HEALTH FOR ALL

Universal health coverage

for everyone, everywhere

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What is universal health coverage?

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Universal Health Coverage means that all people can use health services, where and when they need them, without experiencing financial hardship.

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Dispelling Myths about UHC

1. UHC is only about *treatment*.
2. UHC is only about *health financing*.
3. UHC is not a concern for *priority health programs* or *global health initiatives.*
4. UHC means immediate free coverage for *all* possible health interventions, regardless of the cost.
5. UHC means abandoning the health *MDGs.*

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"It is unacceptable that anyone today – a pensioner, single parent, unemployed person, your neighbour or mine – should be pushed into poverty by having to pay for the treatment they need."

Dr Zsuzsanna Jakab
WHO Regional Director for Europe

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Ensuring no one is left behind

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Countries can track progress towards universal health coverage by measuring:

- financial protection
- access to health services.

Financial protection

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No one should have to choose between health care and other basic needs.

Financial protection means a Europe free of impoverishing out-of-pocket payments.

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Measures of financial protection

Catastrophic
out-of-pocket payments:

WHO/Europe: OOPs > 40% of a household's capacity to pay for health care (deduction for basic needs)

Impoverishing
out-of-pocket payments:

OOPs that push households below (or further below) the poverty line / basic needs line

Calculated using routinely collected data on household spending (budget surveys)

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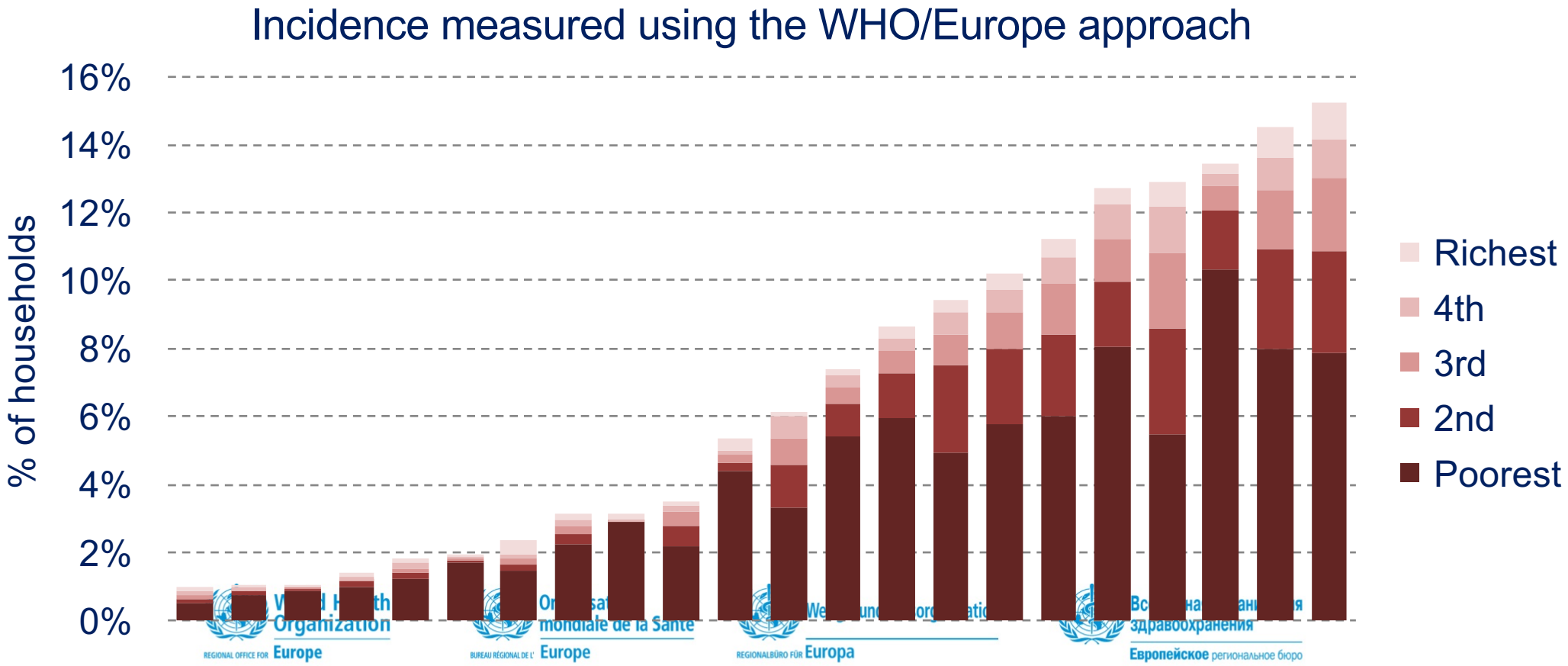
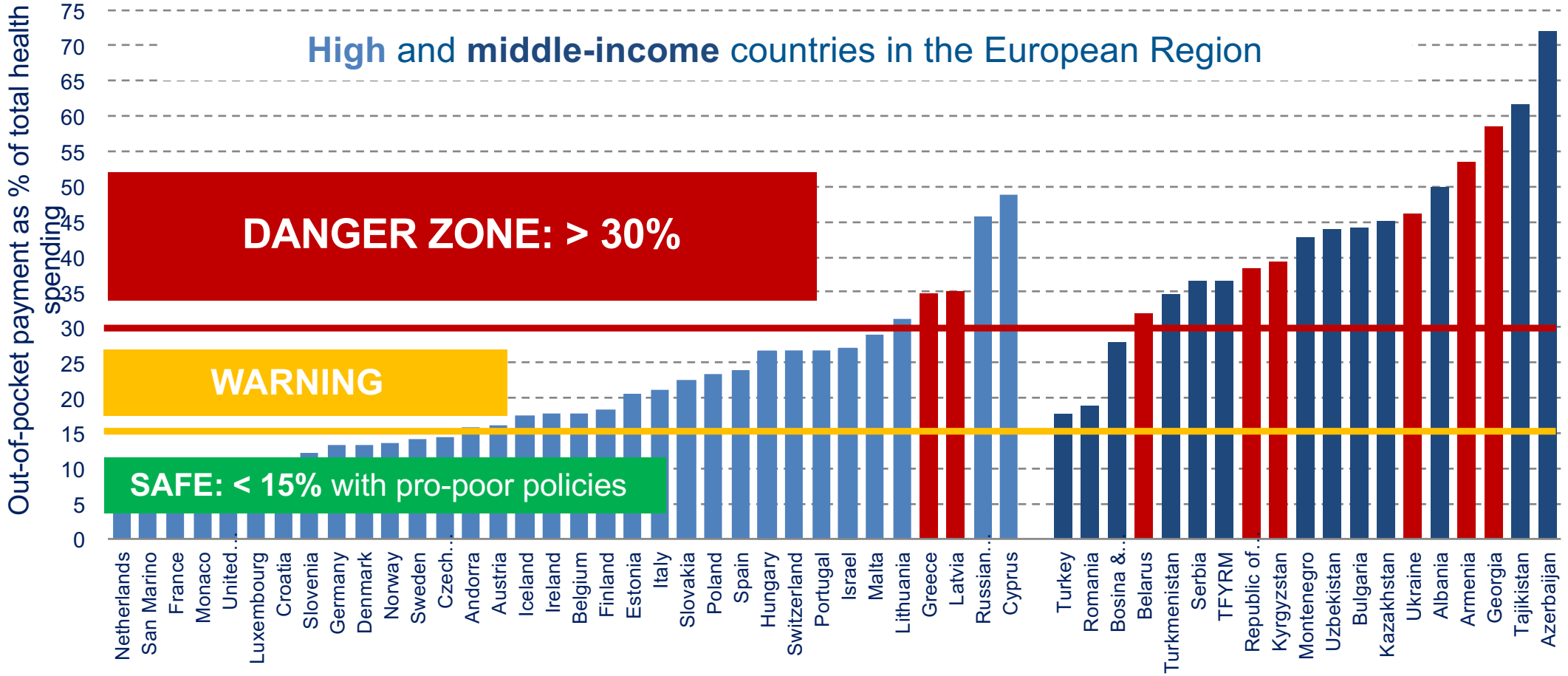
Incidence of catastrophic out-of-pocket payments by quintile: the poor suffer the most

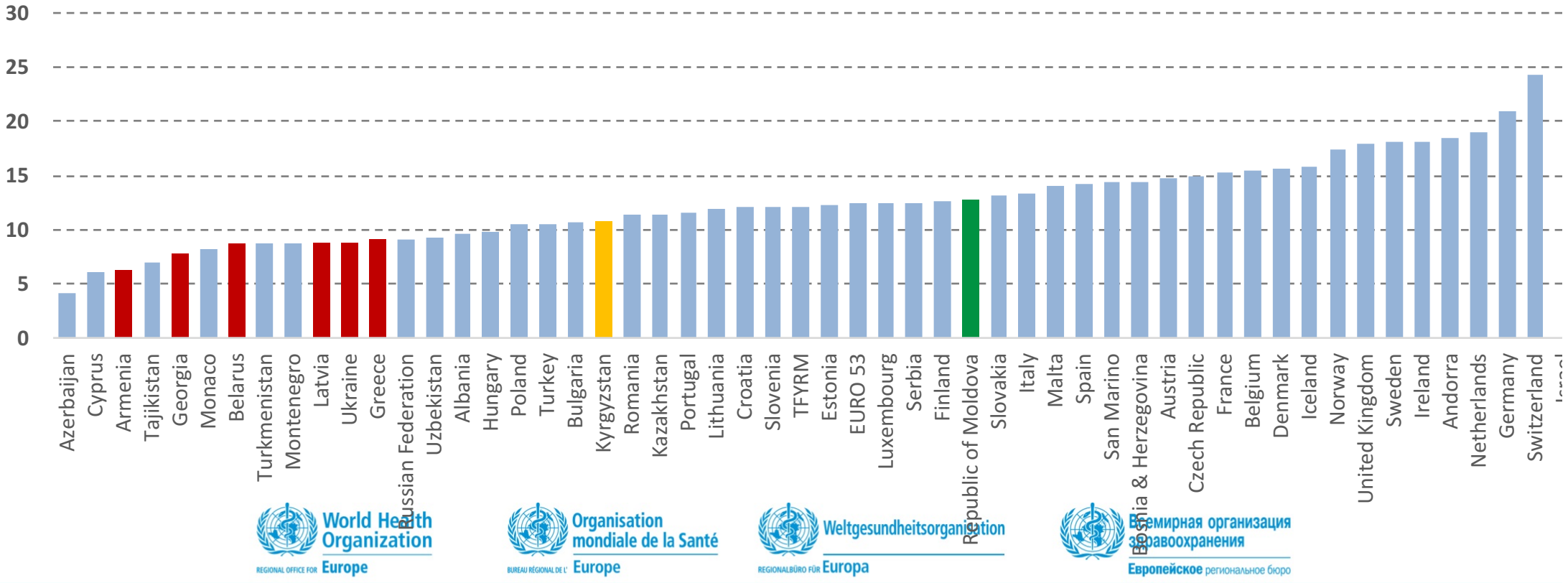


Out-of-pocket payments (OOPs) as % of total spending on health



Source: WHO data for 2014

Share of health within government (public) spending – priority to health



GGHE % GGE, 2014 (Source: WHO GHED, 2017)

Reports on financial protection in Europe
Policy relevant | Action oriented | Pro poor

Global & regional monitoring | Regional report for RC68 | 25 country reports

ALB | AUT | CRO | CYP | CZE | DEU | EST | FRA GBR | GEO | GRC | HUN | IRE | KGZ | LVA | LTU | NLD POL | POR | MDA | SVK | SVN | SWE | TUR | UKR

Ten leading sources of inefficiency

Medicines:
- underuse of generics, higher than necessary prices
- inappropriate or ineffective use
- use of sub-standard and counterfeit medicines

Services:
- medical errors, poor quality
- inappropriate hospital size (low use of infrastructure)
- inappropriate hospital admissions and length of stay

Products and services:
- oversupply and overuse of equipment, investigations, procedures

Health workers:
- inappropriate or costly staff mix, unmotivated workers

Interventions:
- inefficient mix or inappropriate level of strategies

Leakages:
- waste, corruption, fraud

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Source: World Health Report (2010), Chapter 4

Access to health services

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This means the right care, in the right place, at the right time – every time.

It ensures there is no unmet need for health care.

ΤΟΜΥ
ΥΠΟΥΡΓΕΙΟ ΥΓΕΙΑΣ
3η ΥΓΕΙΟΝΟΜΙΚΗ ΠΕΡΙΦΕΡΕΙΑ
ΜΑΚΕΔΟΝΙΑΣ
ΤΟΜΥ
ΤΟΠΙΚΗ ΜΟΝΑΔΑ ΥΓΕΙΑΣ ΕΥΟΣΜΟΥ
ΔΗΜΟΥ ΚΟΡΔΕΛΙΟΥ - ΕΥΟΣΜΟΥ
Δικαίωμα στην ΥΓΕΙΑ
Δικαίωμα στη ΖΩΗ

Roundtable with the Danish Health Authority, 15 January 2018

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The global drive towards UHC

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Promoting the human right to health

- 2012: UN Resolution on Universal Health Coverage
- 2015: UN Sustainable Development Goals
- 2018: WHO's 5-year plan towards UHC

Regional challenges

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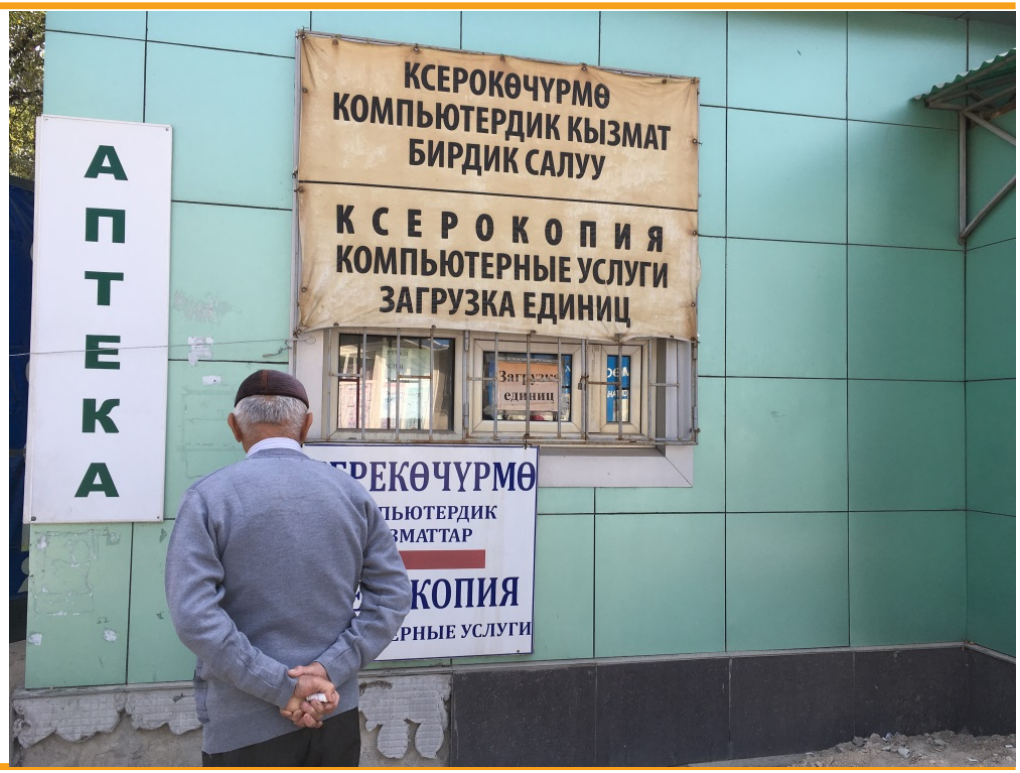
These include:

- Generating adequate resources for health;
- Designing better coverage polices;
- Ensuring financial protection for everybody.



The path to UHC

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- Increase public financing of the health system
- Reduce out-of-pocket payments
- Improve coverage policies, with a focus on poor people and other vulnerable groups
- Strengthen health systems to provide people-centred health services

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#HealthForAll

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As a baby, Robia was diagnosed with polio.
She now receives free-of-charge rehabilitation services thanks to the National Programme on Rehabilitation of Persons with Disabilities (2017–2020) in Tajikistan.

Read more inspiring stories about how countries in the WHO European Region are making progress towards UHC
www.euro.who.int

“When I grow up I want to be a therapist … the kind that helps children.”
Robia, Tajikistan

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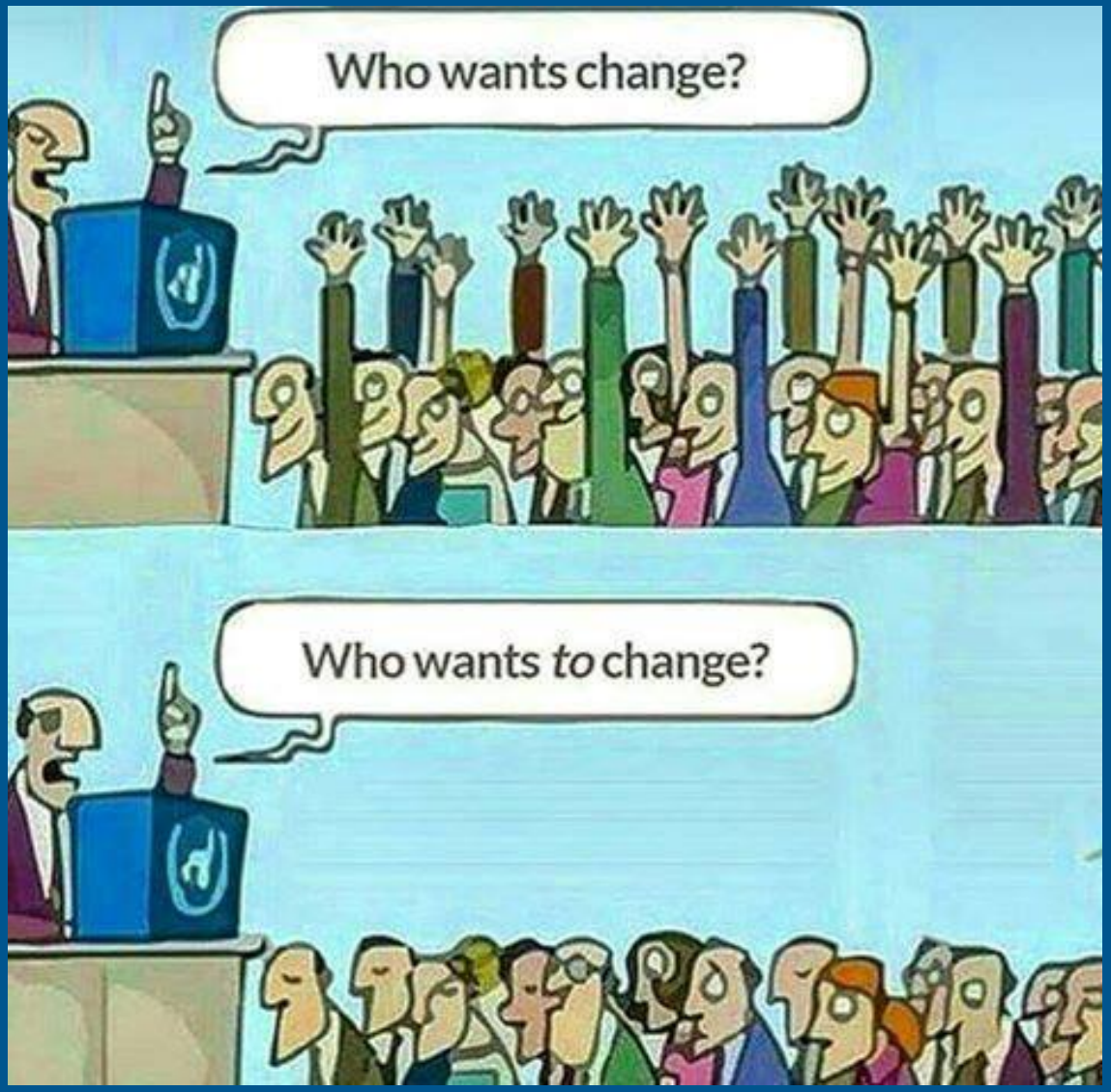
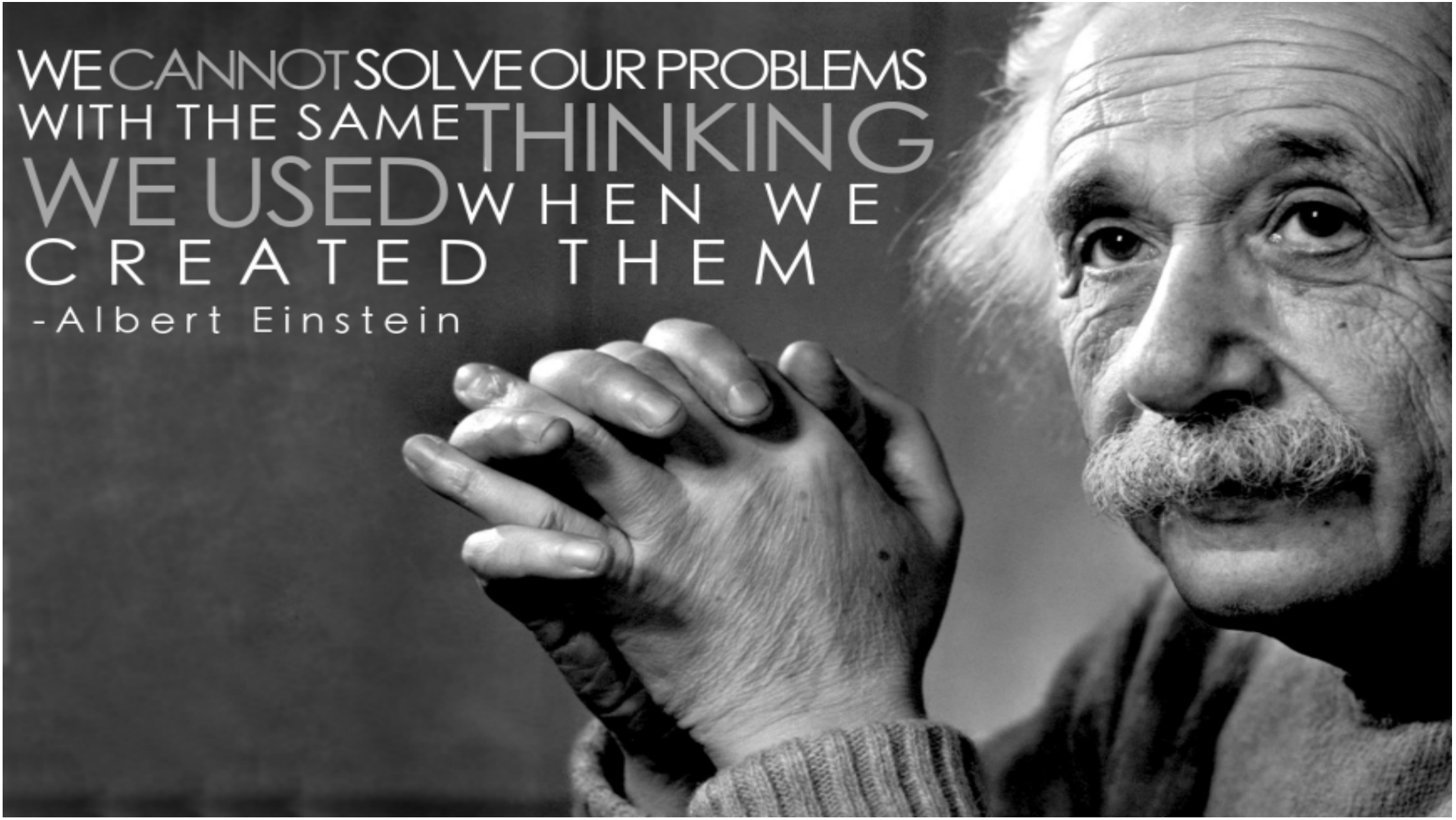

Who wants change?
Who wants *to* change?


WE CANNOT SOLVE OUR PROBLEMS
WITH THE SAME THINKING
WE USED WHEN WE
CREATED THEM
-Albert Einstein

Celebrating Health Systems in 2018

Health Systems Respond to NCDs
Sitges, Spain
16-18 April 2018

10th Anniversary of the Tallinn Charter
Tallinn, Estonia
13-14 June 2018

40th Anniversary of Alma-Ata Declaration
Kazakhstan 25-26 October 2018

UN High Level Meeting on UHC 2019

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