

10th ECTMIH

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PBF in Benin: Lack of ownership, capitalisation of experience, and sustainability

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Lack of ownership

- PBF introduced in 2012 by the WB in 8 districts; process was “pushy”
 - BTC followed suit in 5 districts (alternative model)
 - Gavi and GFATM followed suit in 2015 (WB model)
- PBF conceived and perceived as a separate “project”
- PBF ownership limited to a very small circle in MoH
 - No national unit in charge of overseeing PBF (WB project unit acted as such, but kept separated)
 - Very limited implication of other ministries (joint missions)



Lack of transparency

- Many stakeholders heard of the existence of a « challenging » model (BTC) only during the annual joint review in 2015
- Analysis and capitalisation took place (too?) late in the process
 - Could not help adapt the model to needs and demonstrate results
- Opaqueness of management within WB's project unit
 - No indication on management costs
 - No joint financial reporting (3 donors)

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Lack of integration

- (Especially WB's model) PBF created new institutions (verification organs and missions, CBOs for counter-verification, revised indicators, data collection tools, quality matrices,...)
- Little reflexion on how to streamline PBF (merging of missions, simplification of verification, reduction in transaction costs,...)

Lack of institutional and financial sustainability

- Institutional design not adequate for transfer to domestic constituencies
- Most donor funding ends/ended in 2017 (WB: June; BTC, GFATM: December)
 - No domestic budget to take over
- WB's model's institutions: ?? (>< BTC strengthened existing institutions)

New GoB's not in favour of continuing PBF

Conclusion

- Sustainability would need:
 - Wide national ownership – within MoH and beyond
 - Evidence-based adaptation of PBF model
 - Integration of PBF into local health systems

To learn more about this: Paul E., Dramé M.L., Kashala J.-P., et al. (2017) Performance-Based Financing to Strengthen the Health System in Benin: challenging the mainstream approach. *International Journal of Health Policy and Management* 6. doi: 10.15171/ijhpm.2017.42