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Sector Wide Approach (SWAp) and Project Support in Health - A brief comparison

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Introduction

This paper has been elaborated under the backstopping mandate established between the Swiss Development Cooperation and the Swiss Centre for International Health of the Swiss Tropical Institute. The objective of the paper is to present a brief overview of the recent development in the way aid is delivered to health sectors in developing countries, focusing particularly on the Sector Wide Approach (SWAp), comparing SWAp and the historically older modality of project support. The paper discusses the characteristics of these two modalities, presents recent evidence on the progress achieved and discusses the elements to be considered when a development agency needs to make a choice between those two modalities.

What is a Health SWAp?

The concept of Sector Wide Approach (SWAp) appeared in the 1990s as an alternative aid mechanism by which both donors and recipient countries coordinate their activities in specific sectors as opposed to there being a plethora of donors supporting a multiplicity of uncoordinated projects with no overarching framework. The SWAp came as a solution for this problem which seemed to be leading to significant waste of resources and sub-optimal achievements.

Agriculture, education and health are the sectors most commonly chosen for SWAps, and there are a few basic ideas moulding the SWAp concept. First, **the recipient Government, more precisely the correspondent line Ministry, should be in the driving seat.** This means that not only the decisions are taken by the Ministry but also donors agree that planning and implementation procedures should follow the Governmental mechanisms and structures in place. **A comprehensive sector policy document should be in force framing and guiding all the decisions.**

Furthermore, SWAps imply donor coordination, which means the adoption of a common code of conduct, spelt out in a memorandum of understanding (or similar document), and regular and effective participation in board-like institutional body for dialogue with the Ministry.

The well developed SWAps have also established **basket fund arrangements** which channel donors' financial contributions and moved to develop Middle Term Expenditure Frameworks that reflect the sector policy document and incorporate all funds in the sector in a middle or long term perspective.

As an aid mechanism SWAps are compared to the other two main aid modalities: project support and general budget support. A lot has been already published on this debate, and this paper summarizes the prevailing arguments. The paper focuses on project support and SWAp. General budget support, the modality through which donors channel their funds to the Government budget instead of a sector budget as in the SWAps, is not addressed here.

**Why favour
Sector
Wide
Approaches
in Health?**

Before answering why preference should be given to SWAp when it comes to health, the argument should be taken one step back to view the differences between project support and SWAp. From this the advantages and disadvantages of each modality can be reflected. The question should then be formulated as to *when* and *why* a donor should favour a SWAp or a project approach? The best way to characterise the project approach is to give a few examples:

- A donor is interested in supporting the diarrhea prevention measures in a certain province of the country where the prevalence is too high. The donor will make funds available for training of health staff, for education and communication campaigns, will buy the necessary medicines and fund the set up of distribution and logistical arrangements. The donor, together with the provincial authority, will also support the establishment of supervision and monitoring routines. After two years the donor will be able to assess the progress against the targets and then decide whether it is time to move on to another target or continue funding the intervention.
- Another donor is interested in reducing high maternal mortality in the same province. This donor assesses the causes of the mortality and identifies the interventions/activities that need to be strengthened or developed: they include training of midwives, the development of a referral system, the establishment of ambulance services and equipping the regional hospital. As in the previous case, in a couple of years the donor hopes to be able to judge the success or failure of the interventions.

It would be possible to give many more examples like the two mentioned above. There are countless project formats and certainly all donors have been involved in project support at some point. As the two examples illustrate, a **“project” amounts to a discrete endeavor, with a clear time and geographic frame a given budget and precise strategies and activities.** The results can be straightforwardly measured against the targets and the indicators and monitoring procedures are defined in very simple and direct terms. At the end of a project the donor should be able to conclude whether the investment was successful or not, and claim the credits for the results (clearly there is more interest to do this when they are positive!).

Comparing the characteristics of project support with the concept of SWAp explained before one can clearly see the distinction between the nature, scope, methods and aims of the two approaches. By definition, SWAps are more ambitious than projects; SWAps have systemic aims spanning a whole set of institutional and managerial functions at the core of the sector; this includes policy definitions, planning, financial management, procurement and human resources development – indeed, any function carried out by the central authorities of the sector.

Are there increased benefits from using this approach?

The aims and objectives of a SWAp are above and beyond the focus of any project. The institutional, systemic changes that a SWAp can bring about have far reaching effects throughout the sector and can not easily be achieved by a single or even a multitude of projects.

A SWAp should lead to the development of the capacity of the Ministry itself to design comprehensive policies, negotiate them with external partners, manage them from within the administrative machine of the Government, deliver a broad range of services and outputs and measure effectiveness through a set of indicators which are systemically interrelated and not limited to a particular activity or a single undertaking.

In contrast, projects have a narrower perspective. Nevertheless, **many donors are actually engaged in both SWAp and project support**. Indeed, there are good arguments to justify a recommendation in favour of project support in some circumstances. A more detailed assessment of the two aid modalities is summarised in Annex 1.

It is important to understand that in many contexts the decision a donor faces is not choosing between a SWAp or a project. The possibility of implementing both should be considered when one initiative does not undermine the other, and some level of integration can be achieved among the initiatives.

As an example, an assessment was carried out in Mozambique in 2005 with the objective of evaluating the direct involvement of donors with the Health Directorates at provincial level. Several donors were supporting the SWAp, participating in the SWAp meetings, allocating funds to the common fund, and at the same time engaged with provincial projects. The conclusion of the assessment was that the support given directly to the provinces was not undermining the SWAp because it was in fact covering local gaps that the SWAp managed at the Ministerial level was not able to fully deliver at that time. The Ministry was still struggling with the new responsibilities (the SWAp fund had been established under the Ministry a year before), and the funds were not being spent as intended.

Donors' initiatives at the level of provincial Governments were not discouraging the SWAp and the SWAp was not overlapping with those initiatives. Sensibly, the allocation of SWAp funds to the provinces took into account the funds already provided locally by the donors (at least, in the case of donors working closely with the provincial authorities) and allocated sums were reduced accordingly.

There were also other donors acting at provincial level which preferred to continue implementing their activities together with NGOs and without much integration into the local Government system. The study concluded that these initiatives were partially justifiable considering the large number of people employed and activities implemented, which would put an unbearable burden on the provincial administration, if it had been left to implement them by itself. At the time of the study two or three NGOs were contracting roughly half the number of staff as were working under the provincial directorate of health. The absorption of that number of new employees would have been unthinkable at that time.

Nevertheless, in relation to some donors, the lack of integration and lack of articulation of their activities with the provincial health plans was a negative aspect. In these cases, the problem was not with the project approach itself, the problem resided on the lack of coordination between the donor initiative and the provincial authority, which sometimes did not know much about what some donors were actually doing.

In conclusion, for a specific donor there is not necessarily a contradiction between supporting a SWAp and engaging in project support at the same time. However, it is important to be sure that the two approaches are consistent and thoroughly assess that they don't overlap or mutually undermine one another.

Who defines this preference for SWAps?

Historically, the SWAp was a donor's initiated alternative. It emerged as a much needed solution for the chaotic situation on the ground, with many donors acting on the basis of their own agenda, often against each other, with the recipient Government both trying to profit from the confusion and becoming entangled in a web of overlapping and ineffective initiatives.

Once the concept of SWAp was well established, recipient countries recognised the advantages of the option, actively engaged in discussions and took up the respective responsibility to move things forward. This created the context for the actual development of SWAps; without line Ministry leadership a SWAp cannot start. Since there were already examples of ongoing SWAps, it became an option for serious consideration in any sector aid context where there were at least a few donors considering coordinating their actions with the line Ministry.

In a high profile context, countries signatories of the Paris Declaration (March 2005) agreed to strengthen recipient countries (called partners) national development strategies and ownership; they also agreed on harmonisation and alignment of donor's approaches. The philosophy of SWAp is very much in line with that Declaration.

In fact the Paris Declaration itself is a result of the accumulated experience amassed by developed countries over several decades of delivering aid to the developing world. **The Paris Declaration**

reflects the spirit of SWAps and General Budget Support and brings with it a warning message regarding the problems of carrying out too many uncoordinated projects at the same time.

The Declaration sustains a framework for development aid which aims at helping countries to achieve systemic development by putting sustainable, stable and operative institutions in place. Systemic objectives are achieved through systemic, comprehensive approaches. Institutional development is about multi-functional bodies carrying out complex and coordinated operations.

The performance or desirability of aid modalities should also be judged in relation to the objectives of the donor agencies. Where the donor's objective is to influence the whole Governmental machinery, for example, project support will not bring about much leverage. Therefore, ultimately, the relevance of a particular aspect of the aid modality depends on the changes donors intend to support, stimulate or induce.

What experiences exist and what are the outcomes?

Looking for experiences on SWAps and project support one should be cautious about the sort of comparisons that are possible. As these two modalities are very different in terms of their aims, objectives, comprehensiveness, time length and methods, they cannot be compared as if they were intended to achieve the same results.

However, there is already reasonable evidence from studies undertaken to evaluate the results of SWAp implementation in some countries. This paper briefly summarizes recent assessments of the SWAps in Mozambique and Tanzania. The evidence in relation to the achievements of project support are problematic because projects should be judged first in relation to the objectives they are set up to achieve from the beginning and these differ from project to project. Secondly, it is not sensible to judge project support by looking for their impact in the overall sector because many projects do not aspire to sector wide projection. In contrast with that, there are a set of common parameters that can be considered when evaluating the implementation of a SWAp which are quite independent of the country context. These parameters include: Government leadership, coordination among donors, harmonisation and alignment with the policy instruments adopted by the Government and use of Government financial management procedures.

Mozambique

A recent evaluation in Mozambique has identified the following relevant aspects of the implementation of the SWAp:

- There is broad agreement among Government and donors that the SWAp has been a driving force and a key instrument for consensus building and for maintaining strategic direction in the health sector. The SWAp has created a sound basis for policy dialogue and partnership between Government and donors under a growing MoH lead.
- Donors' coordination at the sector level is considered to be good: the SWAp Working Group meets very regularly and a Code of Conduct and Memorandum of Understanding for the use of common funds are in place. There are joint annual sector reviews based on agreed indicators. Degrees of commitment to the code of conduct however vary among donors, some of whom sit in Working Group meetings but continue to deliver their financial or technical assistance outside the SWAp arrangements.
- Health expenditure has been increasing steadily and a significant proportion of it has been channeled through common funding arrangements representing 36.4% of all expenditures in the health sector controlled by the Ministry of Health. Sector coordination and predictability of funding have improved considerably. However the Ministry has been struggling to develop the systems necessary to absorb and utilize resources effectively, leaving substantial proportion of the donated funds unspent in 2004 and 2005.
- The role of the provinces and other key stakeholders in the policy making process has been rather limited.

Tanzania

A recent evaluation in Tanzania has concluded that the SWAp has considerable "breadth" (it features all the characteristic of a SWAp), as well as "depth" (the degree of achievement reached each component). Specifically:

- Sector policy and strategy are well accepted by all significant donors to the sector, and there is a high degree of ownership by the Tanzanian Government.
- The sector's Medium Term Expenditure Framework covers expenditures financed by domestic resources as well as a sizable share of external resources in a realistic manner.
- There is a national sector performance monitoring and evaluation system that although still weak, most donors have adopted and generally support its gradual development rather than conducting their own M&E operations.

- All significant donors to the sector officially support the SWAp and its coordination process; there is a formal donor-MoH coordination system, under clear Government leadership.
- Consultation mechanisms with other sector stakeholders are not yet very developed and structured,
- Opinions are somewhat divided on the degree of procedure harmonization; as far as disbursement procedures are concerned, most of the efforts undertaken in the context of the SWAp can be attributed to the joint financing mechanism (basket fund), which rests to a very large extent on Government procedures. Nonetheless, a significant share of external contributions is still disbursed “off budget”. Harmonization is more advanced in non-financial matters, as development partners increasingly rely on common processes (for overall sector performance monitoring, policy dialogue, expenditure monitoring, etc.).

There is though a cautious note from the evaluators saying that it is not easy to ascribe any of the health sector’s achievements specifically to the adoption of a SWAp; other processes are at work in the country (Civil Service Reform, Poverty Reduction Strategy, which have a direct impact on the sector’s operations and also play a role in any observed evolution). In most cases, there is no way of isolating and “quantifying” the SWAp’s specific contribution. The evaluation relied on the subjective perceptions.

In carrying out in-depth reforms of the healthcare system the SWAp has made a significant contribution to the overall success of health sector reforms undertaken since its inception. However the overall quality of healthcare remains below acceptable standards. This suggests that there is a delay between the systemic improvements at central level and its effects cascading down to the front line of service provision.

This is sometimes the argument used by some donors as the rationale for continuing project support initiatives that target improvements on the ground, on the front line of service provision to the communities - where the reach of the SWAp is slow to be felt.

What do we know of SDC's experience in SWAps?

SDC has been a very relevant partner in the process of establishing the SWAp in Mozambique and Tanzania. In Mozambique SDC took the initiative more than a decade ago to set up the common funds which were progressively converted into basket funds collecting contributions from an increasing number of donors to finance recurrent costs at provincial level and the procurement and distribution of medicines. The management of these funds was handed over to the Ministry when the SWAp was fully installed.

In Tanzania SDC has also played very important role for the development of the SWAp, being committed to it since its inception. Despite its small comparative financial contribution, SDC has been a major player in sustaining the ideology of the SWAp. The weight of a member in a partnership like SWAp should not be measured by the amount of funds allocated by it, but rather by the strategic effect of endorsing the partnership in a continuous manner. No matter the contribution, any donor that leaves the SWAp partnership weakens it, and any donor that joins in makes its positive achievements more likely.

What is STI's experience with SWAps?

STI has worked on SWAp issues as a think-tank, evaluating and reflecting on experiences and helping to design and implement SWAp solutions. As a think-tank, with an advisory and backstopping mandate for SDC, STI has set up a database and a website with most of the relevant documents and publications focusing on SWAps. The database is updated on a regular basis and has become internationally known as one of the best source of information on SWAps.

Under the same backstopping mandate, STI has produced a number of key issues papers focusing on SWAp and decentralization, SWAp and poverty reduction, SWAp and choices of aid modalities, and a number of other documents as well as communications delivered at conferences and presentations for seminars. Due to its recognized know-how, STI has been invited to discuss SWAp issues with other donor agencies besides SDC.

STI has been involved in evaluations of the SWAp process in Mozambique and Tanzania at several stages of their development, playing an active role in providing technical assistance on the steps to be taken. STI is participating in the working group discussing the implementation of the SWAp in Rwanda. STI is also actively promoting the discussions for the consideration of SWAp as a possible solution for Burundi, Tajikistan and Vanuatu.

Through this large portfolio of work experience, research and exchange within peer networks, STI has consistent views in relation to the positive aspects of SWAp and has played an advocacy role in promoting it as the way forward for aid development for the health sector in developing countries. Nevertheless, STI has also a critical and realistic view of the preconditions and limiting factors that may prevent SWAps from delivering their expected results.

What are the key issues SDC has to consider regarding SWAps in Health?

Development Agencies have to face two challenges:

- In the recipient country the agency has to find the most effective way of providing support.
- Back home it has to convince the constituencies that their choices are the best and demonstrate it with tangible results.

An agency with a small budget faces the additional challenge of aspiring to make its relatively small contribution visible and linking it to discernible outputs and outcomes.

In such contexts, the choice for an agency to join a SWAp or embark on an individual project instead, is partially influenced by the pressure the agency has to respond to back home and the need to show results to the constituencies. It is more difficult to show the results of a SWAp than of a specific project with well defined targets and a clear timeframe.

The systemic effects of a SWAp are not easily understood by those not engaged in development aid. If the constituencies demand concrete results and precise figures to underpin the alleged successes, the agency opting for the SWAp has a very difficult task to express the mostly qualitative results of the SWAps in such a way.

Furthermore, from a short-term perspective, the low budget might appear to be wasted in a pool of funds comprising many larger contributions. The small donor may be seen as adding an apparently undistinguished, irrelevant proportion to the pool of funds. This might entail additional difficulties for the agency in convincing the constituencies that the contribution makes sense. Dealing with such problems the agency might find it hard to avoid project support; at least as a way of committing part of the budget for identifiable results.

An agency that finds itself in that position would tend to formulate a question in terms of whether the combination of aid modalities (SWAp and project support) is feasible and which conditions need to be guaranteed in order that each modality can deliver the desired results. The question therefore is asked in the following terms:

If a SWAp is being implemented, will a support channeled through specific projects undermine the implementation?

To answer this question the agency should analyse:

- Whether the project overlaps with other initiatives ongoing within the frame of the SWAp;
- Whether the project is justifiable in terms of the gap in the assistance and the lack of capacity of the SWAp to tackle the problem;

- Whether the project answers needs at local or provincial level which is not part of the scope of the SWAp;
- Whether the project will not divert resources (material and human) that otherwise would be employed by the SWAp;

The answers to these four questions will provide the arguments to take a decision in favour of the SWAp or project support. There should not be any overlap between the project and the SWAp initiatives. If the SWAp has the capacity to address any gap in assistance, the project should not be implemented separately. If the local and provincial needs are part of the responsibilities of the SWAp, the project should not be carried out. If the project will absorb human or material resources that could be employed by the SWAp, the project should not start. A SWAp that is not delivering its expected results or is not developing as should be, does not provide a rationale for implementing projects that will necessarily aggravate the weakness of the SWAp even further.

In spite of what has been said, donors always find niches where projects are necessary and possible to implement without disrupting other initiatives under other aid modalities.

Annex

Comparing the mechanism of operation of the two aid modalities

The main elements for characterizing the two aid modalities are listed and discussed below:

1. The importance of coordination among donors (low, medium, high)

Among the two aid modalities considered, project support is the one that does not require that donors exchange information and act in a concerted way. Donors can carry out support specific projects without needing to liaise with other donors. On the other hand coordination among donors is very important for SWAp.

2. Direct donor involvement with activity implementation (high, medium, low)

Project support is likely to be the most demanding among the two aid modalities in terms of day-to-day involvement in operational aspects of the support being provided. SWAp requires lower donor involvement in the daily operations and more on the policy dialogue and monitoring implementation. However, in SWAps, donor in-country health advisors are often kept busy attending meetings, following up on specific capacity-building efforts (e.g. health sector monitoring), and receiving requests from Government personnel to provide punctual inputs to ongoing processes.

3. The technical requirements of recipients (high, medium, low)

At the sector level, the technical requirements are relevant and the public machinery at central level must have technically sound management. Project support presents low level of technical requirements, which are usually provided as technical assistance component of the project itself.

4. The channeling of funds (on budget, off budget or indifferent)

SWAps as well as project support can be on or off budget. There are examples of countries with SWAp basket funds off budget (Mozambique) and on budget (Uganda).

Nevertheless the tendency is to move SWAPs on budget; but there are no such aims for project support. In fact, keeping project support off budget seems to be the preferred option for many donors as well as the line ministries who risk being controlled more by finance ministries when funds arrive on budget. The advantage of being off budget can be only circumstantial and temporary, however. For institutional development and implementation of consistent and coherent policies, all public funds should be used in a coordinated way.

5. The timeframe of donor commitments (short term, medium term, long term)

SWAP requires long term commitment from donors. Donors might commit themselves in long term projects, but this is rarely a pre-condition for initiating the project (in project support agreements). In contrast, donors who engage in SWAP are required from the beginning to state their pledges and assurances. Greater donor coordination and harmonization partly works as a pressure group, demanding from their peers the continuation of their dedication. By leaving the pool, a donor might weaken the position of the remaining ones. There is no such pressure as far as project support is concerned.

6. The exposure to fiduciary risk (high, medium, low)

The concept of fiduciary risk is rooted in the notion of trust and the risk of breaking it. Technically “fiduciary” denotes a loan that is made on trust, rather than against some security. In providing budget support of any kind, trust is the basis of the relationship where donors rely on recipient Government commitment to use the donated funds for the agreed ends. However, where there is trust there is the risk of not behaving accordingly. Fiduciary risk is a measurement of how trustworthy is a Government in putting donated funds for acceptable use. Clearly, SWAP has such a risk given the fact that donors have no control over the use of the funds once they are transferred to the basket fund. Project support is the modality with lower or even no exposure to fiduciary risk.

7. The systemic impact on the Government machine (high, medium, low)

The aim of a SWAP is to have a fundamental impact on the way the sector Ministry operates, meaning the process of designing, negotiating, implementing and evaluating policies. The additional funds flowing through Ministerial channels bring “oxygen” and strengthen Governmental functions, which otherwise would struggle to survive. This does not mean that the impact achieved is exactly what donors wish for. The impacts depend, among many factors, on negotiations held between donors and recipient countries, and ultimately the implementation capacity of the Government. In no circumstance, project support will achieve the same systemic impact.

8. The degree of individual donor influence on results (high, medium, low)

Project support allows almost complete donor control over the use of the resources at the level of the project, while under SWAP donors are handing over responsibility to the recipient Government. However, due to their targeted nature and their lack of influence on the Government machinery more broadly, projects may not be able to address some of the fundamental constraints in the system, and therefore the expected results may not be achievable. This is one of the argued benefits of SWAP; is that donors can act in a concerted way (‘one voice’) to bring about fundamental reforms at sector level. However, once reforms have been defined and planned, under SWAP donors are much less involved in the implementation than for projects.

9. The coordination/ transaction costs for recipient Governments (high, medium, low)

Projects supported by donors generally demand less time and human resources from a Government than a sector-wide support. However, where there are a large number of projects in relation to Government size, this can drain the time and competence available as the pool of human resources in the Government sector is usually quite lim-

ited. Furthermore, projects of different donors tend to use different financial management and reporting mechanisms, thus multiplying the amount of work required on the part of the Government to produce the required paperwork. When comparing time input of Government personnel per funding volume, it is likely that SWAp fares better as the amounts involved are usually significantly greater than the funding volumes in projects. However, with the arrival of large funding volumes from project-style Global Health Initiatives (GHIs) like the Global Fund to fight AIDS Tuberculosis and Malaria, this is no longer entirely true.

10. The degree of disruption of normal Government activities (high, medium and low)

The usual complaint in the area of aid mechanisms is with the multiplicity of donors coming to a given country and demanding attention for whatever support they want to give. The problem is not in relation to an individual donor or aid mechanism, but rather that collectively such demands absorb too much of the already scarce qualified human resources of the recipient country. By bringing donors together in a coordinated way, SWAp is argued to prevent such negative impacts. Project or programme support, especially those promoted by GHIs, with their specific focus in one or few diseases, could be considered highly disruptive if they are not integrated into a broader sector vision. Many countries are currently grappling with the disruption brought about by shifting patterns of expenditure and human resource implications of GHIs, and the challenge they imply for health sector plans.

Table 1 summarizes this discussion. However, generalized conclusion cannot be made, as each characteristic has a different importance in different contexts, and the performance of each aid modality will also depend on many factors that vary from country to country, and over time. The performance of aid modalities also depend on the objectives of the donor agencies. Where the donor's objective is to influence the whole Governmental machinery, for example, project support will not bring about much leverage. Therefore, ultimately, the relevance of a particular aspect of the aid modality depends on the changes donors want to support, stimulate or induce. Table 2 presents a summary of what can be identified as advantages and disadvantages of each of the two aid modalities.

Table 1 Summary of characteristics of the two main aid modalities

| Characteristic | Project support | SWAP |
|--|------------------------|-------------|
| 1. The importance of coordination among donors (low, medium, high) | Low | High |
| 2. Direct donor involvement with activity implementation (high, medium, low) | High | Low |
| 3. The technical requirements of recipients (high, medium, low) | Low | Medium |
| 4. The channeling of funds (on budget, off budget or indifferent) | Indifferent | On / Off |
| 5. The timeframe of donor commitments (short term, medium term, long term) | Short/Medium | Medium/Long |
| 6. The exposure to fiduciary risk (high, medium, low) | Low | High |
| 7. The systemic impact on Government machine (high, medium, low) | Low | Medium |
| 8. The degree of individual donor influence on results (high, medium, low) | Low | Medium |
| 9. The coordination/ transaction cost for recipient Govt. | High | Medium |
| 10. The level of disruption of normal Government activities | Medium/High | Low |

Table 2 Summary of advantages and disadvantages of aid modalities

| Aid modality | Possible Advantages | Possible Disadvantages |
|-----------------------|--|--|
| Project support | <ul style="list-style-type: none"> • Objective and output focused • Close activity M&E • Donors target gaps left by public sector | <ul style="list-style-type: none"> • Siphoning of staff away from public sector • Duplication and parallel services • Fungibility • Government priorities not respected • Government systems bypassed • Expenditure patterns not transparent • Project aid is often tied (international consultants, materials purchased) |
| Sector budget support | <ul style="list-style-type: none"> • Sector-wide planning • Transaction costs reduced • Coordination costs of recipient reduced • Procedures are harmonized • Ownership by line ministry • Increased predictability of aid • Sector mechanisms strengthened • Donors speak with more unity | <ul style="list-style-type: none"> • All sector spending bound to use slow Government systems • Fungibility • Fiduciary risk • Lack of absorptive capacity in short term at sector level |

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