



UHC2030 STEERING COMMITTEE
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Albert Borschette Conference Centre
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Strengthening accountability for UHC – proposed approach

For Information **For Review & Advice** **For Approval**

Strengthening accountability for UHC – proposed approach

Overview of this document

This document outlines how accountability for UHC looks like, why it matters and how different stakeholders at different levels should align to support country-led advocacy. It also proposes how UHC2030 can continue to take its accountability strategy forward, including in collaboration with the UN Secretary-General's Independent Accountability Panel (IAP) for Every Woman Every Child (EWEC).

Background: UN HLM outcomes and expectations for enhanced accountability

The adoption of the historic Political Declaration on UHC at the UN High-Level Meeting on UHC (UN HLM) on 23 September during the 74th UN General Assembly (UNGA) represents an unprecedented political commitment to achieving health for all. This is the most comprehensive health declaration ever agreed by UN member states, showing that world leaders are taking the health of their people seriously.

The Political Declaration provides a strong vision for health with primary health care as “the cornerstone of a sustainable health system for universal health coverage and health-related Sustainable Development Goal”. It recognizes the importance of robust and resilient primary healthcare systems to drive progress on tackling communicable diseases, including HIV/AIDS, tuberculosis and malaria, while addressing non-communicable disease and the growing threat of antimicrobial resistance.

Although each country will need to take forward this global agreement in its own way, governments are being held accountable for their commitments under the Political Declaration: they will have to report back to the UNGA in 2023 on the progress they have made; and more importantly, their people will use the Declaration as a basis to hold them accountable. The Political Declaration recognizes the importance of multi-stakeholder engagement and participatory governance, with member states committing to establish multistakeholder platforms to review progress on UHC (paragraph 54).

A number of other stakeholders have build on the momentum around the UN HLM to take further steps in strengthening their contribution. Some examples include:

- The Inter-Parliamentary Union Assembly in October 2019 adopted a global parliamentary resolution on UHC “Achieving universal health coverage by 2030: the role of parliaments in ensuring the right to health”. This resolution calls on parliaments to take specific actions in terms of legislation, budget allocation, accountability and advocacy to achieve UHC.
- Global Action Plan for Healthy Lives and Well-being for All: Twelve agencies committed to improving efficiency and health outcomes by aligning efforts
- UHC2030 Private Sector Constituency Statement: the statement includes a set of principles outlining how private sector can align with UHC goals and contribute to UHC outcomes.

At the same time, significant challenges remain. Right now, at least half the world's population does not have access to essential health services. The 2019 [UHC Global Monitoring Report](#) found that coverage of essential health services increased in all regions and all income groups, but the pace of progress has slowed since 2010 and poorer countries lag behind. If current trends continue, up to 5 billion people will still be unable to access health care in 2030. Most of those people are poor and already disadvantaged. The gains in service coverage have also come at a major cost to individuals and their families. Incidence of large out-of-pocket spending on health in relation to household consumption or income, increased continuously between 2000 and 2015.

The Civil Society Engagement Mechanism (CSEM) has expressed concerns in its [commentary](#) on the 2019 UHC Global Monitoring Report that the existing UHC monitoring processes leave the most vulnerable populations out: household surveys and facility data are unlikely to capture data from all populations as the most vulnerable people are often those who are stigmatized, hidden, imprisoned, illiterate, and/or undocumented.

Call for an integrated system to Monitor, Review, Remedy and Act in support of accountability for UHC

The implementation of the UHC Political Declaration calls more than ever for an evidence-based and multistakeholder accountability process that is country led and grounded in national planning and review cycles. There is ample evidence that health outcomes are much better when people participate and engage with health policy processes, which reinforces the call from communities and civil society organisations to promote social accountability approaches for stronger responsiveness to people's needs (see document UHC2030/2019/SC6/09.Rev1).

While UN member states have mandated the UN High-Level Political Forum (HLPF) to be the UN main platform on sustainable development and play the central role in the follow-up and review of the SDGs under the Economic and Social Council, the participation of other relevant platforms and stakeholders is encouraged. As part of its follow-up and review mechanisms, the 2030 Agenda encourages member states to “conduct regular and inclusive reviews of progress at the national and sub-national levels, which are country-led and country-driven” which are expected to serve as a basis for the regular reviews by the HLPF.

In this context, the UN Secretary General's Executive Office has asked the IAP – which is the only health related independent UN body appointed by the UN Secretary General and has a decade of experience with accountability on women, child and adolescent health, to prepare a proposal for an integrated accountability framework around UHC. As proposed in the State of UHC Commitment Report (see document UHC2030/SC6/2019/08.Rev1), UHC2030 together with IAP and the UN Department for Economic and Social Affairs could contribute to strengthen country review processes by helping to compile/synthesise information from various relevant processes and sources of data against selected indicators (e.g. a possible model could be the [ALMA score card](#)).

The objective of the discussion is to take stock of current thinking around accountability for UHC, how UHC2030 can contribute to shape a shared vision and possible next steps.

The Steering Committee is invited to provide advice on:

- Overall approach to strengthen accountability (slides 8-10)
- Opportunities for UHC2030 to collaborate with IAP in 2020, including case studies to feed in the IAP report on “UHC for all people: accountability for every woman, child, adolescent and those left furthers behind” (e.g. case studies and recommendations) (slides 9 and 17)
- Open questions and critical issues for considerations (slide 20)

Strengthening accountability on UHC – proposed approach

**DEFINITIONS, PRINCIPLES AND LESSONS
LEARNED**

Accountability definitions

“Tracking resources and results of public health spending are critical for transparency, credibility and ensuring that much-needed funds are used for their intended purposes and to reach those who need them most.” Jakaya Kikwete, President of the United Republic of Tanzania (2011)

- No single definition (see cloud of concepts and IAP working definition on following slide)
- Accountability is about:
 - ensuring that all partners honor their commitments
 - demonstrating how actions and investment translate into tangible results and better long-term outcomes
 - Telling us what works and what needs to be improved
 - Connecting resources with results, outcomes and impact
- Four interconnected processes: monitor, review, remedy and act– aimed at learning and continuous improvement
- Accountability needs to be placed where it belongs: at the country level, with the active engagement of governments, communities and civil society; and with strong links between country-level and global mechanisms.

=> A framework relevant to health more broadly, providing the basis to serve as a catalyst for strengthened accountability within national health systems and across the global health community

Source: Commission for Information and Accountability (CoIA), Keeping Promises, Measuring Results (2011)

Agreement, commitments and action are needed for strengthened accountability



Accountability, IAP working definitions, will be finalized in 2020 report

WHAT? Sociopolitical **Answerability for Resources, Results, Rights & Roles** to Achieve Agreed Goals

HOW? Monitor, Review, Remedy and Act (IAP 2016 report)

Accountability principles

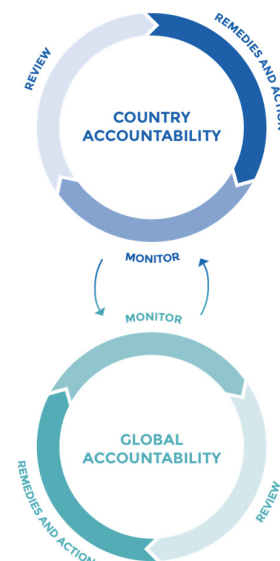
- Role of national leadership and ownership of results
- Strong country capacity to monitor and evaluate, remedy and act
- Robust, timely data for evidence-based decisions
- Support country systems and country-led plans and investment
- Reduction in the reporting burden by aligning multistakeholder efforts with the systems used for M&E of national health strategies
- Strengthen and harmonize existing international mechanisms to track progress on all commitments made

Source: Every Woman Every Child (EWEC) Unified Accountability Framework

IAP-EWEC Accountability cycle

Lessons learned from a decade of the IAP-EWEC accountability cycle:

- Imbalance/misalignment between global and country accountability. Countries should be the focus, as they are the locus of change.
- Lack of shared understanding on accountability
- Currently most emphasis on monitor
- Review mechanisms are institutionalized to various degrees
- Remedy and Act related to accountability recommendations are far behind



ACCOUNTABILITY ARCHITECTURE FOR UHC IN THE SDG CONTEXT

EWEC Independent Accountability Panel (IAP) - UHC HLM statement on integrated health accountability mechanism

An **integrated accountability mechanism** for health & SDGs

- under UHC, implemented through PHC, covering all of SDG 3 and linked to health-related SDGs
- prioritizing women, children and adolescents and those furthest left behind in fragile settings
- using EWEC lessons to build an integrated health accountability system to drive resources, results & rights

IAP Statement to the HLM on UHC

(also see on integrated accountability:

- [iERG 2015 Report Recommendations](#)
- [IAP Comment in LANCET, March 2019](#))

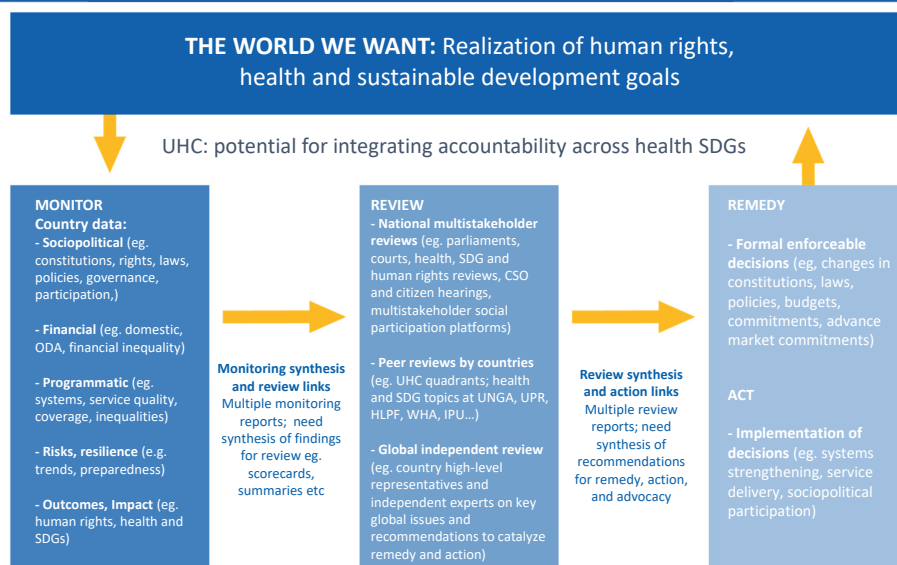
'UHC for all people: accountability for every woman, child, adolescent and those left furthest behind'

IAP 2020 Report, to be launched around UNGA

Draft outline

1. A new **imperative for accountability with UHC** to reach every woman, child and adolescent
2. **What is accountability and how can it drive Resources, Results and Rights** for health and SDGs?
3. **Country league tables** on progress, areas of greatest need, and multistakeholder commitments and accountabilities
4. **Country case studies** to amplify accountability experiences and voices of WCA and others left furthest behind
5. **Lessons** from a decade of EWEC accountability
6. **Recommendations** for integrated health accountability with UHC era and a priority focus on WCA and others in fragile settings (EOSG request)

Effective accountability needs an integrated system to Monitor, Review, Remedy and Act



Adapted from the UNSG's EWEC Independent Accountability Panel (IAP) Framework Working Draft, 17 November 2019

Elements of UHC accountability

- Overall accountability for UHC:
 - Main responsibility is with national governments, with active engagement of parliamentarians, communities and civil society, media, academia
 - A range of actors have a role to play
 - Based on mandate from citizens and commitment to SDGs
- Contribution of global & regional processes to national accountability:
 - Support to advocacy, monitoring and reporting processes, mutual learning and peer review
 - Identify and elevate bottlenecks (e.g. health technology and access)

A range of actors play a role at country level

Actors	Main responsibility
Governments (and local authorities)	Overall progress towards UHC, with focus on equity + main duty bearers for the realization of rights
Parliaments	Legislative and regulatory frameworks, budget approval and overall oversight
Citizens and communities	Main custodians of accountability Principals and beneficiaries of health services, which should be responsive to people's needs Tax payers with call on health spending priorities
Civil society organisations	Voice and accountability, watch dog function
Academia	Evidence base and research
Media	Access to information and independent reporting
Private sector	Contribution to domestic resource mobilization (taxes) Research and innovation Focus on equity & quality in health products & services
Multilateral and bilateral donors (in countries receiving external assistance)	Support to national priorities and plans Alignment of financial & technical assistance

How it works for the HLM-UHC follow-up

Global follow-up (paras 82, 83)	National accountability
<ul style="list-style-type: none"> • Progress report in 2020/21 • Report with recommendations on political declaration implementation in 2022/23 • HLM in 2023 – scope & modalities to be decided in 2020/21 	<ul style="list-style-type: none"> • Engage all stakeholders in development, implementation and evaluation of health- and social-related policies and reviewing UHC progress (p54) • Set measurable national targets and strengthen national monitoring and evaluation platforms (p79)

UHC2030 CONTRIBUTION

UHC2030 accountability strategy

- Facilitate accountability for progress towards HSS and UHC that contributes to a more integrated approach to accountability for SDG3
- Support ‘social accountability’ and engagement by strengthening civil society institutions and other non-state actors who play a central role in holding governments accountable for sufficient investments, robust policies and plans, and timely and effective implementation to leave no one behind in pathways towards UHC
- Improved mechanisms for government, civil society and the media to hold development partner accountable for sufficient, appropriate and well-coordinated investment in HSS and UHC, and adherence to the principles of effective development cooperation
- Better understanding of mechanisms to hold the private sector to account for their role in accelerating progress towards UHC and leaving no one behind
- Synergies and better alignment across sub-sectoral health accountability initiatives at country and global levels – this is cross-cutting

Main deliverables in 2019

- **Budget advocacy toolkit** developed with broad consultations, to provide a tool for CSOs, media and parliamentarians to engage with and shape health budget discussions on UHC (to be piloted in early 2020)
- **Peer exchange and learning on social participation** promoted through co-convening a technical network with WHO, including inputs into WHO Handbook on Social Participation (to be launched on 12 December for final consultation) and WHA/UNGA events to advocate for social participation as a pillar of UHC reforms
- **CSEM commentary on UHC Global Monitoring Report** bringing to the fore perspectives from communities and civil society on equity: need for more and better data to identify the people who are left behind and more analysis of equity dimensions such as gender, age, wealth, ethnicity, disability, geographic location

1/2 Proposed deliverables for 2020: contribution to an integrated system to monitor, review, remedy and act

UHC2030 workplan: UHC accountability strengthened (output 1.5)

- Joint work with EWEC Independent Accountability Panel:
 - Contribution to IAP report 2020 (e.g. country case studies, inputs into recommendations);
 - Joint dissemination to raise awareness on accountability principles;
 - Promotion of alignment of reporting across initiatives
- Guidance note to improve reporting on UHC in High-Level Political Forum's Voluntary National Reviews on Health, and contribute to health thematic reviews and comprehensive review of the SDGs
- State of UHC commitments report (to complement official HLM follow-up process) with multistakeholder perspectives, focusing on leaving no one behind + contribution to country score cards to be explored

2/2 Proposed deliverables for 2020: scaling up social participation and accountability

UHC2030 workplan – Multistakeholder social participation & accountability approaches strengthened (output 1.4)

- Dissemination of WHO Social Participation Handbook and social participation technical network co-convened to support advocacy efforts in this area
- Budget advocacy toolkit piloted in 2-3 countries, finalized and disseminated through CSEM partner networks
- Greater focus on social accountability through proposal to align grant mechanisms for national civil society platforms

Open questions and critical issues for consideration

- How to ensure greater focus on leaving no one behind, addressing the needs of the most vulnerable and marginalized groups first?
- What to do in countries with weak institutions/broken systems and/or in conflict affected settings?
- How to take advantage of opportunities to create space for honest dialogue and mutual learning/peer pressure across countries on what works and what needs to improve (e.g. High-level Political Forum processes, IPU Annual Assembly, etc.)?
- How can UHC2030 and partners build on the Key Asks and ensure coherent multi-stakeholder engagement in an integrated accountability framework for UHC?
- Other issues?