

ECTMIH 2021 Bergen – Concept Note – Organised session

“Revitalizing the health system in Niger: pilot reform experiences enabling to progress towards strategic purchasing”

Session track

Track 5. Building strong health systems to achieve UHC: the role of rights, governance, technology and priority setting

Names, affiliations and email-addresses of all participants

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Purpose and content of the organised session

Niger, a low-income country in Western Africa, faces many challenges on the path to universal health coverage (UHC). On the one hand, the financing system is still much fragmented, reducing efficiency and equity. The targeted free healthcare policy has not improved financial protection in a sustainable way, and has negative consequences on the financial viability of health facilities, with negative consequences notably on the availability of common drugs. On the other hand, coverage of quality health services is still low, especially in remote areas, due to important governance and financing constraints. The health system needs to be strengthened both on the supply side (quality services) and on the demand side (population/financial protection), while

ensuring the best use of the available resources. To do so, the Belgian Development Agency (Enabel) is supporting the Ministry of Public Health in piloting a number of reforms, through an action research approach, from design to scaling up.

After a brief contextual presentation of key challenges regarding the health financing system and strategic purchasing function, this session intends to present a number of positive evidence-based experiences that are on their way to scaling up and their integration into the national health policy. Two reforms enabling to improve efficiency and strengthen the primary healthcare system in a sustainable way will be presented: digitalisation and strengthening of medical equipment and infrastructure maintenance. Indeed, digitalisation enables to generate all the information needed for annual planning and budgeting because all the information on equipment needs, construction, building maintenance, population covered, available staff and the deficit in relation to standards is available. It also makes it possible to optimise mobile clinics, the only efficient approach that makes it possible to increase health coverage in geographically isolated locations. Electronic patient's file allows health centres to track electronically everything that happens with the patient from the moment he or she enters the health centre: diagnosis, medicines provided, length of stay or complications and results of treatment appear in a personalised file, enabling to improve quality of health services and reduce operational costs. Maintenance also considerably improves the duration of medical equipment and infrastructure, hence the sustainability and efficiency of the health system, which is a prerequisite for progressing towards UHC.

Then, financing reforms will be discussed, with a case study of how a performance-based financing scheme enabled to strengthen the foundations on the path to the setting up of a large-scale health insurance model. Indeed, performance-based financing (PBF) was introduced by Enabel in order to support the transition of the Ministry of Public Health in strengthening its regulator function and experimenting a purchaser-provider split, and to improve the quality of health services at peripheral level. The PBF scheme mainly covers health services delivered at the primary and secondary levels of the health system, and also supports the District Health Management Team in supervising health facilities and reaching out populations in remote areas. At this stage of experimentation, the PBF scheme has enabled to increase transparency in public financial management at district level (procurement, autonomy of health facilities, improving cost recovery mechanism) and is associated to improving availability of drugs, accessibility and utilisation of health services. It is planned to smoothly transition from PBF to health insurance, making sure to sustain gains from PBF, notably through supporting the development of an independent purchasing agency, and ensuring the management of health insurance and others health financing schemes (fees exemption, PBF) at district level so as to reduce the fragmentation of health financing mechanisms.

Overall, this session will draw transversal lessons, relevant both for governments committed to UHC and donor agencies which support them.

Timetable of the organised session (50 minutes)

The session will comprise three “classical” presentations and two presentations coupled with short videos aimed at presenting field results. The first presentation will enable to set the scene and present the key challenges of the health (financing) system, the next three will present pilot reform experiences, and the last one will wrap up the key messages from the session. The research team will propose participants to ask questions and propose short interventions through a forum of discussion. The most relevant ones will be synthesized by a moderator at the end of the session, and a selection of participants will be invited to intervene.

1'-5': Aline Labat and Vicente Pardo Iniesta: **Setting the scene: health financing challenges in Niger: how to progress towards strategic purchasing of health services?**

- The concept of strategic purchasing (1 slide)
- Overview of the situation in Niger (1 slide)
- Introducing the PASS program (1 slide)

5'-15': Rona Aboubacar: **Improving efficiency through supporting digitalization down to primary healthcare centre level**

- Short presentation accompanied by a 2-minute video

15'-20': Amani Moustapha: **Maintenance: a major neglect in many African health systems – the efforts of Niger to improve efficiency and sustainability in the Gaya district (region of Dosso)**

- Short presentation accompanied by a 2-minute video

20'-30': Doferegouo Soro: **Building a health insurance scheme on the grounds of a performance-based financing (PBF) programme in Niger**

- Aim and scope of the PBF/PASS scheme in Niger (1 slide)
- PBF design and theory of change (1 slide)
- Lessons emerging from the pilot experience (1 slide)
- Way forward the setting up of a departmental health insurance (1 slide)

30'-35': Paul Bossyns: **Wrap-up: Supporting both sides of the health system (supply and demand) through a comprehensive approach is necessary to progress towards UHC**

- Take-home messages (1 slide)

35'-50': **Debate with participants** (moderation by Elisabeth Paul)

The participants will be encouraged to ask questions and propose short communications through the chat. E. Paul will synthesize them and invite the most relevant ones to participate in the debate.