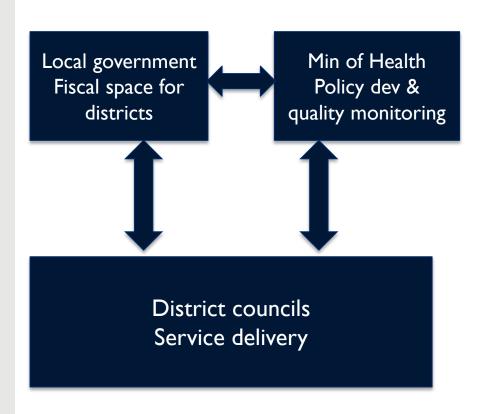


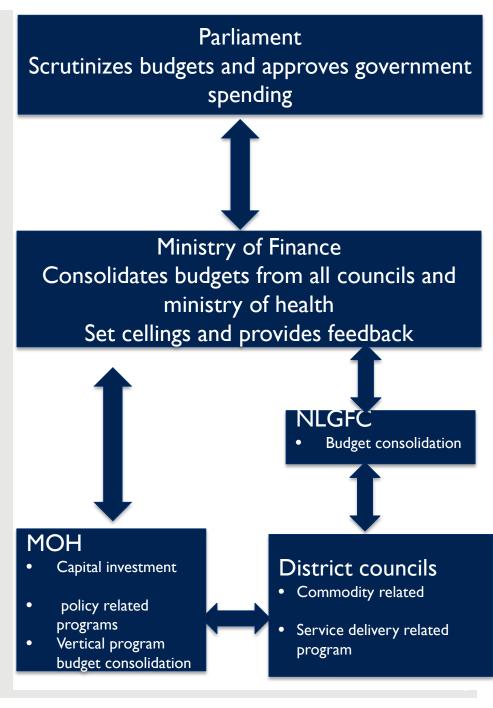
Health care delivery governance structure

- With decentralization, MOH
 - policy guidance and quality monitoring
 - Provides support to the districts in service delivery
- Ministry of local government through MLGFC
 - financial management
- District councils are responsible for service provision



HEALTH BUDGETING

Every year districts prepare implementation plans that are submitted to ministry of local government with copies to ministry of health where they are consolidated as national health budget. Which is in turn submitted to ministry of finance.



FP BUDGETING

 The budgeting process for FP is at 2 levels MOH and District Council level

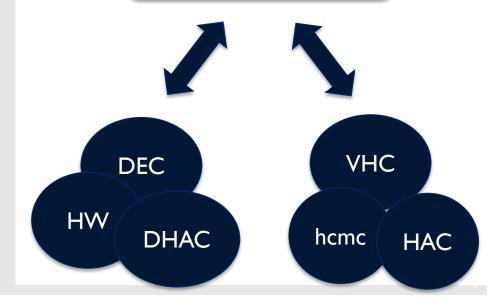
- The MOH budgets policy related activities and consolidates district activities
- Councils budgets service delivery related activities

Min of Health -Consolidate council budgets

-Conduct commodity forecasting



District Council
Develop activities and
generates budgets



District FP budgeting

 The process starts with consultation with HAC,VHC, HCMC tees at local level and DHAC, HW DEC at district level

- Priority activities are then developed and in liaison with DHMT they further prioritizes activities with respect to budget ceilings
- And submitted to central level

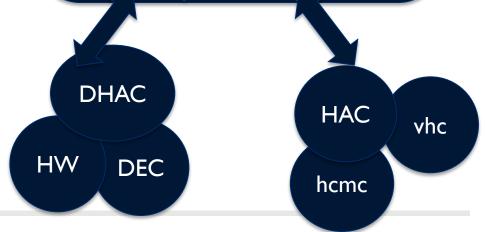
DHMT

Prioritizes further according to budget ceilings



FP coordinating team (fp,YFHS, HMIS)

- Consult district and community stake holders
- Synthesize info from consultation and HMIS
- Develop activities and budgets to address fp challenges
- Prioritize systematically



FP BUDGETING

 This budgets together with other reproductive health budgets are submitted to planning department of the ministry of health that consolidate budgets from other MOH departments and submit to treasury

Min of Health -Consolidate council budgets -Conduct commodity forecasting **DHMT** Prioritise further according to budget ceilings FP coordinating team (fp,YFHS, HMIS) • -synthesize info from consultation and **HMIS** -develop activities to address fp challenges • -prioritize systematically Submit to DHMT DHAC **HAC** vhc HW DEC hcmc

FP BUDGETING MOH

- Commodity are budgeted centrally
- The central medical stores and district pharmacists maintain LMIS every month and the reproductive health conducts quarterly LMIS supervision
- The information from LMIS and district supervisions are used to forecast future usage and budgeting.

Min of Health

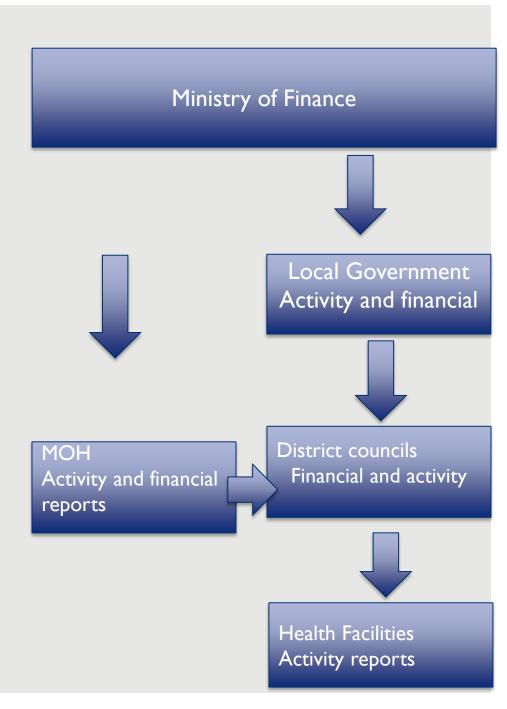
- Consolidate council budgets
- Incorporate policy related and monitoring activities
- Conduct commodity forecasting
- And consolidate logistic related budgets



DHMT

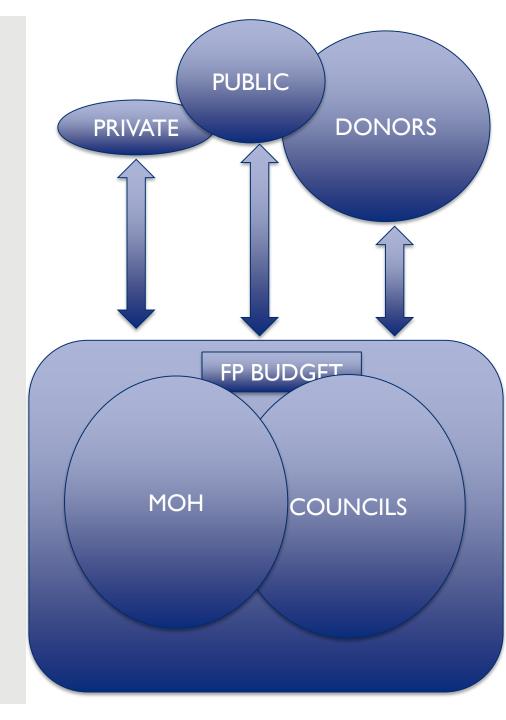
Health budget financing

 After parliament approval, the ministry of finance funds the ministry of health and ministry of local government for central level and district level activity implementation respectively



FP FINANCING

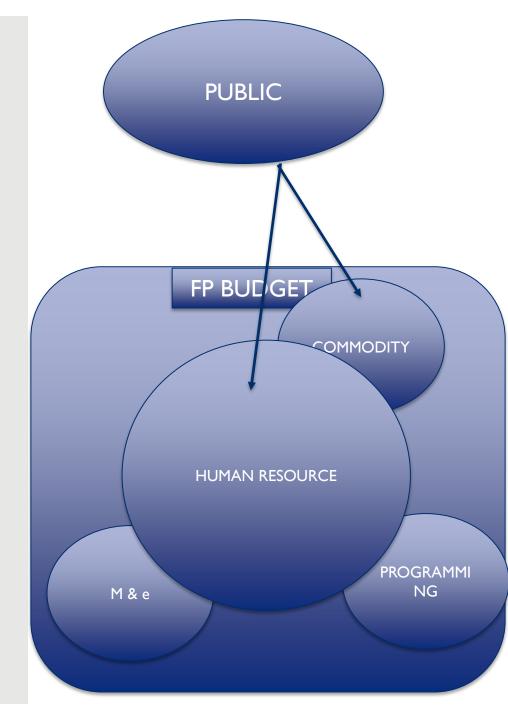
- FP in Malawi is financed by government, donors and private sector
- Public spending for FP is usually for Commodity and personal emoluments
- Development partner and private support both ministry of health and district councils, for commodity and service provision programming



PUBLIC FINANCING

The ministry of health allocate funds to the department of reproductive health. Within the reproductive health budget the family planning (usually for commodity) resources are ring fenced and can not be used for other activities:

FP funding is usually not informed by the submitted budgets. It is usually a lump sum amount



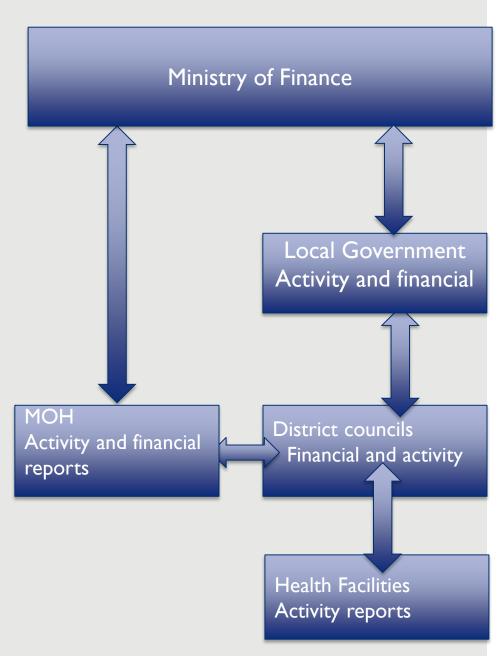
Overview of public spending

		MWK (Milion)	Usd (million)	%
funding	Total Malawi Budget ORT	656742	887.5	
	PE	309576	418.3	
	MOH ORT	25124	34	3.8
	PE	23216	31.	7.5
	RH	100	0.14	0.4
	FP	75	0.1	75

Reporting

 Districts receive activity reports from health facilities, compiles both activity and financial reports they send to ministries of health and local government

 Both Ministries of Local government and Health reports to min of finance



5/24/2018

Successes

- MOH created a budget line specifically for commodity within national drug budget and it has been increasing over the years
- The CIP
- Open LMIS (web based LMIS)



Challenges

- Fragmented funding mechanisms
- Unpredictability of funding especially from Donors
- Low domestic financing

Opportunities

- The GFF
- Health sector reform underway
- Population department now under ministry of health

