

November 2020

Positioning the SDG3 GAP for country impact in the COVID-19 era



Background and action requested

- SDG3 Global Action Plan (GAP) Principals met in mid-July 2020 to review progress, lessons and challenges in early implementation of the GAP. They discussed the need to sharpen the focus of the GAP while maintaining its fundamentals; clearly articulate its added value in the COVID-19 era and draw lessons from COVID-19- specific mechanisms; and strengthen national leadership and ownership and GAP's country impact.
- Similarly, the independent, joint evaluability assessment of the GAP undertaken by the evaluation offices of the 12 GAP agencies recommends that the agencies jointly review and revisit the purpose and shared objectives to clarify how the GAP operates and adds value to what is already in place, including at country level and in light of COVID-19. The assessment also recommends making the GAP more concrete and accountable (recommendation 3) and revisiting the linkages between and among the accelerators.
- This paper responds to the guidance provided by the Principals in July and September 2020 and the recommendations in the evaluability assessment, building on discussions in the Sherpa group.

Positioning the GAP

- Country-level results and impact are at the heart of the GAP. The overall “learning by doing” approach and the work on the different accelerators over the past year has led to a number of concrete collaborative efforts and the development of case studies and plans at country-level, but the GAP approach to collaboration has not yet penetrated all levels of the signatory agencies or been systematized across countries.
- GAP implementation at country-level is positioned to scale up from the 5 countries presented in case studies in the 2020 GAP Progress Report to 14 countries identified by the primary health care and sustainable financing for health accelerators in the draft GAP workplan for 2020/21 and potentially to 29 countries or more in the near term through country-driven demand and further organic growth, depending on the course of COVID-19 and based on what makes the most sense in the country context, as well as the agencies’ mandates and available resources. Ultimately, the goal is to accelerate country progress on the health-related SDGs through strengthened collaboration in all countries in response to country demand and need.
- COVID-19 has amplified challenges to the achievement of the health-related SDGs and led to dynamic change in the multilateral system with the establishment of several short-term collaborative platforms to support aspects of the pandemic response, including the ACT Accelerator (ACT-A), the UN Socio-economic Response Framework (UN-SERF) and the Global Humanitarian Response Plan: COVID-19.
- The GAP, which includes many of the same agencies and their Principals, can complement the work of these shorter-term pandemic response platforms where relevant and where this could add value. The GAP has a longer timeframe linked to achievement of the SDGs and a broader scope that includes primary health care, sustainable financing for health, community and civil society engagement, determinants of health, innovative programming in fragile settings, R&D, innovation and access, data and digital health and gender equality. It encompasses agencies participating in both the ACT-A and UN-SERF from within and beyond the UN system. Most importantly, the principal goal of GAP is to accelerate progress towards the health-related SDGs, leaving no one behind. In the context of COVID-19, this principal goal now also includes mitigating the reversal of progress made on the health-related SDGs, getting back on track, and building back better.



- Different features of the GAP and COVID-19-related mechanisms present opportunities for mutual learning between short-term humanitarian responses to the pandemic and longer-term development efforts to get back on track towards the health-related SDGs.
- Stronger collaboration is challenging but essential if the multilateral system is to best support countries to achieve the SDGs. It requires sustained leadership and a strong focus on supporting countries to achieve tangible results and impact.
- The comparative advantage of the GAP is therefore to strengthen continuous, effective, long-term collaboration and alignment among a set of multilateral health, humanitarian and development agencies within and beyond the UN system; in support of countries' nationally defined needs, priorities and plans; through the GAP accelerator themes and commitment to gender equality, using joint country support and delivery of global public goods; to accelerate progress towards health-related SDGs, also now in the context of countries' efforts to recover and rebuild from COVID-19.

Strategic directions

1. *Strengthen national ownership, engagement and impact*
 - Scale up country-level implementation to support countries to sustain and continue to make progress on the health-related SDGs in the context of the prolonged COVID-19 pandemic and regularly tracking progress at country level (recommendation 1a and c);
 - Improve country outreach and more effectively communicate the objectives of the GAP and what the GAP agencies offer to countries and communities through their enhanced collaboration (recommendation 1b);
 - Build further awareness of the objectives of the GAP within the GAP agencies' country-facing teams (including through joint communication); and, where relevant, strengthen the links to the UN Resident Coordinator system; (recommendation 1b); and
2. *Make the GAP more concrete in the COVID-19 era by supporting country-level work and strengthening the links among accelerators where it leads to greater impact at country level*
 - Sharpen the focus and strengthen links among accelerators and the commitment to gender equality and decentralize GAP management, with each accelerator developing SMART objectives while maximizing alignment between them, especially in support of country impact (recommendations 1c and 3 a and b and 5);
 - Explore opportunities for the GAP agencies working together to respond to country-level needs by supporting the rollout of new COVID-19 tools (as developed under ACT-A) and link with Strategic Preparedness and Response Plans, Humanitarian Response Plans and UN-SERF with regard to accelerator themes and gender equality, to support countries to build back better (recommendation 1c).
3. *Make the GAP agencies more accountable for collaboration:*
 - Strengthen GAP governance through regular meetings of the GAP Principals under the leadership of WHO (recommendation 3c);
 - Systematically invite feedback from countries on how the agencies collaborate and provide support to enable continuous improvement (recommendation 1b and 6);
 - Deliver on key recommendations of the GAP joint evaluability assessment, including development of a theory of change and an M&E framework that have a strong country focus, and ensure adequate human and financial resources and incentives for staff to implement GAP-related activities e.g. adjust role descriptions of key staff such as accelerator co-chairs, where relevant, to reflect their contributions to collaboration, in line with the management response to the assessment (recommendation 2, 4, 6).

