What is UHC?

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Universal Health Coverage

➢ All people are able to use needed health services (including prevention, promotion, treatment, rehabilitation, and palliation), of sufficient quality to be effective;

➢ The use of these services does not expose the user to financial hardship

World Health Report 2010, p.6
HIV/AIDS interventions are by definition part of UHC

➢ Part of "needed services"

➢ Quality, access and financial protection are relevant

➢ Equity in relation to need implies non-discrimination (universal means universal)
UHC is not…

- …having everyone in an insurance scheme
- …establishing a basic package of services
- …reaching some target level of health workers per 1000 population
- …reaching a spending target
- …integrated service delivery
- …reaching some target level of the population within a certain distance of a health facility
- …having medicines in all facilities
- …a scheme to be implemented
UHC is also not “health”

- Effective coverage is a means to improving health
- Effective coverage alone does not determine health outcomes (e.g. social determinants)
- Non-health system actions can be a critical part of the response to HIV/AIDS

So while HIV interventions are part of UHC, there are other actions to address HIV that are beyond UHC
UHC is a direction and not a destination

- No country fully achieves all the coverage objectives

- But all countries want to:
  - Reduce the gap between need and use of services (equity in service use)
  - Improve quality
  - Improve financial protection
So how do you move in the right direction?

- **Health system strengthening!**
  - **Instruments (what we do)**
    - Better mix, distribution and capability of HRH
    - Investment to improve disease surveillance
    - Reducing fragmentation
    - Using HTA to help specify the benefit package
    - Provider payment reform
    - Etc etc

- **UHC Goals (what we want)**
  - Equity in service use relative to need
  - Quality
  - Universal financial protection
  - (and intermediate objectives like equity and efficiency in resource use)
“Systems thinking” for a systematic approach

- Separate **ends** (e.g. effective coverage) and **means** (e.g. health program and wider health system)
  - “The problem is growing HIV incidence among injecting drug users” (defined at objective level)
  - “The HIV program is under-funded” (a possible cause, but NOT the problem itself)

- **Performance problems usually have multiple causes; therefore, solutions must be comprehensive**
  - Beware of easy or so-called “innovative” solutions
  - For every complex problem, there is an answer that is **simple, direct and wrong**
Bringing a “UHC lens” to the HIV/AIDS discussion

- Take the perspective of the Minister (of Health and Finance), not the program manager

- **Unit of analysis** is the system
  - Budget dialog makes sense at sectoral level, not disease-by-disease
  - Assess progress at level of population, not for “scheme members” or program beneficiaries
  - Similarly with efficiency: need a whole system, whole population unit of analysis (look for consolidation of underlying sub-systems)
Summary messages

All countries can "move towards UHC"

HIV is included in UHC

Separate ends (UHC) and means (HSS)

Apply systems thinking for comprehensive problem-solving approach