

Political economy analysis of multi-stakeholder collaboration in the process of formulating a new universal health coverage (UHC) policy in Senegal: Recommendations for a successful reform

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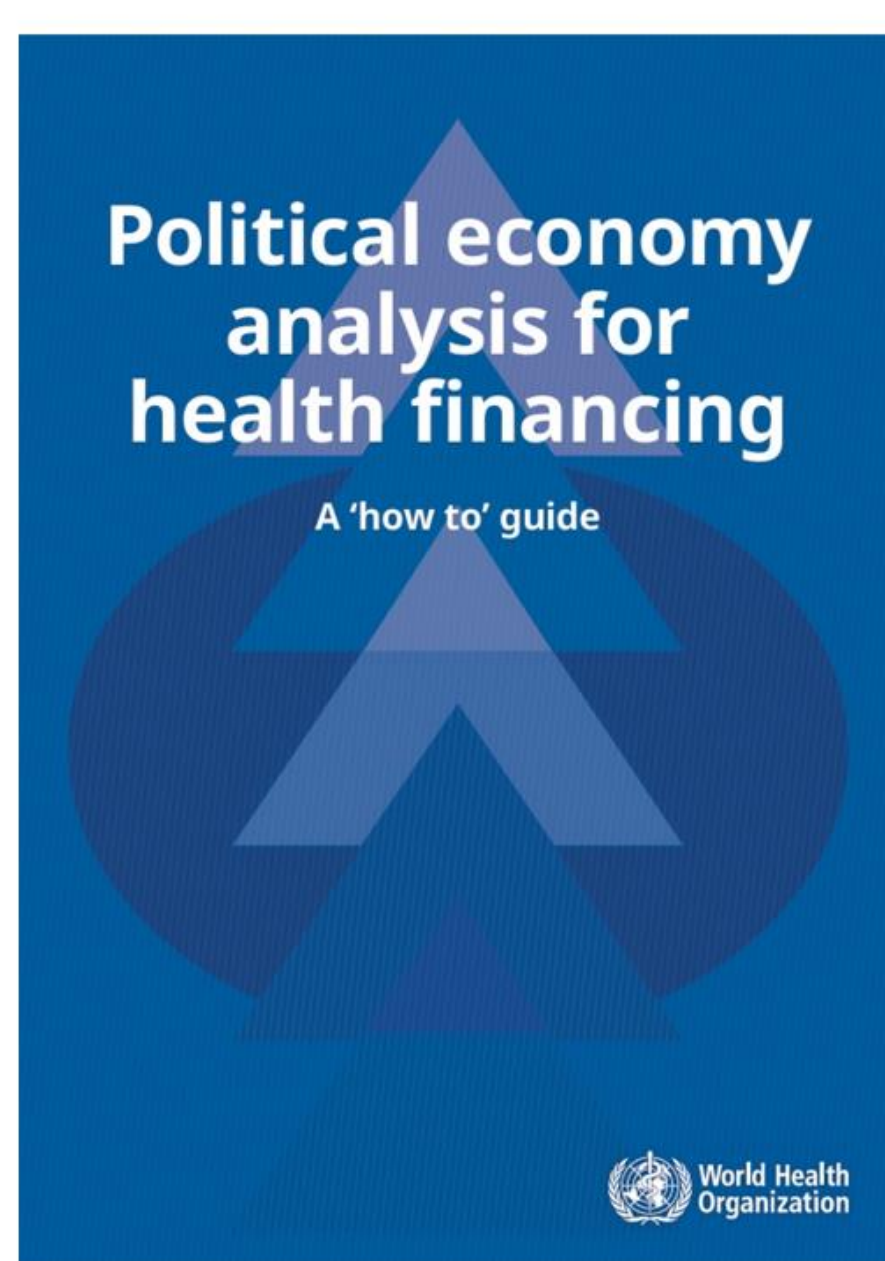
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Background



- Health financing reform:** inherently complex and political, necessitating collaboration among diverse stakeholders with often conflicting interests.
- Political economy analysis (WHO, 2024):** 'support a more strategic approach to reform as a way to increase the likelihood of effective design, adoption and implementation and ultimately progress towards UHC'.
- Lack of research on the contextual conditions and underlying processes of collaboration.
- In **Senegal**, the government has embarked on evaluation of its universal health insurance programme and subsequent formulation of a new policy ('**new PSD-CMU**') since 2019.
- 31 key informant interviews and related document collection were conducted from June-August 2024** to understand the collaboration processes in the policymaking and elicit practical recommendations.

Collaboration dynamics: Principled engagement

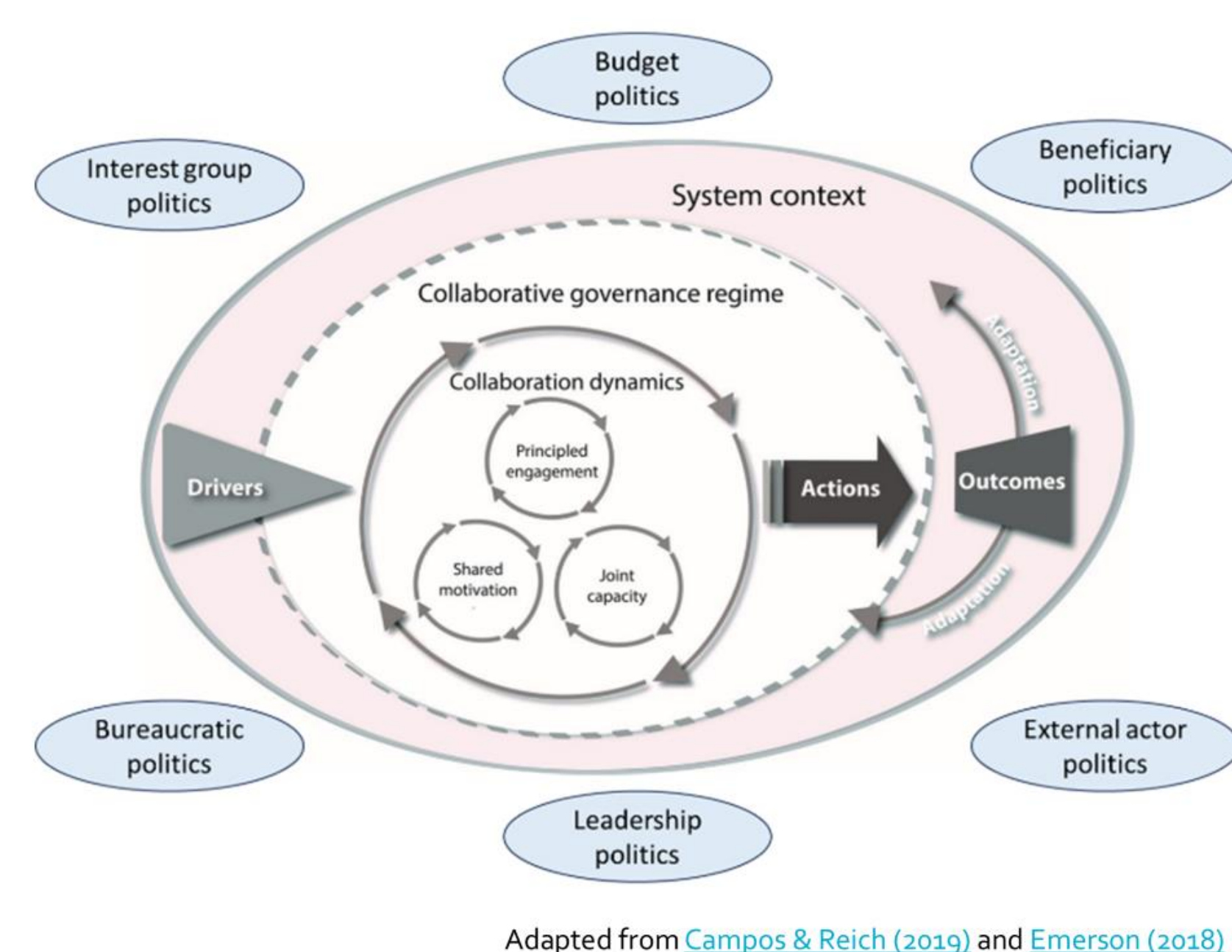
- | Good practice | To be improved |
|---|---|
| <ol style="list-style-type: none"> A ministerial order defined the procedures and members of the steering and technical committees to elaborate the new PSD-CMU. SEN-UHC mobilised financial resources and recruited a competent consultant to draft the new PSD-CMU with objectivity. The consultant undertook discussion with a wide range of stakeholders who were not necessarily involved in the steering/technical committees. Development Partners provided crucial technical inputs with local expertise. | <ol style="list-style-type: none"> The ministerial order did not specify individuals or detailed affiliations of the committee members, with the weak representation from beneficiaries (of the different schemes), universities, private sector (insurance, providers). Committee members outside SEN-UHC, Ministry of Family and Solidarity or Development Partners did not substantially engage in the process. They feel they should have been involved more from earlier stages. Online meetings allowed flexible participation but might have led to missed opportunities when the meeting link is not directly shared with individual participants. |

Analytical framework

Political economy framework: 6 categories of stakeholders in health financing reform

Integrated framework for collaborative governance:

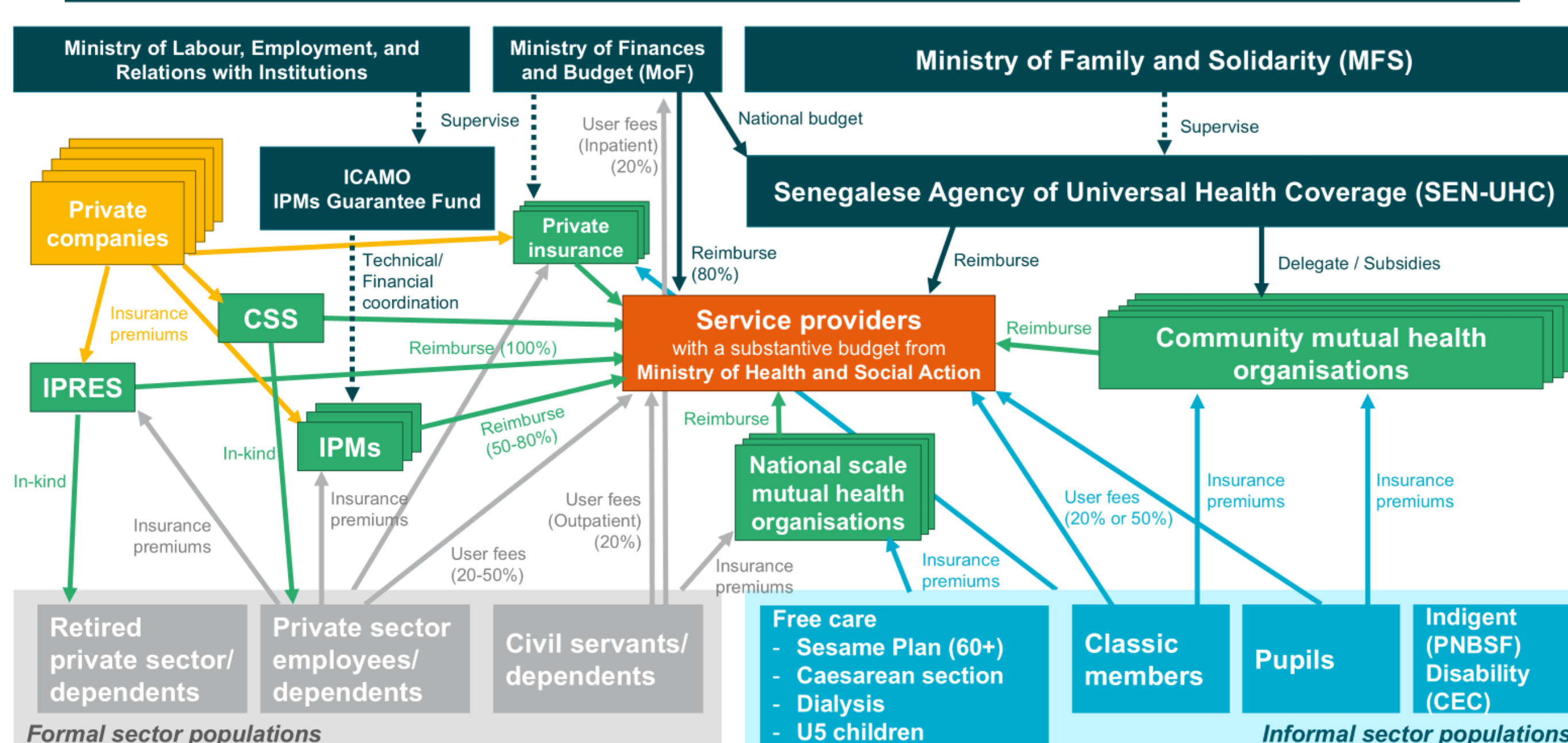
- Principled engagement (discovery, definition, deliberation, determination)
- Shared motivation (trust, mutual understanding, legitimacy, commitment)
- Capacity for joint action (procedural / institutional arrangements, leadership, resources, knowledge)



Collaboration dynamics: Shared motivation

- | Good practice | To be improved |
|---|---|
| <ol style="list-style-type: none"> Good understanding and strong commitment from those who participated in the process, although it was limited to SEN-UHC, Ministry of Family and Solidarity and Development Partners. Note of information and minutes of meeting were shared with stakeholders to foster understanding. | <ol style="list-style-type: none"> Distrust with Community Mutual Health Organisations and service providers. Subsidisation deficits are the primary reason, but more complicated issues especially with Community Mutual Health Organisations. This is undermining beneficiaries' trust and participation. Lack of understanding in the programme, the role of SEN-UHC as a coordinator of all the financial protection schemes, the share of responsibilities across different stakeholders. Tensions between Ministry of Health vs SEN-UHC, IPMs vs private insurance. |

Funding flows in financial protections schemes in Senegal



Collaboration dynamics: Capacity for joint action

- | Good practice | To be improved |
|--|---|
| <ol style="list-style-type: none"> The new PSD-CMU was drafted based on exhaustive document review and qualitative study with local expertise. The process strengthened the network and led to continued collaboration amongst the participants. | <ol style="list-style-type: none"> The process did not materialise better understanding and trustful relationship with a wider range of stakeholders, especially with those in conflict. Implementation of the new PSD-CMU requires a strong inter-ministerial coordination mechanism, which could go beyond the mandate of SEN-UHC. Financing feasibility and sustainability were not rigorously examined with other stakeholders including Ministry of Finance and Budget and local authorities. |

Stakeholder analysis: Members of steering and technical committees in charge of elaborating the new PSD-CMU

Interest group politics	Bureaucratic politics	Budget politics
<ul style="list-style-type: none"> FNMS UNAMUSC UMSENS ICAMO IPRES CSS 	<ul style="list-style-type: none"> Ministry of Health (service providers) Ministry of Finance and Budget (health insurance for civil servants / private) National Solidarity Fund 	<ul style="list-style-type: none"> Ministry of Family and Solidarity SEN-UHC Ministry of Health Ministry of Labour Ministry of Local Authorities Ministry of Economy, Planning and Cooperation
Leadership politics	Beneficiary politics	External actor politics
<ul style="list-style-type: none"> Health, Population, Social Affairs and National Solidarity Commission of National Assembly Health Commission of Economic, Social and Environmental Council High Council of Social Dialogue High Council of Local Authorities National Commission of Territorial Dialogue Union of Associations of Local Councillors (UAEL) 	<ul style="list-style-type: none"> Civil Society (CICODEV) 	<ul style="list-style-type: none"> Development Partners (Health Group, Social Protection Group)

Conclusions and Recommendations

- The new PSD-CMU itself aims for equity, efficiency and sustainability of the health financing system in Senegal.
- Room for improving inter-ministerial coordination in harmonising related policies, defining the share of responsibilities, examining financial feasibility.
 - **Establish a multi-sectoral steering committee chaired by the prime minister office and integrate the new PSD-CMU and the new national health financing strategy.**
- Distrust and tension amongst some stakeholders.
 - **Reconstruct channels of dialogue with Community Mutual Health Organisations and regain public trust in the programme.**
- Development Partners should be well aware of local contexts in intervening through Development Policy Lending.