





Business of HPPM Dept & CHP-SD

- 1. Policy and system development & performance:
- 2. Multidisciplinary knowledge and research
- 3. Forum for stakeholder engagement:
- 4. Demonstration/pilot sites for innovations:
- 5. Health system observatory:
- 6. Rigorous impact evaluation studies



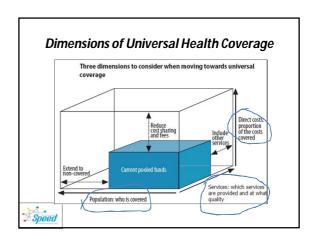




What problem is SPEED Addressing?

- Limited capacity for policy analysis advice and influence at MakSPH
 - Capacity for policy analysis at MakSPH and partner organizations is a major challenge few experts specialized in policy analysis and advising,
- Incoherence in policies and inadequacies in Implementation of programs to address UHC attainment.
 - Policy coherence across governmental sectors and non-state actors for UHC is problematic;





UHC and Its Implicationsq

Manage financial burden to health system;

- Govt. budgets, aid flows and
- Clients and communities payments systems
- Regulation of standards and adoption of New Technology

2. Expand the population groups benefiting from the services;

- Aim to cover all population groups
- Have a roadmap for priority groups/geographies
- Identify and start with most in need
- Population management & demand Sneed

3. Increase the services of good quality;

- Service delivery, packages &
- Priority prevention interventions
- Epidemic surveillance, response and preparedness

4. Build resilient systems to sustain coverage

- Health workforce size & distribution
- Medicines & effective regulation Organization network &
- infrastructure Governance, collaborations, implementation & Information
- Community systems and roles

HEALTH IN THE SDG ERA World Health Organization **(=**

System Resilience - Unpacked

Source: Steve Thomas (2013)

1. Financial resilience:

- Protection of health funding (public and private) from shocks Protection of service provision over
- commercial Provision of funding for entitlements
- of the poor, sick & vulnerable

2. Adaptive resilience:

- Reduction of unit costs (salaries, wages, fees)
- Increase in system productivity
- Doing more within available resources
- Organization architecture that adapt.

3. Transformatory resilience:

- Clear specification and shared goals
- Evidence base for reforms
- Organisational capacity to achieve/manage reform
- System capacity to implement

4. Collaborative Resilience

- Working across boundaries for a common goal
- Mobilizing resources and synergies from communities, government and private sectors
- System thinking and acting for complex public health actions



Build capacity for "inquiry" approach to decision making Advocacy Inquiry Collaborative problem solving Concept of A contest making decisions Purpose of Persuasion and lobbying Testing and evaluation Critical thinkers Participant' s role Spokespeople -Strive to persuade others -Present balanced arguments Patterns of

A.	Speed	·	•
P	<u>. </u>		
	Outcomes	Winners and losers	Collective ownership
	Minority views	Discouraged or dismissed	Cultivated and valued
	ochavior	-Defend your position -Downplay weaknesses	-Accept constructive criticis

SPEED PROJECT CONTRIBUTIONS



Demand Creation and Visibility SPEED major areas of Achievement during the period March 2015 - February 2016 1. The SPEED Launch Wednesday 19th March 2015 was a special day in the history of this initiative; the EU Ambassador to Uganda, HE Kristian Schmidt launched the SPEED project at Davis Lecture Theatre, Makerere University College of Health

3 THE STRATEGIC AGENDA

Background

3.1 HSDP Mission, Goal and Objectives The overall thrust of the health sector during this HSDP period has been elaborated in the NHP II and the NDP II.

The NHP II defines the sector vision and mission guiding the HSDP.

HEALTH SECTOR VISION

HEALTH SECTOR MISSION

To have a healthy and productive population that contributes to economic growth and national development'.

To facilitate the attainment of a good standard of health by all people of Uganda in order to promote a healthy and productive life.

3.1.1 HSDP Goal The HSDP goal is 'To accelerate movement towards Universal Health Coverage with essential h related services needed for promotion of a healthy and productive life'.

UHC makes it possible to ensure that all people receive essential and good quality health services the need without suffering financial hardship.

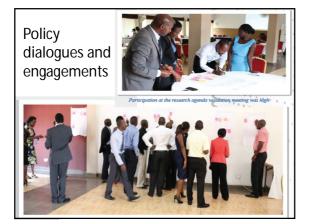
Creating awareness and reform implications for UHC

2. Agenda setting for Universal Health Coverage Research

SPEED, in partnership with MOH organised the national consultation workshop on the Health Sector Development Plan between 25 -26th May 2015. This offered a national platform for the first stakeholder consultation with pressaring approach as the research approach as statemotoer consultation on the research agenda to support UHC in Uganda. The SPEED consultation meeting was integrated into the MoH workshop to strengthen collaboration between SPEED

Speed





Capacity building in applied policy analysis and advocacy

3. Building Capacity for Health Policy **Analysis**

During the course of its first year, SPEED has undertaken several capacity building initiatives including among others: conducting institutional capacity assessment, trainings, and seminars.

Short study grants and How to do Policy Analysis Training:





