

MALAWI HEALTH DATA COLLABORATIVE LOGFRAME

Country context	The Health Sector Strategic plan of Malawi expired in 2016. The new HSSP II (2016-2021) is under development. Substantial changes include the definition of a minimum package of health services and alignment with the SDGs.		
	This is seen for by MoH and in-country partners as an opportunity to develop a sound, costed M&E plan to address national and international M&E priorities, and align investments around a single M&E platform.		
Key HIS/M&E documents	<ul style="list-style-type: none"> • Malawi Health Information System policy • Health Information systems strategic plan 2011-2016. • Improving data quality in Health Management Information Systems. Report, 2016 • Malawi national health indicators (draft) • Situation Analysis of the Health Sector. 		
HDC ENGAGEMENT			
Type of engagement	Strategic request for collective action to develop the M&E component of the HSSP II.		
Preparatory planning for HDC launch	<ul style="list-style-type: none"> • June 2015: MoH participates in Summit on Measurement and Accountability for Health in Washington, DC • September 2015: MoH sends letter of request to WHO for technical assistance to request a multi-partner mission to support M&E • November 2015: launch of the HDC at country level (multi-partner mission to Malawi) • December 2015- February 2016 : HDC technical working group formalized and functional 		
M&E/HIS Priorities	<ol style="list-style-type: none"> 1. Develop the M&E component of the new HSSP II 2. Develop the common investment framework 3. Strengthen institutional HIS/M&E capacities 4. Reconfigure and expand DHIS 2 functionalities 5. Increased accountability of the MoH and health development partners by expanding the access of citizens, Civil Society organisations and other actors to high- quality health data 		
OUTPUTS & INDICATORS			
Output 1:	M&E component of the new HSSP II developed (framework, indicators, priorities)		
Output indicators	<ol style="list-style-type: none"> 1.1 Common assessment, planning and costing tools implemented to develop and cost the HIS strategy/M&E plan (linked to global HDC log-frame indicator 1.1) 1.2 Assessed and identified national M&E priorities, linked to national health sector monitoring (linked to global HDC log-frame indicator 1.2) 		
Output 2:	Common investment framework developed		
Output indicators	2.1 Common national investment framework for M&E is used by financial partners and government as the basis for joint actions/investment (linked to global HDC log-frame indicator 1.4)		
Output 3:	Strong institutional capacities and human resources of the MoH, health development partners and other actors to regularly track progress of implementation of the HSSP II		
Output indicators	<ol style="list-style-type: none"> 3.1 Coordinated support in analytical capacity building including national and subnational levels (linked to global HDC log-frame indicator 7.4) 3.2. National HIS governance and coordination mechanism in place (linked to global HDC log-frame indicator 6.3) 		
Output 4:	Well-functioning data sources for tracking progress and demonstrating results of the HSSP II		
Output indicators	<ol style="list-style-type: none"> 4.1. Disease surveillance integrated into RHIS (linked to global HDC log-frame indicator 2.4) 4. 2. Interoperability framework for design, integration, and implementation of national digital health architecture and open data (linked to global HDC log-frame indicator 6.2) 		
Output 5:	Increased accountability of the MoH and health development partners by expanding the access of citizens, Civil Society organisations and other actors to high- quality health data		
Output indicators	<ol style="list-style-type: none"> 5.1 Health data accessible through Malawi health national observatory (linked to global HDC log-frame indicator 8.1) 5.2. Civil society groups and academia are actively engaged to promote and monitor one country led platform for data access, use and accountability (linked to global HDC log-frame indicator 1.5) 		
FOCAL POINTS			
Ministry of Health	Emma Mabvumbe	emabvumbe@yahoo.com	
	Isaac Dambula	idambula@yahoo.com	
Organization	Country level		Global level
WHO	MAGOMBO, Francis Regis	magombof@who.int	Eduardo Celades celadese@who.int Juliet Nabyonga nabyongaj@who.int Benson Droiti drotib@who.int
UNICEF			Debra Jackson djackson@unicef.org Liliana Carvajal lcarvajal@unicef.org
GIZ	Simon Ndira	sndira@sionapros.com	Binod Mahanty binod.mahanty@giz.de Verena Kohlbrenner verena.kohlbrenner@giz.de
World Bank			John Bosco Makumba jmakumba@worldbank.org Samuel Lantei Mills smills@worldbank.org
USAID			Pamela Rao prao@usaid.gov
BMGF	Maganizo Monawe	mmonawe@gmail.com	Martin Gross Marty.Gross@gatesfoundation.org
Global Fund			Parijat Baijal Parijat.Baijal@theglobalfund.org Gustavo Caetano
GAVI			Correa gcorrea@gavi.org
OGAC/CDC/PEPFAR	Emily Cercone	emily.cercone@gmail.com	
D4H	Thoko Sambakunsi	sambakunsi@gmail.com	Laura K Cobb LCobb@vitalstrategies.org
JHU			Heidi Good heidi.good@jhu.edu
PHCPI/R4D			Meredith Kimball mkimball@r4d.org

Health Rights and
Education Programme
(HREP)

Maziko Matemba

mazikomatemba@gmail.com