

Oxfam GB Project Effectiveness Review Management Response

Regional Director: Aboubacry Tall

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Name of Project reviewed: Health for All: Towards Free Universal Health Care in Ghana

Date: March 2013

Participants in the Management Response: N/A

Summary of contribution score

Outcome	Rating	Short Commentary (including reference to other evidenced explanations as appropriate)
Improved co-ordination of civil society organisations to advocate for free universal health care for all		<ul style="list-style-type: none"> – Campaign made a high contribution to building the capacity of CSOs within the Campaign’s membership to advocate for free universal health care. This centred on helping CSOs to understand the Campaign report’s findings. – The Campaign made a moderate contribution to increasing the ability of CSOs to plan and work together to advocate for free universal health care.
Increased political buy-in for free, quality and accessible universal healthcare for all		<ul style="list-style-type: none"> – Little evidence that the outcome was realised. – Activities of the Campaign appear to have failed to established constructive dialogue with parliamentarians in the lead up to the elections
Improved co-ordination of civil society organisations to advocate for free		<ul style="list-style-type: none"> – Campaign made a high contribution to building the capacity of CSOs within the Campaign’s membership to advocate for free universal health care. This centred on helping CSOs to understand the Campaign report’s findings.

universal healthcare for all		<ul style="list-style-type: none"> – The Campaign made a moderate contribution to increasing the ability of CSOs to plan and work together to advocate for free universal health care.
The current NHIS system is shown to be an ineffective vehicle to deliver free universal health care in Ghana		<ul style="list-style-type: none"> – Changes to how the NHIA calculated NHIS coverage was shown to be flawed by the Campaign. – The NHIA changed its methodology for calculating NHIS coverage because of pressure from the Campaign
Increased political buy-in for free, quality and accessible universal healthcare for all		<ul style="list-style-type: none"> – Little evidence that the outcome was realised. – Activities of the Campaign appear to have failed to establish constructive dialogue with parliamentarians in the lead up to the elections.

1. What follow-up to the review have you undertaken or planned (if any) e.g. discussion, analysis, workshop?

We have planned to have one-on-one discussion with the campaign Coordinator and further organised coalition debriefing with coalition steering committee.

2. Overall, do the findings concur with your own expectations or assessment of the project/programme's effectiveness?

Yes, the scores reflect our own assessment and expectations. The progress (and challenges) in bringing together the coalition was clear, and the impact on having the problems of the NHIS recognised by the government were clearly the greatest achievement.

It is a shame that the evaluation was not able to capture the views of the political parties in terms of their thoughts about the impact of the campaign. Whilst it may be reasonable but it would be fair to conclude that the campaign did not succeed in mobilising a critical mass of individual candidates focused on our issues, there was significant achievements made with top party officials and candidates that were not covered by the evaluation.

3. Did the final results of the Effectiveness Review identify areas that were particularly strong in the project (i.e. large impact)?

Yes, Oxfam's contribution in building partners policy capacity on health financing, an issue which was not present in health NGOs discourse, can clearly be identified. The campaign report is widely cited as a credible and effective report. The evaluation also possibly underestimated the degree of coalition building done, managing a civil society movement in all ten regions of Ghana and becoming national and

internationally recognised as *the* civil society movement on health in the country.

Most substantially, Government and donors have recognised the weaknesses in the National Health Insurance System, previously lauded as a world leading system, wrongly claiming to service 2/3 of Ghanaians. The Government has now accepted the fact that Oxfam's report and campaigning by partners is contributing passively in showing the real coverage of the policy. This provides a crucial platform for reform of the system.

4. Did the final results of the Effectiveness Review identify areas that were weak or very weak (i.e. no or very little impact)?

The largest weakness identified by the review was the claim that the Government has not embraced the idea of free universal access to health. On the one hand, this is not surprising as bringing such a change in society through campaigning and lobbying takes more than two years of intervention. Yet it can be argued that significant steps have been made by gaining recognition of the weaknesses of the current model.

Another weak point highlighted was the lack of influence on a critical mass of individual candidates. It is difficult to make a strong conclusion on this point as the reviewers were not able to interview any political party or candidates. It does seem fair to conclude that the campaign did not succeed in mobilising a critical mass of individual politicians on specific issues highlighted by the campaign to the degree originally hoped for, but there was evidence of impacts on senior party officials and possibly – though we may have problems attributing it – on party manifestos.

These specific shortfalls should be complemented by a recognition that on the ground the campaign is influencing policy makers at country and global level, and its role is being recognised as such. In April 2013 World Bank contacted the coalition to do video recorded message on access to universal health care to be part of Jim Kim's (World Bank President) message to the World Health Assembly. WHO proactively contacted Oxfam to apply for funding to campaign and advocate on access to universal health care. The application has been successful to continue the work in Ghana and roll out two new campaigns in Egypt and India.

Finally, there were criticisms made about Oxfam's role as a partner in the campaign, particularly in the earlier phases, when partners complained about Oxfam taking too prominent a role, taking the place of partners and threatening coalition dynamics. This was recognised at the time, and efforts were made to take a more facilitating role and a more sustainable coalition leadership.

5. a) Is the reviewed project continuing? If yes, what actions are being taken in response to the weak areas identified in question 4?

The project is being continued by the civil society coalition, but Oxfam in Ghana will no longer be providing financial or staff support beyond supporting efforts to fundraise for the sustainability of the coalition. This reflects a long agreed exit strategy, and is not a response to the evaluation.

Oxfam at global level will continue to engage with the coalition and provide support, including meeting the leadership of the coalition to address the issues highlighted.

b) What actions are you planning in response to the Programme Learning Considerations?

This report will be shared with other programmes as well as present it at campaign leadership meetings/shops as case study. This process has started already.

The report and key lessons has been shared with all Country Directors and Campaign Managers in West Africa. It will also feature on the regional blog.

6. If the project/humanitarian response is ending or has already ended, what learning from the review will you apply to relevant new projects in the future? How can the Regional Centre and Oxford support these plans?

Though Oxfam country office is Ghana will not be campaigning on health, there has been a unanimous decision from country, region and global that the coalition should be supported with fundraising and technical support in terms of policy analysis from global level.

The reports will be published by Oxfam. If you have objections to this, please say so and explain why.

No objection.