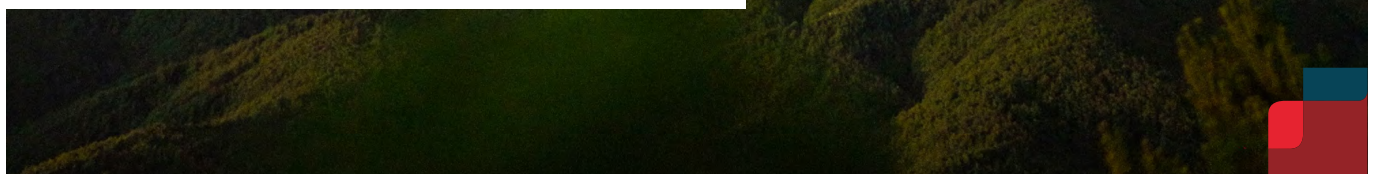




Annual review

2018-2019



No UHC without PHC

“I invite P4H members to step towards more integrated collaborations”

Despite the different political and economic landscapes, as well as a variety of health systems models and organisations across the world, all governments agree that the gap in universal health coverage is a goal worth multi-stakeholder effort for a period until at least 2030.

While sharing this common vision, it is logical and practical that countries, development agencies and academic institutions are joining to share local knowledge and experiences in order to leverage efforts in progress towards UHC.

Kazakhstan was the birthplace of the Alma-Ata Declaration on PHC in 1978 that proclaimed the right of everyone to access health care through a strong, community-based, government-supported primary health care to achieve health for all.

Forty years later, in October 2018, has had the privilege to co-host together with WHO and UNICEF the Global Conference on PHC where Astana Declaration on PHC was adopted by all Member States of WHO. The discussions that are taking place globally are about strengthening primary care so that UHC becomes a reality – “No UHC without PHC”.

As Kazakhstan joined the Steering Committee of P4H Network in 2017, the fruitful collaboration already produced some events in Kazakhstan such as a joint international conference on Health Financing in June 2018 and the implementation of one module of the Leadership for UHC module in June 2019. On the top, Kazakhstan participates in online via Platform or abroad joint P4H events like in Sri-Lanka, Japan, Russia, and France.

The main benefit of the network for us is the rapid access to professional peer expertise while respecting each country's preference for financial model and political views and values. I invite P4H members to step towards more integrated collaborations.



Dr Ainur Aiypkhanova
General Director
Republican Center for Health Development
Ministry of Health, Kazakhstan

Overview: A year of transformation

P4H is the global network for health financing in support of universal health coverage (UHC). The network supports the health-related Sustainable Development Goals (and the topic of health financing for reaching the UHC targets specifically). It is a growing and evolving network since 2007, connecting development partners, international organizations, countries, institutions and individuals committed to health financing and social health protection for UHC. Currently, it connects 15 bi-multilateral institutions at global, regional and country levels and more than 1300 professionals working in 35 countries. More information is available on the P4H digital platform www.p4h.world.

In October 2018, the P4H Steering Group (SG), which was expanded with representatives of institutions coming from countries such as China, Kazakhstan, Korea, Morocco, and Russia agreed to the updated value propositions and guiding principles of P4H work.

The decisions and action points adopted during the SG meeting in October 2018 stimulated network activities, and collaborations beyond its traditional boundaries because of increasing interests of institutions and individuals working across health, finance, social and other relevant sectors to tap into the services offered through the P4H network. The P4H Web platform is being actively used as a primary work space for these collaboration as evidenced by the continuously increasing number of users engaged across the knowledge, country or product working areas.

Its breadth and depth of functionalities attracted interests from other global health system related and topics specific networks such as the Global Health Workforce Network, the Social Protection Action, Research and Knowledge Sharing (SPARKS) network and the Global Health Hub Germany. In accordance with its

mandate, P4H offered and provided technical guide to replicate its web format and functions upon their request, as well as to mentor newly created Networks in order to set up their framework of operation.

As of June 2019, nine global sister networks are using the same P4H Web format with their own visual identify. The latest launch was successful launch of the DECIDE Health Hub in June 2019. DECIDE is the global health network for support to decision making in the fields of health economics, priority setting, HTA and benefit packages design.

The global environment in which P4H is working is evolving. At the global level, the UN launched the Global Action Plan with 7 Accelerators to make progress on SDG 3 and the first of these accelerators is centred on sustainable financing for health. It aims to act as a tool to connect and align strategies for health development. Currently, 12 agencies committed to work together by translating commitments into practice accelerating progress towards UHC and related SDGs targets by developing the Global Action Plan (GAP) officially launched on the occasion of the United Nations General Assembly in September 2019. The Sustainable Financing Accelerator is co-lead by the World Bank and The Global Fund, two member organisations of the P4H Network. Other member organisations such as WHO or the GFF are also part of this Accelerator.

Naturally, P4H has been at the centre of the discussions to structure the work and activities of this Accelerator and ensure that it could build its success on the existing initiatives, first and foremost the P4H Network set up by its member organisations. Documents summarising the outcomes of the strategic discussions with the partners

As of June 2019, nine global sister networks are using the same P4H Web format with their own visual identify.

P4H at the centre stage

P4H is a global network dedicated to health financing and social health protection in order to progress towards universal health coverage.

It favours a multidisciplinary approach to empower health, social and finance-sector policy makers through insight and knowledge brokerage, technical assistance co-ordination and policy dialogue advocacy.

P4H is committed to promoting health systems strengthening, equitable access to quality services and financial risk protection. The P4H network supports the health related SDG and the UHC target specifically.

The Network comprises a broad mix of international partners and investors in Universal Health Coverage with different mandates, purposes, comparative strengths, and sector affiliation.

P4H combines the normative and technical support with the political commitment, financial contributions and wealth of expertise and experience of its member organisations to help national and international stakeholders progress towards Universal Health Coverage.

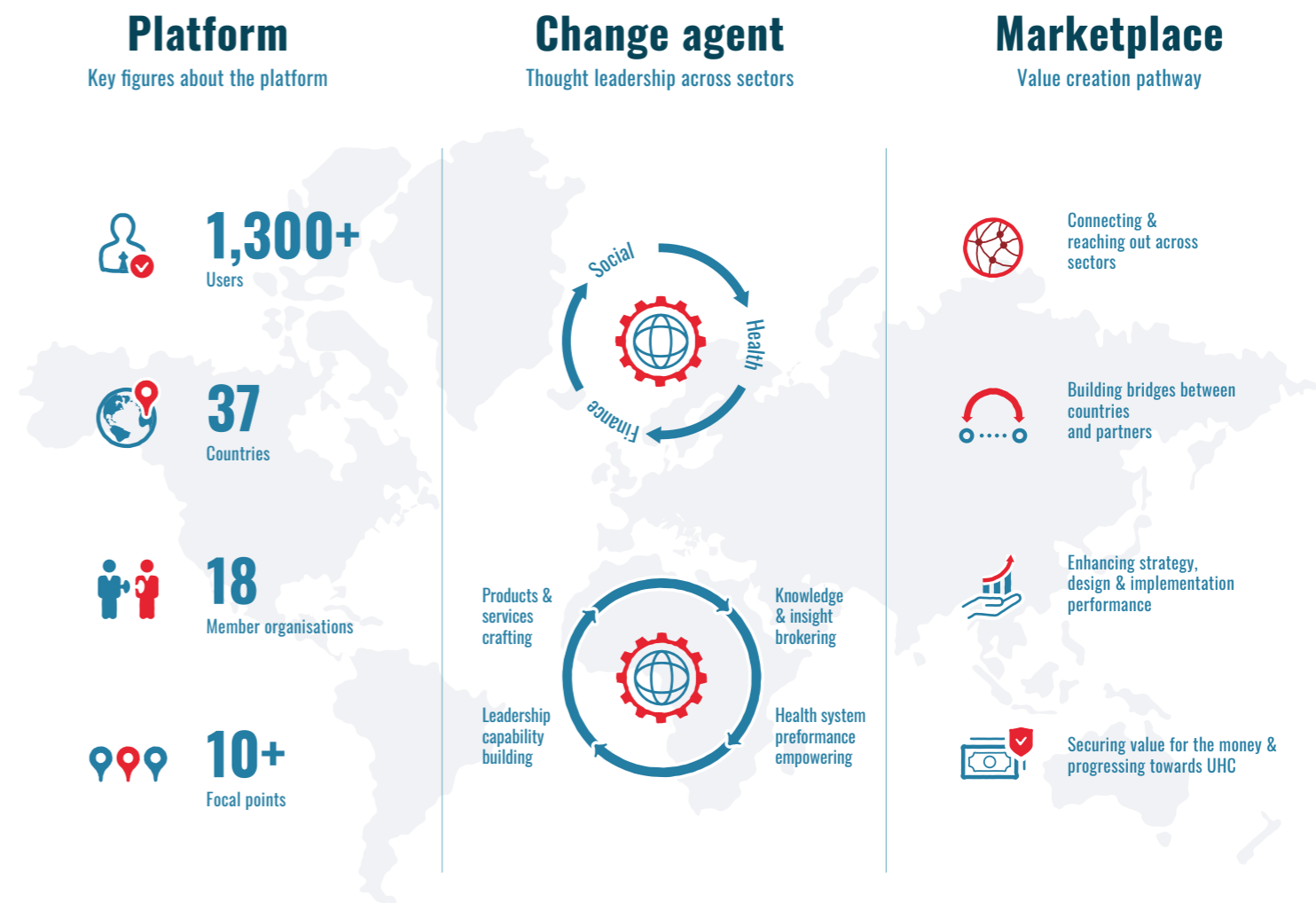
The P4H Network aims at co-producing and sharing Knowledge; brokering relationships between health, finance and social sector professionals; manage country-collaborations; and develop products and services to progress towards effective Universal Health Coverage.

Logos and name of member organisations

	World Health Organization (WHO)		China - Shanghai Fudan University School of Public Health
	International Labour Organization (ILO)		France - Ministry of Europe and Foreign Affairs
	World Bank Group		Germany - Federal Ministry for Economic Co-operation and Development
	Asian Development Bank (ADB)		Kazakhstan - Centre for Health Economics
	African Development Bank (AfDB)		Morocco - Minister of Health
	The Global Fund		Russia - Russia Center for Healthcare Quality Assessment and Control
	Global Financing Facility (GFF)		South Korea - Seoul National University School of Public Health
	Council of Europe Development Bank (CEB)		Spain - Spanish co-operation agency
			Switzerland - The Swiss Agency for Development and Co-operation (SDC)
			USA - United States Agency for International Development (USAID)

P4H Network

Health financing for Universal Health Coverage



P4H works as:

A unique congruent space between health, social protection and public finance, connecting sectors which need to be involved when a country strives for UHC.

A hub for knowledge and insight at global level (amongst member organisations) as much as at local level (thanks to an unparalleled network of P4H Focal

Points) which partners would have difficulties garnering without relying on the P4H impulse;

The mainspring for a tangible change in the country co-operation and co-ordination methods in health financing, leading to more catalytic connections between stakeholders.

A year at a glance

P4H ACTIVITIES: STRONG MEMBERS' INVOLVEMENT

Universal health coverage (UHC) is on the highest development agenda throughout Asia. All countries have potentials and opportunities to make progress by improving overall health system performances. One of the potential areas of improvement is the collaboration across public and private sectors. Although, the private sector plays an important role in both financing and delivery of health services in many Asian countries, the question of the alignment of these stakeholders with health system wide goals and objectives remains a pending challenge in some countries. This issue was raised by two WHO Regions for South East Asia and the Western Pacific. It stimulated further discussions with regional institutions to unfold the potential of private

sector participation in health financing. Because of the relevance and importance of the topic, the Fudan School of Public Health proposed to host an expert meeting in Shanghai. As two member organisations expressed interest in this event, it was organised as a P4H activity. It will take place in the second half of 2019 aims to reinforce policy and decision makers' understanding of the private sector potential and practical actions and options for its participation in health systems financing for UHC. The outcome of this unprecedented meeting which will gather around 30 professionals working across areas of the private sector in health will be the production of recommendations to bolster policy makers' stewardship of the health sector.

KAZAKHSTAN

The Republican Centre for Health Development, Ministry of Health which is the P4H partner institution in Kazakhstan is actively involved in P4H work. The Center played a key role in organizing the Global Conference on Primary Health Care organized in October 2018 that adopted the Declaration of Astana in the spirit of UHC and SDGs. The Conference stressed the need for universally accessible promotive, preventive, curative, rehabilitative services and palliative care. The Declaration called on all countries to continue to invest in health to improve health outcomes and address the inefficiencies and inequities that expose people to financial hardship resulting from their use of health services by ensuring better allocation of resources. It also reaffirmed the primary role and responsibility of Governments at all levels in promoting and protecting health and multisectoral action for UHC engaging relevant stakeholders. In September 2018, representatives from GiZ, SDC and the P4H Coordination Desk had a joint mission to Astana to discuss P4H collaborative framework with Kazakhstan. There are 3 main areas of collaboration, namely health financing, health economics and social health protection were identified. Further major issues and collaborative actions have been discussed and

identified under each area. The draft framework was presented to above mentioned agencies in November 2018 during the study tour organized for 5 high and mid-level officials from Kazakhstan to Germany to familiarize with implementation of social health insurance. GIZ and SDC supported this activity in conjunction with the plan to start mandatory national health insurance in Kazakhstan from January of 2020. The Republican Center agreed to host the second module of the P4H Leadership program for UHC that took place from 10- 14 June 2019 in Nur Sultan. During the program, the Center facilitated information sharing



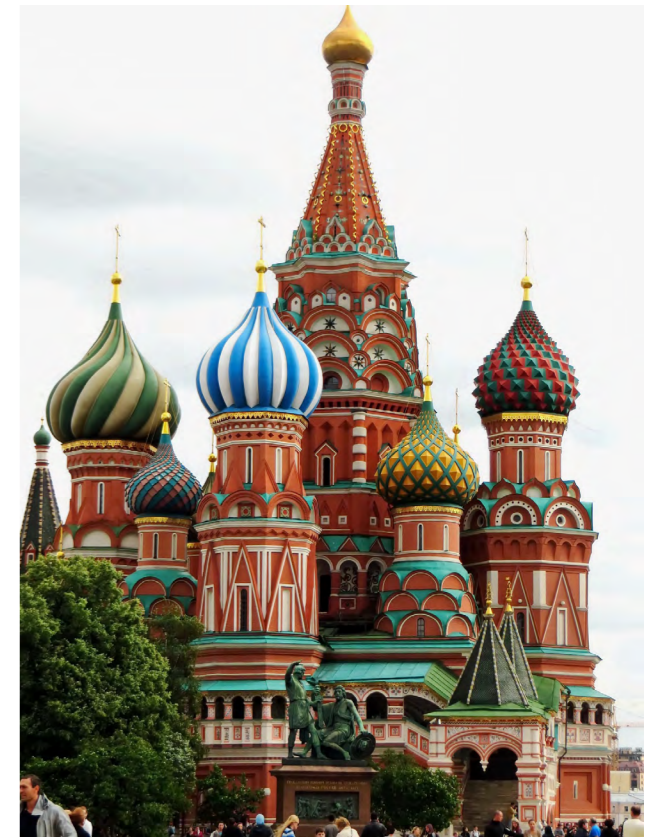
about Kazakhstan's health system and sensing journey visits to 6 local sites for better understanding and testing new leadership skills among participants in the context of Kazakhstan. P4H has been facilitating partnerships between Kazakhstan and partners to increase Kazakhstan's visibility in health financing for UHC as an emerging key player at global and regional levels. In support of this, the Center created a new unit for global health and full-time position to be filled as P4H focal person whose job description and TORs are tentatively agreed between the Center and P4H Coordination Desk. In the second half of 2019, Kazakhstan in collaboration with WHO/EURO will produce a country specific report on financial protection that will contribute to new evidence in Europe. Kazakhstan also confirmed to host the next P4H Steering Group meeting in Nur Sultan in October 2019.

REPUBLIC OF KOREA

Seoul National University (SNU) School of Public Health (SPH) joined the P4H Network in October 2018. It is the first and largest SPH in Korea, founded in 1959. Its faculty members have been prominent in research and advice for health policy not only in Korea but also in other low-and middle-income countries. Based on close working relationships with development partners and health financing agencies of Korea, SNU SPH has provided Korean experience, expertise, and partnership through its own channels in Korea and other countries and regions, particularly in Asia. In collaboration with WHO Headquarters and the Regional Offices for the Western Pacific (WPRO), and South East Asia (SEARO), SNU SPH organized an International seminar on health financing in Korea in March 2019. The seminar presented various insights on health financing issues with rich discussions among participants and presenters. SNU SPH has been working closely with other development partners to advocate and facilitate countries on UHC, provide advice and organize sessions for capacity building, and generate and disseminate knowledge on UHC and health systems. SNU SPH worked with WHO HQ to develop progress matrices to monitor health financing for UHC and with the WHO office in Myanmar supported the development of health financing strategy, and with WHO Centre for Health and Development in Kobe on the case study of Korea as a part of the project on pricing of health services.

RUSSIA

Addressing noncommunicable diseases is essential in attaining the health-related SDGs set by 2030. Among them, cancer is a rising concern that exerts significant strain on populations and health systems at all income



levels. Russia is one of the countries with high number of deaths among cancer patients. Cancer care seems inaccessible for large number of patients, especially for those who live in suburbs. In recent years, Russia is taking various measures to improve cancer care by strengthening the capacity of the existing medical facilities to ensure that they are adequately funded and furnished with qualified specialists and quality equipment. At the same time, learning from best international practices is on high demand. Because of this need, the Centre for Healthcare Quality Assessment and Control of the Ministry of Health, Russian Federation took initiative to organize an international conference on Organization and Funding of Oncological Aid: World Best Practices. The conference was held in Moscow on 27 June 2019. About 150 participants and experts from Russia and other countries participated in the conference that consisted of 3 thematic and panel sessions. P4H supported and facilitated communications, technical inputs and expertise through consultations with P4H partner institutions including all three levels of WHO. The Conference enabled to exchange knowledge and best world practices to improve oncological services to effectively respond to current challenges by strengthening health system performances with a focus on organization and funding of cancer care including public and private collaboration.

P4H Steering Group: A driver of growth!



P4H Steering Group members discussing the Turnkey Network Tool to help set up global health networks

The French Ministry of Foreign Affairs hosted the P4H Steering Group Meeting in Paris from 18-19 September 2018. The meeting reviewed P4H activities for 2017-2018 and fully supported the development of the new P4H digital platform as the work space of the Network.

It provided guidance on P4H governance issues such as network membership, decision making, planning, budgeting, financing and implementing of partnership activities. P4H collaboration with other health system networks by offering the same digital platform was supported. For the first time in the history of the network, the P4H Coordination Team consolidated action plan was submitted and discussed for prioritization.

The meeting also welcomed 3 new P4H Steering Group members from China (Fudan School of Public Health); Korea (School of Public Health, Seoul National University) and Russia (Centre for Accreditation and Quality Control of the Ministry of Health).

P4H Coordination Team (CT)



Meeting of the P4H Co-ordination Team: an annual gathering of the Co-ordinators and Focal points

The P4H coordination team consists of the 4 Geneva- and Washington based P4H Coordination Desk staff members as well as 15 P4H regional country focal points across the world. Along with CT face to face meetings, the team has regular monthly updates that enables all members to actively involve in initiating and implementing P4H specific, product-oriented work plans and all other activities. Since 2018, the team welcomed a Focal point in Chad as well as in Senegal supported respectively by the GIZ and the World Bank.

Since October 2018, an ILO focal person also serves for Viet Nam and the sub-region. Country focal person positions in Madagascar, Myanmar and Zambia were discussed and agreed with respective development partners.

The Republican Centre for Health Development of Kazakhstan created the focal person position within its own structure and started to finalize the jointly developed TORs to be followed by the selection process. Similarly, the Centre for Accreditation and Quality Control of Russia agreed to designate one of their staff as P4H liaison person to look after partnership collaboration including update of the country page with recent news and events.


The coordination desk position in the WB was filled in as of September. During the reporting period, Technical Exchange Group meetings did not take place due to administrative changes and staff turnovers occurred in several P4H founding member countries.

What have we achieved?

 **18**
Member organisations

 **10**
Networks currently implementing the P4H Web platform

 **4**
Ongoing membership discussions

 **3**
Networks using the P4H Turnkey Network Tool – network setting-up support

 **35**
Countries with collaborations

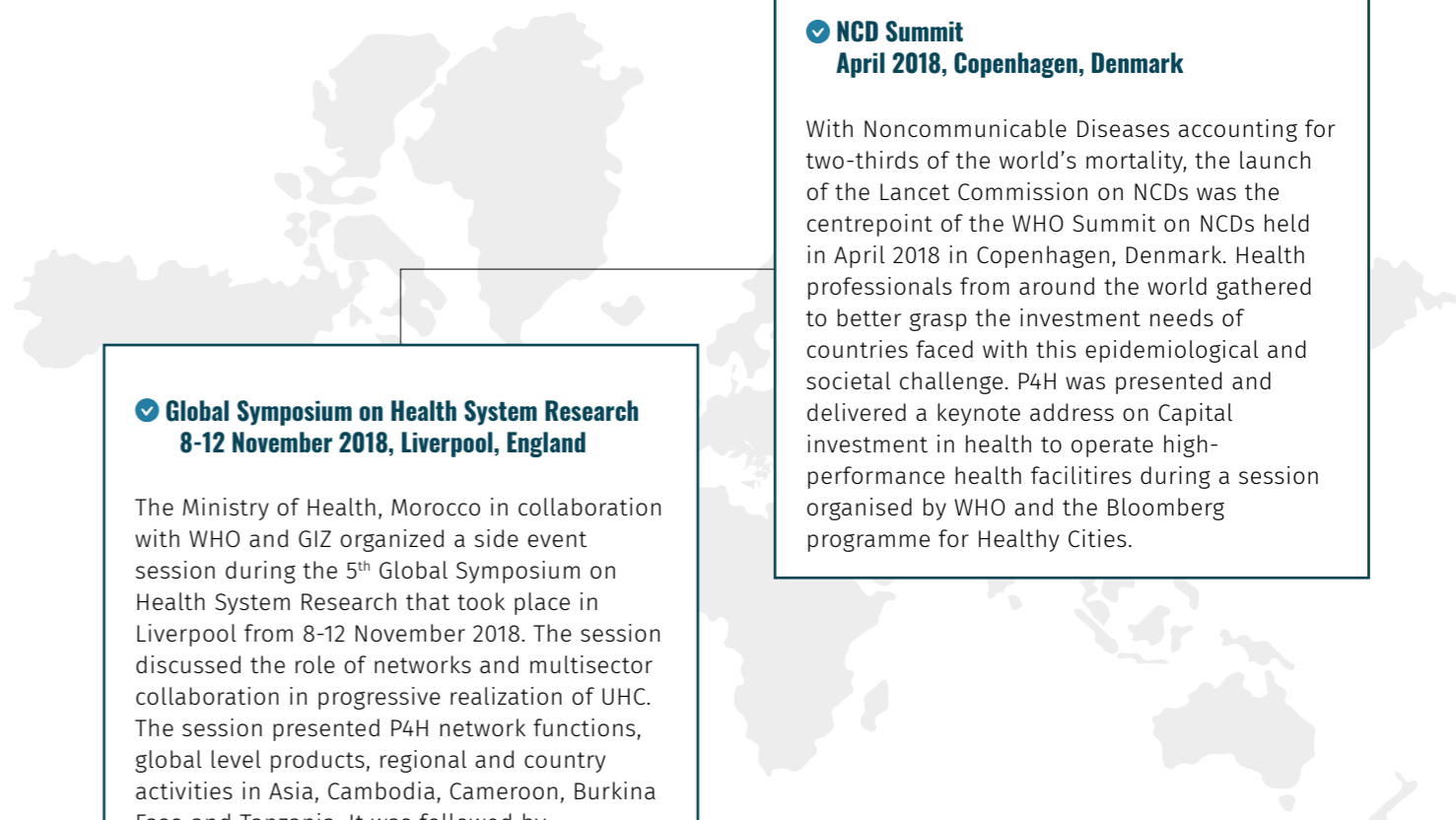
 **1,380**
Registered users part of our ecosystem

 **15**
Focal points to serve country collaborations

 **1,200**
Followers of the P4H activities on our social media platform

Calendar of the year at a glance

One of the strategic areas of P4H work is to participate and contribute to global and regional international events. It increases P4H visibility and partnership dialogues, as well as facilitates leverages and synergies among partner institutions.



✓ NCD Summit
April 2018, Copenhagen, Denmark

With Noncommunicable Diseases accounting for two-thirds of the world's mortality, the launch of the Lancet Commission on NCDs was the centrepiece of the WHO Summit on NCDs held in April 2018 in Copenhagen, Denmark. Health professionals from around the world gathered to better grasp the investment needs of countries faced with this epidemiological and societal challenge. P4H was presented and delivered a keynote address on Capital investment in health to operate high-performance health facilities during a session organised by WHO and the Bloomberg programme for Healthy Cities.

✓ Global Symposium on Health System Research
8-12 November 2018, Liverpool, England

The Ministry of Health, Morocco in collaboration with WHO and GIZ organized a side event session during the 5th Global Symposium on Health System Research that took place in Liverpool from 8-12 November 2018. The session discussed the role of networks and multisector collaboration in progressive realization of UHC. The session presented P4H network functions, global level products, regional and country activities in Asia, Cambodia, Cameroon, Burkina Faso and Tanzania. It was followed by presentations and discussions on ongoing health system financing reforms in Morocco led by high-level government officials from the country.

✔ **Social Health Protection: Addressing Inequities in Access to Healthcare**
2-13 June 2018, Turin, Italy

Traditionally, the International Labor Organization (ILO) annually organizes social health protection trainings in the ILO International Training Center in Turin. Since 2018, P4H/CD participated and contributed as a co-organizer to the 2018 training event held from 02-13 June. Altogether about 50 participants from 10 countries of Africa and Asia came to the event. The P4H platform was presented along with network activities and lessons learnt in making progress towards UHC. P4H organized the session on assessing and strengthening health systems, decision making, allocative efficiency and NCDs with WHO technical inputs. The course expands opportunities to discuss and advocate partnerships for UHC among high level officials and professionals working on health, finance and social health protection. Accordingly, P4H continued collaboration with the Turin center to update the course program for 2019 with increased technical inputs and country specific cases from P4H partner agencies.

✔ **Asia Bi-Regional Meeting on Health Financing**
25-28 June 2018, Viet Nam

P4H participated in the third SEARO and WPRO regional meeting held in Ho Chi Minh City of Viet Nam from 25-28 June 2018. P4H presented partnership opportunities, experiences and demonstrated the newly created Web space for them, which was exclusively designed and hosted in the P4H platform prior to the meeting. This closed space aimed to maintain and facilitate contacts, communications and partnerships for knowledge and experience sharing among the participants of Asia bi-regional meetings organized since 2016. During the meeting about 40 participants immediately registered in the work space.

✔ **Global Collaborative for Health Financing**
21-22 January 2019, Geneva, Switzerland

P4H hosted the second Global Collaborative for Health Financing meeting in Geneva from 21-22 January 2019. P4H member institutions, development partners, multi and bi-lateral organizations and global health financing communities discussed global trends in health spending, country support work, experiences, strategies, long-term collaborative agenda, key messages for the UNGA High Level Meeting on UHC and joint actions to accelerate sustainable financing of the SDG 3. The meeting valued topic specific partnerships with global, regional, sub-regional and country specific dimensions. At the same time, it witnessed that UHC financing needs consolidated health system wide efforts among all concerned agencies across all levels and sectors in all categories of countries. The meeting concluded that strengthening, spreading and effectively using of existing platforms and integrated networks are preferred options rather than creating new and separate mechanisms for expanded partnership initiatives aimed at SDGs.

✔ **Global Action Plan/Health Financing Accelerator**

In 2018, 12 multilateral organizations such as WB, WHO as well as Global Health Initiatives such as the Global Fund, the GFF and GAVI agreed to work together to help countries to accelerate the attainment of SDG and UHC. Stemming from the Global Action Plan (GAP) initiated by Germany primarily, the concept of "Accelerators" per area of health systems connects agencies to work on high level political agenda. Each agency assumes specific role and commitment to align their actions. It consists of 7 accelerators in cross cutting areas and one of them is on sustainable financing that involved GAVI, GF, GFF, the World Bank Group, and WHO. The health financing accelerator aimed to increase sustainable domestic resource mobilization for health including reallocation of resources to health. It was presented and discussed during this meeting organized by P4H. Participants supported this initiative and engagement in aligning and accelerating progress across sectors while expressing some concerns with limited involvement of bi-laterals in this process, as well as possible administrative duplications without due consideration of existing networks such as P4H which would make such initiative more relevant and accountable with global, regional and country level activities and dialogues.

✔ **Geneva Health Forum**

All P4H partners have strong commitments to make progress towards UHC leaving no one behind. One of them is reaching vulnerable and marginalized groups in the process of progressive realization of UHC. Innovative approaches are needed to ensure that poor and marginalized groups are not left behind in health coverage. It was brought at the center of various events organized at different levels. In 2016, the Geneva Health Forum discussed lessons and experiences to formulate evidence-based policies, strategies and guidelines. It formulated a series of concrete recommendations which are relevant to the development of inclusive UHC related policies, strategies and guidelines for health financing and social health protection reforms in low-and-middle income countries. By synthesizing the conference materials, P4H initiated an article on leaving no one behind-reaching the informal sector, poor people and marginalized groups that was published in the Journal of Poverty and Social Justice in October 2018.

P4H specific work and products



P4H Digital Platform p4h.world

The P4H digital collaboration platform launched in 2017 totally changed the level of performance, communication, information, news and knowledge sharing opportunities across institutions. The number of visitors and new members signing in the P4H Web platform is increasing every day. Members appreciate that p4h.world not only promotes and updates P4H specific knowledge and products, but also effectively provides latest news, information, events taking place in the area of health financing, economics and social health protection at global, regional and country levels. Nevertheless, the single design feature that most systematically spurs the work of the P4H Coordination Team is the project management style collaboration option across the organizations. Since its operationalization, the platform and its functionalities and communication features were introduced to interested partners, organizations and individual experts during several international, regional and country specific events. Currently, the platform is accessible in English and French, and soon it will be available in Russian in collaboration with P4H partner institutions in Kazakhstan and Russia.



White Labelling

Since the launch of the P4H Web platform, health system related sister networks have shown interest in its functions and user-friendly options for communicating and accessing to up-to-date information and knowledge. This led to discussions on designing and setting up similar interactive Web portals. In response to this demand, P4H developed a product so called “white labelling” in 2018. This product aims to help sister global health networks to digitalize their work processes in their ecosystems by using the P4H digital functionalities and innovative

communication means to reach new levels of performance and collaboration with other global networks. Since then, P4H was supporting 9 global health networks to develop their own digital platforms based on the P4H Web platform. P4H was invited to SPARKS network events and activities to share network experiences, provided support to adopt and replicate the P4H Web platform to empower their communication and collaboration among TB and disease specific communities.



Leadership for UHC programme

The leadership program for UHC (L4UHC) which is one of the P4H products recently developed and delivered in collaboration with WB, GIZ, USAID, Expertise France and WHO. The program was welcomed by countries in Africa and Asia. Considering the interest, need and demand, the collaborating partners started its next cycles in 2019 both in Asia and Africa. The second L4UHC cycle for Asia involving national government officials and experts from 3 countries Pakistan, Myanmar and Viet Nam started in March 2019. The Institute for Health Policy of Sri Lanka hosted its first module in Colombo from 17-21 March 2019. The Republican Centre for Health Development, Ministry of Kazakhstan hosted its second module from 10 -14 June in Nur Sultan. Participants of the second L4UHC Asia module are diverse and committed to benefits from the program. The participants from Myanmar, Pakistan and Viet Nam are diverse representing respective national governments, line Ministries such as Health, Finance, Labor and Social Welfare, and State and Provincial Health Authorities, Health Insurance and Social Security Agencies, Health Service Providers and Civil Society Organizations. A representative from the Republican Center for Health Development of the Ministry of Health, Kazakhstan is also invited to participate in this Program.

P4H was invited to SPARKS network events and activities to share network experiences, provided support to adopt and replicate the P4H Web platform to empower their communication and collaboration among TB and disease specific communities.



National UHC Dynamics Card

In preparation to forthcoming high-level meetings, the P4H CD initiated showcases on UHC progresses and the developments towards the SDG 3.8.2 in countries. It was agreed to develop an innovative format: The National UHC Dynamics Card. The product shall be developed to become a useful resource for the stakeholders, endowing countries to learn from each other to achieve and maintain UHC.

The form shall be a graphical representation of all relevant country specific information on developments and progress during the UHC process tangibly available in the form of a user-friendly display at first glance with key dates, milestones, figures and corresponding facts related to the SDG 3.8. such as legislative changes, inclusion of new categories of population or benefits, etc. P4H initially designed the prototype of the product which was tested and agreed with interested countries. Currently, the first batch of six countries that includes Cambodia, China, Mozambique, the Republic of Korea, Senegal and Switzerland is participating in this exercise. In June 2019, another five countries, namely Kazakhstan, Russia, Mongolia, the Philippines and Uzbekistan indicated their interest.



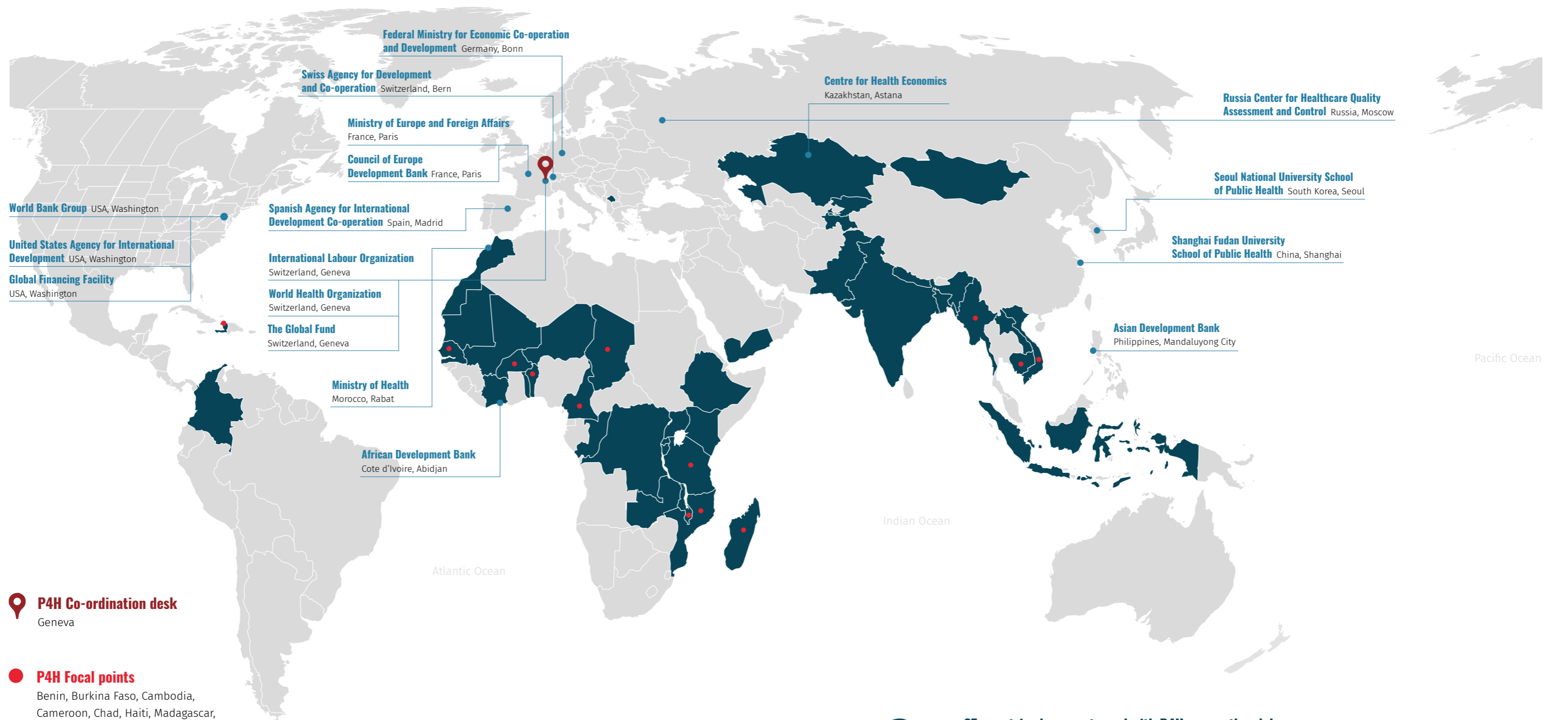
Political economy tool

Recently, interest in political economy is increasing to better understand political economy drivers affecting different outcomes in achieving UHC. The first Global Collaborative meeting hosted by P4H in December 2015 proposed political economy as one of the top three

collaborative agendas. Further discussing, exploring and developing the framework, complementarities and added values, P4H took actions in two work streams. First, to create a political economy repository of analytical documents, reviews and country case studies and publications related to political economy. Second, to develop a political economy tool in the context of P4H to facilitate health financing and social health protection reforms for UHC at country level.

The P4H repository of 111 documents containing of country case studies, health systems and multi-sectoral processes which suggest that political economy analytical work had different objectives ranging from political economy of UHC, health systems and financing to political economy of disease specific and public programs. However, they had common interests in understanding various political economy determinants, power relations and coalitions that shape political agenda and policy-making processes. It indicates that progress towards UHC depends not only on technical knowledge and solutions, but also interactions that open new opportunities for partnership. This was an entry point for P4H to take further actions to develop a P4H political economy tool. It included assessment of national and international partners, networks and relationships, mapping out their influences to identify the points of interventions and modifications to facilitate health financing and social health protection reforms for UHC at country level. The tool that analyzes technical and applied aspects of political economy to add values from P4H work specifics is now under development. The team expects that it will help the partners of P4H to understand political economy with clear check-list type of guidance on how to assess situations, identify critical moments, problems, opportunities and act accordingly. Along with the tool P4H will produce a reference manual for training the P4H CT team.

P4H across the world



37 countries have partnered with P4H across the globe

Bangladesh, Benin, Burkina Faso, Burundi, Cambodia, Cameroon, Chad, Colombia, Congo, Cote d'Ivoire, RD Congo, Ethiopia, Haiti, India, Indonesia, Kenya, Kosovo, Kyrgyzstan, Lao PDR, Madagascar, Malawi, Mali, Mauritania, Mongolia, Mozambique, Myanmar, Nepal, Niger, Pakistan, Rwanda, Senegal, Tajikistan, Tanzania, Togo, Uganda, Vietnam, Yemen, Zambia

UHC country processes supported through P4H partners

The examples of country collaborations presented hereunder aim at exemplifying current collaborative frameworks facilitated by the P4H Network, bolstered by its team of focal points at country and regional levels. For more in-depth information or for understanding of collaborations in other countries where the P4H Network is present, please meet us on our Web platform: www.P4H.world.

Cambodia

UHC enshrined in the National Social Protection Policy Framework in July 2017 shaped political and policy actions for all. The government created the inter-ministerial National Social Protection Council, honorarily chaired by the Prime Minister, to oversee the implementation of the Framework. The Council is supported by the Executive Committee and the General Secretariat. The latter is housed in the Ministry of Economy and Finance. These developments are reflected in the work of P4HC+. Now it focuses more on strengthening local capacities for producing and interpreting evidence and information for UHC. Direct support from the P4H country focal point is provided to the National Institute of Public Health to regularly produce valid and reliable information and the General Secretariat to critically appraise it. Support to the NIPH is provided in collaboration with the Institute of Tropical Medicine of Antwerp, American University of Beirut and WHO. P4HC+ meetings increasingly focus on thematic issues. Quality of health care, informal sector coverage and UHC monitoring were the main issues of discussions.

Considering the need to strengthen local skills in promoting evidence-based policymaking and UHC monitoring, P4HC+ facilitated numerous activities in collaboration with the International Health Policy Program, Thailand, the University of New South Wales, and the London School of Hygiene and Tropical Medicine. They underscored the principles of equity and

measurement, the ways to handle large secondary data sets for econometric analysis for monitoring financial risk protection and equity. Equity assessments from Cambodia along with Lao PDR, Vietnam and Myanmar are compiled with the Country Focal Person as a co-editor in a special issue on for Health Policy and Planning in Further, P4H will co-finance to enable its open access.

P4HC+ consolidated itself as the development partners' coordination platform for health financing and social security. It is the coordination platform for the US\$175m Health Equity and Quality Improvement Program and the Global Financing Facility's nutrition program. Lastly, building on lessons learned from rallying support for UHC, P4HC+ assisted with the creation of the Cambodian NCD Alliance that aims to foster a harmonized approach to the NCD response. This is to be attained by obtaining amongst other greater political support and investment, as well as to build consensus for priority actions by avoiding duplications, supporting complementarities, and to create a virtual network for sharing evidence, information and lessons learnt.

Cameroon

P4H supported coordination and dialogue between stakeholders. It enabled the UHC national technical working group to hold a workshop to update the road map where P4H partners presented different initiatives contributing to UHC, including Performance-Based

P4H supported data management and IT solutions. Joint activities with the Cameroon Health Data Collaborative (CHDC) aimed to increase benefits and expertise from these two complementary initiatives.

Financing (PBF), Chèque Santé (Health voucher scheme for pregnant women), Community-Based Health Insurance and Regional Funds for Health Promotion (RFHP). Now, the new version of the short-term road map aims at strengthening both supply and demand of health services. From September 2018 to February 2019, P4H partners developed a joint note to strategically support the UHC architecture, governance with a focus on health coverage, service delivery and financing for UHC. It aims to extend and consolidate existing mechanisms and build the confidence of the population before setting up a mandatory scheme. The work contributed to dialogues held between development partners and the government on the UHC long term vision.

Benefiting from the legal status of public interest groups, the State increasingly solicitates the RFHP to implement certain mechanisms such as PBF and the "Chèque Santé". The RFHP is expected to play a key role in UHC reforms supporting the Government with organizational, technical and financial structural analysis with involvement of the MOH and development partners (DPs).

P4H supported data management and IT solutions. Joint activities with the Cameroon Health Data Collaborative (CHDC) aimed to increase benefits and expertise from these two complementary initiatives. It contributes to UHC monitoring with health financing indicators. P4H organized sessions to discuss and test IT solutions for the UHC information system. A meeting was organized to introduce OpenIMIS to DPs. A followed scoping mission discussed the production of a report assessing the system and possible scenarios for customizing, prototyping and piloting it. The mission helped the MOH to develop the Terms of Reference and identify the appropriate software.

P4H supported capacity building of national actors in public financial management. Two MOH staffs attended

a training of trainers on the new methodology to design the Medium-Term Expenditure Framework (MTEF). Subsequently, they co-facilitated a special session organized for key MOH executives that facilitated to the work with the Ministry of Economy on the initial MTEF aligned with the new guidelines. Nationals were selected to participate in the Leadership for UHC program upon communications with different institutions and organizations. Now the team consists of representatives from the Prime Minister's office, MOH, Ministry of Finance, Ministry of Economy and Planning, Ministry of Labour and Social Security, the National Social Security Fund, the Parliament, Civil society and Faith based organizations.

The P4H web platform was introduced to DPs to increase better collaboration and information exchanges. A taskforce created to manage the country page and helped new members to enroll and share documents through the country page. Collaborations will focus on key processes such as monitoring of the RFHP analysis, and abolishing HIV/AIDS related user fees from January 2020, among others.

Chad

Over the course of 2018-19, P4H partners supported the implementation of the National Strategy for UHC and focused on the process of setting up the National Health Insurance Scheme (NHIS). The earlier developed health insurance draft guidance was finalized and by a team of consultants supported by the Swiss Development Cooperation and the P4H CFP. The final document has been adopted by the High Committee of the UHC in August 2018.

Following these developments, the CFP provided technical support to the Inter-Ministerial Coordination Committee of UHC Strategy (CIC / CSU) for the elaboration of the draft law on health insurance that accelerated the process. As a result, the draft law was

endorsed by the Government in January 2019 and passed by the Parliament on 3th of June 2019.

In parallel, the process of defining benefit package started in January 2018. A working group was set up by a decree of the Ministry of Public Health to which the P4H CFP facilitated technical assistance for costing of interventions, activities. As part of the operationalization of the NHIS, the CFP assisted the CIC/CSU to draft the TORs for relevant studies. In December 2018, WHO provided technical support to study the linkage between the free health care programs and the NHIS. Technical advices were provided to national partners on the process for developing a national health financing strategy. Currently, the French Cooperation is funding the process including organization of consultancies and workshops. The WHO agreed to support the MoH with an international expert for technical assistance. These partnerships contributed to drafting a concept note and the ToRs which are now available. Capacity building was another area of work. The WB funded training of 11 National Partners on health financing and Mutual Health Governance. It was conducted by an NGO in Burkina Faso in partnership with the French University (Université de Versaille Saint-Quentin).

In 2019, P4H network supported the Inter-Ministerial Coordination Committee of the UHC Strategy to undertake advocacy and lobbying activities. Political dialogues were facilitated during the two information-days organized in April and May 2019. The first event was for parliamentarians and the second for ministerial actors. The WHO funded these events where P4H CFP provided technical support and advices.

The CFP initiated regular meetings between P4H network partners and the ICC to ensure coordinated monitoring of the UHC process since March 2018. During the reporting period, 9 meeting were organized. Major achievements include the new health insurance law, the process started to draft the NHF Strategy, the establishment of political dialogue between national actors and the establishment of monthly meetings between P4H and national partners. However, there are still challenges in addressing lack of national financial resources to support the UHC process and low technical capabilities.

📍 Burkina Faso

Burkina Faso's healthcare financing strategy and its operational plan were approved by the MOH on 9th of November 2018. It was not sent to the Council of Ministers though. The GFF investment case was finalized on 23rd of May 2019. The CNAMU, that is the social

health insurance institution, was created on 24th of April 2018; its Director was nominated on 7th of August 2018 and the Board members on 31st of December 2018. The exemption fee mechanism for under five and pregnant woman, extended to family planning, remains a success story but is at risk. In general, the security situation in the country hampers all policies and translates into budget constraints that affect the health sector. Hopefully partners' collaboration is good, and the government willingness to progress towards UHC is unchanged. P4H provides some visibility on the country health financing reforms and initiatives in the P4H web platform, and it has supported the preparation of Burkina to the next L4UHC training session for francophone Africa that started in July 2019.



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📍 Laos

After completing the L4UHC program in 2017, the Ministry of Health decided to combine various health insurance programs within a single national health insurance scheme. This led to the extension of the national health insurance to the entire country that supported by P4H partners such as ILO, the World Bank and WHO. It included a comprehensive costing exercise on health insurance benefit package focusing on hospitals and essential health services. The costing is expected to generate evidence for planning and budgeting, setting provider payment rates and improve internal management and performance. The Ministry of Health and Lao Tropical Public Health Institute Package coordinate partnership collaboration with all partners.



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📍 Malawi

P4H partners have been continuously involved in carrying out comprehensive health financing situational analysis and assessment of gaps to lay the groundwork for the development of an evidence-based national health financing strategy for UHC. An emphasis was given to the recommendation to explore health care provider payment mechanisms with regard to their incentive structures to address desirable and undesirable provider behaviours. It looked at strategic purchasing and mixed provider payment incentives to influence provider behaviours, as well as to understand the extent to which they are complementary and coherent in the way they affect health care provision. A report with recommendations on how efficiency and effectiveness of service provision at the patient level could be enhanced through a strategic purchasing and provider payment method framework is due in June 2019.

Another analytical work related to Central Hospital Health Management Information Systems (HMIS) Assessment. It aims to lay the foundation for the development of a sound output-based payment system for tertiary hospitals. This will be projected to explore what kind of payment mechanisms would be feasible and appropriate based on the existing HMIS, as well as to identify any additional systems development and data collection needs to design and implement an output-based resource allocation framework. These work initiatives may subsequently lead to the development of a case-based payment system on the long-term. Having advices on the most appropriate strategy for linking clinical, financial and performance data, as well as elements of the patients' profile is needed for policy dialogues to better design and implement central hospital payment reforms to increase efficiency, access and improve quality of health services in Malawi.

📍 Mozambique

Over the course of 2018-2019, health financing for UHC was the major topic of collaboration between P4H partners and the Ministry of Health. A P4H mission that took place in February 2019 helped to align P4H partners' work with national health financing priorities through the P4H focal point.

During the reporting period, P4H partners supported the Ministry of Health to analyze health financing options and implications in several areas. Specialized technical assistance was provided to assess fiscal space for health and prioritize health in the state budget. The IMF coordinated this process at local level and other partners such as Belgian Cooperation led the work on public finance management. In collaboration with the Ministry of Finance and the Tax Authority, P4H supported analytical work on health taxes as options for reducing the burden of diseases and increasing funding for health, where WHO experts on NCDs and health economics were effectively involved.

P4H partners supported evidence generation work to enhance effectiveness and efficiency in the health sector. The World Bank is leading related analytical work and practical proposals in this area. GFF and USAID are supporting performance-based payment options. Situation analysis on user fees and financial protection was another area of work because of increasing payments in hospital services. This was supported by MSF and other civil society organizations interested to monitor and reduce catastrophic health payments.

The government proposed to undertake social health insurance feasibility study and assessment. P4H invited ILO to lead this analytical work and political dialogues. The work was completed with a proposal submitted to the government in December 2018. It underlines the informal sector accountable almost for 80% of the

population (INCAF Survey) as one of the main challenges. Efficiency is another concern because of the need to create new parallel structures in health financing.

As part of the national health service, the process to design a benefit package was supported by P4H. It comprised costing and capacity building activities led by WHO and GIZ. Besides this, WHO and other P4H partners are committed to organize various trainings throughout 2019 to strengthen capacities for health financing at different levels including civil society organizations.

📍 Myanmar

In Myanmar, WHO with support of the ILO for facilitation, organized a series of consultative workshops to design and develop the first draft of the Myanmar Health Financing Strategy.

All the activities above are “work in progress” and we will have to be a bit more patient to harvest the fruits (achievements) of the joint work at country level.

📍 Niger

A P4H mission led by WHO, World Bank and AFD took place in July 2019. Development partners that additionally included AECID, KfW and USAID. Along with this, ILO and GFTAM, also members of P4H, were associated upstream of the mission. High-level interviews were held on UHC at multisectoral level (Health, Social Protection and Finance), as well as with the civil society, the National Assembly and others. A

debriefing was made in particular to the Secretary General who appreciated the conclusions.

Follow-up was made by the regional P4H focal point, especially regarding the recommendations to professionalize the fee exemption mechanism with a third-party payer and to create a position of a P4H country focal point. This objective is nearly achieved as the person is being recruited (by Expertise France with AFD funding) and should be starting in August 2019. Niger will also send 10 participants to the L4UHC program, thanks to the World Bank in-country project financing support.

📍 Tanzania

The P4H network continues to be regarded as the primary partner group aligning activities and support UHC related social health protection, health financing and public financial management (PFM) in the country. The P4H country focal person is main contact person on health financing related issues for partners and stakeholders outside the government. Non-P4H members such as JICA, UNICEF and PharmAccess are now active on the health financing landscape with increased interest in the network’s information and knowledge exchange opportunities.

During the reporting period, the CFP involved in health financing updates and acted as key DP Social Health Protection informant for the task force developing the National Social Protection Policy led by UNICEF on development partner side and Ministry of Labor under the stewardship of the Prime Minister’s Office. A major emphasis was given to continuous advocacy to



government stakeholders and parliamentarians around the adoption of the 2017 health financing strategy and the proposed National Health Insurance Bill. In April 2018, a Health Financing Strategy Advocacy Workshop to Parliamentarians was organized with support of P4H network partners comprising WB, WHO and USAID. This technical gathering enabled parliamentary committees to ask questions around the strategy and proposed mandatory national health insurance comparing different country experiences.

P4H partners continuously provided technical support to adapting and revising the national health insurance related cabinet papers in preparation of an insurance bill.

The re-affirmed position on single national health insurance facilitates the implementation and scaling-up of community health insurance as bottom up systems building approach. This is in alignment with the draft health financing strategy which aims to improve the budgeting and financial execution processes, efficiency, PFM in general, partner coordination, as well as social assistance for the poor and vulnerable. However, current delays around the finalization and presentation of the Bill, changes in the Ministry of Health and staff turn-over are limiting effective progress. Lack of resources and capacities for a country-wide scale up may also challenge the implementation of the UHC related national policies and strategies.

📍 Viet Nam

In Viet Nam, Development Partners are jointly supporting the revision of the Health Insurance Law, providing joint advice to the Ministry of Health on policy options. For instance, ILO, WB and WHO are working on the development of a joint technical brief on the provision of additional benefit package.

In Viet Nam, P4H partners facilitated the participation of a cross sectoral team to the Leadership for UHC course in Sri Lanka (February 19).

📍 West Africa

WHO/AFRO/HSS was invited to the GIZ “Sector Network Health and Social Protection Africa” in Lilongwe in March 2019 to participate as keynote speaker and panelist.

The West Africa health financing policy advisor / P4H regional focal point based in Ouagadougou represented WHO/AFRO/HSS Director. In Ivory Coast, an important high-level national policy dialogue was organized by the MoH with close support from key partners in health

financing. This has been the outcome of a continuous and fruitful collaboration of partners who have structured their dialogue with the government under the leadership of World Bank and WHO. With the creation of a “national platform for the coordination of health financing” on 8th of April 2019, a good set up is now in place for a coherent and continuous national dialogue in health financing. Consequently, discussions are taking place to create a high-level position to support the coordination, which ToR could be very much inspired by the ones of our P4H country focal points’.

📍 East African Community (EAC)

The EAC Partner States and their Secretariat recognize the importance for regional collaboration on UHC and social health protection. So far, the P4H network contributed to activities in relation to the work on a EAC Regional Health Policy, a EAC Situational Analysis and Feasibility Study of Options for Harmonization of Social Health Protection Systems towards UHC, and a regional roadmap for the implementation of SHI portability. A P4H Mission was requested by the EAC Secretariat to discuss modalities for closer collaboration.

The outcome was the decision to develop a memorandum of Understanding (MOU) for collaboration between P4H and EAC placing a P4H regional focal person within the structures of the secretariat. This process was supported by regional P4H partners, namely Switzerland and Germany. The review process of the MOU by the EAC and P4H network was completed and the EAC was ready to sign in May 2018. This process could, however, never be completed due to internal issues relating to WHO which was designated to be signatory on behalf of the network. Going ahead it is important for the P4H Network through the Coordination Desk to maintain relations with the EAC Secretariat and keep exploring possible joint activities on a less formalized manner in the future.



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