

If countries lead, will donors follow?

Who determines policy in a donor-dependent world? Francis Omaswa urges governments to provide clear and proactive leadership and thus reclaim some of the ground they have lost



During our previous discussion on reclaiming the 'can do' attitude among African techno-professionals, we were reminded of the era of great expectations when African economies were performing well and social services were provided without the need for visible donor support. Then followed the era of decline when African economies collapsed and went into debt; becoming heavily donor dependent and earning the shameful classification of Highly Indebted Poor Countries (HIPC). I wish they had coined a more euphemistic title!

While the last decade has seen strong economic growth in Africa, in the foreseeable future, most African countries will still not be able to provide essential social services, including health, to their populations without donor support. Managing 'donorship' has, therefore, become a major preoccupation and big business which is critical to the achievement of African health goals. Many high-level conferences have been convened in Monterey, Rome, Paris, and Accra to address the subject. A High Level Forum on health-related MDGs deliberated over a 2-year period. There are very many resolutions, prescriptions, and initiatives such as Sector Wide Approaches, International Health Partnerships, and multiple Global Health Initiatives. There is jargon to describe aid instruments and modalities for delivering aid such as budget support: non-earmarked or earmarked projects, technical assistance, etc.

The subject of good donorship, however, remains vexed. Donors and aid recipients often have tensions and regularly trade accusations against each other. Aid recipients are concerned about the possible loss of ownership and leadership for priority setting to donors, while donors are concerned that they want to see more results for their money and want a role in priority setting. The rules of engagement however, are well articulated in the Paris Declaration on Aid Effectiveness and the Accra Accord where 'country leadership' is the core guiding principle of good donorship. However the question that is at the heart of the debate is: 'If countries lead, will donors follow?'

The Ministerial Leadership Initiative for Global Health (MLI) hosted a round table discussion with this exact title during the June 2011 Global Health Council meeting in Washington DC where I was one of the panelists along with colleagues from Mali, Senegal, Sierra Leone, Nepal, and the MLI Secretariat. I have been

Francis Omaswa, CEO, African Centre for Global Health and Social Transformation; Founding Executive Director of the Global Health Workforce Alliance.

closely involved with several of the initiatives listed above, was a participant at negotiating the Paris Declaration, and coordinated donors for the health sector in Uganda for a period of 7 years. I have also been a small donor as head of the Global Health Workforce Alliance. Here is how I see this situation:

There is evidence from the work of MLI and elsewhere to show that where countries are clear and strong about what they want to achieve, donors actually follow and these are the countries making the most progress in achieving health goals. These achievements are incentives to donors to provide more support. Where countries do not have explicit health policies and strategies, or are not strong and have no individuals able to articulate these clearly, then donors want to argue for what they believe will work better, which gets interpreted as taking over ownership and country leadership. Donors have to account to their tax payers and need evidence of success and positive results from the aid recipients for accountability and to justify additional allocations. Countries are sometimes desperate for the money and fear losing it by appearing strong or challenging donor positions during negotiations. I have also seen donor representatives who are too strong, appear to know everything, are patronising and push down their own positions on timid 'beggar' countries, sometimes in variance with official donor country guidelines. I have heard donors say that they want to be led. Regrettably, I have also seen countries where local partners who interact with donors are either too weak or are lacking commitment.

Clearly, the situation is complex. Building trust between donors and aid recipients is the key to a productive relationships. Yet nurturing this trust can be tough, has to be learnt, needs touch, takes time to earn, and is easy to lose. Individuals of high calibre who are committed to genuine development are required from both sides and need to be prepared for their roles. Mutual respect and clear separation of roles and responsibilities are other pillars upon which this trust is built and sustained. Structures and instruments for managing the relationship are essential and should be institutionalised; examples include committees and other forums for regular joint reviews and for resolving conflicts which inevitably occur.

Africa will need donors for some time to come and I am convinced that 'if countries lead, donors will follow'. This is only possible where you have Africans who are committed, willing, and able to lead, and of course willing to be held accountable. What do you think?