

Leadership for UHC - Collective Action Initiatives

Kenya	Area:	Support an inclusive stakeholder dialogue on health financing
	Objective:	Engage additional stakeholders from the decentralized level in the UHC Technical Working Group
	Action Plan:	<ol style="list-style-type: none"> 1. Team Member to brief bosses, relevant colleagues and subordinates of represented organisations (by end Nov) 2. Set up google group 3. Share documentation of agreements 4. Members to individually take responsibility to inform key stakeholders and lobby potential members identified before next UHC Steering committee meeting (incl. Council of Governors on Health, Treasury, MOH departments, HENNET – an NGO forum, Kenya Medical Association and others)
	Context of the CAI	Kenya has been working health care financing reforms for more than 10 years. In 2004, a bill for a universal Social Health Insurance was vetoed by the President after protests from the private sector. After massive riots in 2007, Kenya administratively and financially decentralized to elected County governments. These are now responsible for social services and hold the budget to finance service provision. The current UHC reform effort aims to establish universal Social Health Insurance through a centralized purchaser while maintaining the mandates of Counties. A larger stakeholder committee (the Health Financing ICC) is in place but currently inactive. Nevertheless, there is a wide agreement that it needs to be reactivated. The Ministry of Health kept it in place when streamlining the formerly 17(!) health sector ICCs to about 6 following a review of the health sector dialogue structures. The Health Financing ICC has been traditionally focused on central level actors, Government, parastatals, donors and private actors, but the review dialogue structure did not only suggest a reduction in the number of ICCs, but also the inclusion of representatives of the Counties in the structure. The CAI is therefore well integrated the ongoing reform processes.
	Relevance of the CAI	UHC stretches across Government levels and departments as well as across the public-private sectors. The lack of wide agreement over reform design is a precondition for an effective implementation of reform plans, as the failed Social Health Insurance reform of 2004 showed. As Counties currently hold most of the funding for health, their participation in the TWG UHC is of high importance. Any reform that involves strengthening the central purchasing function at the NHIF will need to be supported by them. Being constitutionally responsible for access to health care, County governments face a strong pressure to show progress. This may make them a driving force for reforms. At the same time, they have the power to push for a place at the table. Inclusion of private groups is also a positive momentum. Against the background of the recent downsizing of dialogue structures, ways need to be found to ensure meaningful consultation without raising fears in central Government that progress in the design process may slow.
	Team mandate and position in relation to the CAI	As chair of the Council, program participants Governor Ranguma and County Minister Ominde can effectively push this agenda. Support from the NHIF, for which Nellie Keriri can lobby within the management of the NHIF, would facilitate agreement with the MOH. Kennedy Pambo holds a junior position in the MOF and is unlikely to effectively influence the MOFs position on UHC.
	Final Status (as of 12 Mar 2015)	Concept for an Intergovernmental UHC Steering Committee has been developed. To be co-chaired by Cabinet Secretary for Health and Chair of the Council of Governors. Pre-consultative meetings have been conducted and key members identified. MOF is to play a key role.
Next steps outlined	<p>Hold a Leadership Forum on UHC; participants: Governors, CECs, MoH, MoF, key partners supporting UHC (WBG, GIZ, KfW, JICA, USAID)</p> <ol style="list-style-type: none"> 1. To enhance the teams communication - create Whatsapp and Google group 2. Governor Ranguma to have pre-meetings with key stakeholders in preparation for the UHC Forum 3. Keynote speakers: e.g. Turkish former Minister of Health, Martin Kalungu-Banda, etc. 4. Taking stock of Kenya's activities towards UHC 5. Launch of intergovernmental UHC Steering Committee 6. Sign off a joint communiqué by governors as a show of commitment 7. Sign off by Partners as commitment to support Kenya on UHC. <p>The work plan is carried by a strong personal commitment by Governor Ranguma.</p>	