



Policy dialogue makes it happen!

An EU-Luxembourg / WHO collaborative agreement towards UHC

5th Anniversary Annual Meeting

CELEBRATE – SHARE – INNOVATE

Brussels, 21-23 March 2017

Intro

...Or where are we coming from?

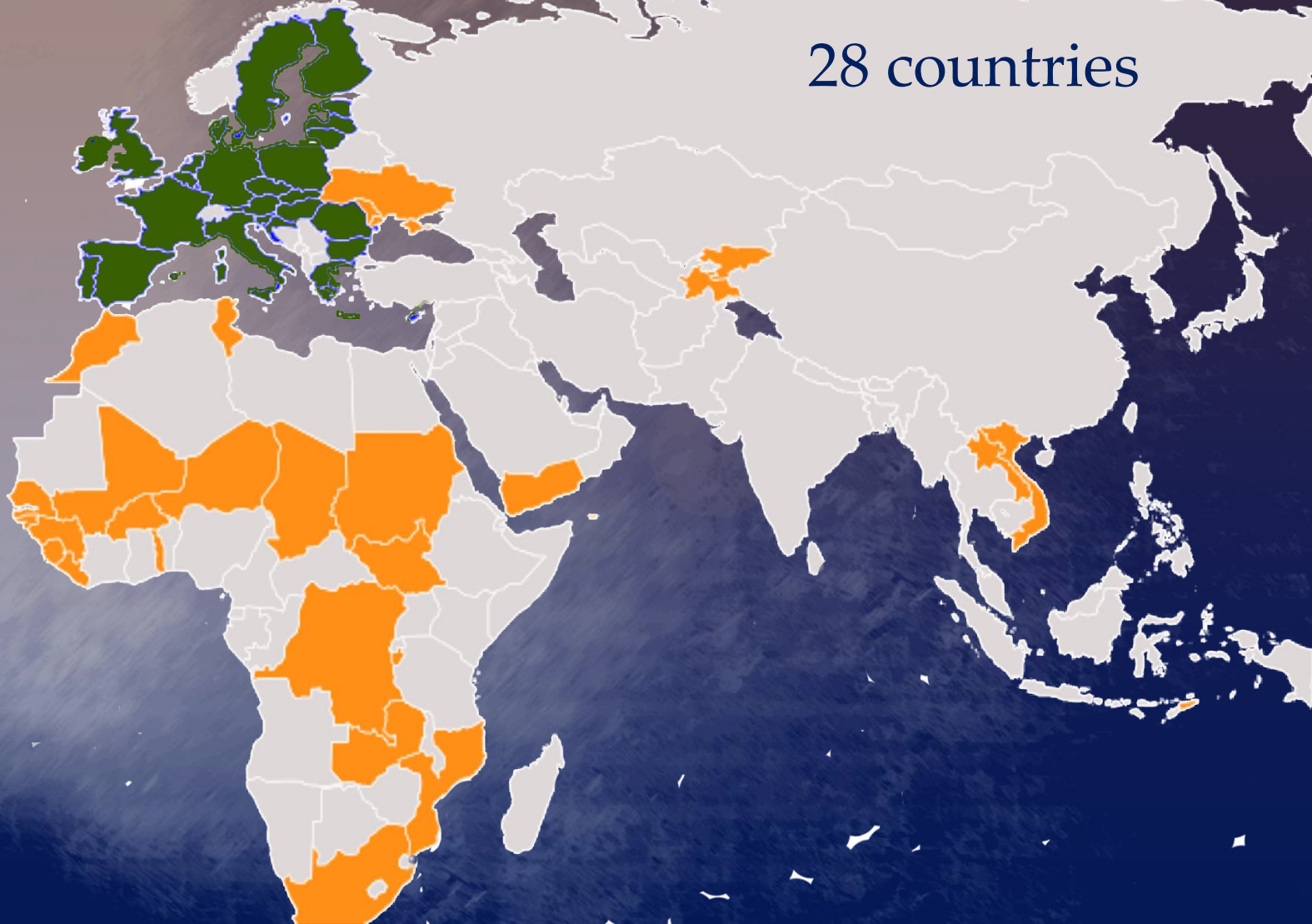
- ❑ The UHC-Partnership country-led identification process
- ❑ Comprehensive approach to UHC is key and that MoHs should take a significant share of the leadership together with WHO
- ❑ Better shape partners' interventions at country level towards effective development cooperation
- ❑ Balance between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



Celebrate

...Or what did we achieve?

28 countries



UNIVERSAL HEALTH COVERAGE PARTNERSHIP ROADMAP ACTIVITIES IN 28 TARGET COUNTRIES



Strategic Objectives																											
Key Activities																											
Implementation																											
Monitoring and Evaluation																											



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

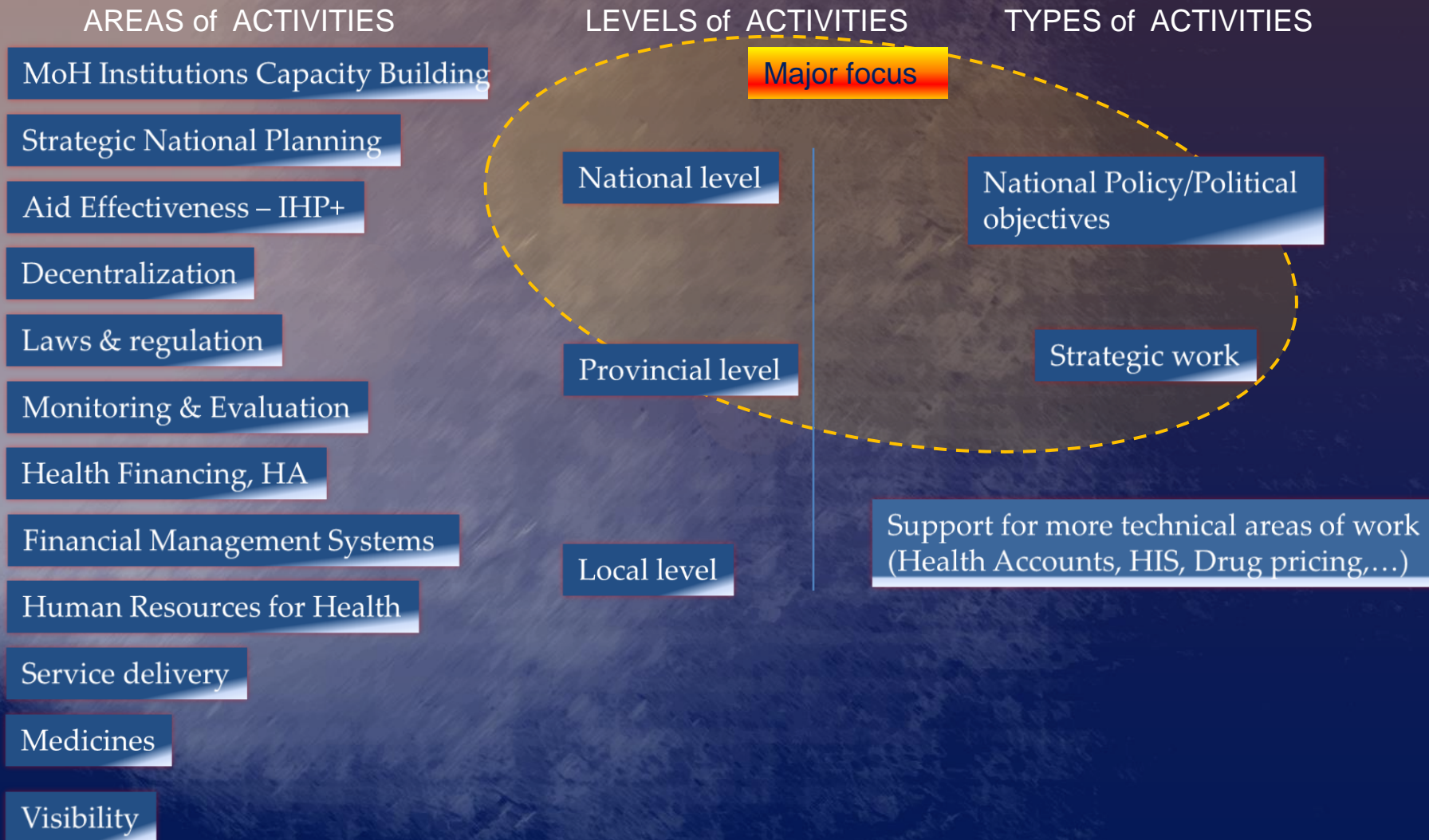
Directorate for Development Cooperation
and Humanitarian Affairs

Roadmaps: *hundreds of activities*

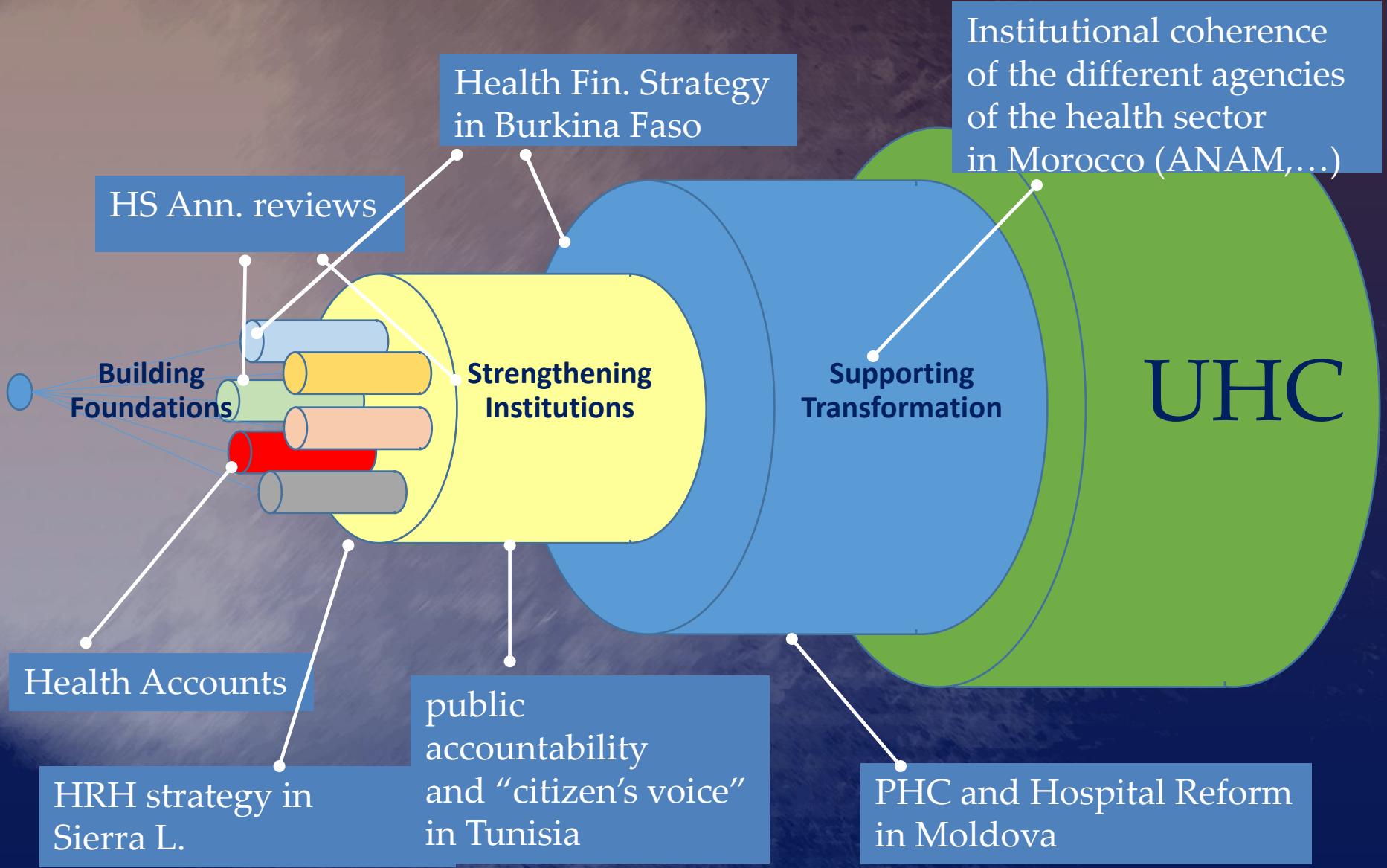


Activities: *around 14 areas of work*

Major areas of work



Health System Development Towards UHC : the FIT approach



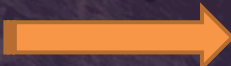
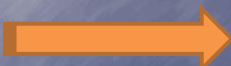
- ❑ Country learning programme
- ❑ Global UHC course for francophone countries
- ❑ Global Advanced WHO health financing course (in English),
- ❑ Scientific publications: BMC series on policy dialogue (AFRO), others at regional and country level
- ❑ Support to Country Cooperation Strategies
- ❑ Collaboration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

And also...

- A multitude of global products for HF advocacy and policy guidance
 - Fiscal space analysis
 - System wide approach to analyse efficiency across health programmes
 - Health financing country diagnostics (available in English and French)
 - Series on state budget transfer arrangements in Asia, European countries and Latin America for extending coverage to people in the informal sector
 - Ongoing work on a guide to assess demand-side barriers to health care for people in the informal economy

- Dozens of missions (HQ and ROs) in countries for launching the programme and following up on activities

And also...

- UHC-P and WHO reform: from country focus 70% of the resources are at country level  G7 – G20
- The role of the country office: better positioned to fulfill its mandate with MoH and partners
- Collaboration between the 3 WHO levels
- Collaboration with the EU Del. and Lux Represent.
- Evaluation: internal integrated evaluation of HGF department (WHO), ROM, external evaluation (KIT), and verification mission (June 2017)
- Reorganization of the HGF department in HQ around *@theams*
- IHP+  IHP+ for UHC 2030

Other aspects...

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

> 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

- ❑ There is a need to strengthen the governance and stewardship of health purchasers in respective countries
- ❑ UHC Partnership seed funding has aided in attracting core substantial funding
- ❑ Agencies: better harmonization and alignment!
- ❑ Flexible funds to add activities according to MOH interest and priorities
- ❑ It is instrumental to ensure the way forward by enhancing support on the implementation side

Lessons learned

Share

...Or how do we show it?

www.uhpartnership.net



The website

Publications Highlights



Strategizing national health in the 21st century: a handbook

WHO has been one of the leading organizations that support countries in the development of health policies/strategies/plans (NHSPs). In recognition of the benefits of a written national health sector in a written participation, analysis and evidence of the 123 countries' plans and those countries' plans and evidence, creating a need for technical support from the Organization.

Given this demand and the wealth of NHSPs, Strategies, a handbook and practical

EU-LUXEMBOURG-WHO
UNIVERSAL HEALTH COVER

4TH ANNUAL TECHNICAL MEETING
REPORT | BARCELONA, SPAIN

Universal
Coverage Partnership

POLICY DIALOG
makes it happen

HORS-SÉRIE | JANVIER 2017

La recherche francophone sur les politiques et systèmes de santé dans les pays à faible et moyen revenu

Compte-rendu du Colloque Post-Vancouver 2016.

CAHIERS
REALISME

RECHERCHES APPLIQUÉES
INTERVENTIONNELLES
EN SANTÉ ET ÉQUITÉ

www.equitesante.org/chaire-realisme/cahiers

October 2015

L'engagement du Grand-Duché de Luxembourg pour la couverture sanitaire universelle à travers son partenariat avec



Republic of Moldova
Health Policy Paper Series No. 16

Framework for addressing

THE EU- LUXEMBOURG- MOLDOVA UNIVERSAL HEALTH COVERAGE PARTNERSHIP

World Health Organization

Strategizing national health in the 21st Century: a handbook

Chapter 1: Population consultation on needs and expectations

Chapter 2: Situation analysis of the health sector

Chapter 3: Priority-setting national health strategies and plans

Chapter 4: Strategic planning and transforming priorities into plans

Chapter 5: Operational planning: transforming plans into actions

Chapter 6: Estimating cost implications of a national health policy

Chapter 7: Budgeting for health

Chapter 8: Monitoring and review of health policy strategies and plans

Chapter 9: Law, regulation and strategizing for health

Chapter 10: Intersectoral planning for health and health equity

Chapter 11: Strategizing for health at sub-national level

Introduction

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health national development



Small, mai 2016

Comisă Națională de Protecție de la Protecția Sociale

Cele două țări vor continua să lucreze împreună în cadrul parteneriatului UE-Moldova pentru a realiza obiectivele Strategiei Naționale de

SHIP
MARCH
2016

JE
u happen

- ❑ Annual meetings
- ❑ Annual reports (2012-2016)
- ❑ Scientific conferences (Vancouver,...)
- ❑ Stories from the field (*see website*)
- ❑ Special events: EDD, WR meetings, Devco days,
- ❑ Country specific events to launch the UHC-P (in most of the countries)
- ❑ Country specific material: Moldova, Tunisia, Vietnam, Togo, Guinea, Ukraine,...
- ❑ Twitter, cartoons,
- ❑ You Tube



Others...

Innovate

...Or where room for improvement matters



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



So What?

...Or what are the implications for the next 3 days?

- ❑ 7 working sessions over 3 days
- ❑ At least 24 working groups in French and in English addressing > 15 key areas of our work
- ❑ Many opportunities
 - ❑ to bring country success stories up front,
 - ❑ discuss challenges and constraints and
 - ❑ envisage new ways and energies for MoHs, WCOs and partners to be at the centre of their country's health system agenda

Have a nice week!