

A Road Map to Achieve and Sustain Universal Health coverage (UHC)

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❖ Introduction

- Health is a human right. No one should get sick and die just because they are poor, or because they cannot access the health services they need.

- **Dr Tedros Adhanom**
Ghebreyesus

- Good health allows children to learn and adults to earn, helps people escape from poverty, and provides the basis for long-term economic development. Access to needed health services is crucial for maintaining and improving health. At the same time, people need to be protected from being pushed into poverty because of the cost of health care. Universal health coverage has therefore become a major goal for health reform in many countries and a priority objective of WHO.

❖ Meaning

- UHC means that people have access to the health care services that they need without suffering any unnecessary financial burden. UHC is consisting of three interrelated components: the population covered, the range of services made available and the extent of financial protection from the costs of health services.

❖ Definition

- Assuring equitable access for all peoples, resident in any part of the country, regardless of income level, social status, gender, caste or religion, distance to travel at affordable, accountable, appropriate health services of assured quality (such as promotive, preventive, curative and rehabilitative) as well as public health services which are having sufficient quality to be effective by addressing the wider determinants of health delivered to individuals and populations without any financial problem.

❖ What is UHC

- UHC means that all individuals and communities should receive the health services when they need without suffering financial problems which includes the full range of

vital and quality health services from health promotion to prevention, treatment, rehabilitation, and palliative care.

- UHC enables everyone to access the services and ensures that the quality of those services is good enough to improve the health of the people who receive them at community level.
- UHC protects people from the financial ramification of paying health services from their own pockets.

❖ **What UHC is not?**

There are many things that are not included in the scope of UHC:

- UHC does not covers for all possible health interventions regardless of the cost, as no country/state can provide all services free of charge on a sustainable basis.
- UHC is not just about health financing but also it incorporates all components of the health system such as health service delivery systems, the health workforce, health facilities and communications networks, health technologies, information systems, quality assurance mechanisms, and governance and legislation.
- UHC is not only about confirming a minimum package of health services, but also about ensuring a advanced extension of coverage of health services and financial protection for people as more resources become available at the health sectors.
- UHC is not only about individual treatment services, but also includes population-based services such as public health campaigns, adding fluoride to water, controlling mosquito breeding places and so on.
- UHC is comprised of much more than just health; taking steps towards UHC means steps towards equity, development priorities, and social inclusion and cohesion.

❖ **Challenges for Achieving Universal Coverage.**

There are three Fundamental Health Financing Challenges for Achieving Universal Coverage

- i. Raise sufficient funds for health.
- ii. Ensure/maintain financial risk protection – i.e. ensure that financial barriers do not prevent people using needed health services nor lead to financial ruin when using them;
- iii. Minimize inefficiency and inequity in using resources, and to assure transparency and accountability.

❖ **How can countries make progress towards UHC?**

Primary health care is the utmost effective and cost effective way to accomplish universal health coverage around the country/world.

- UHC requires solidification in existing health care systems in all countries.
- Robust/Vigorous financing structures are key to achieve and sustain universal health coverage.
- UHC can ensure when administrative will is strong, even if a country is not rich.
- Well-trained, motivated health workers and medicines are essential to achieving UHC.
- Adapting frontline health services is essential for achieving UHC.
- Improving access to medicines through improved procurement and better data.
- Improving health service coverage and health outcomes at community level depends on the availability, accessibility, and capacity of health workers to deliver quality people-centred integrated healthcare services.
- For achieving UHC, Investments in quality primary health care will be the cornerstone
- Investments in quality primary health care will be the cornerstone for achieving UHC within the country and around the world. Along with that good governance, rigorous systems of procurement and supply of medicines and health technologies and well-functioning health information systems are other critical elements which helps to accomplish UHC.
- In order to train and improve skills among health worker investments are needed from both public and private sectors.
- UHC focused not only what services are covered but also UHC emphasis on how the services are funded, managed, and delivered.
- A fundamental health care services should be integrated and focused on the needs of people and communities which includes reorienting health services to ensure that care is provided in the utmost suitable setting and health services should be organized around the comprehensive needs and expectations of people and communities which will help them empower to take a more active role in their health and health care system.

❖ **Can UHC be measured?**

- UHC can be measured by following essential health services.
- In order to monitoring progress towards UHC two thing should focus :

- i. The proportion of a population that can access essential quality health services.
 - ii. The proportion of the population that spends a large amount of household income on health.
- There are **16 essential health services** in **4 categories** as indicators of the level and equity of coverage in countries, used by World Health Organization

A. Reproductive, maternal, new-born and child health:

- ✓ Family planning
- ✓ Antenatal and delivery care
- ✓ Full child immunization
- ✓ Health-seeking behaviour for pneumonia.

B. Infectious diseases:

- ✓ Tuberculosis treatment
- ✓ HIV antiretroviral treatment
- ✓ Hepatitis treatment
- ✓ Use of insecticide-treated bed nets for malaria prevention
- ✓ Adequate sanitation.

C. Non communicable diseases:

- ✓ Prevention and treatment of raised blood pressure
- ✓ Prevention and treatment of raised blood glucose
- ✓ Cervical cancer screening as early as possible
- ✓ Tobacco chewing and smoking

D. Service capacity and access:

- ✓ Basic health care service accessibility at root level health sectors.
- ✓ Health worker density
- ✓ Access to essential medicines
- ✓ Health security: compliance with the International Health Regulations.

❖ Conclusion

Each country is distinctive and each country may focus on different areas or develop their own ways of measuring progress towards UHC. But there is also value in a global approach that uses standardized measures that are internationally recognized so that they are comparable across borders and over time. Achieving UHC is one of the targets of the every

nations of the world. Countries that advanced towards UHC will make progress towards the other health-related targets and goals.

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