



HLSP – Sector Wide Approaches (SWAs)

Sector wide approaches have become a key vehicle for the delivery of health sector strategies in Africa, Asia and Latin America. Supporting international thinking on harmonisation and promotion of national ownership, SWAs facilitate government led health policies and strategies and the rational use of scarce resources.

A variety of funding arrangements can fit within a SWAp, with programmes evolving according to local conditions, relationships and priorities.

As we near 2015 the pressure is on these sector programmes to deliver on improved service quality, broader access and better value for money. Other major challenges include addressing human resource constraints, particularly in Africa, integrating the work of programmes funded by global initiatives and facilitating the contribution of the for-profit and not-for-profit private sectors.

HLSP Ltd

HLSP is an international professional services firm specialising in the health sector in both the UK and worldwide. Working with international agencies and national governments, HLSP strives to advance health systems, reduce poverty, improve health outcomes and combat HIV and AIDS through long-term sustainable solutions.

Internationally we work in partnership with governments, bi-lateral agencies such as the UK's Department for International Development (DFID), multi-lateral agencies such as the Development Banks, the European Union, and the World Bank, United Nations Agencies, Global Health Partnerships and private sector organisations.

HLSP manages the contract for DFID's Health Resource Centre (HRC). The HRC provides DFID with access to technical assistance and information in support of pro-poor health policies, health systems, service delivery and public health topics and programmes. A significant amount of HLSP's experience in SWAps has been gained through the HRC contract.

HLSP works in around 30 countries at any one time and has over 100 senior, technical and administrative staff and more than 2,000 Associate Consultants. In addition to the Head Office in London, HLSP has a number of regional teams based in Bangladesh, China, Kenya, Thailand and India. The decentralised nature of HLSP's operation enables us to respond quickly to the specific needs within regions and ensure relevant and appropriate technical responses.

Since November 2003 HLSP is integrated in the Mott MacDonald group as its specialist health unit. [Mott MacDonald](#) is a UK based multi-disciplinary management, engineering and development consultancy. Its group companies have over 9,000 staff in 100 countries around the world.

Our expertise and resources in support of SWAps

For more than a decade [HLSP](#) has been supporting countries around the world prepare for, design, implement and evaluate SWAps. Our expertise ranges from supporting governments and donors in conceptual thinking to addressing the practical problems of making a sector wide approach work in a variety of policy and resource poor environments.

Specialists

Our technical staff includes **in house specialists** with extensive SWAp related experience around the world. They complement their skills with a large number of **associate consultants** who work with HLSP worldwide. Together they are available to work on both long term and short term assignments. In house specialists and associate consultants are supported by **HLSP's team of Lead Specialists** in areas that are critical to SWAp implementation. These include aid effectiveness, health systems and service delivery, health financing, HIV/AIDS, communicable diseases and maternal and newborn health. In addition to carrying out consultancy tasks Lead Specialists assure the technical quality of HLSP's work, contribute to specialist learning and ensure that our work experience and lessons deriving from it are synthesized and utilised to improve our performance. All these human resources enable HLSP to be at the cutting edge of technical thinking in SWAps, health systems and international health.

HLSP Institute

Learning is further supported by the [HLSP Institute](#). The Institute focuses on furthering knowledge in the field of development, in particular focusing on the new aid architecture and how it supports progress towards the achievement of the MDGs. A considerable amount of the work done by HLSP in SWAps has been carried out by the Institute, demonstrating a significant contribution to international thinking on best practise in sector wide approaches. The Institute has in-house expertise in developing and applying knowledge through applied research and support for scaling up evidence based interventions within the health sector.

Our detailed corporate experience in SWAps

Preparation for SWAps

HLSP has provided extensive support to governments, development agencies and national institutions preparing for a sector wide approach. We can offer familiarisation training to develop understanding of the meaning and practical implications of sector wide approaches, and facilitation between stakeholders to build consensus on the way forward. We also have extensive experience of supporting the process of preparing a sector strategy, and developing implementation systems and monitoring frameworks. Examples include:

Multi-agency Training and Orientation for Agency Staff on SWAps for Health in the context of Global Initiatives, Poverty Reduction Strategies and Development Frameworks, 2001 – 2003 – IAG These series of seminars for bilateral, multilateral and UN agency staff aimed to develop a common understanding of key concepts in SWAps, to raise awareness of the different agency policies in their country operations and to consider the implications of health SWAps in the context of country health programmes. Seminars took place in Kenya; Nicaragua (in Spanish); Vietnam; Senegal (in French); Kyrgyzstan; and India. A training manual, training modules and slides were produced for participants (on a CD): these can be downloaded from <http://www.hlspinstitute.org/projects/?mode=region&id=14990>

A Manual on SWAps for Latin America, 2005, HLSP Publication In 2005 the HLSP Institute prepared a manual on SWAps for Latin American countries following on from the support provided by HLSP to the health SWAps in Honduras and Nicaragua. The Manual is now widely used by Central American Governments for training and dissemination purposes.
<http://www.hlspinstitute.org/projects/?mode=region&id=23836>

Sector-wide approaches in education, 2003 – UNICEF This background paper was prepared for a workshop for UNICEF staff held in Kenya in August 2003. It provides an overview of key issues in the development and implementation of SWAps in education, as well as case studies from Rwanda, Uganda and Zambia.

Bangladesh – pre-design of the Health and Population Sector Programme, 1997/98 - DFID HLSP worked with the Ministry of Health and Family Welfare and DFID to facilitate the design of DFID's support to their 5-year (1998–2003) health sector programme in Bangladesh, the first and largest health SWAp in Asia.

Cambodia - Support to SWAp Development, 2002 – DFID Following the Ministry of Health's (MoH) decision in September 2001 to establish a Core Group within the Ministry to lead on the development of a health sector strategy for 2003-2007, HLSP provided technical assistance through several short term consultancies. Support focused on securing agreement on priority issues and strategic options; identifying priority areas of concern; highlighting critical choices to take issues forward; and helping the MoH senior management, the core group and the working groups that would draft the Health Sector Strategic Plan.

Cameroon - Workshop to facilitate the development of a Health SWAp, 2006 – KFW The HLSP Institute recently led a training workshop to help prepare the health SWAp in Cameroon for the MoH and its development partners. The meeting was sponsored by KFW, the World Bank, the French government and the MoH. The workshop provided background training followed by facilitation for participants to develop a 'road map' for the development of the SWAp.

Nicaragua and Honduras – Preparation of Health SWAps, 2004 – Inter American Development Bank (IADB) Through two separate contracts with the IADB office in Honduras and the Ministry of Health in Nicaragua, HLSP provided long-term support (background training; facilitation; roadmap preparation; reporting) to the preparation of the health SWAps in both Nicaragua and Honduras.

Zambia – Joint Identification Mission for a SWAp & Review of MoH Strategic Plan, 1995 – DFID This consultancy assessed the status of health sector reform in Zambia and developed a programme document for a Sector Investment Programme to be jointly funded by development partners and government. HLSP also supported the MoH with the preparatory work to draft the new sector strategy that would become the basis for the Zambian health SWAp. A working paper on practical steps in developing a Sector Strategy was also prepared.

SWAp review and evaluation

HLSP has conducted a number of reviews and evaluations of SWAps both across multiple countries by comparing progress and implementation, and at individual country level where we have supported governments and donors in their monitoring of programme progress.

Multiple Country level

Mapping of sector wide approaches in health, 2003 – Swedish International Development Agency

This discussion document provides an overview of the status of eleven SWAps in a concise and easy to read form. It was prepared to support a SIDA SWAp seminar in 2003. The countries examined are: Ghana, Tanzania, Mozambique, Senegal, Bangladesh, Zambia, Mali, Uganda, Burkina Faso, Cambodia and Malawi. <http://www.hlspinstitute.org/projects/?mode=region&id=15377>

Defining and Evaluating SWAps, 2003 – UN Inter-Agency Group on SWAps

This paper was commissioned by the Inter-Agency Group on SWAps and Development Cooperation. Its purpose was to seek agreement on the definition of a SWAp, and identify how SWAps could be evaluated. <http://www.hlspinstitute.org/projects/?mode=region&id=15361>

Integrating vertical programmes into sector wide approaches: experiences and lessons

This work looked at experiences in three countries (Ghana, Bangladesh and Zambia), which have achieved some integration of vertical programmes within their SWAp structures and processes. <http://www.hlspinstitute.org/projects/?mode=region&id=15380>

Country level

Bangladesh – Annual Programme Reviews (APR) of the Health, Nutrition and Population Sector Programme (HNPPSP); 2003, 2005 and 2006 – DFID

Bangladesh was among the first countries implementing a health SWAp. Worth an estimated \$1.3 billion the HNPPSP is the basis for the health SWAp whose pooled fund was worth around \$730 million in 2006. HLSP has provided technical consultants in several APRs and it was tasked with leading the 2006 APR. In the APR 2006 HLSP provided the team leader, public health and financial management consultants of the 11 person APR team, it facilitated the retreat of Development Partners integrated in the SWAp and it provided technical support and facilitation to the Policy Dialogue Forum hosted by the Ministry of Health and Family Welfare that follows on the APR. HLSP has also provided support to in-country review work on numerous occasions through the SHAPLA project, described later.

Cambodia – Strengthening Health Systems and Health Sector Reform Project Phases I-III – End of Project Evaluation, 2002 – DFID

A team of HLSP consultants evaluated the ten-year Cambodia Strengthening Health Systems and Reform Project which ran from 1992-2001. The objective was to assess the impact of the three phases of the project and its contribution to effective reform in Cambodia.

Ghana – Health Sector Annual Reviews of 2002 & 2003 Programme of Work, DFID

For two consecutive years HLSP looked at implementation progress on the 5 year Programme of Work forming the basis for the Ghanaian SWAp. Both reviews followed intensive and extensive internal review processes involving self-review of performance by government and aid agency staff. In 2002 the Annual Review included in-depth studies on health insurance and fee exemptions and on private-public partnerships, and in 2003 the Review included detailed studies of maternal mortality, clinical services, monitoring and evaluation, poverty and inequality of access to services, and technical reviews covering the main priority health interventions in 2003.

Malawi – SWAp Joint Mid Year Review, 2006 – DFID

Drawing on lessons from SWAps in the region, we provided inputs to the 2006 Mid Year SWAp Review and mentoring support to the Health team to promote effective transition from project management to sector monitoring and support; including routine analysis of SWAp reports and supporting the team on harmonising DFID reporting procedures.

Nepal – Health Nutrition Population Sector Program (HNPPSP) Annual Review 2005 – DFID Resource Centre

HLSP consultants participated in the first Annual Review of the HNPPSP. Inputs included finalising the Technical Review Report and facilitating the Donor-Government policy dialogue.

Zambia - Mid-term Review of the National Health Strategic Plan 2003 and Technical Support for the preparation of the NHSP 2006-2011 in 2005/06 - MoH/DFID.

The overall objective of the review was to assess mid-term progress with regard to the implementation of the National Health Strategic Plan (NHSP) 2001-2005, with particular emphasis on SWAp processes. Support to the NHSP 2006-2011 included the development of guidelines for drafting a health sector strategy, the review of NHSP drafts and the participation in stakeholder consultation workshops in Lusaka. NHSPs are the basis of the health SWAp in Zambia.

Improving partner co-ordination, harmonisation & alignment within SWApS

SWApS imply a new form of partnership between governments and their development partners. A key element of that partnership is a new “aid architecture” involving new forms of relationship, new structures for dialogue and new processes for ensuring mutual accountability around a common programme of work. These elements entail greater alignment and harmonisation of planning, implementation, monitoring and financing systems. HLSP has supported the design and review of the aid architecture in the health sector, the negotiation of ‘memoranda of understanding’ and the drafting of ‘codes of conduct’ to establish new working arrangements. HLSP has also evaluated the roles and contributions of individual partners’ efforts to enable them to work more effectively within a SWAp. The following are some examples:

Bolivia – Strengthening partner Coordination in the health Sector, 2005 – DFID As part of its ongoing support to the Bolivian MoH on Health Policy and Service delivery through the ABRIRSALUD project, HLSP delivered a series of presentations to health development partners and subsequently to the MoH outlining options for improved health sector coordination including - as an option - the launch of a health SWAp.

Honduras and Nicaragua – Case Studies on Harmonization at health sector level in Honduras and Nicaragua, 2004 - Inter American Development Bank In the context of both countries attempting to develop a SWAp in their health sectors HLSP undertook case studies focusing on progress achieved by development partners towards greater alignment and harmonisation in the health sector. These case studies were presented at the Tegucigalpa Regional Forum on Harmonisation and Alignment, and then were used for the preparation of the 2005 High level Forum on Harmonization and Alignment held in Paris on March 2005.

Malawi - Harmonised support to the health sector in Malawi, 2003-2009 – DFID This consultancy developed a draft Project Memorandum for DFID support to the MoH Malawi in the aim of achieving a harmonised approach between the Government of Malawi and its non-governmental partners, aiming to increase the effectiveness and efficiency of the health sector by reducing the fragmentation of a project-based approach.

Mozambique - Taking the Health SWAp to the next level, 2004 – DFID Following a substantial amount of consultation among development partners and MoH HLSP reviewed the aid architecture in the Mozambican health sector and developed a set of revised ToRs for the new SWAp governance and monitoring structures. The ToRs aimed to ensure that the SWAp would guide and facilitate the work of all partners towards achieving the health policy objectives in the context of poverty reduction.

Mozambique - Evaluation of Spanish Health Cooperation in Mozambique, 2004 – MOE Spain An evaluation of Spain’s development cooperation for health in Mozambique was undertaken in 2004, commissioned by the Spanish Secretariat for International Cooperation, Ministry of Foreign Affairs (MOE) in Spain. The evaluation aimed to highlight the strengths and weaknesses of the Spanish development cooperation model in health using its support to Mozambique as a case study. The review was followed by presentations to the Secretary of State for International cooperation and her cabinet.

UNICEF - Regional Health SWAp Study (Mozambique, Uganda, Malawi, Zambia and Kenya), 2004 This study looked at UNICEF’s contributions (past, current and potential) to health SWApS in the Eastern and Southern Africa region from the perspective of a “Human Rights Based Approach to Programming”. HLSP provided advisory support on the orientation and capacity building of UNICEF country staff to enable fuller participation in SWApS, taking on board actual and potential involvement in the preparation of PRSPs, MTEFs and other relevant instruments. HLSP also advised UNICEF on the development and role of UNDAFs (UN Development Assistance Frameworks).

UNFPA – Study on the role of UNFPA in SWApS, 2003 This was an important piece of work examining the role of UNFPA at country level where SWApS were being implemented. The purpose of the study was to identify constraints and best practices experienced by UNFPA in supporting the development and implementation of SWApS and to identify specific learning and training needs of country office and country support team staff. Lessons learned have been used as case studies and examples in a Distance Learning module on SWAp for UNFPA staff that was developed by HLSP.

Zambia - Review of the draft Memorandum of Understanding for the National Health Strategic Plan, 2005 – DFID

HLSP reviewed the new Memorandum of Understanding that was prepared to guide the government–donor partnership in support of delivery of the Government of Zambia’s national health and development policies.

Developing SWAp financing options

Sector wide approaches aim to harmonise donor funds and align these with sector priorities, using government systems where possible and reducing transaction costs. SWAp are not a financing option or an instrument: they simply provide a framework where several financing instruments can fit. Under a SWAp projects, programmes, earmarked funds from global initiatives and other sources of funding can evolve to become increasingly transparent and reflected in the government health budget.

HLSP has been working closely with governments and development partners appraising, implementing or evaluating financing options and instruments. Our health economists and financing specialists are well versed in all types of health financing options, while they are also competent in tools that range from Medium Term Expenditure Frameworks (MTEF), Expenditure Tracking studies, National Health Accounts (NHA) and Public or Sector Expenditure Reviews (PER)s. Furthermore, our work in SWAp has reinforced areas where HLSDP has been traditionally strong like review and strengthening of annual planning and budgeting processes. Ultimately, we aim to deliver to our clients solutions that fit their national health systems and that will deliver better services according to nationally defined sector priorities. The following are some examples:

Mozambique - Evaluation of Health Sector Common Funding Arrangements, 2004 – NORAD As part of plans to streamline common funding arrangements in the health sector of Mozambique, HLSP was requested by the Government of Norway to evaluate the performance of two common funds: the Provincial Common Fund and the Pharmaceuticals Common Fund that were integrated in the SWAp financing structure. The review looked at the history of the funds, defined performance indicators, evaluated the funds against these and appraised ways for the funds to become fully managed by the Ministry of Health (as it eventually happened).

Tanzania - Assistance to the Public Expenditure Review, 2001 – Swiss Development Cooperation and again in 2002 – DFID HLSP assisted the health sector sub-working group of the Tanzania public expenditure review with reviewing budget performance, the effectiveness of health expenditures and the MOH policy response to previous technical studies. The sub-working group made a case for budgetary reallocations within and towards the health sector and gave a broad overview of the budgetary implications of MoH policies and strategies.

Malawi - Scoping Work on Financial Management & Reporting Format for the Malawi Health SWAp, 2004 – DFID HLSP supported the strengthening of financial management capacity in anticipation of the Health SWAp. The main objectives of this TA were to finalise the financial reporting format of the Programme of Work; finalise and cost a Financial Management Improvement Plan and begin implementation; draft terms of reference for a Financial Management Improvement Committee; finalise the terms of reference for long term Financial Management technical assistance; and assist the MoH in formulating proposals to the Treasury on budgetary Programmes and Sub-Programmes for 2005.

Zambia - User Fees and Health Care Financing Projects, 2004, DFID This short term consultancy contributed towards informing policy on how the past restructuring and reform of the health care financing framework has changed performance in the health sector in relation to development and the realisation of better health services and health outcomes.

Kenya - Budget analysis of Kenyatta National Hospital and the National Training Centre, 2005 – DFID Designed to form the basis for a SWAp, this analysis provided an integral component of the planned National Health Accounts and was part of a wider situation analysis of the health sector. A detailed economic analysis of the two institutions was undertaken by HLSP consultants to assess the actual availability and utilisation of resources within the public health sector.

Zambia - Technical Assistance Pooling Tools and Lessons Learned, 2005 – DFID HLSP supported the Zambia MoH in exploring options for creating a TA Pool in the move towards developing common funding arrangements within the health sector. Within the existing SWAp, pooled funding had been characterised for many years by a district basket. More recently, cooperating partners had been disbursing to a common 'expanded basket', progressively working towards one common account. This study gathered and analysed key documentation and common guidelines related to the identification, coordination, selection, recruitment, and management of TA from other countries.

Technical resources on SWAps developed by HLSP

Defining and Evaluating sector wide approaches

The purpose of the paper (prepared for the Inter-Agency Group on SWAps and Development Cooperation) was to seek agreement on the definition of a SWAp, and identify how sector-wide approaches can be evaluated. Author: Veronica Walford

<http://www.hlspinstitute.org/projects/?mode=region&id=15361>

Mapping of sector wide approaches in health

This report provides an overview of the status of eleven sector-wide approaches (SWAps), in a concise and easy to read form. It was prepared for discussion at a SIDA SWAp seminar in 2003. The countries examined are: Ghana, Tanzania, Mozambique, Senegal, Bangladesh, Zambia, Mali, Uganda, Burkina Faso, Cambodia and Malawi. Authors: Emma Jefferys & Veronica Walford.

<http://www.hlspinstitute.org/projects/?mode=region&id=15377>

Integrating vertical programmes into sector wide approaches: experiences and lessons

The paper looks at experiences in three countries (Ghana, Bangladesh and Zambia), which have integrated some vertical programmes into their national systems, and are also supported by a sector-wide approach (SWAp). Author: Adrienne Brown

<http://www.hlspinstitute.org/projects/?mode=region&id=15380>

Sector-wide approaches in education

This background paper was prepared for a workshop for UNICEF staff held in Kenya in August 2003 and it provides an overview of key issues in the development and implementation of sector-wide approaches (SWAps) in education, as well as case studies from Rwanda, Uganda and Zambia. Other workshop presentations are also downloadable from this link:

<http://www.hlspinstitute.org/projects/?mode=region&id=15117>

Round Table Lead Article: ***"Does donor funding, earmarked for a specific intervention, such as vaccination, make it more or less likely that developing countries will allocate their resources toward programs that yield the greatest health benefits?"*** Bulletin of the World Health Organization.

Author: Catriona Waddington (*Not available from HLSP – please refer to:*

<http://www.who.int/bulletin/volumes/82/9/en/index.html> <http://www.who.int/bulletin/volumes/82/9/703.pdf>

Training Materials on SWAps and other Aid Instruments developed by HLSP

A Manual on SWAps for Latin America - Qué son y cómo se emplean los enfoques sectoriales: una vía para la armonización de la ayuda oficial al desarrollo

In 2005, the HLSP Institute prepared a manual on sector Wide Approaches for Latin American countries following on the support provided by HLSP to the health SWAps in Honduras and Nicaragua. The Manual is widely used by Central American Governments for training and dissemination purposes and although based on health sector experience, it may be of use to those attempting to develop SWAps in other sectors. Authors: Elisabet Jané, Ariadna García, Javier Martínez, Dan Wilde

<http://www.hlspinstitute.org/projects/?mode=region&id=23836>

Effective development assistance: a guide to aid instruments (CD-Rom)

This CD-Rom published by HLSP has been designed for self-directed learning. It provides a structured overview of the key aid instruments and development assistance issues. The format allows you to work at your own pace, and you can move rapidly through the sections you are familiar with or explore less familiar issues in more detail. Should you wish to develop a deeper understanding of any of these issues, there are also exercises, a bibliography and a series of key web links. Available on request by emailing institute@hlsp.org, while stocks last, free of charge

<http://www.hlspinstitute.org/projects/?mode=type&id=15313>

Sector-wide approaches for health in a changing environment

This handbook was developed by the HLSP Institute for a series of seminars for staff of development agencies and government representatives commissioned by the Inter-Agency Group on Sector-wide Approaches and Development Cooperation in Health between 2001 and 2003. The handbook covers all aspects of a SWAp from development to implementation, and is supported by case studies and extensive references. Authors: Sandra Baldwin and Adrienne Brown. Versions in English, French and Spanish are available.

<http://www.hlspinstitute.org/projects/?mode=region&id=14990>

Joint Nordic and Dutch HQ Staff PRSP Training

HLSP implemented a joint training course for headquarters staff of the donor agencies of Denmark, Sweden, Norway, Finland and The Netherlands in 2004 and 2005. Course contents and materials are downloadable from this link:

<http://www.hlspinstitute.org/projects/?mode=type&id=17188>

Joint Staff Training on Partnership for Poverty Reduction

In 2003 and 2004 eleven bilateral aid agencies offered their staff the opportunity to participate in the Joint Staff Training on Partnership for Poverty Reduction. Course contents and materials are downloadable from this link: <http://www.hlspinstitute.org/projects/?mode=type&id=13865>

Additional information on SWApS produced by the HLSP Institute

Available on request from the HLSP Institute by writing to: institute@hlsp.org

Integrating vertical programmes into sector wide approaches: Experiences and lessons.
Adrienne Brown

Measuring performance of the health sector at country level: Country examples of sector performance frameworks Veronica Walford (draft)

Capacity building and systems development for SWApS: the experience of the Ghana health sector. E. Addai, Health Resource Centre publication

Development of administrative and financial management capacity for sector-wide approaches (SWApS): the experience of the Bangladesh health sector 2001, Health Resource Centre publication.

Developing Sector Wide Approaches in the Health Sector: An issues paper for DFID Advisers and Field Managers. Veronica Walford, Health Resource Centre publication

Work in progress includes:

- Bringing SWApS and HIV together, Clare Dickinson
- CD Rom on SWApS
- Case Study on Mozambique SWAp
- Case study on Bangladesh SWAp
- Choice of Financial Aid Instruments – we are currently working with DFID to provide input to their guidance on the use of appropriate aid instruments in different settings
- Technical Approach paper on the Mozambique SWAp, HLSP Institute

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