Integrating Equity Goals and Approaches into Policies, Plans, and Agendas

Presenter’s Name

Date
Which Health Policies Are Pro-Poor?
Making Health Policies Pro-Poor

- Setting goals for improved coverage and health outcomes among the poor
- Designing ways to achieve goals
- Allocating additional resources for the poor
- Monitoring access by the poor
- Empowering poor clients

Policy Formulation
Policy Implementation
Policy Review
Policy Review

• Does the policy consider high-level poverty and/or low access to healthcare a priority?
• Does the policy include specific strategies to improve access to healthcare services?
• Does the policy include explicit objectives to reduce inequities in service use or health outcomes for the poor?
• How are objectives expressed?
  ▪ **Increase contraceptive prevalence among the poor**
  ▪ **Reduce gaps between rural and urban areas**
• To what extent does the policy consider level of poverty and inequities in allocating financial resources?
• Does the monitoring and evaluation (M&E) plan include equity-based indicators?
Policy Formulation

Empower and Engage the Poor

- Conduct poverty and equity analysis
- Put inequity issues high on policy agenda
- Identify and engage key stakeholders
- Set equity goals
- Design pro-poor strategies
- Develop equity-based M&E indicators
Policy Implementation

- Develop an action plan
- Mobilize resources for the poor
- Allocate resources equitably
- Monitor progress using equity-based M&E indicators
- Establish accountability mechanisms: participatory monitoring
- Analyze unintended consequences and take actions to address evolving problems
Integrating Equity Goals and Approaches into the National RH Strategy in Kenya
Organizing Policy Dialogue in Kenya

**Analysis**
- FGDs with urban and rural poor
- Policy and financing review
- Market segmentation analysis
- Key informant interviews
- Review of poverty alleviation programs

**Dialogue**
- Dialogue between the poor and service providers at the community level
- Dialogue between the poor and policymakers at regional levels
- Policy dialogue at the national level with policymakers

**Policy Reform**
- Incorporation of equity goals and approaches in the National RH Strategy
Incorporating Equity Goals

- Increasing equitable access to reproductive health services, specifically
  - Reduce unmet need among the poor by 20% by 2015
  - Increase the contraceptive prevalence rate among the poor by 20%—from 12%—by 2015
Incorporating Equity Approaches

- Mobilize civil society to advocate for family planning in disadvantaged communities.
- Develop mechanisms for engaging the poor or community-based organizations representing the poor in problem identification, planning, and advocacy.
- Develop culturally appropriate communication strategies to communicate with communities and families about family planning and contraception, including mothers-in-law, husbands, and religious leaders.
- Shift resources from relatively well-served areas to areas of extreme poverty (poverty mapping), such as North Eastern Province, Nyanza Province, and the dry (and poor) northern parts of the country.
- Shift resources to arid areas, areas with pastoralist populations, and urban slums in major cities.
Integrating Equity Goals and Approaches into the Health and Population Policy of Uttarakhand, India

Photo credits: Suneeta Sharma, Futures Group
Organizing Policy Dialogue in India

Analysis
- Policy and Financing Review
- Market Segmentation Analysis
- Focus Group Discussions
- Demographic Projection Modeling
- Key Informant Interviews

Dialogue
- High-level Policy Dialogue with Senior Policymakers and Officials

Policy Reform
- Incorporation of equity goals and approaches in the State Health and Population Policy
Policy Dialogue Outcomes

- Formation of the Policy Revision Coordination Committee within the Uttarakhand Health and Family Welfare Society
- Policy revision under way, emphasizing
  - Removal of barriers to implementation
  - Equity (for rural poor, urban slums, and underserved hilly areas)
  - Data-driven strategies (interventions tailored to the plains and hills; addressing of emerging health issues)
- Program implementation plan to be developed (beginning in November 2009)
Incorporating Equity Approaches

• **Tailored approaches for**
  - Urban areas
  - Rural areas
  - Hilly areas

• **PPP models**
  - Mobile health vans in remote rural areas
  - Community mobilization in rural plains
  - Contracting out in urban areas
  - Outreach to the urban poor

• **Financing mechanisms**
  - Health insurance
  - Voucher scheme
  - Community savings plans

• **Equitable allocation of resources**
  - Regional disparities
  - Level of poverty
  - Disease pattern
  - Underserved groups
Linking FP to Development: Mali and Rwanda

Photo credits: ©iStockphoto.com/Roberta Bianch/ Guenter Guni/ Roberta Bianch
Including FP in the PRSP in Mali

- Mobilized civil society to advocate for FP
- Conducted high-level evidence-based advocacy
- Engaged a champion, who:
  - Prepared advocacy messages intended to reach the Ministry of Finance
  - Made a presentation to the President’s chief advisor

Cumulative Savings in Achieving Selected MDG Targets in Mali, 2008–2015

**Total Costs:** $23.8M
**Total Savings:** $43.4M
**Net Savings:** $19.5 M

Final Version of Mali PRSP-II

- Population growth identified as impediment to economic growth and poverty alleviation
- Recognition of poor performance on FP in PRSP-I
- Meeting unmet need mentioned as important
- FP listed as a key intervention in the health sector

Photo credit: USAID
Including FP in National Development Plans in Rwanda

Rwanda’s fertility rate is 6.1 children per woman

8.9 Million

Source: DHS 2005 Rwanda

Photo credit: USAID
Demonstrating the Impact of Population Growth on Different Sectors in Rwanda

Population Growth Limits Poverty Reduction and Affects Social and Economic Development in Rwanda

Sparked Presidential-level commitment for

• Inclusion of family planning in Rwanda’s Vision 2020

• Development of a national FP strategy

• Creation of an FP technical working group

• Establishment of a population desk at the Ministry of Finance

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It Can Be Done…

Engaging and empowering the poor
Quantifying the level of inequality in healthcare use and health status
Understanding the barriers to access
Integrating equity goals and approaches in policies, plans, & agendas
Targeting resources and efforts to the poor
Yielding public-private partnerships for equity