A Five-country Consultation Phase Informed ACS Project Work Moving Forward

**Barriers, Challenges and Possible Solutions Were Identified**

*In Year 1, ACS engaged in an extensive five-country consultation phase to uncover priority challenges and possible ACS areas for support to advance UHC.*

A multidisciplinary team from ACS visited Burkina Faso, Nigeria, Senegal, Tanzania, and Uganda between September and December 2017 and conducted over 200 semi-structured interviews with a broad array of people from across sectors and levels of implementation. Several cross-cutting key findings emerged:

**Barriers and Challenges:**

- Stakeholders noted limited ability to translate policy to implementation, lack of ownership, commitment and stewardship for greater public-sector leadership, and lack of clear implementation strategies, as limiting accountability.
- Stakeholders noted technical challenges (e.g., lack of a standard process for information sharing and knowledge management, and lack of or insufficient use of evidence to guide decision-making or research) and non-technical challenges (e.g., organizational or cultural barriers to knowledge exchange) for learning.
- Collaboration, many noted, lacked effective engagement, poor stakeholder inclusion, fragmentation of effort, and poor coordination of UHC platforms.
- Insufficient financial resources and inefficient allocation of existing resources, were listed as factors limiting implementation of UHC policies and programs.
- Lack of capacity of human resources, insufficient supplies and commodities, and inadequate infrastructure and service delivery systems were cited as major barriers to expanding accessibility—especially for the poor and rural populations.

**Key Opportunities for ACS:**

- Stakeholders mentioned ACS could develop frameworks and instruments to strengthen and reinforce accountability and support civil society advocacy efforts.
- Stakeholders indicated ACS should support knowledge sharing, actionable and evidence-based research, capacity building, and the development of a common understanding of UHC.
- Stakeholders suggested ACS could promote stakeholder inclusion, play a logistics and coordination role and participate in forums on UHC as a collaborator and facilitator.
Moving forward into Year 2 ACS is kick-starting work in four countries (as of July 2018) and launching a regional program of work. At the country level in Uganda, Namibia, Botswana and Benin, we are supporting efforts to advance UHC, such as:

- Facilitating the collaborative development of a “roadmap” for UHC
- Providing support to strategic communications around UHC plans
- Building multisectoral engagement in UHC dialogue and strategy
- Supporting structured approaches to implement, iterate, monitor and adapt health insurance pilot phase

At the regional level, we are launching a first Regional Learning Collaborative to engage core stakeholder groups in a learning agenda on accountability. We will be documenting learnings, sharing knowledge and identifying gaps in a first phase to reach a common framework for accountability for UHC. Along the way, we will support countries to test and adapt models, and to foster broad inclusion and highlight the very vital voices critical to championing UHC from the grassroots to the highest levels of policymaking and governance.

ACS is also supporting the structuring and building of a network of African coaches, mentors, and technical facilitators to support country UHC processes.

What we do:

The ACS project provides support to regional and country stakeholders to better navigate their own paths to UHC. We are working with regional and country partners and other collaborators to amplify the many existing efforts toward UHC. We also are responding to new demand-driven needs for bolstering technical facilitation, coaching and mentoring, sharing knowledge and learning processes, supporting strategic communications and advocacy and accountability measures as well as guidance and direct assistance with other evidence-based solutions to further build upon UHC momentum.

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Project Partners:

ACS is funded by USAID and led by Results for Development and mobilizes a diverse team of African experts and International organizations including Duke University’s Global Health Innovation Center and Feed the Children.