

Panel Discussion on Universal Health Coverage at the Center of Sustainable Development: Contributions of Sciences, Technology and Innovations to Health Systems Strengthening

Geneva, 3 July 2013

On 3 July 2013, as part of the High Level Segment of the Economic and Social Council Substantive Session, a panel discussion was held on “Universal Health Coverage at the center of sustainable development: contributions of sciences, technology and innovations to health systems strengthening.” The thematic debate was convened in response to the request made by the General Assembly to the Economic and Social Council contained in resolution 67/81 to consider the issue of universal health coverage as part of its 2013 programme of work, with the participation of the World Health Organization, the World Bank, other relevant United Nations entities and other stakeholders.

The panel discussion was moderated by **Dr. Suwit Wibulpolprasert**, Senior Advisor on Disease Control, Ministry of Public Health, Thailand. The panel consisted of:

- **H.E. Mr. Ali Gofran Mukti**, Vice Minister of Health of Indonesia;
- **Dr. Margaret Chan**, Director General, WHO;
- **H.E. Mr. Philippe Meunier**, Ambassador for the fight against HIV/AIDS and communicable diseases, France;
- **Dr. Timothy G. Evans**, Director of Health, Nutrition and Population, World Bank;
- **Ms. Florence Gaudry-Perkins**, International Director-Global, Government & Public Affairs, Alcatel-Lucent;
- **Dr. Sania Nishtar**, President and Founder, Heartfile.

Presentations by panellists were followed by a dialogue with members of the Council. These discussions are hereunder summarized.

Key Factors for the Implementation of UHC

Universal Health Coverage (UHC) implies that all people have equal access to nationally determined sets of needed preventive, curative and rehabilitative basic health services and essential, safe, affordable, effective and quality medicines. The key factors necessary to promote the widespread implementation of UHC and the structural challenges that impede its development were addressed inside this panel.

It was stressed that the implementation of UHC can be operational in various socio-economic settings, both in developed and developing countries, and allows for the designing of “home grown” systems. However, the realization of UHC will only be successful through profound country leadership and ownership. In this regard, a high level of political commitment was considered vital to invest in equitable access to healthcare and services for all.

Fundamental challenges include the need for sustained multi-year political commitment that is not confined to a single government or political party; a local demand for UHC to create the necessary pressure on actors to induce political change; significant financing to undertake the transition towards UHC; and technical capacity at the country level. A high-level global commitment to achieving UHC could be an effective option to protect UHC from vacillating policy priorities.

In order to further move towards on the implementation of UHC, a number of member States are in the process of revamping their health systems and engaging a wide range of stakeholders to that end. Health reforms also are an integral part of UHC development, which should incorporate the people who are of full health, in order to change their risk behaviors and promote healthy life-styles. It is important that everyone receive health benefits irrespective of whether the services provided are public or private. The international community should acknowledge this momentum and recognize that it is now time to move ahead and to become global leaders in the area of health promotion.

The Financial Challenges of UHC

Issues surrounding financing health care were raised as a prominent challenge to the realization of Universal Health Care for all. UHC consists of equitable access to quality healthcare without the threat of financial devastation, meaning that there is no necessity to be a rich country to make a start of UHC and achieve it. UHC must be adapted to specific country contexts and there is a range of financing approaches that are effective with multiple entry points.

There are issues on financing health systems such as how to raise money to fund UHC and how to pay providers under UHC. Some modalities have demonstrated to be more effective than others, including the pooling of resources through taxation and employer-based contributions through formal employment, as opposed to the user-fee option. The “pay as you go” or out of pocket payment at the time of service was considered neither equitable nor efficient. While realizing that there are some concerns as to whether UHC is affordable, the panel stressed that the health economy is growing faster than the overall

economy in virtually every country of the world and therefore offers important growth opportunities.

Innovative financing mechanisms to reach out to vulnerable populations and promote disease prevention are important components of UHC which can contribute to reducing the overall expense of healthcare provision. An effective healthcare system may indeed be less costly on the long run, as exemplified by the strong links that exist between health systems and economic growth.

Contribution of UHC to Sustainable Development

UHC is crucial to increase life expectancy, reduce poverty, promote equity and achieve sustainable development all together. Its direct contribution to poverty reduction is particularly important given that every year, around 100 million people in the world are put in poverty from paying for health care expenses.

Moreover, UHC can be used as an indicator of sustainable development. It can help measure the standard of living in a given country, provided that all aspects of health are taken into account (treatment, prevention and health promotion as well as maternal and child health, HIV/AIDS, communicable and non communicable diseases etc.).

Technology and innovation can further UHC's contribution to sustainability. Health technology assessments should be carried out to identify the most cost-effective technologies to enhance the delivery of health services at the national level.

While Member States have a prime responsibility to take all necessary steps to ensure that UHC is at the heart of the national agenda for sustainable development, there was also a strong concordance on the point of establishing an effective post-2015 development agenda which incorporates UHC and makes it a priority. This is an opportunity to bring health to the forefront of sustainable development and to define a new set of health related goals.

Innovations to promote UHC

Progress has been made when it comes to innovations relevant to UHC. These innovations stem to some part from improvements in STI and involvement of the private sector. Several developing countries have begun to use information and communication technologies to enhance health literacy, provide health information, support diseases surveillance, improve care and strengthen monitoring and evaluation.

The right incentives have to be provided in order to create an environment that fosters innovation in the area of health without pure profit maximization in mind in order to ensure equitable access to healthcare. The health sector should get more involved to accelerate the use of technology, and more broadly barriers between the science and health sectors should be taken down.

A major innovation which made the enhanced use of ICT for health possible has been the use of mobile phones. Even in parts of the world where internet connections are limited, many enjoy access to cell phones, which impact people's lives. One of the many pilot initiatives aiming to promote UHC is therefore based on mobile phones. The main benefit of the usage of mobile phones is that they are affordable and reach large amounts of the population, providing them with information on health care and disease prevention and facilitating diagnostics.

However, there is also a different side to the matter, where innovations are constantly made but simply unaffordable by most and therefore only benefit a marginally small part of the people in need. It was therefore warned that if innovations became so expensive that most people could not access them, they would become harmful and counterproductive.

The role of the private sector

The private sector can play a major part on the road towards achieving UHC. It should therefore be encouraged to be an active contributor to this common objective. New business models are also needed to prevent developing countries from being forced to wait for the sharing of STI.

Innovations driven by the private sector should not only focus on technology but also on social innovation, which goes far beyond the boundaries of scientific innovation. Greater consideration should be given to value-based science and technology when it comes to the attainment of UHC.

Participants pointed out to the positive change of attitude perceivable in today's corporate framework. Firms begin to not only base their investment decisions on expected monetary profits but also take the social value of their involvement into consideration. This ongoing merger between business and social values can contribute to the promotion of UHC.

The challenges that the private sector still perceives are the distances separating the rural populations and communities from the urban areas, which often hold access to health

resources. Moreover, traditional public-private partnerships might not be sufficient anymore for meeting today's challenges. The active involvement of civil society and health professionals also needs to be enhanced.

A call was made for insurance companies to play their role in the process and become part of the solution. Their further involvement could massively accelerate the move towards UHC.

The role of international organizations in promoting UHC and next steps

International organizations, including WHO and the World Bank, have an important role to play in promoting UHC. In the first instance, they are able to promote the notion of UHC and then act as facilitators in bringing together different actors and providing them with the needed technical inputs and resources. Therefore, they can be seen as providers of guidance and platform in policy dialogue among different countries. Institutions cannot give a step by step handbook on the implementation of UHC but serve better as facilitators of knowledge and experience-sharing.

As the right to health is a fundamental human right, a logical next step would be to include UHC on the agenda of the UN Human Rights Council.

At the normative level, the General Assembly could convene a high level meeting on the issue of UHC, which could lead to the adoption of a Declaration on the matter. In the longer term, a Convention could also be considered.

In the short run, support should be given to the inclusion of UHC in the post 2015 development agenda.