



UHC2030 STEERING COMMITTEE
9th Session – 14 & 15 September 2021
Videoconference (Zoom)

Options Paper

UHC2030's Support to Parliamentary Initiatives on UHC

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

Purpose

UHC2030 aims to support parliamentarians more systematically and effectively to translate global commitments made in the 2019 Political Declaration on Universal Health Coverage (UHC) into tangible actions at the country level. UHC2030 secretariat is looking at how to engage more systematically with a range of parliamentary networks, building on existing technical support for parliamentary initiatives on UHC (see related activities in 2019-2021 in Annex 1 and potential collaboration partners in Annex 2). The scope of this options paper focuses on identifying a potential approach to collaborate with various parliamentary networks in the area of UHC and health systems. The paper draws on consultations with UHC2030 member parliamentary networks mentioned in Annex 2 and has been developed with inputs from the Health and Global Policy Institute, a think tanks which is bringing civil society and parliamentarians together to develop health legislation and supporting parliamentarians technically to contribute to global health partnerships and parliamentary networks.

The Secretariat is seeking guidance from the Steering Committee to set the direction of UHC2030 support which will provide the basis for detailed plans on strengthening engagement and support to parliamentarians initiatives on UHC to be included in the UHC2030's work plan and budget for 2022-2023.

Options

The options below are not mutually exclusive, in particular option 3, which could be taken forward whether option 1 or option 2 are being selected.

Option #1: Establish a Parliamentary Constituency

The first option would consist of establishing a parliamentary constituency within UHC2030 that focuses explicitly on translating global commitments made in the Political Declaration on UHC into tangible actions at the country level. This is a similar model as the Civil Society Engagement Mechanism (CSEM), including a mix of official members of UHC2030 and other organisations/individuals and the Private Sector Constituency (PSC), including official members of UHC2030 only who have formally endorsed the UHC2030 Global Compact).

Pros	Cons
<ul style="list-style-type: none"> A parliamentary constituency of UHC2030 independent from other parliamentary networks would provide the autonomy to pursue UHC2030's mandate and goals and to engage and communicate directly with a range of parliamentary partners. From a democratic perspective, a parliamentary constituency would enable UHC2030 to include all interested parliamentary parties in UHC2030 decision-making process through a parliamentary member of the Steering Committee and make them responsible for the associated outcomes. 	<ul style="list-style-type: none"> There are several challenges associated with creating a new parliamentary constituency, including administration, financing, effectiveness and competition. Secretariat hosting arrangements would need to be established to support the organisation's day-to-day operations. This raises questions of feasibility and capacities From a financial perspective, a new parliamentary constituency would require additional UHC2030 budget to support hosting arrangements for the parliamentary

<p>Moreover, a parliamentary constituency would facilitate the promotion and reflection of citizens’ voices in the national decision-making process.</p> <ul style="list-style-type: none"> • A parliamentary constituency would help Institutionalise interactions between parliamentarians and governments at a national and international levels and may contribute to strengthen implementation capacity. • It would also facilitate cooperation and professional connections specifically on UHC among parliamentarians. • A parliamentary constituency would allow for more effective measurement of outcomes of our engagement with parliamentary parties. 	<p>constituency and maintain relationships with individual parliamentarians and partner networks.</p> <ul style="list-style-type: none"> • Before establishing a new constituency of parliamentarians, the performance of other UHC2030 constituency models to influence country impacts should be assessed carefully. • The new parliamentary constituency may put UHC2030 itself in a difficult position by entering the current severe competition among parliamentary initiatives.
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Option #2: Partner with Existing Parliamentary Network(s)

The second option would consist of partnering with existing parliamentary networks (e.g., IPU, UNITE), which are already playing a parliamentary hub/coordination role in the health sector, and to encourage their parliamentary members to translate global commitments into country actions through their existing action. With this option, UHC2030 could consider engaging more systematically with some of the existing working groups. This would follow a similar model as what we have with Health Systems Global (HSG: mix of academic institutions and individual scholars) and the Joint Learning Network for UHC (JLN: a mix of official member countries of UHC2030 and other countries’ policy makers), as part of UHC2030 related initiatives.

TABLE 2. Partner with Existing Parliamentary Network(s) Pros and Cons	
Pros	Cons
<ul style="list-style-type: none"> • From an efficiency standpoint, partnering with existing, reputable parliamentary networks significantly reduces the administrative and financial challenges associated with establishing a new parliamentary constituency. • Partnering with existing networks would prevent UHC2030 from entering competition among parliamentary initiatives if we select the right partner networks, which already play a coordination role in the health sector. For example, UNITE and the Parliamentary Network on the World Bank & IMF have established a parliamentary working group on global health, and one of the UHC2030 co-chairs and one political advisor (both are current MPs) are invited to the group on behalf of UHC2030 (see the concept note of the parliamentary working group on global health in Annex 3). 	<ul style="list-style-type: none"> • There are challenges in terms of inclusiveness, representation, effectiveness and competition. • While such collaboration may expand UHC2030’s outreach to parliamentarians at country level, it does not guarantee whether these partner networks are inclusive to reach out to all interested parties in all countries and allow adequate representation across areas of interest and regions. Many parliamentary networks are either disease specific (e.g., UNITE) or regionally focused (e.g., APPFGH), otherwise general parliamentary groups (e.g., IPU). • Collaborating with existing parliamentary networks leads to less autonomy for UHC2030 in terms of its ability to pursue its own mandate and goals. For this reason, UHC2030 would have less control over the effectiveness of action and the

<ul style="list-style-type: none"> • Allows UHC2030 to gain access to institutionalised interactions between parliamentarians and governments, thereby contributing to better implementation capability. • Access to established communication channels 	<p>realisation of outcomes.</p> <ul style="list-style-type: none"> • Given that each network has its own mandate and desired outcomes, it may be difficult to measure outcomes specific to UHC2030. This could be mitigated by establishing measurement criteria and coming to an agreement with the networks in advance. • Partnering with existing networks may not avoid the challenges of the competition among parliamentary initiatives and representation. • While competition among parliamentary networks is difficult to mitigate, the issues surrounding representation could be addressed by establishing selection criteria for partner networks (see examples of selection criteria below).¹
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Option #3: Enhance sharing of knowledge, lessons and experience of parliamentarians

The third option would consist of enhancing efforts to share relevant knowledge, lessons and experience, with specific attention on meeting needs of parliamentary networks and individual parliamentarians at the country level. The objective would be to provide them with real-time intelligence and facilitate learning and exchange to support translation of global commitments into country actions. With this option, opportunities to build upon existing work of various partners aiming to share knowledge and resources would need to be considered as joint projects with UHC2030 (e.g. UNITE Policy Desk, UNITE Global Summit, EPF/FPA UHC Parliamentarian Guide, PfGG Webinar Series) or of partners with specific expertise in knowledge sharing and research (e.g. JLN, HSG).

TABLE 3. Enhance sharing of knowledge, lessons and experience of parliamentarians Pros and Cons	
Pros	Cons
<ul style="list-style-type: none"> • This option is in line with the primary mandate of UHC2030. As a multi-stakeholder partnership for UHC, our critical role is to bring various stakeholders together to take urgent country actions based on the agreed global commitments on UHC. • Country-focused knowledge sharing and curation would support the implementation and dissemination of the current global advocacy, accountability and learning work, as well as 	<ul style="list-style-type: none"> • There are several challenges associated with knowledge management, including issues of the additional secretariat staff capacity and financial requirements. • Developing and managing a knowledge approach requires adequate know-how and capacities, which would require significant investment. To pursue such an approach, the Secretariat would need to recruit new full-time staff or make a

¹ Examples of selection criteria include: country coverage; health topic coverage; membership model; institutional capacity (i.e., formal communication channel to speakers of parliaments); mandate (i.e., official role to represent parliaments to the UN Systems); transparency; inclusiveness (i.e., willingness to collaborate with other parliamentary networks); public commitment to support UHC outcomes (financial protection and access to quality health services for all) and to publish activities related to UHC2030; financial stability; and evidence of successful advocacy (measurable outcomes).

<p>complement constituencies and network coordination.</p> <ul style="list-style-type: none"> • This approach does not necessarily rely on membership and resources could be made available publicly to a wide variety of actors beyond parliamentarians (e.g., civil society). • This option provides parliamentarians with concrete examples of how to best implement policies (challenges, best practices, steps moving forward). It would also provide an opportunity to leverage existing knowledge sharing work of different partners. 	<p>contractual arrangement with a vendor to provide such support. The next biannual UHC2030 budget needs to include this cost based on the estimation of similar work from other partners or identify opportunities to collaborate with partners.</p> <ul style="list-style-type: none"> • Lack of implementation capability because the interactions (i.e., policy recommendations, knowledge sharing, etc.) between UHC2030 and parliamentarians are largely one-sided. • Potentially overlap with the work of WHO and IPU.
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Next Steps

The Secretariat is seeking guidance from the Steering Committee to set the overall direction of UHC2030's support to parliamentarian initiatives on UHC. Feedback will be used to strengthen engagement and support to parliamentarians initiatives on UHC and included in the UHC2030's work plan and budget for 2022-2023. mechanisms and projects.

- August-September 2021: Options paper shared with the Steering Committee members for consideration.
- September 2021: Steering Committee Meeting—decision on UHC2030's overall approach with parliamentarians.
- January/February 2022: Steering Committee Meeting—Approval of budget and work plan 2022-23, including UHC2030's parliamentarian engagement and support.

Annex 1. Related Activities with Parliamentarian Networks in 2019-2021

Name	Major Focus	Main Actors
Working Group on Global Health	Pandemic Preparedness and Health Security Global Health Multilateralism and Equity Resource Mobilisation Investment in Research and Development Universal Health Coverage	UNITE The Parliamentary Network on the World Bank & IMF
UNITE Global Health Summit 2021	HIV Global Health, Democracy & Human Rights Global Drug Policy Index Release etc.	UNITE
Parliamentarian Guide on UHC	Health System Primary Health Care Global Health Security Immunisation SRHR and RMNCAH + FP Gender Equality The Human Right to Science The Digital Divide HIV/AIDS Budget Appropriation and Accountability	EPF APF
SDG Webinar Series	COVID-19 Recovery Climate Change Designing National Budgets	PfGG SDSN
OSCE-PA Webinar	Health as a Human Right	OSCE-PA
Letter to Speakers of Parliaments	COVID-19 Universal Health Coverage Health System	IPU
UHC Day Campaign (2020)	Universal Health Coverage	IPU Health Advisory Group
COVID-19 Advocay Tool (2020)	COVID-19	IPU Health Advisory Group
Key Asks Consultation (2019)	Universal Health Coverage	IPU

Annex 2. Potential Collaboration Partners

The proposed list of potential collaboration partners is based on information collected via desk research and semi-structured expert interviews, as well as advice from Co-chairs and the UHC Movement Political Advisory Panel.

TABLE 1. Potential Collaboration Partners				
Organisation	Focus	Organisational/ Administrative Structure	Members	UHC2030 Related Activities
Africa Parliamentary Forum on Population and Development (FPA) <i>Member of UHC2030</i>	SDG, SRHR, HIV/AIDS, and gender equity	Hosted by EPF Executive committee (divided by sub-regions) and parliamentarians	Membership is open to all parliamentarians	<i>Parliamentarian Guide on UHC; Parliamentarian Briefings on UHC (UHC Forum 2017, 2020)</i>
European Parliamentary Forum for Sexual and Reproductive Rights (EPF) <i>Member of UHC2030</i>	Reproductive health rights	Executive committee (President and 11 MPs); EPF Secretariat (10 members); parliamentarians	Composed of 31 All-Party Parliamentary Groups (APPGs)	<i>Parliamentarian Guide on UHC; Parliamentarian Briefings on UHC (UHC Forum 2017, 2020)</i>
Asia Pacific Parliamentarian Forum on Global Health (APPPGH) <i>Potential Member of UHC2030</i>	Global health	Hosted by WHO WPRO	East Asia, Southeast Asia, Oceania	<i>UHC2030 Political Advisor Prof. Keizo Takemi is the chair of the forum</i>
Asian Forum of Parliamentarians on Population and Development (AFPPD) <i>Potential Member of UHC2030</i>	Reproductive health and rights, gender equality and women's empowerment, investing in youth, active ageing, UHC	Governed by the General Assembly; Managed by the Executive Committee; Advised by 3 Standing Committees; Supported by the Secretariat	Consists of 30 member National Committees of parliamentarians on population and development in the Asia-Pacific region	<i>UHC2030 Political Advisor Prof. Keizo Takemi is the chair of the forum</i>
Forum of Presidents of National Parliaments of Countries in Central America and Caribbean Basin (FOPREL) <i>Member of UHC2030</i>	Constitutional, democratic, intercultural, and the social rule of law, SDGs	Parliamentarians Presidents Executive Secretariat Advisory council	11 full members; 5 observer members	<i>UNITE Global Summit 2021; Parliamentarian Working on health and nutrition Political Advisor law making</i>
Inter-Parliamentary Union (IPU) <i>Member of UHC2030</i>	Women, age, human rights, and gender equality	Executive committee (President, 15 elected members, 2 board presidents); Secretariat (40 members)	179 member parliaments; 13 associate members	<i>UN HLM 2019 preparation, Key Asks Consolation, COVID-19 Advocacy Tool, Joint Letter to Speakers of Parliaments (2020)</i>
Global Parliamentarians	Infectious diseases	Founder and President;	149 representatives	<i>UNITE Global Summit 2021;</i>

Network to End Infectious Diseases (UNITE) Member of UHC2030		Global board; Secretariat (5 members)	from 66 countries (10 regional chapters)	Parliamentary Working Group on Global Health
Organisation for Security and Co-operation in Europe (OSCE) Parliamentary Assembly Processing formalisation of the membership	Political Affairs and Security, Econ. Affairs, Science, Tech. & Environment, Democracy, Human Rights and Humanitarian	The Bureau (composed of the President, 6 Vice-Presidents, Treasurer, Officers of the three General Committees and President Emeritus)	323 members from 56 parliaments (in North America, Central and South America, Europe, and East Asia)	One Joint Webinar
Parliamentarians for the Global Goals (PFGG) Potential Member of UHC2030	SDGs		Parliamentarians from 46 countries located throughout North America, Central and South America, Europe, Africa, Southeast Asia	Three Joint Webinar Series with SDSN
Parliamentary Network on the World Bank & IMF Potential Member of UHC2030	Development Cooperation	Hosted by the World Bank Group & IMF; Governed by the Board of Directors (10 members elected every 2 years); Administered by the International Secretariat	Over 1000 parliamentarians from 158 World Bank Group and IMF member countries	Parliamentary Working Group on Global Health



INTERNATIONAL FORUM ON GLOBAL HEALTH

A joint Working-Group on Global Health composed by Members of International Parliamentary Assemblies and Networks

Context

The current global health situation has and will continue to dramatically change the way societies live and how governments provide healthcare, justice, equality, economical support and education. Today more than ever, **political leadership will determine whether we are safe and healthy**. Therefore, solid multilateral cooperation is required to bring the pandemic under control and prevent future outbursts.

Members of Parliament are at the centre of the process. They represent the voices of people and can **hold governments and international financial institutions accountable** as regards support measures, budgetary decisions, and transparency in all processes.

That is why **UNITE Global Parliamentarians Network to End Infectious Diseases & The Parliamentary Network on the World Bank & IMF** are proposing to work together on launching an **International Forum on Global Health**, gathering members of different international Parliamentary Assemblies and Networks under a common global health and economic agenda, fostering international cooperation on pressing and challenging issues such as pandemic preparedness, global health security, resource mobilization, research and development and universal health coverage.

Founders

UNITE is a global network of parliamentarians committed to driving political change and impact to end infectious diseases as a global health threat until 2030. UNITE has 170 members in more than 70 countries worldwide and organizes its activities in ten regions, called chapters, led by its Co-Chairs and Executive Board.

The Parliamentary Network on the World Bank & IMF provides a platform for parliamentarians from over 140 countries to advocate for increased accountability and transparency in International Financial Institutions and multilateral development financing.

Members

The existing members of the Working Group are **key leaders and champions in global health**. They have demonstrated strong leadership in ensuring global development equity in their Parliaments and their constituencies. They will be key to the success of the Working Group and its goals.

- **Gabriela Cuevas**, MP Mexico
- **Gisela Scaglia**, MP Argentina
- **Ricardo Baptista Leite**, MP, MD Portugal
- **Lloyd Russell-Moyle**, MP, United Kingdom
- **Andrew Ullmann**, MP, Germany
- **Luis Sambo**, MP, MD, Angola
- **Sabina Chege**, MP, Kenya
- **Pia Cayetano**, Senator, Philippines



- **Keizo Takemi**, MP, Japan
- **Fadi Alame**, MP, Lebanon

The Forum aims to expand and reach members from **various international Parliamentary Assemblies and Networks who are willing to join the group** and contribute to a multilateral and multidisciplinary platform on Global Health.

Advocacy priority for 2021-2022

- **Pandemic Preparedness and Global Health Security:** Going through a global pandemic has made us all realize the impact that infectious diseases can have on our daily lives. We cannot move forward in rebuilding our societies unless we monitor public health threats and **place pandemic preparedness and global health security at the heart of the reconstruction of the post-pandemic world.**
- **Global Health multilateralism and equity:** The pandemic has shown us that multilateralism and solidarity are key to address any global public health threat, as no one is safe until everyone is safe. Governments must increase solidarity and collaboration, ensuring the fair access to global public health goods and **universal access to medicines and vaccines** around the world. As we go forward, International Financial Institutions should not go back to “business as usual” but sustain and adapt their approaches and support to help countries cope with health emergencies and build resilient health systems.
- **Resource Mobilization:** At the national and international level, resource mobilization is key to strengthen health systems and make them resilient to cope with pandemic preparedness and response. Not only is it important to advocate for increased resources at the national level, but also to support and strengthen multilateral aid mechanisms such as the **COVAX facility**, the seventh **replenishment of the Global Fund and the CEPI investment case**, among others. Policy innovations are needed to deploy the international community’s fiscal and monetary resources to ensure that no country is left behind.
- **Investment in Research and Development (R&D):** For far too long, governments have overlooked and cut investments in health, reallocating those funds to other public sectors, leaving the world unprepared and unequipped to respond to epidemics and pandemics. Priorities should be realigned in accordance to the enduring challenges brought upon by the pandemic and the creation of an advanced pandemic early monitoring system is necessary. Governments must increase their investments in R&D and promote innovative approaches to tackle today’s pressing global health challenges such as **digital health and planetary health.**
- **Universal Health Coverage (UHC):** Investments have to be made to close the gap within and between countries and reach Universal Health Coverage, enabling equitable access to health care and ultimately health status for everyone irrespective of his/ her socio-economic status.

Working Group deliverables

The Working Group on global health proposes to reach the following objectives by December 2022:



- **Develop and sign a Joint Declaration on Global Health:** Create and develop the Joint Declaration of Parliamentary Networks on Global Health, which will be signed during the UNITE 2021 Global Summit, happening in December 2021. The declaration will be previously developed with the support of both Secretariats from September to December 2021.
- **Develop a list of recommendations addressed to Member States and International Financial Institutions:** Develop a list of recommendations as a result of the group works throughout 2021-2022, to be addressed to Heads of State, Government and Speakers of Parliament represented in both networks.
- **Publish the recommendations in Open Editorials to the Press:** Make sure to publish and promote the recommendations mentioned above in the major international scientific health journals and magazines (The Economist, Times, Lancet etc.)
- **Develop a policy brief on pandemic preparedness:** Gather the members of the Working Group, partners, academia and civil society to develop a joint policy brief focusing on pandemic preparedness with a set of policy-orientated and evidence-based solutions, such as **advocating for including pandemic preparedness in article 4 of IMF Articles of Agreement.**

Proposed activities for the Working Group

In order to reach the deliverables mentioned above, the Working Group proposes the following activities:

- **Capacity building sessions:** Hold regular capacity building sessions with parliamentarians to give them the proper tools to think, address and advocate on specific topics. These capacity building sessions aim at building bridges between academia, civil society and policymakers. The group will organize two capacity building sessions until the end of 2021, with the objective of holding a monthly session from 2022 onwards.
- **Joint visits, study tours and multilateral gatherings:** Organize, when and if possible, joint visits, study tours and multilateral gatherings between members of the group to strengthen collaboration and exchange of good practices, experiences and lessons learned.
- **Regular meetings of the Steering Committee:** Discuss progress and take stock of what has already been done; plan ahead and set targets.