

As of January 24, 2017

A. Introduction

This Concept Paper is a key step in the process for designing a sector-wide USAID/Philippines Project Appraisal Document (PAD) and the authorization and award of a new generation of health activities by 2018. The proposed objectives outlined in this Concept Paper build on the current portfolio of activities, some of which will come to an end in September 2017. USAID/Philippines next health program will continue to play an important role supporting the Government of the Philippines to meet the goals of the Philippines Health Agenda.

B. Problem Statement and Theory of Change

For the Philippines to achieve the Sustainable Development Goals for health, a far greater proportion of Filipinos must consistently practice healthy behaviors, and seek and receive quality care through a functioning and sustainable health system. Underserved populations, especially those from the lowest income quintiles and from geographically isolated and depressed areas, continue to suffer from a high prevalence of tuberculosis (TB), including multidrug-resistant TB, and preventable maternal and newborn deaths, due to limited adoption of healthy behaviors, weak health systems and governance, and inadequate service delivery. Health sector performance suffers as a result of weak logistics management, shortages of quality health professionals in underserved areas, inadequate public sector capacity to engage the private sector in health, and significant variations in quality of health services at both the national and local levels.

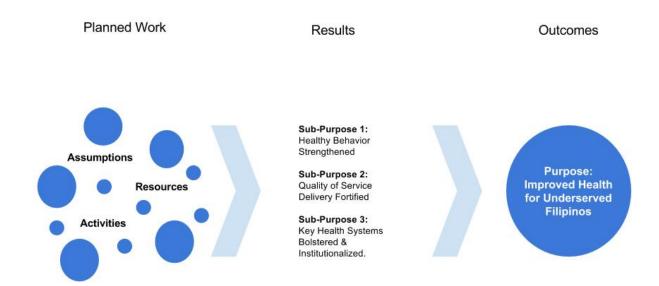
Achievement in health sector reforms and health outcomes has been mixed, with uneven progress across socioeconomic strata and certain regions in the Philippines. The Philippines has made significant strides in the past ten years to address inequities and inefficiencies in health financing, service delivery, regulation, and demand generation; resulting in measurable increases in health expenditures, service delivery outputs and service utilization. Yet, there are still gaps in the continuum of care today, particularly in addressing maternal and neonatal mortality, reproductive health, tuberculosis, HIV, emerging pandemic threats, under nutrition, and illegal drug use.

The underlying theory or hypothesis of this project¹, which will be comprised of several activities², is that *strengthening key functions of the health system*³ *will contribute to the health of underserved Filipinos and the overall health profile of the country will improve*. Thus by addressing the needs of the individual, the quality and equity of services as well as their affordability and sustainability, underserved Filipinos will be able to develop and maintain health behaviors and seek and receive quality health care.

¹ USAID's definition: A project is a set of executed interventions, over an established timeline and budget intended to achieve a discrete development result (i.e. the project purpose) through resolving an associated problem. It is explicitly linked to the Country Development Cooperation Strategy Results Framework. (Automated Directives System Chapters 200-203).

² USAID's definition: An activity is a sub-component of a project that contributes to a project purpose. It typically refers to an award (such as a contract or cooperative agreement), or a component of a project such as policy dialogue that may be undertaken directly by Mission staff. (Automated Directives System Chapters 200-203).

³ Health Functions are Human Resources for Health, Health Finance, Health Governance, Health Information, Medical Products, Vaccines, and Technologies, and Service Delivery; USAID's Vision for Health Systems Strengthening, September 2015, p. 14.



C. Relationship to the Country Development Cooperation Strategy and Cooperation Strategy

The Philippines-United States Partnership for Growth key constraints and the Fiscal Year (FY) 2012-2016 Country Development Cooperation Strategy⁴ include: inadequate human capital; growing income inequality; poor infrastructure; weak governance; a lack of fiscal space; and underlying, pervasive corruption. USAID's overarching development hypothesis is that strengthening human capital (by improving health and education) and stimulating economic competitiveness (by strengthening weak governance and expanding fiscal space) will accelerate

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⁴ The USAID/Philippines CDCS was officially approved in April 2013, and is expected to be in effect until approximately April 2018.

and sustain broad-based and inclusive growth in the Philippines. Such growth, combined with enhanced peace and stability in conflict-affected areas of Mindanao and improved environmental resilience, will contribute substantially to the fostering of a more stable, prosperous and well-governed nation.

At the country level, USAID's proposed health project prioritizes activities outlined in the Philippines Health Agenda, which aims to improve Filipinos' access to quality healthcare, especially the marginalized and the poor. It is aligned with the Responsible Parenthood and Reproductive Health Law's Implementing Rules and Regulations and the National TB Control Law. The new health project bolsters PhilHealth and the Department of Health's joint strategies to improve the accountability of both agencies--including local government units--to reduce duplication and improve efficient use of human and financial resources. Additionally, the proposed health project will focus work in City Development Initiative priority cities, where the health burden is the greatest.

D. Evolution of New Health Program

In March 2016, the Office of Health commissioned an independent evaluation of USAID's health assistance in the Philippines with a focus on its work on family planning, maternal, neonatal and child health and infectious diseases. The evaluation report identified USAID's comparative advantages: its strong partnership with the Government of the Philippines; its long and successful track record working on training, protocol development, policy reforms, monitoring and evaluation, behavior change and communication activities; and its capacity to work with the private sector.

Recognizing the country's most pressing health issues at hand, USAID's earmarked funds and comparative advantages, government's investment and other donor partners' priorities, the new health project and associated activities will increase its focus on sustainability and addressing inequities. Evolutions from the former project include:

- Shifting away from direct provision of training to bolstering the Department of Health's capacity to manage and oversee human resource development;
- Changing the approach from implementing nationwide service delivery programs to introducing small-scale, research-based, innovative and inspirational state of the art maternal and child health, family planning and TB interventions in selected sites, which will provide proof of concept to build evidence for national scale up or adoption by the Department of Health;
- Moving from fragmented, stop-gap supply chain activities to more strategic supply chain system technical assistance;

- Transitioning from direct and limited engagement of community, private sector, local government and other stakeholders, towards systematic and broader participation of all stakeholders to improve government stewardship;
- Shifting from broad implementation of service delivery projects throughout the country to focusing USAID family planning; maternal, newborn, child health; and tuberculosis resources in the areas and regions with the highest burden of disease, the greatest need and the potential for significant health impact;
- Moving from developing national communication campaigns and producing and distributing communication materials to assisting the national and subnational agencies of the Department of Health, Commission on Population and PhilHealth to improve social and behavior change /communication systems; and
- Moving from nationwide implementation of family planning and reproductive health to improved alignment with City Development Initiative cities and other urban centers with the highest burden of health needs and adopting the urban health equity approach, which utilizes socio-economic determinants in analyzing and addressing health priorities.

Given USAID/Philippines' comparative advantage, and in line with Development Objective 1, "Broad-Based and Inclusive Growth Accelerated." the health program intends to continue to:

- Prioritize underserved, vulnerable populations, which have the poorest health indicators and the most significant government expenditures for health care. These target populations include: the lowest wealth quintile; the urban poor; populations in rural and geographically isolated, depressed and conflict-affected areas; the least educated; and women, children and young people (10 to 24 years old);
- Strengthen policy, communication and governance reforms at both the national and subnational levels;
- Improve documentation and knowledge management for decision-making; and
- Integrate gender equality, women's empowerment and male involvement approaches in all interventions.

To implement the new health project, the Office of Health will continue to coordinate with the Department of Health to identify high-burden, priority geographic regions and target activities to support the country's health goals at the national and subnational levels.

E. Logical Framework

The Health Logical Framework for 2017-2021 aligns with the Country Development Cooperation Strategy, with a renewed emphasis on building more sustainable health systems through strengthening social and behavior change communication; improving the quality of health services; and bolstering policy, leadership and governance at the provincial and national levels.

Purpose

The proposed project purpose is: Improved health for underserved Filipinos.

Sub-Purpose 1: Healthy behavior strengthened

The adoption of healthy behaviors can be a long and complex process that is affected by social, cultural, religious and gender-related factors. For behavior change interventions to be effective, activities must be strategic, evidence-based, targeted and sensitive to the Philippines' diverse cultures and changing demographics. Existing healthy practices and traditions must be reenforced. In addition to the need for individuals to adopt healthy behaviors and seek health services, a supportive environment must be established through social and behavior change of public and private health service providers, communities and decision-makers.

Sub-Purpose: 2: Quality of service delivery fortified

USAID will work with the public and private sectors to provide quality care and promote the use of existing or new life-saving products throughout the continuum of care at the community and health-facility levels in selected target regions. Activities will focus on high-impact or promising evidence-based interventions that reduce maternal, child and newborn morbidity and mortality, as well as TB and multi-drug resistant TB, with the objective of serving as models for broader implementation.

Sub-Purpose: 3: Key health systems bolstered and institutionalized

USAID will work to institutionalize and strengthen systems for policy development, data utilization, financial risk protection, local health governance, supply chain management and human resource development of health providers to improve delivery of family planning and maternal, neonatal, and child health and TB services.

USAID/Philippines welcomes public comments about this Concept Paper. Please send them to manilausaidhealthproject@usaid.gov by February 28, 2017.