Launched in 2012 with the Tunis Conference of Ministers of Finance and Health, the Value for Money (VfM), Sustainability and Accountability programme is seen as a “game changer” in social service delivery in Africa “by obtaining the best possible outcome within a given budget”. Africa has shown encouraging progress in human development outcomes and MDGs. These have been partly the result of an unprecedented flow of aid to support programmes related to these goals. However, with the global economic downturn since 2008, the flow of aid has declined in many areas. This entails Africa has to focus more on domestic financing and achieve more with less through better value for money and accountability. The African Development Bank (AfDB) has been gearing up to finalize preparation and roll out a comprehensive programme on value for money that includes capacity building for key stakeholders, generation of knowledge to support policies and strategies with evidence, sharing of best experiences and promotion of VfM. The capacity building programme has been designed for ministers, parliamentarians, senior officials and civil society organisations (CSOs).
Pilot Capacity Building Training in Dar es Salaam, Tanzania

The AfDB, in collaboration with the Government of Norway, the Global Alliance for Vaccines and Immunization (GAVI), the Collaborative Africa Budget Reform Initiative (CABRI), the Gates Foundation, the Clinton Access Initiative, the East African Community (EAC) and the Harmonization for Health in Africa (HHA) partners organized the first capacity building event on Value for Money for senior officials from ministries of finance, education, and health, as well as CSOs and academic institutions.

The training took place in Dar es Salaam from 4 - 7 November 2013, with over fifty participants from Kenya, Uganda, Tanzania and Zambia in attendance. The purpose of the training was to build the capacity of senior officials (directors of budget, external financing, and procurement from ministry of finance and directors of planning and financing, services, pharmaceutical and human resources from health sector, and directors of planning from ministries of education) and CSOs who are at the forefront in the implementation of VfM initiatives in Regional Member Countries. The event in Dar es Salaam attempted to test the VfM capacity building curricula and training approach. The training also explored options for integrating VfM in health and education.

The event was opened by senior regional and country officials including Dr. Richard Sezibera, Secretary General of the East African Community, Tanzania’s Deputy Minister of Finance, Honorable Ms. Janet Mbene and AfDB Resident Representative for Tanzania, Ms. Tonia Kandiero. At the opening ceremony, Dr. Richard Sezibera stated that Africa’s vision for transformation heavily depends on domestic resource mobilization and ensuring better value for money. Increased spending for health and education alone does not automatically produce positive outcomes unless measures are put in place to improve value for money.

On her part, the Deputy Minister of Finance stressed the importance of the implementation of the Tunis Declaration on VfM, promotion of equitable investment in social sectors, improving efficiency in service delivery and promoting public-private-partnership (PPP).

In her introductory remarks, Ms Tonia Kandiero, representing the AfDB, emphasised the AfDB’s determination in implementing the recommendations of the Tunis Declaration by organising a series of VfM capacity building training events to improve dialogue and exploring partnership with various stakeholders to strengthen the VfM initiative in its Regional Member Countries.

3 | Thematic Sessions of the Training

The training focused on the following thematic areas which have been carefully selected and crafted through a series of policy and expert consultations. These include: High impact interventions and evidence based planning; efficient resource transfer and tracking; inequalities and equity focused approaches; financing; input markets; and governance, accountability and community voice.

High Impact Interventions and Evidence Based Planning

These sessions aimed at familiarising participants with the burden of diseases, proven high impact interventions to address them and the returns that can be expected from investing in such interventions. It was also intended to discuss the importance of prioritisation and the respective roles of Ministry of Finance, Ministry of Health, Ministry of Education and Civil Society Organisations (CSOs) in this regard.

Efficient, transfer and tracking of resources

The session focused on the importance of measuring the performance of public expenditure in social service delivery and the understanding of the various tools used in tracking resources as a key component of VfM in social
important for the value for money agenda. It also looked into the sources of waste, inefficiency and ineffective use of pharmaceutical resources while identifying options for ensuring value for money in spending on pharmaceutical products and commodities. The session highlighted that despite the slow growth in the pharmaceuticals sector, Africa pharmaceuticals sales growth rates are expected to be over 10% between 2012-2016 in Egypt, Mozambique, Angola, Uganda, Nigeria, Tanzania and Botswana. The session also discussed the African paradox that pharmaceuticals expenditure absorbs a large share of health expenditure in Africa. This is demonstrated by the fact that on average 25% of total health expenditure in Sub-Saharan Africa is on medicines. Still pharmaceutical products are not available in adequate manner for African populations. This session discussed measures that can be used to break away from the current situation through the African model as a way forward to improve value for money. This model shows how Joint Ventures, technology transfers, African private sector and African Governments on one hand; and on the other hand Public-Private Partnerships between African private sector and African Governments, can improve and develop Africa’s pharmaceutical sector.

The issue of drugs counterfeiting was also high on the agenda. The other important issues discussed during the session include: role of the industry; reduce reliance on importations; PPPs; and regional harmonization.

**Input Market-1: Pharmaceuticals: Key areas for improving Value for Money**

This session focuses on the understanding of the African pharmaceutical sector and why supply systems are

**Input Market-2: Human resources for health (HRH)**

In many countries, policymakers are challenged to maintain an appropriate supply and distribution of skilled health workers, and to monitor their performance in service delivery. Monitoring the distribution and density of health workers in public facilities and private practice is important in ensuring that adequate levels of human capital exist, particularly in rural and underserved areas to provide equitable access to optimum quality services. This session focused on the need for the participants to recognize the magnitude of HRH crisis and inefficiencies in Africa; appreciate the main causes of HRH inefficiencies; and identifying strategic solutions. For example, the session discussed that in Togo only 150 out of the 890 doctors trained ended up serving 80% of the population. Particular emphasis was put on the need for generating evidence through labor market analysis; types of performance incentives; and the potential of information and communication technologies in mitigating the human resource crisis. A good practice from Ethiopia was presented which had utilized the scaling up of HRH through a Health Extension Programme, producing more than 34,000 health workers in less than 5 years which resulted in a reduction of a major disease burden.

**Financing of social sectors**

The objectives of this theme centered on: familiarizing the participants with the concepts of health financing, result based financing, fiscal space, education financing and their key functions. The session also assessed VfM through various health financing and education mechanisms; and for
participants to be able to identify potential opportunities to improve VfM in their daily work. The Participants were introduced to the sources of fiscal space: domestic revenue, borrowing, efficiency savings and external grants. The session also emphasized the issue of inadequate investment in the social sector and actions to tackle inefficiencies in social sectors as a serious obstacle to human development. For example, in about half of African countries, 40% or more of the total health expenditure comes from household out-of-pocket payments, which is the most regressive way of funding health care. The reliance on out-of-pocket payments entails financial barriers to access, exposing people to impoverishment. These weaknesses in the health financing systems have been identified as the main underlying reasons for the limited progress towards achieving the health MDGs in Africa. At the same time, the recent gains in survival of people living with HIV and reductions in mortality rates for malaria and measles are in danger of not being sustained if the key issues in health financing are not addressed. The recently published World Health Report for 2013-2015 emphasizes that “Fiscal policies are a powerful and underused lever for curtling of non-communicable diseases and injuries”. With regards to the education sector the session centered on ways of enhancing flow and sources of education funding as well as analyzing how resources are allocated and spent.

**Accountability and community voice to improve value for money**

The session objectives centered on familiarizing the participants with issues related to how governance, accountability and community voice relate to value for money in social sectors across Africa. The session presented results of social spending in four EAC countries including Mozambique as shown in the figure below.

The session discussed various strategies and tools for strengthening accountability and community voice; and the main reasons for low VfM in health sector in Africa (waste, corruption, poor planning, weak capacity, inefficiency, inadequate oversight, insufficient transparency). The session highlighted that there are high “leakages” in education and health sectors, whereby money allocated for particular services do not reach their destinations – often because of corruption. For example in 2004, 99% of funds allocated to local health centres in Chad never reached them, and 36% of schools in Kenya did not receive the full bursaries to which they were entitled (Source: World Bank PETS/QSDS Portal). The publication of the PETS result in Uganda in the early 1990s led to a drop in education leakages from 78% to 20% in 2002. The session also highlighted that poor social sector governance, characterized by limited accountability and weak community voice, explains why Sub-Saharan Africa lags behind other regions in terms of human development outcomes.

The training ended with a post-training debriefing by AfDB that brought the finance, health and education teams together with the CSOs to further integrate the capacity building material for VfM in the education and health sectors. The VfM team is now conducting consultations with various experts to further refine the course.

### 4 | Course Evaluation

In order to analyze and assess the training objectives, two types of evaluations were conducted during and after the training. Level 1 evaluation was conducted at the end of the training and was aimed at assessing the general objectives and overall quality of the training. According to the level 1 evaluation, the participants were satisfied with the training programme, including the courses and presentations, logistics and administrative arrangements. The level
2 evaluation was conducted on daily basis with the aim of assessing the achievement of specific learning objectives addressed by the training programme. According to the level 2 evaluation, the specific learning objectives of the training were achieved. Participants were enthusiastic about the training and acquired a clear understanding of VfM key concepts, challenges and possible solutions as shown on the table below.

<table>
<thead>
<tr>
<th>Item</th>
<th>Disagreed</th>
<th>Strongly Disagreed</th>
<th>Agreed</th>
<th>Strongly Agreed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Travel arrangements to satisfactory</td>
<td>12%</td>
<td>4%</td>
<td>29%</td>
<td>55%</td>
</tr>
<tr>
<td>Meeting rooms and audio-visual equipment</td>
<td>11%</td>
<td>6%</td>
<td>40%</td>
<td>43%</td>
</tr>
<tr>
<td>Hotel Accommodation and meals</td>
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<td>2%</td>
<td>31%</td>
<td>52%</td>
</tr>
<tr>
<td>Arrangement and correspondence With AfDB staff</td>
<td>10%</td>
<td>3%</td>
<td>25%</td>
<td>62%</td>
</tr>
<tr>
<td>Content of the training</td>
<td>8%</td>
<td>7%</td>
<td>27%</td>
<td>58%</td>
</tr>
<tr>
<td>Presentational methods of the training</td>
<td>9%</td>
<td>7%</td>
<td>41%</td>
<td>43%</td>
</tr>
<tr>
<td>Value of training in relation to job and professional development</td>
<td>18%</td>
<td>8%</td>
<td>23%</td>
<td>51%</td>
</tr>
</tbody>
</table>

Source: Hagen-Zanker and McCord, 2010

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“The training provided a framework for discussion on the key challenges and bottlenecks affecting the social sector in the EAC region” said Nzoya Munguti Health Economist, Kenya

5 | Best practices for VFM

Some of the best practices presented and discussed include: evidence planning in Ethiopia; result based financing in Rwanda and the Open Health Initiative at the EAC and health extension programme from Ethiopia. Practical examples were also drawn from Cambodia, Kenya and Zambia on addressing inequity.

“It was important to get all the stakeholders together in the same place to facilitate dialogue and understanding. Getting these key sectors together facilitated deeper and wider discussions on key challenges and identification of common approaches relevant to the implementation of VfM, principles and best practices that could be applied across social sectors” Said Assela Luena, Ministry of Education and Vocational Training, Tanzania

6 | Conclusion

The Dar es Salaam training allowed the team to pilot its approach and course content, and to learn the following: need to find right balance in terms of practical exercises; need for balance between workshop style and training style; and need to elaborate more on tradeoffs and how to handle them.

7 | VFM Upcoming Events

April 2014 Abuja, Nigeria
Value for Money, Sustainability and Accountability capacity building for parliamentarians of the ECOWAS Region

May 2014 Arusha, Tanzania
Value for Money, Sustainability and Accountability capacity building for parliamentarians of the East African Community

July 2014 Durban, South Africa
Value for Money, Sustainability and Accountability capacity building for senior officials and implementers of the Southern African Development Community (SADC)