Scoping UHC2030 work on objective 3: facilitate accountability for progress on HSS for UHC.

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Background to this session

➢ 75 signatories to IHP for UHC2030 have approved four objectives for the partnership.

➢ Discussion on Objective 3.**Facilitate accountability for progress towards HSS and UHC that contributes to a more integrate approach to accountability for SDG3**

➢ Background paper: Stimulate initial discussion in the SC in relation to carving out a role for UHC2030 within the overall architecture of accountability for UHC.

➢ Not direct focus on EDC – important and contributes indirectly to accountability for UHC.

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WB and WHO monitoring framework on UHC

➢ WB and WHO have developed an accountability framework for UHC.

➢ Applied for the first time in the 2015 UHC monitoring report.

➢ Challenges include

  ➢ Sourcing **reliable data** on a broad set of health service coverage and financial protection indicators;

  ➢ **Disaggregating data** to expose coverage inequities,

  ➢ **Measuring effective coverage**, takes into account the **quality** of services and **impact** on health.

➢ Fine-tuning framework is ongoing.

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Monitoring UHC

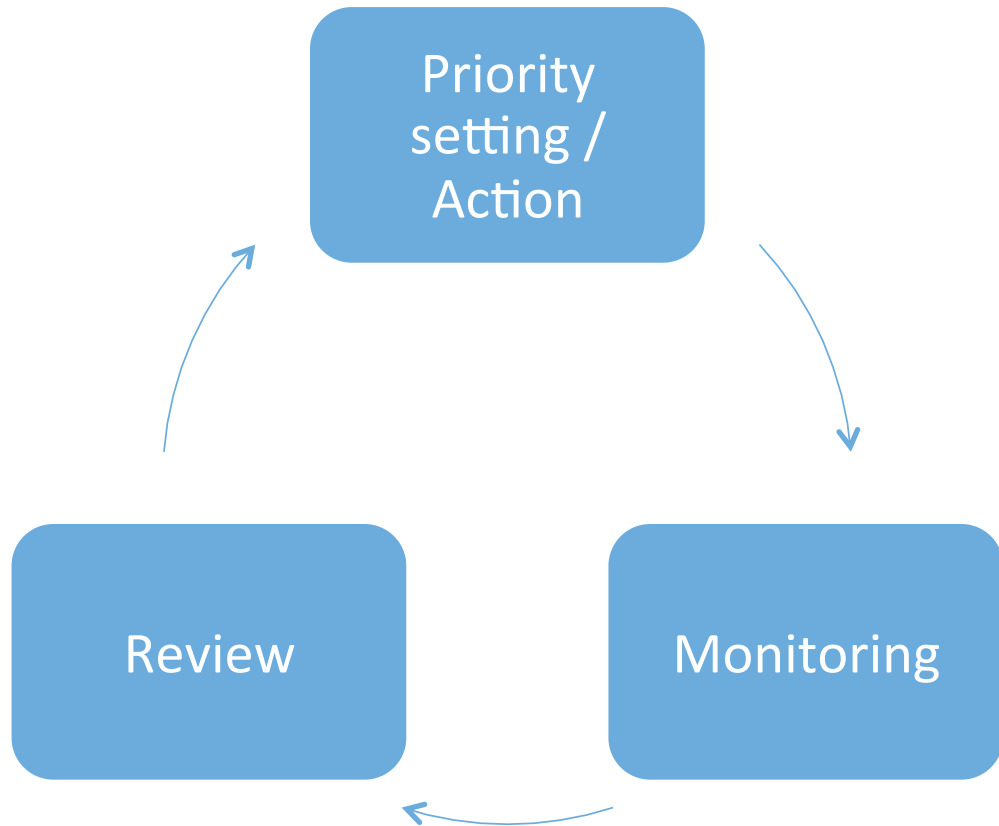➢ The **Health Data Collaborative (HDC)** and partners doing important work

HDC approach is crucial in helping countries improve their health information systems by:

- Supporting countries to **improve their technical and institutional capacities** to generate, analyze and use quality health data and vital statistics;
- **Coordinating existing efforts** and investments;
- **Rationalizing global demand for data** (by focusing on just **100 core indicators**); and
- **Harmonizing tools and guidance**, which should improve the efficiency and effectiveness of partner support to countries

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Accountability for UHC - Considerations

- Accountability for UHC rests with government and MOH.
- Governments receive their mandate from citizens.
- Accountability is rooted in the governance function of the HS
- Keeping in mind "mandate" and "resources" (to carry out accountability role) and principles of transparency and inclusion principles.
- The most widely used framework for accountability in health is rooted in the policy cycle. Priority/action – monitoring - review
- UHC objectives are closely associated with health system goals/outcomes and HS performance but do not replace health system goals such as improved survival or increased life expectancy.

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Accountability for UHC rests with government and MOH. Governments receive their mandate from citizens.

Priority action	Mandate for UHC is delegated to GVT and MOH. They exercise this by setting NHP, targets, reform plans. Complexity of players, need to engage a broad range of actors, link to regional and global
Monitoring	Most countries have some subset of indicators for the HS regularly monitored sometime as part of NHP sometimes not.
Review	Regular review of a subset of indicators for the system, dedicated health system performance assessments, JAR, WHO and other partners helping.

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Does the Steering Committee agree:

➤ that the main **locus for responsibility for UHC accounta**bility rests with national governments, for their domestic actions?

➤ that promoting **EDC is not the major focus of UHC2030 work on UHC accountability** but remains a significant complementary objective in low income countries and some lower-middle income countries, where external finance still plays a role?

➤ that supporting '**social accountability**' by strengthening civil society institutions and other non-state actors who play a role in holding governments accountable is of central importance.

➤ that UHC2030, at global level, should operate:

    ➤ strengthening **political buy-in to best practice on UHC** service delivery, financing and governance?

    ➤ as a bridging for **sharing lesson learning on UHC** across countries, drawing on the work of other organizations?

    ➤ **bridging** coherent communication between **technical and political** discussion fora?

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Possible UHC2030 Accountability Activity
Help develop and help **broaden consensus on good practise** for moving towards UHC
Playing a role to **bridge the gap between technical and political processes**, for example by debates, review and communications around the WHO/World Bank UHC Monitoring Report
Establishing a **central UHC knowledge platform,** aiming to build on and ensure cohesion amongst the multiple other initiatives;
Providing regular opportunities for members for open, transparent information sharing on progress, achievements and challenges – **'soft' accountability through peer review**
Supporting sharing of experience through **dialogue between governments, local authority, CSOs and private sector stakeholder**s on progress towards UHC
Maintaining a **focus on EDC** in aid-dependent settings
Promoting synergies between key actors at different levels and platforms such as the WHA, the Spring Meetings or the AU, while avoiding raised transaction costs
Working **to harmonise accountability work across related HSS and health finance initiatives** e.g. with the Every Woman Every Child (EWEC) process and others.
Facilitate advocacy/other activities by civil society organisations (CSOs), including citizen's voice, professional organisations, and building on others work in this area,
Developing and operationalizing specialised tools, such as scorecards or benchmarks, for use by national and/or regional stakeholders

Which activities in Table does the Steering Committee think are likely to deliver greatest return on investment for making progress for UHC accountability?

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Does the Steering Committee agree:

➢ that the Core Team is tasked to **develop a strategy for UHC2030 role in facilitating accountability for UHC** within the SDG framework by end 2017, working with **a group of experts**?

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