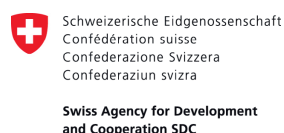# P4H

Social Health Protection Network

P4H – Social Health Protection Network

A global network for Universal Health Coverage and Social Health Protection

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World Health Organization

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P4H – Social Health Protection Network

What is P4H?

A global network for Universal Health Coverage (UHC) and Social Health Protection (SHP)…

P4H was launched as a political initiative for SHP at the G8 summit in Heiligendamm in 2007. Since then, P4H has evolved into a **unique support network for UHC/SHP**, based on a model that takes global multi- and bilateral cooperation to the next level.

…with a unique composition

P4H comprises the World Health Organization (WHO), the International Labour Organization (ILO), the World Bank, the African Development Bank (AfDB) and France, Germany, the USA, Spain and Switzerland – a broad mix of key development partners (DPs) and investors in UHC and SHP with different mandates, purposes, comparative strengths, and sector affiliation. P4H is thus by no means limited to health sector development, with the members offering a wide range of expertise and experience in: health systems strengthening (the World Bank), health systems financing (WHO); social security/labour issues (ILO); human development (e.g. AfDB or the French Ministry of Foreign Affairs); and poverty reduction and social protection (e.g. the German Federal Ministry of Economic Cooperation and Development). Furthermore, P4H combines the political commitment and financial contributions of its bilateral members with the respective normative and technical support of the multilateral members and the wealth of expertise, experience, and connections of the affiliated bilateral implementing organisations, including the Groupe Agence Française de Développement (AFD, French development finance institution), the Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH, the Groupement d'intérêt public santé protection sociale internationale (GIP SPSI, French international health and social protection agency) and the KfW Entwicklungsbank (KfW Development Bank).

A network that adapts to need…

There is no one-size-fits-all solution to the challenges different countries face. Thus, P4H uses a flexible and evolving network approach that adapts to the various interests of the DPs involved, while at the same time allowing for a customised response to countries' particular needs. This approach is the result of bottom-up, experience-based deliberation and design, and is what makes P4H different from more formalized partnerships.

…combining three main functions

- a platform for information exchange and dialogue;
- a mechanism for coordination of multi-/bilateral technical support across sectors and cooperation levels;
- a marketplace for collaboration and complementary investments for scaling up support and filling any support gaps, in particular for developing capacity for UHC/SHP.

These functions can be combined in a flexible manner tailored to the specific support needs of a country. The success of P4H depends to a large extent on how effectively the members use these opportunities for more coherent and enhanced cooperation.

UHC and SHP

Social Health Protection (SHP) is defined by the International Labour Organization (ILO) as a series of public or publicly organized and mandated private measures against social distress and economic loss caused by the reduction of productivity, stoppage or reduction of earnings, or the cost of necessary treatment that can result from ill health. The objective of SHP relates to universal access to affordable and available quality care and financial protection in case of ill health. Thus, all residents should have the necessary financial protection to access at least a nationally defined set of essential health care, including maternal health care, that meets the criteria of availability, accessibility, acceptability and quality.

Universal Coverage, or **Universal Health Coverage (UHC)**, is defined by the World Health Organization (WHO) as ensuring that all people can use the promotive, preventive, curative, and rehabilitative health services they need, of sufficient quality to be effective, while also ensuring that the use of these services does not expose the user to financial hardship.

Convergence: *The concepts of UHC and SHP are very close in that they both focus on guaranteeing needed health care to the whole population while at the same time protecting people from financial hardship due to the costs incurred in seeking that care. In practical terms, this means for the joint work of the P4H network that UHC and SHP are more or less interchangeable terms.*

Why P4H?

The global challenge

Around **100 million people are pushed into poverty** each year paying for health care out of pocket (OOP) at the time of need. Many more are too poor to consider going to a doctor in the first place. But poverty and OOP payment are not the only barriers to health care people face. For an estimated 1.3 billion people, health care is not available; for an even greater number, without any income support, sickness or disabling injury lead to severe financial penalties.

Challenges of development cooperation

To address these issues, many low- and middle-income countries are now striving to establish UHC/SHP, and turning to external development partners (DP) for help and advice in drawing up and implementing workable policy. Increased global demand for support, coupled with the growing momentum behind UHC/SHP initiatives, has led to a marked increase in the number of actors and investments. Unfortunately, a **lack of coherence**, both at the country and DP level, often gets in the way of progress. It is not unusual, for example, for different sectors such as health, social affairs, finance, and local government to find themselves pulling in different directions as stakeholders seek to protect or further their interests. At the same time, the different approaches and agendas pursued by DPs can lead to incoherence if not outright interference in support efforts. Such challenges are only compounded by the shifting priorities and frequent staff changes within DPs, some of which also **lack the capacity** required to fulfil their mandates. Finally, the support provided frequently fails to recognize the complexity of the issues faced or is packaged as one-size-fits-all solutions that are imposed on countries regardless of their specific needs.
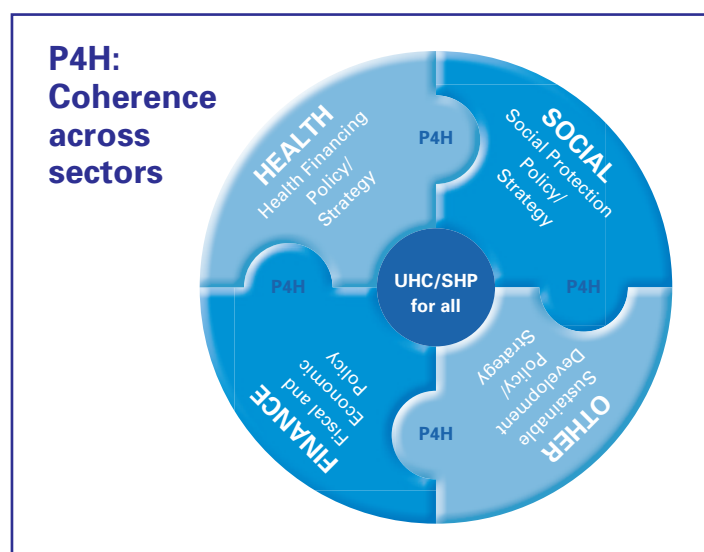
The purpose and scope of P4H

Coherent and enhanced support

The main thrust of P4H efforts is coherent, enhanced support for the creation and extension of sustainable health and social protection systems for UHC/SHP, based on the values of universality and equity.

Advocating for high-level commitment

The countries that have come farthest along the road towards UHC share a number of attributes, the most notable being optimal **political commitment**. The promotion of high-level political commitment to and ownership of UHC/SHP initiatives is therefore a key aspect of P4H support and a precondition for its successful involvement.

P4H: Coherence across sectors

UHC/SHP for all

P4H

P4H

P4H

P4H

HEALTH
Health Financing Policy/ Strategy

SOCIAL
Social Protection Policy/ Strategy

OTHER
Sustainable Development Policy/ Strategy

FINANCE
Fiscal and Economic Policy

Supporting a strategic approach

Every country faces different challenges, but the basic requirements for a successful transition to UHC/SHP are invariable, starting with effective, equitable, and sustainable financing. It is therefore essential that countries committed to UHC/SHP start by developing a **national strategy** based on the realities of what they can afford, that is in line with social and economic development objectives, and builds on a consensus about how to achieve its goals.

P4H strives to offer state-of-the-art, unbiased support that encourages countries to develop and implement their own national policies and strategies according to their national priorities.

Developing capacity for UHC/SHP

Experience shows that the capacity of stakeholders at country level is one of the key factors for an accelerated and successful transition towards UHC/SHP. The P4H network strives to move away from isolated capacity building activities to a **structured and systematic approach** that links human resource development with institutional and organisational development. Relevant interventions may cover a broad spectrum, including the development of technical skills for the analysis and validation of health financing, legal issues, social and economic issues, as well as system and sector-wide thinking and re-thinking. In addition, facilitation and mediation skills are needed to effectively address the various values, interests, and preferences that may exist at different levels, and to ensure inclusive stakeholder involvement in the transition process. Furthermore, the transition to UHC/SHP requires planning and coordination skills to create synergies among different work streams at the national level, but also related to DP activities, and finally, political skills are needed to manage multi-sectoral dialogue and to underpin effective communication of the political UHC/SHP agenda, negotiation, and debate. Where possible, P4H efforts to developing capacity will build on the existing training courses of its members WHO, ILO and World Bank. P4H members can also build regional or global (hybrid) training courses, conferences, and workshops for UHC/SHP tailored to countries' needs.

Where and how does P4H work?

The **focus of P4H is on country support**. Since its launch, the number of countries working with the network has steadily increased and currently includes: Benin, Burkina-Faso, Chad, Côte d'Ivoire, Kenya, Madagascar, Mali, Rwanda, Senegal, Tanzania, Togo, Uganda and Zambia in Africa; Bangladesh, Cambodia, India, Indonesia, Laos, Mongolia, Nepal, Philippines, Sri Lanka, and Vietnam in Asia; and Haiti in Latin America.

Globally light…

P4H uses a lean steering and coordination structure. The latter comprises a small WHO-hosted, Geneva-based Coordination Desk and several Focal Points who coordinate communication and interaction among the members and the Coordination Desk.

…country-support heavy

The main mechanism for delivering P4H support is the **country network for UHC/SHP**. National-level networks, comprising national stakeholders and P4H members, build on and strengthen existing coordination mechanisms, and are **open** to other interested parties that have a stake in UHC/SHP. Typically, P4H becomes involved at the national level, with two or more P4H partners responding to a partner country's call for support in its efforts to develop

UHC/SHP. The work of the national networks is then complemented by regional and global level support from P4H partners where requested and appropriate. Ideally, the involvement of P4H members at country, regional and global level is guided by a country-owned **roadmap for UHC/SHP**, which sets out the milestones, roles, and responsibilities of the various stakeholders that will ultimately bring about meaningful change. A **joint support plan** then allocates different support activities to specific members, and sets a timeframe for implementation. This decentralized support model forms the basis for the flexible, tailored, and integrated P4H support to countries across levels and sectors.

The golden rule

By using the simple **'inform & involve' principle**, the P4H network also builds on the already up-and-running and planned UHC/SHP interventions of its partners across a range of sectors by, for example, sharing a plan of operation, the terms of reference (TOR) of a planned study or mission, or a request for support from a national partner. By discussing opportunities for collaboration and how best to coordinate different activities at an early stage, P4H seeks to reduce incoherence and avoid duplication of effort while at the same time encouraging available synergies.

The added value of P4H

P4H is committed to managing diversity and encouraging **coherence**, thus ensuring that the principles of the **Paris Declaration on Aid Effectiveness** and the **Busan Partnership for Effective Development Co-operation work** for what is an **exceptionally complex** issue. UHC/SHP constitutes a national agenda for change and development that involves difficult choices. It also concerns a broad range of actors and stakeholders in various sectors, and thus requires technical as well as political solutions to harmonise different interests and values. The challenge for P4H is to apply widely accepted aid effectiveness principles to this complex area across sectors and at the national, regional, and global level.

There are **four main ways in which P4H can add value** to joint network responses: by ensuring political commitment, connecting different sectors, improving the quality and dynamics of support, and scaling up support for UHC/SHP.

Adding value by ensuring political commitment: combining technical and political solutions

P4H is committed to ensuring that the process of moving towards UHC/SHP is fully owned, led, and managed by individual countries. Without political commitment, the transition to UHC/SHP can easily stall or drift. So P4H also works to raise awareness about UHC/SHP beyond the technical level, to promote **high-level political commitment**.

> In **Benin**, for example, the inter-sectoral UH C committee was limited by a purely technical mandate. The P4H network recommended setting up a high-level UHC strategic committee chaired by the Prime Minister's office.

Tailored capacity development activities such as leadership programmes, high-level conferences, and ministerial study tours can act as useful mechanisms for eliciting political support, but windows of opportunity are opening all the time and P4H partners are often well placed to exploit them.

> In **Tanzania**, for example, P4H partners used the launch of a World Bank loan as an opportunity for raising awareness about the importance of the UHC agenda at the highest political level.

Adding value by connecting sectors

P4H members are particularly well placed to encourage **multi-sectoral collaboration**, drawing on many years of experience working with a range of counterparts in different ministries, development and planning commissions, employers and employee associations, and civil society organizations. P4H adds value by encouraging a broad-based, multi-sectoral approach to UHC/SHP that fosters **coherence across the areas of health, social protection, finance, poverty alleviation, and sustainable development**, countering the natural tendency for stakeholders to address challenges solely from their own perspective. The P4H approach encourages public and private stakeholders to consider other sectors' logic and constraints, allowing for the development of a truly inter-sectoral UHC strategy. The alignment of support in the area of UHC/SHP and existing Social Protection Floor (SPF) frameworks is also a crucial part of the P4H mission, as is working with countries through inter-ministerial dialogue to support policy processes, policy revision, strategies and laws.

> Examples
> P4H partners have supported **Benin**, **Chad**, **Haiti**, **Kenya**, **Lao PDR**, **Tanzania**, and **Uganda** in establishing inter-ministerial committees to foster dialogue and to harmonise the agendas of the ministries of health, finance, labour, social welfare, and local governments. Collaboration of this kind allows for the harmonisation of policies and strategies across sectors, but also broadens the scope for activities that may not yet be part of agreed upon or current bilateral/multilateral support.

Adding value by improving the quality and dynamics of support

The P4H network adds value across a range of support activities, reflecting the different mandates and competencies of the P4H members. Experts from a wide variety of backgrounds, including health systems, health economics, social protection, sustainable development, public policies, etc. can address a broad spectrum of key questions and challenges. Working in **multi-disciplinary teams** composed of experts from the country, regional, and global level of network partners, P4H promotes a balanced mix of strategic options and recommendations, while at the same **avoiding duplication** of effort, notably the time and resources wasted in the setting up of parallel UHC/SHP project streams. Thus, the network **harmonises support** within and across sectors – and **increases the dynamics** for accelerating the transition to UHC/SHP. P4H also draws on the **normative expertise** and **international experience** of WHO and ILO, both of which can provide vital support in helping countries develop actionable policy options that take into account global agreements (World Health Assembly resolutions 2005 and 2011, World Health Report 2010, ILO recommendation 202 from ILC-2012 and convention 102). To enhance the quality of support, P4H also encourages **peer review** within the network: The publication of incorrect, misleading or otherwise unhelpful material by any one of the network partners seldom goes unnoticed! The end result of this dynamic, open, and synergistic collaboration is a network that is more than the sum of its parts.

Examples

In **Uganda**, the P4H network reviewed the design of a National Health Insurance Scheme using the UHC/SHP concept, which led to a re-orientation of the scheme towards a more pro-poor approach. Considering the 'bigger picture', including issues of health, social protection, poverty and development, as well as economic and social policies, has opened the discussion for a more comprehensive national approach in line with international good practice. In **Kenya**, the P4H partners organised a well-designed ministerial study tour to UK, France and Germany exposing a high level Kenyan delegation to a broad spectrum of possible options for UHC. The international knowledge and experience gained helped to complement and enrich the on-going strategy process in Kenya. In **Cambodia**, the P4H network at global level provided highly specialised support to complement the country process in getting a deeper understanding of out-of-pocket payments and catastrophic expenditures.
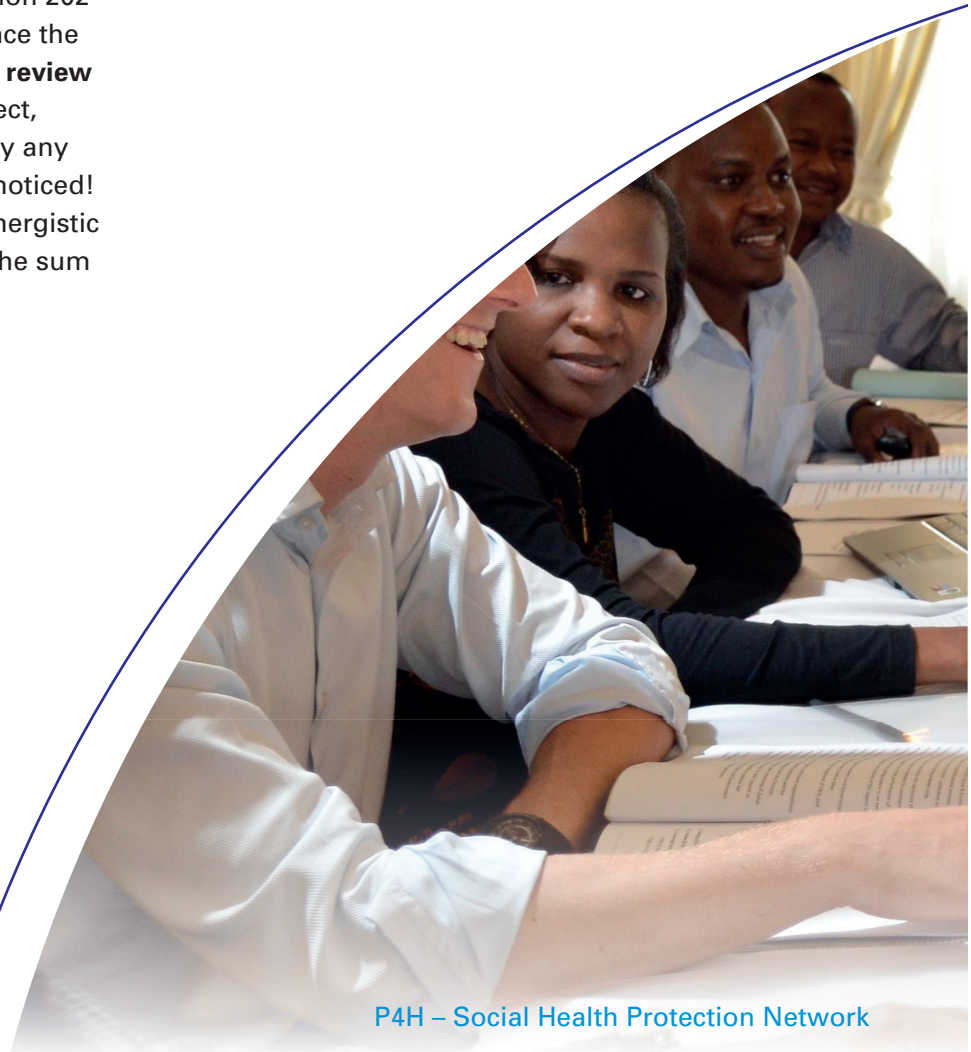
Adding value by scaling up support

The P4H network can also assist in **scaling-up** on-going support with the financial resources made available by its bilateral P4H members. These additional resources may be used to complement support activities and foster collaboration among network members at the country level. These resources thus serve as an indirect incentive for collaboration and harmonisation of support. Scaling-up support requires understanding the support need, taking into account what has already been achieved by the country network and where gaps remain. Since P4H does not work through physically pooled funding the preferred process is to develop a **joint support plan** at country level, which lists the various contributions of network partners and identifies the resource gaps. Taking country level support to scale is complemented by linking and harmonising activities with the regional/global activities of P4H, such as conferences, side events, regional and global training; and the activities of other networks such as the Joint Learning Network (JLN), initiatives such as the Social Protection Floor (SPF) and partnerships such as the International Health Partnership (IHP+).

Examples

Many countries, including **Burkina Faso**, **Côte d'Ivoire**, **Cambodia**, **Chad**, **Tanzania**, and **Togo** have developed joint (P4H) support plans designed to strengthen support to countries in their transition to UHC. The plans also contribute to the continuity of the support process. In **Benin**, the involvement of Belgium during the P4H scoping visit increased its interest in the area of health financing and may lead to additional financial commitments from Belgium in the coming years.

Relations to other partnerships, networks and initiatives

Various P4H members participate in other related partnerships, networks and, initiatives, such as the Social Protection Floor Initiative (SPFI), IHP+, Harmonisation for Health in Africa (HHA) or JLN. P4H network aims to complement these alliances and mechanisms, and leverages synergies whenever possible, such as:

SPFI and P4H

The multi-sectoral approach of P4H connects SPFI activities and the UHC agenda in the health sector. Ideally, the SHP component of the SPFI's work would be handled by the P4H network where possible.

IHP+ and P4H

IHP is limited to applying the Paris Declaration Principles to the health sector in order to accelerate progress towards the health MDGs. Synergies with P4H arise where, for example, a Joint Assessment of National Health Strategies leads to the development of a health financing strategy, which would be supported by the P4H network members.

HHA and P4H

The HHA coordination mechanism is limited to the African region and to the health sector. Countries approaching UHC from the health sector perspective may forward their request to the HHA secretariat or to any P4H member. HHA and P4H then inform each other in order to present a coordinated response. However, given that P4H approaches UHC/SHP from a multi-sectoral perspective, other sector ministries, such as a Ministry of Labour or Social Welfare, can forward requests for support to P4H.

JLN and P4H

JLN focuses on practitioner-to-practitioner hands-on learning and does not engage in policy advice, while P4H seeks coherence in on-going and planned multi/bilateral development cooperation. However, JLN activities may well complement the capacity development activities of P4H.

Overall, the various alliances described share similar principles and in practice there is more potential for synergy than duplication. The P4H network participants certainly appreciate the complementarity of P4H and related partnerships, networks, and initiatives. In order to strengthen such synergies and to improve coordination, the P4H Coordination Desk regularly interacts with the secretariats of other alliances to ensure information exchange and the harmonisation of activities.

A global network for Universal Health Coverage (UHC) and Social Health Protection (SHP)

Contact and more information

Countries can tap into the network by contacting the P4H Coordination Desk directly (**info@providingforhealth.org**) or by going through one of the network members.

Weblink: more information can be accessed at **http://www.providingforhealth.org**

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