

# Civil Society, Aid Effectiveness and Enabling Environment

## The Cases of Burkina Faso, Ghana and Zambia<sup>1</sup>

Vitalice Meja  
Reality of Aid Network, Africa

### Introduction

Civil Society Organizations (CSOs) have a comprehensive and complex mandate.<sup>2</sup> Especially in developing countries many CSOs are part of the aid delivery system. Particularly capable service delivery CSOs play an increasing and accepted role in aid delivery. A rising number of CSOs are also involved in lobbying and advocacy, human rights-based development, empowerment of the poor and marginalized, and initiation of socio-political change, to name just a few of the areas. The analysis of CSOs runs deep into the socio-political fabric of culture, society and economy. In fact CSOs are not merely actors of aid effectiveness -- they are actors of development effectiveness.<sup>3</sup>

Based on interviews and data from Burkina Faso, Ghana and Zambia, this paper examines whether civil society's realm for effective development participation in relation to governments and donors has been extended and enhanced as pledged by the Accra Agenda for Action (AAA) (2008), the outcome of the third High Level Forum on Aid Effectiveness.<sup>4</sup> What have been the changes in the available political and operational space for civil society in these three countries? In assessing this question, the paper focuses on the implementation of the AAA commitments on "democratic ownership and accountability", "division of labor" and "conditionality" in Burkina Faso, Ghana, and Zambia.

The AAA emphasizes a process of democratic ownership and accountability, which facilitates

developing countries' poverty eradication and development planning. While the Paris Declaration (PD) hardly mentions civil society,<sup>5</sup> the AAA recognizes it as a development actor "in its own right". According to the AAA, civil society is supposed to ensure, along with government and other actors, the democratic ownership and accountability of a country. The AAA is committed to multi-stakeholder development dialogues with civil society and to provide an enabling environment to maximize civil society's aid effectiveness and development contribution. Has civil society's role changed and has its views received more consideration? Is there a more enabling environment for greater CSOs effectiveness as development actors since Accra?

The research contributed to recommendations on three key issues:

- What are some measures that could improve the implementation of the PD/AAA in the context of building a stronger multi-stakeholder process together with governments, donors and CSOs?
- To what extent have governments welcomed CSOs to engage in a multi-stakeholder process? Multi-stakeholder processes are thought to improve coordination of CSO efforts with government programmes in order to work out ways in which an enabling environment could help the CSOs to maximize their contribution to development.

- Have donors given CSOs the political space and opportunity to provide their views on results- based conditionalities and country-led division of labor? How have alignment and harmonization impacted on funding opportunities for civil society organizations in the context of programme- based support?

## Country Findings

### Zambia

The Zambian government has faced numerous challenges in the implementation of the PD/AAA both as a country and in relation with the donors. This is largely due to lack of personnel to facilitate the coordination of the aid effectiveness process at the national level. In addition to this, there has been no process to ensure the implementation of the PD/AAA commitments that call for a multi-stakeholder approach despite its existence in the Zambian Aid Policy.

#### National Development Plan and Budget

The government in the course of developing its sixth National Development Plan asked CSOs to provide comments to the zero-draft. The CSOs in response produced a shadow report<sup>6</sup> that was presented to the government for consideration. In order to provide inputs into the draft Plan, CSOs mobilized and organized themselves through the Civil Society for Poverty Reduction (CSPR) platform. At this writing, the Plan is still awaiting further consultation.

It is not clear, however, if their views are reflected in subsequent versions of the national document because the process has been closed to CSOs since the submission of their Shadow National Development Plan in the middle of 2010. CSOs were of the view that they were “just rubber stamping” a Plan in the sense that its production process had begun without their input and that the

government had already prepared a zero draft with CSOs as the last to be requested for their inputs.

While such opportunities provide for CSOs’ participation in development planning and operationalization, they still remain fractured, unsystematic and not institutionalized at the national level. The situation is not any different at the planning and the local level where the problem is further compounded by capacity problems on the part of both government and CSOs on how to engage.

Other opportunities provided for CSOs to influence the policy-making process in Zambia are the Sector Working Groups (SWGs) which form the basis of alignment between the government and donors. The SWGs are key policy executing institutions that guide local governments in service delivery. The National Planning Authority also uses them to deliver on the priority interventions of the National Development Plan (NDP). The sector strategic plans spell out the details of how the NDP will be delivered within that sector. Underlying these elements are sector dialogue and sector coordination between government institutions in the sector, civil society and development partners.

At the sector advisory group level, there seems to prevail a more structured process for engagement, particularly in sectors such as health, macro economy and governance. Some CSOs receive invitations to attend the proceedings of the advisory group. However these advisory groups are riddled with challenges. The government chooses the groups it wants to work with, leaving out those it feels pose a threat. Furthermore, the advisory groups are dominated by government and donors, leaving very few seats for CSOs which are often invited the day before the meeting. Governments and donors seem to meet among themselves before they meet with the CSOs, raising the question of the sincerity of the deliberations across the sections.

This apparent “reluctant openness” of the government to CSO inputs into Development Plans and their implementation seems to be closely linked with a process requirement responding to a donor conditionality, rather than looking to CSOs as partners in development.

The Zambian national budget making process, on the other hand, is more consultative, with government inviting inputs from the public through the media and the parliamentary budget committee. CSOs provide their inputs through CSPR and Jubilee Zambia.

However, no opportunities exist for CSOs to defend their submission, nor is there a feedback mechanism on CSO contributions. Furthermore, CSOs cannot participate in the development of the supplementary budget, which is increasingly becoming an important instrument for authorizing government expenditure.

### Funding Mechanisms

There is a remarkable variety of funding instruments to support the Zambian government, including programme-based support such as direct budget support, basket or sector wide approaches as well as project based support. It is important to note that the use of direct budget support in Zambia has not achieved the intended goal that the government set funds aside to support CSO initiatives within the framework of the national development plan.<sup>7</sup> While there are some elements of outsourcing to a number of CSOs doing advocacy in the health sector --particularly in the HIV/AIDS sector -- concerns have been raised that said CSOs are after all government-owned or controlled.

### CSO Legal enabling environment

Prior to the NGO Act in August 2009, Zambian NGOs were mainly registered as a Society by the Registrar of Societies, or as a Trust or under the

Company Act. The latter made it legally difficult for the government to crack the whip on dissenting CSOs, particularly human rights and advocacy based groups. For example the “Southern African Centre for Constructive Resolution of Disputes (SACCORD)”, a human rights and good governance watchdog organization, was de-registered by the government in 2006, only to have its NGO status reinstated by the court.

In an attempt to streamline CSO operations and update its laws, the government enacted a law in 2009 that seeks to regulate the activities of NGOs and particularly those that deal with advocacy. The development of the Act missed the opportunity for a true multi-stakeholder process. Even though CSOs’ views were sought after the bill was drafted and some of their inputs were incorporated into the final Act, CSOs are of the opinion that the Act does not facilitate their work but instead restricts their operations and seeks to intimidate them from involving themselves with advocacy work. This is especially true for those working in public expenditure and monitoring, and human rights-based advocacy.

The new NGO Act gives discretionary powers to a new government-controlled NGO-board to determine both the sector and the geographical area where organizations can work. Other problematic requirements include:

- Mandatory registration of all NGOs within 30 days of their formation or adoption of their constitution, but no time limit is prescribed for the processing of an application;
- Denial of registration in the “public interest”, a term not defined and leaving scope for the exercise of executive discretion;
- Requirement of NGOs to renew registration every five years, ignoring the principle of continued existence for legal entities; and

- A code of conduct covering all NGOs, to be monitored by a government-dominated 16 member NGO-council<sup>8</sup> which has a comprehensive mandate to rule over the autonomy of individual NGOs.

Even though the NGO Act has been promulgated, it is yet to be operationalized with the relevant structures and institutions. But once implemented, the Act may have the potential of reducing critical voices and a dwindling number of civil society organizations, in particular small locally-based ones in rural and remote areas, as they will struggle to meet the criteria of the bill.<sup>9</sup>

### CSO - Donor Relations

Almost all bilateral donors' primarily engage with the government, with seemingly no substantive engagement in policy dialogue between CSOs and bi- or multilateral donors at the national level. CSOs also see donors as development partners and not as target for advocacy work and therefore have not been in a position to engage donors on such issues as policy dialogue and enabling environment, conditionality or division of labor. There is also no evidence suggesting that bi- or multilateral donors invite or include CSOs in their discussions. There is also no mechanism for bringing on board CSO views to bear on the donors' deliberations or coordination.

Joint meetings among CSOs, donors and government seem to be more of a public relations exercise, rather than a critical forum for policy engagement. This is particularly true of the multilateral institutions. Despite the conditionality agenda of the AAA (para 25c) committing to be transparent and "receptive to contributions from civil society", there is no invitation or preparedness to receive the views of CSOs on conditionalities that donors impose

and/or implement with the government. As regards issues of results-based conditionality, it is clear that this is the exclusive preserve of the government and the donors.

Furthermore, division of labor is also seen as an exclusive donor affair as donors use the Joint Assistance Strategy to determine their division of labor<sup>10</sup> and coordination. In spite of the AAA commitment to country-led division of labor, neither the government nor the CSOs are consulted in this regard. The guidelines and criteria are not clear and not made public.

On the matter of donor funding, there seems to be a more harmonized approach towards the government than towards the CSOs. There is currently only one basket fund<sup>11</sup> for CSOs in the area of governance. While this is still at its infancy, it is important to note that not all donors working on governance view this structure as a viable one and have therefore, not planned to put their funds into this structure. They opt to use their own individual partnership framework with individual CSOs.

### Ghana

Ghana's commitment to the PD/AAA is underscored by its participation in the OECD / Development Action Committee's Joint Venture on Monitoring the PD, by its hosting of the Accra High Level Forum 3 on Aid Effectiveness in 2008, and its participation in the OECD Working Party on Aid Effectiveness. These government initiatives have energized Ghanaian CSOs to organise themselves into the Ghana Aid Effectiveness Forum, which has been the basis for significant and successful engagement with both donors and government on aid effectiveness issues as reflected in the Ghana Aid Policy.

Meanwhile, national level dialogue between government and CSOs regarding CSO enabling

environment issues within the context of AAA has been mixed. There is no legal framework guiding the activities of advocacy-focused CSOs. This was due to an outcry from CSOs and a resulting stand-off after the government's promulgation of an NGO Bill in 2007. Nevertheless, there is remarkable progress in involving CSOs in the policy development of national development planning, the domestic mainstreaming of the aid effectiveness agenda, and the contributions of CSOs to the national budgeting process.

### Political and Policy Environment

The government recently finalized the "Ghana Shared Growth and Development", which is its medium-term national development framework for 2010 – 2013. The role of CSOs as development partners is fully recognized in the document, with CSOs being seen not only as service providers in the context of achieving development objectives of the framework, but also as critical players in enhancing transparency and accountability. The document calls for streamlining the roles and responsibilities of CSOs as well as developing a functional relationship with the government. CSOs inputs<sup>12</sup> were sought -- albeit belatedly after the development of the zero draft -- and they seemed to have influenced the final document.

While previously SWGs were exclusive domains of donors and government, the trends have changed with CSOs being involved, specifically on the inclusion of various CSO platforms and fora, as well as CSO think tanks. The SWG is where representatives of ministries, departments, Multilateral Development Agencies (MDAs), and donors involved in a specific sector discuss strategic plans, monitor performance and implement harmonized projects. Chief-Directors and a donor counterpart co-chair the SWGs

to ensure government ownership and mutual accountability, but a CSO is also co-chair of the SWG on governance.

The effective involvement of CSOs in the policy-making process seems to emanate not only from the national aid policy, but also from the level of preparedness of the Ghanaian CSOs to engage with the process. At the same time the government has improved its information dissemination process to CSOs.

Still, issues remain -- the practice of inviting CSOs seem sometimes to rely on the goodwill of the officers, and is not systematised and structured. There are CSOs which have already been identified by the government, which in effect preclude a CSO-based process of consultation and sector consensus building. The number of CSOs in a particular process is also not defined.

### CSO Legal Enabling Environment

While the constitution recognizes the need for broad consultation on national development issues, the government has not institutionalized and systematized the consultation process. To date, a mechanism for the feedback from the government to CSOs does not exist. With regard to lobby and advocacy organizations, there is no legislation that guides advocacy-based CSO involvement, thereby, leaving it to the executive to interpret what it would deem suitable to the public interest. The government's only attempt to streamline advocacy in an NGO Bill in 2007 was seen as controversial and thus was withdrawn due to public pressure. CSOs for their part have developed an alternative Bill and a Code of Conduct to regulate their activities, but the latter has yet also to be implemented. Both government and CSOs seem to have developed a wait-and-see attitude which has created an impasse.

## Funding Mechanisms and CSOs

In 2009 donors provided more than 25% of aid as general budget support, or approximately US\$497 million, with eight (8) bilateral and three (3) multilateral development partners participating. But despite their recognition in the medium-term development framework, there is no evidence to show that government has allocated funds to support the activities of CSOs, including their institutional support.

CSOs rely heavily on external support to facilitate their lobby and advocacy activities. Donors have not harmonized funding processes for CSOs. While there seem to be efforts to create basket funds for various sectors including those targeting CSOs, individual donors still mainly fund individual CSOs. Thus, the transaction cost for CSOs for accessing both individual donor funds and basket funds remain high. They are especially unpredictable for CSO platforms working across sectors since donors find it difficult to finance platforms especially for policy-based organizations. This compromises the participation of these CSOs in the policy-making arena, as funds for critical research and analysis are scarce in Ghana.

## CSOs, the Performance Assessment Framework, and Conditionality

CSOs participate in elaborating the Performance Assessment Framework (PAF)<sup>13</sup> within the Sector Working Group, which is where the agreed donor and government benchmarks and triggers are identified. CSOs are invited give input with regard to the already identified triggers and benchmarks, rather than at the stage of conceptualisation and establishing these targets.

As regards results-based conditionalities, there is no evidence to show that donors are receptive of the views of CSOs and these continue to be the

exclusive preserve of donors. CSOs are similarly not part of the discussions regarding country-led division of labor -- an area that is seen to be exclusively a donor concern with the government.

Criteria such as comparative advantage, proximity to national policies, experiences and capacities of donors to participate in national development dialogues with government, parliament, local government and CSOs are yet to form the core framework for the determination of donor division of labor.

## Burkina Faso

Burkina Faso is a signatory of both the PD and the AAA and is a country that has received growing amounts of donor aid. As a party to the PD, the country has adopted a National Action Plan for Aid Effectiveness. Every year the government produces a progress report on the achievements and challenges in implementing the PD/AAA, with the most recent one from 2010.

Government financing for CSOs have related directly to the national process. It financed CSO initiatives for collecting CSO input for the current national development strategy. The government also supported the post Accra meetings for CSOs to organize themselves and prepare for the monitoring of the PD/AAA.

## Political and Policy Environment

The government of Burkina Faso is currently developing the National Strategy for Accelerating Growth and Sustainable Development<sup>14</sup> as a follow up to the earlier Poverty Reduction Strategy. In the national planning process, contributions came from the various Sector Working Groups. But the government also sought to include CSOs in different ways, both at the sectoral level as well as in the national technical coordination

commission. The commission is currently composed of government representatives, three donors, three members of CSOs and the private sector. CSOs are of the view that they have been properly represented in the process and await the production of the final document.

CSOs in Burkina Faso observe improvement in their relationship with the government and the policy-making process. This is different from the earlier Poverty Reduction Strategy when policy planning and deliberation was strictly a concern of the government and the donors. CSOs have been incorporated in various organs of policy formulation including the Sector Working Groups, which review and issue recommendations on various sectors and priorities. CSOs are also part of the technical committee that is overseeing the development and the finalization of the next Medium-Term Strategy for Poverty Reduction.

The quality of CSO participation remains a concern. This is due to various reasons, including a lack of a deliberate process on scheduling of the meetings and the absence of an institutionalized framework of engagement. The executive chooses the stage he or she wants to engage CSOs in a given process. Other challenges include the timely dissemination of meeting documents to CSOs to better enable them prepare for their representation and participation.

Budget planning is a government privilege until the budget plan is submitted to the parliament, with the process guided by the Ministry of Finance. CSO contributions are limited to inputs and analysis during the parliamentary debates and after parliamentary approval. CSOs find their limited access to data and information a serious limitation for their participation in budget monitoring. This is further compounded by absence of a law guaranteeing public access to information.

CSOs receive no funding from the government for the implementation of national plans. They are also not included in the monitoring and evaluation of these plans. Despite such challenges, CSOs continue their own monitoring activities. However, very limited access to detailed information to form the basis of sound policy analysis makes this monitoring process complicated.

While at national level the budget making process remains mainly an executive function, the development of the regional budget is more democratic and open to the participation of the civil society. CSOs seem to be able to have some influence with local and regional budgets, especially under the decentralization framework. This is largely due to deliberate structures the government has created for CSOs to participate at the grassroots level.

The government has outsourced to international NGOs significant areas in the implementation of its National Strategy. The government's programme in the health and education sector use CSOs as service providers. It must however, be observed that the funds given to these CSOs are not to facilitate their work but to implement the government's operations. Furthermore, the government seems to prefer international NGOs to local CSOs, which then become subcontractors. There is no direct government funding for CSO development policy work.

### Legislation for a CSO Enabling Environment

A CSO enabling environment has not been systematized, structured and institutionalized in Burkina Faso. The political and policy space currently provided for CSOs in development planning and monitoring is not commensurate with their legal environment. Various pieces of legislation govern CSOs. However, these have not

been harmonized to streamline CSO operations. According to CSOs, this partly explains why there is no direct CSO funding made available by the government.

CSO participation relies on the benevolence of the government and is dependent on the informal contacts of CSOs with the government officials. There is no specific legal act that governs the operations of the advocacy-based organizations. On occasions when there are conflicts between the CSOs and the government, CSOs have limited room to maneuver. The law is interpreted by the state.

### Donors and CSO Engagement

The World Bank and the International Monetary Fund invite CSOs to meet their visiting delegations. However, these invitations are not seen in the context of robust policy debate or to collect CSO views, but rather a formality for the officials and a public relations exercise. Bilateral donors have also not made attempts to engage CSOs in policy dialogue or have not solicited CSOs' views.

### Donors directly funding CSOs

There is no evidence that donors have sought to harmonize their funding towards CSOs, with most donors opting to finance individual partners. Donors attempted to create a basket fund for a gender equality and gender development sector working group wherein all CSOs working on gender would be able to access funding. This, however, has yet to take effect.

### Conditionalities and Division of Labor

Apart from elaborating the triggers and the benchmarks for the donors' Performance Assessment Framework, the government also

has to satisfy multilateral conditionalities in order to continue receiving direct budget support. The triggers and benchmarks are determined at the Sector Working Group level, while the conditionalities of the multilateral institutions are negotiated in Washington and not in Burkina.

As noted above, CSO participation in these Sector Working Groups is limited and difficult. With few organizations focusing on policy advocacy, it is also difficult for CSOs to mobilize themselves to participate periodically in SWG meetings. The SWG process is resource consuming and many local CSOs are not in a position to support their engagement with the process.

While there are attempts by donors (EU-Commission and the European donors) to fast track division of labor, the process is still at its infancy. The government has little influence, if any, on how the donors assign roles to themselves. With Working Party discourse on reforming the division of labor at the global level, the government sees an opportunity for negotiation with donors on who should be the lead donor and in which sectors and regions donors should prioritize. However, CSOs are not part of this process.

## Conclusions and Recommendations

The PD/AAA has created the potential for developing and strengthening a multi-stakeholder approach in improving both policy space and the enabling environment for CSO operations. The results of the three country studies indicate that only Ghana has accorded new roles and new political and operational spaces to civil society. In all the countries reviewed however, a change in roles and spaces of CSOs requires the support of legal and constitutional confirmation.

Sector Working Groups seem to provide promising platforms for better cooperation of

governments, donors and civil society within the three countries. So far donors have not employed a division of labor approach for the purpose of strengthening the democratic ownership and accountability of civil society. Neither donors nor governments have been receptive to the view of civil society on conditionality.

The Development Effectiveness Working Group of Action of Churches Together- Alliance (ACT-A) has conducted this report out of its concern for civil society's role and space in the field of development. Unfortunately, its findings tend to reinforce the concern that in the absence of concerted initiatives from civil society itself and from governments, the political and the policy space for CSOs is in fact shrinking.

CSOs particularly in Ghana have created a platform to monitor the implementation of the Paris Declaration (PD) and the Accra Action Agenda (AAA). This has seen the quality of dialogue on aid effectiveness improve considerably between the CSOs and the government supported the development of a national aid policy. The same observation cannot be made with regard to Burkina Faso and Zambia where such platforms are non-existent.

The study found a mixed impact of PD/AAA on the political, legal, and operational environment of CSOs and on their relations with donors. While in Ghana the PD/AAA provided a strong impulse for CSOs to engage at policy level on aid effectiveness, the CSOs in Burkina Faso and Zambia did not register any significant changes. All stakeholders nevertheless unanimously endorsed the relevance and unique value of PD/AAA in creating an enabling environment for CSOs.

Donor transparency and cooperation, however, is still largely focused on the government processes. CSO -- donor relations for policy dialogue is virtually non-existent. Part of the reason given

was donor interest to foster national ownership by government. CSOs, for their part, have not made donors part of their target for advocacy work, leaving aid effectiveness initiatives of donors at the national level unmonitored.

There are critical issues that need to be addressed in order to strengthen measures undertaken in the context of PD/AAA commitments to create an enabling environment for CSOs in the countries under study. At the same time, bold steps must be taken in calling for a multi-stakeholder approach to national development if the spirit of PD/AAA is to be anchored at the national level.

From a comparative analysis perspective of the country cases, the following are recommended:

## **Governments**

### **Structured engagement**

Governments need to create an institutionalized and systematized process of deliberately seeking the inputs of CSOs in the policy dialogue. This can be done by creating additional spaces for CSOs in the Sector Working Groups or by requiring CSO participation in various commissions relevant in planning, monitoring and evaluation.

### **Improve access to information**

Access to timely information remains a challenge for CSOs across the countries, which is further compounded by the lack of "access to information" laws. For CSOs to make meaningful input to the development process and provide robust alternative policy analysis, governments should legislate Access to Information Acts to facilitate the work of CSOs.

### **Improve quality of consultative processes**

Governments lead the Sector Working Groups. But their review processes are unpredictable and

are often held in haphazard and rushed manners. It is important for governments to prepare time schedules and abide by them. At the same time, they should improve timely access to working documents. The foregoing points are important not only in improving the quality of CSO contributions to the process, but also in order to allow for ample time for CSOs to mobilize themselves and give their inputs through their fora and networks. Governments also need to develop feedback mechanisms for CSOs to be able to monitor their contributions and consider them in the policy formulation process.

### **Create a legal enabling environment for CSOs**

Governments across the three countries need to work with CSOs to develop the relevant legislation that not only anchors CSOs' legitimacy within the country's legal framework but also maximizes their contribution in the development process of their countries.

### **Donors**

#### **CSOs are key stakeholders**

Donors need to see CSOs at national level as stakeholders and as partners in development. In this context, there should be a framework for seeking to engage CSOs beyond the field missions and public relation related exercises. Donors should create and develop structures that engage CSOs in donor deliberations.

#### **CSO funding at the national level**

Donors should also consider CSO funding at the national level, particularly for advocacy-based CSOs to enhance their capacity for influencing policy formulation, not only in the budget making process, but also in the Sector Working Groups.

#### **Donors to improve access to information**

Donors need to improve donor information dissemination at the country level beyond the national government. This should be a permanent and deliberate approach to access to donor information.

#### **On division of labor**

Donors should strive to develop a full country-led dialogue on division of labor and ensure a space for CSOs in these deliberations.

### **Civil Society Organizations**

#### **Democratize consultative processes**

CSOs need to broaden and democratize their consultative process to include inputs from the grassroots-based organizationa, faith-based organizations, academics and trade unions.

#### **Improve CSO participation in Sector Working Groups**

Civil society participation in Sector Working Groups, despite many qualitative differences across the three countries, seems haphazard and inconsistent in general. Better participation could further optimize the CSO contribution. CSOs need to consolidate their representation across the SWG, take up issues of division of labor and conditionality, and streamline their engagement with the policy formulation process.

#### **Legal framework**

CSOs should develop self-regulatory mechanisms such as codes of conduct to help streamline and protect the integrity of their work. They must at the same time work with the government to facilitate laws to secure and anchor their work within the constitutions.

## Acronyms

AAA	Accra Agenda for Action
AACC	All African Conference of Churches
CSO	Civil society Organisation
CSPR	Civil society for Poverty Reduction, Zambia
JAS	Joint Assistance Strategy
HLF	High Level Forum
IDEG	Institute for Democratic Governance
MDA	Multilateral Development Agency
MDBS	Multi Donor Budget Support
NDP	National Development Plan
NGO	Non Governmental Organisation
PAF	Performance Assessment Framework
ORCADE	Organisation pour le Renforcement des Capacités de Développement, Burkina Faso
PD	Paris Declaration
SWAP	Sector Wide Approach
SWG	Sector Working Group

## Endnotes

- 1 This is a significantly edited version, published by permission, of a March 2011 report written for the Development Effectiveness Working Group of Action of Churches Together- Alliance (ACT-A/DEWG), the All African Conference of Churches (AACC), and EED, the Protestant Development Service, an Association of the Churches in Germany. ACT is an alliance of 100 churches and church-related organizations that work together in humanitarian assistance and development. The alliance works in 130 countries and mobilises US\$1.5 billion annually in its work for a just world. The alliance has over 30,000 people working for it globally. <http://www.actalliance.org/>. The full report was edited by Peter Lanzet, EED and members of the Development Effectiveness Working Group of Action of Churches Together- Alliance, and is available at <http://www.eed.de/aid-effectiveness>.
- 2 [http://www.concordeurope.org/Files/media/0\\_internetdocumentsENG/3\\_Topics/Topics/20\\_CS0\\_effectiveness/Final-Istanbul-CSO-Development-Effectiveness-Principles\\_footnote.pdf](http://www.concordeurope.org/Files/media/0_internetdocumentsENG/3_Topics/Topics/20_CS0_effectiveness/Final-Istanbul-CSO-Development-Effectiveness-Principles_footnote.pdf)
- 3 To follow the CSO debate on aid effectiveness and development effectiveness please refer to the websites' of Better Aid (<http://www.betteraid.org>) and of the Open Forum on Development Effectiveness (<http://www.cso-effectiveness.org>)
- 4 <http://siteresources.worldbank.org/ACCRAEXT/Resources/4700790-1217425866038/AAA-4-SEPTEMBER-FINAL-16h00.pdf>
- 5 2005 at the Paris Conference civil society witnessed but did not endorse the negotiations process that led to the formulation of the Paris Declaration.
- 6 The shadow report was meant to collate the views of CSOs on development priorities that the government would consider in its 6th national development plan.
- 7 Government refused to sign funding meant for CSOs from the EU because it was of the opinion that the government could not sign over funds to a sector that is not regulated. The Gender Ministry also observed it would not provide funds to CSOs since they did not know what CSOs were doing. The above statements epitomize the difficulty of government – CSO relations in Zambia.
- 8 A 16-member board will be established by the community development minister, consisting of not less than eight government officials and a minimum of two representatives from civil society, to "receive, discuss and approve the code of conduct [of NGOs], and ... provide policy guidelines to NGOs for harmonizing their activities to the national development plan of Zambia."
- 9 <http://www.irinnews.org/report.aspx?Reportid=85860>
- 10 The development of the Zambian Joint Assistance Strategy is a document developed by donors to assist in aligning their programmes around the national development priorities.

The strategy is a donor document and has no government participation in its development. It is from this document that donors derive their DoL. Donors assign each other tasks in the context of sectors identified in the strategy and this is mostly through the SWG.

- 11 A basket fund is understood to be a thematic fund operated by both donors and governments.
- 12 CSOs' inputs were limited to giving reviews and criticism to the document rather than jointly identifying the priority areas.
- 13 Performance Assessment Framework (PAF): Discussions in the SWGs result in policy reform measures. Specific growth

and poverty reduction objectives are drawn from the GPRS II and are jointly agreed as MDDBS targets. All of the targets from the SWGs are collated in a matrix or framework, called the PAF. Targets are meant to be results-oriented, time-bound, specific, measurable, realistic and achievable. From the list of targets a small sub-set will be raised to the level of a 'trigger'. Triggers are considered to be targets that require achievement and are directly linked to the disbursement of funds. The PAF is the main monitoring tool used by government and development partners within the MDDBS mechanism to jointly assess achievement of objectives.

- 14 In French this is the Strategie de Croissance Acceleree et le Developpement Durable (SCADD)

# An Assessment of Gender Equality and Human Rights Commitments in Paris Declaration/Accra Agenda for Action Action Plans

Alexandra Pittman and Anne Schoenstein with Lydia Alpizar  
Association for Women's Rights in Development (AWID)<sup>1</sup>

## Introduction

In May 2009, the co-chairs of the Working Party on Aid Effectiveness (WP-EFF) challenged the signatory governments and institutions to demonstrate their willingness to take actions to meet their commitments made in the Paris Declaration (PD) and the Accra Agenda for Action (AAA) by preparing and submitting specific country-based action plans (AAA §28).<sup>2</sup> This paper intends to review these action plans through a gender and human rights analysis.

This analysis is important given the commitments related to gender equality, human rights and environmental sustainability included in the AAA as “cornerstones for achieving enduring impact on the lives and potential of poor women, men and children” [AAA §3]. As such, the paper analyzes if and how gender equality and human rights commitments are included in the action plans, but does not assess the actual implementation of these commitments. While important, the latter was beyond the scope and aim of the research.

In summary, the findings from a content analysis of action plans reveal that:

- Only 14 out of the 35 submitted action plans included gender equality commitments. Gender equality was not included by the majority (60%) of those submitting action plans, demonstrating a low prioritization of

gender equality commitments among WP-EFF members that prepared action plans. Of the 14 members that included gender equality, only two donors, Sweden and the Netherlands, submitted comprehensive and specific proposals to make concrete commitments to advance gender equality.

- Human rights references were even less frequent than gender equality. Only seven (7) of the action plans included human rights commitments.

The analysis points to the significant need for:

- Greater prioritization of gender equality, women's rights, and human rights commitments with binding, concrete, time-bound targets and dedicated resources for their realization, as well as accountability and monitoring mechanisms;
- Enhanced democratic ownership through the creation of concrete mechanisms and allocation of resources to ensure the participation of civil society organizations (CSOs), including women's rights organizations, in development cooperation processes; and
- A human rights-based framework for development cooperation, with an integrated gender perspective situated in a truly multi-stakeholder political process for development at all levels.

## Analysis

Currently, there are 163 signatories adhering to the PD and AAA. But of these signatories, **only 35 PD/AAA action plans** were submitted to the Working Party on Aid Effectiveness (WP-EFF), representing a mere 21% of all signatories. Those submitting plans include 16 donor countries, 15 developing countries, three (3) multilateral organizations, and one (1) agency involved in a working group process.<sup>3</sup>

The main AAA paragraphs of interest for the purposes of this analysis include:

- [§3] “gender equality, respect for human rights, and environmental sustainability are cornerstones for achieving enduring impact on the lives and potential of poor women, men and children”;
- [§13c] “developing countries and donors will ensure that their respective development policies and programmes are designed and implemented in ways consistent with their agreed international commitments on gender equality, human rights, disability, and environmental sustainability”;
- [§21b] “donors and developing countries will work and agree on a set of realistic peace and state-building objectives that address the root causes of conflict and fragility and help ensure the protection and participation of women”; and
- [§23a] “Developing countries will strengthen the quality of policy design, implementation and assessment by improving information systems, including, as appropriate, disaggregating data by sex, region and socioeconomic status”

The analysis focuses on the frequency, content and quality of action plans that mention gender

equality and human rights in relation to their AAA commitments. It tracks if and how gender equality and human rights were included in the plans. While inclusion is the base level of the analysis, prioritization of commitments is also examined. Prioritization is defined by the presentation of concrete information required to implement and to establish accountability for gender equality and human rights commitments, e.g., in the form of processes, goals, indicators, targets, and resources allocated. It highlights critical gaps in democratic ownership, accountability and development for results, offering strategic and actionable recommendations for policymakers leading up to and following the Fourth High Level Forum (HLF-4) on Aid Effectiveness at the end of November 2011 in Busan, Korea.

## Gender Equality

**Overwhelmingly, gender equality was not included or prioritized by a majority (60%) of those submitting plans (n=35).** This means that only 14 members (40%) included gender equality commitments in their action plans. From the 14 action plans mentioning information relevant to gender equality commitments, eight (8) were from donor countries (Canada, Denmark, Germany, Italy, Ireland, Portugal, Sweden, UK), one (1) from a multilateral agency (European Commission (EC)), and five (5) from developing countries (Cambodia, Cameroon, Indonesia, Papua New Guinea, and Vietnam).

When analyzing the content of the action plans, one would expect to find concrete goals, indicators, activities and timelines for gender equality objectives to be achieved by the end of the period. **However, most signatories’ plans were very general, some even vague, in terms of detailing concrete steps for delivering on their gender equality commitments.**

Six countries (Indonesia, Ireland, Italy, Papua New Guinea, Vietnam, and UK) made general references to gender equality. However, these references were often quite literal, such as repeating or slightly adapting the wording of the AAA commitments, e.g., the UK's, Papua New Guinea's and Vietnam's commitment to AAA §13c. Others merely mention gender issues as important to development, such as Indonesia or they address gender among a long list of other issues, e.g., Italy. Additionally, four (4) action plans (Cambodia, Cameroon, Germany, EC) referenced gender equality in specific areas of their plans, but in generalized terms, are often linked to one of the PD principles.

The Danish action plan highlighted its fulfilment of gender equality commitments, noting that

“specific strategies exist on Gender, Human Rights and Environment, which are consistent with paragraph 13c” (p. 2); although how fulfilment was actually measured and achieved was unclear. There was also no mention of §21b or §23a, which include setting realistic peace and state building objectives and improving information systems, obscuring how the country is supporting concretely the integration of women's participation in fragile states or implementing sex-disaggregated indicators and accountability mechanisms.

Only three (3) signatories, out of 35, referenced the participation of women in fragile states, (Canada, Portugal, EC). This is somewhat surprising given the significant focus on fragile countries in bilateral aid, i.e., 30% of net Official

#### **Box 1** Dutch PD/AAA Action Plan

The Dutch plan articulates its gender commitments under ownership, and concretely under the chapter on “using country-systems”, working towards strengthening locally rooted capacity-building processes. The plan notes *that budgetary and statistical systems should include gender-specific data, which can be used to perform analyses and shape the country's future policy* (p. 17). In order to do so, the Dutch plan set forth specific activities towards this aim of establishing *a country-specific approach for at least 27 partner countries* by the end of 2009; specific issues to be addressed that include a gender dimension include - *providing (or increasing) support for public financial management in partner countries that have not scored well in this respect. We pursue a multi-donor approach, which is informed by the Public Expenditure and Financial Assessment (PEFA) studies. In that context we look for ways of supporting gender-based budgeting and aligning our efforts as much as possible with locally rooted capacity-building activities.* (p.17)

Under harmonization, the Dutch want to *ensure* (in cooperation with the Nordic-donors) *that (shared) expertise on gender issues is present at (their) embassies in our partner countries* (p. 39). Women's status is contemplated in the preamble of their chapter on (mutual) accountability and transparency by promoting a policy dialogue that *also cover – [albeit only] as appropriate - issues like corruption, the status of women, human rights, the environment and people with disabilities* (p. 23). And, under their chapter on results-oriented approach they stress the importance of sound statistics that include data on the status of women (p. 29).

Development Assistance (ODA) flows (excluding debt relief to fragile states) went to fragile states in 2008.<sup>4</sup> This finding underscores a general lack of commitment and recognition of the important role that women play as key actors advancing peace-building and post-conflict reconstruction in countries experiencing conflict.

**Out of the 14 action plans, only two (2) donors (Netherlands and Sweden) attempt to have a comprehensive integration of a gender perspective within its action plan.** See Box 1.

**Specific, time-bound accountability indicators are still lacking in most plans,** except in the more detailed articulations by Sweden, the EC, and Cameroon (see Box 2 in the next section). Indeed most plans quite literally merely reiterate AAA gender equality commitments without specific implementation or accountability steps. **This failure underscores an extremely low priority for gender equality and highlights critical gaps in the internalization and ownership of the commitments, in addition to underlining the weakness of the current aid effectiveness framework itself.**

**The AAA gender equality commitments cannot be fully met without ensuring a gender perspective that is integrated throughout all development cooperation processes and commitments.** This approach requires alignment with international women's rights and human rights agreements, such as the Beijing Platform for Action (BPfA) or Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW). **It necessitates the implementation of a three-layered gender equality approach:** gender equality as a sector-thematic area; mainstreaming gender equality; and supporting, promoting and ensuring the participation of women's machineries, gender advocates, women's rights and women's organizations in all aspects of development cooperation.

Gender equality as a cross-cutting theme, or gender mainstreaming alone, has largely been inefficient in ensuring lasting social change to advance women's rights and justice.<sup>5</sup> Indeed, harmonization and mainstreaming processes have at times exacerbated the disconnect between gender equality commitments and implementation, positioning them as technical exercises, depoliticizing and emptying these strategies of its truly transformative development capacity.<sup>6</sup> It has become clear that gender equality will only truly be integrated into development cooperation if it is a visible and explicit priority, budgeted and adequately resourced, includes clear indicators and time-bound targets, and monitored both by official bodies and CSOs.

## Human Rights

**Human rights references were even less frequent than gender equality references in the sample of 35 action plans.** In fact, only seven (7) members (20%) submitted action plans referencing human rights commitments (§13c). Of these seven (7), six (6) are from donor countries (Denmark, Germany, Italy, Netherlands, Sweden, UK) and one (1) from a developing country (Papua New Guinea).

In two (2) cases, the action plans referencing human rights were more specific than their gender equality plans. The Italian plan offers concrete steps for integrating human rights with existing sector-based guidelines as well as in operational guidelines for the participation of Italian Cooperation in General Budget Support (GBS) instruments. According to the Italian action plan, "the use of GBS...will be subject to certain conditions, such as respect for human rights, the evaluation of political objectives in the fight against poverty in the partner country..."(p. 3). Additionally, the Dutch action plan places financial and disbursement consequences on partners that "do not adhere to agreements or violates this trust in some way" (p.20, 21, 23).

In this context, the problematic issue of policy conditionalities cannot be ignored. The Italian and Dutch references to human rights appear in their action plans as conditionalities, highlighting the demand from the donor country to ensure that partner countries fulfill their human rights obligations, without any mention of the donor countries' own commitment to fulfill their own human rights obligations. All actors in development cooperation should recognize that human rights are not conditionalities, which may or may not be adhered to, but are legal international obligations accepted by all Member States of the United Nations. Therefore the obligations by *all* actors, including donor countries, in the fulfilment of human rights within development cooperation, must be included in these actions plans.

Obligations to advance gender equality and women's rights cannot be imposed in the form of conditionalities because the obligations and standards that derive from these rights are fundamental legal commitments made by all States. Policy conditionalities imposed by donor countries and international financial institutions, in the context of significant inequalities of power, are not consistent with human rights standards and undermine the democratic ownership principle, the right to development, including the right to self-determination of people. There is a clear need on the part of all countries involved in

development cooperation (including donors) to establish equitable accountability mechanisms for the protection and fulfillment of human rights.

Only one (1) action plan (Sweden) attempts to address the human rights commitment in a deeper fashion, outlining additional indicators. (See Box 2).

The overwhelming omission of human rights in all but one of the action plans highlights a significant gap and points to the serious limitations of the current development cooperation system. This is the context in which women's rights groups and other CSOs, such as those in the BetterAid platform, are pushing the commitment to human rights one step further in HLF-4, by underscoring the need to advance a human rights-based approach to development cooperation instead of the current aid effectiveness framework.<sup>7</sup>

## Recommendations<sup>8</sup>

Just and equitable development will only advance through concrete actionable proposals that implement essential norms for development cooperation. The following recommendations therefore address mutual accountability, democratic participation and ownership, and gender equality results in development, stemming from the findings and analysis of the action plans.

### Box 2 Swedish PD/AAA Action Plan

The Swedish plan is unique in that it commits to developing additional indicators *to follow up the reinforced commitments in the Accra Agenda for Action, above all as regards the commitment to support broadened ownership [...], in alignment with 13c, recognizing the relationship between the aid effectiveness agenda and gender equality as a matter of priority* (p. 2 and 15 for specific indicators).

In addition, the plan has a section where they present categories where the Swedish development cooperation's focus on *respect for human rights* is central, together with democracy, in *Countries where Sweden conducts democracy-building cooperation in alternative forms* (p. 28)

**Greater prioritization of gender equality, women's rights and human rights with binding, concrete and time-bound targets and mechanisms for accountability and monitoring, in addition to adequate dedicated resources for realization.**

- *Agree on and implement a three-layered approach to gender equality (i.e., gender equality as a sector-thematic area, mainstreaming, and ensuring the participation of women's organizations and other government and CSO actors) and ensure that policymakers and all governments and multilaterals are trained and have the skills and capacity needed for gender and social analyses, as well as the resources needed to implement the proposed three-track system.*
- *Institutionalize reliable gender-disaggregated tracking systems with the ability to track the amount and type of support to gender equality and women's rights through ODA and its results. This should be done using tools, such as the DAC gender equality policy marker<sup>9</sup> and human rights monitoring mechanisms: governments' reports to the UN Committee on the Elimination of all Forms of Discrimination Against Women (CEDAW) or to the UN Committee on Economic Social and Cultural Rights; or reports from country visits by relevant UN Special Rapporteurs to both donor and developing countries.*
- *Accept the recommendation that the share of ODA for gender equality and women's empowerment be scaled up to 20 percent by 2015.<sup>10</sup>*

**Enhance CSO participation, particularly women's rights organizations, in accountability and monitoring processes, strengthening democratic ownership.**

- *Ensure meaningful participation and voice on the part of CSOs and women's rights groups in development cooperation processes, such as in the process leading up*

*to Busan and HLF-4 itself, and the inclusion of their recommendations in output documents.* The right to participation is a critical element of a human rights approach to development cooperation.

- *Deepen commitments to democratic ownership of the development process, by ensuring democratic mechanisms for the participation of citizens, civil society, particularly women's organizations from marginalized settings, and parliaments in deciding, planning, implementing and assessing national plans, policies, programs and budgets.*
- *Eliminate all policy conditionalities, including those on human rights or gender equality, as these violate commitments to democratic ownership and the right to development. Obligations to advance gender equality and women's rights therefore, should not be imposed in the form of policy conditionalities because they are key legal obligations made by all States. Accountability based on human rights norms and standards should be the foundation for all states involved in development cooperation to assess development effectiveness.*
- *Use country-relevant gender equality indicators, processes and tools as the basis to monitor results and progress towards development goals, including and explicitly gender equality. Existing mechanisms include MDG targets and indicators, as well as CEDAW reporting requirements and reporting on the BPfA. Additionally, there are international accountability processes such as the Human Rights Council Universal Periodic Review, and accountability mechanisms in regional human rights conventions that could contribute to this purpose, such as the Inter American Convention on the Prevention, Punishment, and Eradication of Violence Against Women, "Convention of Belem do Pará", or the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa, the so called "Maputo Protocol".*

**Advance a human rights-based framework for development cooperation, with an integrated gender equality perspective, situated in a truly multi-stakeholder development process.**

- *Shift from an aid effectiveness to a development effectiveness<sup>11</sup> paradigm.* A human rights-based development effectiveness approach would be inclusive, democratic, and promote sovereignty and coherence with human rights norms and standards, recognizing gender equality as a central catalyst for development.<sup>12</sup>
- *Assure policy coherence, based on human rights norms and standards, for different global policies and actions to achieve Internationally Agreed Development Goals (IADGs), ensuring that different policies do not undermine each other, including the priorities democratically set by respective countries.* CSOs conceptualize policy coherence as a principle, which ensures that development cooperation, trade policies, financial regulation, migration policies and defense policies all align with human rights standards and other IADGs. In this framework, policies must not undermine each other and cannot merely address economic growth or align only with donor's own economic interests.
- *Establish a new development cooperation framework, or "architecture" with a multilateral and multi-stakeholder body that ensures the representation and full inclusion of all development actors.* The UN Development Cooperation Forum should be strengthened to become the main space for policy and standard setting for development cooperation, while the OECD, through its Development Assistance Committee should refine its mandate to focus on its original function: information gathering, systematization and reporting on aid flows.

## Conclusion

The analysis of PD/AAA action plans demonstrates that the cornerstones of development as stated in the AAA - gender equality, human rights and environmental sustainability - are overwhelmingly absent or superficially articulated. This does not bode well for the actual implementation and fulfilment of women's rights and gender equality commitments in the implementation of the PD and AAA. The recommendations outlined above aim to address this lack of inclusion and prioritization, paying particular attention to the issues of democratic ownership, participation and development results for gender equality.

HLF-4 is a key opportunity to go beyond promises towards a binding agreement on development cooperation that is human rights-based, and with an independent and mandatory accountability framework. This is the time for all actors involved in the HLF-4 process to ensure that commitments are made. Such commitments should transform the current development cooperation framework to be rights-based, truly inclusive of all actors, and effective in its ability to positively impact on all people's lives. The HLF-4 process should build on the learnings since Paris in 2005 and other relevant international processes. It should ensure that this time, donor and developing countries are truly accountable. All must step up to the challenge to reach concrete agreements that profoundly change the existing realities of inequality, increasing poverty, violence and environmental degradation, which affect the lives of millions of people worldwide, particularly women.

## Endnotes

- 1 This article is based on in-depth research and analysis conducted by Nerea Craviotto with AWID as an effort within the BetterAid Coordinating Group.
- 2 Letter of the co-chairs of the WP-EFF 26 May 2009.
- 3 This includes: Australia and the Pacific Islands, Bangladesh, Belgium, Benin, Cambodia, Cameroon, Canada, Colombia, Czech Republic, Denmark, the European Commission, Germany, Global Programmes Learning Group (WG), the Inter-American Development Bank (IADB), Indonesia, Ireland, Italy, Lesotho, Luxembourg, Mali, Morocco, the Netherlands, New Zealand, Nicaragua, Papua New Guinea, Poland, Portugal, Senegal, Sri Lanka, Sweden, Switzerland, Tanzania, UK, Vietnam, and the World Bank (WB).
- 4 ODA to fragile states increased in 2008, to 33.2 billion USD or at a rate of 8.7% (in real terms); however, deeper analysis shows that over half of ODA flows goes to benefit just six (6) out of the 43 fragile states. See "Ensuring Fragile States are Not Left Behind." February 2010. OCED DAC. <http://www.oecd.org/dataoecd/12/55/45659170.pdf>
- 5 See Hilary Charlesworth (2005) or Caroline Moser (2005) for further discussion of the barriers to institutional change due to gender mainstreaming.
- 6 See the Nicaraguan case in "Latin American Regional Report. Mapping Studies on Aid Effectiveness and Gender Equality: Honduras, Nicaragua, Surinam, EC/UN Partnership on Gender Equality for Development and Peace", draft March 2008. As described in Cecilia Alemany, Lydia Alpizar, Fernanda Hopenhaym, Michele Knab, Nerea Craviotto, Therese Nyondiko, and Gigi Francisco. 2008. "Brief Issue Paper on Harmonization and Gender Equality." AWID.
- 7 BetterAid theme proposals to the WP-EFF in the lead up to the HLF-4, January 2011.
- 8 Recommendations draw on proposals made by women's rights organizations and alliances before Accra HLF-3, such as AWID, DAWN, FEMNET, and WIDE, the Accra International Women's Forum and UN expert groups, and include key issues from BetterAid and from an international strategy meeting of women's groups on the road to Busan that took place in February 2011 convened by AWID, FEMNET and WIDE.
- 9 "The OECD-DAC gender marker is one of the best tools available to track funding for gender equality. Although its use is limited to bilateral donor agencies, other donor sectors (international NGOs, private foundations) could greatly benefit from such a tool if they are serious about monitoring their support for gender equality." Source and for more details please see: Lydia Alpizar, Cindy Clark, Sarah Rosenhek and Verónica Vidal, with inputs from Lucia Carrasco. AWID 2010. "Context and Trends Influencing the Funding Landscape for Gender Equality and Women's Organizations & Movements. <http://www.awid.org/eng/Library/Context-Trends-FundHer-Research-Update-Brief-Series>
- 10 Financing for gender equality and the empowerment of women. Report of the Expert Group Meeting organized by The Division for the Advancement of Women and hosted by the Government of Norway Oslo, Norway, 4-7 September 2007. EGM/FFGE/2007/REPORT, p.29.
- 11 "Development effectiveness promotes sustainable change that addresses the root causes as well as the symptoms of poverty, inequality, marginalization and injustice... It also aims to dismantle patriarchal power structures and end women's subordination in productive and reproductive roles. The poor and marginalized are positioned as the central actors and owners of development, challenging many of the current approaches to aid effectiveness...Development cooperation should be about supporting conditions in which people can exercise sovereignty over their own process of development... Indeed, it should aim to eliminate the structural bases of underdevelopment that foster dependency on foreign aid, foreign capital and technologies and external markets..." (BetterAid, 2010, p.3). In Better Aid. 2010. "Development effectiveness in development cooperation: a rights-based perspective." October 2010.
- 12 Adapted from Raaber, Natalie, Alemany, Cecilia, and Schoenstein, Anne. 2009. *Alternative development models and practices from feminist perspectives. Debate Issues prepared for the 53rd Session of the Commission on the Status of Women.* AWID.

# Aid Effectiveness: How to make it healthier

Rebekah Webb

A Report Prepared for Action for Global Health<sup>1</sup>

Ensuring that aid to health is effective has never been more important as the international community seeks to reach the Millennium Development Goals (MDGs) in less than five (5) year's time. In recent years, the European Union (EU) has been committed to reforming its external aid instruments according to the aid effectiveness principles established by the Paris Declaration (PD) on Aid Effectiveness in 2005 and the Accra Agenda for Action (AAA) in 2008.

Currently, the aid effectiveness agenda are having unintended 'side effects' for civil society, health outcomes and the MDGs that are decidedly unhealthy, both in financial and in practical terms. Three central problems require urgent attention:

1. *Donor coordination and alignment* have not always had a positive impact in terms of improving health systems and outcomes. Existing coordination mechanisms are complex and time-consuming, and are often process-oriented instead of impact-oriented. Moreover, donors have often used division-of-labor arguments in order to cut ODA spending in general, and health aid in particular.
2. *Ownership* - Civil society, including Parliament, is largely excluded from health policy decision-making. Where mechanisms to include non-state actors are in place, governments tend to hand-pick a select group to engage. Donors are not meeting their

commitments to build the capacity of civil society. The principle of ownership is not being defined or operationalized as it was originally intended, to the detriment of health outcomes.

3. *Managing for Results* - Aid is not making enough impact. Even where policies are strong, implementation is weak. Very little aid is actually filtering down to the poor and results are not tied to MDGs. Being able to draw a straight line from aid flows to a tangible, visible improvement in the lives and rights of the poorest people is almost impossible. Instead of addressing this from the perspective of recipients, managing for results is being misinterpreted as financing by results.

## Coordination of Health Aid: Mission Impossible?

Nowhere is the need for donor coordination more evident than in health. Over the past two (2) decades, the number of donors, financing and delivery mechanisms in global health has grown exponentially. There are now more than 100 global partnerships in the health sector alone, with 80% of the donors providing just 10% of the total assistance<sup>2</sup>. Each of these donors has its own particular, and often conflicting, method of aid delivery, monitoring and evaluation framework and timeframe. The result is chaotic

and expensive for the intended beneficiaries, with Ministries of Health overwhelmed by the weight of administration required to manage donor relationships and meet donor requirements<sup>3</sup>.

There has been a progressive movement in the development field as a whole from donor control towards government control, away from project-based aid to general budget support. Similarly, there has been a strong growth in the number of vertical initiatives and funds in response to health emergencies, particularly HIV/AIDS. Donors however, appear to be unaware of how these initiatives and different aid modalities and approaches can interact with domestic power dynamics<sup>4</sup>.

Through the PD, signatories committed to work together on a range of concepts and tools, including joint actions and research, common procedures, comparative advantage, complementarity and delegation. One of the central aims was to ensure that donors harmonize and align their policies and aid modalities to suit government priorities. Most of the focus, particularly within the EU, has been on the concept of 'division of labor' and reducing the number of donors involved in key sectors at a national level. In Accra in 2008, effort was made to bring the concept of ownership back into the harmonization agenda, to place the role of recipients more centrally in determining how they want donors to be active in their countries and to warn against applying the concept of division of labor that diminishes the quality and quantity of aid.

### **The impact of European donor coordination on health aid**

In 2007, the European Union introduced a voluntary European Code of Conduct on the Division of Labour in Development Policy, the consequences of which has not been good for health. In practice, the division of labor policy

has led to the European Commission stepping out of the health sector in a number of countries that are struggling to meet the health MDGs, with serious consequences for progress. This has been the case in both Uganda and Tanzania. Meanwhile, in Mozambique, some European donors seem to have used the policy to justify significant cuts in their aid budgets, instead of applying the principle of 'delegated cooperation'<sup>5</sup>. A European donor official described it as "the sector-exit strategy"<sup>6</sup>. Overall, following the implementation of Division of Labour, European Commission health aid was reduced from 4.7% of total EC aid in 2005 to 1.3% in 2008<sup>7</sup>.

Since 2005, many European bilateral donors have joined the European Commission in raising the proportion of aid allocated through general budget support (GBS) as a direct response to Paris and Accra principles. The rationale behind GBS is that it gives developing countries greater control over how aid is used, reduces the unpredictability of aid flows and reduces transaction costs. Channelling funds directly through government systems builds planning and budgeting capacity and strengthens public accountability mechanisms. In terms of health, long-term and predictable support is ideal since 80% of health system expenditures are recurring costs. GBS can also have positive impact on health and universal access goals in that funding can be used for infrastructure that benefits rural health, such as roads and sanitation projects.

Assessments of EU GBS have recommended that the Commission strengthen its management of performance-related conditions and indicators for GBS, which should include a clear and structured process for assessments and disbursements. Arguably, such indicators should be based on internationally agreed health targets, such as the 15% health sector share target of the Abuja Declaration.

Providing funding directly to Ministries of Health in the form of sector budget support (SBS) overcomes some, but not all, of the challenges associated with GBS. SBS combines use of government systems with donor preferences for how money should be allocated and offers clear advantages over general budget support in that Ministries of Health do not have to compete for their fair share. However, there is no guarantee that funds will be used appropriately. Health funding can still get stuck at the level of central or district authorities, as it has done in Nepal, holding back efforts towards universal access<sup>8</sup>. Research has demonstrated that government-controlled resources are slow to reach the local level -- as little as 20% -- where health programming is most needed<sup>9</sup>.

In light of anxieties surrounding government handling of funds, global health initiatives have preferred to create and use their own aid delivery systems. The rapid rise in the number of these initiatives has been one of the defining features of the global health arena in recent years. Although they have been able to achieve significant results in saving lives, there are widespread concerns that these vertical health funding mechanisms are distorting partner country priorities by drawing resources away from basic health sector reforms, contributing to the brain drain of government health workers and using burdensome reporting requirements and processes<sup>10</sup>. In El Salvador, for example, there are as many as 22 vertical funds, with 60 disbursement systems<sup>11</sup>. More recently, vertical health funding mechanisms, such as the Global Fund and PEFPAR, are beginning to adopt a more integral approach in order to contribute to health system strengthening and at the same time further implement the Paris declaration principles.

Clearly, dependence on one aid modality to the exclusion of others is problematic for health outcomes. Only a mix of these financing mechanisms allows for a careful adaptation to the

characteristics, politics, drivers and constraints in a specific country situation and sectors as well as targeted support to CSOs and CBOs, especially those working with marginalized and stigmatized populations which often have limited or no access to government funding. Project-based aid, although limited in aid effectiveness terms, can be useful to provide policy and technical support and capacity building, to finance pilot interventions and innovative health programs. In the case of HIV/AIDS -- which is highly stigmatized and involves life-long drug treatment -- there may always be a need for such vertical funding.

### Best practices

A significant boost to donor coordination has also been provided through the launch of the International Health Partnership and related initiatives (IHP+), particularly in connection with the Joint Assessment of National Strategies (JANS) process, which has been used to develop national health strategies in Nepal, Uganda, Mozambique and Ethiopia. The aim of the IHP+ is to mobilize donor countries and aid agencies around a single country-led national health plan, guided by the principles of the PD and AAA. Some of the positive health outcomes associated with the IHP+ have been stronger country leadership to drive donors in the right direction to support their own national plans; and better harmonization between donors and a much stronger involvement of stakeholders, and specifically CSOs, in the planning, implementing following national plans. In Ethiopia, an evaluation of the process similarly concluded that JANS 'is widely seen as improving the quality of the strategic plan, and has increased the buy-in and understanding of the resident and international partners as well as CSOs/NGOs'. The JANS provided a mechanism for the systematic engagement of CSOs which previously had not been active in health policy<sup>12</sup>.

## Recommendations

Donors should be wary of harmonizing around one single method of aid delivery, but use an appropriate mix of financing mechanisms, ensuring that they are strongly aligned with nationally and democratically defined policy frameworks, plans and financial systems.

This can be achieved through:

- Enabling partner countries to choose between a range of aid modalities that are defined by the local context and not by donor and static standards.
- Reserving budget support for countries with a strong commitment to health, including solid and inclusive national health plans and implementation strategies. The IHP+ and JANS process is a good method for judging this level of commitment.
- Ensuring that general budget support leads to health and community systems strengthening, fair access and achieving the right to health, within the framework of coherent health strategic plans, by using a gender analysis and planning as well as health-specific and gender-sensitive qualitative indicators based on internationally agreed targets, such as those in the Millennium, Abuja, Cairo and Beijing Declarations.
- Using budget support policy dialogue to advocate for domestic funding increases to reach the international targets mentioned above. To that end, the relevant line ministries, such as the Ministry of Health, need to be included in the dialogue with the Ministry of Finance.
- Strongly supporting IHP+ implementation at the country level by encouraging bilateral agencies and global health initiatives to increase their participation in the national process and ensuring that civil society is meaningfully included.
- Fostering, instead of creating new, existing coordinating mechanisms that are proven to be efficient. This is particularly relevant with the IHP+ initiative and the new Health Systems Funding Platform.
- Ensuring that money given through vertical funds is cost-effective and does not have negative externalities on efforts to strengthen health systems, using country systems where possible in order to limit fragmentation.
- Focusing on IHP implementation each time it is signed by a partner country in order to increase coordination and meaningful participation from all actors including CSOs. Donors also need to ensure that countries which develop a country compact and go through a JANS process have fully-funded national plans.
- Using clear, shared and transparent criteria when applying Division of Labor to decision-making processes on staying or withdrawing from a partner country, which will be agreed upon with CSO representatives, the government and parliamentarians. Those criteria must guarantee that health sector funding remains at the same level and that there will not be a decrease in funds.
- Building the capacity of domestic accountability structures including national Parliaments, national audit institutions, the Judiciary and civil society.

## No ownership without civil society

The interface that civil society can play between governments, donors and communities enables CSOs to support greater political engagement and advocate for rights to be respected and reinforced. Civil society participation can contribute to enhancing government accountability and transparency while advocating for equitable and pro-poor health policies. Civil society can hold both donors and recipient countries accountable for effective utilization of development aid. Without the full engagement of civil society, country health plans are unlikely to be effective.

A significant step towards recognizing the value of civil society engagement in policy and decision-making processes was taken during the 3<sup>rd</sup> High level Forum in Accra. However, in practice, the Paris Declaration principle of ‘ownership’ is all too often interpreted narrowly as ‘government’ ownership, driven by the priorities of the Ministry of Finance. True democracies rely on the checks and balances provided by a variety of domestic accountability stakeholders. The basis for democratic ownership is that the interests and voices of *all* citizens are included in national development strategies and that everyone benefits from development results<sup>13</sup>. In the case of health, the democratic and fully inclusive formation of a country health plan should be a first step towards country ownership of its health agenda.

### Current barriers to meaningful engagement with civil society

Research by AfGH has revealed that considerable efforts are still needed at the country-level to ensure that the Accra commitments are turned into action<sup>14</sup>. The lack of engagement is particularly evident with regard to government-led country health sector teams where CSOs are

facing a number of challenges including being prevented from involvement in national health planning and monitoring.

This is due principally to the following reasons:

- Suspicion and mistrust towards CSOs within Ministries: Governments tend to prefer to work with a hand-picked group of well-known NGOs, with smaller in-country and community-based organizations usually not on the guest list to participate in annual consultations despite their strong role in health provision<sup>15</sup>.
- CSOs are not regarded as legitimate actors: CSO ‘partners’ are relied upon to deliver services but as ‘sub-contractors’ have little or no room for mutual influencing and accountability. This is particularly the case for organizations that are not engaged in service delivery and which focus on issues that are not considered to be a national priority, such as women’s rights; lesbians, gays, bisexuals and transgender (LGBT) rights; or the rights and networks of people living with HIV.
- Severe restriction of CSO roles and activities: In Zambia for example, according to proposed legislation, all CSOs would have to operate under three-year licenses, making strategic planning and fundraising extremely challenging. Donors are reluctant to question the introduction of such laws, perceiving them as a legitimate action by a democratic government, even as progress on alignment and harmonization are held back by poor human rights records in these countries<sup>16</sup>.
- Lack of transparency and of consultation of civil society, including Parliament: The role of Parliament is often limited to basic oversight of the budget. In Uganda, members of parliament (MPs) only have one month to

scrutinize the budget. In Mozambique and Zambia, health reports are not made available to Parliament. As a result, there is a low level of awareness and acceptance of the MDG targets and aid effectiveness processes among MPs.

- Lack of funding for local CSOs' capacity building: CSOs and local NGOs on the frontline of service delivery simply do not have time or resources to invest in building their financial and resource mobilization capacity. This does not mean that they are incapable of using funds well. The European Commission, in particular, does not have a strong track record of making its funds for advocacy easily accessible for civil society.

## Best Practices

One of the key priorities of the new El Salvadorian Ministry of Health during its first 100 days in office was the establishment of a National Health Forum. The Forum, launched in May 2010, is designed to unify and strengthen the civil society movement by acting as an open platform for all non-state actors working on health. Even though it was initially facilitated by the administration, the Forum aims to be an independent space to communicate CSO health concerns to the Ministry.

At the international level, progress has also been made to increase the role and recognition of civil society as key actors in policy and decision-making processes, notably in relation to the structure of the Global Fund and more recently with GAVI. The national coordinating mechanism of the Global Fund is considered by many CSOs – notwithstanding its limitations -- to be a best practice model for civil society and Parliament engagement<sup>17</sup>. Another example of strong CSO participation in the health sector is the IHP+ initiative, where both northern and southern civil society are now represented on the

global management structure. It has been shown that in countries where an IHP+ Compact is signed, civil society participation in decision-making process increases<sup>18</sup>.

## Recommendations

Donors must step up efforts to ensure the meaningful and systematic participation of a wider diversity of CSOs, especially women's and community-based organizations that represent marginalized and vulnerable groups in the development of national health plans.

In line with their commitments under the AAA, donors can specifically contribute to greater democratic ownership by:

- Allocating sufficient aid to directly support community empowerment and community systems' strengthening so as to increase communities' awareness of existing health services; their participation in health decision-making at local and district levels; and support for their role as community health care providers.
- Allocating sufficient aid to strengthening civil society in developing countries by funding advocacy capacity building, taking care that funding opportunities are well disseminated, accessible and straightforward.
- Using political dialogue to ensure governments involve a great diversity of CSOs at all stages of the decision-making and monitoring process.
- Establishing transparency and accountability mechanisms to enable CSOs to understand and follow up on consultation processes.
- Actively supporting partnership-building among all actors. More efforts need to be made in order to improve and strengthen the relationship between INGOs, local NGOs, CSOs, local authorities and Members

of Parliament in order to ensure that these alliances contribute to true country ownership of development policies.

- Agreeing to country-based measures to advance democratic ownership.

## **Managing for results should not mean financing by results**

Managing for results is a key theme in both the PD and the AAA. The aim is to ensure that all aid is directed towards its fundamental goal: the attainment of the MDGs and other core commitments, such as universal access to primary health care and the right to health. Until now, this aspect of aid effectiveness agenda has tended to be taken for granted by the international community. However, in the context of increasing pressure on donors to account for spending on ODA to their constituencies, securing ‘value for money’ is now at the top of the agenda of the 4<sup>th</sup> High Level Forum in Busan. In particular, there is a danger that this new focus on value for money and managing for results will divert attention from the broader country context of providing health services for all – which is particularly important for the most marginalized and stigmatized groups in society.

Donors and governments are increasingly measuring the impact of their programs and taking steps to increase the results focus of health sector plans. However, the 2008 Paris Declaration Evaluation Report found that progress had been very slow at the national level. A lack of robust statistical systems and monitoring frameworks at the country level makes accountability extremely challenging. Hence in Accra, it was emphasized that developing country statistical and information systems needed to be strengthened.

Notwithstanding the challenges around proving cause and effect, there is considerable evidence

that much of the progress made towards the MDGs to date – particularly in the areas of health and education – can be attributed to aid<sup>19</sup>. While trade, technical assistance and migration policies have a role to play, the need to fill the yawning funding gap is urgent. If managed well, aid can strengthen countries with poor governance, since it can be used to strengthen domestic accountability systems and build the capacity of countries to meet their development goals<sup>20</sup>. However, progress in reaching the MDGs on health are being severely constrained by the absence of fully-funded and fully functioning health systems<sup>21</sup>.

## **The limitations of results-based financing**

Results-based financing for health, sometimes referred to as ‘managing for development results’, is commonly understood to mean that the payment of aid is conditional on the achievement of certain results<sup>22</sup>. This can take the form of “a cash payment or non-monetary transfer made to a national or sub-national government, manager, provider, payer or consumer of health services after predefined results have been attained and verified”<sup>23</sup>. Performance-based aid is used by multilateral agencies such as the Global Fund, GAVI, and World Bank, as well as PEPFAR. Similarly, in Europe, MDG Contracting is being introduced by the European Commission as a way to reward performance against MDG indicators.

## **Who decides what a ‘result’ is?**

While numerous country case studies have shown that a results-based approach has indeed created effective incentives for countries to reach their development targets, it has not always had a solely positive effect on development. Mozambique, for example, is seen as being a “bad” performer according to the Global Fund’s Scorecard. Consequently, the Global Fund has, on numerous occasions, halted or reduced disbursements to the country, which resulted in serious aid effectiveness

problems including greater unpredictability of aid flows. Moreover, other development partners in Mozambique state that, contrary to the Global Fund's evaluations, the health sector in particular had developed in an extraordinarily rapid and progressive manner during the last decade, considering that all of the country's health infrastructure and services had been devastated during the country's recent civil war. CSOs active in the health sector in Mozambique support the view that progress is being made.

The Mozambican case highlights that the Paris principle of 'managing for results' should not be confused with 'financing by results'. In other words, results-based management of aid should take into account the progress made by developing countries towards achieving their development goals. This is particularly true for fragile states, which should receive particular attention and assistance for rebuilding their social sectors, before tying aid to sector performance.

Furthermore, an essential prerequisite for effective results-based financing is the existence of a robust health information and management system, which is still not the case in many developing countries, including middle-income countries such as El Salvador. In such circumstances, incentives might induce recipients to exaggerate results or falsify reports to receive payment. Sometimes, however, incentives can do more harm than good. In Tanzania, for example, health workers receiving a bonus for carrying out certain vaccination programs consequently neglected other health services they had been responsible for<sup>24</sup>.

## Recommendations

Aid must have a real impact on country progress towards the health MDGs and universal access to primary healthcare and the right to health. Results-based programs should be designed by

taking into account the specific context and social realities of each beneficiary country, ensuring that reductions in aid due to poor performance do not exacerbate inequities in these countries.

To this end, donors should consider taking the following actions:

- Ensure that managing for results is linked to process and not just activity performance. This is especially relevant to the long-term process of health system strengthening, health promotion and behavior change, and access to health care for stigmatized and marginalized populations. Managing for results should not be confused with financing by results.
- Ensure that the indicators used to measure results are country-specific and directly related to national health plans. In order to be able to measure progress towards these indicators, countries need to be supported in their efforts to improve their data collection, disaggregated by sex, age and income information and public financial management systems.
- Integrate gender perspectives into national health plans, annual and multi-annual planning and budget cycles, including gender indicators in health monitoring systems.
- Work on policy dialogue to ensure that interventions showing scientific evidence of their impact are included in national health plans.
- Promote the linkages between disease-specific programs and other health initiatives, such as reproductive health and family planning programs and efforts to scale-up the health workforce.
- Provide technical and financial support to developing countries by means of long-term sustainable financing mechanisms that make universal access to primary health care possible.

## Endnotes

- 1 This chapter is extracted with permission from a longer and more comprehensive review of aid effectiveness and the health sector, based on fact-finding missions in six (6) developing countries (El Salvador, Mozambique, Tanzania, Uganda, Vietnam and India), coordinated by Action for Global Health (AfGH). Action for Global Health is a broad European network of 15 NGOs, under the leadership of Action Aid, advocating for Europe to play a more proactive role in enabling developing countries to meet the Health Millennium Development Goals by 2015.
- 2 Development assistance to a particular country is said to be fragmented when there are more than 15 donors which among them provide less than 10% of the country's programmable aid.
- 3 See for example, AfGH, Health Spending in Mozambique: Impact of current aid structures and aid effectiveness, 2011.
- 4 L. Wild and P. Domingo, Aid and accountability in health, what can donors do differently?, Project Briefing, No. 46, ODI/World Vision, September 2010.
- 5 Through delegated cooperation a donor has the power to act on behalf of other donors concerning the administration of funds and dialogue with the partner government. See [http://europa.eu/legislation\\_summaries/development/general\\_development\\_framework/r13003\\_en.htm#KEY](http://europa.eu/legislation_summaries/development/general_development_framework/r13003_en.htm#KEY)
- 6 Health Spending in Mozambique: The Impact of Current Aid Structures and Aid Effectiveness, AfGH, 2011.
- 7 The EU's Contribution to the Millennium Development Goals: Keeping the Goals Alive, Alliance 2015, 2010.
- 8 AfGH, Health aid effectiveness in Nepal: Paris, Accra, civil society and the poor, 2009.
- 9 Gauthier B., PETS-QSDS in Sub-Saharan Africa: A Stocktaking Study. HEC Montreal., 2006. Available at: <http://siteresources.worldbank.org/INTPUBSERV/Resources/477250-1165937779670/Gauthier.PETS.QSDS.Africa.STOCKTAKING.7Sept06.pdf>
- 10 D. Sridhar & T. Tamashiro, 2009. Vertical Funds in the Health Sector: Lessons for Education from the Global Fund and GAVI.
- 11 AfGH, Health Spending in El Salvador. The impact of current aid structures and aid effectiveness, 2011.
- 12 Abebe Alebachew and Veronica Walford, Lessons from the Joint Assessment of National Strategy (JANS) Process in Ethiopia, 2010.
- 13 DAC Network on Gender Equality, Making the Linkages, 2008.
- 14 For a full analysis refer to AFGH reports on Uganda, Tanzania, Nepal, Ethiopia and Zambia. Available at: [http://www.actionforglobalhealth.eu/index.php?id=10&no\\_cache=1](http://www.actionforglobalhealth.eu/index.php?id=10&no_cache=1)
- 15 See for example AfGH, Health Spending in Uganda: The impact of current aid structures and aid effectiveness, 2010.
- 16 See AfGH, Zambia: Aid effectiveness in the health sector, 2009 and AfGH Ethiopia: Aid Effectiveness in the health sector 2009. Available at: <http://www.actionforglobalhealth.eu/index.php?id=236>
- 17 AfGH, Health Spending in Tanzania: The impact of current aid structures and aid effectiveness, 2010.
- 18 See notes from the Third IHP+ Country Health Sector Teams Meeting December 9-10, 2010 Brussels. Available at: [http://www.internationalhealthpartnership.net/en/news/display/3rd\\_ihp\\_country\\_teams\\_meeting](http://www.internationalhealthpartnership.net/en/news/display/3rd_ihp_country_teams_meeting)
- 19 OECD, Aid for Better Health: What are we learning about what works and what do we still have to do? Interim Report from the Task Team on Health as a Tracer Sector, Working Party on Aid Effectiveness, 2010.
- 20 L.Wild and P. Domingo, Aid and accountability in health: Key themes and recommendations, Project Briefing, No. 44, ODI/World Vision, September 2010.
- 21 WHO, Investing in our common future: Joint Action Plan for Women's and Children's Health. Draft for consultation, 2010. Available at: [http://www.who.int/pmnch/topics/maternal/201006\\_jap\\_pamphlet/en/index.html](http://www.who.int/pmnch/topics/maternal/201006_jap_pamphlet/en/index.html)
- 22 OECD, Aid for Better Health: What are we learning about what works and what do we still have to do? Interim Report from the Task Team on Health as a Tracer Sector, Working Party on Aid Effectiveness, 2010.
- 23 See [www.rbhealth.org](http://www.rbhealth.org).
- 24 AfGH UK, Results-based Financing: Making sure the UK's aid for health delivers more health for the money, 2011.

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