



# Leadership for Universal Health Coverage

Supporting Leaders to Deliver Results

# LEADERSHIP FOR UHC

## Supporting Leaders to Deliver Results

### What this Program Offers You

You are working to make universal access to health services a reality. You want to make change happen, but it is an uphill struggle. This program is for you. Top-notch Universal Health Coverage (UHC) and leadership experts will support you to:

- Define the resources you have and the challenges you face in your work – investigate the values involved and the trade-offs to be made on the way to UHC.
- Analyze your UHC reform environment – identify what interests are at stake, who your allies are, and sources of opposition.
- Gain skills to build effective alliances and broker consensus and commitment for needed changes.
- Apply modern management techniques to UHC reform – use an expert mentor’s support to learn from successes and failures in implementing your own UHC change project.
- Get peer-support – build a network of practitioner-advisers from your co-participants.

### Achieving your UHC Agenda – a Leadership Challenge

Worldwide, 1.3 billion people do not have access to effective and affordable health care. Every year 100 million are pushed below the poverty line because they fall ill, use health services, and pay out of pocket. At the same time, poverty increases the risk to fall sick. UHC can break this vicious circle.

Leaders committed to working towards UHC are faced with complex tasks and conflicting interests:

- Different stakeholders, institutions and organizations may have their own UHC-related strategies, and often lack a shared vision that would enable them to jointly move towards shared goals;
- Cooperation among the relevant ministries (e.g. Health, Finance, Labor) is limited and different government and private sector stakeholders don’t fully understand each other’s roles and relevance, or have conflicting interests;
- Communication and cooperation between technical experts and the political leaders responsible for making UHC happen is often insufficient and not sustained;
- Policy makers often are not sufficiently aware of the challenges faced by those who have to implement their policies at the local level (e.g. hospital administrators);
- Successful change needs flexible and thoughtful adjustment of policies and plans as unforeseen challenges emerge. This requires good information on what is happening, openness to acknowledge problems, and a willingness to work towards common solutions.

# LEADERSHIP FOR UHC

## Supporting Leaders to Deliver Results

These issues are highly interrelated and cannot be solved by one actor alone. Effective reforms depend on the collaboration and dialogue between stakeholders across sectors at local, regional, national and international levels. Leadership is to develop new ways of thinking and working to design and implement reforms. Next to the ‘what’, success depends equally on the ‘how’ and ‘who’ of reforms: leaders need to be able to drive processes, understand the challenges, build strong coalitions towards shared goals, and co-create innovative solutions across institutional and sectoral boundaries.

### Catalyzing Ongoing Reform Processes

The program is integrated into ongoing UHC reform processes. Participants are selected, individually and as teams, based on their potential to succeed in tackling a key challenge of the reform process that requires collective action. Typically, country teams work jointly on a shared initiative, but subgroups or individuals can also develop their own “collective action initiative”.

Initiatives should be innovative and results-oriented and should support the UHC reforms under way in the leaders’ country. Each initiative will be unique to the country context and the composition of a country team. The following examples illustrate what initiatives only – these are not a “menu of options” to choose from:

- A multisectoral team from Ministries of Health, Finance, Labour and other government bodies could make the development of a Health Financing Strategy their initiative and use the program as an “incubator” for ideas.
- A team of hospital administrators and health insurance executives from an environment where claims disputes are common could choose to develop an arbitration process or new claims procedures through the program.
- A team of (local) government officials and civil society representatives from a country where health services fail to meet community expectations could agree to jointly develop and implement a social audit/citizen feedback and accountability initiative for primary health care facilities.

Participants will receive leadership coaching, and mentoring by UHC experts during the implementation of their initiative. The facilitators and experts in the program are highly experienced advisors that have worked at top levels and across sectors.

# LEADERSHIP FOR UHC

## Supporting Leaders to Deliver Results

### Who is the Program for?

The program aims to bring together leaders from all relevant ministries as well as from the private sector, health insurance funds and health service providers (see table below). Ideally, a team from each country of at least four leaders representing different institutions should participate.

Institution	Level
Ministries of Health, Labor, Finance, Planning, Prime Minister's Office, AIDS Commissions, etc.	Director Level or above, those responsible for Policy, Planning and Implementation
Health Insurance / Social Security Funds	Directors General / Chief Executive Officers & Deputies
Civil Society / Medical Associations / Trade Unions / Employer Associations	Directors General / Chief Executive Officers, Managing / Executive Directors
Parliament: Committee responsible for Health / Social Protection	Members of Parliament
Health Service Providers (Associations, Tertiary / Teaching Hospitals)	Directors General / Chief Executive Officers, Managing / Executive Directors

To ensure peer-to-peer learning among countries in the same region, applications are invited from East- and Southern Africa (e.g. Ethiopia, Kenya, Rwanda, South Africa, Tanzania, Uganda, Zambia) for an Africa program, and from countries in South/East Asia (e.g. Bangladesh, Cambodia, Indonesia, Nepal) for an Asia Program.

# LEADERSHIP FOR UHC

## Supporting Leaders to Deliver Results

### Program Outline

Leaders' time is precious and scarce. Therefore the program is designed as a focused and intensive learning and leadership journey. Over a period of 6-8 months, it consists of three regional face-to-face workshops, individual and group-based activities at country level, online coaching and mentoring sessions.

#### PROGRAM OUTLINE

##### NATIONAL GET-TOGETHER

Leaders exchange with technical working groups

##### KICK-OFF WORKSHOP

Connecting teams, gaining systemic understanding of challenges and opportunities for leaders to move the UHC agenda

**22-25 April 2014 (Kenya)**

##### TOUCHING BASE

Visiting UHC organizations and listening to practitioners in countries – together with TWGs

##### INNOVATION WORKSHOP

Reflecting on UHC leadership challenges, visioning, initiating change projects

**04-08 August 2014 (South Africa)**

##### COLLECTIVE ACTION LAB

Closing, reflecting on change projects, initiating regional communities of practice

**02-05 December 2014 (tbc)**

##### COLLECTIVE ACTION INITIATIVES

Individuals and teams commit to achieving tangible results within given time frame

Peer-coaching and mentoring



# LEADERSHIP FOR UHC

## Supporting Leaders to Deliver Results

### Facilitators



#### Martin Kalungu-Banda (Leadership Facilitator)

Martin Kalungu-Banda is a consultant in leadership development; a designer and facilitator of innovation and organizational change; a trainer and coach.

Since September 2010, Martin has been serving as adviser to the Africa Governance Initiative of the Tony Blair Office, playing the role of Thinking Partner with Chiefs of Staff to African Heads of State. Martin has headed leadership-training and mentoring programs for cabinets and executives of South Africa, Namibia, Rwanda, Liberia, Libya, Ghana and Zambia.

Between March 2005 and May 2008, Martin served as Special Consultant and Chief of Staff to the President of Zambia. Together with the Presencing Institute, he prototyped new ways of responding to the HIV & AIDS pandemic in Zambia, Mozambique and Angola.

Martin has facilitated a variety of initiatives, on diverse issues from reducing the cost of heart surgery to raising a new crop of leaders in the banking industry, and in countries as varied as the UK, Abu Dhabi, and Argentina. He is the author of the bestseller “Leading Like Madiba: Leadership Lessons from Nelson Mandela” (2006) and “It’s How We End That Matters: Leadership Lessons from an African President” (2009). His third book, “On the Wings of Others: How to Access Life’s Greatest Opportunities,” will be published soon.



#### Chris Atim (Lead UHC Expert)

Dr. Chris Atim is a senior health economist with 20 years of post-doctoral experience in health economics and financing in developing countries, with special emphasis on Africa. He holds a PhD from the University of Sussex in the UK, and currently works as a senior health economist in the World Bank’s health systems hub based in Senegal. Before that he worked extensively providing leadership and technical assistance in health financing in more than two dozen African countries and through a number of organizations, including the HLSP Institute (UK), Abt Associates Inc. (USA), and the ILO.

Between 1999 and 2004, he was Resident Regional Advisor for West and Central Africa and Senior Economist for USAID’s Partnerships for Health Reform (PHR/PHRplus) project. He currently works in (AfHEA) and was also a member of Ghana’s PNDC Government at an earlier stage.

# LEADERSHIP FOR UHC

## Supporting Leaders to Deliver Results

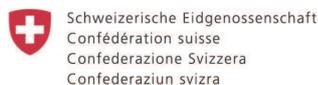
### Organizers

The program is jointly designed and implemented by GIZ (Gesellschaft für internationale Zusammenarbeit) and the World Bank. Both organizations have extensive experience in health policy and in leadership development. At GIZ, the P4H Sector Project and the Leadership Group at the Academy for International Cooperation (AIZ) are involved; at the World Bank, it the World Bank Institute's Leadership and Health Practices, and the Africa Region.

AIZ and WBI have delivered successful leadership trainings in sectors as different as Water, Biodiversity and Energy, and provide well-known programs on health and social protection.

The program is implemented as part of GIZ and WB's collaboration in the P4H partnership. P4H is a global network for Universal Health Coverage (UHC) and Social Health Protection (SHP). It was launched as a political initiative for SHP at the G8 summit 2007.

Financing partners:



Implemented by: Deutsche Gesellschaft für internationale Zusammenarbeit (GIZ) GmbH and the World Bank.



A partnership in:



Deutsche Gesellschaft für  
Internationale Zusammenarbeit (GIZ) GmbH

Friedrich-Ebert-Allee 40  
53113 Bonn  
T +49 228 44 60-0  
F +49 228 44 60-17 66  
E [info@giz.de](mailto:info@giz.de)  
I [www.giz.de](http://www.giz.de)