



The Local Capacity Strengthening Policy was adopted in 2022 to guide USAID in making strategic and intentional decisions about why and how to invest in the capacity of local actors based on a shared understanding of the principles for effective local capacity strengthening.



Development Outcomes

Over a three-year period in the government-to-government agreements (G2G) intervention zones in Senegal, USAID’s capacity strengthening support to the Ministry of Health and Social Action (MHSA) increased assisted births from 58 percent to 82 percent and decreased malaria transmission in children under five from six percent to less than one percent. The G2G approach also strengthened the Government of Senegal’s capacity in financial management and accounting, internal control, human resources management, procurement, planning, budget reforms, monitoring and evaluation, and health information systems—all of which improved the ability of the Government to deliver on stated health plans and be more accountable to citizens for public financial management.



Photo: Direct Relief

Key to Success: The Senegal case stands out because of the long-term and multi-modal commitment USAID Senegal invested to make the G2Gs and Ministries successful. The Mission paired G2G agreements with capacity strengthening plans, a capacity strengthening mechanism, intense USAID Mission involvement, and funded regional verification committees.

Local Capacity Strengthening Principles Exemplified in the Case Study

Since 2011, USAID Senegal has had a variety of G2Gs in place to address the health and education challenges faced by Senegalese. G2G agreements align well with:



Start with the local system

The Government of Senegal is ultimately responsible for public goods such as health and education and the design of these programs took the approach of improving the foundation of the healthcare system.



Strengthen diverse capacities through diverse approaches

Each G2G involved a Capacity Strengthening Plan and USAID Senegal also funded several capacity strengthening mechanisms.



Plan for and measure performance improvement in collaboration with local partners

The programs demonstrated the achievement of Senegal’s health plan priorities and served as genuine outcome-level measurements of performance improvement.



Appreciate and build on existing capacities

Instead of bringing in external technical assistance, the program first looked to other regions or high performing central-level government entities for capacity strengthening support in health using existing government systems.



Practice mutuality with local partners

USAID and Senegalese partners recognized and valued the different aspirations, goals, capacities, and resources that each brought to partnerships.



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Case Study: USAID Senegal's Health Program Embodies the Spirit and Principles of USAID's New Local Capacity Strengthening Policy



Photo: Direct Relief

A collaborative programming model helped build a health system that meets immediate needs while creating a country-wide infrastructure to improve health outcomes in the long-term.

To address the challenges of maternal, newborn, and child health, USAID Senegal combined direct financing to the Government of Senegal and capacity strengthening, creating a multifaceted program that prioritized reciprocity and mutual respect alongside ambitious objectives.

From the outset in 2011, USAID Senegal's Health Program approached its goal to improve health outcomes as a collaboration with the Government of Senegal, designing and implementing tactics with government and local stakeholder efforts and needs in mind. These included:

- Focusing efforts on an issue that had long been a priority of the Government of Senegal.
- Conducting extensive stakeholder analysis of the health landscape that included interviews with key stakeholders, focus group discussions, and dialogue sessions.
- Providing direct support and technical assistance to the Ministry of Health and Social Action and related agencies to support the systems that could better coordinate, promote, and deliver health services.
- Prioritizing government resources and expertise as the first-line of response to local needs.
- Working closely with the Government of Senegal to align USAID's monitoring and evaluation requirements with the national reporting systems and program goals with measurable local objectives.

The Senegal Health Program's design and implementation demonstrated several elements of USAID's Local Capacity Strengthening Policy, including Principle 1: Start with the local system, Principle 2: Strengthen diverse capacities through diverse approaches, Principle 3: Plan and measure performance improvement in collaboration with local partners, Principle 4: Align capacity strengthening with local priorities, Principle 5: Appreciate and build on existing capacities, and Principle 7: Practice mutuality with local partners.

Principle 1: Start with the local system

USAID Senegal's project designers actively engaged with relevant stakeholders to better understand Senegal's health system. They learned how the system functioned, its various levels of dynamic complexity, and its unique challenges. Thus, they were able to identify where interventions would be beneficial and appreciated, such as in addressing regional inequalities and supply chain breakdowns as well as systematic support.

Principle 2: Strengthen diverse capacities through diverse approaches

The Health Program provided direct financial contributions through a G2G award, personnel and technical assistance, strategic insights, and other support. It also collaborated on efforts at different levels of the government and in different areas of need. Though this approach required significant flexibility and creativity, it also resulted in meeting the diverse needs of local actors and strengthening the systems for the long term.



Photo: RTI International/Sam Phelps

Principle 3: Plan for and measure performance improvement in collaboration with local partners

USAID Senegal worked closely with stakeholders to align goals and criteria upon which to base assessments. For instance, the Mission worked with the Government of Senegal to align USAID's monitoring and evaluation requirements with the Government's own reporting systems. In addition, USAID Senegal's Health Office, in coordination with the Health Ministry, developed detailed ministry capacity-strengthening plans, including training objectives.

Monitoring and measurement of local capacity strengthening programming focused on demonstrable changes in performance, including declines in children under five mortality, decreases in malaria transmission in children under five, increases in assisted births, and increased levels of contraceptive prevalence. These demonstrated the achievement of Senegal's own development priorities and served as genuine outcome-level measurements of performance improvement.

Principle 4: Align capacity strengthening with local priorities

In Senegal, maternal, newborn, and child health remained one of the Government's central concerns in the health sector for over 25 years. While government efforts led to significant advances, the health of mothers and children remained a major challenge. The Mission understood this as a major local and national priority before co-creating programming with the Government of Senegal.

Principle 5: Appreciate and build on existing capacities

USAID and the Government of Senegal mutually developed a set of criteria to determine existing capacities within each of the country's regions. By assessing readiness, financial management, health information systems and the overall technical health capacity, both USAID and the Government of Senegal were able to adapt their programming according to existing local capacity. At the same time, the program intentionally created protocols so that when a regional-level government entity needed support, the first source of expertise and assistance would come from the Government of Senegal. If particular resources were not readily available, only then would a traditional implementing partner be recruited. This appreciative and collaborative approach built sustainability and reduced the costs of providing external technical assistance.

Principle 7: Practice mutuality with local partners

USAID Senegal collaboratively adapted their implementation process to Senegal's context, adapting the timelines for agreements to take into account local events that could affect implementation and management, such as the election cycle and seasonal flooding. Notably, decision-making for the coordination, development, and finalization of agreements remained with the Health Ministry's Planning Division leadership, thus leveraging existing structures rather than creating parallel ones. Regional verification committees made up of local authorities, donors and civil society actors, among others, were also created to consult and monitor progress. Another way the Mission and the Government of Senegal practiced mutuality was through matching funds-efforts with the Government co-resourcing the agreements using local health budgets.

Results

According to external evaluations, the Mission's intentional approach of coupling co-created direct G2G assistance with capacity strengthening has improved the governance of the health system at the national level via political reforms and the co-development of national documents. The multi-pronged USAID-funded health program helped to strengthen the capacity of health providers and community health actors in all fourteen regions of Senegal. It also supported the extension of health service coverage through the initiation or rehabilitation of health huts in remote areas with low health service coverage, trained service providers on high-impact clinical areas such as maternal, newborn and child health, reproductive health, family planning, the latest national guidelines and standards, strengthened the drug supply chain, and improved the health information system. Additional outcomes include that health workers and service providers built and reinforced capacities,

access to and financing of the health system improved and the technical capacity to plan and implement health interventions increased. These successes reflected significant progress regarding the increased commitment of Senegal to move towards a more locally sustained health system.

As part of the G2G efforts, health providers in areas beset with staff shortages were recruited and trained, which led to positive results in the areas of maternal, neonatal and child health, and malaria prevalence. Efforts to increase the number of health workers were co-developed and supported by Senegal's Ministry of Health and Social Action (MHSA), which funded the staff who were initially recruited by its international partners to join the Senegal public administration. The local capacity strengthening work also improved the Government of Senegal's capacity to manage and monitor health sector programs, and have led to better health outcomes, including a significant decline in under age five mortality. Over a three-year period in G2G intervention zones in Senegal, USAID's capacity strengthening support to the MHSA led to an increase in assisted births from 58 percent to 82 percent and a decrease in malaria transmission in children under five from six percent to less than one percent.

External evaluations also validated that the USAID-funded health program strengthened the steering and management activities, including coordination and supervision, in regions and health districts. The Health Office also included an Internal Inspection Office within its G2G agreement that also supported Public Financial Management transparency.



Photo: RTI International/Sam Phelps

In coordination with other health donors, USAID jointly funded accountant positions at the central and regional levels to strengthen financial management capacity and improve management of G2G activities. The Government of Senegal absorbed these positions as civil servants after two years of donor funding. As part of the G2G efforts, capacities were strengthened based on prior assessments, and as part of the risk mitigation plan, MHSA proceeded with the recruitment of internal controllers, accountants, and financial managers. For example, new regional accountants trained with the support of the Health Program were recruited by Senegal's public service (in addition to nurses already integrated after being recruited by USAID). Senegalese partners valued this support that helped them develop financial controls and other internal management capabilities.

Each G2G beneficiary possessed their own individual capacity strengthening plan that was built on the Government of Senegal's Integrated Risk Mitigation Plan and the findings of the USAID public financial management risk assessment framework (PFMRAF). These plans increased host country financial management capacity and reduced the risk G2G posed to USAID. To this end, the G2G support mechanism developed standardized training modules, in close collaboration with MHSA, that were integrated in the MHSA's staff training to strengthen the Government's capacity on financial management and accounting, internal control, human resource management, procurement, planning, budget reforms, monitoring and evaluation, and health information systems. As noted, the MHSA planning division ultimately took a leadership role in the development and finalization of G2G agreements. These efforts strengthened the Government of Senegal's stewardship of health programming and maximized alignment with host country systems. Regional verification committees provided another layer of monitoring and host country ownership of G2G activities—with the added benefit of increasing the management capacity of non-health Government officials.

Conclusion

The program strengthened Senegal's health system at the strategic level by contributing both financial and technical support to develop national policy and strategy documents, such as the National Strategy for the Financing of the Health Sector, the National Global Strategy for Reproductive, Maternal, Neonatal, Child, and Adolescent Health Strategic Plan, and the National Health Development Plan. To ensure further sustainability, USAID and partners jointly funded accountant positions at the central and regional levels to strengthen the Government of Senegal's financial management capacity. At the provider level, USAID co-developed recruitment and training efforts, which successfully extended health service coverage into remote areas. The local capacity strengthening work also improved the Government of Senegal's capacity to manage and monitor health sector programs, and led to better health outcomes, including a significant decline in under age five mortality.

References

- [USAID Senegal Health Program 2016-2021: Mid-Term Evaluation \(2019\)](#)
- [USAID Senegal Cross-Sectoral G2G Evaluation \(2020\)](#)
- USAID Local Capacity Strengthening Policy (2022)