|  |  |
| --- | --- |
| UHC_Logo_IHP_rgb_Colour | **UHC2030 Steering Committee****8th Session – 3-4 February 2021****Videoconference (Zoom)** |

**Progress Update**

**For Information** **[x]  For Review & Advice** **[ ]**  **For Approval** [ ]

| **Results Areas**  | **Success criteria** | **Progress update 2020** |
| --- | --- | --- |
| ***Output 1: VOICES – Stronger and more coherent global and country voices for UHC*** |
| * 1. **Political momentum**

Sustain and leverage political momentum for UHC | *- UHC2030 members and stakeholders champion political declaration outcomes/commitments in relation to the key asks.**- References to UHC in outcome documents of relevant political and economic forums.* | **Progress: On track - UHC2030 mobilised political leadership for UHC and provided the first ever country profiles and synthesis of progress on political commitments for UHC** * **State of UHC Commitment review (i.e. synthesis and 193 country profiles) launched ahead of UHC Day and drew on findings of a multistakeholder survey and country consultations with civil society representatives**. Findings and political messages against commitments of the Political Declaration in line with the Key Asks areas promoted and used during UHC Day campaigns, including UHC2030/PMNCH summit on Lives in the Balance. Country profiles promoted by the EMRO regional director with ministers on UHC Day.
* **UHC political advisory panel mobilized**. The panel provided high level guidance and conveyed UHC2030’s messages for political leaders – e.g. advice on HLM follow-up, consultation for the [Co-Chairs’ Statement on UHC and Covid-19](https://www.uhc2030.org/blog-news-events/uhc2030-news/faced-by-the-covid-19-crisis-it-is-crucial-that-world-leaders-remember-their-universal-health-coverage-commitments-555343/), comment/reaction to the discussion paper on emergencies and UHC, and [messages in the State of UHC Commitment](https://www.youtube.com/playlist?list=PLc0LmhF6Bj_bhgMrXq2kY9vGd5ZJ0z1ec).
* **UHC2030 key messages on UHC and health emergencies** **promoted** around meetings of G7, G20, World Health Assembly and influenced the [UN SG policy brief](https://www.uhc2030.org/blog-news-events/uhc2030-news/an-open-message-from-the-uhc2030-co-chairs-to-the-unga-ministerial-meeting-on-uhc-555421/) and [interim progress report on UN HLM](https://www.undocs.org/en/A/75/577). One Year Commemoration of the UN HLM event during UNGA with the Group of Friends for UHC mobilized 650 participants, with ministers emphasizing the importance of re-affirming the commitment to UHC in the face of the COVID-19 pandemic. **Advocacy with parliaments**: Worked with the Inter-Parliamentary Union (IPU) Health Advisory Group to prepare calls for parliamentary action in response to the pandemic, including a [a joint letter](https://www.uhc2030.org/blog-news-events/uhc2030-news/turning-global-commitment-for-uhc-into-national-and-local-action-555369/) to presidents of parliaments from UHC2030 Co-Chairs and IPU President.
 |
| * 1. **Shared UHC goals**

Bring health and disease programmes and initiatives together to champion UHC goals | *- Integrated accountability framework that aligns with SDG3 accountability and is applicable to all countries.**- Health and disease programmes/initiatives champion common UHC goals.* | **Progress**: **Shift in focus due to COVID-19 – with promotion of clear messages and narrative for UHC and COVID-19, bringing partners together behind a shared vision that builds on the Key Asks*** **Discussions ongoing for integrated accountability framework and UHC2030 role.** The Independent Accountability Panel’s report focus has changed due to COVID-19, with reduced inputs for UHC2030. Collaboration with PMNCH underway to take forward the agenda jointly in 2021.
* **Coherent messages on resilient health systems in the context of COVID-19 promoted:** e.g. [Co-chairs’ statement](https://www.uhc2030.org/blog-news-events/uhc2030-news/faced-by-the-covid-19-crisis-it-is-crucial-that-world-leaders-remember-their-universal-health-coverage-commitments-555343/), [discussion paper on UHC and emergencies](https://www.uhc2030.org/fileadmin/uploads/uhc2030/Documents/Key_Issues/Health_emergencies_and_UHC/UHC2030_discussion_paper_on_health_emergencies_and_UHC_-_May_2020.pdf), [open message to UNGA ministerial meeting on UHC](https://www.uhc2030.org/blog-news-events/uhc2030-news/an-open-message-from-the-uhc2030-co-chairs-to-the-unga-ministerial-meeting-on-uhc-555421/), [call to OECD/DAC ministers of development cooperation](https://www.uhc2030.org/blog-news-events/uhc2030-news/open-call-from-uhc2030-co-chairs-to-oecd-dac-ministers-of-development-555429/), [a joint letter](https://www.uhc2030.org/blog-news-events/uhc2030-news/turning-global-commitment-for-uhc-into-national-and-local-action-555369/) to presidents of parliaments from UHC2030 Co-Chairs and IPU President.
* **Collaboration across partnerships** **strengthened** with UHC2030/PMNCH summit on Lives in the Balance – Improving the lives of women, children and adolescents through UHC, with 1700 participants from 92 countries brought together several other partnerships (NCD alliance, Roll-back Malaria, Scale Up Nutrition, Sanitation and Water for All, Women in Global Health) to amplify jointly the call for investment in health systems that protect everyone
 |
| * 1. **Engaged communities**

Equip civil society and communities to make governments answerable on UHC | *- More countries have civil society participation in national health planning and review processes.**- More countries with active campaigns on UHC.**- Better aligned funding for CSO-led advocacy and accountability efforts* | **Progress: Largely on track, adapted due to COVID-19, with strong calls for health systems that protect everyone*** **‘UHC 101’ to be finalized in early 2021 with CSEM** (messaging and advocacy tools for country CSOs). CSEM has also launched the [civil society calls to action on UHC and COVID-19](https://csemonline.net/draft-civil-society-calls-to-action-for-covid-19-released/) after results of a CSEM survey and the social participation technical network survey showed that few CSOs were engaged in national COVID-19 responses.
* **Diverse views reflected in consultation on WHO social participation handbook** (>100 CSOs and academia), facilitated by UHC2030 and Health Systems Governance Collaborative. Joint advocacy plans developed with PMNCH for further action in 2021.
* **CSO task force on common approach to CSO platforms and funding**, initially convened in early 2020 jointly with PMNCH but need to be reconvened in 2021 and focus reviewed in light of COVID-19
* **Collaborative learning agenda on health financing launched** in collaboration with PMNCH to support ‘virtual joint support’ (with Global Fund, GFF, GAVI) for CSO capacity building on domestic resource mobilization, building on the UHC2030 budget toolkit (updated version to be available online in early 2021).
* **UHC Day** **coordinated campaign on ‘Health For All: PROTECT EVERYONE’.** Reached and influenced diverse audiences with clear messages to demand action on health systems for both UHC and health security. [Campaign highlights](https://universalhealthcoverageday.org/results/) include:
	+ Over 1.3 billion potential Twitter impressions reaching 126.7 million accounts from 1-16 December
	+ Widespread incorporation of COVID-specific messaging and tools, including the production of campaign face masks and development of digital mask filters
	+ 60+ high-level UHC Day champions engaged in the campaign, including 12 permanent missions to the United Nations and 13 from CSEM
	+ 123 activities spanning 40 countries submitted to the global campaign heatma
	+ 27 [stories](https://csemonline.net/uhc-day-stories/) and interviews published by CSEM on civil society’s role during the pandemic to “protect everyone”
 |
| ***Output 2: WORKING BETTER TOGETHER – Effective collaboration on priority and emergent health systems issues*** |
| **2.1 Harmonised health systems strengthening**Agree and promote demand-led guidance and tools to harmonise HSS efforts (tailored to different country contexts and complementing SDG3 GAP commitments). | *- Countries’ and major funders’ plans and accountability frameworks reflect consensus transition principles.**- Harmonised health systems assessments in at least 3 countries.**- Common framework adopted for strengthening and use of country PFM systems for health.**- Learning promoted on UHC coordination in fragile settings.**- Demand-led country compacts in at least 3 countries, with learning documented.**- Principles/framework agreed for mutually reinforcing actions for health security and UHC* | **Progress: UHC2030 developed and promoted policy guidance and learning on health systems for UHC and health emergencies in COVID-19 context*** **UHC and emergencies** [**discussion paper**](https://www.uhc2030.org/blog-news-events/uhc2030-events/time-to-get-our-act-together-on-uhc-and-health-emergencies-555356/) **published and, building on Key Asks, frames our work and narrative in the COVID-19 context** – e.g. the UHC Day ‘protect everyone’ campaign**.** The paper and launch event (>400 people attended) had excellent feedback, including (anecdotal) that it influenced policy discussions/positions in WHO and other organisations.
* [**Policy brief**](https://www.uhc2030.org/blog-news-events/uhc2030-news/new-uhc2030-policy-brief-on-covid-19-and-fragile-settings-555438/) **published on COVID-19 and fragile settings.** UHC2030 convened diverse stakeholders to share evidence/learning on **COVID-19 responses and essential health services in fragile settings** (series of 7 workshops) and develop this brief. We’ve had feedback that this is directly informing COVID-19 response strategies, including WHO’s Strategic Preparedness and Response Plan refresh.
* **Developing and finalising a package of HSS and coordination tools:**
	+ **Sustainability and transition** joint blog with GAP Sustainable Health Financing Accelerator “[How Covid19 is reshaping priorities for both domestic resources and development assistance in the health sector](https://www.uhc2030.org/blog-news-events/uhc2030-blog/how-covid-19-is-reshaping-priorities-for-both-domestic-resources-and-development-assistance-in-the-health-sector-555362/)”, collaboration with Alliance for Health Policy and System research on [call for research proposals](https://www.who.int/alliance-hpsr/callsforproposals/en/) on how countries sustain effective coverage as they transition from external assistance, CSO capacity building on health financing (see 1.3)
	+ **Published ‘**[**Public financial management for UHC - why and how it matters**](https://www.uhc2030.org/blog-news-events/uhc2030-news/public-financial-management-for-universal-health-coverage-why-and-how-it-matters-555436/)**’** joint guidance note, a primer on why PFM in the health sector is important for UHC and preventing future pandemics.
	+ **Health systems performance assessment (HSPA) framework and template launched June 2020;** detailed guidance (book) will be published at Health Systems Research Symposium session in February, plus manual on country application in Q1/Q2.
	+ **Fragile settings** guidance product on health systems assessment completed (2019), plus review and 2 country studies on humanitarian-development coordination.
* **Country compacts:** we responded to initial demand for advice in 3 countries (including TOR for a UHC compact in Ghana). This is temporarily on hold due to COVID-19, aiming to resume Q1/2 2021. We are working regionally (with WHO-EMRO) on updated learning/guidance for different country contexts.
* UHC2030 remains involved in relevant GAP accelerators (civil society, sustainable financing, PHC) plus ongoing conversations about its role in the ACT-A health systems connector and workstreams.
 |
| ***Output 3: KNOWLEDGE & NETWORKS – High quality platforms and learning*** |
| **3.1 Stakeholder platforms** Convene UHC stakeholders and constituencies effectively  |  *- CSEM provides effective platform to convene global and country CSOs.**- Private Sector Constituency facilitates effective engagement and collaboration.**- Well-run Related Initiatives network (info shared, collaborations identified)* | **Progress:** **On track*** **Civil Society Calls to Action for COVID-19 developed through an open consultative process**. The CSEM’s new advisory group is on board and operational and helped mobilise a broad range of civil society behind these common advocacy messages. The CSEM grew to more than members representing 916 organizations from more than 100 countries. Members were engaged through a listserv, monthly newsletters, online discussion forums on specific issues, and social media.
* **Agreed plans for follow-up on the Private Sector Constituency’s HLM statement** and transition hosting arrangements (successor to World Economic Forum) have been agreed.
* **UHC2030 Related Initiatives mobilized** around [joint info pack](https://www.uhc2030.org/fileadmin/uploads/uhc2030/Documents/About_UHC2030/Related_Initiatives/UHC2030_Related_Initiatives_FINAL_April_2020.pdf), [messaging on health systems and COVID-19](https://www.uhc2030.org/blog-news-events/uhc2030-news/insights-for-health-systems-strengthening-in-the-covid-19-response-555352/), and blog series on COVID-19 and health systems. The [joint event on resilient health systems](https://www.uhc2030.org/blog-news-events/uhc2030-news/all-together-stronger-health-systems-for-uhc-and-health-security-555437/) at the Health Systems Symposium session made the case for collective action on common goods for health.
 |
| **3.2 Knowledge and learning**Promote emergent knowledge and learning, ensuring relevant offerings for different country contexts. | *- New initiatives use UHC2030 platform**- Knowledge/learning is relevant to different country contexts (low/middle/high income, fragile)**- UHC2030 thought leadership recognised**- Knowledge hub used by intended audiences; sustainable future identified.* | **Progress:** **UHC data portal launched and messages disseminated through multiple blogs/papers, follow-up on knowledge hub and PHC platform on hold*** [**UHC data portal**](https://www.uhc2030.org/what-we-do/knowledge-and-networks/uhc-data-portal/) **launched on UHC2030 website**: a single entry point for access to multiple databases, including state of UHC commitment’s country profiles for all member states.
* **Substantive blogs/papers from the Secretariat and different constituencies:** [People left behind in decision-making on COVID-19](https://www.uhc2030.org/blog-news-events/uhc2030-blog/sound-the-alarm-people-left-behind-in-decision-making-on-covid-19-555355/), [Governance of COVID-19 Response: A Call for More Inclusive Transparent Decision Making](https://gh.bmj.com/content/bmjgh/5/5/e002655.full.pdf), [Access and innovation in private sector response to COVID-19](https://www.uhc2030.org/blog-news-events/uhc2030-blog/access-and-innovation-two-issues-for-the-private-sectors-response-to-covid-19-555360/), [COVID-19 reshaping priorities for domestic resources and development assistance](https://www.uhc2030.org/blog-news-events/uhc2030-blog/how-covid-19-is-reshaping-priorities-for-both-domestic-resources-and-development-assistance-in-the-health-sector-555362/), [Discussion paper on emergencies and UHC](https://www.uhc2030.org/fileadmin/uploads/uhc2030/Documents/Key_Issues/Health_emergencies_and_UHC/UHC2030_discussion_paper_on_health_emergencies_and_UHC_-_May_2020.pdf) (and follow-up actions), [The health and economic impacts of Covid-19 containment strategies on the most left behind: Recommendations for how we can build back better, strong and more resilient health and economic systems](https://csemonline.net/wp-content/uploads/2020/12/CSEM_Health-And-Economic-Impacts-Of-Covid-19.pdf), [For an equitable COVID-19 response, investments in civil society cannot wait](https://www.uhc2030.org/blog-news-events/uhc2030-blog/for-an-equitable-covid-19-response-investments-in-civil-society-cannot-wait-555408/), [COVID-19: A Test for Political Leaders to Truly Leave No One Behind](https://www.un.org/development/desa/en/news/nocat-uncategorized/covid-19-a-test-for-political-leaders.html), etc.
* **Follow-up on Knowledge Hub** put on hold due to lack of funding.
* **PHC collaborative and knowledge platform** on hold
* UHC2030 platform being used for civil society and private sector engagement by ACT-A Health Systems Accelerator partner.
 |
| ***Output 4: UHC2030 GOVERNANCE AND OPERATIONS*** |
| **4.1 Vision** Ensure relevant strategic focus  | * *Appropriate strategic direction that ensures the partnership remains relevant and results-focused*
* *Members kept engaged and up-to-date*
* *Effective structures, processes and resources mobilised to support outputs 1-3*
 | * **Narrative and strategic direction for stronger focus on health systems consolidated in the discussion paper on health emergencies and UHC.** Follow-up included translation of messages into communication products including UHC Day campaign and a series of blogs.
* **Partners kept updated** through regular newsletters, web updates, Twitter.
 |
| **4.2 Governance**Ensure transparent and effective governance | * **SC meetings and updates delivered to schedule, all UHC2030 constituencies represented**. Follow-up on TORs for each constituency and progress made for changes in representation.
* **Selection process for new co-chairs** completed successfully.
* **Short-term plan to address immediate needs for 2020 and 2021 submitted for review by SC** in June with development of medium/long term strategy postponed to 2021.
* **Funding for base programme secured**. Funding from Japan renewed in 2020 and new funding from France obtained for 2021.
 |
| **4.3 Secretariat**Ensure UHC2030 is managed well  | * **Core Team Report 2019 finalised** and disseminated mid 2020. Progress update shared with Steering Committee in June and important communications shared on a regular basis.
* **Revised co-host administrative arrangements** close to being finalized with on-going discussions with WHO, the World Bank and OECD.
* **Day-to-day operations on track.**
 |