UHC2030 Steering Committee

3-4 February 2021

Welcome + Introductions

“Where we’ve come from, where we’re headed”
Agenda

Wednesday
1400- 1430 Welcome + introductions; Where we’ve come from, where we’re headed

Session 1 – “Making it happen in 2021”
1430- 1530 1.1 – 2021 Priorities
1540- 1630 1.2 – 2021 Workplan & how UHC2030 & constituencies deliver on 2021 priorities
1630- 1655 1.3 – 2021 Budget & resource mobilisation
1655- 1700 Day 1 conclusions & next steps

Thursday
1400- 1410 Day 1 recap, day 2 objectives

Session 2 – “The road to 2023”
1410- 1510 2.1 – UHC2030’s role in accountability for UHC
1510- 1550 2.2 – Gearing up for HLM 2023

Session 3 – UHC2030 governance & working arrangements
1600- 1630 Revised SC & Secretariat arrangements
1630- 1645 Conclusions & close

Session 1 – Making it happen in 2021

Objective: Agree UHC2030 priorities and contributions to ‘health systems that protect everyone’ in 2021

1.1 – 2021 Priorities
1.2 – Workplan & how UHC2030 & constituencies deliver on 2021 priorities
1.3 – Budget & resource mobilisation
1.1 – 2021 Priorities

“To end this crisis and build a safer and healthier future, we must invest in health systems that protect us all — now”

• This requires political commitment and collective action.

• UHC2030’s unique value: multi-stakeholder platform for shared UHC goals
  • Diverse voices and perspectives
  • Accountability for UHC commitments
  • Collective action for stronger health systems.

• Continue to make the case for sustained investments in health systems and universal access to health services
  • Promote specific actions based on the Key Asks.

Proposed priorities for 2021

1. Ensure UHC (including health systems and common goods for health) is prioritized in COVID-19 response and ‘building back better’

2. Promote equitable access to new COVID-19 tools as part of the UHC agenda, emphasizing health systems enablers

3. Provide a “now to 2023” strategic vision: what the HLM outcomes should be and how UHC2030 contributes

• Recent UN75 survey (over 1 million people): UHC should be top priority as recover from pandemic

• Be the global voice for “health systems that protect everyone”, take on barriers to political action identified in the ‘State of Commitment’, develop high quality policy and learning products for collective action on health systems.

• “The world is on the brink of a catastrophic moral failure”

• Understand this urgent issue & potential UHC2030 role + political advocacy and policy products.

• How to follow up on “the most comprehensive agreement ever reached on global health”?

• Provide unique multi-stakeholder review of commitments, streamline and promote an integrated approach to accountability (together with PMNCH), continue to foster the enabling environment for diverse contributions
Discussion questions

➢ Do you agree with 3 proposed priorities?
➢ Are there issues missing where UHC2030 has specific added value?
➢ What emergent issues (or barriers/levers identified in the State of UHC Commitment) should UHC2030 especially focus on?
➢ How do we position key points on UHC in crowded and highly politicised global debates on vaccines? How can we help UHC2030 membership navigate vaccine developments?

1.2 – Workplan highlights

➢ State of UHC commitment review + Integrated accountability approach for UHC (annual tracking, synthesized evidence + tools)
➢ Political advocacy statements + follow-up
➢ Campaign on “health systems that protect everyone” (incl. vaccine access, common goods for health); UHC Day
➢ Country advocacy/accountability package for planning & budgeting
➢ Health systems “investment case” + shared policy agenda
➢ Country UHC roadmaps & compacts
➢ Harmonised health systems policy guidance/tools (performance assessment, PFM, sustainability & transition, fragile settings)
➢ Engagement platforms: CSEM, Private Sector, Related Initiatives
➢ Knowledge platforms/resources; thought leadership
➢ “Now to 2023” vision
➢ Secretariat, operations, resource mobilisation
Discussion questions

➢ Do you agree with the overall set of results areas and products in UHC2030’s workplan?
➢ Are there other products we should prioritise?
➢ How will your constituency make use of the UHC2030 platform this year?
➢ Which products will your constituency contribute to?

1.3 2021 Budget and resource mobilisation

New contributions mobilized such that:
➢ HLM deficit paid off
➢ 2020 & 2021 base programme costs covered
Forward look:
➢ Ensure sufficient funding for at least base programme in 2022-23, potentially more depending on HLM ambition

<table>
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<th>USD million</th>
<th>2019</th>
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<th>2021</th>
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<td>Expenditure</td>
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<tr>
<td>staff services</td>
<td>52%</td>
<td>57%</td>
<td>50%</td>
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<tr>
<td>travel</td>
<td>37%</td>
<td>42%</td>
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<tr>
<td>Income</td>
<td>2.36 (⁺0.79 from 2018)</td>
<td>4.72 [2] (⁻0.24 deficit from 2019)</td>
<td>0.34 [3] (⁺2.29 from 2020)</td>
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<td>Japan</td>
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<td>carry over:</td>
<td>France</td>
<td>France</td>
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</tbody>
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Notes: 1) Subsequently reduced to 3.4 by reallocation of some HLM-related staffing expenditure to WHO; 2) includes EC contribution from future years brought forward to cover 2020 costs, plus France & Japan funds received late in 2020; 3) 2021 base programme costs adequately funded by 2.29 carryover from 2020
Day 1 Summary

✓ Shared understanding of 2020 achievements & progress, UHC2030’s role and “now to 2023” context, importance of focusing on country impact & leaving no one behind.

✓ 2021 priorities agreed (see revision)

✓ 2021 workplan agreed in principle; Secretariat will share updated workplan+budget in SC follow-up communications (incl. specify work with parliamentarians; how to take forward ‘collective action’; clarify country CSO engagement)

✓ Noted 2021 financial position (base programme fully funded*); mobilize sub-group for longer-term resource mobilization strategy

*Special thank you to existing funders & to France for new contribution

**UHC2030 priorities in 2021** (updated)

1. Ensure UHC (including health systems and common goods for health) is prioritized in COVID-19 response and ‘building back better’

2. Promote equitable access to new COVID-19 tools as part of the UHC agenda, emphasizing health systems enablers

3. Provide a “now to 2023” strategic vision: what the HLM outcomes should be and how UHC2030 contributes
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1700 -

**Thursday**

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**Session 2 – The Road to 2023**

*Objective: Agree initial strategies and contributions of UHC2030 constituencies to political processes, advocacy and UHC accountability between now and 2023 High Level Meeting on UHC*

2.1 – UHC2030’s role in accountability for UHC
2.2 – Gearing up for HLM 2023
2.1 UHC2030 role in UHC accountability

What we want to see: political commitment and collective action around the Key Asks

What’s required:
• sustain political momentum and action on UHC commitments (i.e. translate into greater investments in health systems and specific policy reforms for UHC)
• promote accountability for UHC ahead of the mid-point of the SDGs in 2023
• support communities to demand action on UHC and hold government accountable

⇒ Need to:
• promote specific actions on barriers and levers identified in the State of Commitment review
• further articulate how we define success + measure progress of UHC2030 action

Achievements to date
✓ Made the case for evidence-based & multistakeholder accountability process grounded in national planning & review cycles
✓ Advocated for greater focus on leaving no one behind (e.g. inclusion of equity in global monitoring report)
✓ Influenced the UN Secretary General’s first progress report on UN HLM 2019 (November 2020) and future reports
✓ Galvanized political leadership for UHC in the COVID-19 context, building on the UN Political Declaration on UHC and Key Asks: clear messages on UHC and COVID-19 for political leaders (State of UHC Commitment)
✓ Supported civil society and communities to hold governments and leaders to account and ‘Keep the Promise’ made at the UN HLM:
  ➢ UHC Day campaigns globally and in countries on “health for all – protect everyone”
  ➢ State of commitment to UHC: 193 country profiles
Work in 2021

- **Political momentum:**
  - State of UHC commitment: synthesis (light) + updated country profiles to feed into 44 countries with VNRS
  - CSEM commentary on UHC global monitoring report
  - Political advocacy: Social participation & accountability

- **Shared UHC goals:** Integrated accountability approach
  - Collaboration with PMNCH to: streamline annual tracking for UHC, PHC and WCAH; and synthesize evidence/information on accountability resources & tools

- **Engaged communities:** country advocacy/accountability resources and tools
  - CSEM UHC 101 + country support
  - Collaboration with GHIs for CSO engagement in health financing advocacy/accountability
  - UHC day campaigns

**Follow-up action:**
- Further disseminate Stat of UHC commitment messages (incl. VNR process + regional summits) & remobilise the Task Team
- Develop case for country support to civil society platforms, incl. collaboration with partners + build on health financing initiative
- Develop approach for defining and measuring success

+ **Linked to session 2.2. (2023 HLM process):**
- Develop a strategic plan of political process for 2023 HLM
- Link with UHC global monitoring
- Mobilise other partners, e.g. health partnerships around a joint strategy for 2023 HLM on UHC

Discussion questions

- What can be done to address barriers identified in the State of UHC Commitment and use levers to make further progress towards UHC?
- Building on UHC2030 achievements to date, how can we target particular moments/changes in a more purposeful way - to define/measure success of our advocacy / accountability work and track progress?
- What key partnerships/processes do we need to build to “combine forces” + streamline collective accountability efforts?
2.2 Gearing up for UN HLM 2023

UN HLM 2023 milestones anticipated between 2021 and 2023

Potential expectations from UHC 2030

Critical outcomes we would like the UN HLM 2023 to deliver

- In terms of UHC vision and goals
- In terms of intermediate outcomes of the HLM process:
  - Inclusive accountability
  - Renewed action on SDG 3
  - A path to 2030

Changes we would like to see prior to the UN HLM 2023

- In terms of action on UHC commitments
- In terms of accountability process and multi-stakeholder engagement:
  - Awareness of global and national UHC targets
  - Strong collaboration among different health communities and partnerships
  - UHC commitments to be captured and reviewed in VNRs
  - Better alignment of UN HLMs follow-up processes

UN HLM HIV/AIDS 8-10 June 2021
Proposed roles of UHC2030

UHC2030’s main contributions to UN HLM 2019
• Multi-stakeholder engagement
• Consolidating and promoting a clear set of messages
• Communications and support to partners

Possible additional roles
• Make the most use of the synthesis and country profiles of the State of UHC Commitment for the preparation of UN HLM 2023
• Organize regional multi-stakeholder consultations prior to the multi-stakeholder hearing
• Stimulate public dialogue on UHC prior to the UN HLM 2023
• Mobilise high-level UHC champions from the UHC Movement Political Advisory Panel and other UHC2030 partners for the meeting

Discussion questions

1. Potential expectations from UHC2030:
   ➢ What are the critical outcomes that we would like the UN HLM 2023 to deliver?
   ➢ What changes would we like to see prior to the UN HLM 2023?

2. Proposed roles of UHC2030:
   ➢ In addition to our contributions to the UN HLM 2019, are there any additional roles the Steering Committee would like to propose?
   ➢ In addition to UHC2030 members and related initiatives, who should we work more closely with towards a successful UN HLM 2023?
Session 3 – UHC2030 governance and working arrangements

Objective: Review proposed revised working arrangements

Secretariat arrangements, Steering Committee representation & working arrangements for Constituencies, Co-Chairs handover

UHC2030 PLATFORM AND SECRETARIAT WORKING ARRANGEMENTS

• Strategic leadership to UHC2030 provided by the Steering Committee with support from Secretariat
• OECD joining WHO and World Bank to co-convene the Secretariat in 2021
• Tri-party leadership for Secretariat to be provided by high-level representatives of the three agencies to
  • Support the SC in developing the strategic vision and direction
  • Promote collective action
  • Oversee the implementation of the vision and direction by the Secretariat team
• Terms of Reference and working arrangements for the joined-up Secretariat are being discussed
• Resources
  • Joint mobilization of resources
  • Current Secretariat costs US$2.5M a year (50-50 between staff costs and activities)
UHC2030 PRIVATE SECTOR CONSTITUENCY (PSC) CRITERIA AND MEMBERS

PSC membership eligibility to be defined as "private sector entities that are directly working on health system strengthening and include for profit or not for profit entities commonly organized under business or company regulations, relay on earned income for operations, and operate under shareholder governance arrangements. Associations representing the private sector and companies are also eligible."

- Accessible Quality Health Services, South Africa
- Allied World Asia, Singapore
- Amref Enterprises Limited, Kenya
- Apollo Hospitals, India
- Becton, Dickinson and Company, USA
- Common Health Inc, USA
- Fullerton Healthcare Corporation Limited, Singapore
- GE Medical Systems, France
- German Health Alliance, Germany
- GlaxoSmithKline, UK
- Global Diagnostic Imaging, Healthcare IT & Radiation Therapy Trade Association, Belgium
- Global Self-Care Federation, Switzerland
- Healthcare Federation of Nigeria, Nigeria
- HealthSetGo, India
- Henry Schein, USA
- International Federation of Pharmaceutical Manufacturers and Associations, Switzerland
- Japan Pharmaceutical Manufacturers Association, Japan
- Johnson Johnson, Belgium
- Kenya Association of Pharmaceutical Industry, Kenya
- MEDx eHealthCenter, Netherlands
- Medtronic Labs, USA
- Merck, USA
- mHealth Global, Canada
- Mission & Co, Malaysia
- Novartis, Switzerland
- Novo Nordisk, Denmark
- Organization of Pharmaceutical Producers of India, India
- Ottobock, Germany
- Pfizer, USA
- Pharmaceutical Society of Kenya, Kenya
- Praava Health Bangladesh Limited
- Royal Philips, Netherlands
- Sanofi, France
- Sumitomo Chemical Company, Japan
- Swoop Aero, Australia
- Takeda Pharmaceutical Company, Japan
- Taleam Systems, Canada
Conclusions

➢ Session 1 – 2021 priorities
  ➢ 2021 priorities agreed
  ➢ Workplan agreed in principle; Core Team will share final version of workplan+budget
  ➢ Resource mobilization sub-group to be mobilized

➢ Session 2 – Accountability + Road to 2023
  ➢ SC agreed overall accountability work directions; advised ways to translate global commitment to country action:
    ➢ Product for parliamentarians – "how to make UHC happen"
    ➢ Political statement on role of UHC in social/economic recovery
    ➢ Explore further: signposting to UHC decision-making tools, mobilising dialogue with CSOs in countries (e.g. with UHC-Partnership)
  ➢ Feedback reinforced importance of UHC2030 in mobilizing diverse voices & helping set agenda for next HLM
    ➢ Explore further: how to bring together different health agendas/constituencies in shared UHC focus at HLM, survey of people/communities’ health priorities ("how did world do on UHC & your health needs during COVID-19?")

➢ Session 3 – Governance & working arrangements
  ➢ SC updated on progress with Secretariat arrangements, Co-Chairs handover, private sector membership

➢ Next meeting: end-June
  ➢ + schedule interim catch-ups/briefings if needed