Universal Health Coverage: Monitoring Progress at Global and Country Levels

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Joint WHO / World Bank Group UHC Measures
Outline

• Process

• Definition /Principles

• Methods & measures

• Global and Country Monitoring
Process

• Framework builds upon:
  – Informal consultations with representatives of Member States and others
  – Technical meetings in past 2 years: Rotterdam, Washington DC, Bellagio, Dhaka

• Ongoing work:
  – case studies with researchers and MOH in 14 countries + technical contributions (to be published as PLoS Collection)

• Discussion paper on the web
  – Launched Dec 6 2013 in Tokyo
  – Consultations until 15 Feb 2014

• Revised version ready by mid-March

• Final Paper and Measures to feed into the Post-2015 SDGs
Definitions/Principles
Universal health coverage
Definition and dimensions

• Definition: all people who need health receive them, without undue financial hardship

• Monitoring along three dimensions of UHC:
  – the full spectrum of quality health services according to need
  – financial protection from direct payment for health services when consumed
  – coverage for the entire population
Framework - Bringing together global and country perspectives

Global

• One monitoring framework, one common set of targets and indicators
• Regular standardized reporting and review of progress using the common indicators

Country

• No one-size-fits-all approach, but use of flexible global framework and guidance
• Country monitoring based on adapted set of tracer indicators ("progressive realization of UHC")
• Monitoring UHC aligned with country mechanisms of review of progress
Guiding principles for framework

• **Comprehensive**: two inter-related, but separate, UHC measures:
  – essential health services coverage for the population
  – financial protection coverage for the population.

• Encompass the full population **across the life cycle**, inclusive of all ages and gender.

• **Capture all levels of the health system**

• **Equity**: disaggregation by socioeconomic strata to assess the degree to which service and financial protection coverage are equitably distributed
Health Goals in the Post 2015 Development Agenda

DEVELOPMENT GOAL
Sustainable wellbeing for all

HEALTH GOAL
Maximizing healthy lives at all stages of life

Wealth, gender equity, education, nutrition, environmental, security etc.

Accelerate the MDG agenda
Reduce the NCD burden
Ensure Universal Health Coverage

Contributions of other sectors to health
World Bank New Goals

End Extreme Poverty by 2030

Boost shared prosperity (increase income of bottom 40%)
Translating the WB Goals to the HNP Global Practice

Financial Protection
No one should be impoverished due to out-of-pocket expenditures.

Service Coverage
Communities & individuals, especially bottom 40% receive the quality health services they need through the life cycle and be protected from public health risks.

Healthy Societies
Promoting investments & activities that are the foundation of healthy societies, e.g., water & sanitation, agriculture, education, social protection, gender, environment, taxes and regulations, etc.
The Emerging Context of the Post 2015 Development Goals

• Eliminating Extreme Poverty
  – Financial protection + coverage of health services matter!

• Growing demand for UHC as a goal

• Two priority groups of health conditions
  – MDGs: infectious killers, MNCH focus
  – Chronic Conditions and Injuries (CCIs): mainly affecting adolescents, adults + elderly

• Consensus on measures: MDGs, CCIs

• Hardwiring of equity into all targets
  – 40% lowest part of income distribution, gender etc.
Methods
Intervention / Service coverage

- Many possible interventions for countries to monitor: progressive realization

- Many coverage and risk factor reduction indicators e.g. Countdown 2015 for MNCH, UNGA NCDs etc.

- But also many gaps, especially for treatment

CRITERIA FOR INDICATOR SELECTION

- **Relevance**: addresses health priority, is a cost-effective intervention

- **Quality**: "effective" coverage

- **Availability**: standard methods, measured on regular basis, disaggregation possible, comparable
Full spectrum of interventions addressing health needs

Communicable, maternal, perinatal, nutritional conditions (MDGs)

Promotion and prevention
- Family planning
- Pregnancy care
- Immunization
- Water & sanitation
- Nutrition
- HIV
- Malaria
- Neglected Tropical Diseases

Treatment & care
- Delivery
- Sick children
- HIV
- TB
- Malaria
- NTD

Non-communicable diseases, mental health, injuries (CCIs)

Promotion and prevention
- Non-communicable diseases (NCD), including cancer
- Mental health
- Injury
- Occupational health
- Environmental health

Treatment & care
- NCD, including cancer
- Mental health conditions
- Injury
- Rehabilitation
- Palliation

Indicators of intervention coverage among population in need (with equity and quality ("effective coverage") dimensions)
Two Measures of Service Coverage

• MDGs and CCIs
  – These capture breadth of priority health problems
  – Cover the life cycle and gender issues
    • MDGs - mothers/children/adolescents
    • CCIs - adolescents/adults/elderly
  – Cover levels of the health system
    • Population/ambulatory services
    • Facility based services
Two measures of financial protection coverage

• Incidence of **catastrophic out-of-pocket spending**, i.e. spending exceeding a threshold of a household's 'ability-to-pay’

• Incidence of 'impoverishment' arising from out-of-pocket spending

Both measures: re-scaled to 100%:
- 100% = no catastrophic expenditure
- 100% = no impoverishing payments
Equity Measures

• UHC is fundamentally about equity – all people get what they need and all people protected from financial risk

• Equity measures for service coverage and financial protection
  – Focus on coverage in poorest 40% (WB "shared prosperity" goal)
  – Recognize other equity dimensions also important for countries
Targets

• **Services Coverage: “80 / 40”**
  – At least 80% service coverage in poorest 40%

• **“Zero Financial Risk”:**
  – 100% financial risk protection from catastrophic & impoverishing expenditures
UHC Measures
Example: Coverage of Services for MDGs and CCIs – related Intervention (WHS 2002-03)

Coverage of Services for MDG and CCI, by Region

Source: World Health Surveys.
MDG tracers: Treatment of ARI, diarrhea, malaria and TB; Voluntary counseling and testing for HIV; Full immunization; 4+ antenatal visits; Skilled birth attendance.
CCI tracers: Care within 30 mins. of traffic and non-traffic accident; Treatment of angina, arthritis, asthma, dental problems, depression, diabetes, and mental illness; Mammogram; Pap Smear; Cataract removal.
Example: Financial protection indicators by region (WHS 2002-03)
Country monitoring of MDG and CCI indicators: example of national data, Ghana

MDG average: 60%

CCI Average: 47%
Example of UHC intervention coverage index based on MDG and CCI interventions
Country Monitoring
Country monitoring

• Framed within overall health systems progress and performance assessment: includes more on inputs, access, quality, health impact and determinants on health

• Additional coverage indicators included as country progresses on the road to UHC

• Equity stratifiers included as locally relevant

• Investments in monitoring systems needed:
  – regular comprehensive household surveys
  – good quality, timely, health facility data
Global Monitoring
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Contributions of other sectors to health
Global level monitoring for UHC

One  Goal
Two  Targets
Three  Indicators Financial Protection
Four  Indicators Service Coverage
One Goal for UHC

- Reach UHC by 2030 in all countries
  - all people have access to the quality, essential services they need without financial hardship
Two Targets for UHC

1. By 2030: at least 80% of the poorest 40% of the population have coverage to ensure access to essential health services.

2. By 2030: everyone (100%) has coverage to protect them from financial risk, so that no one is pushed into poverty or kept in poverty because of expenditure on health services.
Three indicators of Financial Risk Protection Coverage

Impoverishing Expenditure:

1.  *Aggregate*: a measure of the level of household impoverishment arising from out-of-pocket expenditures on health, equal to the ratio of the poverty gap in a world without out-of-pocket payments to the actual (larger) poverty gap.

Catastrophic Expenditure:


3.  *Equity*: the fraction of households among the poorest 40% of the population incurring catastrophic out-of-pocket health expenditure
Four Indicators of Health Services Coverage

MDGs

1. **Aggregate**: a measure of MDG-related service coverage that is an aggregate of single intervention coverage measures for the health MDGs
2. **Equity**: A measure of MDG-related service coverage for the poorest 40% of the population.

CCIs

3. **Aggregate**: a measure of CCIs-related service coverage that is an aggregate of single priority interventions to address the burden of non-communicable diseases, including mental health and injuries.
4. **Equity**: a measure of CCI service coverage for the poorest 40% of the population.
World Bank New Goals

End Extreme Poverty by 2030

Boost shared prosperity (increase income of bottom 40%)
UHC is guiding the World Bank’s work in Health, Nutrition, and Population

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Thank You