Accelerating Political Momentum for Universal Health Coverage: UHC2030 Framework for Advocates

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INTRODUCTION

Background: The Growing Movement for UHC

What is Universal Health Coverage?
Universal health coverage (UHC) is the goal of ensuring that everyone, everywhere can access quality health care without suffering financial hardship. Strong, equitable health systems that leave no one behind are essential to achieving this goal. Progress is measured by coverage of essential health services and the proportion of the population pushed or pushed further into poverty by health costs. UHC is essential to ending extreme global poverty and increasing equity and shared prosperity.

Hard-Fought, Hard-Won Progress
For a long time, the prevailing wisdom in global development circles was that UHC was unaffordable, unmeasurable and unachievable. But thanks to the tireless efforts of advocates working at the global and national levels, the last decade has seen a dramatic shift toward consensus that UHC is morally right, economically smart and urgently needed.

The vast majority of global health challenges stem from a shared obstacle: under-resourced, fractured health systems that fail to provide the poorest and most marginalized communities access to quality, affordable health services. These gaps threaten lives and livelihoods, exacerbate rising inequality, and undermine economic growth and social stability in rich and poor countries alike. As crises like Ebola and Zika have made painfully clear, our health systems are only as strong as their weakest links.

A rising chorus of support from policymakers, health experts, economists and civil society led to the United Nations’ unanimous endorsement of UHC on 12 December 2012 and the historic inclusion of UHC in the Sustainable Development Goals (SDGs) under Target 3.8: “Achieve universal health coverage, including financial risk protection, access to quality essential healthcare services and access to safe, effective, quality and affordable essential medicines and vaccines for all.”

Now, UHC is widely embraced as the development community’s unifying health goal in practice—one that is essential for ending poverty and building the future we want by 2030. The election of Dr. Tedros, who focused his campaign to lead the World Health Organization on a promise to make UHC his number one priority, illustrates how far we have come.

What is Next?
The movement for universal health coverage has reached an inflection point. If the past several years have been about getting the world to agree that UHC is right, smart and overdue, the next chapter will be about helping more people across sectors take concrete steps—at the community, national, regional and global levels—to build the strong health systems that will make it a reality.

The Need for Sustained, Strategic Advocacy for UHC

As an inherently political goal rooted in the human right to health, progress toward UHC is not inevitable—and rarely follows a linear trajectory. Effective advocacy grounded in human rights and evidence is central to accelerating health reforms that truly benefit the poorest and most marginalized populations.

Much of what we know about effective health advocacy can be traced back to progress driven by
disease- or population-specific issue communities, including the global campaign to build awareness of and to prevent and treat HIV/AIDS. As we enter a new phase of UHC advocacy, we must learn from these successes while tailoring our efforts to the unique challenges that lie ahead for our movement.

Going forward, UHC advocacy efforts at the global and country levels must:

1. **Continue promoting a strong value case for UHC.**
   While support for UHC is greater than ever before, we must not take this relatively new reality for granted. To mobilize even broader support for our cause and encourage needed policies and investments at the country level, we must keep convincing decision-makers, their constituents and stakeholders working across health and development that investing in UHC is in their—and everyone’s—best interests. Convincing policymakers and diverse communities at all levels to stand up for UHC begins with leveraging the right messages, messengers and milestones to make our case.

2. **Support and spotlight progress happening at the country level.**
   To succeed, the movement for universal health coverage must be country-driven. National advocates are best positioned to define success in their context, build awareness and engagement in their communities and hold leaders accountable for short-term goals. In addition to supporting these efforts, the global movement must get better at celebrating countries’ intermediate steps toward health for all and giving hard-working national champions the recognition they deserve. Only then can we take UHC off the pages of technical reports and catalyze transformative change.

3. **Earn the support of stakeholders across global health and development.**
   A growing number of organizations across health and development are voicing support for universal health coverage, but this is just a first step. We must all—as global and national advocates who care about UHC—do our part to break down the illusory siloes between issue communities, sectors and organizations in practice to strive more powerfully toward our common goal: strong health systems that will deliver health for all.

**About This Strategy**

**Goals & Audiences**
The goal of this advocacy strategy is to **support and align** diverse stakeholders to **advocate for meaningful health system reforms** at the **national level** to **leave no one behind**.

This strategy is designed to support a wide array of partners and stakeholders within and beyond UHC2030. Whether you are a longtime UHC advocate or interested in getting more involved, and whether you are working at the country, regional or global level, **we hope this framework will help you to focus your efforts, identify effective actions, and get to work.**

**Role of UHC2030**
While this strategy aims to provide a framework for all UHC advocates, **the UHC2030 implementation plan** *(see Appendix)* **delineates where UHC2030 itself intends to contribute.** In particular, as the primary multi-stakeholder platform working to build stronger health systems for UHC, UHC2030 has a unique role to play in **coordinating and aligning** partners’ UHC advocacy efforts across issues, countries and sectors; creating a central **hub of resources and information** for partners to leverage in support of their advocacy work; and promoting a **positive feedback loop** between the UHC2030.
global vision of health systems strengthening for UHC and country-specific advocacy.

While UHC2030’s ultimate aim is to support national advocacy efforts, it will mostly operate at the global and regional levels. (See UHC2030 Implementation Plan in Appendix).

The advocacy strategy set forth here also will rely on collaboration with several other streams of work led by UHC2030, including those focused on accountability, knowledge management and communications, as well as civil society engagement mechanisms (CSEM). It provides a framework that national-level advocates can tailor to their specific needs and contexts.

Process for Developing the Strategy
UHC2030 convened an Advocacy Working Group that includes advocates and experts on health financing, communications, political economy and primary health care, as well as representatives from civil society, youth groups, development agencies and philanthropic foundations.

This strategy has been informed by:
- UHC2030’s joint vision of health systems strengthening for UHC, particularly the principles for action (summarized in Box 1)
- More than 25 interviews with members of the UHC2030 Advocacy Working Group (AWG) and individuals recommended by the UHC2030 Secretariat
- Half-day working session in Geneva during the 70th World Health Assembly
- Final consultation with the UHC2030 Advocacy Working Group, recommended resource persons and the UHC2030 CSEM advisory group

Box 1: Healthy systems for universal health coverage – a joint vision for healthy lives

Dimensions of health system performance: Equity, Quality, Responsiveness, Efficiency, Resilience

Entry points for policy action: Service delivery, Financing, Governance

Principles for action: Leaving no one behind; Transparency & accountability; Evidence-based strategies; Making health systems everyone’s business; International cooperation
STRATEGIC PILLARS & PRINCIPLES FOR UHC ADVOCACY

Strategic Advocacy Pillars

Whether you’re advocating for UHC at the national level or the global level, use these pillars to focus your advocacy efforts, identify effective actions and get to work. While there are many ways to advance these goals, key action areas are assigned to each pillar and described in more detail in the next section. As you work to advance these goals, it is important to remember that significant infrastructure already exists to support our efforts, and to leverage existing platforms and advocacy tools.

Pillar I: Build political support and grassroots demand for UHC to motivate policies and investments that aim to leave no one behind.

<table>
<thead>
<tr>
<th>Build High-Level Political Support</th>
<th>Generate Grassroots Demand</th>
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<tbody>
<tr>
<td><strong>Country level:</strong> Convince more in-country, high-level policymakers, especially beyond the health sector, that UHC is a right, smart and affordable investment that yields massive social and economic returns for countries—and wins votes.</td>
<td><strong>Country level:</strong> Strengthen public understanding of and demand for UHC by communicating what achieving this goal would mean for individuals and communities; create opportunities for citizens and communities to hold their leaders accountable.</td>
</tr>
<tr>
<td><strong>Global level:</strong> Work with in-country advocates to make the case for UHC and ensure that influential global voices continue to name it as a priority for all countries.</td>
<td><strong>Global level:</strong> Support these efforts by sharing lessons learned, human stories, and messages that have proven effective, and by providing resources for community engagement activities.</td>
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Pillar II: Develop national action plans, define measurable results, and celebrate steps forward.

<table>
<thead>
<tr>
<th>Define Success in Each Country</th>
<th>Elevate Champions &amp; Intermediate Steps</th>
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<tbody>
<tr>
<td><strong>Country level:</strong> Work to develop or accelerate national action plans or roadmaps for UHC that adapt general principles to specific country contexts, with an emphasis on short-term goals that can be accomplished over two to four years (e.g., strengthening primary health care, defining and costing essential health benefits packages, developing a health financing strategy). Seek explicit government commitments to meet milestones outlined in national action plans/roadmaps.</td>
<td><strong>Country level:</strong> Spotlight local, national and regional progress toward UHC—especially “intermediate” steps or breakthroughs—and recognize advocates and leaders who help bring about change, as demonstrated by their meeting advocacy metrics established by the UHC2030 accountability strategy.</td>
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<tr>
<td><strong>Global level:</strong> Provide examples of how success on the road to UHC has been defined in other contexts.</td>
<td><strong>Global level:</strong> Share country level successes in international forums to both give credit and inspire others.</td>
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</table>
Pillar III: Support a broad, inclusive and cohesive advocacy community to maximize reach, coordination and impact of UHC advocacy.

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<tr>
<th>Personalize the Value Case for UHC</th>
<th>Nurture Mutually-Beneficial Partnerships</th>
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<tbody>
<tr>
<td><strong>Country and global level:</strong> Show how investing in strong health systems and UHC supports diverse health and development goals and populations.</td>
<td><strong>Country and global level:</strong> Partner with other organizations to pool resources and promote joint advocacy strategies for mutually-beneficial policy change.</td>
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Principles for Action

*The principles derived from the UHC2030 joint vision should guide your work advocating for UHC across the strategic pillars above and specific action areas described in the following section.*

- **Leave no one behind:** commit to equity, non-discrimination and a rights-based approach—this starts by giving marginalized groups a seat at the table when shaping health policies and programs
- **Be transparent** and hold yourself and others accountable to commitments
- Use an evidence-based approach to communicate that UHC is right, smart and achievable
- Make health systems everybody’s business—engage diverse communities, organizations and sectors
- Collaborate and share lessons across countries, including between countries of different income levels and at varying stages of progress toward UHC

Prioritizing Opportunities for Impact

*Whether you’re advocating for UHC at the global, national or sub-national level, it will be essential to prioritize your efforts. Below are questions to consider when choosing where to focus time and resources.*

- Where are the biggest health system gaps? Which populations are in the greatest need?
- Are there existing resources to work with (e.g., policies, funding) or potential to secure more?
- Is there a political window of opportunity (e.g., an election, policy debate)?
- Are there other UHC advocates (e.g., civil society organizations, healthcare champions) who have requested support or want to partner for greater impact?
- If successful, could your efforts have positive spillover effects for other populations or issues?
- Finally, be opportunistic and prepare to move swiftly if an unexpected opportunity arises (e.g., stay up to date on current events, create adaptable messages that allow you to leverage the news cycle).
UHC ADVOCACY IN ACTION

The following action areas—each housed under one of the strategic pillars—provide examples of key ways advocates can contribute to the broader strategy. Given that there is no “one-size-fits-all” approach to UHC and every country must determine its best pathway forward, you are encouraged to adapt these actions to your unique context and issue priorities.

Global advocates must prioritize collaboration with national civil society organizations and advocacy champions across all action areas. All advocates should make every effort to leverage existing partnerships, platforms and mechanisms before starting something new.

What Advocates Can Do

<table>
<thead>
<tr>
<th>PILLAR 1</th>
<th>ACTION 1: Build high-level political support, including among policymakers beyond health</th>
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<tbody>
<tr>
<td>• Equip yourself and others to convince policymakers that UHC is the right and smart investment for the government, balancing human stories &amp; data, with a goal of increasing domestic resources for health to reach at least 5% of GDP. Remind politicians that health investments and improvements are key to eradicating poverty—and earn votes and public support.</td>
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<tr>
<td>• Leverage influential non-government voices to help make your case. Engage the people or groups that your policymakers respect and listen to, such as businesses, academic experts or faith leaders.</td>
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<tr>
<td>• Engage key decision-makers and advocates beyond the health sector. Health decisions involve and affect groups that may not visibly work on health. Engage leaders in the Ministry of Finance and Parliament, tax justice groups, education advocates and more.</td>
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<tr>
<th>ACTION 2: Generate and amplify grassroots demand for quality, affordable health care</th>
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<tr>
<td>• Build public awareness and understanding of UHC. Help citizens and communities understand how UHC would personally benefit them by grounding the “right to health” in concrete realities (e.g., what services a local health center should guarantee). Engage people that communities trust and respect to deliver the message (e.g. community health workers, faith leaders).</td>
</tr>
<tr>
<td>• Create opportunities for people to hold their governments accountable. Partner with civil society organizations to organize citizens’ hearings on health, create election scorecards and amplify civil society messages to reach decision-makers.</td>
</tr>
<tr>
<td>• Engage groups directly affected by the strength of the health system. UHC advocates can do more to consistently engage patient groups, physician groups, health worker coalitions, labor unions, and marginalized populations.</td>
</tr>
</tbody>
</table>
ACTION 3: Identify what success looks like in each country – and key ways to achieve it

- **Convene or join a national action group or civil society platform** to identify the most important national health system gaps across service delivery, financing & governance (see vision paper for more info), building on existing action groups or civil society platforms first, before starting something new. Make sure diverse issues, sectors and marginalized groups are represented.

- **Outline intermediate, measurable steps** to fill these health system gaps—and encourage decision-makers to pledge action and investments toward these goals. New health policies and budgets must explicitly address how the country will leave no one behind.

- **Develop a calendar of national advocacy moments** to coordinate and activate partners around priority moments, leaving room to seize political opportunities as they arise.

ACTION 4: Elevate national champions & successes, including “intermediate” steps

- **Find and offer support to strong champions for health at the country level**—whether in government, civil society or another sector—to recognize their work and pool your resources.

- **Convince local and global media** to spotlight countries’ intermediate successes and the change-makers responsible; share these stories with digital networks.

- **Find out who is representing your country/issue at major health meetings** and equip them to share these stories and experiences as examples of tangible progress and lessons learned.

ACTION 5: Personalize the value case for UHC to engage diverse issue communities

- **Share data and human stories** demonstrating that investments in equitable health systems drive improvements for countries’ priority health and development issues and populations.

- **Ensure opportunities for champions from diverse issue communities** to make their voice heard and reinforce linkages between their cause and UHC.

- **Listen and respond to partners’ challenges** advocating for UHC in parallel with their other priorities, and offer guidance and resources to support them.

ACTION 6: Nurture mutually-beneficial partnerships

- **Meaningfully engage with partners across health and development** to learn about their priorities and agree on shared health system goals that would benefit all groups.

- **Build on the work of others**. No matter what challenge you are facing, chances are that another organization or country has been in a similar position. Before creating a new resource, group or initiative, first seek existing materials, initiatives and lessons learned.

- **Use global milestones like Universal Health Coverage Day on 12 December** as an opportunity to unite diverse stakeholders across issue communities and sectors.
Advocacy Examples

Following are select examples of partner advocacy for UHC, linked to the six action areas as relevant (see below for action area summary).

**The National Empowerment Network of People Living with HIV/AIDS in Kenya** used UHC Day 2016 to host a roundtable discussion with leaders of the Kenya Health NGOs Network, Kenya Medical Association, KELIN, WACI Health and AIDS Healthcare Foundation Kenya. This event, attended by a Ministry of Health official, laid the groundwork for a national UHC Coalition, which NEPHAK partners are now working to operationalize. They plan to engage the ministry of health, parliamentarians, particularly members of the Parliamentary Committee on Health, the Council of Governors and county-level officials.

(ACTIONS 1, 3, 6)

**The Federal Medical Center of Yenagoa, Nigeria** helped raise awareness about UHC in 2016 through a series of interviews broadcast by the Nigerian Television Authority, which led to long-term engagement with the Bayelsa State Commissioner for Health. The Centre helped advocate for the 2017 establishment of the Bayelsa State Health Insurance Scheme, and has been engaging labor unions to increase demand for a social health insurance program.

(ACTIONS 1, 2, 3, 4)

**Save the Children and PMNCH** co-published *A Common Cause* to emphasize the need for interconnectedness between the maternal and child health and UHC agendas.

(ACTION 5, 6)

**The Primary Health Care Performance Initiative (PHCPI)** is working to measure the strength of primary health care systems at the country level to equip advocates, donors and policymakers with the information they need to strategically allocate resources and drive improvements.

(ACTIONS 1, 2, 3, 5)

**The Rockefeller Foundation** launched The Economists’ Declaration on UHC, which 360 economists in 53 countries signed to tell leaders that investing in UHC makes economic sense.

(ACTION 1)

**In July 2017, The People’s Health Movement of Tanzania** collaborated with The Elders and other civil society groups to host a UHC event in Tanzania. The Elders elevated civil society’s priorities in their meetings with policymakers, and PHM Tanzania leveraged momentum from the event to launch a joint plan on civil society action on UHC in Tanzania.

(ACTIONS 1, 2, 3, 4, 6)

**UHC advocate Dr. Sheraz Khan** published an editorial on Pakistan’s journey toward UHC, including lessons learned. It was published in the Journal of Ayub Medical College, one of three Pakistani journals indexed by the WHO and PubMed.

(ACTION 4)

**BHORE and Nepal Health Economics Association** helped develop and launch a national UHC strategy in Nepal.

(ACTION 3)

**The Indonesian Forum for Budget Transparency (SEKNAS FITRA)** advocates for transparent, pro-poor and gender-responsive budgeting – in cooperation with both local civil society and the Ministry of Finance. For example, it analyzed the regional implementation of Indonesia’s 2004 National Social Security System, helping to inform the national health insurance scheme launched in 2014.

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(ACTIONS 1, 3)

Action Areas

- **ACTION 1**: Build high-level political support, including among policymakers beyond health
- **ACTION 2**: Generate and amplify grassroots demand for quality, affordable health care
- **ACTION 3**: Identify what success looks like in each country – and key ways to achieve it
- **ACTION 4**: Elevate national champions & successes, including “intermediate” steps
- **ACTION 5**: Personalize the value case for UHC to engage diverse issue communities
- **ACTION 6**: Nurture mutually-beneficial partnerships

Wording of examples to be finalized in partnership with listed organizations
## APPENDIX A

### Getting to Work: UHC2030 Implementation Plan

While the success of this strategy will depend on broad participation and support from a wide range of partners, the following implementation plan outlines how UHC2030 plans to support collective efforts that will help take the advocacy strategy forward in 2018-2019, with a heavier emphasis on 2018 to start. Much of the strategy will depend on diverse partners identifying which of the pillars and actions above align best with their own strengths, resources, and priorities.

As noted above, UHC2030’s contributions will focus on facilitating and aligning partners’ efforts, rather than duplicating them. This will include supporting The Road to UHC, a new campaign to mobilize political will and community action to extend UHC to one billion more people by 2023.

The below implementation plan will be executed, regularly reassessed and refined by UHC2030 core team members and representatives of UHC2030-related initiatives; in a rapidly changing landscape, we will only maximize our impact by remaining nimble, opportunistic and adaptive.

<table>
<thead>
<tr>
<th>Strategic Pillars</th>
<th>UHC2030 activities in 2018-2019</th>
<th>Indicative outputs</th>
<th>Collaboration with other areas of UHC2030’s work</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pillar I: Build political support and grassroots demand for UHC to motivate policy change and investment.</td>
<td>Develop robust arsenal of advocacy materials that drive home the investment case and can be adapted by national advocates</td>
<td>Creation and dissemination of materials</td>
<td>Communications; Knowledge management</td>
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<tr>
<td></td>
<td>Organize UHC events and meetings with influential policymakers beyond Ministry of Health</td>
<td>2-3 prominent UHC meetings that engage government stakeholders beyond health</td>
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<td></td>
<td>Encourage and support leaders to make tangible, transparent and publicly accessible commitments, in alignment with The Road to UHC</td>
<td>Progress on interim targets set by The Road to UHC planning committee</td>
<td>The Road to UHC planning committee (co-lead), Accountability</td>
</tr>
<tr>
<td></td>
<td>Advocate for improved reporting and monitoring of UHC progress in countries</td>
<td>SDG indicator 3.8.1 to be upgraded from Tire 3 to Tire 2; both SDG indicator 3.8.1 and 3.8.2 to be reported to HLPF in 2019</td>
<td>Accountability</td>
</tr>
<tr>
<td>Pillar II: Develop national action plans, define measurable results, and celebrate steps forward.</td>
<td>Provide creative and consistent recognition of countries, institutions, and communities taking intermediate steps toward UHC, and the champions responsible, through activities such as UHC Awards; UN HLM on UHC, International UHC Day, World Health Day on UHC, Alma-Atta@40th</td>
<td>Successes and steps forward highlighted via events (see Appendix B), media, social media and web platforms</td>
<td>The Road to UHC planning committee (lead); Communications; Knowledge Management</td>
</tr>
<tr>
<td>Pillar III: Support a broad, inclusive and cohesive UHC community to maximize reach and impact of UHC advocacy.</td>
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<tr>
<td><strong>Provide small grants to support national advocacy activities, with a focus on civil society and annual UHC Day campaigns</strong></td>
<td>20-25 high-impact civil society events sponsored</td>
<td>Civil Society Engagement Mechanism</td>
<td></td>
</tr>
<tr>
<td><strong>Create guidelines to help national actors define advocacy priorities, building on the joint Vision Paper and UHC monitoring report 2017</strong></td>
<td>List of guidelines agreed by UHC2030 Steering Committee &amp; disseminated</td>
<td>Accountability</td>
<td></td>
</tr>
<tr>
<td><strong>Refine criteria to help UHC2030 global partners identify and re-evaluate which countries should be the focus of their advocacy support each year</strong></td>
<td>List of criteria agreed and endorsed by UHC2030 Steering Committee &amp; adopted by partners</td>
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<tr>
<td><strong>Monitor landscape to respond to national advocacy opportunities as they arise</strong></td>
<td>Advocates activated and coordinated around key moments</td>
<td>Knowledge Management; other teams as needed</td>
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<tr>
<td><strong>Create pathways for people to bring opportunities to UHC2030’s attention</strong></td>
<td>Online submission form launched and publicized</td>
<td>Knowledge Management</td>
<td></td>
</tr>
<tr>
<td><strong>Support advocacy trainings for diverse stakeholders in countries (e.g., CSO, patient groups, health worker coalitions, local media)</strong></td>
<td>Trainings for advocates held in priority countries or regions, tailored to income level and/or aid transition status</td>
<td>Civil Society Engagement Mechanism (lead)</td>
<td></td>
</tr>
<tr>
<td><strong>Conduct tailored outreach to help build and connect network of engaged in-country advocates</strong></td>
<td>Increased collaboration among UHC advocates at the national level</td>
<td>Civil Society Engagement Mechanism</td>
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<tr>
<td><strong>Coordinate a schedule for partners’ announcements or new data to be released, building in a plan for collective amplification</strong></td>
<td>Calendar of forthcoming announcement and accompanying communications strategy</td>
<td>Knowledge Management; Communications</td>
<td></td>
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<tr>
<td><strong>Collect data and human stories that demonstrate positive impact of HSS/UHC investments for diverse issue communities</strong></td>
<td>More disease- and population-specific agendas including actions for HSS/UHC</td>
<td>Knowledge Management; Communications; Civil Society Engagement Mechanism</td>
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<tr>
<td><strong>Create platforms for collaboration among disease- or population-specific advocacy communities (e.g. PMNCH, NCD Alliance, STOP TB Partnership, WASH...etc)</strong></td>
<td>Increase in joint activities and coordination with these groups</td>
<td>Multisectoral; Civil Society Engagement Mechanism</td>
<td></td>
</tr>
<tr>
<td><strong>Harmonize advocacy messages among UHC2030 partners</strong></td>
<td>Shared UHC messaging framework developed and disseminated</td>
<td>Communications</td>
<td></td>
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<tr>
<td><strong>Hold quarterly UHC2030 advocacy call to coordinate around global moments</strong></td>
<td>Coordination calls with key UHC advocacy stakeholders held regularly</td>
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2018 Tentative Milestones to Consider for Advocacy

Select National Elections

- Sierra Leonean general election (7 March)
- Afghan parliamentary election (7 July)
- Zimbabwean general election (23 July and 21 August)
- Cambodian general election (29 July)
- Pakistani general election (No later than 3 September)
- Cameroonian presidential election (October)
- Thai general election (November)
- United States mid-term elections (6 November)
- Malian parliamentary election (December)

Select Global Milestones

- World Economic Forum Annual Meeting, Davos, Switzerland (23-26 January)
- Prince Mahidol Award Conference, Bangkok, Thailand (29 January-3 February)
- World NGO Day (27 February)
- 100th Anniversary of the 1918 flu pandemic (11 March)
- World Health Day on UHC (7 April)
- 2018 World Bank Spring Meetings, Washington, D.C., USA (20-22 April)
- World Health Assembly, Geneva, Switzerland (22-31 May)
- 44th G7 Summit, Quebec, Canada (8-9 June)
- FIFA World Cup, Russia (14 June-15 July)
- High-level Political Forum on Sustainable Development, New York, USA (9-18 July)
- UN General Assembly, New York, USA (18-25 September)
- Global Citizen Festival, New York, USA (Dates TBD, September)
- Third High-Level Meeting on Non-Communicable Diseases (Dates TBD, September)
- First High-Level Meeting on Tuberculosis (1, September)
- Fifth Global Symposium on Health Systems Research, Liverpool, UK (7-11 October)
- International Day for the Eradication of Poverty (17 October)
- 40th Anniversary of Alma-Ata Declaration (25-26, October)
- 2018 International Conference on Family Planning, Kigali, Rwanda (12-15 November)
- International Universal Health Coverage Day (12 December)
- WHO Financing Campaign Event(s), (Date(s) TBD, 2018)
APPENDIX B

The Road to UHC: Tentative Milestones

![Milestones Diagram]

Announcements of UHC commitments

![Further Milestones Diagram]

Announcements of UHC commitments