

LESSONS FROM A DECADE OF EWEC ACCOUNTABILITY

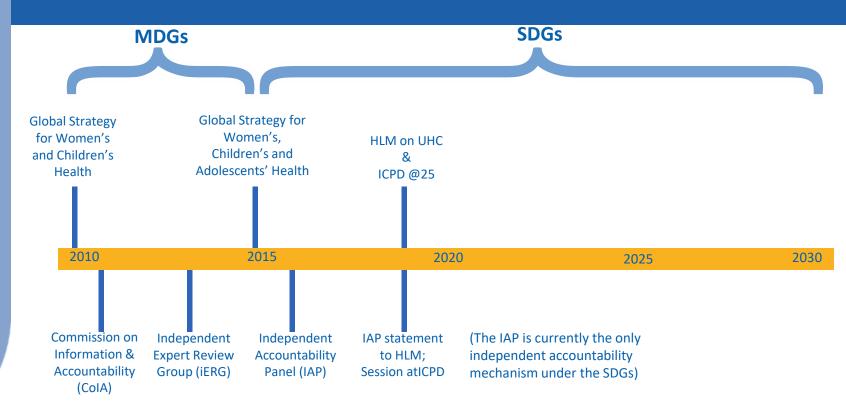
Driving improvements for women's, children's and adolescents' health with UHC

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A decade of EWEC accountability: independent review, multiple partner processes and products



Multiple EWEC Global Strategy accountability processes and products e.g.: by national governments; EWEC and PMNCH (unified accountability framework, commitments tracking), WHO and H6 (GS data portal, WHA papers, reports), IPU (UHC resolution), Countdown to 2030 and academic and research institutions (reports, profiles and papers), global financing mechanisms (annual reports), multistakeholder platforms (Lancet and BMJ series), civil society (citizen hearings), adolescent and youth networks (advocacy for accountability), private sector and donor (capacity strengthening for accountability mechanisms), professional associations (standards, guidance) etc.

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IAP-EWEC Accountability Cycle

- Currently most emphasis on monitor
- Review mechanisms are institutionalized to various degrees
- Remedy and Act related to accountability recommendations are far behind
- Imbalance/misalignment between global and country accountability



IAP UHC HLM statement on integrated health accountability mechanism

An **integrated accountability mechanism** for health & SDGs

- under UHC, implemented through PHC, covering all of SDG 3 and linked to health-related SDGs
- prioritizing women, children and adolescents and those furthest left behind in fragile settings
- using EWEC lessons to build an integrated health accountability system to drive resources, results & rights

IAP <u>Statement</u> to the HLM on UHC

(also see on integrated accountability:

- <u>iERG 2015 Report Recommendations</u>
 - <u>IAP Comment</u> in LANCET)



Why accountability, and UHC, matter for women's, children's and adolescents' health

UHC through PHC in SDGs: an unprecedented political, strategic and operational opportunity for effective, equitable and efficient WCA access to quality health and multisectoral services without financial hardship.

UHC and SDG targets cannot be achieved without meeting the needs of WCA



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IAP 'asks' to address women's, children's and adolescents' health with UHC (examples)

- National UHC packages should include evidence-based, essential interventions for WCA through the life course with financial protection (e.g. informed by the WHO UHC compendium).
- 2. The majority of WCA health and multisectoral services should be accessible in their communities through PHC and supported by a strong workforce and referral systems (e.g. Respect and WASH were top priorities identified in 'What Women Want')
- 3. All systems and services should be designed and deployed to respect, protect and fulfill WCA rights, with particular attention to SRHR (e.g. over 1/3 of women experience mistreatment and abuse, and are particularly vulnerable around the time of birth, Brizuela et al, Lancet 2019)

IAP 'asks' to address women's, children's and adolescents' health with UHC (examples)

- 4. Country information systems should have real-time, quality, disaggregated data to identify who is being left behind in UHC, where and why, and to drive remedy and action
- 5. The global community should converge/ align external support for countries and their people in greatest need, including migrants, and ensure universal access to essential interventions (e.g. IAP Lancet comment on HPV vaccine availability)
- 6. 'Custodians of accountability' in countries should be supported to demand and catalyze required progress: parliamentarians, courts, civil society, media, academia, and importantly, citizens (e.g. health and rights literacy and recourse for violations)

IAP 'asks' to address women's, children's and adolescents' health with UHC (examples)

- 7. Explicit attention should be paid to indicators of accountability (e.g., human rights measures, CRVS, community engagement, good governance, budget transparency, anti-corruption measures, access to information etc.)
- 8. Investments in research and innovation to improve the health of WCA, to implement evidence-based interventions and test and scale innovations for transformative progress
- 9. There should be an integrated system for accountability, converging and aligning mechanisms through the monitor, review, remedy and act cycle to drive improvements in resources, results and rights, with clear stakeholder roles and responsibilities
- 10. Advocacy is needed to promote a shared sociopolitical understanding of, and commitment to, accountability to realize the 2030 goals and the rights of all people to the highest attainable standard of health



To realize the asks: Lesson 1. Shared sociopolitical understanding of, and commitment to, accountability

Answerability **Democracy** Equity Accountability is the glue that ties commitment to results **Efficiency Policy coherence** Significantly increases likelihood of action **Keeping promises** Sociopolitical contract Inclusiveness Effectiveness Liability Commitments Response-ability "Transparency" Evidence for implementation Accountability is the best innovation for how the global community can commit and deliver **Corrective action** A political choice Community engagement Accountant Willingness Enhanced partnership Legal obligation Responsability

Accountability, IAP working definitions, will be finalized in 2020 report

WHAT? Sociopolitical Answerability for Resources, Results, Rights & Roles to Achieve Agreed Goals

HOW? Monitor, Review, Remedy and Act (IAP 2016 report)

Lesson 2. Systematic investment to implement accountability recommendations

Country achievements with ColA from 2011 to 2015, with investment and implementation support for countries

- 70 countries funded to strengthen CRVS, health information systems, supported by WHO and partners
- 55 countries implementing maternal death surveillance and reviews
- 30 countries implementing community death reviews
- 33 countries with a System of Health Accounts to track resources, including specifically on RMNCAH, nearly doubling from 18 in 2011



Lesson 2. Systematic investment to implement accountability recommendations

iERG and IAP recommendations: less systematic investment, implementation and tracking

- iERG, regular stakeholder follow up on investments and actions needed
- IAP, less focused follow up on recommendations

Universal Periodic Review (UPR) of Human Rights assessment: only 15 % of health-related recommendations were fully implemented



Lesson 3. Clear accountability roles and strategic focus to improve impact

What the IAP will do (i.e. 2020 workplan and report):

- 1. Independent review of EWEC GS and UHC progress and accountabilities, highlighting successes and failures
- 2. Highlight experiences, voices and needs of those left furthest behind in fragile settings
- 3. Make targeted recommendations for remedy & action

→ Count on the rest of the accountability system to make the required links to the *monitor-review-remedy-act* cycle for *resources, results, rights and roles for* WCAH and SDGs



'UHC for all people: accountability for every woman, child, adolescent and those left furthest behind'

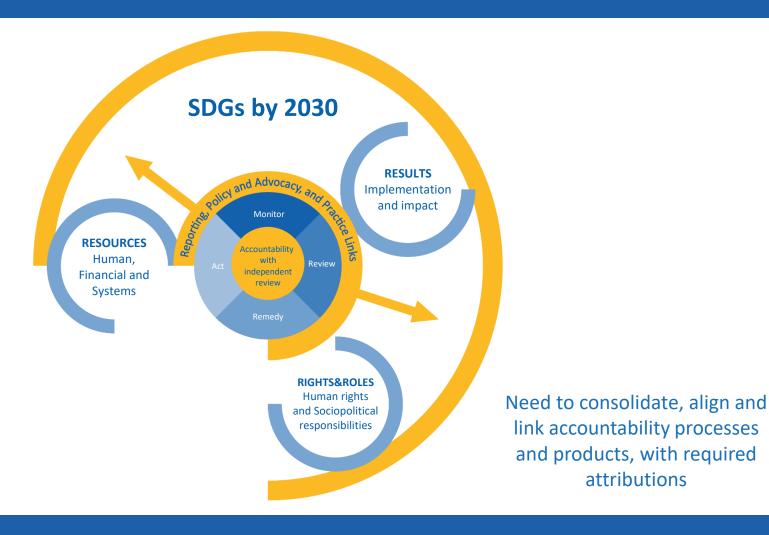
IAP 2020 Report, to be launched around UNGA

Draft outline

- A new imperative for accountability with UHC to reach every woman, child and adolescent
- 2. What is accountability and how can it drive Resources, Results and Rights for health and SDGs?
- **3. Country league tables** on progress, areas of greatest need, and multistakeholder commitments and accountabilities
- **4. Country case studies** to amplify accountability experiences and voices of WCA and others left furthest behind
- **5. Lessons** from a decade of EWEC accountability
- **6. Recommendations** for integrated health accountability with UHC era and a priority focus on WCA and others in fragile settings (EOSG request)



Lesson 4. An integrated system is needed for effective, efficient and equitable accountability



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An integrated health accountability system Illustrative details

MONITOR (illustrative indicator areas)		REVIEW (institutional independent)		REMEDY (enforceable decisions)		ACT (implementation)
RESOURCES (human, financial and systems) 1. Catastrophic spending (SDG 3.8.2) 2. Health workers (SDG 3.c.1, GHO) 3. Domestic health spend (public, private, WCA) (NHA,) 4. PHC expenditure (GHE, PHC) 5. Net ODA (SDG 9a, 17.2.1) 6. Health and related sector systems 7. CRVS & statistics (SDG 17.18.3) RESULTS (implementation and impact) 8. Implementation (national budget and programme M&E regional and global UHC-P, PHC, GPW 13) 9. UHC coverage (SDG 3.8.1) 10. Inequalities (Countdown 2030) 11. Resilience, fragility (INFORM index) 12. Research innovation (SDG 3b, 9.5, 9b) 13. Outcomes (SDG 3 and health-related SDGs e.g. EWEC GS 16) RIGHTS &ROLES (human rights, sociopolitical responsibilities) 13. Human rights progress and complaints (OHCHR) 14. World governance index (WB) voice, participation, media etc 15. Open budget index (IBP) 16. Corruption (Transparency Intl) 17. ICT access (SDG 9c) 18. CSO, citizens' hearings findings (PMNCH, UHC 2030 etc) 19. Multistakeholder roles (Boards) 20. Forecasting, trends across areas (IHME, think tanks etc)	REPORTING LINKS SDG and HLPF reporting UNSG UHC HLM progress reports to UNGA 75 (2020) and UNGA 78 (2023) UHC GMR (WHO, WB, UHC 2030 and partners) EWEC GS: WHA paper, Countdown analyses, EWEC, PMNCH commitment tracking, journal series etc. Rights-related reports OHCHR. Citizens' hearings, and others Forecasting reports	Institutional National reviews: health and SDG, rights, parliament, human rights, programme M&E, citizens hearings, academic, media Regional review mechanisms e.g. WHO committees, regional parliamentary groups etc Global review mechanisms, e.g., UNGA, HLPF, WHA, HRC, IPU etc NINDEPENDENT REVIEW (independent expert and sociopolitical overview of successes, failures and greatest needs, with targeted recommendations) National and sub-national independent review bodies and commissions Regional and global independent review bodies, e.g., Independent Review Panel (current IAP) with working groups for specific topics, e.g. WCAH, NCDs, CDs, environment and health	POLICY and ADVOCACY LINKS Policy and multistakeholder dialogues, evidence to policy mechanisms National, regional and global links to custodians of accountability-parliaments, citizens, , CS, academia, media etc EWEC HLSG, EOSG, H6, PMNCH, Countdown Funding and coordination GFF, GAVI, Global Fund, SDG3 GAP Other partners UHC UHC 2030, UHCP/ PHC Aligned multi-	NATIONAL Legal - constitutional, judicial and non- judicial, strategy, parliament and government decisions, regulatory standards, organizational policies, faith-based edicts, accreditation GLOBAL AND REGIONAL International law, conventions, court rulings Standards from technical and professional organizations Organizational and funding agency decisions and policies	PRACTICE LINKS National, regional and global mechanisms and multi-Stakeholder platforms to support investment and implementation, including through equity-, gender- and rights-based programming and country support plans Aligned multi-stakeholder platforms	NATIONAL AND SUB-NATIONAL IMPLEMENTATION of laws, policies, regulations, strategies, regulation, implementation plans, budgets, programs, curricula, capacity building awareness campaigns, advocacy and communications GLOBAL AND REGIONAL MULTI- STAKEHOLDER COMMITMENTS TO SUPPORT COUNTRY IMPLEMENTATION, e.g. through EWEC GS, SDG 3 Action Plan, UHC2030, OECD, NCD GCM and other platforms



Thank you.



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