



# 2009 ANNUAL MINISTERIAL REVIEW

## SOUTH ASIA AMR REGIONAL MEETING

### Background

A South Asia regional preparatory meeting on the theme “*Financing Strategies for Health Care*” was held in Colombo on 16-18 March 2009, hosted by the Government of Democratic Socialist Republic of Sri Lanka. The multistakeholder event, was attended by 121 senior policy makers, including several Ministers. It provided an opportunity to:

- ❖ Examine in greater depth the financing aspects of health services and public health;
- ❖ Assess progress in achieving the health-related development agenda in the region and outstanding challenges;
- ❖ Exchange lessons learned and replicable examples of good practices;
- ❖ Promote a broad range of stakeholder engagement early on in the AMR process

Other regional meetings are planned on “*Health Literacy*” in Beijing, China, 4/29-30, “*The growing burden of non-communicable diseases*” in Doha, Qatar 5/10-11, “*Digital health*” in Accra, Ghana and on “*HIV/AIDS*” in Latin American and the Caribbean

### Thematic focus

Resources available for health in many of the world's countries remain extremely limited. Despite a substantial increase in external assistance for health since the Millennium Declaration was signed, total health expenditure per person - from all sources including external assistance and loans-remained lower than US\$30 per capita in 33 of the world's countries in 2006. Against this backdrop the meeting examined key challenges countries - particularly low-income countries – face in adapting their domestic health financing systems to the demands put on it. It also explored the role of external sources of health care financing and how the international community can support countries as they move towards universal coverage, partly by raising more, and more predictable, international

funds for health and by channeling them to recipient countries in ways that strengthen national financing systems. It further addressed the question of health systems, particularly health financing, in crisis situations.

### Key messages

#### Domestic sources of health care financing

- ❖ For universal coverage to be achieved, ways need to be found to increase domestic funding and to enhance its efficiency;
- ❖ To ensure equal access to healthcare, there is a need to move away from the reliance of out-of-pocket payments towards a system of pre-payment and pooling;
- ❖ As the proportion of total government expenditure allocated to health remains low in many Asian countries, with rising incomes, there is an opportunity to expand domestic health funding, even as countries see their growth rates reduced.

#### External sources of health care financing

- ❖ External funding needs to become more predictable and well-aligned with countries national priorities and should be channeled to recipient countries in ways that strengthen national financing systems;
- ❖ Innovative sources of health financing are to be welcomed, but they must be additional;
- ❖ The tendency of donors to focus on particular countries, while neglecting others needs to be addressed.

#### Health care in conflict situations

- ❖ Improvement in health care is possible even as countries are facing crises;
- ❖ Keeping health systems well financed especially primary health care, enables countries to prevent secondary disasters such as epidemics and outbreaks in the case of a crisis;
- ❖ Health remains under-funded during recovery and rehabilitation compared to other areas