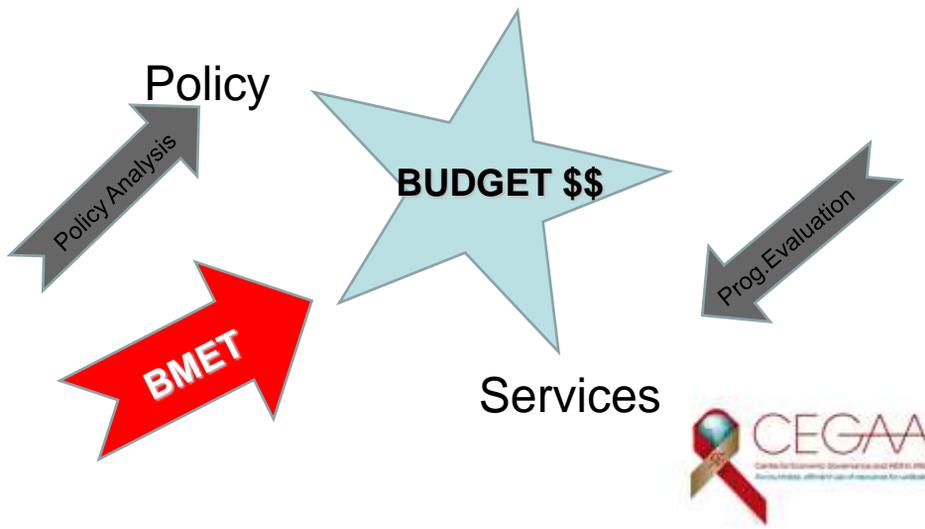# CEGAA

Centre for Economic Governance and AIDS in Africa
Accountable, efficient use of resources for wellbeing

**Overview of Budget Monitoring
and Expenditure Tracking and Community
Monitoring**

BMET compliments policy & service analysis & strengthens advocacy

Policy

Policy Analysis

BUDGET $$

Prog. Evaluation

BMET

Services

Uses of Resource Tracking

- Advocacy + evidence = power!
- Addressing equity of access to services
- Distinguish between Real Aid and Phantom Aid
- To monitor issues of additionality of financial and human resources
- To identify absorption capacity problems and bottlenecks

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3

Budgets have three outcomes:

1. Aggregate level of spending
→ How much is spent?

Levels of spending, tax and debt must be affordable and sustainable

This principle is called:
FISCAL DISCIPLINE

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4

Budgets have three outcomes:

2. Composition of spending
→ What is money spent on?

Resources must be spent on the right combination of programmes, according to strategic priorities

This principle is called:
ALLOCATIVE EFFICIENCY

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5

Budgets have three outcomes:

3. Efficiency of spending
→ How well is the money spent?

We need to get the most for the money spent, and minimise wastage

This principle is called:
OPERATIONAL EFFICIENCY.

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Linking Resource Need Estimates to Allocation Analysis to Expenditure Estimates

How much was spent	How much was allocated	How much is needed
•Through government 　　•Public 　　•Foreign 　　•Private •Through private orgs/NGOs •In strategic programs 　　•Targeted IEC 　　•Condoms 　　•PMTCT 　　•STI treatment 　　•VTC 　　•ARV treatment 　　•IO treatment 　　•Palliative services 　　•Social Impact Mitigation 　　•Staff training 　　•Research •Beneficiaries? •Outputs	•At global level •At national level 　　•MOH 　　•Other ministries 　　•NGO, CSO, CBO •At province level 　　•Tertiary, Secondary 　　•Primary level 　　•NGO, CSO, CBO •At local level	•In strategic programs •Based on need (idealistically?) •Currently covered (reality?) •Financial / Programmatic gaps

$ — Expenditure Tracking

$$ — Budget Monitoring

$$$ — Costing

Expenditure Tracking

To describe the financial flows and actual expenditures for HIV and AIDS:

Who has promised/ committed/ allocated what?

Who pays (sources)?

Who manages the funds (financing agents)?

Who provides the services (providers)?

What was provided (functions: prevention, treatment, social mitigation, other sector activities)?

What are the budget components (Objects of expenditure)?

Who benefits from the spending (beneficiaries)?

Compare the budgeted/ allocated/ committed / transferred amounts with the actual expenditures

(Impact analyses??)

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Data Required to Understand Spending

Adjusted from UNAIDS NASA approach.
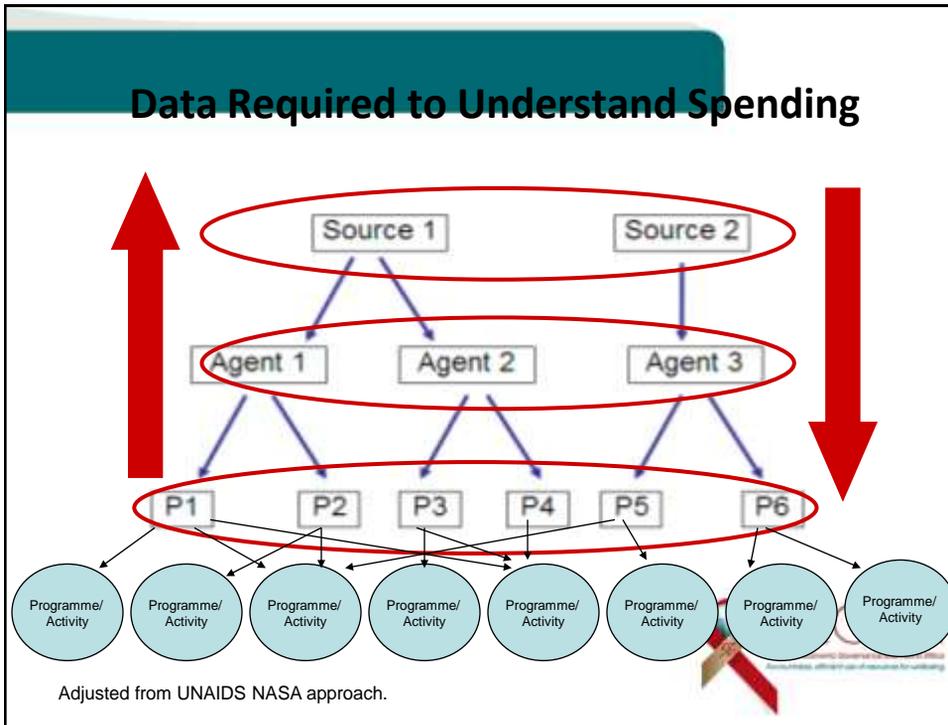
Output Monitoring (Citizen Monitoring Tools)

- Social Auditing
- Community Score Cards
- Citizen Report Cards (Satisfaction Surveys)
- Physical Verification
- Counting numbers of beneficiaries, staff members, availability & quantity of drugs
- **Procurement Monitoring**
- These activities are better carried out by the community members / beneficiaries of the services

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Project Implementation

- **BMET capacity development and technical assistance**

- **Coalition-building for an amplified community voice on health service delivery at local level**

- **Generating community evidence for informed health budget advocacy**

- **Establishing community partnerships with government**

Participatory approach, methods & tools

Capacity development for social accountability (beyond training workshops):

- **Problem definition:** concept notes and funding proposals

- **Social mobilisation:** stakeholder identification and sensitisation; coalition-building

- **Community Needs Assessments**

- **Advocacy campaign development**

- **Skills training:** community monitoring; budget monitoring and expenditure tracking; various forms of research

- **Technical support:** analysis of financial info and formulae; putting learnt skills into practice

Participants' direct involvement in these activities, rather than merely knowledge transfer, ensures ownership and sustainability.

Budget Monitoring and Expenditure Tracking curriculum

CEGAA and TAC identified gaps in the skills needed for effective budget and community health monitoring activities:

- Fundamental economics
- Determinants of health
- Health financing
- Four phases of the budget process
- Principles of good budgeting (i.e. participation, transparency and accountability)
- Introduction to citizen monitoring tools
- Basics of social research and advocacy development strategies

Technical Support

Specialist guidance to strengthen partners' work:

Collection and analysis of secondary data through literature review, desk studies of health, HIV/AIDS and TB plans, budgets, in-year and year-end reports, etc.

Dissemination of data through newsletters or "budget policy briefs" = identifying advocacy issues, defining the research agenda, and proposing corrective actions for decision-makers and service providers to take.

Findings presented to stakeholders at local, district and provincial level for validation, responses and contributions. Stakeholders' input highlights information gaps and enables referral to other sources for fullness or accuracy of the data.

Design and development of BMET pilot study

Situational analysis:

Experiences of citizens' access to and health workers' provision of health care services for HIV/AIDS and TB

CEGAA and TAC partnered in:

➤Identifying the pilot sites for investigation

➤Developing research tools and Informed Consent procedures

➤Selecting research assistants/data collectors from communities under study

➤Piloting research tools for accuracy and appropriateness of questions, and to test for bias

CEGAA did statistical analysis of data

⇕

TAC shared in data validation, and review of preliminary and final survey findings

Specific research methods used

Document review: Data collected and analysed: national, provincial and district budgets, strategic plans and progress reports

Survey: community and health facility assessments to understand the status quo requiring change; identifying presenting problems and suggesting corrective actions

Focus group discussions with beneficiaries, service providers and partner organisations

Action Teams: maintaining momentum

- **Action Teams formed at 2010 Public Hearings in Lusikisiki and uMgungundlovu Districts**
- **Tasked with ensuring that issues are addressed by responsible government agents and/or service providers**
- **Include both governmental and non-governmental stakeholders to promote accountability**
- **Have helped to resolve numerous challenges, leading to improved access to quality health care for HIV/AIDS and TB patients**
- **Senior health officials are usually too busy to attend the Action Team meetings …**
- **… one-on-one meetings are held with DoH to present concerns to senior officials and advocate for action.**

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Lessons, Challenges and Accomplishments

Accountability is enabled through **participation** by an **empowered civil society** that demands **efficiency** and **transparency**.

- This takes time and consistent engagement.
- Project experience reveals barriers and ways to address them.
- The process clarifies the key role-players' challenges, laying the ground for overcoming them through phased, adaptive means.

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Summary of accomplishments

- **Citizens gained knowledge of and technical skills in budget monitoring;** TAC, with support from CEGAA, has expanded the BMET project to four additional districts
- **Reciprocal process between community and government stakeholders** has increased transparency
- **Public Hearings are powerful platforms** for advocacy, relationship-building and action planning
- **District managers** are now more open to sharing budget and strategic planning information
- **Many presenting problems resolved at provincial level:**
  - **Improved drug ordering and delivery mechanisms** between health facilities and district depots
  - **Faster turn-around time on test results**
  - **Increased health personnel in some facilities,** easing patient flow and length of queues
  - **Extended clinic hours in some areas**

Join the call for better health budgeting!

Budget monitoring is vital to ensure that

- good policies are implemented,
- enough financial resources are allocated for policy implementation, and
- available resources are used efficiently and effectively to serve people living with HIV/AIDS and TB

In summary, what is achievable is not only determined by available resources.

Effective government response will require:
- political commitment
- getting the policy right
- allocation of sufficient resources
- set-up of appropriate structures/systems
- capacity to deliver services

➤ Absorption capacity becomes critical question.
- programme & financial management skills

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21

Thank you

for sharing in this presentation.

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