

Document SC1. UHC2030 workplan 2017 – update on implementation

UHC2030 Steering Committee meeting, Geneva, 15-16 June 2017

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Background

This document presents an update on implementing the UHC2030 workplan for 2017 which the UHC2030 Transitional Committee approved on 12 December 2016.¹

Section I describes the process for developing the workplan in a more participatory process for the next biennium 2018-19.

Sections II and III of the document provide an overview of:

- Different technical working groups established to take forward work around health systems strengthening coordination in some specific areas
- Workstreams around knowledge management, advocacy and communication. A separate document SC2 provides options for discussion to inform the development of the UHC 2030 strategy for accountability.

It is proposed that the Steering Committee uses this document, together with the workplan for 2017, to take stock of progress of work on health systems strengthening coordination and to have an initial discussion of priorities for 2018-19 to demonstrate the value of UHC2030.

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https://www.uhc2030.org/fileadmin/uploads/ihp/Documents/About_IHP_/mgt_arrangemts_docs/UHC2030_transformation/Official_documents_2017/UHC2030_TSC_2017_Workplan_mf.pdf

I. UHC2030 WORK PROGRAM DEVELOPMENT PROCESS

1. Background

The UHC2030 builds on IHP+ legacy and operational processes. However, the UHC2030 has a broader scope and aims at accelerating progress toward the achievement of universal health coverage (UHC) by the year 2030 via the following channels:

- **creating avenues for partners to share knowledge and experience** that will help strengthen their health systems and move towards the goal of UHC;
- **building political will** and sustaining momentum to strengthen health systems, and increase funding for UHC;
- **encouraging stakeholders to track progress, and be accountable for that progress** and advocating for policies that lead to equitable and efficient use of resources for health; and
- **encouraging partners to coordinate their efforts on health systems strengthening (HSS)**. This particularly applies in low and middle income countries with weak health systems, where multiple partners are providing development cooperation to support HSS and increase health coverage.

A consequence of the expanded mandate of UHC2030 is the increase in the membership with new countries, mostly lower middle income (LMICs), and upper middle income (UMICs), who are at various stages of achieving universal health coverage. Civil society and private sector engagement in UHC2030 may also call for specific action. It will be important to identify how the partnership can be relevant to address the needs of new constituents.

The proposed UHC2030 work plan for 2017 was updated in December 2016, on the basis of discussion within the Intensified Action Working Group and multi-stakeholder consultation in June and online follow-up to reflect the transformation of IHP+. However, in the future a more participatory process is expected to characterize the work plan development. The following section sets out the steps for achieving this goal.

2. Key considerations and process

Steering Committee: As expected, the UHC2030 Steering Committee (SC) will provide the overall strategic direction for the work program of the platform every year. Key conclusions of the SC's deliberations and its specific directives or requests on the nature and content of the work program will constitute key areas of focus in the work plan. This will need to take into account inputs from the health systems related initiatives to ensure that UHC2030 promote collaboration and synergies.

Technical working groups: Various technical working groups have been set up under UHC2030 with specific terms of reference, and have or are in the process of developing work plans to address the deliverables specified in their TOR. The activities of the working groups are expected to generate critical value adding work programs and entry points for developing the overall work plan of UHC2030. Each working group will prepare a progress update of its activities to the Core Team and occasionally to the SC as needed. This and

the working group’s work plan will be the basis for determining what activities need to be brought on the UHC2030 work plan.

Unfinished agenda from previous work plan: Remaining items from the current biennium’s work plan will be considered for inclusion in the work plan of the following biennium. This will help ensure continuity and consolidation of activities.

Feedback from partners and related initiatives: An important source information for developing the work plan is feedback from UHC2030 partners and affiliate networks of the platform. Also, requests for programming specific areas from partners and networks, if widely shared by their constituency shall be considered in developing the work plan.

Emerging issues on UHC implementation: As countries strive towards the achievement of UHC by the year 2030, issues will emerge that require the platform to refocus its work program to meet such challenges. The UHC monitoring and the accountability processes to be pursued will be one good source for detecting such emerging issues and patterns.

3. Time frame for work plan development

UHC2030 adopts work plan and budget for two years. Below is the process for developing and reviewing the work plan for 2018-19:

Date	Activity/Deliverable	Who is responsible
June 2017	Review of progress to date and preliminary discussion of strategic directions for 2018-19	Steering Committee
July-September 2017	Consultation of UHC2030 working groups, related initiatives and specific constituencies (e.g. civil society and private sector) to identify priorities emerging from their work	Core Team, UHC2030 partners and related initiatives
October 2017	On-line consultation and discussion with Steering Committee or sub-group of Steering Committee	Core Team
November 2017	Final draft work plan	Core Team
December 2017	Work plan 2018-19 approved	Steering Committee
December 2018	Mid-term review of progress on work plan 2018-19	Steering Committee, UHC2030 partners and related initiatives
June 2018	Review of progress and preliminary discussion of strategic directions for 2018-19	Steering Committee

II. UHC2030 TECHNICAL WORKING GROUPS - UPDATE AS OF JUNE 2017

UHC2030 Technical Working Group: Financial Management

Rationale/Objectives of the working group

Objective of the group: To: (i) promote joint approaches to PFM in health studies; (ii) synthesize and share this knowledge on PFM issues in health; (iii) champion the connections between PFM and health financing (HF); and (iv) facilitate support to the implementation of joint FM harmonization and alignment approaches.

Scope of work

- 1) Identify PFM bottlenecks to health financing and health service delivery, and to the achievement of UHC and advising the Steering Committee on such issues.
- 2) Promote joint FM Assessments and identification of suitable Joint Fiduciary Arrangements in partner countries.
- 3) Identify good practices, synthesize and facilitate sharing of lessons learned from PFM studies and FM harmonization and alignment efforts in the health sector in partner countries
- 4) Review, and if needed revise the IHP for UHC2030 Guidance on Joint FM Assessment
- 5) Other arising responsibilities as decided by the UHC2030 Steering Committee

Work Program and Deliverables by December 2017 (or 2018)

- Facilitate FM harmonization in Liberia
- Facilitate FM harmonization in Sudan
- Update guidelines on FM harmonization and alignment
- Finalize study on cost of unharmonized and unaligned FM implementation arrangements for donor financed projects in the health sector

What has been done so far

- Joint FM assessment conducted in Liberia and implementation action plan approved by the health sector coordinating committee.
- Joint FM assessment conducted in Sudan
- Study on cost of unharmonized and unaligned FM implementation arrangements are conducted.

Remaining Challenges

- Conducting PFM studies in upper middle income countries that have made progress in achieving UHC and sharing lessons learned.

What guidance (if any) is the group seeking from the Steering Committee

Not any specific. But open to any additional areas that the working group should target.

**UHC2030 Technical Working Group:
Support to countries with fragile or challenging operating environments**

Rationale/Objectives of Working Group

- Develop and promote guidance for improved coordination of development and humanitarian partners and other agencies around resilient health systems strengthening in countries characterised by fragility, conflict, emergencies and/or a challenging operating environment.
- Pilot situation analysis and assessment as well as coordination of Development and Humanitarian Partners and support for health systems strengthening in 2-3 countries.

Work Program and Deliverables by December 2017 (or 2018)

- Literature review document on coordination of support and HSS - September 2017
- Case studies, if needed (based on identified knowledge gaps in the literature review) - TBD
- Guidance, including good practices documented with some lessons from harmonised mechanisms, published – early 2018
- Actions in 2-3 countries on improving partner coordination and health systems strengthening, including identifying the key health systems gaps – mid 2018
- Guidance revised based on pilots – end 2018
- IHP+/UHC2030 tools & approaches revised to take into considerations issues pertaining to countries with fragile/challenging operating environments – mid 2018

What has been done so far

- Selection of WG membership and co-chairs have been finalised
- The WG has held four audio conferences.
- Work plan has been finalised
- Based on a call for proposals, Institute of Tropical Medicine, Antwerp, has been selected.

Remaining Challenges

No specific, but in general this is a very diverse and complex field.

What guidance (if any) is the group seeking from the Steering Committee

None in particular

**UHC2030 Technical Working Group:
Sustainability and Transition from Aid and Health System Strengthening**

Rationale/Objectives of Working Group

Objective of the group: To explore roles, responsibilities and opportunities for collaboration among DPs, expert networks and countries **to enhance efforts to sustain increased effective coverage of priority interventions with financial protection, in countries transitioning from aid.**

Work Program and Deliverables by Dec. 2017(or 2018)

- Mapping of policies, definitions and ongoing work by working group members related to transition from aid (Q1 2017)
- Face to Face meeting to present ongoing work and define WG priority areas, outputs and products (Q1 2017)
- Mapping of country perspectives on transition (Q3 2017)
- Development of Issue paper on Sustainability and Transition from Aid consisting of (1) Vision, (2) Pressure points related to transition (Q3 2017)
- Second face to face meeting of the working group (Q4 2017)
- Development of guidance and principles for coordinated TA for specific issues identified (2018)

What has been done so far

- Selection of working group membership and appointment of co-chairs.
- Three online working group meetings have been convened
- Mapping of policies, definitions and ongoing work by working group members related to transition from aid has been completed. (March 2017)
- Face to Face meeting to present ongoing work and define WG priority areas, outputs and products has been held (March2017)
- Preparations for country mapping and issue paper are ongoing.

Remaining Challenges

Not any specific at this point

What guidance (if any) is the group seeking from the Steering Committee

Not any specific. However the working group members highlighted the importance of linkages, when appropriate to the political level through the SC once specific outputs from the group consolidate.

UHC2030 Technical Working Group: Health Systems Assessment

Rationale/Objectives of Working Group

The working group has not yet been established, but the following is suggested: Having consensus on what constitutes a good Health Systems Assessment (HSA) as well as on approaches to carry out HSA jointly would be an important step towards better coordination of Health Systems Strengthening efforts, key to moving towards UHC.

The overall aim would not be to have one single jointly agreed HSA tool, but to have an overview of options for doing a HSA, with guidance to how to arrive at a country-led & country tailored joint process for doing a HSA. This could include:

- Examine existing tools and approaches on health systems assessments
- Examine the pros and cons of the various options for harmonization of HSA
- Agree on what a HSA in the SDG era should entail
- Come to a consensus on how to better harmonize the different approaches
- Agree upon a country led process leading to a joint approach for conducting a HSA

Work Program and Deliverables by Dec. 2017(or 2018)

Yet to be decided but the following would be likely outputs:

- A report on current HSA tools and methods – August 2017
- Face-to-face consultation meeting - mid September 2017
- Report with consensus recommendations on HSA for UHC2030, in terms of options for contents and assessment approaches at country level – end 2017
- Guidance document on process and content of HSA – mid 2018

What has been done so far

- 0-draft report on current HSA tools and methods done
- Planning of consultation in September started
- Discussions on Working Group members started
- Drafting of TOR started

Remaining Challenges

None specific, but creating better harmonization around HSA and maintaining country ownership of the process are both challenging.

What guidance (if any) is the group seeking from the Steering Committee

Views on what would be the desired aim and outputs of this Working Group, as well as suggestions for members. TORs for the working group to be shared with the Steering Committee by end June.

UHC2030 Multisectoral Technical Working Group

Rationale/Objectives of Working Group

- Draw attention to the importance of the health sector taking steps to building capacity for multisectoral efforts for health as part of UHC
- Convene partners to leverage their resources to support country capacity and efforts on this theme, including in country plans for UHC
- Link to efforts in other global partnerships on multisectoral health work e.g. Every Woman Every Child; practice communities (e.g. Health in All Policies; Global Coordinating Mechanism for NCDs)

Work Program and Deliverables by Dec. 2017

Date	Activity
June 2017	Draft TOR and tentative workplan sketched out by co-convenors with working group nominations listed Initial members of working group to be convened via a call (late June) - key output is a draft of the terms of reference for the policy briefs - initial mapping of what group doing on the topic
July 2017	Terms of reference and short-listed contractors for each policy brief finalised by working group and co-convenors
August 2017	Contracts for briefs signed, and development commenced
September 2017	Meeting of initial working group on sidelines of General Assembly in New York or other event Review of first drafts of briefs
October 2017	Meeting of some members of the working group on sidelines of the monitoring action on the social determinants of health meeting scheduled for 25-27 October in Geneva (may only be 2.5 days)
December 2017	Finalisation of drafts of briefs Side-meeting at UHC2030 Annual Meeting in Tokyo Panel with countries to review drafts of briefs Agreement on revised workplan and budget for 2018
January 2018	Finalisation of briefs and dissemination

What has been done so far

- Co-leads have met and defined draft TORs and workplan
- Selection of WG membership in process
- ToR for policy briefs being defined

Remaining Challenges

None specific

What guidance (if any) is the group seeking from the Steering Committee

Views on what would be the desired aim and outputs of this working group, as well as suggestions for members. Terms of reference for the working group to be shared with the Steering Committee after initial call in June.

III. UHC2030 WORKSTREAMS - UPDATE AS OF JUNE 2017

UHC2030 Work stream on Knowledge Management

Summary of the Knowledge Management work stream of UHC2030

1. In alignment with the aims and objectives of UHC2030, Knowledge Management (KM) work stream is expected to find a solution to broker knowledge across HSS and UHC agenda at a global level, including synergies with related networks. The KM work stream also aims to facilitate knowledge and experience sharing among partners and beyond.
2. To this end, KM Working Group (KMWG-see attached draft TOR) is being established to conduct a mapping exercise to develop the strategy on KM to be submitted to the Steering Committee.
3. Initial core group of KMWG (e.g. mainly secretariats of some of KM initiatives) met in DC in April. A second meeting is in the 14th Afternoon in Geneva to invite more country perspectives from KM initiatives, with virtual participation from group members not based in/travelling to Geneva.

KMWG in 2017

KMWG will develop a strategy for knowledge management, mapping knowledge management efforts across partners, identifying UHC2030 added value, priority activities, key partners, opportunities for collaboration and harmonisation, and modalities of functioning.

The knowledge management strategy will include specific considerations for three aspects:

1. Mechanism to broker knowledge across partners, including necessity to establish online channels to access and exchange relevant information;
2. Approach to South-South cooperation and Joint Learning;
3. Opportunities to promote collaboration on the UHC knowledge agenda in line with country; and demand, and promote joint knowledge products among and with UHC2030 partners.

Expected outputs:

1. Knowledge management strategy developed, including mapping of existing knowledge management initiative and relevant information resources around UHC
2. [An early-stage UHC2030 website](#) being launched, including links to partner web portals/websites

Initial list of Core Group members:

- **UHC2030 Core Team:** Somil Nagpal (Senior Health Specialist), World Bank; and Akihito Watabe (Health Financing Officer), WHO
- **Partner network secretariats:** Lydia Ndebele and Naina Ahluwalia (JLN SG support team at WB); Claude Meyer and Helmuth Michael Adelhardt (P4H Coordination Desk); and Michelle Thulkanam (Alliance for Health System Research)
- **Global partner network country members:** e.g. JLN, P4H, HDC

- **Regional Partner network:** e.g. ASEAN+3 UHC Network, Japan-Thailand UHC Partnership Project

Past and Planned activities:

- April-June: Mapping of existing KM initiatives and relevant information resources around UHC
- June: Submission of the synthesis of the initial findings of the mapping exercise to the Steering Committee for information
- July-August: Completion of the mapping exercise based on feedback from SC members
- August – November 2017: Development of the KM strategy based on the mapping exercise, including stakeholder feedback
- December: Submission of the KM strategy to the Steering Committee for approval
- December: Contribution to UHC Forum 2017 in Tokyo (e.g. Health Systems marketplace/knowledge hub)

Knowledge Management Strategy

The synthesis of the initial findings of the mapping exercise for the basis of KM Strategy will be shared with participants of the June Steering Committee meeting for information. The document should be available prior to the meeting.

Framework of UHC 2030 KM landscape analysis:

The stakeholder mapping and KM landscape analysis is being implemented through a three-tiered approach:

1. **Completion of a literature review** to capture lessons and promising practices from (a) previous landscaping exercises and (b) efforts to develop and implement a KM strategy for a network or multi-stakeholder initiative. This review is designed to identify strategic issues and key components that should be considered and incorporated into the KM strategy for UHC2030.
2. **Mapping of KM engagement related to HSS and UHC** to understand better-existing activities and resources and potential synergies among partners. Standard information will be catalogued for each stakeholder organisation for three areas:
 - a. *Scope of KM work*—generation of knowledge services or products, pooling of knowledge resources, knowledge sharing with members, knowledge sharing with external audiences, capacity building, etc.
 - b. *Technical areas* in which the organisation is engaged related to UHC/HSS—Health financing, governance, service delivery, information technology, human resources, population coverage (equity), quality, etc.
 - c. *Methods for sharing knowledge*—closed member portal, public website, annual meeting, social media, a regular newsletter, etc.

3. **Exploration of KM opportunities and challenges** experienced by networks/initiatives identified as key actors for UHC and HSS. Qualitative semi-structured interviews will be conducted with selected networks, partnerships, or initiatives to provide a more in-depth understanding of stakeholders' current KM practices, interest in collaborating with UHC2030, potential areas of collaboration, expectations, and concerns.

KM networks currently being reviewed in the mapping exercise:

The networks and multi-stakeholder initiatives identified for inclusion during the preliminary stage of the stakeholder mapping include the following:

- Alliance for Health Policy and Systems Research
- African Health Information Network
- African Health Management Leadership Network
- ASEAN+3 UHC Network
- Asian Health Information Network
- Asia-Pacific Network for Health Systems Strengthening
- CSO Engagement Mechanism for UHC2030
- Equity Asia
- European Observatory on Health Systems and Policies
- Gavi, the Vaccine Alliance
- Global Health Workforce Alliance
- Harmonisation for Health in Africa
- Health Data Collaborative
- Health System Global
- International Decision Support Initiative
- Japan-Thailand UHC Partnership
- Joint Learning Network for UHC
- International Health Economics Association
- Montreux Collaborative Agenda
- P4H (Global Network for Health Financing)
- Partnership for Maternal, Newborn, and Child Health
- Primary Health Care Performance Initiative
- Prince Mahidol Award Conference (PMAC)
- Roll Back Malaria Partnership
- Universal Health Coverage Day
- Universal Health Coverage Partnership
- WHO Asia-Pacific Observatory
- WHO Country Planning Cycle Database
- WHO Health Financing Advance Course and e-learning course
- World Bank Flagship Course on UHC
- IntegratedCare4People Web Platform

UHC2030 Work Stream on Advocacy

Summary of the advocacy work stream of UHC2030

- UHC Coalition – an 800+ organisation strong Coalition that rallies around health for all – have been actively involved in the UHC movement since early 2014 when they were established by The Rockefeller Foundation in support of Global Health as a secretariat.
- Separately, IHP+ advocacy has focused on promoting adherence to the principles of aid effectiveness in country. The advocacy work stream of UHC2030 aims to build on all these efforts to push for political momentum around a joint vision of HSS for UHC, and to advocate for sufficient, appropriate and well-coordinated resource allocation towards UHC.
- The Advocacy Working Group of UHC2030 (AWG-see attached draft TOR) is being established in collaboration with the UHC Coalition to develop an advocacy strategy, including its workplan 2018-2019, to be submitted to the Steering Committee.
- Under an umbrella of AWG, key advocates for UHC met in Geneva in May. Landscape analysis on key UHC advocacy initiatives and country expectations was conducted prior to the face-to-face meeting.

Advocacy Working Group in 2017

UHC2030 adds value as an umbrella UHC effort by convening diverse partners to strengthen common high-level UHC messaging and coordinate strategies and activities to affect positive change for accelerated and equitable progress towards UHC. It can help to bring together more technical and political partners, bridge advocacy efforts between country and global levels, and leverage planned processes and events as appropriate.

Expected outputs in 2017:

- Develop a UHC2030 advocacy strategy, identifying priority change objectives, stakeholder mapping, key messages, activities, timeline and budget
- Coordinate with communications and accountability workstream for consistent and evidence-based messaging and to identify operational synergies

The advocacy strategy will, therefore, focus on least three pillars:

- Develop and disseminate common and evidence-based high-level UHC advocacy messaging which can be used by all partners
- At the global level, identify long-term advocacy opportunities that all partners interested in UHC can contribute to and coordinate around
- Prioritise a strategic approach to promote and support country-led advocacy initiatives

Tentative list of Core Group:

- **UHC2030 Core Team** (providing the secretariat): Akihito Watabe (Health Financing Officer), WHO; and Anugraha Palan (Commutations Lead), World Bank
- **UHC Coalition Secretariat** (providing the secretariat support): Global Health Strategies
- **UHC Coalition founder**: Rockefeller Foundation
- **Communications experts**: WHO and World Bank communication experts
- **Citizen's Voice and Political Economy group**: e.g. The Elders and WHO Health Governance team

- **Foreign Policy and Global Health Network:** e.g. South Africa and Thailand
- **Emerging voice group:** e.g. International Federation of Medical Students' Associations
- **Health Financing advocacy group:** e.g. Save the Children and WHO Health Financing team
- **Primary Health Care advocacy group:** e.g. Gates Foundation and PAI
- **CSO Engagement Mechanism for UHC2030:** Southern and Northern CSEM representatives

Past and Planned Activities:

- April: Presented a joint vision paper (2nd UHC Financing Forum)
- May: G20 Health Ministers Meeting supported UHC2030 and the joint vision paper
- May: UHC2030 ceremonial signing session & launch of the joint vision paper/ AWG meeting (WHA)
- May-June: Draft the advocacy strategy outline
- June: Submit progress report of the Advocacy stream to the Steering Committee
- June-November: Planning and execution for UHC2030 activities for UHC Day
- June-July: Opportunity for country perspectives to join AWG discussion
- July: UHC2030 side event launching of EDC report and WHO SDG 3 costing (HLPF2017)
- July-September: Consultation of draft advocacy strategy to UHC2030 Partners and other groups
- December: Submit the advocacy strategy to the Steering Committee for approval
- December: UHC2030 will lead on side events, amplifying UHC Day with in-country events, and amplifying the 2nd UHC Global monitoring report launch (UHC Forum 2017 in Tokyo)

UHC advocacy strategy

Outline of the advocacy strategy will be shared with participants of the June Steering Committee meeting for information. The document should be available prior to the meeting.

Summary of landscape analysis for developing UHC advocacy strategy

The UHC Coalition Secretariat conducted **25+ pre-meeting interviews** with AWG members and additional resource persons recommended by the UHC2030 Secretariat. The purpose of these conversations was to gather diverse perspectives on what this UHC advocacy strategy should achieve and how to maximise the strategy's impact. Responses aligned with the following categories:

1) Vision for Success

- Meaningful impact at the country level, focused on supporting local advocates and building sustainable capacity
- Increased understanding of and demand for UHC at all levels
- A "closely-knit UHC community" that welcomes and supports new and diverse members
- Continued momentum in turbulent world; responsiveness to lessons learned
- "Rhetoric to Reality": putting something concrete on paper and getting to work

- 2) Challenges to overcome**
- Disconnect between global and national conversations; not enough engagement with civil society and affected communities
 - UHC is still nebulous and broad to many people; myth of “unattainable.”
 - Fatigue and competing priorities in global health and development communities
 - Demand for short-term results
 - Changing political climates

3) Areas for action	<p>Support national advocacy</p> <ul style="list-style-type: none"> ▪ Support and credit each country’s “UHC warriors” as much as we can ▪ Build up civil society networks and formalise citizen consultations ▪ Celebrate and maximise attention for the “little wins” on the road to UHC ▪ Within UHC2030 vision, ask what gaps are more relevant in each country ▪ Build capacity with training and technical support. Ask “when this advocacy strategy is done, what will remain?” 	<p>Clarify what we’re striving for, and why</p> <ul style="list-style-type: none"> ▪ “No one-size-fits-all approach” does not mean “anything goes” ▪ Ensure no pillar of UHC is ignored (service delivery, financing, governance) ▪ Move from the technical to the political ▪ Always ground the conversation in why UHC and strong health systems matter ▪ Be consistent: “going universal” is possible for all countries, and we must hold high-income countries accountable too 	<p>Coordinate and harmonise</p> <ul style="list-style-type: none"> ▪ Build bridges with vertical issue communities at global and national level ▪ Facilitate country-country learning ▪ Ensure constant communications between HSS, UHC and UHC2030 groups ▪ Stop “reinventing the wheel” and leverage what others have already done ▪ “United we stand; divided we fall” 	<p>Mobilise new assets to make our case</p> <ul style="list-style-type: none"> ▪ Human stories ▪ Evidence demonstrating what strong health systems can do for other issues ▪ Official representation or recognition at the UN level ▪ Accessible materials that make it easy for partners to raise their voice ▪ Platforms to pool resources and forums to keep diverse groups energised ▪ New and unexpected champions, including beyond health 	<p>Seek impact</p> <ul style="list-style-type: none"> ▪ Be “brave” and “innovative” in our strategies; “get political” ▪ Focus on: <ul style="list-style-type: none"> • Countries on the verge of major progress or with the longest way to go • Countries with existing champions for UHC • Opportunistic national milestones or news moments ▪ Feedback loops to improve this strategy over time; hold ourselves accountable

UHC2030 Communication Work

Summary of the communication work

- The Core Team has organized three workshops since January to develop the communication strategy and implementation for both the short and long term. These are:
 - Communication strategy development workshop
 - Branding and identity workshop
 - Website workshop
- The communication strategy is in an early draft form and is currently under review. Early communications analysis and thinking helped to inform the new brand and website. A fully developed communication strategy for a two-year period will be available in the coming months.
- The new UHC2030 logo, brand and identity was developed and launched in May 2017.
- The new [UHC2030 website](#) was developed and launched in May 2017.
- Social media accounts have been updated with the new branding and identity.
- New communications outputs were produced in May 2017 and include:
 - Publication - [Healthy systems for universal health coverage: a joint vision for healthy lives](#)
 - Postcards for general promotion of UHC2030 and promotion of the seven behaviours for effective development cooperation
 - Roller banners for general promotion and communication about UHC2030 as a global movement
 - UHC2030 informational flyer
 - Global compact (in six different languages: English, French, Arabic, Spanish, Portuguese, Russian)

Development of communication strategy

The communication strategy was researched at an early stage through a process of core team participation (including members from WHO and the World Bank) and an online survey of all existing IHP+ signatories. We identified key audiences, initial communication objectives and early key messages and core narrative, in order to develop the content for the website and the communication outputs.

The communication strategy will be fully developed to support the work of UHC2030 in general, including coordination of health systems strengthening, accountability, advocacy and knowledge management. As these areas of work become further developed, the

communication strategy will focus into more definition for each and respond in the most supportive way. Further consultation with UHC2030 initiative will inrom

The next steps of the communication strategy are to:

- Focus on a content development strategy in support of each area of work
- Identify a suite of future key products for the next two years
- Further develop the core narrative and key messages for each area of work
- Articulate the value proposition of UHC2030 and how it works with many stakeholders.

Brand and brand guidelines

The new UHC2030 brand has been developed to give UHC2030 a strong identity in a crowded global health landscape. The brand is intended to be open and accessible yet also carry authority. The brand guidelines are available for professional design purposes. The next step is to develop further guidance to provide to all partners and stakeholders on how the UHC2030 logo and branding may be used in association with other organizational branding.

Website: www.UHC2030.org

The website was launched as a full website in a very short space of time. The emphasis for the site is to be a 'hub' of activity and provide different types of information and opportunities to contribute. With a range of technical information, news, events, documents, partner perspectives and information about UHC2030's work accessible from the home page, it is intended to be a welcoming and friendly site.

There is room to develop the website further with both technical content and more feature stories and experience from countries and partners. Our next steps are to explore these possibilities and seek more feedback from partners and UHC2030 related initiatives about what they would like to contribute.

The old IHP+ website is still online and will remain so until all of the content is migrated or re-directed to the new website. It is clear that the old website is dormant and not updated.

Social media

UHC2030 is achieving a higher profile on social media than before and has the following social media accounts:

[Twitter](#) (over 1100 followers)

[Flickr](#) (photos from all UHC2030 main meetings and conferences)

[YouTube](#) (films from UHC2030 meetings and conferences)

The next steps are to explore how to use social media more effectively and whether other social media accounts (such as Facebook and Instagram) are worth exploring as communication channels.