

REGIONAL COMMITTEE FOR AFRICA

ORIGINAL: ENGLISH

<u>Sixty-third session</u> <u>Brazzaville, Republic of Congo, 2–6 September 2013</u>

Agenda item 16

TOWARDS UNIVERSAL HEALTH COVERAGE IN THE AFRICAN REGION

Panel Discussion

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BACKGROUND

- 1. Universal Health Coverage (UHC) is defined as "the situation where all people are able to use quality health services that they need without financial hardship in paying for them." The main objectives of UHC are to ensure equitable use of health services that meet quality standards and protect against financial risk for the entire population.
- 2. In line with these objectives, countries such as Botswana, Ghana and Rwanda are implementing strategies to improve access to and coverage of health services, while many other countries in the African Region have committed themselves to taking measures towards achieving UHC. By adhering to the principles of UHC, countries will be able to address their priority health problems especially by scaling up priority interventions aimed at reducing the huge double burden of disease through robust national health systems based on the Primary Health Care approach.
- 3. Many challenges await countries on their path to UHC. These include limited financial resources for making the required services available; inequitable and inefficient allocation of funds to the appropriate service delivery level for effective interventions to address priority health problems; lack of coherent health financing policies; weak and fragmented health systems, resulting in inequitable and insufficient provision of health care; poor coordination between an increasing number of Global Health Initiatives; and weak partnership between the private sector and the public sector. Country experiences have shown that there are different approaches and strategies for achieving UHC and each country will have to adopt and adapt those best suited to its context.
- 4. In recent years, there has been increased focus on national and international efforts to overcome the challenges set forth above. The Panel Discussion aims to deepen the ongoing brainstorming in the context of the African Region and make concrete recommendations to accelerate progress towards UHC.

OBJECTIVES

- 5. The objectives of the Panel Discussion are:
 - (a) To enhance understanding of the core concepts of UHC.
 - (b) To identify ways and means of addressing the challenges hindering progress towards UHC in the African Region.
 - (c) To identify strategies for strengthening the countries' health systems performance capacities including innovative health financing mechanisms towards achieving UHC.
 - (d) To make recommendations for accelerating the implementation of appropriate policies and actions towards UHC.

EXPECTED OUTCOMES

- 6. The expected outcomes are:
 - (a) Understanding of the core concepts of UHC enhanced.

WHO. The World Health Report 2010 health systems financing: the path to universal coverage. Geneva, World Health Organization, 2010.

- (b) Ways and means of addressing the challenges hindering progress towards UHC in the African Region identified.
- (c) Strategies for strengthening the countries' health systems performance capacities including innovative health financing mechanisms towards UHC identified.
- (d) Recommendations for accelerating the implementation of appropriate policies and actions towards UHC made.

7. PROPOSED PANELISTS

- (a) Chairman: Minister of Health, Botswana
- (b) Two key speakers for the technical presentations
- (c) Panellists:
 - (i) Minister of Health, Ghana
 - (ii) Minister of Finance, Republic of Congo
 - (iii) Professor Morgan Chetty, Head, South Africa General Practitioners' Association.

8. PROPOSED PROGRAMME

- (a) Opening remarks and introduction: Chairman (5 minutes).
- (b) Two technical presentations by the key speakers:
 - (i) *Universal health coverage: from concepts to practices*, by Dr David Evans, Director, Health Financing, WHO headquarters (10 minutes).
 - (ii) Meeting UHC needs through sound national health care delivery models, by Dr Pate, State Minister of Health, Nigeria (5 minutes).
- (c) Interventions by three panelists (7 minutes per panelist) and by Professor Diane McIntyre, Professor of Health Economics, South Africa (5 minutes).
- (d) Discussion, questions/answer(s) and recommendations: participants, presenters and panellists (70 minutes).
- (e) Closing remarks by the Chairman (5 minutes).