

Overview

Since 2016, the Health Policy Plus (HP+) project, funded by the U.S. Agency for International Development (USAID), has partnered with the government of Madagascar and key stakeholders to drive significant progress toward stronger health policy, advocacy, financing, and governance. HP+'s work in Madagascar resulted in key achievements in the areas of ending preventable maternal and child deaths, securing access to healthcare and financial protection, and addressing unmet need for family planning.

Working to End Preventable Maternal and Child Deaths

HP+ has supported a wide range of efforts to strengthen equitable access to high-quality healthcare for all Malagasy people and particularly for women and children and people in remote locations. Strengthening community-level healthcare, HP+ collaborated with the Ministry of Public Health to modify and ensure the adoption of a community health policy to increase equitable access to health services. Additionally, HP+ supported the development of a national community health strategic plan and a guide outlining core, essential, and specific community health volunteer activity packages. HP+ also supported the ministry to develop a 2020–2024 reproductive, maternal, neonatal, child, and adolescent health and nutrition investment case to mobilize stakeholder investment in priority areas and help with targeting resources to the most disadvantaged areas.

To ensure the effectiveness of interventions across the health sector, the project collaborated with

Resource Mobilization through Contraceptive Tax Exemptions

Madagascar's Costed Implementation Plan for Family Planning is an ambitious, strategic plan to strengthen family planning services and outcomes nationwide. However, the cost of the plan exceeded available resources. With HP+ support, the Family Health Directorate advocated for tax exemption for contraceptive products, freeing up resources to fund the plan. In December 2019, efforts came to fruition when tax exemption for contraceptives was integrated into the 2020 Initial Finance Law and adopted by parliament. Read more about this achievement and others in the HP+ Madagascar Legacy Impact Brief.

the ministry and technical experts to develop and budget for the 2020–2024 health sector development plan as well as establish a guide for periodic review of the plan at all levels of the health system. To strengthen accountability and governance related to health, HP+ provided in-depth training for government officials on the principles of stewardship and leadership, based on analysis of existing capacities in these areas.

Securing Access to Healthcare and Financial Protection

As insufficient financial resources constitute one of the greatest barriers to increasing healthcare access in Madagascar, HP+ supported work to improve efficiency in health spending and domestic resource mobilization. This included conducting a health financing system





assessment, analyzing health budgets, and developing a funds flow analysis and diagram to inform decisions on the rollout of universal health coverage, decentralization, and the capacity of subnational health institutions. This work informed discussions on a national health financing strategy, for which HP+ provided technical support, including assessing existing health financing mechanisms, developing national health financing goals, and defining the strategy's vision and objectives.

HP+ also supported the development of a decree establishing the National Health Solidarity Fund, adopted by the government in 2017. The project helped determine the benefits package's list of services, costs, and premiums; supported development of the operations manual and training curriculum for local agents managing the fund; and supported the revision of three legislative texts related to the fund to increase accountability and transparency. Subsequently, HP+ led the development of the national communication strategy for universal health coverage, which was a foundation for advocacy, particularly at the decentralized level, and supported awareness-building, helping to affiliate over 12,000 people in more than 3,500 households into the fund.

Addressing Unmet Need for Family Planning

One of the most significant achievements supported by HP+ was the revision and passage of an updated rights-based <u>law on reproductive health and family planning</u>, which ends the requirement of spousal consent for the distribution of contraception. Since its passage, HP+ has strengthened the capacities of civil society organizations, youth networks, journalists, and government ministries to <u>spread information about the new law</u>.

Providing evidence to encourage the country to invest in interventions for youth, family planning, education, and the economy, HP+ applied the DemDiv model. With the engagement of stakeholders—including the national demographic dividend team, made up of representatives from seven government ministries—the president pledged to include the demographic dividend roadmap in Madagascar's emergence plan. In pursuit of Madagascar's national family planning commitments, HP+ supported the development, costing, and launch of the 2016–2020 costed implementation plan for family planning, which was monitored through a performance dashboard and regular financial gap analyses. Semi-annual reviews were held to discuss results and challenges as well as conduct a comprehensive final review of the 2016–2020 plan. Key recommendations from the review will be integrated into the forthcoming 2021-2025 plan.

The Way Forward

To build on the policies, tools, and competency building that HP+ has supported, continued efforts toward dissemination, implementation, and monitoring will be required. Country actors must continue to share information about the law on reproductive health and family planning and secure additional resources to ensure the access to and quality of services promised by the law. The development of the National Health Solidarity Fund and strategies to improve health financing and access to care are noteworthy steps toward Madagascar's goal of universal health coverage. Achieving this goal will necessitate significant government buy-in to build a national health insurance mechanism, as well as further advocacy, policy work, and investment in the years to come.

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Health Policy Plus (HP+) is a seven-year cooperative agreement funded by the U.S. Agency for International Development under Agreement No. AID-OAA-A-15-00051, beginning August 28, 2015. HP+ is implemented by Palladium, in collaboration with Avenir Health, Futures Group Global Outreach, Plan International USA, Population Reference Bureau, RTI International, ThinkWell, and the White Ribbon Alliance for Safe Motherhood.

This publication was produced for review by the U.S. Agency for International Development. It was prepared by HP+. The information provided in this document is not official U.S. Government information and does not necessarily reflect the views or positions of the U.S. Agency for International Development or the U.S. Government.

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