

**Helen Evans
Deputy Chief Executive Officer
GAVI Alliance**

Talking points:

(if need be) To recall the five core principles of the Paris Declaration on Aid Effectiveness:

- Country ownership
- Alignment
- Harmonisation
- Managing for results
- Mutual accountability

The Paris Declaration was adopted in 2005 by over 100 countries and aid agencies.

It was the result of several years of reflection on lessons learned in the experience of managing aid and negotiations to reach consensus on just what were the fundamental tenets for ensuring that aid is as effective as possible.

At the same time as the Paris Principles were being developed, new initiatives were also underway to accelerate efforts to reach the MDGs.

These included two global health initiatives that went on to have a significant impact on the way health aid is delivered.

I am talking of the GAVI Alliance and the Global Fund to Fight ATM.

It is not surprising then that the business models and approaches of the Global Fund and of the GAVI Alliance encapsulate core Paris principles.

Now with almost ten years experience of GAVI (and 8 years since the Global Fund was set up), we have the opportunity to reflect on the experience of putting the Paris principles into action through these Global Health Initiatives.

I do not mean to imply that in the Funds we have all of the answers. Far from it. There is room for improvement and, as learning organisations, we seek to reflect and learn and then change our practices and procedures.

Increasingly in recent years in the health sector we have seen a commitment to work collectively to improve aid effectiveness.

The International Health Partnership is an important step forward in this respect but it still needs to demonstrate outcomes.

It has to shift focus to the specifics of the problems that countries face dealing with multiple demands of external partners, and it has to deliver results in and for people in country.

We need behavioural change from all parties that results in lower transaction costs for countries and delivers results (effectiveness means “to bring about results”). So how does the GAVI and Global Fund business model reflect the Paris principles?

I’ll take a few examples:

Country ownership:

The first step is consideration of proposals sent to us by countries. It is a country led approach.

I appreciate that some may see this as a simplistic interpretation of country ownership and there is much discussion to be had about the incentives (or perverse incentives) that can be set up by having relatively large amounts of finance available for particular health issues.

But nonetheless, the basic tenet of the business model is that we respond to the proposals received from countries, including their objectives and targets.

Country ownership must be the starting point, not the end point.

Importantly, country ownership does not necessarily equate directly with government ownership. Governments have a critical stewardship responsibility but the clear experience from GAVI and the Global Fund is that governments on their own are not the answer.

Civil society, including the private sector and faith-based organisations, have a critical role to play in ensuring results.

On the principle of **alignment** of processes and practices with national processes...

The clearest example for GAVI is alignment of our support to the country planning cycle. Whether for a new vaccine or for health systems strengthening support, we match our

financial commitment to the duration of the country plan. If a country has a three year health plan, or a five year comprehensive multi-year immunisation plan, then GAVI's support will match it – for three or five (or more) years.

Again, we have further work to do. For example, Geneva centrally-established timeframes for grant performance review work against full alignment.

With regard to the principle of **harmonisation**, I am reminded of the expression that I have heard Michel Kazatchkine use many times: the **global health initiatives are an example of upstream harmonization**.

Avoiding or substituting for a potential multiplicity of donor government grants and the associated reporting demands on countries is surely a core objective.

One of the principal Paris declaration tenets that the global health initiatives have embraced fully is **managing for results**.

The focus of our work – and the area for which we at the Funds are held accountable by our donors, is **results**.

But let's be clear, **managing for results** is a concept that applies not only to donors. It is a basic principle of good governance that taxpayers expect from all governments.

As financing instruments, GAVI and the Global Fund have a perspective as both a recipient of funds from traditional donor community and as a grantor of funds.

We see it from both sides!

And a challenge I would put out there today is to bilateral donors: Look closely at the demands that you place on the recipients of your aid. Is it clear that the accountability you demand of us is essential to achieving the results, the development outcomes? Were the 752 aid missions to Vietnam in 2007 really essential? Surely we must be able to do better than requiring reports on 600+ health indicators in Rwanda.

To conclude:

The development community has learnt important lessons on what works and what doesn't. As we move forward, we need to **build on these experiences** to ensure that what we do is as effective as possible.

We know that in many countries the health systems are weak and a **fragmented health sector is inefficient**. I am reminded of something Minister Tedros from Ethiopia said recently: " Our vehicle has not been strong enough to carry all the programmes we have loaded on it. Now we are working to strengthen the vehicle so that it can carry our programmes, the vaccines, and the other health-care interventions, to every corner of this vast country. "

One small step towards decreasing the fragmentation is work we are doing with others to facilitate more streamlined external financing to countries, while retaining the focus on results.

The **International Health Partnership** is an important step forward but needs to demonstrate outcomes. It has to shift to focus on the specifics of the problems that countries face dealing with multiple demands of external partners.

GAVI, the Global Fund to fight AIDS, TB and Malaria and the World Bank are currently working towards **joint programme support for countries' health system development**. The idea is harmonized channels of finance to support countries' national health plans and strategies. This will build a common assessment of strategies, with better aligned monitoring and evaluation. This is not about abstract mechanics for their own sake, it is about ensuring real value for money, and more money where it's needed most, at the clinic/district level.

One last point:

For real progress, we need to be honest and face up to and address **challenging issues**.

There is an inherent **tension between a results-based approach and the drive to reduce conditionality**.

What is critical is that we **learn from experience and base our decisions on the evidence** of what works and what doesn't. This includes a clear acceptance that one size does not fit all.

Ultimately, **mutual accountability means all of us being accountable for achieving results for people in countries**.