Side event	Room & Timesl	ot						
	D	UHC Forum	2017 Side Events Update Pag	ge: https://www.uhc2030.o	rg/news-events/meetings-e	vents/article/uhc-forum-20	017-side-events-tokyo-jap	an-427636/
	Room	Golden Cup	Takasago	Peony	Fukuju	Kobai	Magno	olia Hall
Time		178㎡, 3rd fl.	165 ㎡ , 11th fl.	112 m², 11th fl.	118 ㎡ , 3rd fl.	118m², 3rd fl.	(594 m ²,	, 2nd fl.)/2
IIIIe		140 seats (theater)	140 seats (theater)	82 seats (theater)	76 seats (theater)	76 seats (theater)	120 seats (theater)	N/A
	Morning (8:00- 9:00)	G.12.M	T.12.M	P.12.M	F.12.M	K.12.M	N/A	Market Place Booth Preparation
Tue. Dec.	AM (9:30-12:00)	G.12.A	T.12.A	P.12.A	F.12.A	K.12.A	M.12.A	Market Place Booth
12	Lunch (12:30- 14:30)	G.12.L	T.12.L	P.12.L	F.12.L	K.12.L	N/A	Market Place Interactive Session (13:30-14:30)
	PM (15:00- 17:30)	G.12.P	T.12.P	P.12.P	F.12.P	K.12.P	M.12.P	Market Place Booth
	Morning (8:00- 9:00)	G.15.M	T.15.M	P.15.M	F.15.M	K.15.M	N/A	N/A
Fri. Dec.	AM (9:30-12:00)	G.15.A	T.15.A	P.15.A	F.15.A	K.15.A	N/A	N/A
15	Lunch (12:30- 14:30)	G.15.L	T.15.L	P.15.L	F.15.L	K.15.L	N/A	N/A
	PM (15:00- 17:30)	G.15.P	T.15.P	P.15.P	F.15.P	K.15.P	N/A	N/A

Side events - open to forum participants and the public

In addition to the two-day main events of the UHC Forum 2017 in Tokyo, a variety of side events are organized on December 12 and 15 by civil society organisations as well as different partners. Most of the side events are open to the Forum participants and the public. Some side events require online registration in advance. For more details about individual side events, please refer the RSVP link or contact side event organizers.

UHC Forum 2017 Official Side Events December 12

Code	Accessibility	Event title	Host organisation(s)/n etwork(s)	Event Summary	RSVP or contact information
G.12.M	Open to external participants	Breakfast Debate: "Should the private sector always be involved in healthcare service provision to achieve UHC"	GSK, Save The Children	This provocative one-hour debate will explore the different views held on the role and contribution of the private sector in achieving UHC. Our speakers will debate for / against the motion, addressing key issues such as: political will, leadership and stakeholders required to achieve UHC, what role the private sector should play in health systems for UHC and the responsibilities and contributions of different stakeholder groups. The debate will also highlight best practice across regions and countries to address concerns, challenges and perspectives of different groups.	https://www.e ventbrite.co.uk /e/debate- should-the- private-sector- always-have-a- role-in- achieving-uhc- tickets- 39329764384

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G.12.A	Open to external participants	Why quality of health services matters for achieving universal health coverage?	WHO, OECD, World Bank	This side event aims at providing a global picture on quality of care and its importance to achieve public health goals within the context of universal health coverage. It will provide insight into how quality improvement should be built into the foundations of health systems, how to address key issues, what are the levers to improve quality, and the importance of driving quality improvement through national policy and strategy.	Contact Samantha Johnson: samantha.x.joh nson@gsk.com
G.12.L	Open to external participants	The political economy of innovations intended to improve equity in access to health services	UNICEF, Save The Children	This session will present evidence on successful examples of progress on the road to UHC in a variety of contexts, consider issues on how this progress has been and should be measured, and then reflect on how some of these examples are faring in the medium term, with a focus on efficiency and equity.	Contact Sepideh BAGHERI NEJAD: bagherinejads @who.int
G.12.P	Open to external participants	The Future of Health Systems: The Role of data health in the era of the next-generation UHC	Institute for Global Health Policy Research (iGHP), the Bureau of International Health Cooperation, National Center for Global Health and Medicine (NCGM), Japan and "The Partnership Project for Global Health and Universal Health Coverage (GLO+UHC)" (Thailand Ministry of Public Health (MOPH), National Health Security Office (NHSO) and Japan International Cooperation	Information and Communications Technology (ICT) potentially revolutionizes the way in which health systems are strengthened efficiently. For example, the data platform— "Person-centered Open Platform for wellbeing" (PeOPLe), which was originally introduced by the Japanese government—identifies the bottleneck of the current health systems including the health service deliveries by integrating fragmented and isolated health data, enhancing key learnings of effective health care systems. PeOPLe aims to develop next generation policy and medical intervention recommendations. In this side event, speakers from various countries and global partnerships will be sharing their experiences and open dialogues on how utilization of ICT and health data could enable better monitoring and evaluation of health system performance and make significant progress towards UHC.	http://www.ig hp.ncgm.go.jp/ en/news/

	dili 2017 List o	Official side Events (as of 27	Agency (JICA)) *Other partners will be confirmed.	More and more countries are joining the UHC movement to ensure all people have access to health care they need without having to suffer financial hardships. However, a number of health system design and technical challenges constrain progress to achieving UHC, particularly in the low and middle-income countries. A group of 27 countries, convened under the Joint Learning Network for Universal Health Coverage (JLN), are making steady and remarkable progress toward their UHC goals through practitioner-to-practitioner learning and co-generation of	
T.12.M	Open to external participants	December 12: Accelerating UHC through Joint Learning: Celebrating UHC Progress with JLN Member Countries	Joint Learning Network for Universal Health Coverage	Able to connect with their peers in other countries, JLN's member countries are leveraging the JLN platform to bridge the knowledge gap between theory and practice and create tools to address real world challenges, vital to accelerating progress toward UHC. COME AND JOIN THE JLN COUNTRY MEMBERS TO CELEBRATE UHC DAY AND LISTEN TO THEIR UHC JOURNEYS THROUGH THE LENS OF JOINT LEARNING WITH THEIR PEERS WORLDWIDE. Highlights Keynote address: Dr. Celestina De la Serna, CEO, PhilHealth, the Philippines (invited) Introduction to the JLN: Rozita Hussein, JLN Convener & Senior Deputy Director, Planning Division, MoH, Malaysia "Our UHC journey with the JLN" – a chat with JLN country members Ghana, Malaysia, South Korea and Dana Hovig, Director of Integrated Delivery, Gates Foundation For latest agenda and speaker update, visit our Event page. For more information, contact JLN@R4D.ORG. SPECIAL FEATURE: Launch of Medical Audits Toolkit, a new JLN knowledge product.	https://www.e ventbrite.com/ e/celebrating- uhc-progress- with-the-iln- countries- registration- 40183481876

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T.12.A	Open to external participants	Bold Moves: New Ways of Governance and Partnering for UHC (Part One)	Health Systems Governance Collaborative (in collaboration with UHC-Partnership)	The UHC2030 Tokyo meeting is taking place amidst an emerging articulation of 'new and bold' visions on accelerating UHC, with a clear expression that the quality service delivery, financial access and governance are key. Taking the key principles of UHC2030 seriously requires very bold moves, indeed, in order to move the UHC2030 agenda beyond the merely ritualistic. The principles are: 1. Leaving no one behind: a commitment to equity, non-discrimination and a human rights-based approach 2. Transparency and accountability for results 3. Evidence-based health national strategies and leadership, with government stewardship to ensure availability, accessibility, acceptability and quality of service delivery 4. Making health systems everybody's business — with engagement of citizens, communities, civil society and private sector 5. International cooperation based on mutual learning across countries regardless of development status and progress in achieving and sustaining UHC, and development effectiveness principles. In the two-part event "Bold Moves: New Ways of Governance and Partnering for UHC", the Health Systems Governance Collaborative and the UHC Partnership team up in a collective conversation about which concrete steps we can and have to take to arrive a new political economy of health which will address the real health bottlenecks in more inclusive ways. In this morning part, the spotlight will be on bold moves in health systems governance, both intellectually (revisiting the frameworks we use to measure governance) and practically (presenting the	RSVP: BigdeliM@who .int. Indicate: "Tokyo Bold Moves 1 participation"
				startup work done in governance capacities of Ministries of Health)	
			WHO, G4	A unique cross-disciplinary panel at the UHC Forum 2017 will	
	Open to	The Power of Surgery to Catalyse	Alliance, PGSSC,	bring together experts from UHC, Health Systems, Financing, Non-	https://www.p
T.12.L	external	Universal Health Coverage	Johnson &	Communicable Diseases, Injuries, Maternal and Child Health,	gssc.org/uhc20
	participants	Jiiversai Health Coverage	Johnson	Primary Health Care, Integrated People-Centred Care, alongside	<u>30</u>
				surgical, obstetric, and anaesthesia experts to raise awareness,	

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				provide professional opinions, share best-practices and innovative strategies, and discuss regional and global solutions for integrating surgical and anaesthesia care as part of a worldwide UHC platform.	
T.12.P	Open to external participants	Bold Moves: New Ways of Governance and Partnering for UHC (Part Two)	UHC Partnership (in collaboration with the Health Systems Governance Collaborative)	The UHC2030 Tokyo meeting is taking place amidst an emerging articulation of 'new and bold' visions on accelerating UHC, with a clear expression that the quality service delivery, financial access and governance are key. Taking the key principles of UHC2030 seriously requires very bold moves, indeed, in order to move the UHC2030 agenda beyond the merely ritualistic. The principles are: 1. Leaving no one behind: a commitment to equity, non-discrimination and a human rights-based approach 2. Transparency and accountability for results 3. Evidence-based health national strategies and leadership, with government stewardship to ensure availability, accessibility, acceptability and quality of service delivery 4. Making health systems everybody's business — with engagement of citizens, communities, civil society and private sector 5. International cooperation based on mutual learning across countries regardless of development status and progress in achieving and sustaining UHC, and development effectiveness principles. In this afternoon part, the spotlight will be on bold moves in partnering for universal health coverage. We will confront the challenges articulated by the countries which for the last five years have been participating in the Universal Health Coverage UHC-Partnership	RSVP to PorignonD@w ho.int. Indicate: Participation Bold Moves Part Two Dec 12.

P.12.M	Open to external participants	Domestic Financing for HPSR: Key to UHC	Alliance for Health Policy and Systems (AHPSR) Research and Health Systems Global (HSG)	needs national policies and strategies to be informed by the best available local evidence. Health Policy and Systems Research (HPSR)- an inter and multi-disciplinary field which seeks to explain how health policies and health systems influence and are influenced by each other at sub-national, regional and global levels is ideally suited to provide precisely this evidence. However, the need for locally generated, context sensitive evidence is fundamentally at odds with the way most research on health systems is carried out in low-and-middle income countries (LMICs). As things currently stand, health systems researchers in these settings are largely responding to the priorities of a relatively small group of global funders. There is thus an urgent need for significantly increasing domestic financing for HPSR. This session bringing together representatives from multilaterals, academia and national governments is expected to generate learnings on creating political priority for health systems research at the national level, and the range of funding models available to countries in different income groups while transitioning to increased levels of domestic financing. It will provide a menu of options on how best to take this process forward including what UHC2030 partners can do to facilitate this transition. Panel Members 1. Dr. Tim Evans, Health Nutrition Population, World Bank, Washington DC 2. Dr. Abdul Ghaffar, Alliance for Health Policy and Systems Research 3. Dr. Bocar Kouyate, Ministry of Health, Burkina Faso 4. Dr. Kabir Sheikh, Health Systems Global 5. Dr. Jeanette Vega, Director FONASA, Chile Moderator- Dr. Aku Kwamie, Ghana Health Service	Contact Zubin Shroff: shroffz@who.i nt
P.12.A		Reserved	Forum co- organizers		

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P.12	Open to external participants	Accelerating Sustainble UHC by Improving Access to NCD Care	JPMA	The event will feature key note speeches and an in-depth panel discussion with global leaders from public health, government, academia and the pharmaceutical industry on how the public and private sectors can accelerate access to NCD (Non-Communicable Diseases) care through the power of groundbreaking, purposeful collaboration.	https://form.q ooker.jp/Q/aut o/ja/uhc2017j pma/reg/
P.12	.P Open to external participants	Building the capacity of the health sector to work with other sectors to achieve universal health coverage	UNICEF, WHO, World Bank, UHC2030 Multisectoral Working Group	This session will focus on how to build capacity in the health sector to successfully interact with other sectors to achieve UHC. Three policy areas (drawn from the work of the UHC2030 Multisectoral Working Group) will be presented for discussion with the meeting participants on: 1. Securing the inputs of other sectors for fundamental inputs towards UHC 2. Designing mechanisms that facilitate alignment and negotiations with other sectors to address key determinants of health 3. Monitoring the health impacts of actions in other sectors as core UHC monitoring, driving joint accountability between sectors for health consequences. Country experiences in building capacity from Chile, Jamaica, Malawi, and the Philippines, among other countries, will also be highlighted in the session.	Contact Kumanan Rasanathan: krasanathan@ unicef.org
F.12	Open to external participants	Models to include Mental Health Services into Universal Health Coverage	University of Tokyo	"No Health Without Mental Health." - This is a symposium that will focus on how to establish a more holistic health system with evidence from the Disease Control Priority Project -3 and World Bank and Japanese experiences with UHC, including how to recover and improve after a large scale disaster.	Contact Dr Toshiaki Baba: baba@m.u- tokyo.ac.jp
F.12	Open to external participants	Measuring What Matters: Primary Health Care as a Foundation of Universal Health Coverage	Primary Health Care Performance Initiative (PHCPI): key partners include the World Bank, the World Health Organization, and the Bill and Melinda Gates Foundation	Quality primary health care (PHC) is critical to achieving universal health coverage (UHC), but right now we lack the data we need to measure the quality of PHC systems around the world and drive evidence-based improvement. Join us for an interactive community consultation on measurement for improvement in quality primary health care. We want to hear your perspectives and ideas! We'll discuss country experiences with using measurement to drive PHC improvement, the importance of strong measurement	https://www.e ventbrite.com/ e/measuring- what-matters- primary- health-care-as- a-foundation- of-uhc-tickets- 40190653326? utm- medium=disco

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				to support advocacy on PHC and UHC, and new tools being developed by the Primary Health Care Performance Initiative (PHCPI) that will soon be available to assess the quality and effectiveness of PHC systems and drive evidence-based improvement.	very&utm- campaign=soci al&utm- content=atten deeshare&aff= escb&utm- source=cp&ut m-term=listing
F.12.L	Open to external participants	Innovation, Access and Delivery for UHC: A Reception and Photo Exhibition	UNDP	The United Nations Development Programme and the Global Health Innovative Technology Fund would co-host a lunch reception and photo exhibition to showcase the importance of innovation, access and delivery to end priority diseases such as tuberculosis, malaria and neglected tropical diseases and achieve universal health coverage	Contact Mami Yoshimura mami.yoshimu ra@undp.org & Bumpei Tamamura bumpei.tamam ura@ghitfund. org
F.12.P	Open to external participants	Linking R&D to Access & Delivery: Virtuous Systems Powered by UHC	GHIT Fund, GAVI	Policies, implementation challenges, technologies, and models of universal health coverage (UHC) vary from country to country. Yet, one challenge all systems face is the need for high-quality appropriate, affordable, and accessible drugs, vaccines, and diagnostics with which to treat, prevent, and detect disease. Without them, even the highest-functioning health systems cannot meet the fundamental health and needs of their patients. But R&D of new and improved global health innovations requires costly investments that require funding and R&D partnerships to create. Non- profit product development partnerships for global health challenges face unique scientific, regulatory, and policy obstacles, which cross-cut both high- and low-burden disease areas, as well as several health areas that span the globe but are particularly difficult to combat in low-resource or neglected settings. Access and delivery issues must be prioritized at the beginning of the innovation process to ensure ultimate and sustainable health impact.	https://goo.gl/ forms/3rlghXo sPzE22jWz2
K.12.M	Open to external participants	"Strengthening Health Systems for UHC – Translating the Joint Vision into Action"	UNICEF, WHO, World Bank, UHC2030	The side event aims to critically examine ways to strengthen health systems and reach UHC by 2030. The Joint Vision paper "Healthy systems for universal health coverage: a joint vision for healthy lives" serves as the framework for promoting Universal Health Coverage (UHC) through health systems strengthening.	Contact Kazumi Inden: kinden@world bank.org

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				During the side event we want to discuss how the Joint Vision is translated into action and critically examine key levers for reaching UHC by 2030. Looking at practical examples of strengthening health systems for UHC, the event brings together the experience of various stakeholders, ranging from country representatives to civil society.	
K.12.A	Open to external participants	The Asia-Pacific pathway to universal health coverage	WHO Western Pacific Regional Office, Asian Development Bank, Asian Development Bank Institute, Seoul National University (WHO CC), Asia Pacific Observatory for Health Systems and Policies (APO) and Ministry of Health, Labour and Welfare, Japan.	Date/time: 12 December 2017, 09:00-17:30 Venue: Kobai Room Moderators: Prof Gabriel Leung, Dean, Li Ka Shing Faculty of Medicine, Chair, Public Health Medicine, School of Public Health, The University of Hong Kong Vice Chair, WPRO UHC-TAG, And Dr Vivian Lin, Director for Division of Health Systems, World Health Organization, Western Pacific Region Objectives: • To share country experience on progress towards universal health coverage; • To discuss how to strengthen primary health care as the foundation of universal health coverage and the role of hospitals within primary health care and universal health coverage; and • To strengthen the engagement of public health and health systems experts and academics to support countries' efforts towards universal health coverage. Session summary Countries in Asia and the Pacific have taken steady steps to progress towards universal health coverage (UHC). The inclusion of UHC as a target under Goal 3 of the Sustainable Development Goals (SDGs) has provided fresh impetus to these efforts. As countries face changing population health needs due to epidemiological and demographic transitions and rising health care costs, ensuring access by all to quality and affordable health services has become increasingly challenging. The approaching 40th anniversary of the Alma Ata Declaration presents a significant opportunity for countries to renew their efforts in strengthening primary health care as the foundation of UHC and rethinking the role of hospitals within primary health care and UHC.	Contact Nittita Prasopa- Plaizier: prasopaplaizier n@who.int & Anjana Bhushan: bhushana@wh o.int

				The WHO Western Pacific Regional Office supports countries to accelerate progress towards UHC, in line with the regional action framework Universal Health Coverage: Moving Towards Better Health. A Technical Advisory Group (TAG) on UHC, set up in 2016, provides expert guidance to Member States and WHO on how to strengthen equitable access to quality services, supported by appropriate policies and actions related to governance and financing.	
				Accelerating progress towards UHC requires whole-of-government and whole-of-society approaches that engage a range of national sectors and stakeholders beyond ministries of health in dialogue, including academics, civil society organizations and health professionals. Applied health systems and policy research can provide the needed evidence base for moving forward based on country-specific contexts, while the voices of patients, families and communities can exert bottom-up pressure to spur health system performance improvement.	
				The proposed side event will bring together health leaders from government, public health and health systems academics, experts from WHO Collaborating Centres, WHO Western Pacific Region UHC Technical Advisory Grouip members, development partners and civil society organizations, to discuss how to accelerate progress towards UHC. The side event will follow soon after the 2017 UHC TAG meeting, whose outcomes and recommendations will inform the discussions. For wider dissemination, the session presentations and key messages will likely be published as a special issue of the Journal of Health Systems and Reform.	
K.12.L	Open to external participants	Strengthen country monitoring systems of UHC SDG indicators: A case of Senegal and global practices	JICA, Government of Senegal, World Bank, Hitotsubashi University, World Health Organization	The 48th session of the United Nations Statistical Commission held in March 2017 agreed upon the revised list of global Sustainable Development Goal (SDG) indicators, in which indicators of universal health coverage (UHC) (SDG target 3.8) were refined to be coverage of essential health services (SDG indicator 3.8.1) and lack of financial protection coverage in health (SDG indicator 3.8.2). Monitoring these UHC SDG indicators is useful for countries to develop evidence-based health national strategies [UHC 2030 key	RSVP to <u>Togawa.Shotar</u> <u>o@jica.go.jp</u>

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	principle #3] in order to attain UHC which leaves no one behind in
	terms of the service and financial protection coverage [key
	principle #1] while ensuring transparency and accountability for
	results [key principle #2]. Many countries have been developing
	their monitoring system of the indicators by conducting
	household surveys such as Demographic and Health Surveys
	(DHS), Multiple Indicator Cluster Surveys (MICS), Living Standards
	Measurement Surveys (LSMS), and facility records.
	However, routine collection of reliable and comparable data with
	sufficient detail on the health service and financial protection
	coverage remains to be a main UHC monitoring challenge. For
	example, data availability on service coverage of non-
	communicable diseases (NCDs) is still limited compared to that of
	infectious diseases and reproductive, maternal, newborn and
	child health. Household expenditure survey data are not always
	comparable across surveys in different years of the same country
	and across surveys of different countries, because survey
	instruments differ in aspects such as recall period, expenditure
	items covered and the overall focus of the survey (i.e. survey
	focusing on health vs. multipurpose survey where health is only
	one item for consideration). Furthermore, additional in-depth
	data collection is necessary to reveal what interventions can be
	useful to improve these coverage indicators, as coverage data
	themselves do not explain why coverage indicators have changed.
	Senegal is one of the countries where government efforts to
	strengthen monitoring systems of the UHC SDG indicators are
	ongoing with support from development partners and academia,
	despite the challenges mentioned above. In the sessions,
	experiences and way forward of UHC indicator monitoring of
	Senegal will be shared, and then open floor discussion among
	speakers and participants will follow to enhance mutual learning
	across countries.

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K.12.P	Open to external participants	The Asia-Pacific pathway to universal health coverage	WHO Western Pacific Regional Office, Asian Development Bank, Asian Development Bank Institute, Seoul National University (WHO CC), Asia Pacific Observatory for Health Systems and Policies (APO) and Ministry of Health, Labour and Welfare, Japan.	see K.12.A	Contact Nittita Prasopa- Plaizier: prasopaplaizier n@who.int & Anjana Bhushan: bhushana@wh o.int
M.12.A	Open to external participants	Without financial hardship? A call to action to decrease out-of- pocket spending and reframe financing priorities for UHC.	UHC Financing Advocacy	This session will issue a call to action to replace out-of-pocket spending and reaffirm importance of public sector financing for UHC, highlighting new research and evidence from people directly affected by catastrophic payments to establish what are the current situation and the success of recent strategies. The discussion will then move to public resource mobilisation to finance UHC as the only sustainable solution to preventing catastrophic payments, specifically examining the role of compulsory public financing mechanisms (taxation and social insurance) and ODA, and outlining the immediate steps governments can take.	https://www.e ventbrite.com/ e/without- financial- hardship-a- call-to-action- to-decrease- out-of-pocket- spending-and- reframe- tickets- 40183182982? aff=es2 https://www.e ventbrite.com/ e/without- financial- hardship-a- call-to-action- to-decrease- out-of-pocket- spending-and-

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M.12.P	Open to external participants	Reaching the Underserved and Vulnerable: TB responses as a Pathway to UHC	Ministry of Health, Labour and Welfare of Japan, World Health Organization (WHO), The Global Fund to Fight AIDS, Tuberculosis and Malaria, Friends of the Global Fund, Japan (FGFJ) / Jap an Center for International Exchange (JCIE), Japan AntiTuberculosis Association (JATA), Stop TB Partnership	With the political momentum on UHC rising, this side event will explore how the TB response and the strategies to advance UHC can be aligned and leveraged to reach the underserved and vulnerable population and accelerate progress toward UHC. The discussion at this meeting will aim to continue strengthening the global advocacy and political commitment on TB and UHC, building on the outcome of the Global Ministerial Conference on TB in Moscow. The outcome of this side event will, in turn, contribute to the preparation of the UN High-Level Meeting on TB in 2018. The event will review past experiences in TB response and current challenges in countries and communities in Asia, including the example of Japan; countries' efforts to lessen the TB patient cost; share insights from working with migrants and other underserved population; and, identify ways the TB strategy can align or contribute to the goal of achieving UHC at country and community levels.	http://fgfj.jcie. or.jp/wp- content/uploa ds/2017/11/fly er uhc.pdf	

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		The road to UHC is complex and often	
		unchartered for policymakers and practitioners,	
		charged with navigating their country's political	
		and economic context and implementing	
		improvements in their health systems. The Joint	
		Learning Network for Universal Health Coverage	
		(JLN) has evolved as an action-oriented platform	
		for cross-sharing of knowledge across countries	
		at different points in their journey toward UHC.	
		Its country-led model for practitioner-to-	
		practitioner learning focusing on the how-to's of	
		implementing UHC has a distinctive hold in the	
		global health landscape. Over the past couple of	
		years, the network has significantly expanded its	
		membership and technical topics for co-learning,	
		driven entirely by country demand.	hattana / /
		This JLN side event will have technical focus and	https://www.e ventbrite.com/
		shed light on the overarching model of the JLN	e/advances-in-
Open to December 15th: Impacting	Joint Learning Network for	and how it is contributing to the global move	uhc-through-
G.15.M external Advances in UHC through	Universal Health Coverage	toward UHC through actionable knowledge. The	global-linking-
participants Global Linking and Learning	Oniversal freattif Coverage	panel discussions will bring out the challenges	and-learning-
		countries are facing in implementing UHC and	registration-
		how JLN knowledge products provide solutions	40184394606
		that any country can apply.	10101031000
		and any can apply	
		COME & GET TO KNOW THE JLN, ITS APPROACH	
		& OUTCOMES IN COUNTRIES – IN THE VOICES	
		OF ITS COUNTRY MEMBERS.	
		Highlights	
		Introduction to JLN's Joint Learning	
		Approach	
		"Addressing UHC Challenges through	
		Joint Learning" – reflections & discussion with	
		JLN country members and partners	
		Ghana, Nigeria, Mexico, Ethiopia, and	
		Michael Myers, Managing Director, Rockefeller	
		Foundation	
		For latest agenda and speaker update, visit our	

		iciai Side Everits (as or 27 iv	ovember 2017)	T	1
				Event page. For more information, contact JLN@R4D.ORG.	
				SPECIAL HIGHLIGHT: HEAR JLN COUNTRIES ON THEIR LEARNING PRIORITIES FOR 2018!	
G.15.A	Open to external participants	The Role of Global Health Partnerships to Achieve Universal Health Coverage	Co-organized by The Global Fund to Fight AIDS, Tuberculosis and Malaria, and Gavi, the Vaccine Alliance In collaboration with Friends of the Global Fund Japan	The Global Fund to Fight AIDS, Tuberculosis and Malaria and Gavi, the Vaccine Alliance, both as major global health partnerships, have been playing a central and catalytic role in translating global goals into effective investment strategies and country-level interventions and contributing to UHC in a systematic and coordinated way. The side event will feature political leaders that champion health and demonstrate ways in which countries and their global health initiatives partners are working together to achieve national and UHC objectives. It will highlight examples of how countries have developed resilient and sustainable systems for health while simultaneously addressing gender and human rights barriers - and used international support mechanisms to ultimately achieve UHC.	Contact Makiko Takayama: makiko.takaya ma@theglobal fund.org
G.15.L	Open to external participants	Contribution to Universal Health Coverage (UHC) through Strengthening Continuum of Maternal, Newborn and Child Care (CoC) -The social and economic benefits of investing in maternal and child health in UHC-	JICA and WHO HQ JICA, WHO	In pursuing Universal Health Coverage, countries aim to extend coverage of quality health services to all people and to protect them from the risk of financial hardship. Women's and children's health was a major focus in health agenda in the MDG era, though the current focus of the global community is more comprehensive including non-communicable diseases, namely life style diseases and mental health issues. Based upon these, in this Panel Discussion participants will discuss how effective is investing in MNCH services for achievement of UHC. Countries will	Contact Kazune Takashima: Takashima.Kaz une@jica.go.jp

UHC Forum 2017 List of Official Side Events (as of 27 No	ovember 2017)
	share their experiences and lessons learned following the three topics of different aspects.
	1)Women and children as entry for UHC 2)Women and children as a model for UHC 3)Women and children as an investment for UHC
	●Co-moderator:JICA and WHO HQ ●Country presenters:MoH Indonesia, DoH Philippines, DHS Ghana, NCCHD Japan

G.15.P	Open to external participants	"Health System Financing and Social Health Protection for UHC: Role of Comparative Health System Analysis and Regional Collaborations in Asia"	P4H, WHO/Institute for Global Health Policy Research(iGHP), National Center for Global Health and Medicine	health care financing for the ageing society as well as a collaboration model in this region, the University of Tokyo (U of Tokyo) and iGHP will present findings of "Japan Health Systems in Transition (HiT) report" together with the APO secretariat. Expected outcome: 1. Validation of priority health financing and protection issues and challenges to progress towards UHC in Asia including strategic policy actions and responses. 2. Consolidated views on regional networking initiative for UHC, particularly health financing, in Asia, comments and feedback to strategize next step collaborative actions. 3. Highlighting challenges and opportunities for using health system research to generate evidence for policy change in Asia Pacific 4. Sharing findings of "Japan Health Systems in Transition (HiT) report" together with Asia	http://www.ig hp.ncgm.go.jp/ en/news/
G.15.P	external	Social Health Protection for UHC: Role of Comparative Health System Analysis and Regional Collaborations in	Health Policy Research(iGHP), National Center for Global Health	well as a collaboration model in this region, the University of Tokyo (U of Tokyo) and iGHP will present findings of "Japan Health Systems in Transition (HiT) report" together with the APO secretariat. Expected outcome: 1. Validation of priority health financing and	hp.ncgm.go.jp/

T.15.A	Open to external participants	STRATEGIC INVESTMENT IN GLOBAL HEALTH VACCINE R&D	International AIDS Vaccine Initiative (IAVI), Global Health Innovative Technology Fund (GHIT), Coalition for Epidemic Preparedness Innovations (CEPI) with the support from the World Bank, Gavi, the Vaccine Alliance, Malaria No More	The recent outbreaks of Ebola and Zika have reconfirmed the critical importance of vaccine development as part of the preparedness strategy for future health emergencies. The International AIDS Vaccine Initiative (IAVI), the Global Health Innovative Technology Fund (GHIT Fund), and the newly launched Coalition for Epidemic Preparedness Innovations (CEPI) are three global public-private partnerships committed to ensuring the development of vaccines that the world needs. At the occasion of the UHC Forum, the three organizations will come together to explore ways to deepen the collaboration across their work, and to promote the engagement with the private sector and academic research entities in Japan. Please join us as we explore specific ways for three global vaccine R&D public-private partnerships to deepen the collaboration and to promote engagement with Japanese partners. Learn the latest progress in the global health vaccine R&D field Identify opportunities for further private sector engagement Explore specific ways to link expertise and resources around the globe necessary to advance promising vaccine candidates and ensure access by those who need it the most Program and Speakers Presentations on latest progress in global vaccine R&D Eric Goosby, Chair of the Board, International AIDS Vaccine Initiative (IAVI) Richard Hatchett, CEO (or alternate) Coalition for Coalition for Epidemic Preparedness Innovations (CEPI) Shoji Miyagawa, Japan Agency for Medical Research (AMED) BT Slingsby, CEO, Global Health Innovative Technology Fund (GHIT Fund)	RSVP to: Kwofficebridge k@gmail.com
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UHC Forum 2017 List of Official Side Events (as of 27 November 20	17)
	Panel: Challenges and opportunities for the
	private sector engagement in global health
	vaccine R&D
	Julie Gerberding, President, Merck
	Vaccines
	Tatsuo liyama, Department of
	International Trial, Center for Clinical Sciences,
	National Center for Global Health and Medicine (NCGM)
	Tetsuro Matano, Director, AIDS
	Research Center, Japan National Institute for
	Infectious Diseases (NIID)
	Masanori Osakabe, Executive Director
	of R&D, Nobelpharma Co., Ltd.
	Moderator: Michikazu Koshiba, Head, Center on
	Global Health Architecture, Mitsubishi UFJ
	Research & Consulting
	Panel: Linking expertise and resources for
	advancing global health vaccine R&D and
	ensuring accessSeth Berkley, CEO (or alternate), Gavi,
	the Vaccine Alliance
	,,
	Regional Office, IAVI Tim Evans, Senior Director Health.
	Nutrition, Population Global Practice (or
	alternate), The World Bank
	Japan Ministry of Health, Labour and Malfara (invited)
	Welfare (invited)
	Pharmaceutical and Medical Devices Approximately (PMAPA) (incident)
	Agency (PMDA) (invited)
	Moderator: Dr Kenji Shibuya, Professor and
	Chair, the Department of Global Health Policy,
	Tokyo University
	The event is in English
	The event is free and open to public, but
	registration is requested.

		iciai siac Events (as of 27 iv			-
T.15.L	Open to external participants	The Role of Citizens in Health: helping government to increase accountability & transparency	CSEM / CSO japanese coalition	Highlight how CSO tools and activities can be useful for government and other partners to make health system and UHC policies more transparent, accountable and democratic	Contact Ariana Childs Graham: a.childsgraham @pai.prg
T.15.P	Open to external participants	UHC and Universal Reproductive Health Coverage: Challenges and Opportunities for Women and Adolescents	IPPF,UNFPA, JOICFP	This side event will provide participants with a platform for discussion on how to ensure universal coverage of reproductive health for achieving UHC, including key challenges and opportunities related to women and adolescents. Discussion intends to identify how to overcome global barriers and challenges, through international cooperation, civil society efforts and community engagement with a view to 'leave no one behind.'	https://goo.gl/ forms/Yf2mHK 29HCnJOS2H3
P.15.M		Reserved	Forum co-organizers		
P.15.A	Open to external participants	Neglected Tropical Diseases (NTDs): Driving progress towards UHC	Nagasaki University, Uniting to Combat NTDs, St. Luke's International University, DNDi Japan	This side event will highlight the progress that has been made in the fight against neglected tropical diseases - diseases that affect more than a billion people of the world's poorest people, of whom the SDGs and UHC are specifically targeting. Discussions will focus on the opportunity that NTD interventions have in advancing the UHC agenda. The meeting will also kick-start the establishment of a Japanese NTD network and launch the fifth progress report of the London Declaration on NTDs.	http://www.ja pan-ntd- network.org/nt d, http://unitingt ocombatntds.o
P.15.L	Open to external participants	Building blocks for change: Strengthening Primary Health Care systems for UHC	Primary Health Care Strategy Group	The imperative of strengthening primary health care (PHC) to achieve Universal Health Coverage (UHC), including understanding how it is financed, costing and implementation of Essential Health Packages (EHPs) as a step toward strengthening PHC, and priority action for frontline delivery of PHC, is understood by participants at the end of the session.	https://www.e ventbrite.com/ e/building- blocks-for- change- strengthening- primary- health-care- systems-for- uhc-tickets- 39308129674

				Many countries in the Asia-Pacific region are accelerating progress towards UHC, the achievement of which is as much a political process as a technical one. As more countries in the Asia-Pacific region move towards publicly financed health care systems for essential health services, it is important that the same countries can allocated resources equitably to respond to their burden of disease, optimise health outcomes, boost economic growth, and strengthen accountability to citizens.	
P.15.P	Open to external participants	Keeping HIV, TB & malaria on the UHC agenda in the Asia- Pacific: A multi-stakeholder dialogue Keeping HIV, TB and Malaria on the UHC Agenda in the Asia-Pacific: A Civil Society - Government Dialogue	GFAN AP, AJF, APCASO, SCDI, Stop AIDS Alliance	HIV, TB and malaria are epidemics in the Asia-Pacific region that see large gaps in access to health services amongst the key populations, vulnerable and poor communities. Given that some of the highest burden countries in TB are in the Asia-Pacific region, and with highly concentrated epidemics in the three diseases amongst key populations and vulnerable communities, and the prevalence of artemisinin-resistance in the Greater Mekong region, UHC that sustains responses to HIV, TB, and malaria is especially critical in ensuring leaving no one behind in Asia-Pacific in the context of new drugs/commodities/diagnostics for HIV, TB, and malaria. With increasing withdrawal of bilateral and multilateral aid, and the threat of decreasing allocations from the Global Fund to Fight AIDS, Tuberculosis and Malaria in the Asia-Pacific region and with more countries shifting from external resources to domestic funding, the engagement of communities and civil society in developing, implementing, and monitoring evidence-based health national strategies holds governments and donors accountable to achieve sustainable results.	Contact Rachel Ong : Rachel.ong@gf anasiapacific.o rg

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F.15.L	Open to external participants	Embedding health systems research within health systems to achieve universal health coverage	Heath Systems Global (HSG) and Alliance for Health Policy and Systems Research (AHPSR) (with UNICEF and the World Bank)	Reflecting the growing global movement towards universal health coverage (UHC), there has been significant growth in the field of health systems research in the past twenty years, although it is still dwarfed by investments in clinical research. More recently, there has been increasing focus on how to "embed" such research within live health systems, so that it is used in real time to overcome bottlenecks to health service delivery, as well as driven by the priorities of health systems implementers and policy-makers. There are established networks of health systems researchers both globally and in most countries, who are increasingly interacting with implementers to generate the research and evidence required to move closer towards universal health coverage. This side-event at the Universal Health Coverage Forum 2017 in Tokyo will bring together government policy-makers, civil society, experts from academia, the private sector and development partners to discuss how to address the issues of embedding health systems research within health systems to achieve universal health coverage, drawing on country experiences in doing so.	Contact George Gotsadze: g.gotsadze@cu ratio.com
F.15.F	Open to external participants	Health systems resilience against public health emergencies and roles of regional laboratory	JICA	This session highlights the importance of regional and collective action to strengthen preparedness for health emergencies, especially pandemics, by looking at such efforts including those by Africa CDC's Regional Integrated Surveillance and Laboratory Network. The session also explores how these regional efforts can contribute to achieve UHC in the constituent countries.	Contact Maki Masutani: Masutani.Maki @jica.go.jp
K.15.N	Forum participants only	UHC JOINT INITIATIVE IN THE 10 PILOT COUNTRIES	The World Bank	This side event is to demonstrate added value of the UHC Joint Initiative in the 10 pilot countries through experience sharing. At the end of the side event, it is expected to identify way forward	N/A

K.15.A		Reserved	Forum co-organizers	to establish and/or enhance a joint partnership platform in each pilot country to accelerate progress toward UHC.	
K.15.L	Forum participants only	UHC JOINT INITIATIVE IN THE 10 PILOT COUNTRIES	The World Bank	This side event is to demonstrate added value of the UHC Joint Initiative in the 10 pilot countries through experience sharing. At the end of the side event, it is expected to identify way forward to establish and/or enhance a joint partnership platform in each pilot country to accelerate progress toward UHC.	N/A
K.15.P	Open to external participants	Leave no one Behind – What should be done to include all population in Health policies ?	GHA- CSEM - Japan CSo coalition	Highlight who are the left behind and how to ensure inclusive and equitable health policies towards UHC: 1- Who are the marginalised / vulnerable population? 2- How to build Inclusive and equitable health policies? 3- What role for health workers in ensuring inclusive an equitable health services?	Contact Annick JEANTET: ajeantet@gha dvocates.org & Bruno Rivalan brivalan@ghad vocates.org

Other Informal Side Events

11-Dec	British Embassy Tokyo, 1 Ichibancho-, Chiyoda-ku, Tokyo	Rapid diagnostic tests to reduce unnecessary use of antibiotics and contribute to objectives of Universal Health Care Coverage	British Embassy Tokyo, Nesta, Mitsubishi UFJ Research and Consulting	In the 80 years since the discovery of penicillin, our overuse of antibiotics has allowed bacteria to evolve resistance, leading to the emergence of untreatable superbugs that threaten the basis of modern medicine. Effective and accurate point-of-care tests, such as those incentivised by the Longitude Prize, will form a vital part of the toolkit for stewardship of antibiotics and help preserve existing and future antibiotics. Better diagnosis of bacterial infections will enhance	https://www.s urveymonkey.c om/r/2MBF7W H by Dec8. For more details on programme and agenda, please see: https://longitu
				efforts to ensure universal health care.	deprize.org/ev ents