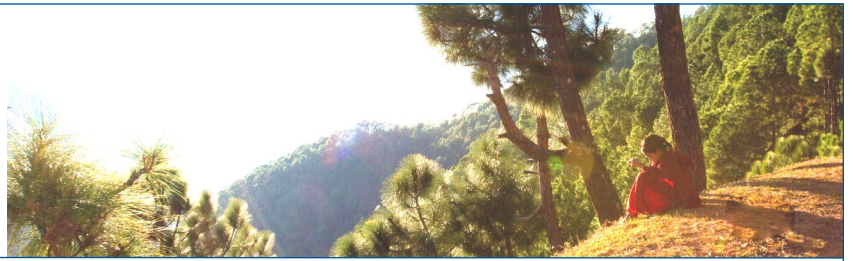




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HEALTH FOR LIFE TECHNICAL BRIEF

STRONGER SYSTEMS, HEALTHIER LIVES

DECEMBER 2016

Building Local Capacity for Evidence-based Health Planning

Overview of the 14-Step Planning Process

The Ministry of Federal Affairs and Local Development (MoFALD) implemented a cross-sector local planning process in 1999 that takes place each year to direct local development activities for the coming fiscal year. Since 2014, following the ratification of the Collaborative Framework, health has also been included in this process. Health for Life, a USAID-funded health systems strengthening project, was not only instrumental in brokering the agreement between the Ministry of Health and MoFALD that led to the Collaborative Framework, but has been deeply involved in integrating health into the planning process at the Village Development Committee (VDC) level, ensuring that public health planning is based on

evidence, engages the marginalized and disadvantaged, and is conducted in a timely manner. The planning process results in an Annual Health Plan, which serves as the guiding document for all health-related activities, and is a crucial step in strengthening local communities' ability to respond to local health needs.

As the 14-step planning process encompasses all development sectors, the approach taken by Health for Life is not limited to the health sector alone, and may be adopted by organizations working in local development in any sector.



Health for Life's Role in the Planning Process

Health for Life has been focusing on aligning health planning with the integrated local planning process in 141 high-priority VDCs in 14 core program districts since 2012, and has more recently expanded to six Ministry of Health 'demonstration districts' and 10 earthquake-affected districts, following the earthquake in April 2015. The approach has been designed to intervene in steps 5 through 8 by providing technical assistance to local health governance groups, specifically the Health Facility Organization and Management Committees (HFOMCs), as well as other local stakeholders. The intervention begins with evidence-based planning and concludes with approval of the proposed Annual Health Plan by the Village Council.

Preliminary activities



A number Health for Life's activities take place prior to the planning process but play a critical role, most importantly, the drafting of the Village Health Situation Analysis Report (VHSAR). This document, made up of evidence drawn from the health facility service register, ward-level demographic and service utilization data, the Health Facility Quality Improvement Self-Assessment and the Social Audit (when applicable) forms the foundation of the evidence-based approach to the planning process. Health for Life works closely with the HFOMC to build their capacity to

gather, analyze and interpret the evidence to form a clear picture of local demographics and health needs—paying particular attention to utilization by marginalized and disadvantaged groups,— as well as the state of the health facility.

Step 5: Settlement-level Planning Meeting

Each VDC contains nine wards, and each ward contains a number of neighborhoods, known as 'settlements.' Once the HFOMC has drafted a list of priorities based on the VHSAR, female community health volunteers (FCHVs) lobby for the proposed health-related activities during this meeting to establish development priorities for the coming year. The proposed list is sent on to the Ward Citizen Forum.

In order to strengthen local capacity and ownership, Health for Life assists the HFOMC in choosing which health-related issues to lobby for to best address the identified gaps in service provision. Because a number of issues are raised by the VHSAR, selecting the highest priorities for inclusion in the Annual Health Plan is a critical skill that HFOMC members have been strengthening through Health for Life's technical assistance.

Another key development that Health for Life has been cultivating is to make the health planning process more inclusive. HFOMCs are encouraged to hold a meeting with various local-level partners working on health where they share the VHSAR and ask for feedback. All stakeholders (FCHVs, mothers' groups/user groups, teachers, community-based organizations and political leaders) are asked to attend along with guests from the District Development Committee and District (Public) Health Office, not only to encourage greater participation, but also to ensure that participants in upcoming planning meetings are familiar with the community's health needs.

At the district level, Health for Life has been instrumental in forming and providing technical assistance to the District Health Governance Strengthening Task Forces (DHGSTFs), multi-sector coordinating teams that review health plans and monitor HFOMCs to help them implement those plans.

Step 6: Ward committee meeting to prioritize projects & activities

The Ward Citizens Forum, including representatives from each settlement, meets to prioritize the projects and activities proposed by the settlements. They decide which development activities, including health-related activities, should be included in their recommendations to the VDC Council. The minutes from the meeting along with the proposed plan are submitted to the VDC Council.

As with the settlement-level discussion, the FCHVs attend to present the community's health needs. To that end, Health for Life works with the HFOMC to ensure that all the FCHVs are familiar with the findings of the VHSAR and the proposed health plan. The VHSAR and proposed health plan are particularly effective tools for highlighting what the health-related needs are and how the proposed activities will benefit the community.

Step 7: VDC meeting to prioritize activities and allocate budgets

Having received the proposed development activities from each of the nine wards, a steering committee composed of representatives from education, health and agriculture/livestock leads the discussion and makes decisions about priorities and proposed budgets. They, along with the Integrated Plan Drafting Committee draft a proposed development plan to be submitted to the VDC council.

Health for Life staff are often invited to support the health community during the discussion. A number of attendees to the meeting have participated in Health for Life-led discussions and activities and are familiar with the health issues and proposed activities raised in the period leading up to the planning process.

Step 8: Village Council meeting to approve projects & prepare priorities

The VDC Council reviews the proposed plans, makes modifications and decides on which activities to approve based on the available budget. Once approved, the final integrated development plan is forwarded to the District Development Committee who disburses the funding.

Since the HFOMC is chaired by the VDC Secretary, health-related issues are likely to receive particular consideration. Along with the VDC Secretary, the Village Council meeting is attended by council members representing political parties, the Integrated VDC Planning Committee and the Ward Citizens Forum members.

Challenges

A majority of HFOMCs still lack sufficient experience in conducting evidence-based planning, nor do they possess the skills to follow the guidelines in the absence of technical assistance. Nationally, many HFOMCs are yet to be revitalized and oriented on their roles and responsibilities. As Health for Life continues its capacity-building efforts, it is expected that the number of HFOMCs that are able to implement the planning process without external support will grow.

At the same time, there has been limited spillover effect to VDCs that are not recipients of Health for Life's intensive technical assistance, meaning that even when HFOMCs in adjoining VDCs show an interest in applying the evidence-based approach to planning, they remain dependent on external technical assistance and financial support. In the absence of such resources, they have few opportunities to build their capacity.

Another challenge has been the difficulty in fostering ownership of the evidence-based approach to health planning at the central level. Health for Life works with the Ministry of Health to develop policies, guidelines, manuals, etc., for institutionalizing new initiatives and monitoring their impact, but until such local health planning is institutionalized by the Ministry only sporadic support can be given to the HFOMCs and the process of implementing the evidence-based approach nationally, as has been mandated in the Collaborative Framework, will be hindered.

Health for Life

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