

Country Office Evaluation - Rwanda

Evaluation brief - August 2018

Context

Country office evaluations were included in the Organization-wide evaluation workplan for 2018-2019, approved by the Executive Board in January 2018. They encompass the entirety of WHO activities during a specific period and aim to provide findings, recommendations and lessons that can be used in the design of new strategies and programmes in-country.

Objectives and scope the Evaluation

The main purpose of this evaluation was to identify achievements, challenges and gaps and document best practices and innovations of WHO in Rwanda on the basis of its achievements over the period 2014-2017. These included not only results achieved by the WHO Country Office (WCO) but also contributions at regional and global levels to the country programme of work.

Key findings and conclusions

Question 1: Were the strategic choices made in the Country Cooperation Strategy (CCS) addressing Rwanda's health needs and coherent with government and partners' priorities?

The priorities identified in the CCS 2014-2018 and updated in its 2016 revision were relevant to address Rwanda's major health needs and were coherent with government and partners' priorities. The systematic needs assessments and wide consultations that took place during CCS formulation and the ongoing engagement with the key national stakeholders helped to facilitate the coherence and relevance of the strategic choices. The WCO is a relevant actor in the formulation of the national strategic plans of the Ministry of Health (MOH), both at the sector-wide level and specifically in relevant technical areas, thus facilitating a high degree of alignment and coherence of the WCO with national and development partners' strategies in Rwanda. In recent years, Rwanda has shown major progress in most observed health and development indicators. As part of the continuing commitment of the Government to achieve rapid socioeconomic development, the MOH drives the health agenda and expects from the WCO an innovative, fast, highly skilled and focused approach along Government priorities. The 2016 revision of the CCS 2014-2018, in response to significant progress in achieving the MDGs and the new SDG agenda, is an

example of WCO leadership and commitment to adapt the WHO CCS to the evolving situation and to respond in the most effective manner to the needs of Rwandan people. Consequently, the CCS includes an extensive number of focus areas without clear prioritization. Therefore, the CCS is responsive but provides limited guidance for strategic planning of WCO activities.

Question 2: What is the contribution/added value of WHO toward addressing the country's health needs and priorities?

WHO, through its WCO in Rwanda, is seen as a respected and technically expert voice in health matters and an essential contributor to advancing health achievements in Rwanda. The WCO's leadership and support for the health agenda were considered essential by the MOH and most development partners, including UN agencies.

The work of WHO was most notable in terms of convening partners, providing strategic and technical policy advice, provision and local adaptation of guidelines, norms and standards, and capacity building. Specific achievements included: support for development of health sector strategies and plans; technical assistance in the area of health financing; development of several disease-specific strategies and plans; normative and technical support in maternal and child care and family planning; introduction of new vaccines; and improvements in certification of causes of death. WCO collaboration in other areas, such as noncommunicable diseases, nutrition, environmental health and social determinants of health, was less effective. Some stakeholders highlighted the need for strengthening the focus of some WHO activities, which calls for reinforced results-based planning at the workplan level.

Question 3: How did WHO achieve the results?

Key contributions of core functions. All core functions demonstrated their relevance for WHO's work in Rwanda. The evaluation showed evidence of effective WCO leadership and convening power, policy advice, provision of technical support, capacity building, and monitoring the health status and trends along the key strategic priority areas identified in the CCS 2014-2018. Nevertheless, several stakeholders identified opportunities for WHO to provide more direct support on strategy and policy issues at senior levels of the

ministry, and to become a stronger advocate around unmet health priorities within and beyond the health sector through intersectoral engagement. They also requested WHO's support to strengthen regional cooperation and facilitate knowledge management, including sharing of best practices and exchange of experiences, at the regional and subregional levels.

Partnerships. In general, partner relationships appear to be good and supportive of effective joint working. At the Government level, the main partnership was established through the MOH. The current development partnership structure in Rwanda, framed under a Government mandated division of labour, somewhat limits opportunities for establishing other types of alliances outside the allocated partners. The UN system in Rwanda has embraced the "Delivering as One" framework, operating under the recently updated United Nations Development Assistance Plan (UNDAP), which provides WHO the opportunity to work intersectorally and engage in new partnerships. However, UNDAP seemed to have little practical impact on WCO's day-to-day activities and could not be shown to have contributed significantly to WCO outcomes.

Funding is critical for WHO's catalytic engagement in-country. Several stakeholders expressed concern about the limited resource base of the WCO in support of its workplan, considering that current levels of financing were insufficient for WHO to fully achieve its objectives and maintain its leadership role.

Staffing. Gaps in staffing capacity for priority areas and for needed enabling functions were noted. The need to continuously upgrade the technical skills and expertise of WHO staff, particularly in view of the strong Government expectations to receive innovative solutions and highly-skilled support, was widely recognized. There is also a need to consider the appropriate mix of international professionals and National Professional Officers that adequately responds to the emerging needs of the country.

Recommendations

Recommendation 1: The new Country Cooperation Strategy and the associated WHO country office programme of work should be developed to ensure a good strategic fit with the unmet needs of Rwanda, the directions set by its Government in the Fourth Rwandan Health Sector Strategic Plan, the 13th General Programme of Work and WHO's comparative advantage. It is recommended that the new Country Cooperation Strategy be more focused and that the WHO country office should continue to strengthen its role working at the strategic level.

Recommendation 2: Recommended strategic priorities for inclusion in the new Country Cooperation Strategy are:

- i. Support efforts to identify options to secure the financial sustainability of the Rwanda health system in support of Universal Health Coverage;
- ii. Facilitate the institutional development of Rwanda's health system, including the strengthening of institutions such as the Food and Drug Regulatory Authority and the planning of health services at the district level;
- iii. Further strengthen information systems, civil registration and vital statistics, the National Health Observatory and improve data quality in general, in consideration of Sustainable Development Goal monitoring requirements;
- iv. Strengthen the quality of health service delivery, the fostering of evidence-based healthcare and consider the opportunity of adopting digital health approaches;
- v. Strengthen work on noncommunicable diseases and nutrition;
- vi. Consider assessing Rwanda's needs for mental health services;
- vii. Emphasize the role of gender, human rights and equity as social determinants.

Recommendation 3: WHO's upcoming Country Cooperation Strategy needs to be articulated showing the causal path (theory of change) from all country-level activities and outputs to expected outcomes (in relation to achieving the WHO's triple billion goals) and finally to the expected impact on Rwanda's health.

Recommendation 4: Going forward, the WHO country office, in collaboration with the Regional Office for Africa, should review the office capacity and human resource and management plans in order to ensure that the new Country Cooperation Strategy priorities are adequately covered with the necessary financial and human resources.

Recommendation 5: WHO needs to strengthen mechanisms for coordinating and consolidating the provision of technical support from the three levels of the Organization, in order to increase its effectiveness and efficiency, and the organizational responsiveness to meet the needs and demands of Rwanda in accordance with the country cooperation strategy and the WHO-Ministry of Health agreed plans of work.

Contacts

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The evaluation report is available here: https://www.who.int/docs/default-source/documents/evaluation/report-rwanda-country-office.pdf?sfvrsn=cc30cbbe_2