



Policy dialogue makes it happen!

The EU-Luxembourg / WHO UHC Partnership Programme

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IHP for UHC 2030 Steering Committee

Geneva, 16 June 2017

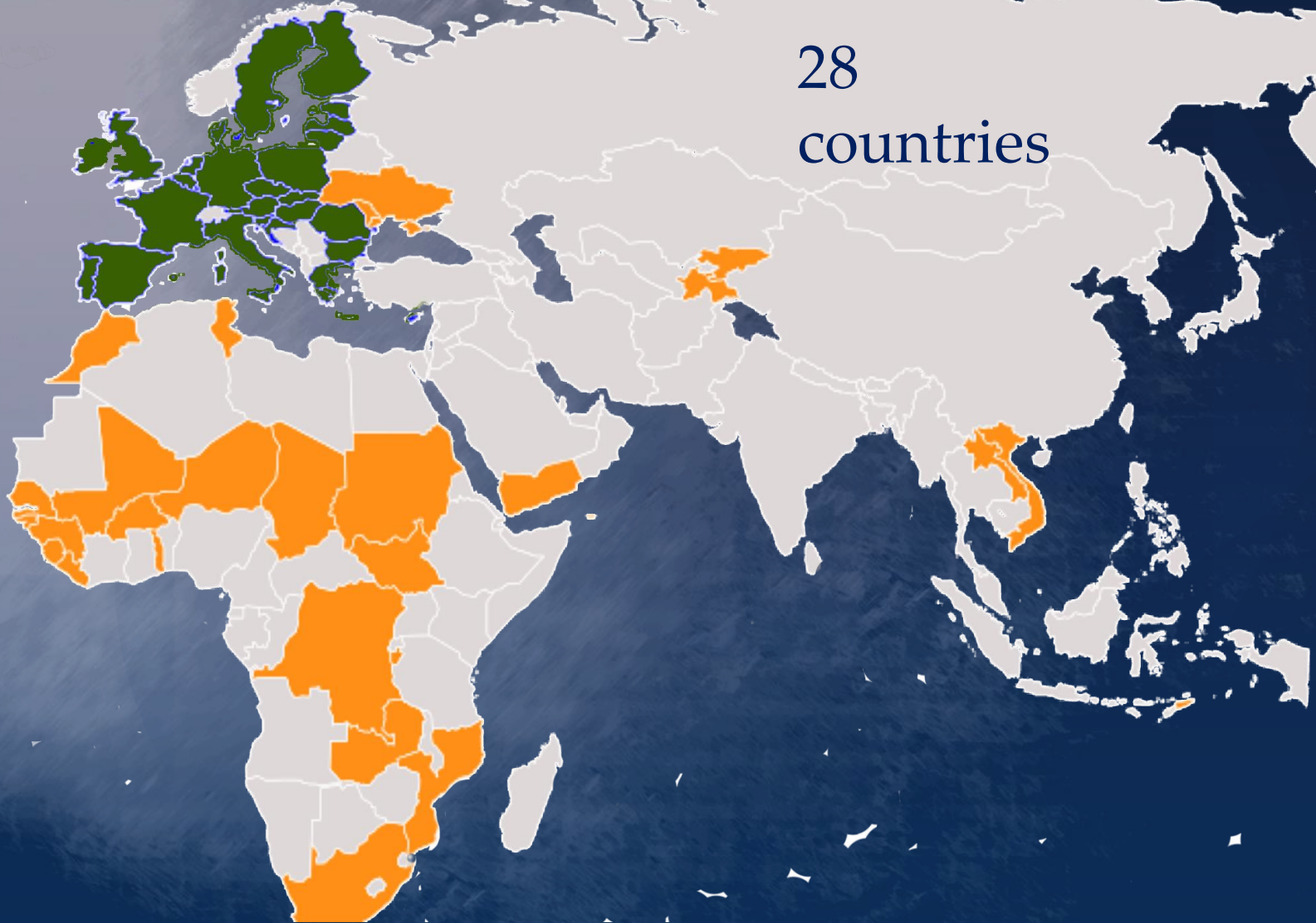




- ⇒ The UHC-Partnership country-led identification process
- ⇒ Comprehensive approach to UHC is key and MoHs share the leadership together with WHO
- ⇒ Better shape partners' interventions at country level towards effective development cooperation
- ⇒ Balance between seed money and senior technical expertise

What have we
achieved ?

28
countries



UNIVERSAL HEALTH COVERAGE PARTNERSHIP

ROADMAP ACTIVITIES IN 28 TARGET COUNTRIES



STRATEGIC OBJECTIVES																													
ACTIVITIES																													
RESULTS																													
IMPACT																													



THE GOVERNMENT
OF THE GRAND DUCHY OF LUXEMBOURG
Ministry of Foreign and European Affairs

Directorate for Development Cooperation
and Humanitarian Affairs

Roadmaps: *hundreds of activities*



MOLDOVA



SENEGAL



**SIERRA
LEONE**

**Policy Dialogue
around NHPSP**

Continuous dialogue with stakeholders from the parliament and political elite to gain their support of the health reforms, strategies and plans
Conducting multi-sectorial dialogue on various areas of the health system to support population's health improvement

Code of Health

Contribute to the development of the Code of health, as the key regulatory

**Development of
national plans**

Implementation, monitoring and evaluation of the national health development plan at all levels

Develop and implement new national health sector strategic plan (NHSSP)

Consultative meetings and workshops

Annual district operational plans

Planning workshops for standardized and harmonized district level annual operational plans for 13 districts

District health strengthening

Capacity building exercises; monitoring and review of DHMT capacities

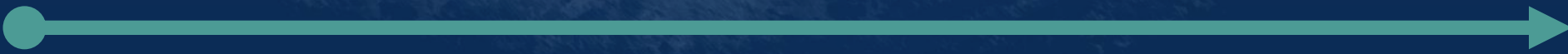
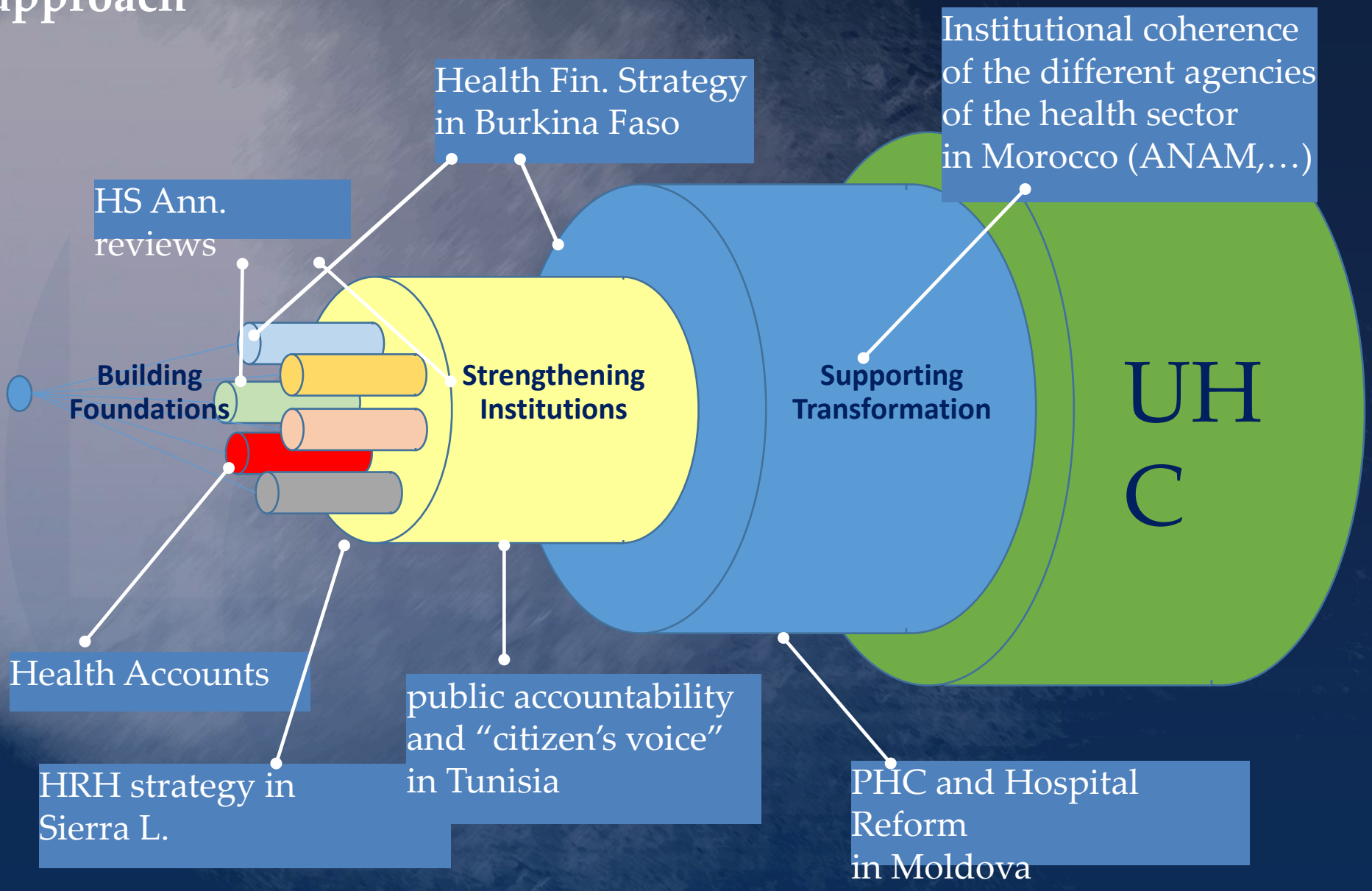


Activities: around 14 areas of work

Major areas of work

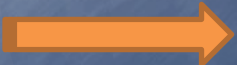


Health System Development Towards UHC : the FIT approach



- ⇒ Country learning programme
- ⇒ Global UHC course for francophone countries
- ⇒ Global Advanced WHO health financing course (in English),
- ⇒ Scientific publications: BMC series on policy dialogue (AFRO), others at regional and country level
- ⇒ Support to Country Cooperation Strategies
- ⇒ Collaboration with many departments at HQ, regional and country level.

And also...

- UHC-P and WHO reform: 70% of the resources are at country level
 - The role of the country office: better positioned to fulfil its mandate with MoH and partners
 - Collaboration between the 3 WHO levels
 - Collaboration with the EU Del. and Lux Represent.
 - Evaluation: internal integrated evaluation at WHO, ROM, external evaluation (KIT), and verification mission (June 2017)
 - IHP+ → IHP+ for UHC 2030
- 

Other aspects...

Programme	Country	TA Status	TA starting date	TA resp person
EU Phase 1 EU-P1	Liberia	In place	Apr-14	Mesfin, G
	Moldova	Light mode	Light mode	Dr Haris
	Sierra Leone	Light mode	Mar-16	Kadandale, Sowmya
		Switched to full mode Mar 2016		
	Sudan	Light mode/Full mode June 2016	Light mode (2011-2015) June 2016	Dr Naeema El Gasser TBA
	Togo	In place	Apr-12	Elongo, Tarcisse / Drave, Mamadou
	Tunisia	In place	Sep-12	Guisset, Ann Lise / Mathivet, Benoît
	Vietnam	In place	May-12	Escalante, Socorro
	Chad	In place	May-14	Zina, Yacouba
	DR Congo	In place	Sep-14	(Pedroza, Julio) / Toure ML
EU PHase 2 EU-P2	Guinea	In place	Jun-14	Adzodo, M René
	Mozambique	Light mode	Light mode	De Graeve, Hilde
	South Sudan	In place	Dec-13	Ongom, Moses
	Timor-Leste	In place	01/01/2013	Pandav, Rajesh
			15 July 2016	Castello Francesh, Maria Dolores
	Yemen	National	Aug-14	Nasher, Jamal
	Burundi	In place	Nov-16	Nouhou, Hamadou
	Guinea Bissau	Full mode	Jan-17	Lai, Taavi
	Ukraine	Light mode	Light mode	Pokanevich, Igor
	EU PHase 3 EU-P3	Tajikistan	Full mode	Nov-16
South Africa		Light mode	Light mode	Souteyrand, Yves
Zambla		Full mode	Dec-14	Yao, Théodore
Morocco		Light mode		
Senegal		In place	Aug-15	Fong, Monica
Cabo Verde		In place	Jul-14	Kalambay, Hyppolite
Lux	Mali	In place		
	Laos	In place		
	Burkina Faso	In place		
	Niger	In place		

> 30 long term TA mobilized over 5 years

On average 400,000 USD per country per year

Phase I,II & III (2011-2018)

<i>(in US\$)</i>	Pledged	Spent	Balance
EU Contribution	61,260,426	39,556,301	21,704,125
Luxembourg Contribution	14,149,421	7,239,781	6,909,940
Total	75,409,847	46,796,082	28,614,065

Note: WHO contribution (14%) on top

From a financial point of view...

- ⇒ UHC Partnership is a strong enabler
- ⇒ Coordination and alignment between plans at national, regional and district level is crucial for success
- ⇒ Countries have recognised increased need in leveraging legal frameworks
- ⇒ Civil Society and citizens engagement are important and need to be fostered
- ⇒ In order to leave no one behind, we need to improve on benefit package design

Lessons learned

www.uhpartnership.net



The website

A realist approach to studying the UHC-Partnership

Emilie Robert, PhD | McGill University (QC, Canada)
 Denis Porignon, PhD | WHO (Geneva, Switzerland)
 Valéry Ridde, PhD | Montreal University (QC, Canada)



- Rosters
- Realist research
- Community of practice...
- Country learning programme
- Flexibility and adaptation to the evolving global health landscape

