UHC2030 Steering Committee

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PROPOSED WORKPLAN 2018 – 2019

For Information ☐   **For Review & Advice** ☐   **For Approval** ☒

PROPOSED WORKPLAN 2018-19

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Background

The inclusion of universal health coverage (UHC) in the SDGs presents an opportunity to promote a comprehensive and coherent approach to health, focusing on health systems strengthening (HSS). UHC is based on the principle that all individuals and communities should have access to quality essential health services without suffering financial hardship. UHC cuts across all health targets and contributes to health security and equity. Achieving UHC, as articulated in target 3.8 of the SDGs, requires coordinated efforts across multiple sectors and development of strong, sustainable and equitable health systems that help to improve health outcomes.

The International Health Partnership for UHC 2030 (UHC2030) is a global movement with the aim to strengthen resilient, sustainable and equitable health systems towards achieving UHC as well as global health security by 2030. It provides a multi-stakeholder platform that promotes collaborative working in countries and globally on health systems strengthening. It brings together partnerships, networks and initiatives focused on strengthening health systems[1], providing space to exchange and explore mutually reinforcing action.

As a network of networks, UHC2030 provides a platform to convene power, to facilitate interconnections or linkages among various UHC initiatives, and to conduct deep dives to address bottlenecks to UHC progress. In fact, the work of UHC2030 as the health systems platform can be summed up in three verbs: convening, connecting and organising deep dives. This logic is applied to five clear areas of work: 1. Coordination of health systems strengthening for UHC; 2. Knowledge management and sharing; 3. Accountability for progress towards health systems strengthening and UHC; 4. Advocacy; and to a lesser extent 5. Partnership governance.

This biennium workplan has been been prepared by the Core Team following a participatory process as discussed during the Steering Committee meeting on 15-16 June 2016. The proposed deliverables build on the technical working groups established to take forward work in some specific areas of health systems strengthening coordination (see Overview of working groups, document UHC2030/SC2/2917/09), most of which had meetings in October and November, providing an opportunity to review their workplans.

The strategies for knowledge sharing, advocacy and accountability have also been developed through a consultative process involving a range of partners, including some of the UHC2030 related partnerships, networks and collaboratives. Although some of the proposed implementation arrangements envisage collaboration with UHC2030 partnerships, collaboratives and networks, further consultation on the overall workplan is necessary. The Core Team proposes to organize a discussion with partners from related initiatives during the UHC Forum taking place in Tokyo from 12-15 December to look into implementation arrangements in

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[1] List of related initiatives available on the UHC2030 website: https://www.uhc2030.org/about-us/related-initiatives/
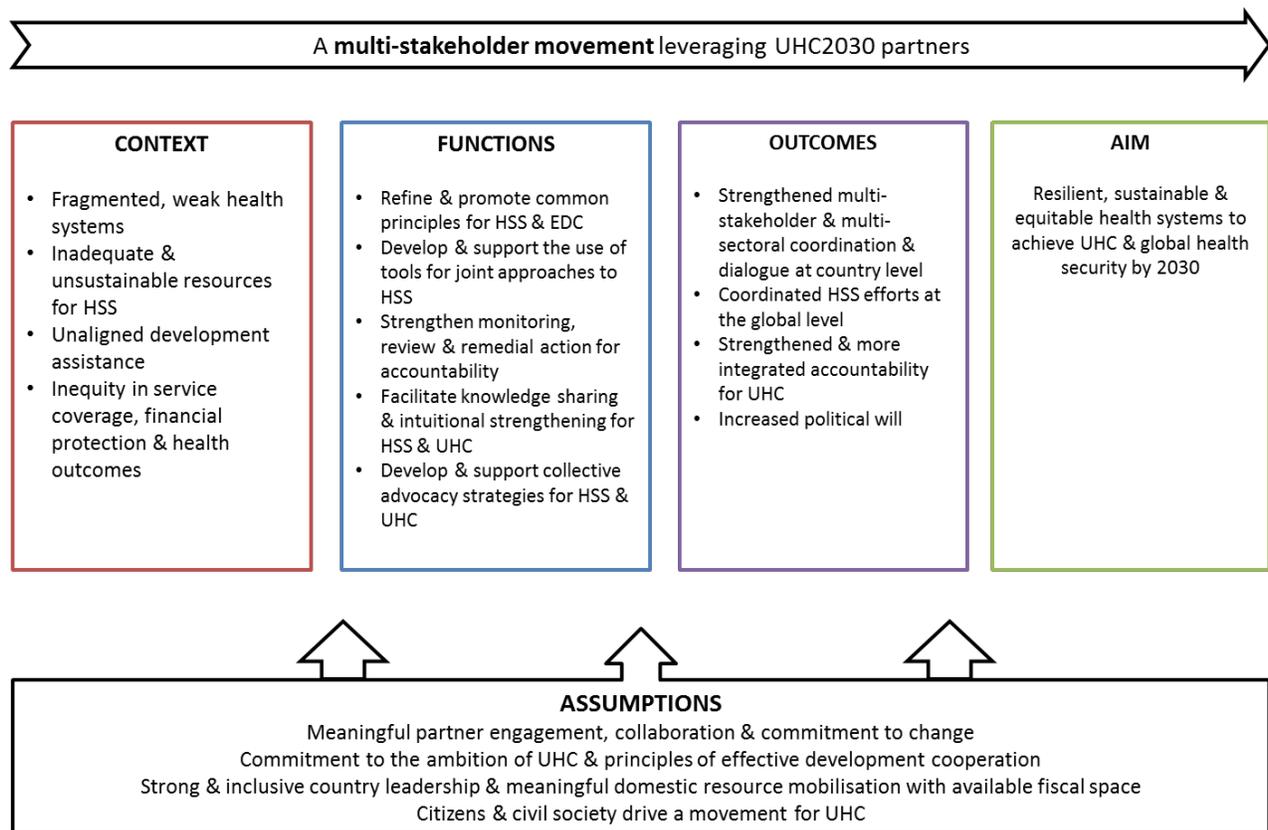
more detail: this will provide an opportunity to exchange on collaboration across various efforts, identify and start to promote synergies and discuss possible contributions to the UHC2030 work. For this to happen, we need to remain opportunistic, adaptive, and flexible on how we work.

In order to consolidate the value proposition of UHC2030 and define concrete measures of success, it is proposed, in early 2018, to review and further develop the UHC2030 strategic framework that will guide future operational planning and performance reporting. This process will build on the joint vision "Healthy systems for universal health coverage – a joint vision for healthy lives" , so that the UHC2030 Joint Vision is used as a reference document for UHC2030.

Theory of Change

The purpose of stating a UHC2030 theory of change is to help establish a common understanding of how UHC2030 delivers on its mandate and achieves intended outcomes. This helps to frame how UHC2030 can add value and demonstrate what success will look like. The theory of change has been used to provide some strategic guidance in prioritising the proposed deliverables in the work plan under each objective for UHC2030.

The figure below illustrates how UHC2030, with its specific objectives and functions, contributes to create a movement for UHC, taking into account current context and assumptions.

A **multi-stakeholder movement** leveraging UHC2030 partners

CONTEXT	FUNCTIONS	OUTCOMES	AIM
• Fragmented, weak health systems • Inadequate & unsustainable resources for HSS • Unaligned development assistance • Inequity in service coverage, financial protection & health outcomes	• Refine & promote common principles for HSS & EDC • Develop & support the use of tools for joint approaches to HSS • Strengthen monitoring, review & remedial action for accountability • Facilitate knowledge sharing & intuitional strengthening for HSS & UHC • Develop & support collective advocacy strategies for HSS & UHC	• Strengthened multi-stakeholder & multi-sectoral coordination & dialogue at country level • Coordinated HSS efforts at the global level • Strengthened & more integrated accountability for UHC • Increased political will	Resilient, sustainable & equitable health systems to achieve UHC & global health security by 2030

ASSUMPTIONS
Meaningful partner engagement, collaboration & commitment to change
Commitment to the ambition of UHC & principles of effective development cooperation
Strong & inclusive country leadership & meaningful domestic resource mobilisation with available fiscal space
Citizens & civil society drive a movement for UHC

Fragmented health systems, which are inadequately and unsustainably resourced, impede progress towards UHC. Health service coverage and financial protection remain low and

inequitable, leaving behind the most vulnerable communities. Domestic resource mobilisation is not sufficient and development assistance is often unaligned with country priorities, plans and systems. These weaknesses have been exposed by global health security threats, such as Ebola,.

UHC2030's added value comes from leveraging partners for strategic collaboration and learning, building on existing initiatives where appropriate. The partnership contributes to positive change through the following functions: refining and promoting common principles for resilient, sustainable and equitable health systems and effective development cooperation (EDC), including through developing and supporting the use of tools for joint approaches; facilitating knowledge management on UHC; driving collective advocacy strategies; promoting tracking progress towards UHC and accountability of governments and partner organizations through strengthened monitoring, review and remedial action.

This will lead to improved multi-stakeholder and multi-sectoral coordination and dialogue at the country level; enhanced knowledge management; coordinated efforts to enhance global momentum around UHC at the global level; improved accountability for progress towards UHC at the country, regional and global levels; and increased and sustained political momentum behind this agenda.

Achieving these aims is contingent on several assumptions. The success of UHC2030 depends on the willingness of its partners to adhere to common principles and change their behaviours. Given that UHC is fundamentally about solidarity and the social contract between citizens and governments, the movement for UHC must be powered by the people in the context of strong and inclusive government ownership.

In order to mobilise partners and promote behaviour change, UHC2030 will leverage political leadership through the World Health Assembly and the UN bodies responsible for follow-up on the SDGs, in particular the High Level Political Forum and the UN General Assembly. Such links are being embedded in the UHC2030 work on advocacy and accountability.

As a global partnership, UHC2030 does not have a funding nor an operational mandate to take action in countries. Yet, UHC2030 aims to affect change in countries and needs to identify the practical benefits to countries of its work without having an influence on what countries will do in various areas. In line with its network of networks nature, UHC2030 can contribute to change through convening, connecting and organsing deep dives. UHC2030 contributes to forging synergies across various communities on advocacy, accountability and knowledge sharing, document and disseminate best practices, and provide tools for joint approaches to strengthen health systems. Different UHC2030 partnerships, collaboratives and networks have a specific mandate to support coordination efforts in specific areas, particularly at the country level. In this regard, UHC2030 is not intended to duplicate the work of collaboratives, networks and individual development agencies but to provide a global convening platform for multi-stakeholder dialogue and collaboration for HSS and UHC.

Overview of the UHC2030 biennium workplan for 2018-19

Area of work 1 - Coordination of Health Systems Strengthening for UHC

This section outlines the actions and milestones related to priority objectives for UHC2030. Expected outcomes, indicators and deliverables have been specified for proposed areas of work. See overview table in Annex.

This area of work aims to achieve the following objectives of UHC2030:
- o   Improve coordination of HSS efforts for UHC at the global level, including synergies with related technical networks
- o   Strengthen multi-stakeholder policy dialogue and coordination of UHC and HSS efforts in countries, including adherence to IHP+ principles and behaviours.

UHC2030 will continue to prioritise generation of results at the country level through developing tools and joint approaches, and facilitating coordinated technical assistance upon request of governments. This includes continued work on the unfinished IHP+ effective development cooperation agenda. Working Groups will draw on and complement existing efforts where appropriate.

Expected outcomes:
- Role of public financial management (PFM)clearly articulated in EDC and UHC agendas in order to support increased domestic resource allocation to UHC, and efficient use of resources;
- Better coordination across humanitarian and development stakeholders in fragile and conflict affected settings;
- Consensus built on the sustainability objective in relation to transition from external finance – to mean sustained coverage of priority interventions for UHC with financial protection;
- Use of health systems assessments approach for guiding government decision-making and performance improvement;
- Platform developed to facilitate exchange and learning on for multisectoral efforts for health as part of UHC;
- Renewed momentum on the role of EDC health systems strengthening.

The following technical working groups (TWGs) will contribute to the expected outcomes above, and be responsible for developing activities that generate the deliverables:[2]
- o   PFM WG
- o   Fragile States WG
- o   Transition and Sustainability WG
- o   Health Systems Assessment WG
- o   Multi-sector WG
- o   Other areas: tbc depending on proposals from UHC2030 members

Area of work 2 - Knowledge Management and Sharing

Knowledge sharing is a key lever for the collaborative work that is needed to strengthen coordination around health systems strengthening efforts. Knowledge management has been

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[2]Update on progress to date, including revised ToR when relevant to be provided in the Overview or working groups (document UHC2030/SC2/2017/08, forthcoming)

identified as a cross cutting function for UHC2030. The proposed strategy aims to position UHC2030 as knowledge broker on the HSS and UHC agendas to help build synergies across related networks.

Expected outcome:
- UHC knowledge hub developed, to link knowledge content and services with country demand. providing an interface for navigating existing platforms and portals for knowledge on UHC
- UHC knowledge engagement aligned more closely with country demand to reduce knowledge gaps related to UHC and refine understanding of gaps, linking knowledge content and services with the countries that need them.

Area of work 3 - Accountability for progress towards HSS and UHC

This area of work seeks to take forward the following objective of UHC2030: To facilitate accountability for progress towards on HSS towards UHC that contributes to a more integrated approach to accountability for SDG3. The proposed strategy is to ensure progressive realisation of UHC happens at country level, with participatory processes in place to identify emerging challenges and corrective actions.

Expected outcomes:
- Capacity of civil society, young people, parliamentarians and the media strengthened to hold governments accountable for sufficient investment, robust policies and plans, and timely implementation for progressive realisation of UHC;
- Development partners held accountable for sufficient investment in health systems and adherence to EDC principles;
- Greater convergence among health accountability initiatives.

Area of work 4 - Advocacy

This area of work seeks to take forwards the following objective of UHC2030: To build political momentum around a shared global vision of HSS for UHC and advocate for sufficient, appropriate and well-coordinated resource allocation to HSS.
The proposed strategy and work plan deliverables have been designed to encourage broad participation and support from partners and stakeholders within and beyond UHC2030. The workplan focuses on UHC2030's own contribution to the advocacy strategy as a multistakeholder platform: coordinating and aligning partners' UHC advocacy efforts across issues, countries and sectors; creating a central hub of resources and information for partners to leverage in support of their advocacy work; and promoting a feedback loop between the UHC2030 joint vision for health systems strengthening for UHC and country-specific advocacy.

Expected outcomes:

- Political support and grassroots demand for UHC built at the country level to motivate policy change and investment;
- National action plans developed with measurable results;
- Broad, inclusive and cohesive UHC community supported.

Area of work 5 - Partnership Governance

This area of work seeks support the day-to-day operations of the UHC2030 partnership, coordination of work of its organs that include, the Steering Committee, Reference Group, and technical working groups. Other areas of focus will be resources mobilization to fund operations, and fostering linkages with relevant networks and collaboratives associated with the platform.

Expected outcomes:
- Value proposition of the partnership strengthened and used as a basis for operational planning and reporting;
- New partners mobilized to join UHC2030;
- UCH2030 operationalized as the convening platform for health systems initiatives;
- CSOs actively engaged in UHC2030 through a constituency representing different regions, languages and area of expertise;
- Effective coordination of UHC2030 operations.

Summary of proposed workplan and budget

The table below shows the proposed budget for the workplan, with a total of US $ 13.5 million for 2018-19 (January 2018 – December 2019) (excluding programme support costs). It includes an indicative annual budget of US $ 6.75million for 2018 and for 2019.

The budget increase of US $ 2.325 million[3] reflects the operationalization of UHC2030, with additional funding allocated to the following areas: accountability and UHC2030 governance, including support to the Secretariat for the CSO engagement mechanism and collaboration with related initiatives.

Tables below show the budget summary as well as a more detailed breakdown for 2018. The annual budget breakdown for 2019 will be determined on the basis of implementation in 2018. Staff costs of the core team are allocated to each element of the workplan. Some flexibility is required in the use of the budget to enable the partnership to respond to emerging issues and demand from partners, as has clearly been shown in the past.

Budget summary for 2018-19

	Area of work	Amount for 2 years in total

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[3] The budget for the biennium 2016-2017 amounted to USD 11.175 million (excluding programme support costs).

		(000 US$)
1.	**Coordination of health system strengthening for UHC**	**4750**
	1.1 HSS support for PFM	750
	1.2 HSS support to fragile and conflict affected settings	750
	1.3 Sustainability and transition from external financing	750
	1.4. Health systems assessments	350
	1.5 Multi-sectoral approach to UHC	350
	1.6 Renewed momentum on EDC	1500
	1.7 Other areas suggested by partners	300
2.	**Knowledge management and sharing**	**650**
	2.1 UHC knowledge hub	650
	2.2 Country demand for knowledge	
3.	**Accountability for progress towards HSS and UHC**	2000
	3.1 Capacity building of non-state actors	1300
	3.2 Accountability of development partners	600
	3.3 Joint capacity strengthening for social accountability	100
4.	**Advocacy**	**1000**
	4.1 Political support and grass-roots demand	420
	4.2 Support for national action plans	460
	4.3 Global advocacy	120
5.	**Partnership governance**	**5100**
	5.1 Strategic planning, reporting and communication	550
	5.2 Mobilisation of partners	550
	5.3 Coordination with related initiatives, incl. UHC2030 annual meeting	2000
	5.4 Support to CSO engagement mechanism	1000
	5.5. UHC2030 Steering Committee	500
	5.6 Core team operations	800
	TOTAL EXCLUDING PROGRAMME SUPPORT COSTS	**13500**
	Total including programme support costs [4]	tbc

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[4] Total programme support costs depend on final amounts of funds passed through to the World Bank: they are