

MEETING SUMMARY

19th September 2023

Aligning global health financing and political accountability on the path to UHC

A side meeting co-hosted by Amref Health Africa and UN Foundation,
on the margins of UNGA

Summary of the multistakeholder roundtable

Background

On September 19, 2023, Amref Health Africa and the UN Foundation, in partnership with the Future of Global Health Initiatives (FGHI) process, co-hosted a candid conversation on how development assistance for health, including through strengthened global health initiatives (GHIs), can best support country priorities, plans, and budgets in support of universal health coverage, as countries transition to increased domestic financing for health.

The event took place just a few days before the High-Level Meeting on Universal Health Coverage. The conversation took place under Chatham House Rule, and provided space for participants to speak openly about ways to enhance efficiency and effectiveness of partner support to countries' efforts to achieve UHC.

The room reflected a diversity of perspectives, including ministries of health that receive global health funding, and donor governments, global health initiatives, civil society and other partners. One point was clear: no voices argued that the status quo for global health financing should be maintained. A summary of prominent themes follows below.

Key Messages

Progress towards UHC will only be achieved if it is centered on national plans, driven by country priorities and needs, and supported by donors and partners. Governments are having to balance population needs with donor demands and, often, high indebtedness. Too often, governments' priorities become sidelined by the strategic goals and work plans of GHIs. The result is that by the end of the year, many country priorities, including those that are focused on health systems strengthening, remain untouched. Moving forward, national action plans that respond to population needs, are owned and monitored by countries, alongside communities, and civil society actors at all levels, need to drive investments and resources. There was acknowledgement that while GHIs have made considerable contributions to reducing disease-specific morbidity and mortality, there need to be clear investments in healthcare *systems*, and a pathway to strengthening country capacity while increasing self-sufficiency. It was noted that GHIs need to be adaptive and responsive to country contexts, diversity, and capacities.

It was further noted that countries will continue to be dependent on GHIs for some time, and no single entity can precipitate a transition away from the current funding models. Stakeholders - from government, civil society, private sector, donors, and global health partners - all have a role to play in shifting norms and ensuring collective accountability.

Despite multiple commitments to improve aid effectiveness, we are falling short. Stakeholders referred to the Paris Declaration on Aid Effectiveness, Addis Ababa Action Agenda, and Accra Agenda for Action, and, most recently the G7 Hiroshima Leaders' Communiqué which highlighted the need to avoid duplication and fragmentation in the system. There were shared views that aid effectiveness had deteriorated in recent years, in part due to fragmentation in financing. Participants recognized the need to return to the aid effectiveness agenda by enhancing coordination among stakeholders.

Fragmentation of financing and programmatic goals wastes resources, but, if tackled, could create enormous efficiencies. Participants acknowledged that donors have contributed to the fragmentation of health aid and that a lack of trust in country systems (e.g. data systems) has resulted in duplication of efforts on several fronts. There was a request for partners and countries to co-create conditions and standards for grants, not have them imposed on countries. Multiple participants remarked how donor demands - particularly during grant-writing "season" - create significant workload and overhead costs for ministries and take resources away from implementation of public health priorities. There was a call for greater collaboration and coordination in support of one plan, one M&E framework and one resource envelope to promote accountability.

Global Health Initiatives are agents of change that can catalyze shifts in the broader global health ecosystem. There was broad acknowledgement that GHIs have supported countries to achieve significant results on specific health indicators and that they are capable of catalyzing broader systemic change. GHIs were recognized for their important role in articulating the connection of issues at global, regional, and national levels, which can help support national strategies.

Some participants noted, however, that donors had not been focused on consistently strengthening horizontal systems capabilities, and that there were significant opportunities to do so. Generating momentum in this direction will require action at the board level and a joint country coordinating and oversight mechanisms is needed. There is currently a disassociation between countries' optimal strategy and decisions and direction-setting of GHI boards.

Together we must build health systems that don't just treat the sick but that can promote good health and wellbeing. Concern was raised at the rapidly growing and changing burden of disease, and that a model of "universal disease coverage – not universal health coverage" – is being exported from developed countries to developing countries. While it was noted that the global community must remain committed to disease targets, moving forward, primary health care must be prioritized as the bedrock for health systems that are capable of addressing evolving disease burdens and sustaining healthier populations at baseline.

Countries that have succeeded in orienting toward primary healthcare have done so by investing in community-based services, community health posts, and community outreach services, which "reach homes and bring people back into the systems". It can achieve remarkable results, as was the case with Ghana, which has significantly reduced child deaths in part by expanding outreach of health services. In this regard, it was highlighted that countries of all income levels have a great deal to learn from one another.

Building finance and data capabilities are a critical part of capacity building and health systems strengthening. The topic of 'systems' was raised several times throughout discussion by different stakeholder groups. Some noted that the proliferation of different systems, including for data, informatics, and surveillance, is a resource drain, and at times unnecessary. Many agreed that reliable data from the country is essential to be able to prioritize, and assess impact and need. At the same time, some discussants felt the lack of trust in domestic systems undermined partnership overall, and duplication of efforts did little to strengthen countries' capacities.

There was conclusive agreement among participants that every actor has a responsibility to improve the system, and that there is a clear need for political oversight and political accountability. Country leadership and country ownership must drive the next era of global health strategy and finance. There was also full agreement that GHIs have been critically important in bringing great focus to specific health needs and in filling critical gaps in the global health architecture. It is important however that there is a pathway for responsibility to eventually transition to national actors. In this regard, while this conversation was about the future of GHIs, it is ultimately about the future of global health.

We thank the following participants for attending and taking part in the conversation:

Mr. Omar Abdi, Deputy Executive Director for Programmes, UNICEF

H.E. Dr. Ali Haji Adam Abubakar, Minister of Health and Human Services, Federal Government of Somalia

H.E. Dr. Kwaku Agyemang-Manu, Minister of Health, Government of Ghana

Amb. Takeshi Akahori, Director-General and Ambassador for Global Issues, Government of Japan

Dr. Bruce Aylward, Assistant Director-General, Universal Health Coverage, Life Course, WHO

Ms. Gabriela Cuevas Barron, Co-Chair, UHC2030

Mr. Javier Hourcade Bellocq, Founder and Editor, The Key Correspondent Team, Civil Society Engagement Mechanism for UHC2030 (CSEM)

Mr. Chris Carter, Head of Development, FCDO, Government of the United Kingdom

Ms. Kristen Chenier, Director, Global Health Policy, Infectious Diseases and Pandemic Preparedness, Global Affairs, Government of Canada

H.E. Ms. Khumbize Kandodo Chiponda, Minister of Health, Government of Malawi

Dr. Adjima Combary, National Tuberculosis Program, Government of Burkina Faso

Amb. Elizabeth Cousens, President and CEO, United Nations Foundation

Dr. Atul Gawande, Assistant Administrator for Global Health, USAID

Ms. Erica Gerretsen, Director for Human Development, European Commission

Dr. Githinji Gitahi, Group CEO, Amref Health Africa

Dr. Dabsou Guidaoussou, Secretary General of the Ministry of Health, Government of Chad

Dr. Hajime Inoue, Advisor, Health, Nutrition, and Population, World Bank

Dr. Polydor M. Kabila, Coordinator, National Council on UHC, Democratic Republic of the Congo

Ms. Desta Lakew, Director, Group Partnership and External Affairs, Amref Health Africa

Mr. Luc Laviolette, Head of the Secretariat, Global Financing Facility

Hon. Ricardo Baptista Leite, President and Founder, UNITE Parliamentary Network

Dr. Mark Lucera, Head of Strategy, Coalition for Epidemic Preparedness Innovations

Dr. Lwazi Manzi, Health Executive, Government of South Africa

Mr. David Marlow, Interim CEO, GAVI

Ms. RD Marte, Executive Director, APCASO

Mr. Dirk Meyer, Director General, Department of Multilateral Development Policy, Transformation, and Climate, Government of Germany

Dr. Mercy Mwangangi, Co-Chair, Steering Group, Future of Global Health Initiatives

Dr. Kasonde Mwinga, Director, Universal Health Coverage/Life Course Cluster, WHO-AFRO

H.E. Ms. Lizzy Nkozi, Minister of Health, Government of Eswatini

Ms. Nupur Parikh, Policy Officer, Health, ONE Campaign

Ms. Samantha Rick, Multilateral & PPR Advocacy Specialist, AVAC

Mr. John-Arne Rottingen, Co-Chair, Steering Group, Future of Global Health Initiatives

Ms. Beck Smith, Associate Director of Policy, Wellcome Trust

Ms. Nida Rohmawati, Director of Productive Age and Elderly Health, Government of Indonesia

Ms. Dianne Stewart, Deputy Director, External Relations and Communications, The Global Fund

H.E. Ms. Anne Beathe Tvinneim, Minister of International Development, Government of Norway

And accompanying guests:

Dr. Patrick Kuma-Aboagye, Director-General, Ghana Health Service, Government of Ghana

Mrs. Emma Ofori Agyemang, Acting Chief Director, Ministry of Health, Government of Ghana

Ms. Corazon Aquino, Partnership Manager, Directorate of Partnerships & External Affairs, Amref Health Africa

Ms. Anurita Bains, Associate Director, HIV/AIDS, UNICEF

Ms. Silaja Birks, Strategic Partnerships Lead, Wellcome Trust

Ms. Nidhi Bouri, Deputy Assistant Administrator, USAID

Dr. Bernard Okoe-Boye, Deputy Minister of Health, Government of Ghana

Mr. Sondre Bjotveit, Director, Ministry of Foreign Affairs, Government of Norway

Mr. Leandro Cahn, Executive Director, Fundación Huésped

Ms. Chelsea Chatterton, Special Assistant, Bureau of Global Health, USAID

Ms. Emily Chirwa, Deputy Director of Planning, Health Financing, Government of Malawi

Ms. Kate Dodson, Vice President for Global Health Strategy, UN Foundation

Dr. Satoshi Ezoe, Director, Global Health Strategy Division, Government of Japan

Mr. Will Hall, Head of Global Government Relations, Wellcome Trust

Mr. Jin Hashimoto, Foreign Service Officer, Global Health Strategy Division, International Cooperation Bureau, Government of Japan

Ms. Marjolaine Nicod, Coordinator, UHC2030

Ms. Folashade Oje, Head, International Cooperation, Department of Health, Planning, Research and Statistics, Federal Ministry of Health, Nigeria

Mr. Charles Okeahalam, International Board Chair, Amref

Mr. Bruno Rivalan, Senior Partnership Specialist, Global Financing Facility

Ms. Marie-Ange Saraka-Yao, Managing Director, Resource Mobilization, Private Sector Partnerships and Innovative Finance, GAVI

Dr. Elvieda Sariwati, Senior Planning Analyst, Government of Indonesia

Ms. Kerstin Sieverdingbeck, Counsellor, Permanent Mission of Germany to the UN

Ms. Eleonor Silva, Executive Director, UNITE

Mr. Arjun Vasan, Deputy Director, Office of International Development Policy (IDP), U.S. Treasury Department

Mr. Ryan Wiley, Board Chair, Amref Canada

Dr. Peter Yeboah, Executive Director of the Christian Health Association of Ghana (CHAG), Government of Ghana

Mr. Peter Yeo, Senior Vice President & President of the Better World Campaign, UN Foundation