportunities existing at global and regional level.

---

<sup>2</sup> Angola, Benin, Burkina Faso, Burundi, Cameroon, Chad, Ethiopia, Ghana, Kenya, Madagascar, Malawi, Mali, Mozambique, Niger, Nigeria, Sao Tome and Principe, Tanzania and Zambia.