

Can normative instruments help to “do aid better”?

Thomas Schwarz, MMI Network

5 November 2019

#KampalaInitiative #BeyondAid

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Outline of my introduction

1. Critical reflection on relevance, legitimacy, effectiveness and practice of health cooperation “beyond aid” within the MMI Network
2. What’s the problem with development cooperation (aid) in the health sector?
3. Can normative instruments help to “do aid better”?

Cape Town, July 2012. In the public interest? The role of NGOs in national health systems and global health policy. Workshop at the People's Health Assembly



From seeing poor health outcomes and weak health systems as problems dealt with by “our partners” who need our support.

...to critically assessing the particular position and role of health cooperation and its actors, policies and practices:

“Are we part of the solution, or rather part of the problem?”

October 2016

Discussion paper

**HEALTH COOPERATION: ITS RELEVANCE, LEGITIMACY AND EFFECTIVENESS
AS A CONTRIBUTION TO ACHIEVING UNIVERSAL ACCESS TO HEALTH**



From seeing poor health outcomes and weak health systems as problems dealt with by “our partners” who need our support.

...to critically assessing the particular position and role of health cooperation and its actors, policies and practices:

“Are we part of the solution, or rather part of the problem?”

“Health Cooperation Beyond Aid”

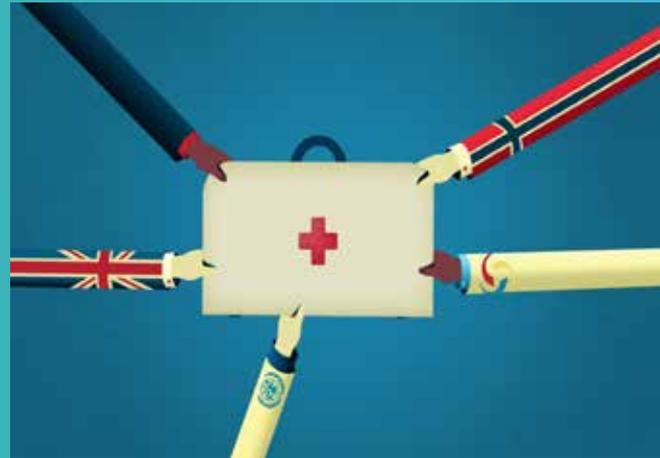
“Medicus Mundi International provides spaces and input for a critical reflection on the role of health cooperation (aid) in people centered national health systems and policies.” (Strategy 2016+)



PHC for UHC – the role of development cooperation

Are we strengthening or weakening national health systems?

Friday, 26 October 2018, 13:15 – 14:15
Global Conference on Primary Health Care
Palace of Independence, Astana, Room 4, 1st Floor





The role of international health cooperation in strengthening or weakening national health systems

Fourth People's Health Assembly
Dhaka, 17 November 2018

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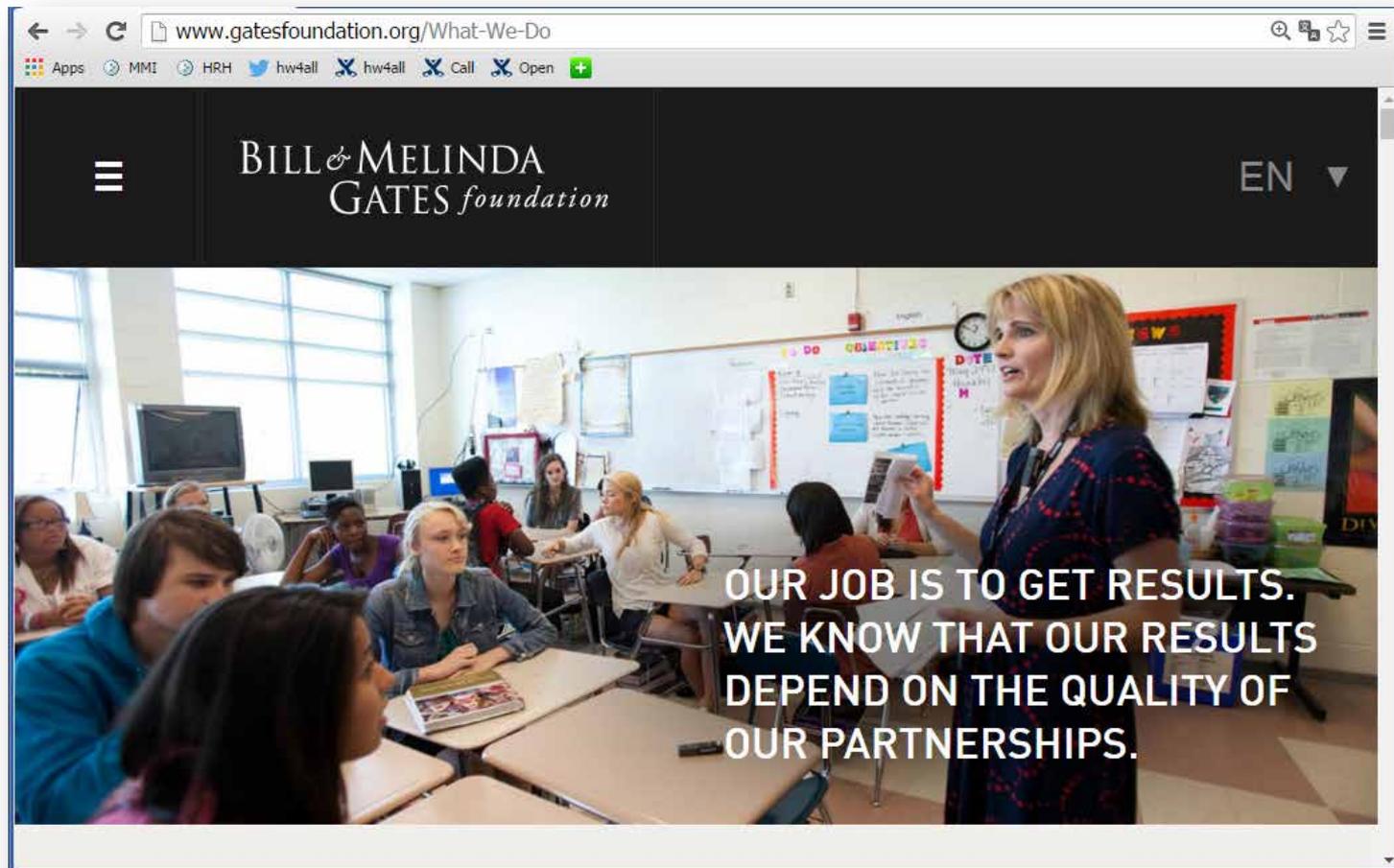
Introduction (2)

1. Critical reflection on relevance, legitimacy, effectiveness and practice of health cooperation “beyond aid” within the MMI Network
2. **What’s the problem with development cooperation (aid) in the health sector?**
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Development Assistance for Health: A long history. And a great variety of actors and realities



Development Assistance for Health: A long history. And a great variety of actors and realities



...and a great (and well known and documented) range and variety of shortcomings and failures of “aid”

1. Legitimacy, values, interests

- Legitimizing neoliberalism
- Distractive
- Donor driven agenda
- Representation

2. Impact and outcomes

- Creating additional burdens and distorting national planning/system
- Stabilizing bad governance and perpetuating dependency
- Distorting domestic economies
- Overall track record

3. Actors and behaviours

- Interventionism
- “Poverty porn”, paternalism, cynicism
- Institutional self-interest and insularity
- Aid (and) business
- International NGOs as “civil society”?
- #AidToo

4. Methods and practices

- Vertical, not integrated approach
- Lack of coordination
- One-way accountability
- Evidence base

etc.

...a long history of documenting, critically assessing and challenging these shortcomings and failures



The screenshot shows a web browser window displaying the ODI website. The address bar shows the URL: www.odi.org/publications/9956-ebola-response-west-africa-exposing-politics-culture-international-aid. The ODI logo and tagline "Shaping policy for development" are visible at the top. The navigation menu includes: Home, About ODI, Publications, Events, Programmes, Experts, Fellowship Scheme, Comment, and Media hub. The main content area features the title "The Ebola response in West Africa: exposing the politics and culture of international aid" in a large, teal font. Below the title, it says "Working and discussion papers | October 2015 | Marc DuBois and Caitlin Wake, with Scarlett Sturridge and Christina Bennett". A short paragraph follows: "Though often described as unprecedented, the Ebola response reflects long-standing strengths and weaknesses with how aid works. Aid organisations proved dedicated and resourceful but also ill-prepared and insufficiently engaged with local communities." To the right of the main text, there are social sharing options (Twitter, Facebook, LinkedIn, Email), a "Print" button, and a "Translate" button. Below these, there is a "Related content" section with two entries: "What Ebola tells us about aid" (Public event, 16 Oct 2015) and "Localising humanitarianism: improving effectiveness through inclusive action" (Briefing papers).

The Ebola response in West Africa: exposing the politics and culture of international aid

Working and discussion papers | October 2015 | Marc DuBois and Caitlin Wake, with Scarlett Sturridge and Christina Bennett

Though often described as unprecedented, the Ebola response reflects long-standing strengths and weaknesses with how aid works. Aid organisations proved dedicated and resourceful but also ill-prepared and insufficiently engaged with local communities.

Although well-used to danger, aid organisations struggled to overcome their fear of

Share

Print

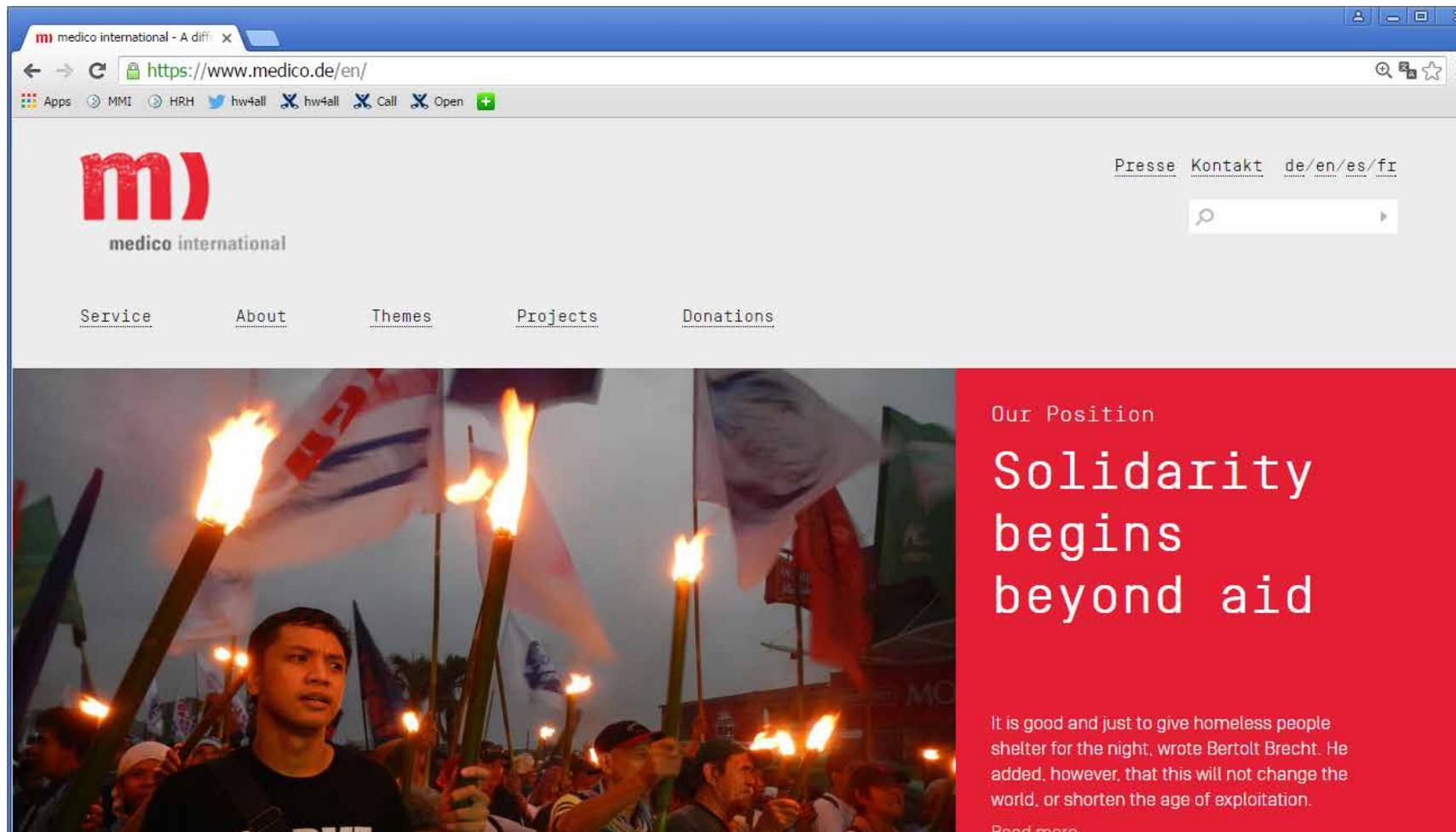
Translate

Related content

What Ebola tells us about aid
Public event
16 Oct 2015

Localising humanitarianism: improving effectiveness through inclusive action
Briefing papers

...a long history of documenting, critically assessing and challenging these shortcomings and failures



The image is a screenshot of a web browser displaying the Medico International website. The browser's address bar shows the URL <https://www.medico.de/en/>. The website's header features the Medico International logo (a red 'm' with a vertical bar) and the text 'medico international'. Navigation links include 'Presse', 'Kontakt', and language options 'de/en/es/fr'. Below the header, there are links for 'Service', 'About', 'Themes', 'Projects', and 'Donations'. The main content area is split into two sections. On the left is a photograph of a protest at night, with people holding lit torches and various flags. On the right is a red background with white text that reads 'Our Position' followed by 'Solidarity begins beyond aid' in a large, bold font. Below this, there is a quote: 'It is good and just to give homeless people shelter for the night, wrote Bertolt Brecht. He added, however, that this will not change the world, or shorten the age of exploitation.' and a 'Read more' link.

Beyond aid?

Aid

Business?

Country ownership

.

.

People

Redistribution

Solidarity

Beyond aid?

Jonathan Glennie

“The language and theory of ‘aid’ is outdated. But something like it is still needed as the world faces huge communal challenges, new and old...”

(Five paradigm shifts for the future of aid)

“Cooperation and solidarity within and beyond aid”

Kampala Initiative

“All in all, aid is still a challenging reality, and this reality needs to be acknowledged and addressed.

To do this, we propose to apply a double perspective:

- What’s wrong with aid and its actors, structures, paradigms and policies, methods and processes, and how can these failures and shortcomings of aid be addressed?
- How to achieve real cooperation and solidarity within and beyond aid?”

[> concept note](#)

Introduction (3)

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Can normative instruments help to “do aid better”?

Looking back

- Paris Declaration on Aid Effectiveness
- IHP+ “Seven Good Behaviours”
- “NGO Code of Conduct on Health Systems Strengthening”



The NGO
Code of Conduct
for Health Systems
Strengthening

Paris Declaration on Aid Effectiveness (2005)

Five fundamental principles for “making aid more effective”:

- **Ownership:** Developing *countries* set their own strategies for poverty reduction, improve their institutions and tackle corruption.
- **Alignment:** Donor *countries* align behind these objectives and use local systems.
- **Harmonisation:** Donor countries coordinate, simplify procedures and share information to avoid duplication.
- **Results:** Developing countries and donors shift focus to development results and results get measured.
- **Mutual accountability:** Donors and partners are accountable for development results.



OECD Development Assistance Committee (DAC) as convener of four High-Level Fora on Aid Effectiveness (Rome, Paris, Accra, Busan).

Follow-up of the Paris Declaration: **Accra Agenda for Action** (2008)

and **Busan Partnership** for Effective Development Co-operation (2011)

> <https://www.oecd.org/dac/effectiveness/parisdeclarationandaccraagendaforaction.htm>

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Normative instruments



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Declaration Code

- NGO Code of Conduct (2007)
- IHP+ Seven Behaviours (2012)

Normative instruments

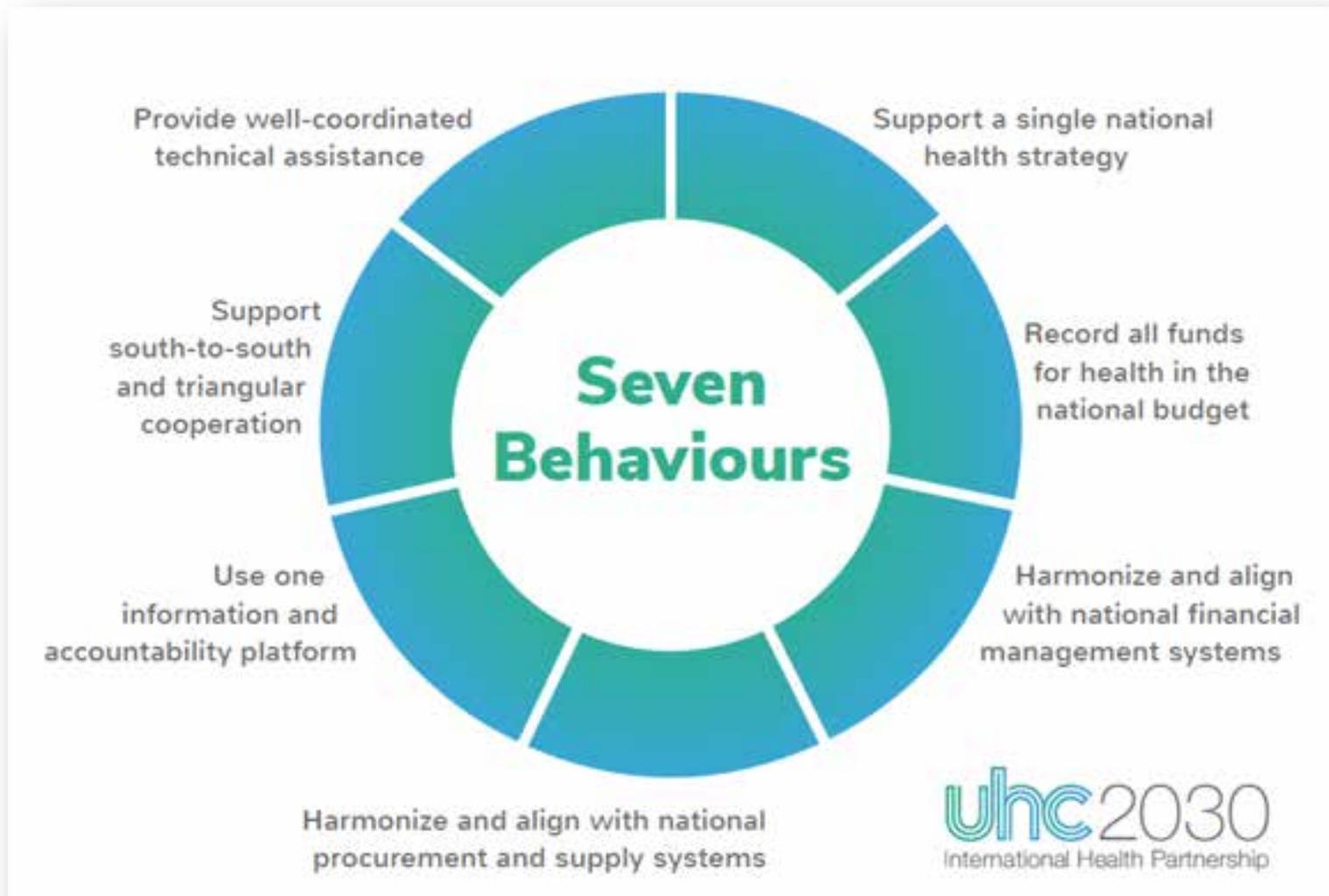
“Normativity is the phenomenon in human societies of designating some actions or outcomes as good or desirable or permissible and others as bad or undesirable or impermissible.” (Wikipedia)

- IHP+
- UHC2030
- SDG 3 Global Action Plan (2019)

Partnership

Agenda for Action

IHP+: Seven (good) Behaviours (2012)



IHP+: Seven (Good) Behaviours (2012)

“UHC2030 draws on lessons from the IHP+ experience, about what has worked well and what has not, including how to better promote the principles of effective development cooperation, like the Seven Behaviours.

These principles are anchored in country ownership and guide the actions of all partners towards more effective and aligned efforts towards HSS and thereby UHC.

UHC2030 continues to pay particular attention to country contexts where the alignment and coordination of global partners around country leadership and systems is critical but not a given, particularly in post-conflict and fragile contexts.”



NGO Code of Conduct for Health Systems Strengthening (2007)

“The NGO Code of Conduct for Health Systems Strengthening is a response to the recent growth in the number of **international non-governmental organizations (NGOs)** associated with **increase in aid flows to the health sector**. It is intended as a tool for service organizations, funders and host governments. **The code serves as a guide to encourage NGO practices that contribute to building public health systems and discourage those that are harmful.**”

Code Articles

- I. NGOs will engage in **hiring practices** that ensure long-term health system sustainability.
- II. NGOs will **enact employee compensation practices** that strengthen the public sector.
- III. NGOs pledge to **create and maintain human resources training and support systems** that are good for the countries where they work.
- IV. NGOs will **minimize the NGO management burden** for Ministries of Health.
- V. NGOs will **support Ministries of Health** as they engage with communities.
- VI. NGOs will advocate for **policies which promote and support the public sector**.

Can normative instruments help to “do aid better”?

Looking ahead

- Revitalize current instruments?
- Are new normative instruments needed?
- Normative elements in the “Global Action Plan” (2019)

Global Action Plan on Healthy Lives and Well-Being for All (2019)



<https://www.who.int/sdg/global-action-plan>

Global Action Plan on Healthy Lives and Well-Being for All (2019)



global action plan EN

Global Action Plan for Healthy Lives and Well-being for All

Strengthening collaboration among multilateral organizations to accelerate country progress on the health-related Sustainable Development Goals

<https://www.who.int/sdg/global-action-plan>

Global Action Plan on Healthy Lives and Well-Being for All (2019)

“Although each agency has a specific mandate, the agencies **as a group** complement each other. Together, the agencies work to advance all the SDG 3 targets and collectively, **they channel around one-third of development assistance for health annually.**

Under the Global Action Plan, the agencies are **better aligning their ways of working** to reduce inefficiencies and provide more streamlined support to countries.

Through the Plan, the agencies **will support countries deliver on the health-related SDGs and related international commitments to health**, such as the UN High-level Meeting on Universal Health Coverage and the Astana Conference on Primary Health Care.”

Global Action Plan on Healthy Lives and Well-Being for All (2019)

The 12 agencies make four specific, core **commitments** under the Plan (= explicit normative elements of the GAP):

1. **To engage with countries better** to identify priorities and plan and implement together;
2. **To accelerate progress in countries** through joint action under specific **accelerator themes** and on **gender equality** and the delivery of **global public goods**;
3. **To align in support of countries by harmonizing** operational and financial strategies, policies and approaches; and
4. **To account**, by reviewing progress and learning together to enhance shared accountability.

Global Action Plan on Healthy Lives and Well-Being for All (2019)

We have followed and criticized the making of the GAP.

And now: (how) will it be implemented?

Will it provide the “right” guidance to the agencies involved?

Will it just further strengthen the power of the big “donors”?





Let us discuss this (soon). Thank you!

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