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# Building Momentum for Universal Health Coverage

*Communication and Advocacy in Action*

**HFG Series:**

**Advances in Health  
Finance & Governance**

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## About the Health Finance and Governance Project

The Health Finance and Governance (HFG) Project works to address some of the greatest challenges facing health systems today. Drawing on the latest research, the project implements strategies to help countries increase their domestic resources for health, manage those precious resources more effectively, and make wise purchasing decisions. The project also assists countries in developing robust governance systems to ensure that financial investments for health achieve their intended results.

With activities in more than 40 countries, HFG collaborates with health stakeholders to protect families from catastrophic health care costs, expand access to priority services – such as maternal and child health care – and ensure equitable population coverage through:

- Improving financing by mobilizing domestic resources, reducing financial barriers, expanding health insurance, and implementing provider payment systems;
- Enhancing governance for better health system management and greater accountability and transparency;
- Improving management and operations systems to advance the delivery and effectiveness of health care, for example, through mobile money and public financial management; and
- Advancing techniques to measure progress in health systems performance, especially around universal health coverage.

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To learn more, visit [www.hfgproject.org](http://www.hfgproject.org)

## About this series

HFG's Advances in Health Finance & Governance series is designed to highlight learning and lessons from the HFG project in nine core areas: domestic resource mobilization, strategic health purchasing, health financing strategies, expanding coverage through health insurance, financial data for decision making, governance, institutional capacity building, workforce and efficiency, and building understanding for universal health coverage.

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# Communication and Advocacy in Action: Building Momentum for Universal Health Coverage

## Executive Summary

Despite strong global commitment to achieve universal health coverage (UHC), inconsistent understanding and communication about UHC hinders progress. The experience of the Health Finance and Governance (HFG) project suggests that advocating for and communicating about UHC requires deliberate, tailored, context-specific strategies. HFG has supported global and country-specific initiatives aimed at strengthening leadership, building capacity, and enabling effective communication for UHC.

## Key Lessons

This brief highlights four key lessons and lists recommendations for future work. The essential components for effective strategic communication for UHC include:



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- 1 A CLEAR DEFINITION OF UHC UNDERPINS STRATEGIC COMMUNICATION.** It includes clearly defined terms, articulates their relationship to each other, enables priority setting, and makes key audiences aware of their roles, responsibilities, and entitlements.
  - 2 TECHNICAL KNOWLEDGE CREATES COMMON UNDERSTANDING OF UHC GOALS AND APPROACHES.** The aspirational and highly political nature of UHC means that stakeholders will have different priorities, interests, concerns, and perspectives. Technical knowledge is required to build a common understanding and vocabulary for country reforms to achieve UHC.
  - 3 COMMUNICATION EXPERTISE AND DEDICATED RESOURCES ARE ESSENTIAL.** The task of leading UHC-related communication often falls to “technicians” charged with implementing reforms. They may understand the mechanics of UHC but often lack communication expertise. Strategically communicating about UHC requires differentiated skills and knowledge in communication, as well as a comprehensive communication strategy and plan.
  - 4 TAILORED MESSAGING, OPPOSITION MANAGEMENT, AND CONTINUOUS ADAPTATION LEAD TO CHANGE.** Advancing toward UHC is an inherently complex, controversial process. Reforms typically result in incremental, gradual change and require continuously managing changing political tides and public sentiment.



# Introduction

Over the past decade, support for universal health coverage (UHC) – ensuring that “all people obtain the health services they need without suffering financial hardship when paying for them” (WHO 2014) – has become a unifying movement for global health reform. More than 90 countries endorsed the December 2010 United Nations (UN) resolution on UHC (UNGA 2012), and in 2015 all 193 UN Member States agreed on the 2030 Sustainable Development Goals, which include achieving UHC for a healthier world. Global compacts and initiatives such as UHC2030 continue to galvanize countries, multilateral organizations, philanthropic and donor organizations, and civil society to act. Today, most low- and middle-income countries are designing and implementing strategies that aim to accelerate progress toward UHC (The World Bank 2018).

There is broad endorsement of UHC among health sector leaders worldwide, yet understanding of and commitment to it varies among wider stakeholder groups. Diverse stakeholders who must be engaged to achieve UHC reform include cross-sector political leaders (including but not limited to those in ministries of health and finance), health care purchasers, health care providers, patients, suppliers, and civil society. Each group requires tailored information delivered through appropriate channels to receive key messages that will generate changes in knowledge, attitudes, behaviors, and systems in favor of UHC.

*Strategic communication* about or for UHC involves coordinated, multi-party outreach and actions intended to inform, influence, or persuade key audiences to support UHC.<sup>1</sup> Effective strategic communication requires specific skills like negotiation, persuasion, and opposition management, as well as dedicated human resources, financial resources, and technology. In low- and middle-income countries, these skills and resources have historically been deprioritized across all policy sectors, including health.

Strategic communication is the umbrella term for the full range of advocacy and stakeholder engagement efforts that policymakers and policy implementers may undertake – and the scope of those efforts varies based on context-specific objectives.

<sup>1</sup> Adapted from Cabanero-Verosa and Garcia (2009).

Examples from the Health Finance and Governance (HFG) project include:

- In Bangladesh, HFG partnered with the Ministry of Health and Family Welfare to conduct a **coordinated UHC campaign** aimed at raising awareness nationally to develop a coalition of professionals who can carry forward the country’s UHC agenda. This campaign included working sessions with Operational Plan managers at the ministry; policy dialogue facilitated by a civic platform managed by HFG’s local partner, Power and Participation Research Center; technical discussions with journalists; and cross-sector knowledge exchange.
- Ethiopia’s 1998 health financing strategy required public health facilities to provide essential health services free of charge; this elicited concern among facilities because the “exempted” services were unfunded. After assessing the magnitude of the financial burden the mandated services posed, HFG **mediated dialogue and influenced decision-making between health facilities and government officials** regarding allocation of funds for provision of these services. Specifically, HFG advocated that 1) public health facilities maintain adequate records on service provision and cost, and report the data to district government officials, and 2) government (Ministry of Finance (MOF) and regional Bureaus of Finance and Economic Development) allocate and disburse a sufficient budget for the exempted health services from the treasury. Some regional governments also began reimbursing for drugs and other supplies used to provide the services.
- HFG supported the Parliamentary Health Committee in Guinea to develop more effective and proactive methods of **stakeholder engagement** with the Ministry of Health (MOH) and civil society. To **involve these individuals and groups in policy decisions**, the Committee convened dedicated meetings to share results from field visits to health facilities and invite feedback from key stakeholders. Input from these meetings informed future budget cycles and health planning.



Photo: Valérie Baeriswyl for Communication for Development

Dr. Louis Bendson tends to a patient at Sacré-Cœur Hospital in Cap-Haïtien, Haiti. Haiti's Ten-Year Health Plan (2012-2022) prioritizes increased access to health services, especially for the poorest and most vulnerable.

With support from HFG, policymakers and policy implementers in low- and middle-income countries have invested in the skills, capacities, and resources required for effective strategic communication for UHC. HFG has supported efforts to improve understanding of UHC, and used that

knowledge to accelerate progress toward UHC in Africa and Asia. Through this work, the project has identified emerging lessons on how to build understanding of UHC and how to deploy this knowledge through strategic communication to advocate more effectively for UHC.



# Emerging Lessons

## Lesson 1

A clear definition of UHC underpins strategic communication.



Effective communication for UHC enhances understanding of the overall concept and underlying dimensions. It establishes clear definitions of terms, articulates their relationship to each other, enables priority setting, and makes key audiences aware of their roles, responsibilities, and entitlements.

Currently, understanding of UHC by key stakeholders – including but not limited to non-health political leaders, health care purchasers,

all residents at public facilities. Conversely, they may believe that UHC refers exclusively to some form of health insurance. It is quite common for people to describe UHC as an intervention or activity, rather than as a goal or aspiration.

Making progress toward UHC requires a range of structural, systemic, and behavioral changes. This requires that policymakers and policy implementers outline and prioritize objectives that articulate the pathway they have chosen to pursue UHC, articulating objectives that align with the country’s stage of reform. Senegal, for example, is at an early stage of policy legitimization and constituency building to achieve UHC. By 2022, it aims to achieve UHC through improved access to affordable, high-quality health care for all, including those in the informal sector and in rural areas. Senegal’s near-term objectives to attain UHC include:

- 1) define an essential minimum benefit package guaranteed by community-based health insurance (CBHI),
- 2) operationalize 95 percent of existing CBHI schemes, and
- 3) enroll at least 45 percent of the Senegalese population in CBHI.

In Bangladesh, HFG worked with stakeholders to develop an accurate and common understanding of important UHC concepts. This work ultimately will build a network of UHC advocates. “Building Awareness for Universal Health,” a program HFG implemented in collaboration with its local partner the James P. Grant School of Public Health (JPGSPH) at BRAC University, consisted of three activities chosen to maximize individual and organizational engagement: 1) orientation sessions on UHC, 2) UHC courses, and 3) policy discussions on UHC. Almost 300 stakeholders participated in 13 different events, and more than 40 experts and resource persons from more than 20 organizations contributed to

### Box 1. Resources for defining UHC

Several good resources provide communicators clear and accurate messages about UHC. One is the World Health Organization’s *Arguing for Universal Health Coverage* (WHO 2013), a handbook that outlines support for civil society organizations’ advocacy for UHC. The handbook contains general messages, country examples, and evidence-based arguments that groups can use to tailor their advocacy for health financing policies that promote equity, efficiency, and effectiveness to their context and audience.

providers, patients, suppliers, and civil society – varies widely, and depends on the country context and definitions used. For example, a common misunderstanding is that UHC stands for universal health “care,” rather than coverage. Stakeholders may believe that UHC means that a government provides free care to treat all health needs to

discussions about a range of technical topics. The program allowed participants to reflect on their role in promoting UHC. As a result, there is now a repository

of resource persons, including content presenters, session facilitators, and critical discussants, who can engage in future capacity development for UHC.

## Lesson 2

**Technical knowledge creates common understanding of UHC goals and approaches.**



Technical knowledge of core principles underpinning UHC is required to build a common understanding and vocabulary for country reforms to achieve UHC. Over the past six years, HFG has supported stakeholders to gain the necessary technical knowledge to effectively advocate for and pursue UHC. One of its most significant contributions has been supporting the delivery of the Flagship Course on Health System Reform and Sustainable Financing (Flagship course) in Asia and Africa. The course applies an analytical framework to strengthen the design and financing of health systems, and analyze important ethical, political, and implementation issues for health systems while being responsive to the interests of different stakeholders.

For instance, in Asia, more than 250 participants have attended four regional Flagship courses that HFG and implementing partner Asia Network for Health Systems Strengthening have supported since 2014<sup>2</sup>. Experts from around the region and beyond facilitated sessions on health systems strengthening topics such as service delivery, financing, governance, and organizational change. Participants – including officials from ministries of health and of finance and planning, as well as donor organizations, academia, and civil society – discussed reform challenges with peers from other countries and contexts, and gained a foundational understanding of health systems strengthening and other elements of UHC reform.

The aspirational and highly political nature of UHC means that different stakeholders will have different priorities, interests, and concerns – and bring different perspectives when learning about technical concepts. As part of the UHC awareness-building campaign in Bangladesh, HFG and its

partner JPGSPH conducted a participatory workshop with 18 journalists from local print and electronic media and the Bangladesh Health Reporters' Forum. The workshop, which aimed to inform the media about different health insurance schemes, how they function, and the potential opportunities and benefits associated with client enrollment, included a field visit to Gonoshasthyo Kendra, a provider of health care and health insurance for under-served populations. The exchange of technical knowledge taught the participants about UHC concepts. After the workshop, journalists published three articles in national newspapers on key issues for UHC, including high out-of-pocket spending and the importance of comprehensive, pro-poor health insurance.

### Box 2. The Flagship course

**The Flagship Course on Health System Reform and Sustainable Financing, initially developed by faculty from Harvard University and the World Bank more than 20 years ago, targets mid- to senior-level policymakers and implementers from ministries of health and finance, other government agencies, civil society, private sector organizations, academia, and development partners. The course curriculum runs five or more days, and undergoes ongoing review and adaptation based on the feedback and priorities of participants, sponsors, and external factors (e.g., the rise of non-communicable diseases and role of health promotion).**

<sup>2</sup> See <http://www.anhss.org/clusters/flagship/>

## Lesson 3

Communication expertise and dedicated resources are essential.



The task of leading UHC-related communication often falls to “technicians” charged with implementing reform who may understand the mechanics of UHC but often lack communication expertise. Strategically communicating about UHC requires a different skillset. It also requires a comprehensive communication strategy and plan.

Strategic communication capacity building and investment has been prioritized by HFG country programs such as Guinea and Bangladesh. In Guinea, to address the lack of public trust in the public health sector, HFG supported the MOH to develop and begin implementing a communication strategy, with emphasis on budget transparency and resource mobilization. The strategy was adopted, an embedded communication advisor was recruited to support communication activities in the MOH cabinet, and plans were established to create a strategic communication unit. Each of these efforts aimed to strengthen the communication capacity of the Guinea MOH and key counterparts and enable

them more pursue UHC and other health goals more effectively. HFG also observed that practical guidance on how to successfully communicate about UHC is limited. In 2016, and in partnership with the Joint Learning Network for Universal Health Coverage (JLN), HFG undertook a joint learning exchange with eight country delegations (Bangladesh, Cambodia, Ghana, Malaysia, Nigeria, Peru, Senegal, and Sudan) on this topic. The purpose of this collaborative learning effort was to synthesize cross-country knowledge and co-develop a *Practical Guide to Strategic Communications for UHC* and accompanying *Planning Tool* (HFG and JLN 2018). These materials are now being adapted and used by policy champions in Nigeria, where the HFG team is providing technical support to the Federal Ministry of Health (FMOH) to conduct stakeholder analysis and create a messaging framework related to the country’s UHC strategy. HFG is also lending support to the MOH in Cameroon to develop a communication strategy for UHC.

## Lesson 4

Tailored messaging, opposition management, and continuous adaptation lead to change.



Advancing toward UHC is an inherently complex, controversial, and political process. It requires tailored messaging, diplomatic management of oppositional groups or messages, and continuous learning and adaptation.

UHC requires the strategic allocation of scarce resources for health, meaning relationships and shared objectives between the ministries of health and of finance are crucial for success. In Cote d'Ivoire

in 2016, HFG organized a multi-country workshop that convened MOH and MOF representatives to address the challenges associated with MOH-MOF relationships, communication, and negotiations, with a focus on domestic resource mobilization (DRM). The workshop initiated dialogue between ministries about perceptions and experiences in DRM and resource allocation, and presented analytical tools to help participants understand mutual priorities and interests in DRM. MOH and MOF

counterparts from each country developed: 1) action plans for collaboration and 2) discussion dossiers with key messages to facilitate more productive discussions between the ministries concerning DRM for health. The discussion dossiers helped ministries understand where gaps in information or technical knowledge might exist and how to present data so that they speak to the interests and goals of both ministries. The sample DRM for Health Dossier and HFG's MOH-MOF toolkit, another potentially useful resource for technical dialogue with priority stakeholders, are described in Box 3.

Effectively responding to oppositional messages about UHC reform is a critical, but often lacking, skill for UHC advocates. Participants from the eight country delegations involved in the HFG/JLN learning exchange on strategic communication for UHC explored this topic during a July 2017 workshop in Accra, Ghana. The group agreed that a productive relationship between a MOH and MOF depends on being able to effectively mitigate opposition. Additional guidance on managing opposition and crafting key messages is available in the *Practical Guide to Strategic Communications for UHC* (HFG and JLN 2018).

UHC is a long-term goal that will most likely be achieved over years of multiple, ongoing reforms. These reforms typically result in incremental, gradual change and require continuously managing changing political tides and public sentiment. **Undertaking strategic communication in support of policy reform demands continuous learning and adaptation.**

Continuous learning is enabled by actively monitoring a reform agenda and related communication strategy, and adapting the strategy as needed to meet key milestones and address emerging issues.

In Nigeria, divergent views among the FMOH, the National Health Insurance Scheme (NHIS), and the Primary Health Care Development Agency (PHCDA) about how to best implement provisions of the National Health Act that are essential for achieving UHC, have impeded timely implementation. Following numerous calls to action by civil society and consultations with concerned stakeholders, the FMOH recognized the importance of consistent, strategic communication to operationalize the National Health Act and has adopted a comprehensive, inclusive approach to communication and engagement.

It strengthened partnerships with the legislative branch by incorporating a legislative network for UHC and opened dialogue with technical teams from the NHIS and PHCDA. The FMOH, NHIS, and PHCDA are now collaborating to finalize operational guidelines for the Basic Health Care Provision Fund and to reorganize its proposed governance structure. Improved communication has fostered better understanding of roles and responsibilities for each organization and spurred action to operationalize the National Health Act.

### Box 3. Resources for tailored messaging

*A Toolkit for Ministries of Health to Work More Effectively with Ministries of Finance (HFG 2013).* This toolkit presents four tools to help MOH staff better manage resources and communicate more effectively with MOF counterparts.

*Sample DRM for Health Dossier (HFG 2016).* This presentation demonstrates how countries might utilize data to hold more productive discussions concerning DRM for health.



## Conclusion and Recommendations

Strategic communication, which comprises policy advocacy and stakeholder engagement, is a critical component of UHC reform. Even when strong technical designs for UHC policy reforms exist, systematic and inclusive communication is crucial to realize change.

Three key takeaways arise from HFG's work on MOH-MOF relationships and messaging:

- **Craft messages that resonate:** UHC messages must resonate with specific audiences in terms they relate to. MOH and MOF representatives often “speak different languages” – for example, the MOH may need to better demonstrate the effectiveness of its spending by linking expenditure to health outcomes, to influence the MOF to allocate resources.
- **Use data wisely:** Data can make arguments persuasive and compelling, but only when used appropriately. An evidence base and relevant key performance indicators can help make the case for more and the right resources during budget negotiations.
- **Messengers matter:** Identifying an appropriate messenger – the individual, group, or organization best placed to deliver specific messages to specific audiences – can build trust and credibility. For especially controversial topics, a third party, such as someone from academia, can be a credible messenger. For a MOH, working with health economists with sound technical backgrounds is important – and those economists can be compelling messengers for negotiations with a MOF.
- **Tap into emotions:** Opponents often exploit fears or misconceptions with emotional arguments to refute a claim for UHC policy reform. You cannot refute an emotional argument with a rational one. Appealing to an audience's emotions (for example, providing comfort to assuage fears) is important and cannot be done through facts and figures alone.
- **Control the conversation:** Opposition may misrepresent facts. While rebuttals are important, you should not waste time repeating negative or inaccurate information

HFG has observed that across contexts, investments in strategic communication remain low and diffuse. Based on this, we suggest that areas for continued work remain, including:

- **Human and financial resources:** The lack of adequate staff with the skills, time, and mandate necessary to execute strategic communication is a persistent challenge. Communication experience and expertise should be included in the job descriptions for key policymakers and policy implementers. Investment in human resources and skills enhancements are recurring needs. Developing a team specialized in communication is also important. Strategic communication, advocacy, and stakeholder engagement should be a distinct activity within annual budgets and work plans.
  - **Leadership commitment:** Political and/or management leadership commitment to strategic communication is essential for credibility. Individuals may arise as champions for communication, advocacy, and engagement efforts, and can be instrumental for success. Identifying and engaging the right people early and often is essential.
- Participants from the eight country delegations involved in the HFG/JLN learning exchange on strategic communication mentioned above agreed that strategic communications necessitate being able to surmount opposition in all forms. They recommended several principles for managing opposition, including:
- **Remember who matters:** You do not need to convince 100 percent of people to agree with your argument or perspective. Targeting a key stakeholder (for example, the Minister of Finance) may be an important first step to win favor with wider audiences (for example, the entire Finance cabinet).

- Measurement and assessment:** Quantifying the impact of strategic communication in UHC reform is incredibly challenging, especially when the aim is to change stakeholder knowledge, attitudes, and behaviors. Communication and advocacy may be deprioritized in the policy reform process because it can be difficult to prove what was done, how it was done, or how efforts contribute to lasting change. There are systematic ways to monitor progress toward results, including stakeholder surveys and interviews, focus groups, media tracking and analysis, policy tracking, and public polling. Furthermore, new, light-touch ways to monitor and assess strategic communication exist, but additional evaluation is required to understand how and when those methods are most impactful.
- Innovative approaches:** Communication and advocacy may sound like “business as usual” to some policymakers and policy implementers, but there are emerging examples of innovative, data-driven policy reform campaigns that use extensive testing and audience listening prior to deploying messages and approaches. Further, mobile and digital approaches are revolutionizing strategic communication for policy reform. Additional research will shed light on how policymakers and policy implementers can effectively leverage these new approaches.



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