

DFID MSP PROJECTS: DONOR COORDINATION

Project title: Developing a strategic framework for management and coordination of health sector ODA

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Aims

This project aimed to provide a framework to facilitate the coordination of Overseas Development Aid within the NDoH, in line with the principles of the Paris Declaration¹ and other best practices.

Project Description

The report was based on a desk review and interviews with key government and donor stakeholders.

Recommendations

The report made recommendations in three areas:

- Mechanisms for coordinating ODA
- A resource mobilization plan
- Building institutional capacity for resource mobilization and coordination

1: Establish mechanisms for coordination of ODA

The NDOH, in consultation with development partners, should establish mechanisms for coordinating key donors in the health sector. These might include establishing a health and HIV development partner forum. This process will be facilitated by a mapping exercise of donors active in the sector and improved coordination between relevant government departments.

Coordination between the NDoH and donors may be facilitated by:

- Establishing the current Donor Coordination Unit (DCU) as the focal point for official engagement with development partners for all health sector support.
- Adopting three levels of consultation with development partners – an annual high-level consultative meeting; technical and operational consultation and joint annual reviews.

2. Develop a resource mobilization plan

¹ The principles of the Paris Declaration, signed by donor and recipient countries in 2005, are country ownership; alignment; harmonisation; managing for results and accountability.

The NDOH DCU could:

- Prepare a summary of resource requirements, based on a comprehensive gap analysis;
- Use the donor mapping exercise to develop a profile of donors that includes information about areas of comparative advantage, trends in resource allocation, funding commitment and duration etc;
- Develop a clear analysis of resource requirements, current and planned support, and resource needs, based on robust costed budgets;
- Identify selected donors that are likely to be interested in funding areas that face funding shortfalls; and
- Convene a meeting of interested donors to discuss the potential for reallocation of expenditure or provision of additional funds to meet resource gaps.

3: Build institutional capacity and competency for coordination and resource mobilization functions

The NDOH could:

- Improve information management by updating donor mapping annually and strengthening links between the DCU database and provincial ODA coordination offices
- Improve staff skills by conducting a staff skills audit to determine capacity and training needs; providing training for DCU staff; and on analysis planning and budgeting processes and ensure that staff are fully aware of sector priorities, resource requirements and resource gaps.

Conclusion

The ODA report will form the basis of discussions at a donor harmonization workshop planned for August/September 2009

