



TOWARDS A  
**GLOBAL  
ACTION  
PLAN**

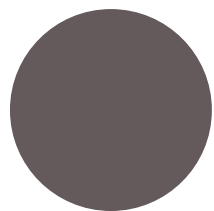
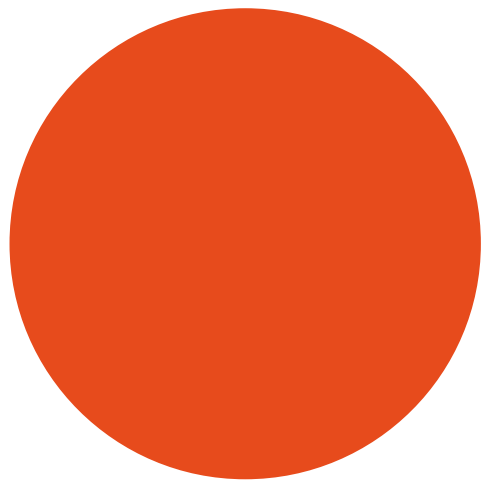
FOR HEALTHY LIVES  
AND WELL-BEING FOR  
ALL

**NON-STATE ACTOR  
CONSULTATION  
30 APRIL 2019**

# Session 6. Accelerator on Primary Health Care

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# Partners Collaborating on Primary Health Care

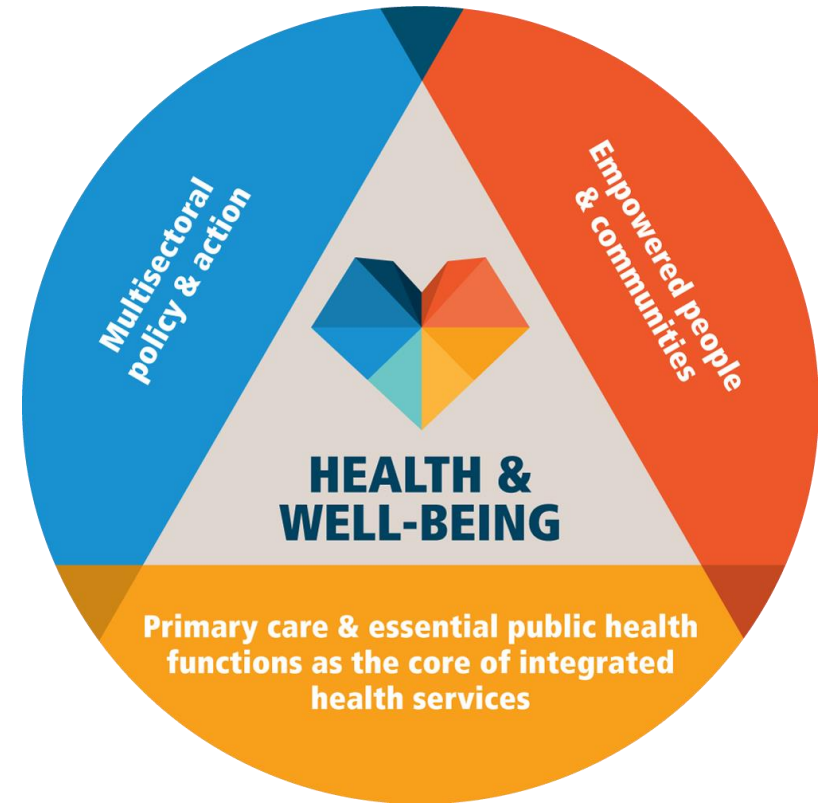
*30 April 2019*

*New York*

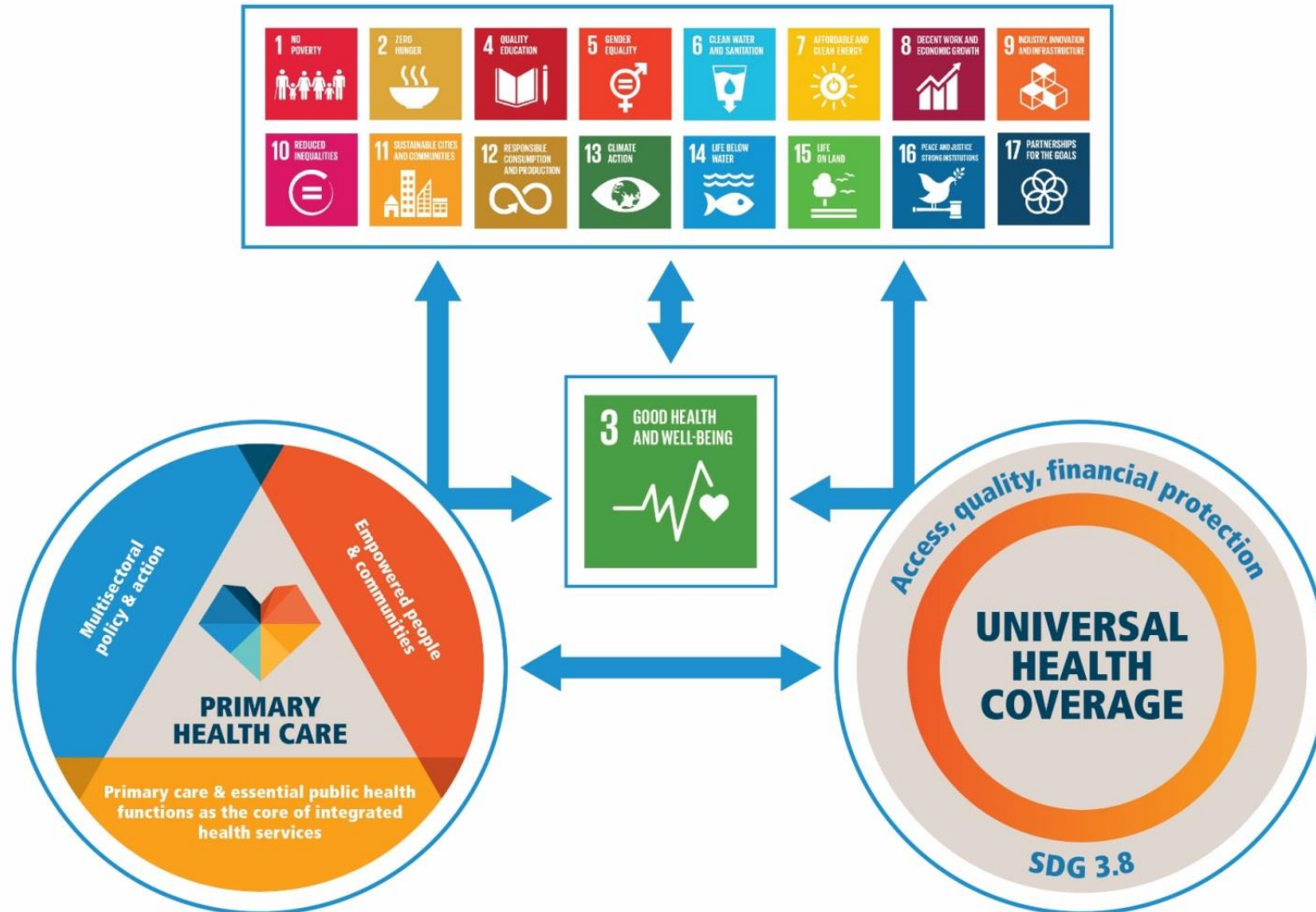
# Objectives/Outputs

1. Agreed platform for global coordination on PHC
2. Agreed principles of and modalities for partner engagement in countries
3. Agreement on criteria for identifying countries to approach regarding proposed intensified support;
4. Agreement on next steps and processes for country-level engagement, incl. communications
5. Potential roles and responsibilities of partners at country-level.
6. Agree on future global and country-level coordination strategy on PHC collaboration among partners.

# What is PHC?



# PHC supports UHC and SDGs

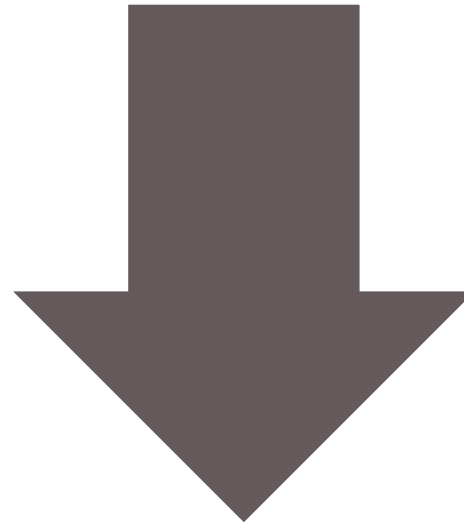


# The evidence for PHC



## **Improves:**

- Outcomes, such as
  - Life expectancy
  - Mortality rates, incl. infant and under-5, cardio-vascular mortality etc.
  - Low birth weight
  - Cancer detection etc.
- Equity



## **Reduces:**

- Relative cost
- Adverse events
- Negative effects of social inequality



**Align**



**Accelerate**



**Account**

A joint initiative of:



# SDG Global Action Plan for healthy lives and well-being

“We commit to align our joined-up efforts with country priorities and needs, to accelerate progress by leveraging new ways of working together and unlocking innovative approaches, and account for our contribution to progress in a more transparent and engaging way ...

**INCLUDING IN PHC  
for UHC!**



# Global coordination

## Agreement to establish a PHC Partners WG

- Partners mostly overlap w SDG GAP agencies
- Not exclusive
- UHC2030 to coordinate vs. Independent Inter-Agency Task Team?

## Convenings

- Principals convening (December 2018, March 2019)
- Sherpas meeting for SDG3+ GAP (quarterly)
- Partners convening (e.g. 17 April 2019)

## Community of practice on PHC implementation

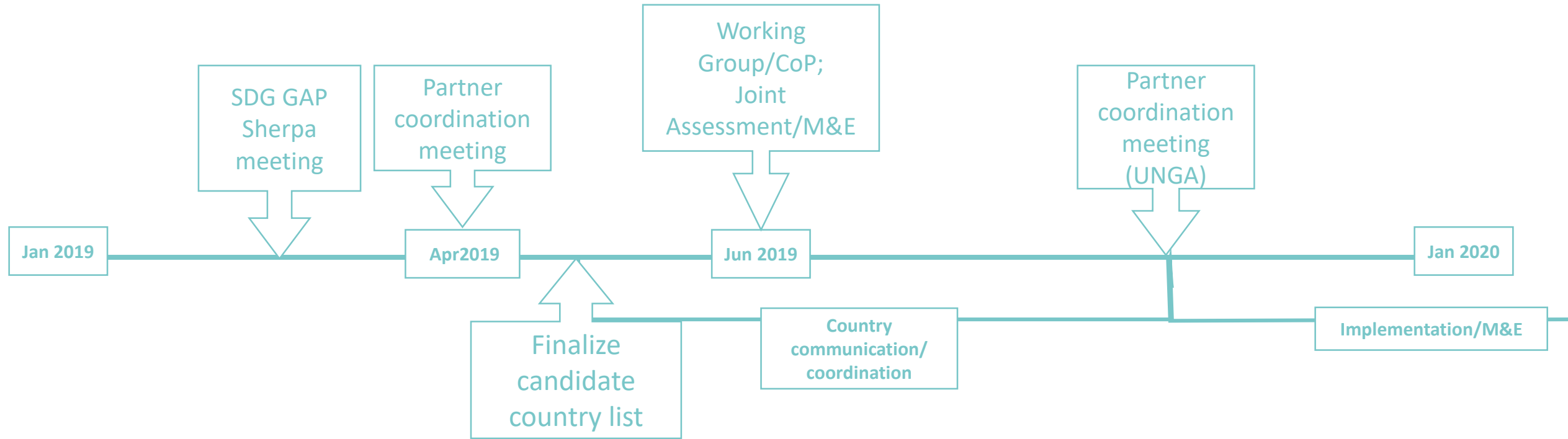
- Partner focused, country focused, both?
- Leveraging existing communities of practice such as the Joint Learning Network, Community Health Roadmap, Health Harmonization in Africa, etc.

## Political advocacy

- G20 and G7 both focusing on PHC
- Regional bodies (such as ASEAN and the African Union), groups of nations, regional public health authorities (such as the Africa CDC)

# Work Plan - 2019

## Global Coordination



## Country Cooperation



Country Level Action – How?

# Overarching principles

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**Country ownership:** countries will have clear government vested interest and willingness to engage in the post-Astana PHC approach

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**Bottom-up approach:** PHC country support plans will be developed at the country-level; WHO and UNICEF country offices will be supported by their respective Regional Offices and Headquarters, which have established related lines of communication and coordination; and

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**Tailored approach:** countries will have their own PHC support plan responsive to context and national priorities and leveraging the comparative advantage of active health development partners.

Accelerating PHC  
progress depends  
on its  
operationalization  
= the HOW

### Governance, policy and finance levers

- Political commitment and leadership
- Governance and policy frameworks
- Adequate funding and equitable allocation of resources

### Operational Levers


- Engagement of community and other stakeholders across sectors
- Models of care that prioritize primary care/public health functions
- Ensuring the delivery of high-quality and safe health care services
- Engage private sector providers
- The PHC workforce
- Physical infrastructure, appropriate medicines, products & technologies
- Digital technologies
- Purchasing and payment systems
- PHC-oriented research
- Monitoring and evaluation

Blue = action aligned with other accelerators

Black = unique contribution of PHC accelerator

## Agency/Partnership approaches to PHC

What is your agency's or partnership's strategic approach to PHC strengthening?




What is the structure of your in-country support? Broad or narrow?



How is this operationalized?



What is the approximate level of support in each country? – financial, HR, etc.



What assessments guide your planning?

# Principles (2) – IHP+ seven behaviours

1. Agreement on priorities that are reflected in a single national health strategy and underpinning sub-sector strategies, through a process of inclusive development and joint assessment, and a reduction in separate exercises.
2. Resource inputs recorded on budget and in line with national priorities
3. Financial management systems harmonized and aligned; requisite capacity building done or underway, and country systems strengthened and used.
4. Procurement/supply systems harmonized and aligned, parallel systems phased out, country systems strengthened and used with a focus on best value for money. National ownership can include benefiting from global procurement.
5. Joint monitoring of process and results is based on one information and accountability platform including joint annual reviews that define actions that are implemented and reinforce mutual accountability.
6. Opportunities for systematic learning between countries developed and supported by agencies (south-south/triangular cooperation).
7. Provision of strategically planned and well-coordinated technical support.

An eighth dimension was added: the private sector is engaged within an environment which maximises its engagement in and contribution to health sector development.

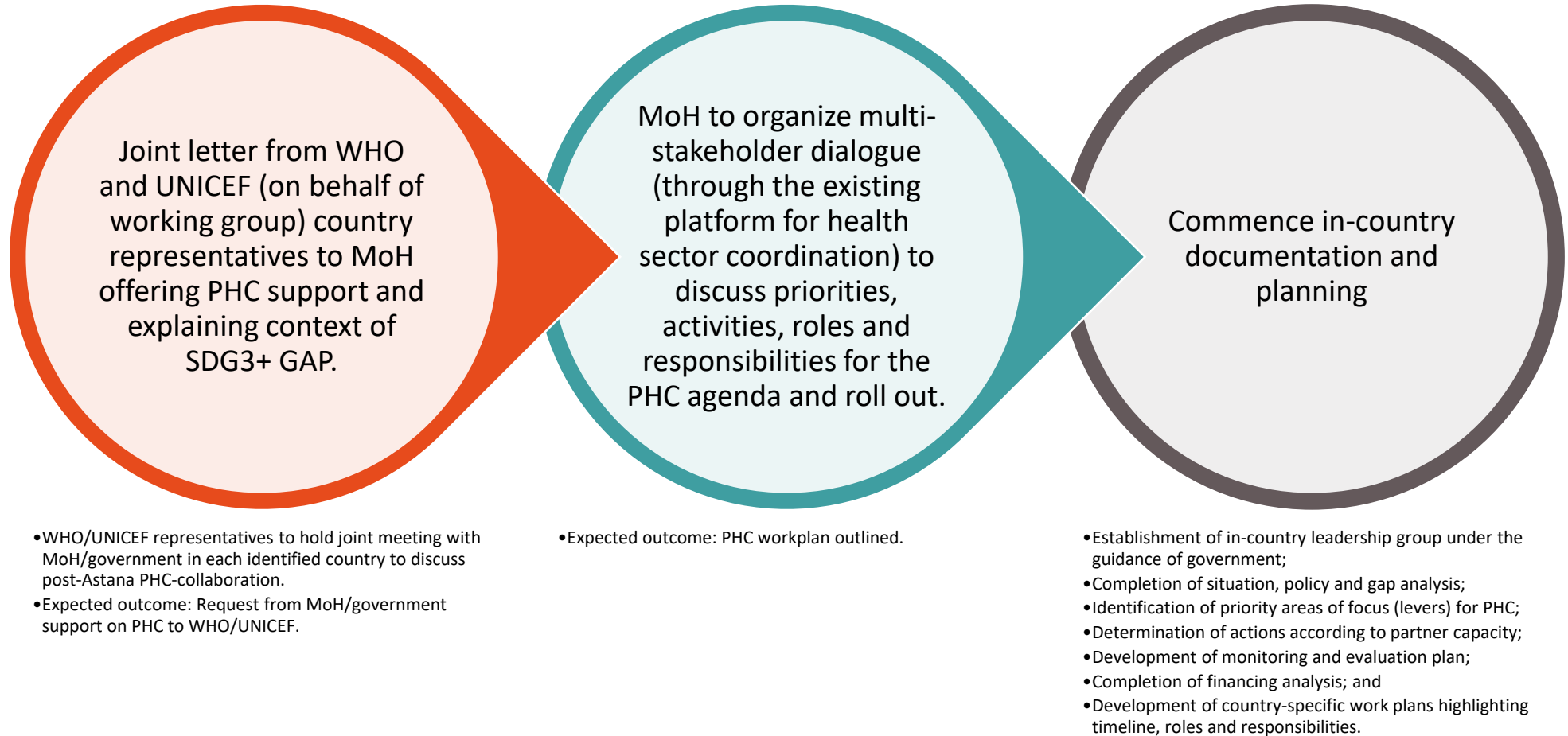
# Code of conduct

- Open and transparent communication
- Mutually respectful partnership
- Adherence to organizational mandates and commitment to facts and evidence
- Adherence to Paris, Accra and Busan principles
- Mutually informed work programmes
- Minimize “surprises on the ground”, and
- Accountability for adhering to these principles.



# Modalities

- Coordination at country level provided through existing national and sub-national mechanisms led by government, inclusive of private sector and civil society, and supported by partners as needed.
- In each country, prompted by the national health planning cycle, a process of joint situation analysis, prioritisation and reporting should be organised, as needed.
- A single framework of metrics and measurements informed by global standards, agreed between government and partners, including measures of PHC progress and action.
- Streamlined programmatic policies, operational rules and technical assistance to maximize efficiency and reduce fragmentation. Whilst led by UNICEF and WHO, partners should consider increasing and/or reorienting resources and capacity to support this work.
- Aligned investment cases to support PHC priorities and more coherent financing plans that consider investment from government and all contributing agencies.



## Modalities (2)



# Country Level Action – Where?

# Selection criteria to date

- Strong government buy-in and leadership;
- Need: Critical health outcome and major disease control indicators that are lagging;
- Multiple agencies/partnerships actively supporting;
- New investment opportunities through national or partner investment; and
- Countries facing protracted conflicts, fragility and frequent public health emergencies.

# National Health Plans: Rapid Mapping of PHC Country-level Work

MS	Planning Cycle	1. Political commitment & leadership	2. Governance & policy frameworks	3. Adequate funding & equitable allocation of resources	4. Community & stakeholder engagement	5. Models of care that prioritize primary care & public health functions	6. Assessing & improving the delivery of high-quality and safe health care services	7. Private sector engagement	8. PHC workforce	9. Medical products, vaccines, infrastructures & equipment	10. Digital technologies	11. Purchasing & payment mechanisms	12. PHC-oriented research & knowledge management	13. M&E
Burkina Faso	2011-2020	✓	✓	✓	✓	✓	✓	✓	✓	✓			✓	✓
CAR	2015-2017	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓
Haiti	2012-2021	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓		✓
Indonesia	2015-2019	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓
Kazakhstan	2014-2018	✓	✓	✓		✓	✓		✓	✓	✓		✓	✓
Kenya	2012-2030	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Malawi	2017-2022	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓
Mongolia	2016-2020	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Nigeria	2010-2015	✓	✓	✓	✓	✓			✓				✓	✓
Pakistan	2016-2025	✓	✓	✓	✓	✓		✓	✓	✓	✓		✓	✓
PNG	2011-2020	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓
South Sudan	2016-2026	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Ukraine	2015-2020	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Yemen	2010-2025	✓	✓	✓	✓	✓	✓	✓	✓	✓				✓

According to PHC operational levers

Red indicate gaps in areas of work highlighted in NHSP

# Burkina Faso: Rapid Mapping of PHC Country-level Work

## Burkina Faso: Mapping of Partner Assessments and Planned Activities

Planning Cycle: 2011-2020

Organization	SDG GAP	Implementing Partners	1. Political commitment & leadership	2. Governance & policy frameworks	3. Adequate funding & equitable allocation of resources	4. Community & stakeholder engagement	5. Models of care that prioritize primary care & public health functions	6. Assessing & improving the delivery of high-quality and safe health care services	7. Private sector engagement	8. PHC workforce	9. Medical products, vaccines, infrastructures & equipment	10. Digital technologies	11. Purchasing & payment mechanisms	12. PHC-oriented research & knowledge management	13. M&E
<b>Assessments</b>															
PHCPI*		✓		✓	✓	✓	✓	✓		✓	✓				✓
WHO	✓	✓		✓	✓		✓			✓	✓				✓
<b>Plans of work</b>															
National Health Plan / Strategy			✓	✓	✓	✓	✓	✓	✓	✓	✓			✓	✓
UNICEF	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓			✓
WHO	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓			✓

\*partnership or initiative

Red indicate gaps in areas of work highlighted in NHSP



# Assessment approaches

- National health sector reviews
- Health system assessments
- Roadmap processes (IPCHS, Community health roadmap etc)
- Dashboards/Profiles (PHCPI)
- Scorecards

# Common PHC monitoring framework

Existing efforts that can be utilized to build a menu of PHC-specific metrics include:

- SDG monitoring
- Core 100 Indicators
- WHO Global Program of Work monitoring
- Health Data Collaborative Inventory of Quality of Care indicators
- UHC monitoring processes
- WHO Integrated people-centred health services (IPCHS) indicators
- OECD Health care quality indicators: primary care indicators
- PCAT, PCET, PHC-IMPACT, EMRO PHC Monitoring and Improvement

Several attempts to draw out PHC-specific indicators from these sources have already been undertaken including:

- PHC Operational Framework
- Primary Health Care Performance Initiative





# Common PHC monitoring framework

- An opportunity to bring increased alignment and global agreement to a proposed subset of metrics.
- A task team, work plan and timeline will be developed, using the infrastructure of the Health Data Collaborative to reach agreement.

# Next Steps – Global Coordination

- Communications to relevant stakeholders in each organization / country
  - Meeting reports
  - Letter to Deputy Principals
    - Meetings with internal leadership/boards
  - Internal communications to country-level stakeholders
  - Decision regarding country learning collaborative
- Working group formation (UHC2030)
- Assessment/M&E working group
- Political Advocacy – G7, UNGA HLM UHC & SDG GAP.
- PHC side event?
- ?????\$\$\$\$\$\$\$\$\$\$\$\$

# Discussion



1. Community representation and engagement is a core element of PHC. How can citizens have voice in the allocation of priorities and resources and local decisions affecting their health, and participate in promoting / maintaining communities' health?
2. How can civil society partners support global health agencies in helping government to sustainably establish PHC at community level?
3. What are some examples of success, in LMICs, where civil society & community have engaged? What is needed to align global health organizations and ensure sustainability of impact? And how can the SDG3+GAP and HLM be used accordingly?