



SWAPs in motion: Lessons from case studies in six African countries

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1. Objectives and hypotheses

- **5-year research project aimed at supporting the transition from project approach to SWAp**
- **Tested hypotheses:**
 - SWAp is a dynamic approach and not a blueprint model**
 - SWAp has major advantages over the project approach**
 - However, SWAp is not a panacea**



2. Methods

- **Multidisciplinary (public health, economics) research group, 2004-2009**
- **3 universities + Belgian cooperation (financing)**
- **Literature review + case studies in sub-Saharan Africa (3 in Mali, 3 in Benin, 2 in Senegal, 4 in Rwanda, 5 in Tanzania, 1 in Uganda) + partners from the South + technical assistance (Mali)**
- **Analysis grid and 3 types of questionnaires**
- **Preliminary assessment and follow-up the evolution of SWAp dynamics and results**



3. Results (1/5)

- **SWAp is not a rigid model; it is dynamic and should constantly evolve**
- **SWAp is a way of working together between a government and its development partners**
- **Core elements of a SWAp:**
 - **Common sector strategy**
 - **Country-led coordination mechanism**
- **Some elements of the SWAp mature over time in a context-specific way (alignment, MTEF, M&E, participation, ...)**
- **SWAp *is* means of making progress in sector policy, planning, service provision and evaluation**



3. Results (2/5)

- **(Of course: attribution problems – but:)**
- **SWAs can (quickly) bring in some positive results, especially:**
 - **Coherence and coordination of interventions**
 - **Policy dialogue, trust building and common understanding between partners**
 - **Alignment on domestic systems, HSS**
 - **Ultimately, sector reforms and health outcomes**
- **Thus SWAp has major advantages over the project approach**



3. Results (3/5)

- **Main achievements since SWAp in Mali:**
 - **Dynamics:** joint management & policy-making, SBS, MTEF
 - **Strategies & reforms:** HRH, HSS, child survival, research
 - **Outcomes:** Health structure coverage
 - **Impacts:** Mother & child mortality, capacity building at central level



3. Results (4/5)

- **Main achievements since SWAp in Tanzania:**
 - **Dynamics:** participation/ownership, district autonomy, budget increase, coherence
 - **Strategies & reforms:** decentralization, elements of HR (salaries, training, supervision)
 - **Outcomes:** Health structure coverage, drugs availability (+financial accessibility despite fees)
 - **Impacts:** Child mortality, immunization, access to ART



3. Results (5/5)

- However, SWAp is not a panacea and problems persist % alignment and health systems (quality of care, HRH, ...)
- SWAps need to be constantly fuelled by shared analyses and common reform projects à lift major sector constraints
- SWAp means should not be confounded with its ends – i.e., improving sector performance à HSS
- SWAps entail risks:
 - Technocratisation
 - Centralisation
 - Disconnection from field realities
- Is SWAp already old-fashioned? (% GHIs)



4. SWAPs and the International Health Partnership (IHP+) (1/2)

- **IHP+ aim = achieve better health results by mobilizing donors & partners around a single country-led national health strategy (cf. Paris Declaration) = principles of the SWAp!**
- **Global Compact signed by 11 donor countries, 12 development institutions and 13 partner countries**
- **National Compact à commitments of all parties: common strategy, intervention framework, aid management system, results & follow-up**



4. SWAPs and the International Health Partnership (IHP+) (2/2)

- **In Mali, the Compact/IHP+ builds on and consolidates the SWAp:**
 - Ø Single strategy and programmatic framework
 - Ø Single results and policy framework
 - Ø Single budgetary framework (MTEF)
 - Ø Single management and follow-up framework
+ Partners' commitments
- **Expected increase in funding, predictability & mutual accountability**

5. Conclusions

- **GRAP-SWAP project results were used by the Belgian cooperation + other stakeholders to accompany SWAp dynamics (especially in Mali)**
- **Good knowledge of SWAp dynamics at **central level** à interest of the method seems obvious**
- **Evaluation of SWAp impact at operational level is much more difficult; however, SWAp has **indirect impact** through policy implementation**
- **SWAp is challenged by GHIs >< **SWAp revival** through IHP+?**