Four challenges that global health networks face*

Considerations for the universal health coverage agenda

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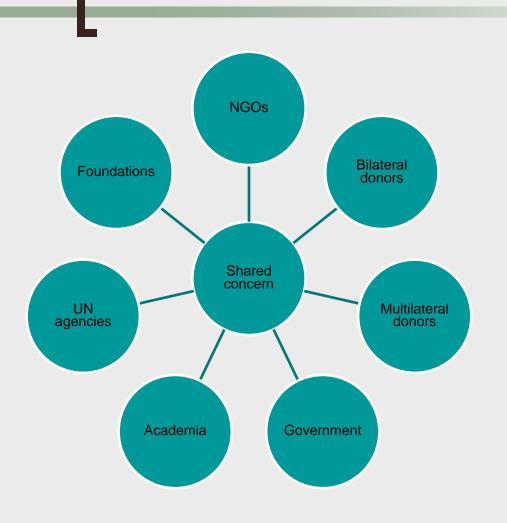
^{*} Based on J Shiffman. Four challenges that global health networks face. *International Journal of Health Policy and Management*. 2017; doi:10.15171/ijhpm.2017.14 Available at: http://www.ijhpm.com/article_3320.html

What is global political priority?

Degree to which leaders of global and national institutions actively pay attention to an issue, and provide resources commensurate with the problem's severity

Hundreds of development priorities competing for scarce resources

Proliferation of global health networks

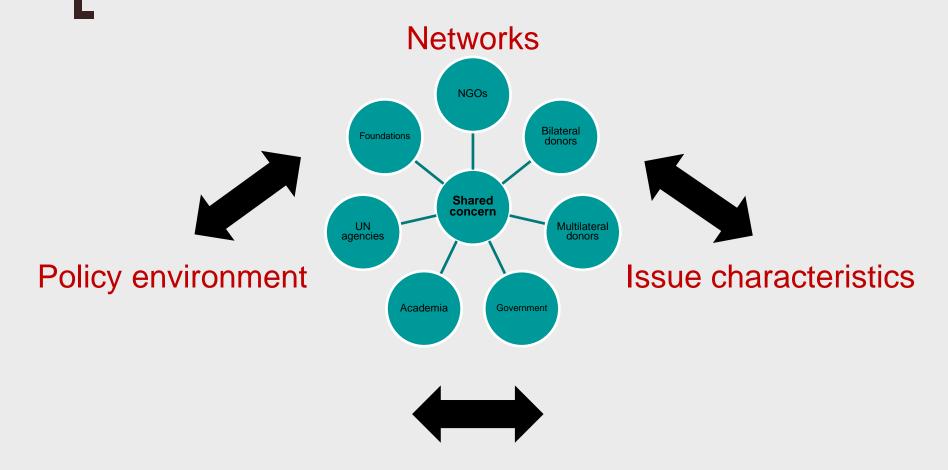


- Over past 25 years proliferation of global health networks
- Link individuals and organizations with shared concern
- Formal and informal

Nascent UHC network

- UHC 2030 launched September 2016
- Emerges from International Health Partnership+
- Links actors involved in UHC, including:
 - Donors
 - National governments
 - Civil society institutions
 - Health systems-focused networks

Networks one among several influences on political priority



To what extent will global actors be necessary for achieving national UHC?

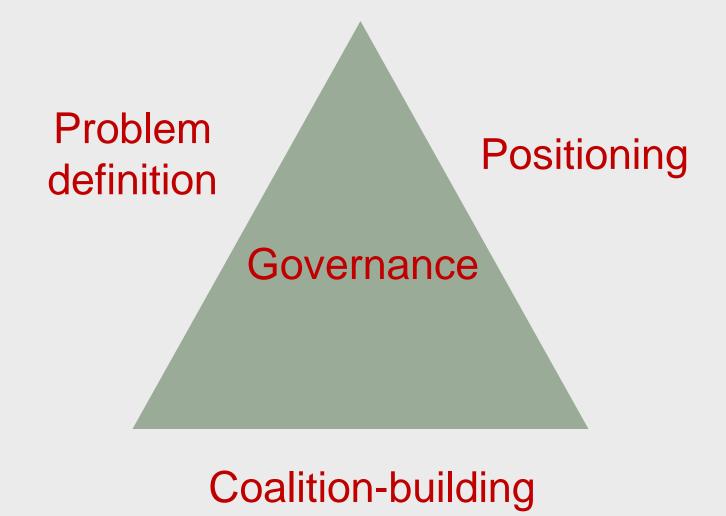
I'm assuming that low income countries are unable to provide a decent level of UHC without reliable long-term assistance. Of course they can make progress, but not enough to live up to the 'promise of UHC'.

-- Gorik Ooms, LSHTM

Only recipient governments can force donors to align. They need to take charge, raise more tax to build #UHC2030 and end aid dependence.

-- Simon Wright, Save the Children UK

Four common challenges for global health networks



Problem definition

- What this is:
 - Generating consensus on what the problem is and how it should be addressed
- Why this matters:
 - Community coherence, credibility and leverage
- Examples:
 - Tuberculosis
 - Maternal mortality
 - Surgery

Positioning

What this is:

Portraying the issue in ways that inspire external audiences to act

Why this matters:

- Only some resonate widely
- Different frames resonate with different audiences

Examples:

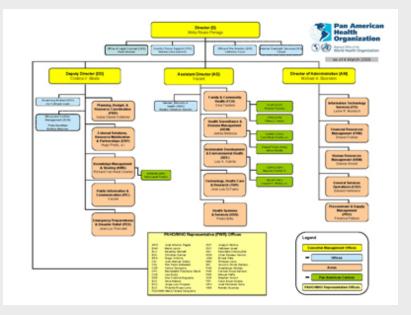
HIV/AIDS

Coalition-building

- What this is:
 - Forging alliances with external actors
- Why this matters:
 - Health sectors typically weak
 - Need broader political support
 - Need civil society pressure
- Example:
 - Tobacco control

Governance

- What this is:
 - Establishing institutions to facilitate collective action
- Why this matters:
 - Enables community to steer effectively toward agreed upon goals
- Example
 - Task Force for Child Survival and Development



Key considerations from research on health networks

- Problem definition
 - Avoid fractionalization
- Positioning
 - Move beyond public health to consider social justice and threat frames
- Coalition-building
 - Avoid insularity; build allies beyond health; be politically-oriented, not just technical
- Governance
 - Balance centralization and flexibility

Cursory inferences on emergent UHC network

Problem definition

- Some ongoing ambiguity concerning what 'UHC' refers to
 - Advantage: Allows actors to come on board based on own understanding of concept
 - Disadvantage: Potential disagreements may lead to fragmentation down the line

Positioning

- Less resonant concept than disease-specific goals
 - e.g. ensure universal ARV access; eradicate polio
- But improvement over 'health systems strengthening'

Cursory inferences on emergent UHC network

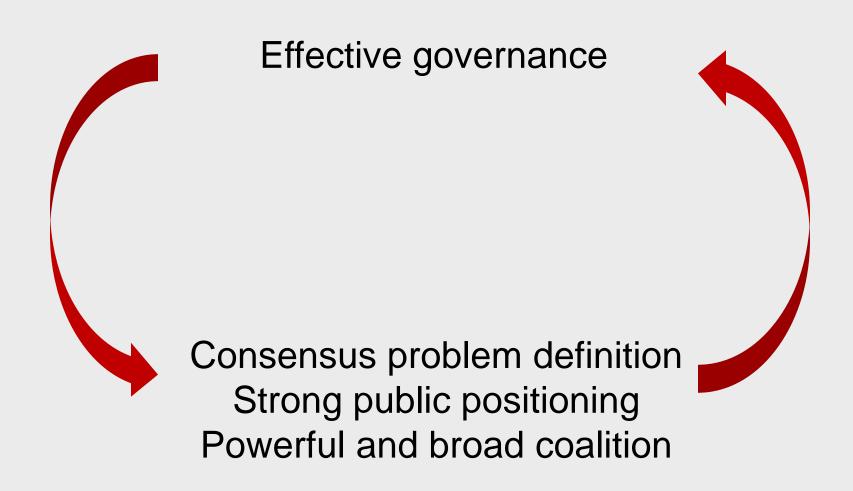
Coalition-building

- Actors recognize political nature of challenge (contrast with other technically-focused initiatives)
- Potential to build broad coalition (mentioned in SDGs; G7)

Governance

- Institutions only beginning to be established
- Will UHC 2030 serve as effective facilitator for collective action?

Linkages among challenges



Strategic considerations for emergent UHC network

Problem definition:

 How to build consensus on solutions and ensure differences do not lead to fractionalization?

Positioning:

How to frame in way that inspires action?

Coalition-building:

 How to engage critical actors beyond health sector; build a political movement?

Governance:

 How to build institutions to guide collective action that are strong, adaptable and inclusive?

