



Theme: Role of Partnerships and Collaborations in Supporting Health Policy & Decision Making in LICs: The Case of *Thanzi La Onse* in Uganda, Malawi & United Kingdom

Annual Dissemination Workshop

Concept Note

Organized by

Health Economics & Policy Program (HEPP), MaKSPH

Date: 19th-July-2022 to 20th July 2022

Venue:, Kampala, Uganda

MODE: Hybrid (Physical & Online)

Starting Time: 8:00am

Background and rationale

There are a lot of policy debates that have occupied the space in the recent past at global, regional, national as well as sub-national levels. At the global level, the current discourse is centered on how countries can successfully achieve the Sustainable Development Goals (SDGs) and specifically the goal of Universal Health Coverage (UHC). This has equally been a preoccupation of many countries including Uganda. There are a number of reform discussions happening, including in the area of health financing, health service delivery, and other health system building blocks. Surprisingly, the extent to which health economics, as a critical science, informs the discourse may still be limited, yet very critical to inform rational policy and decision choices. At the broader service delivery level, there are concerns around optimal resource allocation decisions within the context of value for resources, optimal health benefit packages that specific resource envelopes can guarantee, issues of equity and fairness in distribution of health resources, etc. These are questions that would benefit from health economics expertise and analysis. While it seems clear that health economics must have a place within these policy discourses, it is not clear the extent this has been happening and whether the limited engagement of health economics is related to limited capacity or a sheer lack of appreciation of the role of health economics.

The Center for Health Economics (CHE) at the University of York, UK together with Makerere University School of Public Health (MakSPH) Uganda, and Ministry of Health (MOH), Uganda, has been working together for the past two years under the umbrella of the Health Economics and Policy Program (HEPP). The HEPP is housed at Makerere University School of Public Health. The HEPP represents one of the many health economics capacity building initiatives that are supported by CHE, York, across many countries. The HEPP program aims at capacity building for health economics and analytics to support health policy discussions in Uganda.

Since its inception the HEPP/TLO collaboration, and its close partners, has been engaged in, and also commissioned several pieces of work. This workshop is therefore an opportunity to take stock of what has so far been achieved, share the key highlights from the different strands of work, and provide an opportunity to stakeholders to discuss and determine the agenda ahead for the HEPP program.

Overview of the MakSPH-MOH-YORK Collaboration (HEPP Program)

The Makerere University School of Public Health (MakSPH) has for long been working closely and supporting the Uganda Ministry of Health in various areas and through various initiatives. MakSPH has had a tremendous track-record in generating research evidence and providing the same to the Ministry of Health and other policy institutions. The Department of Health Policy Planning and Management at MakSPH also has over the years built capacity in health economics, Health Policy and health systems. The department has also recently established the Center for Health Systems and Policy Development (CHSPD). Based on this capacity and the longstanding relationship between

MOH and MakSPH, it is envisaged that the Health Economics Unit (HEU) at MOH will benefit immensely from a close relationship with MakSPH. The University of York's Center for Health Economics (York-CHE) is committed to strengthening and promoting the use of health economics in Uganda. To this effect York-CHE has partnered with both institutions (MakSPH and MOH). The rationale of this partnership is twofold:

1. To support the Health Economics capacity building agenda for the MakSPH and Uganda in general. The success of a capacity building effort at MakSPH can represent a flagship centre of high-quality health economics research and training in the wider east, central and southern Africa region, and help to support the development of the field in for Uganda and the region, and
2. Support the institutions in the partnership in the area of research, capability building and policy engagement.

Objectives of the dissemination workshop.

The overall aim of the dissemination workshop is to showcase and disseminate the work that has been conducted by the HEPP/TLO collaboration (and other partner effort) in Uganda and the region and how it has supported key and specific policy and decision areas in Uganda and the region, and discuss the next agenda for the HEPP program.

The specific objectives of the dissemination workshop:

1. To share evidence and highlights from key strands of work undertaken both under the HEPP and the broader TLO collaboration as well as other partner initiatives that are closely linked to the HEPP objectives.
2. To share experiences and lessons learned from TLO collaboration work elsewhere, including in Malawi, and the UK and how these lessons can feed into Uganda's health policy discourse.
3. To explore new and strengthen existing South-South collaborations or intra-Africa partnerships in building capacity to support health policy and decision-making and optimal models to harness the collaborations.
4. To map the next agenda for the HEPP collaboration, including key areas of focus for the next phase of the collaboration.

Theme of the workshop

Role of Partnerships and Collaborations in Supporting Health Policy & Decision Making in LICs: The Case of *Thanzi La Onse* in Uganda, Malawi & United Kingdom.

Sub-themes are:

Sub theme 1:

Tools to support optimal resource allocation in resource-constrained environments

Sub theme 2:

Refugee Health in Africa: Humanitarian Health Policy, Gender and Health Economics

Sub theme 3:

Harnessing efficiencies in health care delivery: Looking beyond financial resources

Sub-Theme 4:

Highlights from the HEPP – The MakSPH – MOH – CHE collaboration

Specific details and presentations within the sub-themes:

Sub-theme 1:

Tools to support optimal resource allocation in resource-constrained environments

Many countries are committed to pursuing the Universal Health Coverage (UHC) Goal by 2020, although they face enormous challenges in the context of resources. Moreover, countries like Uganda continue to witness rapidly growing populations as well as epidemiological transitions, with implications for health care needs. It is, however, increasingly becoming difficult to generate new funding portfolios as fiscal spaces continue to shrink. Apparently, countries must find ways of optimizing already existing resources, improve efficiencies, and value for resources. A number of tools are now being used to achieve this resource optimization objective, and key among these is: 1) development of health benefit packages; and 2) economic evaluation approach. Health Benefit packages are priority service packages that can feasibly be delivered to various populations within a country's constrained resource, population, and epidemiological functions. Like other countries, Malawi has already developed the HBP under the TLO collaboration support and is currently implementing the same. Uganda has had a Minimum Health Care Package (UNMHCP) since 1990s. However, significant changes have happened overtime and this existing package may no longer accurately reflect the current context. Ministry of Health with support from Palladium (Health Systems Strengthening Activity) commissioned a revision of the package. The revision has been conducted by MakSPH with technical support from the TLO collaboration (York, CHE). In this theme, we present the highlights on the Uganda Health Benefits Package process, but also the experiences from Malawi on key implementation considerations which other countries could benefit from as they go through the same process.

1. **Paper 1: (re)defining the National Essential Health Services Package for Uganda: the process, status, and key highlights.**
2. **Paper 2: supporting the development of a health benefits package in Uganda: a constrained optimization approach.**
3. **Paper 3: Looking beyond developing the benefit package: Key system considerations, implementation experiences from Malawi, and lessons for Uganda.**
4. **Paper 4: The Health Technology Assessment landscape in Uganda: Status, contribution, and agenda forward.**

Sub-theme 2:

Refugee Health in Africa: Hhumanitarian Health Policy, Gender and Health Economics

This thematic area presents results from a synthesis of the status of refugee health in Uganda and Kenya, as part of a broader objective of promoting policy decision-making for more efficient and equitable responses to refugee and host communities' health needs in east, central and southern Africa. The TLO synthesis work on Refugees in the region was baseline formative work to identify key capacity strengthening needs on governance and health economics to support health system responses to refugee and host populations. Furthermore, the synthesis was to understand key outstanding policy questions and suggest future research priorities in the context of governance, gender, and economics, to promote efficiency in resource allocation for refugees and other vulnerable populations in the region.

5. **Paper 1: A synthesis of key aspect of health systems and policy design affecting the refugee populations in Uganda.**
6. **Paper 2: A situation Analysis of Access to Refugee Health Services in Kenya: Gaps and Recommendations.**

Sub-theme 3:

Harnessing efficiencies in health care delivery: Looking beyond financial resources

Recognizing the fact that countries are facing resource constraints and the traditional health financing sources are increasingly under pressure, there is a need to identify new ways and models to efficiently use existing (limited resources). Relatedly, it has been noted for Uganda, that resources for health could be leveraged by focusing on prevention and community health action given that almost 60% of health conditions in Uganda are preventable. Building capacity at community level to address these preventable challenges could save enormous resources often invested in curative care and refocus the same on other priority health care needs of the pupation. Even within specific health care delivery programs, there are areas where inefficiencies exist, yet a lot would be achieved if synergies and better coordination across the programs was promoted. This theme will present

highlights from work that is being conducted with support from TLO, the WHO, and the LSHTM/UVRI on specifically re-directing the conversation away from the traditional lamentations of limited resources, but rather looking within to identify possible approaches to expand the resources without necessarily appealing to new funding portfolios.

- 7. Paper 1: Rethinking health service delivery in Uganda: Constructing a feasible community health care service delivery model (s) for Uganda.**
- 8. Paper 2: Cross Programmatic Efficiency analysis of selected health programs in Uganda: Key highlights from a CPEA-WHO study in Uganda.**
- 9. Paper 3: Rethinking outcome measures for Economic Evaluations: developing a local EQ-5D-5L value set and inequality aversion parameter for Uganda.**

Sub-theme 4:

Highlights from the HEPP – The MakSPH – MOH – CHE collaboration

This theme aims at providing highlights on the HEPP program and collaboration, the framework for the collaboration, what has been its work during its time of existence, and what lies ahead. This will also give an opportunity to participants to contribute to shaping the agenda by calling upon participants to highlight areas where they believe HEPP should be involved and can make an impact within the context of its objectives.

- 1. The summary agenda for the collaboration**
- 2. Status of Health Economics & Analysis capacity building and policy support in Uganda: Gaps, challenges, and opportunities**
- 3. The HEPP Platform for stakeholder engagement: Key engagements so far and emerging highlights**
- 4. The agenda ahead – where should the focus be?**

Method for Annual Dissemination Workshop

In order to achieve the workshop objectives, the following approaches will be used (detailed program to be developed):

1. Opening remarks – MaKSPH, York, and Ministry of Health
2. Keynote address at the opening of the workshop.
3. Plenary presentations along the sub-thematic areas
4. Small panel discussions after presentations in every thematic area – Questions to be developed and asked by the moderator to panelists
5. Small Group Discussions especially on what stakeholders believe should be the next HEPP agenda and areas where the program could contribute more.
6. Open discussions and comments after every panel discussion (questions, comments and answers). Note that, panel discussions follow presentations contained in a sub-theme.
7. Closing remarks – MakSPH, York, Vice-Chancellor, MOH/Government

Expected out puts.

- Shared lessons on the role of collaboration in building capacity for health research, health policy, and decision-making
- Showcase work and engagements that the TLO has been engaged in, and how it has linked with Policy and Decision Making in Uganda and Malawi
- The workshop will inform efforts and initiatives on building capacity for health economics and analysis in LICs.
- The workshop presentations and proceedings will compiled in a report and disseminated across various audiences.
- The workshop will also inform future stakeholder engagement strategies for HEPP/TLO and generate agenda, including areas of further focus for the next phase of the collaboration.

Expected participants

This workshop will mainly target attendees from the following communities: researchers, implementers, policy makers, academicians, civil society, and experts on health related issues from Uganda, Malawi, United Kingdom (UK), and other countries. The attendees will be both virtual and physical. The estimated total number of participants is 100 people.

Potential collaborators:

1. Ministry of Health (MOH), Uganda
2. Regional Bodies: East, Central and Southern Africa Health Community (ECSA-HC)
3. Health Economics Unit, University of Malawi, Malawi
4. Palladium (USAID) – Health Systems Strengthening Activity (HSSA)
5. World Health Organization, Uganda Country Office
6. Medical Research Council (MRC)/ LSHTM/UVRI

Proposed agenda of the Workshop

No	Time allocation	Agenda Item	Responsible Person
DAY ONE			
<u>1.</u>	8:30am-9:00am	Arrival, registration, housekeeping	Ms Brenda Nakimuli
<u>2.</u>	9:00am - 9:05am	Introduction, highlight of workshop objectives and other housekeeping arrangements	Ms Brenda Nakimuli
<u>3.</u>	9:05am-9.15am	Opening Remarks by MakSPH & York	Prof Rhoda Wanyenze (Dean MakSPH) and Prof Paul Revill (CHE)
<u>4</u>	9.15am -9.30am	Official opening remarks by MOH/GOVT	Dr. Sarah Byakika.
<i>SUB THEME 1: -Tools to support optimal resource allocation in resource-constrained environments</i>			
<u>5.</u>	9.30 am – 9.45am	Presentation on (re)defining the National Essential Health Services Package for Uganda: the process, status, key highlights and recommendations to implement the package effectively	Dr. Elizabeth Ekirapa – Team Lead, UNEHCP Review
<u>6.</u>	9.45am – 10.00am	Presentation on Supporting the development of a health benefits package in Uganda: a constrained optimization approach	Sakshi Mohan (CHE)
<u>7.</u>	10. 10am – 10.25am	The Health Technology Assessment (HTA) landscape in Uganda: Status, contribution, and agenda forward	Prof. Freddie Ssengooba/ Mr. Joseph Kazibwe
<u>8.</u>	10. 25 am – 10.45	Presentation on: Looking beyond developing the benefit package: Key system considerations, implementation experiences from Malawi, and lessons for Uganda	Gerald Manthalu – Deputy Director of Planning and Policy Development. MOH Malawi
<u>9</u>	10.45 – 11.00am	Questions and inquiries from the three presentations	Session Chair: Ali Walimbwa

11.00 AM – 11.15 AM – BREAK			
<i>Sub Theme 2: -Refugee Health in Africa: Humanitarian Health Policy, Gender and Health Economics</i>			
<u>10</u>	11.15am – 11.30am	A synthesis of key aspect of health systems and policy design affecting the refugee populations in Uganda	Dr. Fred Matovu, School of Economics, Makerere University
<u>11</u>	11.30am – 11.45am	A situation Analysis of Access to Refugee Health Services in Kenya: Gaps and Recommendations	Julie Jemutai/Qui Muraya, KEMRI-Wellcome, Kenya
<u>12</u>	11:45am – 12.00pm	Improving Refugee Health in East-Africa: Current strategies, challenges, and the agenda ahead.	Prime Minister’s Office/ UNICEF/UNHCR (Uganda)
<u>13</u>	12.00am – 1.00PM	PANEL PRESENTATION (Key questions to the panel) 1. Dr. Tom Aliti – MOH 2. Prof. Geordan Shannon (UCL) 3. Dr. Fred Matovu, SOE-MAK 4. UNICEF/UNHCR	Session Chair- Prof. Freddie Ssengooba, MakSPH
1.00pm – 2.10pm LUNCH			
<i>Sub Theme: 3- Harnessing efficiencies in health care delivery: Looking beyond resources</i>			
<u>14</u>	2.10 – 2.40pm	Presentation on Rethinking health service delivery in Uganda: Constructing a feasible community health care service delivery model (s) for Uganda	Ms. Brenda Nakimuli, Research Fellow, MaKSPH
<u>15</u>	2.40 – 3.20 pm	Presentation on cross Programmatic Efficiency analysis of selected health programs in Uganda: Key highlights from a CPEA-WHO study in Uganda	Dr. Chrispus Mayora, MaKSPH
<u>16</u>	3.20pm – 4.15pm	PANEL DISSCUSSION 1. Dr. Upenytho George, Commissioner Department of community health 2. PERISIC, Darinka, WHO 3. Dr. Sarah Byakika, MOH	Dr. Elizabeth Ekirapa, MakSPH
		End of Day 1	

DAY 2 (HALF DAY)			
	8:00am- 9:00am	Registration	Ms. Brenda Nakimuli
	9.00am – 9.30 am	Recap and summary of emerging issues of day 1	Dr. Aloysius Ssenyonjo, MakSPH
	9:30-9:45	Presentation on Political economy of National Health insurance Uganda.	Prof. Freddie Ssenigooba, MaKSPH
<i>Sub Theme 4:-Highlights from the HEPP – The MakSPH – MOH – CHE collaboration</i>			
	9.45am – 10.00am	Rethinking outcome measures for Economic Evaluations: developing a local EQ-5D-5L value set and inequality aversion parameter for Uganda.	Dr. Kenneth Katumba, Health Economist, MRC, UVRI
	10.00am – 10.20am	Summary agenda for the collaboration, Status of Health Economics & Analysis capacity building and policy support in Uganda: Gaps, challenges, and opportunities, The HEPP Platform for stakeholder engagement: Key engagements so far and emerging highlights	Prof. Freddie Ssenigooba, MaKSPH
	10.20am-10:35am	Presentation Feasibility of adapting the Thanzi-la-onse model to Uganda	Tara Mangal
10.35am – 11.00am – BREAK			
	11.00am – 11.45am	GROUP DISCUSSION The agenda ahead – where should the focus be?	Dr. Timothy Musila, MOH
	11.45am – 12.30pm	Plenary – Teams Report Back from Groups and each presents their feedback	Dr. Timothy Musila, MOH
	12.30 pm – 1.00pm	Summary of issues, way forward, and closing remarks.	Prof. Freddie Ssenigooba & Other officials to close
Half-day 2			