

### **MOZAMBIQUE COUNTRY SCORECARD 2010\***

#### MANAGING FOR DEVELOPMENT RESULTS

#### NATIONAL RESULTS FRAMEWORK **AGREED**

• 37 indicators in the national results framework.



#### **DECISIONS BASED ON RESULTS**

• The Joint Annual Evaluation identified weakness in Monitoring & Evaluation functions at the province level and training has now taken place on most health programmes.

#### HEALTH MANAGEMENT **INFORMATION SYSTEMS (HMIS)**

 All units provide data although there are sometimes delays and issues of incompleteness. However, the annual report always contains indicators both set on performance and quality and the indicators required by the yearly Socio-Economic Plan.

#### JOINT HEALTH SECTOR **REVIEWS CONDUCTED**

 The SWAp ensures that stakeholders are present and interact on different levels, from technical working groups to decision-taking meetings. The JAR reflects on use of resources and shaping the way forward. JAR indicators look at the performance of the MoH as the main beneficiary and the performance of DPs as partners in development. Recommendations promote mutual accountability.

# **COUNTRY OWNERSHIP & ACCOUNTABILITY**

## **COMMITMENTS DOCUMENTED**

· Signed Agreement

A SWAp and pooled fund mechanism was in place in 2007 and an IHP+ Compact was signed in 2008.



#### **HEALTH SECTOR PLAN AND AIDS STRATEGIES**

· Includes current targets and budgets

Jointly Assessed



### · Active joint monitoring

Number of development partner missions

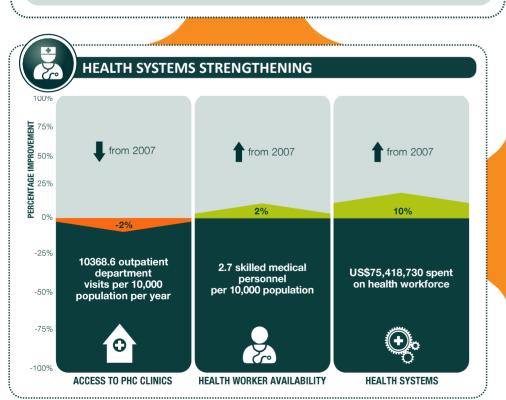
**HEALTH SECTOR AID EFFECTIVENESS MONITORING** 

• > 10% of seats in the health sector coordination mechanism are allocated to civil society

?

#### Quality of civil society engagement health sector policy and accountability processes

#### **HEALTH FINANCING** TOTAL HEALTH FINANCING **EXTERNAL FINANCING USING** US \$500m **POOLED MECHANISMS** Domestic Financing \$407.5m US \$400m External Financing 15 US \$300m In 2009: CIDA, Catalan Agency for Dev US \$200m Co-op, EC, Belgium, AFD, Irish Aid, Finland, Denmark, Spain, Switzerland 6.8 % allocated to health Netherlands, DFID, UNICEF, UNFPA. US \$100m and World Bank used pooled funding 8.2 % increase needed to meet the Abuja target 2007 2009









<sup>\*</sup> Ratings are calculated using data up to and including 2009. Data from 2010 will be reported in IHP+Results' 2011 monitoring.



### **MOZAMBIQUE COUNTRY SCORECARD 2010\***



#### **GOVERNMENT OF Mozambique**

#### PROGRESS IN IMPLEMENTING ITS IHP+ COMMITMENTS

#### **EXPECTED RESULTS**

#### **PROGRESS**

#### **OVERALL RESULTS**



Commitments are documented and mutually agreed.



A national IHP+ Compact was signed in 2008. Prior to that, a SWAp and pooled fund mechanism was in place from 2007.



Support is based on country plans & strategies, including to strengthen Health Systems.



A National Health Sector Plan/Strategy is in place with current targets & budgets that have been jointly assessed.



There is currently a costed and evidence based HRH plan in place that is integrated with the national health plan.



Funding commitments are long-term.



In 2009 Mozambique allocated 6.8% of its approved annual national budget to health.



Funds are disbursed predictably, as committed.



In 2009, 73% of health sector funding was disbursed against the approved annual budget.



Country systems for procurement & public financial management are used & strengthened.



In 2009, Mozambique achieved a score of 4.0 on the PFM/CPIA scale of performance.



This Standard Performance Measure uses data from the OECD/DAC Paris Survey monitoring. The relevant assessment was not completed in Mozambique.



Resources are being managed for Development Results



In 2009 there was a transparent and monitorable performance assessment framework in place to assess progress against (a) the national development strategies relevant to health and (b) health sector programmes.



Mutual accountability is being demonstrated.



Mutual assessments are being made of progress implementing commitments in the health sector, including on aid effectiveness.



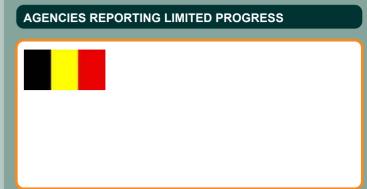
Civil Society actively engaged.



Insufficient data has been provided to enable a rating for this Standard Performance Measure.

 $^st$  Ratings are calculated using data up to and including 2009. Data from 2010 will be reported in IHP+Results' 2011 monitoring.





#### **HOW TO INTERPRET THIS SCORECARD**

- The majority of data presented in this Scorecard is from the Ministry of Health. There are two exceptions the ratings for Technical Assistance and the quality of civil society engagement\*.
- The Scorecard shows results using 5 Results Areas (see below) to tell the story of IHP+ implementation in a logical flow: from the national health plan to monitoring and evaluation of that plan.
- Where they are used, rating symbols illustrate whether the government has achieved  $\langle \cdot \rangle$ , is working towards  $| \cdot \rangle$ , or has not made progress  $\square$  against agreed targets. Details of these ratings can be found online in the North-South Observatory for IHP+Results (www.ihpresults.net)
- Progress against the Millennium Development Goals is provided for contextual purposes.

#### **Results Areas**

Country Ownership & Accountability: This tracks whether an IHP+ Compact or equivalent agreement exists, the quality of the national health sector plan, and the extent of aid effectiveness monitoring.

**Health Financing:** This shows changes of domestic and external health financing over time. Public funding for health is shown, as a proportion of the national budget. The number of donors using pooled financing mechanisms is also shown. Where appropriate, blue call-out boxes provide further information.

Country Systems: The quality of country systems is presented in in this section using Paris Declaration indicators and IHP +Results ratings.

Health Systems: As a key focus of the IHP+, we present data on key health systems resources - access to primary health care clinics, availability of halth workers, and amount spent on health workforce. Each shows progress (positive or negative) in increasing the availability of these resources.

Managing for Results: This tracks the existence, quality and use of the national health system to provide data on results. It presents information on the Health Management Information System (HMIS), the National Results Framework, the Joint Health Sector Review and the use of this framework for decision making.

#### Additional information

The reverse of the Scorecard (opposite), shows national government performance against an agreed set of Standard Performance Measures (SPMs). The following headings are used:

- Expected Results reflect key commitments made in the IHP+ Global Compact.
- Progress symbols illustrate whether the government has achieved , is making progress , or has not made progress against 10 SPMs.
- Δ Targets for each SPM can be found at www.ihpresults.net
- Agencies reporting limited progress shows a summary of ratings against 12 agreed SPMs for Development Partners that are active in this country, and who have voluntarily disclosed to IHP+Results 2010 monitoring survey. Where ratings of  $\Rightarrow$  or  $\checkmark$ have been scored for the minority of SPMs.

<sup>\*</sup> The Technical Assistance rating summarises data provided by the IHP+ Development Partner signatories that are active in this country. The quality of civil society engagement was assessed through conducting surveys with in-country civil society organistions.