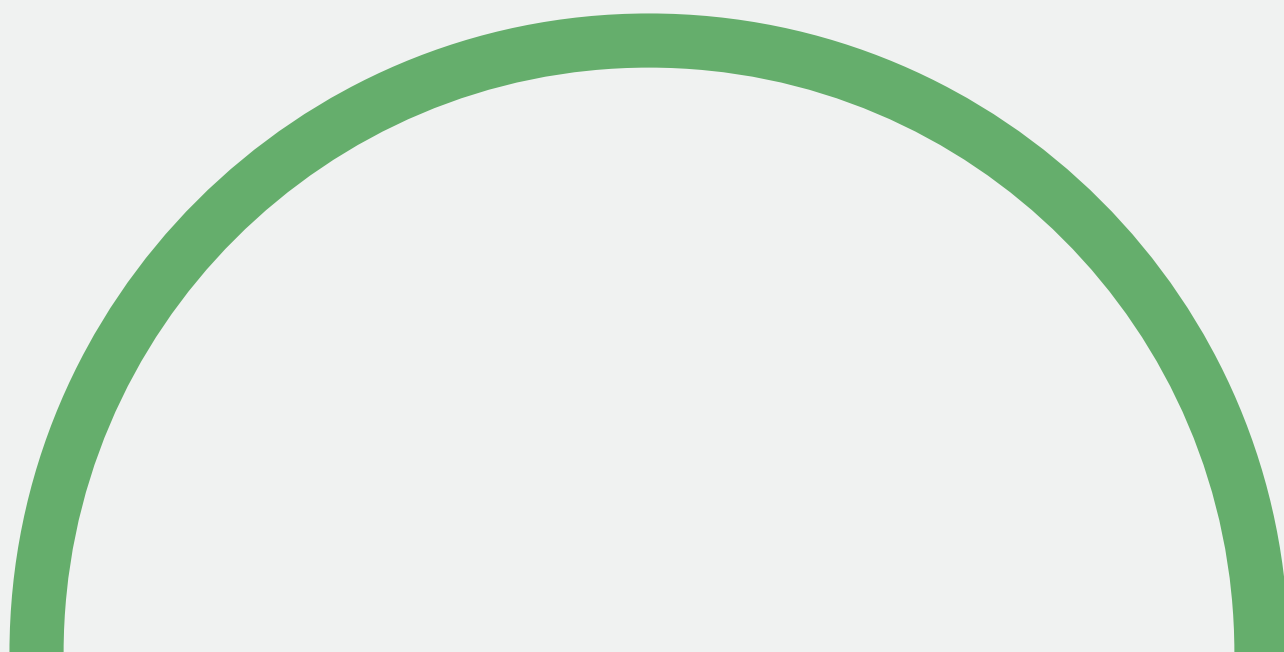A Human Security Approach for achieving
Universal Health Access in Africa

Promoting Resilience and Securing Human Dignity

Case Studies on Health and Human Security

(Africa)

Foreword

Today's world is global; increasingly both risks and threats are interconnected and millions of people across the world face the interrelated threats of extreme human poverty and human insecurity. The events of recent years have shown how our economic, social and political security are in a state of fragile balance, and cannot be taken for granted. In the face of such tightly wound interdependence, traditional solutions to social and cultural challenges – including health – need to be re-examined.

It is no longer credible to look narrowly at the causes and solutions to the problems that face all countries, whether north or south, rich or poor. Human security is a classic example of the shift in thinking that is happening – with its origins in humanitarian responses and responding to crises, there is increasing recognition of the need to take a broader perspective on drivers of insecurity and potential solutions. Human security approaches must emphasise dignity and resilience, with communities at the heart of effective responses.

There is a strong synergy between current strategic approaches to ensuring Human Security, and the emergent thinking on how to address global health challenges now and over the next 15-30 years. Good indications of the direction of thinking on health solutions can be found in discussions on the social determinants of health, and on how health should be reflected in the post-2015 development agenda.

The need for fresh thinking is clear, and we have the opportunity and timing to make real progress towards sustainable health outcomes, based on resilient, empowered communities.

The human security approach priorities just these concepts. It identifies freedom from want, freedom from fear, and freedom to live and die in dignity as the building blocks of a more secure and sustainable world. It emphasises pillars of protection and empowerment, and responsive accountability at the heart of comprehensive, multisectoral programmes to protect lives and improve well-being.

This offers important potential for addressing the insecurities faced by communities in Africa. Valuable lessons and excellent progress have been made to date in articulating the human security agenda, for example through the United National Trust Fund for Human Security. However it is clear that further work is needed to help unpack what human security means and to assist practitioners to explicitly incorporate human security approaches to their work. Evidence presented in this report highlights how existing programmes are using the concepts and language of human security, but are not labelling their work as human security – and in the process programme implementers and policy makers may be missing important opportunities to enhance their effectiveness through taking a broader, comprehensive, multisectoral perspective on programme design, implementation and review.

This report is an important contribution towards further clarifying the importance of human security for health. More needs to be done, including through advocacy at the TICAD V conference in June 2012, and to reflect on the potential value of human security to the post-2015 agenda. Advocacy for both these processes is fundamental if we are to make the most of the opportunities that are currently available and move Africa towards the vision of its leaders: 'an integrated prosperous and peaceful Africa driven by its own citizens and representing a dynamic force in the global arena'.

Dr Ademola Olajide
Head of Division; Health,
Nutrition and Population
African Union Commission

Executive summary

What is Human Security and why is it important to health?

> " *We must ensure that the gains of today are not lost to the crises of tomorrow. And so our actions must focus on people-centred, comprehensive, context-specific and preventive strategies at every level. This is the human security approach.*[1] "

Ban Ki Moon
UN Secretary-General

The building blocks of human security have been identified elsewhere as *freedom from want*, *freedom from fear*, and *freedom to live and die*[2] *in dignity*. Protection and Empowerment are central to putting these building blocks in place and to enabling human security. Responsiveness through effective accountability is an important contributor to ensuring protection and empowerment, which is central to promoting resilience and sustainable human security.

A Liberian girl selling palm nuts

women and children are most vulnerable to health and human security threats

Methodology

This report explores the relevance and value of the human security framework and approach to health sector development in Africa. There is an interconnected relationship between health and human security – health enables human security and vice versa. This has been discussed at a symposium and roundtable on *"Health and Human Security in Africa"* in Dakar, Senegal (May 2011)[3], and subsequently at a regional meeting of health and human security in Lima, Peru (September 2012)[4].

> " *Human security, in its broadest sense, embraces far more than the absence of violent conflict. It encompasses human rights, good governance, access to education and health care and ensuring that each individual has opportunities and choices to fulfill his or her potential. Every step in this direction is also a steep towards reducing poverty, achieving economic growth and preventing conflict. Freedom from want, freedom from fear, and the freedom of future generations to inherit a healthy natural environment -- these are the interrelated building blocks of human – and therefore national – security.* "

**Kofi Annan
(former) UN
Secretary-General**

As a part of these consultative processes, CHESTRAD was commissioned by JCIE to work with Global Health South[5] members to identify cases where a human security approach had been applied in Africa, and to identify potential value added and impact, policy messages and learning for future use of human security in the health sector.

Through a four stage process the research sought to understand how human security is being addressed:

1 A call for cases through the Global Health South members (Form A), which identified 65 potential programmes for further analysis from 18 countries including submissions from GHS members outside Africa (Thailand, Nepal, Occupied Territory of Palestine).

2 More detailed analysis of submitted cases (Form B), including documentation of country context, human security and health situation analysis; 22 cases from 11 countries were selected for analysis at this stage.

3 Detailed case study documentation (Form C); 10 programmes were analysed in detail, covering 7 different countries (Cameroon, Ghana, Kenya, Nigeria, Sudan, Uganda, Zambia)

4 Site visits were conducted for 7 programmes in 3 countries, with the following objectives: 1. fill gaps in data gathered through Form C; 2. obtain project reports; 3. assess sustainability and look at how stakeholders are empowered to be resilient and capable of responding to direct and indirect threats to their security.

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1. United Nations Secretary-General Ban Ki-moon; Lessons from the Field, Applying the Human Security Approach through the United National Trust Fund for Human Security (March 2013)

2. For the purposes of this study, we have added 'to die' in the building blocks listed here as this has real significance in Africa where the burden of morbidity and mortality due to direct health threats has put extreme pressure on already weak health systems to provide quality palliative care.

**3.** www.jcie.or.jp/cross/globalhealth/activities/1105TICADfollowup.html

4. www.paho.org/hq/index.php?option=com_content&view=article&id=7025&Itemid=39540&lang=pt&limitstart=2

5. Global Health South is an informal alliance of civil society organizations, umbrella organizations, coalitions and networks engaged in health dialogue at country, regional and global levels. www.globalhealthsouth.org

This process of refinement and deepening analysis was undertaken between May 2012 and May 2013, and coincided with the intensification of dialogue on the post-2015 development agenda. Global Health South and CHESTRAD have made substantive contributions to the health thematic consultation, which has helped to crystalise thinking about the relevance of human security and health in Africa as well as its effective integration into the development thinking in the Post 2015 agenda.

Together these five important elements have enabled the following analysis and recommendations, which will feed into dialogue at the TICAD V conference in June 2013, and to inform subsequent work on health and human security within Africa (for example in discussions with the AU and AFRO). It is important to recognise that this report does not seek to answer all the questions that may arise about health and human security. Indeed it has helped to identify the added value of the human security approach to health as well as providing important contributions for the development of technical reference documents and practitioner guidelines on the integration of the human security approach to health in Africa. The focus of the CHESTRAD's research has been on identifying potential value added and impact, policy messages and learning for future use of human security in the health sector. The research used the following simplified theory of change to inform its approach to analysing health and human security (figure 1).

Figure 1

Simplified theory of change for the Africa Case Studies Project
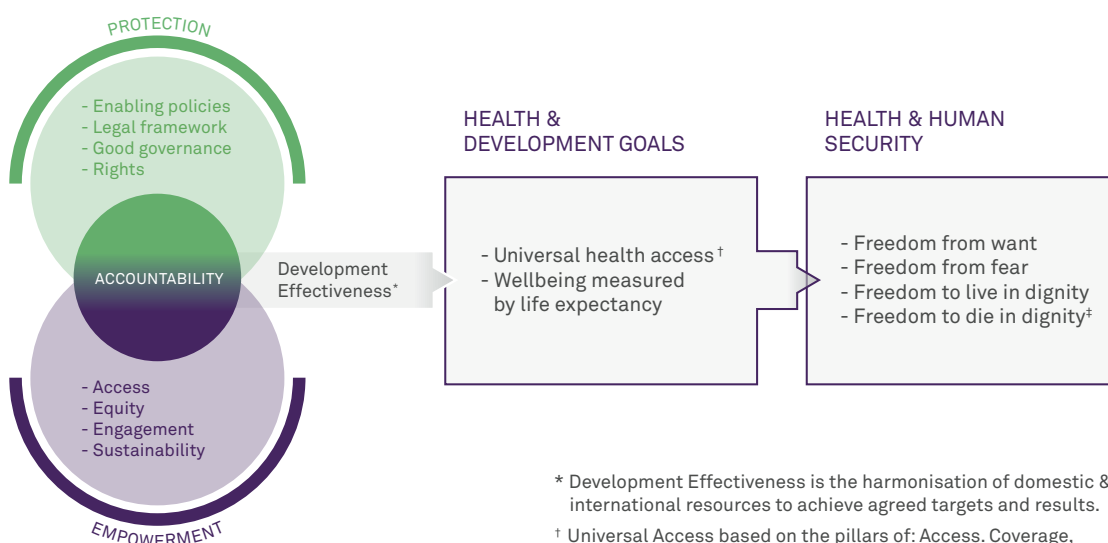
* Development Effectiveness is the harmonisation of domestic & international resources to achieve agreed targets and results.

† Universal Access based on the pillars of: Access. Coverage, Equity, Financial Protection, Social Protection

‡ For the purposes of this study, we have added 'to die' in the building blocks listed here as this has real significance in Arica where the burden of morbidity and mortality due to direct health threats has put extreme pressure on already weak health systems to provide quality palliative care.

> *In its most simple expression, [human security means] all those things that men and women anywhere in the world cherish most: enough food for the family; adequate shelter; good health; schooling for the children; protection from violence whether inflicted by man or by nature; and a State which does not oppress its citizens but rules with their consent.*

Louise Frechette
(former) UN Deputy
Secretary-General
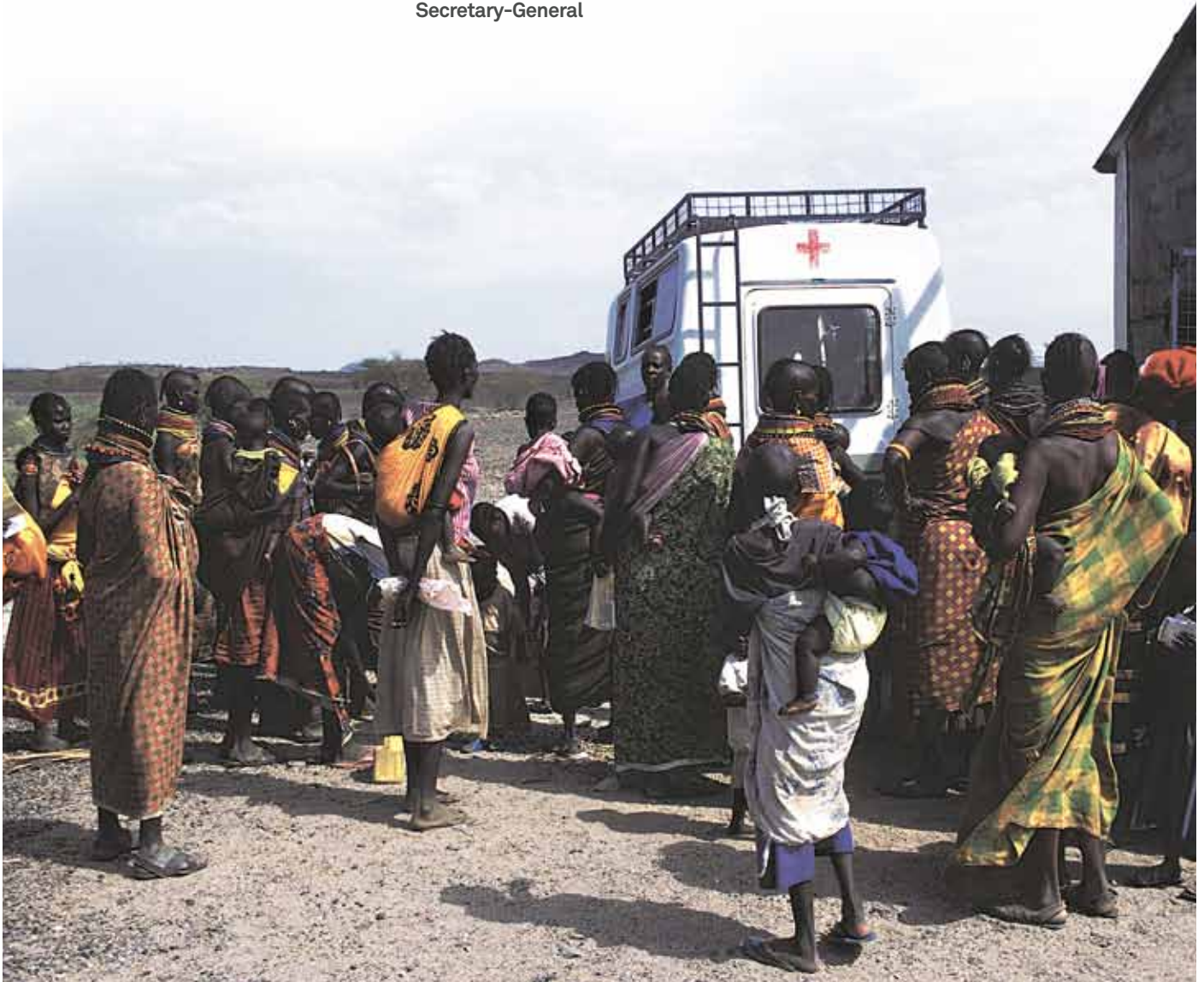
Women and children receiving humanitarian aid

human security approaches emphasise protection as well as empowerment

Features of Human Security that are specific Africa, including country context on health and human security

From a review of 65 cases proposed by the Global Health South members, it appears that programmes focusing on aspects of health and human security provide services designed for priority target groups: Young People (57.1%), Women (42.9%) and Infants and neo-nates (38.9%). These groups might be considered to be those most vulnerable to drivers of insecurity. It is also possible to note the priority interventions that are being implemented on aspects of health and human security: Access to health services (67.9%), empowerment of community organisations (60.7%), and youth development & empowerment (53.6%); three other areas of intervention also stood out, all with the same level of priority (46.4%): citizen participation and accountability, nutrition, and environmental threats. It is important to underline that these are features of the programme response to aspects of health and human security in Africa, but that these should not be assumed to be targeted, vertical interventions[6].

Analysis was undertaken of the root causes, context or indirect threats to Human Security at the country level with specific reference to the health sector. The following features were identified:

• The **context** within which health and human security approaches are applied in Africa is characterised by poverty, corruption, conflict and political instability, dependence on external aid, poor quality of education, natural disasters, poor environmental sanitation, severe malnutrition. An important contextual factor is also the extent to which human rights are upheld. The human rights context can be characterised as follows: Ratification of different conventions and treaties of human rights (CEDAW, CDC, Human Rights declaration), Access to Justice (that limits application of known knowledge and demand for domesticated provisions of international convention and declaration on human rights), Insecurity and corruption both of which limited engagement and voices). As described above, it is possible to identify specific target populations that are more vulnerable to the human security threats, and the vulnerability of these groups is driven by root causes within country policies, health systems challenges as well as the political, social and cultural landscape of each country.

• **Root causes** of insecurity that are particular to the health sector were identified in two main categories: policies and health systems.

• Country Policies in Health: there are many health policies, strategies and approaches; development plants do not always highlight inter-related risks and responsibilities for mitigation strategies; health and development plans and programmes are often fragmented. This set of issues is being addressed through the International Health Partnership (IHP+)[7].

• Health Systems threats: imited investments and innovations in health care financing; poorly motivated health workforce; variable and often low quality of care; limited community engagement; limited inter-sectoral action; challenges relating to coordination of external development assistance and development effectiveness principles; weak public and civil society institutions.

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6. At this stage of analysis consideration was not given to how comprehensively programmes addressed aspects of human security; this was part of the case studies completed in later analysis.
7. www.internationalhealthpartnership.net

• The context and root causes of insecurity have led to direct and indirect threats, including:

• **Direct threats**: the prevalence of Malaria, HIV/AIDS, tuberculosis, diarrhoeal diseases, non communicable disease, violence and injuries amongst many other direct health threats identified by the case studies.

• **Indirect threats**: these were principally identifiable in sectors related to health and include insecurities related to water and sanitation, housing, gender inequality, participation and socio-cultural determinants of both stigmatization and exclusion.

This analysis has important implications for the human security approach to health and development in Africa. In particular it informs thinking about the nature and scope of interventions that provide effective responses to human security. This was one focus of the case study work summarised below.

The following chart (figure 2) was developed based on this analysis, as a tool for analysing the aspects of human security that were addressed in the case studies.

Figure 2

Analytical wheel for the Africa Case Studies on health and human security approach

The above chart (figure 2) was applied to identify the human security components within each of the selected case studies, providing an analytic template to identify the value added and program components for the human security approach to health.

Findings, learning and reflections from the case studies

The *relevance* and *value* of the human security approach to health and development in Africa

Relevance

• The case studies presented in this report show how human security concepts and principles are being used in existing programmes, even if these are not labelled as human security programmes, which suggest that a human security approach is relevant to health sector development in Africa. The studies provide some evidence that these principles should be more explicitly defined and promoted, for example there are instances where a comprehensive approach based on human security analysis may have led to better outcomes. This would be a valuable focus of further study. For example, in the Zambia case study ('Strengthening community–based child health promotion system in Urban Areas') project implementation was constrained amongst other things by inadequate water supply and insufficient incentives for volunteers; it is possible that adopting a more comprehensive approach in project design may have enabled these constraints to be identified and addressed through the intervention: the case study (Annex 1) notes that *"the programme needs to strengthen community involvement at the start of the project to enhance ownership and reduce demands for incentives"*.

• Based on the context, root causes and direct and indirect threats to human security, presented above, it is clear that a comprehensive human security approach can address these drivers of insecurity. For example, poverty can be addressed through focusing on employment or income generation (as in the Nigeria Total Youth Empowerment Initiative), corruption can be addressed through focusing on accountability (as in the Ghana case study – 'Promoting Health Rights & Accountability in a Peaceful 2012 Election'). Analysing security threats from a comprehensive perspective allows mitigating strategies to be put in place.

• However, the case study programmes that are using human security concepts are neither describing themselves as human security programmes, nor using the human security framework to think about more comprehensive programming. Most of the case study programmes are project focused, which may limit their potential to achieve sustainable resilience and human security.

• CHESTRAD has taken an institutional approach to promoting rights based and human security approaches across its health systems strengthening, community and youth empowerment programmes that promote comprehensive, multisectoral programmes and which addresses policy dialogue as central to creating sustainability and resilience in its programmes.

A health clinic in Uganda: effective health systems are a critical in ensuring health and human security

effective health systems are a critical in ensuring health and human security

Value added

The human security approach offers potential value to policy makers and programme implementers in improving health outcomes. Examples of potential value include:

• Human security provides a comprehensive, flexible framework for analysing health threats, designing and implementing health programmes. As with the Zambia example presented above, evidence from the Uganda case study ('Promoting Access to Quality Health Care services for vulnerable populations') suggests that the application of a human security lens may have helped to improve outcomes on health workers: 'In many cases posts have been recruited but have not been taken up due to lack of accommodation, transport and low salaries as well as poorly resourced health facilities. There is an urgent need to review these aspects relating to the employment of health professionals... The application of a human security lens may have helped in planning a human resources strategy that covered some of the aspects highlighted here. Taking a broader perspective on the human security of health workers as well as of patients and beneficiaries of services would have encouraged focus on issues such as accommodation and transport.' The flexibility of the framework is critical in allowing countries to develop and adapt human security approaches to meet their particular human security needs.

• Human security emphasises multisectorality as critical to addressing health outcomes; there is growing recognition of the importance of multisectorality to health (for example in the health thematic consultation of the post-2015 development agenda dialogue[8], and at the 2012 World Conference on the Social Determinants of Health[9]) and human security reinforces this trend using a different framework and language. Evidence from the case studies suggests that comprehensive interventions designed to meet the needs of vulnerable groups can help ensure that specific drivers of insecurity are addressed. The Oriade Initiative and the Total Youth Empowerment Initiative highlight the importance of comprehensive, multi-sectoral programmes in addressing the drivers of insecurity in a sustainable way (for example focusing on policy objectives as well as health sector results).

8. www.worldwewant2015.org/file/337378/download/366802
9. www.who.int/entity/sdhconference/resources/wcsdh_report/en/index.html

• Human security provides the missing link to empowered and resilient communities in current programmes and initiatives – it is potentially a useful tool at different levels (national policy and planning through to individual project level interventions). Human security complements human rights approaches which emphasise protection but less so empowerment. It offers a fresh perspective on empowerment as complementary in ensuring that human rights are sustainably protected and upheld, and that communities' resilience is built so that they can uphold their own security. It also emphasises the importance of responsive accountability as a link between protection and empowerment. These are all complementary and build on lessons learned in the implementation of rights based approaches.

Zambian farmers gather potatoes for export

agricultural production can offer human security related to employment and nutrition

Protection, Empowerment, Accountability & Development Effectiveness

• *Protection and empowerment are interrelated.* For example, ensuring universal access to health care empowers individuals and communities to adopt behaviours that prevent ill health; at the same time ensuring universal access to health care helps to protect individuals and communities from ill health. There are strong examples of how an empowered community can strengthen the health system in the case studies: in Nigeria (Oriade Initiative and Africa Learning sites programme), in Ghana and Cameroon. In these examples, empowering the community to be more directly involved has contributed to improvements in policy and service provision in line with their needs, which has contributed to their protection. There is a strong emphasis on empowerment within the case studies reported here. Lack of emphasis on protection in Africa may be driven by context and causes (i.e. empowerment is more relevant and important in order to address causes of insecurity) or because protection is well established. It is not because protection is not important, which can be concluded as all case study programmes include some elements related to protection.

• *Country contexts vary greatly* – a flexible framework and approach to using human security principles to design, implement and monitor programmes is essential. The importance of development effectiveness principles is also critical here and cannot be overstated, in particular principles of ownership, harmonisation, alignment, and accountability. Applying these principles to guide interventions can ensure that external support is driven by country needs. This is particularly important in countries where health sector development is heavily reliant on external financing.

• *Responsive accountability may be a valuable focus to ensure that the potential of protection and empowerment are realised* in supporting the development of sustainable resilient communities, and as a complement to human rights approaches. Responsive accountability is important to both protection and empowerment - without functioning accountability mechanisms, aspects of empowerment such as participation and capacity building will have limited impact; and without effective accountability the structures that deliver protection interventions (legal frameworks, access to justice) may not be responsive to the needs of the communities that they are mandated to protect. A focus on responsive accountability is therefore a key driver of the quality of both protection and empowerment interventions.

• *Participation is central to ensuring appropriate and effective policy, implementation and accountability.* Engagement and participation was the focus of most of the country case studies, which underlines its importance to human security in Africa. The Ghana case study highlighted this conclusion neatly and succinctly. Other examples of the importance of participation can be seen in the Cameroon ('Citizenship, partnership and accountability'), Uganda and Zambia. In Nigeria ('Integrating Approach to increasing access to Reproductive Service'), it was noted that participation and engagement of local communities stimulated local ownership of the project, which contributed to other states adopting the approach and recognising the need to protect the health right of individuals. Participation is also a central principle in effective accountability, and can drive demand for accessible relevant information (see following bullet).

• *The availability and accessibility of relevant information can contribute to stronger community responses* in terms of policy design and accountability, in particular in terms of financial information. Several of the case studies reported here (Cameroon, Ghana, Uganda, Zambia) have focussed in some way on promoting the availability of information as a means to empower communities, galvanise action and work towards better health outcomes. In those projects, health financing information has been prioritised, suggesting it is important to communities.

• *More work is needed on an appropriate measurement framework* as a central part of any human security framework and approach. The prospects for commenting on how interventions have impacted on the broad concept of human security are limited. Progress may have been made on one aspect of human security; it cannot be assumed that this will have led to an increase in overall security. Development of an appropriate measurement framework must build on work that has gone on to date, including the Human Security Index[10]. Work presented here also provides a potentially valuable contribution on this important agenda: in particular the Oriade Initiative (including the community empowerment pathway) and Total Youth Empowerment Initiative case studies reported here. This will require separate, focused work to which the operational tool presented in Figure 2 could contribute because it emphasises the importance of a multisectoral response, which needs to be captured in a monitoring framework.

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Women voting in Senegal elections

responsive accountability is an important link between protection and empowerment

Towards Universal Health Access

Having made substantive contributions to the post-2015 development agenda dialogue (health thematic consultations), CHESTRAD was able to reflect on the implications of a human security approach for Universal Health Access and Coverage, and potential linkages. The following reflections were noted:

• The human security framework and approach has a number of areas of commonality with the Universal Health Access and Coverage agendas:

• The mechanisms for achieving Universal Health Access and Coverage are unclear but there is a recognition that these will differ from country to country. This is very quickly evident from the work presented in this report.

• There is clear recognition about the need for a multisectoral approach in order to achieve Universal Health Access and Coverage –a framework that reinforces and supports the practical application of this is vital. The case study excerpt from Cameroon simply underlines this point, through highlighting the importance of a 'permanent peri-urban and rural areas road network with passable roads leading to health facilities'.

• Focusing on the needs of vulnerable groups and addressing the insecurity – for example financial protection.

• The importance of effective partnerships, with participation of empowered representatives that enables accountability for results is critical. Governance is key.

• Discussions on Universal Health Access and Coverage are ongoing and may benefit from drawing on a human security framework and approaches.

" *We have heard a great deal about human security as a potential framework that is emerging in some other non-health settings. It is a framework that focuses on development, human rights and state security. It is focused on the needs of people, multi-sectorial, integrated and focused on both protection and empowerment. It is a tool for both design and evaluation. We need to consider such framework.* "

**Roopa Dhatt
President, International
Federation of Medical
Students Association**

> *Human security refers to the quality of life of the people of a society or polity. Anything which degrades their quality of life – demographic pressures, diminished access to or stock or resources, and so on – is a security threat. Conversely, anything which can upgrade their quality of life – economic growth, improved access to resources, social and political empowerment, and so on – is an enhancement of human security.*

**Ramesh Thakur
(former) Vice Rector, Peace
and Security, UN University**

Mother and child

the Post-2015 development agenda must deliver for women and children; human security offers an implementation strategy of potential value

Convening and Dialogue

• Global Advocacy, including agenda setting and partnership strategies on health and human security, is essential. At this critical juncture for global health, as we look to define goals and strategies that will hold to 2030 and beyond, we need to reinforce critical messages around country context, multisectorality, governance and participation. The human security approach offers a powerful vehicle to advance these messages, and thought should be given to the most appropriate channels (including a search for champions of the approach).

• Regional, national and sub-national level discussion is needed to advance thinking on the HS approach and to promote its application. Participation is key.

• This kind of consultative process may help identify further operational research that can assist with developing and testing guidelines and tools, in particular around M&E to increase the evidence base on the impact of comprehensive approaches.

• Regional, national and sub-national level discussion is needed to advance thinking on the HS approach and to promote its application. Participation is key.

• This kind of consultative process may help identify further operational research that can assist with developing and testing guidelines and tools, in particular around M&E to increase the evidence base on the impact of comprehensive approaches.

> *Several key elements make up human security. [First] is the possibility for all citizens to live in peace and security within their own borders... [Second] is that people should enjoy without discrimination all rights and obligations... [Third] is having equal access to the political, social and economic policy making processes, as well as to draw equal benefits from them. [Fourth] is that of the establishment of rule of law and the independence of the justice system... These basic elements which are predicated on the equality of all before the law, effectively remove any risk of arbitrariness which so often manifests itself in discrimination, abuse or oppression.*

**Sadako Ogata
(former) UN High
Commissioner
for Refugees**
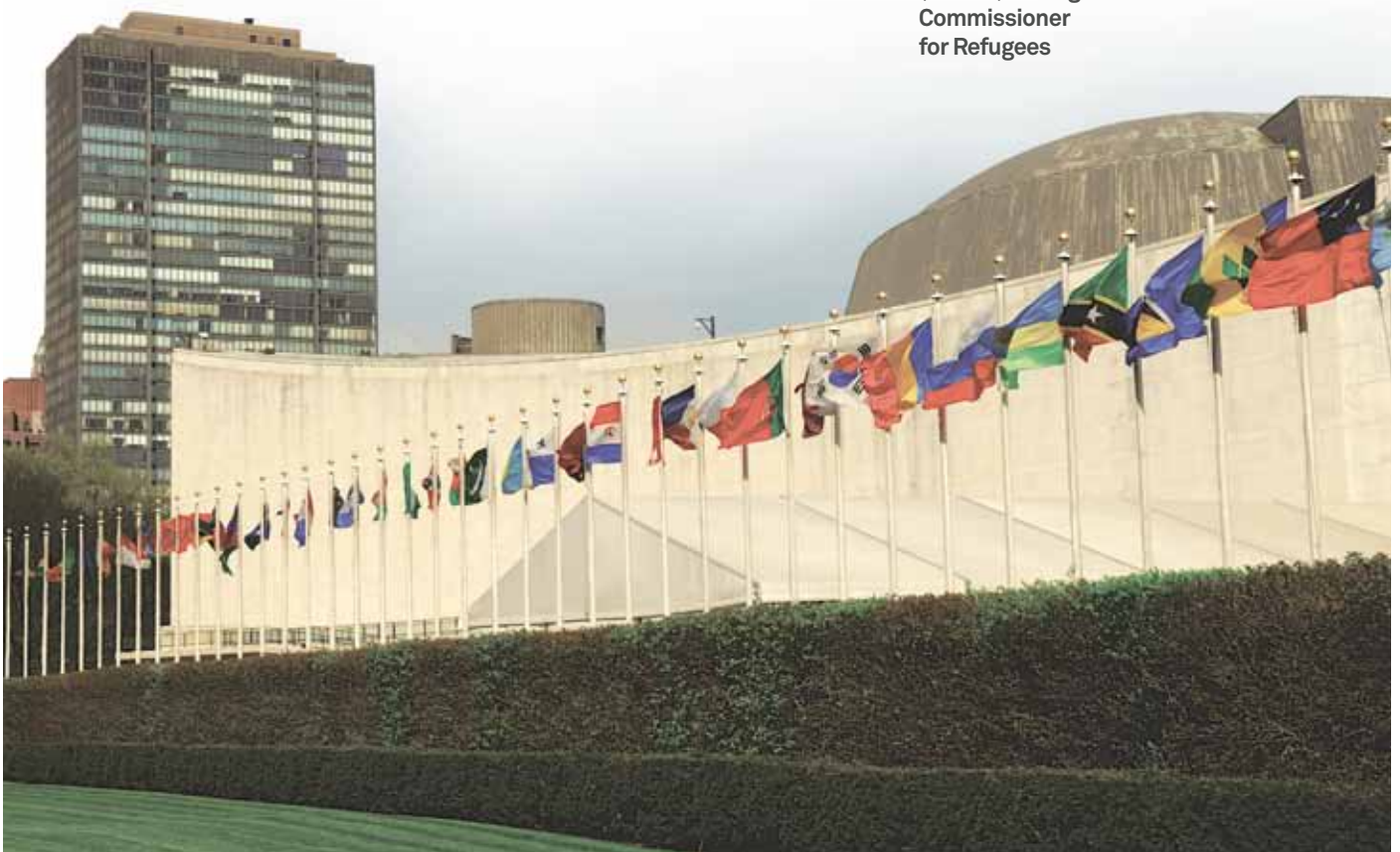
**Flags at the UN
Headquarters, New York**

*advocacy and partnership
is needed to promote
effective strategies to
deliver human security*

Key Advocacy Messages

Based on these findings and reflections, the following key advocacy messages have been identified:

1 **The human security approach should be more widely used in the design, implementation and review of health and development programmes in Africa.**

• The human security framework and approach are relevant to health in Africa, indeed the concepts and principles of human security are already used in existing programmes, and these have the potential to address the drivers of insecurity in Africa.

• The human security framework and approach offers potential value to decision makers in health policy and programmes, not least through its flexible, comprehensive approach and potential contributions on process (eg how not what) which is critical for the post-2015 dialogue.

3 **Responsive accountability and Development Effectiveness should be seen as integral parts of the human security framework, and resources committed to strengthening mechanisms that deliver in these areas.**

• Responsive accountability may be a valuable focus to ensure that the potential of protection and empowerment are brought to supporting development of sustainable resilient communities.

• Development effectiveness principles are key in guiding the behaviour of external partners, which is critical in Africa where many health sector responses are heavily reliant (some would say dependent) on external sources.

5 **The dialogue on human security and health should be intensified, including at the national level, with meaningful participation of relevant stakeholders (civil society, communities).**

• JICA, JCIE and partners should convene appropriate forums to promote discussion and encourage the explicit application of the Human Security approach in comprehensive, multisectoral health and development programmes.

2 **Both Protection _and_ Empowerment should be promoted as fundamental pillars of human security.**

• Protection provides the space for action on community resilience, and whilst there is less evidence that this is a priority in Africa, it cannot be taken for granted.

• Empowerment is also a fundamental pillar of the human security framework, and aspects of it are addressed in most of the case studies reported here.

4 **The linkages with the Post-2015 health agenda should be maximised, with a view to ensuring that a human security approach is central in future health programme design, implementation and review.**

• Adopting a human security lens for post-2015 discussions could be a powerful approach: the Post-2015 dialogue emphasises dignity, well-being as does human security. The post-2015 discussion is less clear on process and how to achieve the goals that are being discussed (although lessons from the MDGs highlight how implementation processes must receive more attention in the post-2015 discussion). This is one way in which the human security approach can assist - focusing on the how.

• Resilience (through protection, empowerment, responsive accountability and development effectiveness) is critical in order to 'future proof' development gains in the face of anticipated social, economic, political and cultural change.

Rwandan boy pumps water

*human security's emphasis on
multisectorality is shared with
the Post-2015 development
agenda; water and sanitation
is an important sector*

Conclusions and recommendations

Conclusions

1 **Human security is relevant to health, but not being used as a framework to inform programme design, in particular comprehensive approaches.**

• Further work is needed to clarify and operationalize key concepts and approaches relating to human security if the window of opportunity that exists (for human security to gain traction) is to be seized.

• Tools and resources (financial, human capacity) need to be developed to support practitioners in applying a human security framework and approach. The approaches required to address human security in a comprehensive way require joined up action across broad partnerships. Support must be given to enable practitioners to realise the potential value of the human security approach.

2 **Protection and empowerment are key, interrelated concepts in human security and are relevant to health sector development. Responsive accountability and development effectiveness can provide the link between protection and empowerment.**

• *Ensuring protection and empowerment requires multisectoral responses,* and it seems likely that the more comprehensive that this approach is the more effectively human security will be promoted and upheld.

• *Regional comparisons are of limited value* - it is clear that it is critical to analyse country-specific contextual factors (drivers of insecurity and resilience) as part of design, implementation and review of any human security interventions; *aid effectiveness principles are key in order to ensure that programmes respond to country needs as defined by countries.*

• *Participation is a high priority as a human security intervention* - both as a key contributor to empowerment, and to accountability.

• *Our inability to appropriately measure overall human security limits available information on the impact of HS programmes, as well as participation and accountability on human security.*

3 **There is an opportunity for human security to gain traction - working through the post-2015 process**

• The need for a comprehensive approach is clear; there is important overlap between human security and other health-related processes.

• Human security threats are many, and multifaceted. Interventions are required in multiple sectors.

• The ongoing discussions about the post-2015 development agenda have highlighted the importance of multisectorality.

• The human security agenda can benefit from supporting the post-2015 dialogue.

• The post-2015 process is clear on the need for greater clarity on implementation, but discussion is to date focused on what not on how. The HS approach can contribute substantively on how.

4 **Further discussion is needed to take the human security approach to the next level, and to amplify its potential effects.**

• The right people must be involved in this conversation if the Human Security approach is to promote resilient sustainable community development

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Selling fabric on the river Nile

young people are vulnerable to human security threats; programmes must address economic security to promote sustainable health outcomes

Recommendations

Develop guidelines

• Technical Reference and Guideline documents for a broad range of stakeholders must urgently be developed. These must set out concepts and frameworks clearly and include operational guidelines with case studies and practical information that can encourage communities of practice and south-south learning.

• Guidelines should be tested in a limited number of countries, to ensure that they achieve the clarity that is required and to strengthen the availability of practical examples of where human security approaches have been applied.

Dialogue, learning and scale up

• Policy dialogue and advocacy: Civil Society organizations especially in Africa should be supported to take this report and the guidelines forward through a process of policy dialogue and advocacy, directed at national governments, regional institutions and development partners active in Africa This will help ensure a broad range of stakeholders are engaged and deepen stakeholder understanding of both the value added and operational guidelines for incorporating the human security approach into health projects and programmes.

• *Implementation research should be undertaken based on the learning framework identified by this report, and others, in programmes where holistic approach to health and human security has been applied* – where the design, implementation and monitoring is done following a human security framework and approach. This work should link to the policy dialogue and advocacy efforts indicated above, include the valuable lessons from other regions as is documented in the guidelines. Cross country implementation research should highlight key human security components including protection, accountability, empowerment and development effectiveness, with communities, practitioners including other national stakeholders as the agent of change.

Policy makers should

• Adopt a human security approach and/or apply a human security lens to their health and development programming decisions:

• Review existing programmes, perhaps using the analytical wheel (figure 2) presented here, to assess the relevance of all aspects of human security to their programme contexts (ie use the human security lens as the basis for a revised needs assessment to address the root causes, direct and indirect threats to human security).

• Decide whether adapting existing programmes based on a human security analysis may help overcome constraints, improve programme outcomes and promote sustainability; develop action plans based on this analysis.

• Incorporate multisectoral interventions into health programmes. Discuss with colleagues and officials in relevant sectors how their interventions impact on health and human security, with a view to promoting joined up working.

• Ensure that accountability and aid effectiveness are incorporated in programme design, implementation and review.

 - Create the space for participation of relevant stakeholders, and provide resources to ensure their meaningful engagement.

 - Incorporate human security measures (as and when these are clearer) into routine health monitoring.

• Support the uptake, expansion and deepening of new and existing uses of the human security approach:

• Make financial and human resources available to support the application of a human security approach in programming decisions.

• Invest time and energy in developing a robust M&E framework for the human security framework and approach.

Implementers and practitioners

• Use Human Security guidelines and tools (as and when they become available) to inform programme design, implementation and review.

• Build accountability and policy influencing into programme design, implementation and review.

• Ensure that programmes are tracking the right information to enable human security to be monitored.

• Make this information transparently available to relevant stakeholders.

• Involve the right stakeholders in programme design implementation and review.

• Ensure that there are forums for corrective action.

• Incorporate multisectoral responses into existing and new programmes, and use human security approach to ensure that programmes are comprehensive in addressing drivers of insecurity.

• Review existing programmes, perhaps using the analytical wheel presented here, to assess the relevance of all aspects of human security to their programme contexts (ie use the human security lens as the basis for a revised needs assessment to address the root causes, direct and indirect threats to human security).

• Decide whether adapting existing programmes based on a human security analysis may help overcome constraints, improve programme outcomes and promote sustainability; develop action plans based on this analysis.

• Make linkages with other programmes and with officials in other sectors to ensure that collective action addresses the root causes, direct and indirect threats to human security. As is being promoted in the Post 2015 consultations, partnerships within and across the sector is key, with effective coordination to ensure the effectiveness of community, domestic and international resources.

For the Post-2015 agenda

• Policy makers and civil society should develop plans to advocate for a human security approach to inform programme design and implementation in the post-2015 dialogue and beyond.

Mother with baby, Niger

human security can promote sustainable health outcomes for women and children

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