

## Minutes

### P4H Technical Coordination Group Meeting

5<sup>th</sup> October 2011

Swiss Development Cooperation, Bern, Switzerland

#### Participants of Technical Coordination Group meeting:

- **AfDB, Tunis:** Fabrice Sergent
- **BMZ, Germany:** Sascha Reeb
- **GIP SPSI, France:** Gwen Dhaene
- **GIZ, Germany:** Jenni Kehler  
Viktoria Rabovskaja
- **ILO, Geneva:** Xenia Scheil-Adlung
- **SDC, Switzerland:** Debora Kern  
Andreas Loebell
- **WHO, Geneva:** Joe Kutzin
- **World Bank, Washington:** Irina Nikolic
- **P4H Coordination desk:** Claude Meyer

**Excused:** H       Barroy (MAE France), B         Brusset (AFD France), Sergio Galan (AECID Spain) and Michael Adelhardt (CD-P4H)

#### 1. Welcome remarks and confirmation of agenda

New persons welcomed: Holger Thies will replace Jenni Kehler (GIZ)  
Agenda was confirmed.

#### 2. Follow up from last TCG Meeting

- P4H Conferences:
  - Have been postponed probably cancelled.
  - There was an agreement that the process of decision making was not efficient, however many conferences are planned on this subject by other stakeholders.
  - WHO and French Ministry of Foreign affairs will discuss in December on conferences' financial aspects.

Agreement: P4H should be more visible at global level.

**Next Step (after PMAC): To organize a Side Event on the next WHA. Lead: Switzerland/WHO**

- Country support of P4H will be dealt with today.
- Teleconference on role of the WB regional hubs took place, minutes have been circulated. Work closer with reg. hubs of WB in future.
- ToR of the P4H-CD have been circulated as well
- P4H-CD division of labour document still needs to be sent to members
- P4H Manual. Certain modules of the manual will be discussed in this meeting
- Communication:
  - There was an agreement that a more regular update of the Website is needed.
  - WHO finalized three of the Success stories (will be sent to FP).
  - Leaflets – communication: WHO is bilaterally evaluating their need for support for leaflet and then communicate to Gwen (offer support). Priority: Update leaflet and website with new members

### 3. P4H events: PMAC Conference 23-28 January 2012

- A P4H meeting at global level attached to PMAC is planned.
- Official P4H side event planned for 23<sup>rd</sup> January, organized by France and WHO with national stakeholders (30 people from 6-8 countries). Suggestion from the Group: To broaden the audience in order to make the P4H network more widely known.
- List of all invitees will follow in November.
- There is a possibility to cover travel costs by P4H.
- Next TCG-Meeting shall take place at Bangkok (Monday 23 afternoon/evening), however as not all will attend, another TCG and SG meeting will take place during the WHA 2012.

### 4. Update on country support

- P4H country support document: The Coordination Desk asked each member organization to summarize their vision of the P4H country support (process and role). This exercise shall serve as a basis for a document on the same subject that will be provided for the Bangkok meeting. Agreed procedure: CD prepares outline and sends it to P4H member- they fill it in until end of November. A discussion on the consolidated product will take place during the next meeting (differences, same understanding).
- Countries update:

**Germany:**

Bangladesh will become a country of intervention for P4H

Rwanda. Germany and WHO/ILO support ongoing, funded by SDC. Action point: We need more regular exchange to avoid delays, telephone conference through the coordination desk.

Kenya: P4H request from MoH (sent to WHO) beginning of September asking for reviewing the draft health care financing strategy. Action: exchange in coming weeks.

India: Not yet a P4H country but GIZ asked the other P4H partners for support in designing an evaluation, especially WHO. Action: Conference call.

Tanzania: A lot of activities ongoing, by long term advisor funded by SDC. Focus on health financing strategy as well as of regulatory study. Study tour planned. Issue: low ownership within the MoHSW.

Mongolia: Process on health insurance ongoing, GIZ Mongolia together with WHO experts prepared proposal to get support from P4H to develop strategy for Mongolian health insurance. Proposal will be shared soon. SDC open to fund some elements: WHO HQ involvement. ILO is also very active in Mongolia with Ministry of Social affairs and offers cooperation from the global level. Germany and ILO will bilaterally see how to integrate the ILO experience.

Cambodia: GIZ suggest visits of P4H coordination desk to support the development of the health financing strategy.

Philippines. P4H counterparts are WHO, WB and EU. Technical assistance plan from donors exists. Political pressure to reach universal coverage until 2013, not clear if roadmap is meeting the target. Cooperation between MoH and MoF has to be improved to be visible in the action plan. Action: To discuss with the coordination desk how to move forward.

Leadership on universal coverage has been handed over from WHO to WB (300 Mio loan to Govt.). WB has a key role in network. Cooperation needs to include all programme partners in the Philippines beyond P4H partners

**France:**

Mauritania: Collaboration with Spain.

Cambodia: Coordination with Germany needed. Mission to Cambodia planned in November.

Chad: Funded by France and WHO, good process, local platform in the process of being set up, good country example. Action: To make this platform active on the ground. SDC is interested to continue cooperation and funds would be available.

Senegal: Request sent to WHO for supporting the national UC roadmap. Selection of activities to be supported not sorted out yet. AFD suggests asking P4H group for prioritization. GIP SPSI is working already in Senegal: finalizing cooperation agreement regarding social security code and social health protection. Ministry of Labour approached GIP SPSI to be included. P4H will receive formal funding request to support health insurance fund.

The coordination desk states that more comprehensive approach among partners is needed. Review of support plan and support of different partners needed, (different pillars funded by Belgian, USAID and others). WHO has agreed to take over the voluntary health insurance part.

Togo: Mission between P4H partners took place. French involved in health sector but not in health financing. French agencies open to start dialog in health financing. ILO is also active in Togo on social protection, and made already assessments. France and ILO will bilaterally sort out synergies for cooperation at country and global level. Claude: Good collaboration with ILO and a clear contribution of ILO into the roadmap.

Vietnam: Designing first old age master plan, providing support to social security (e.g. cost recovery) Action: Need for discussion between ILO, WHO, GIP SPSI.

Haiti: France was already involved in health financing activities and is asking P4H members if someone else is interested. Joe is identifying a contact person in WHO.

#### **SDC/Switzerland:**

Bénin: The Coordination desk had already exchanged info with an SDC collaborator in Benin who is well connected to the MoH. Until now, no formal request. ILO informs that they have done some costing studies and an assessment with the Social Protection floor.

#### **World Bank:**

##### South Asia Region:

Regional level: Regional High level forum June 2010. P4H was part of it.

Maldives: Country workshop on health financing April 2010.

India: Work under the joint learning network. Sets of activities planned.

Bangladesh: as GIZ already reported, joint workshop ongoing

Sri Lanka: Follow up of High-level meeting. Request for P4H support.

AFRICA: Africa hubs: readiness to provide technical support on the ground.

#### **WHO:**

Highlights: Glion Action Plan on Universal Coverage is now approved internally and has been circulated to partners. It is largely about country supports, this is not only a Geneva but a country activity. Is a WHA resolution on this action plan needed? Joe will find out about the process (need to include regional offices) and communicate.

Nepal: Just back from mission, not yet a health financing strategy. Information sharing on the ground, no clear health financing strategy, what is needed is a national plan and not selected activities.

Jenni: GIZ local office active in setting up cooperation with WB. Last 2 visits of WHO were not properly announced in the country. Harmonization and inclusion of all partner is very important.

Uganda: Concerns about the Government approach. The agenda is so far about focusing only on formal sector. IHP+ country, German funding of P4H activities.

#### **ILO:**

International Labour Conference 2011 endorsed the Social Protection Floor (SPF) initiative and committed to provide support to countries.

ILO worked out some preliminary country profiles on SPF: Benin, Togo, Armenia, Indonesia, Vietnam, El Salvador, Vietnam, Nepal, Rwanda, and Thailand. There are some more countries in the pipeline. Any comments on this list are welcome.

ILO prepared a set of joint coalition papers (including the health sector) which will be shared.

ILO has been working with WHO on the preparation of the Social Determinants of Health Conference in Rio, Brazil (October 2011).

#### **African Development Bank:**

The AfDB joined P4H recently after the formal approval by all the Steering Committee members. However, a P4H-CD official mission has still to take place to clarify the mode of cooperation between AfDB and the network.

AfDB in health sector: was not a priority in the last 5 years (coping and survival strategies). But this changed recently, with a strong focus on health financing. AfDB is currently designing a human development strategy, with inclusion and value for money very prominent in the agenda. AfDB will do more in the future on health

financing. Presently, there are no specific countries yet, but discussions are going on with South Africa, Namibia, Botswana, Egypt and Cote d'Ivoire.

Next week, an AfDB mission is scheduled in Ivory Coast on budget support and health financing. AfDB is lacking human resources, but 3 economists will be recruited and a person dealing with health insurance and social protection.

Coordination Desk to draft action points for each country: who does what? What has been shared in order to monitor progress?

## 5. Functioning of P4H

### a. Capacity Development for SHP:

See Power Point Presentation prepared by the CD (distributed and annexed)

- WHO course: Barcelona course and flagship course are alternative courses (one year this, one the other), there is not so much the willingness of combining.
- ILO: broader concept of CD than WHO; extended to institutions, Funding for Master course missing
- WB: capacity development as integral part of all our activities. Working outside of the WB programme; as Joint Assistant Network
- Health Insurance Fund, now UNICO (universal coverage) challenge fund: Gates Foundation is interested in this, WB highly involved. Readiness Assessment Tool (RAT); is part of the UC challenge fund; simple working tool as the “doing business” tool. Component of cross country learning; comparative studies, Dissemination of results within the next year, Start next year, phase 1
- After a long discussion, Agreement that: systematic approach needed, agreement on the concept with ILO additions

Next steps: GIZ and CD can continue to work on this.

### b. SHP Success Stories update: French Grant to WHO

The three of the success stories should be ready by October 21<sup>st</sup> for the G20 Summit. A total of 12 shall be ready for the PMAC. Logo of P4H will be there. All partners will receive examples.

**c. P4H monitoring and evaluation (see presentation)**

- Objective: impact of such an initiative
- The Steering Committee asked for M&E
- Set up indicators in order to be in line with the network character, and with the P4H network objectives

Discussion and comments made. Next steps: to finalize the document within the 1<sup>st</sup> quarter of 2012; then submit for approval to TCG.

**6. Expansion of P4H:**

**a. Spain**

There has been a meeting 10 days ago in Madrid about their involvement and contribution. Claude prepared Minutes and will send them out to all of us.

Points discussed:

- Small budget on TA on their own activities in SHP: Comprehensive review of Spanish institutions active in SHP planned.
- This review will be used to generate funds in order to get more money for P4H
- Mali; interested in being part of the scoping mission in Mali, being part of the road map process etc.
- Maybe other opportunity in Mauritania
- Health sector involvement in Niger, could be as well an opportunity

They will work mainly on country support, where they are active in the health sector.

Spanish will not be part of the Steering Committee, but only of the TCG.

They could not participate in this TCG meeting because of time constraint; they will attend the next TCG meeting.

**b. European Union**

Meeting took place in Brussels (End of July), together with David Evans from WHO.

There has been a commitment at the global level (EC Commission) to fund activities that are implemented mostly by WHO, but as well under the umbrella of P4H. They consider this support as one and do not want to separate the support between WHO and P4H. The EC financial support will be channeled from the budget line "Investing in People" to support the Glion action plan.

More information will be circulated once they have agreed to be part of P4H at global level. They are already interested to be involved and liaise with them systematically at country level.

**c. AfDB**

Discussion in May 2011, Interest of AfDB

AfDB have been approved by the Steering Committee members. There is a need for a meeting in terms of their contribution, the resources and their engagement in P4H as soon as both sides have time.

**d. Thailand**

There have been discussions how Thailand could collaborate with P4H. Thailand is mostly working with its national institution (IHPP) in order to give TA to other countries. This approach has clear limitations but more discussions of the advantages / limitations of including Thailand in the network should be held.

**e. Others (UNICEF)**

UNICEF is very active in the broader area of social protection in Africa. Even in SHP. The CD proposed to approach them to see if they could be interested to join the P4H network and how.

AfDB proposed to approach regional economic communities as potential partners.

**Next meetings:**

**Next Technical Coordination Group: Bangkok, 23<sup>rd</sup> of January 2012, afternoon**

**Following Steering Group + Technical Coordination Meetings: in the week of the WHA, 21-26 May 2012**