

*Existing challenges to achieve UHC by 2032 in
Bangladesh*

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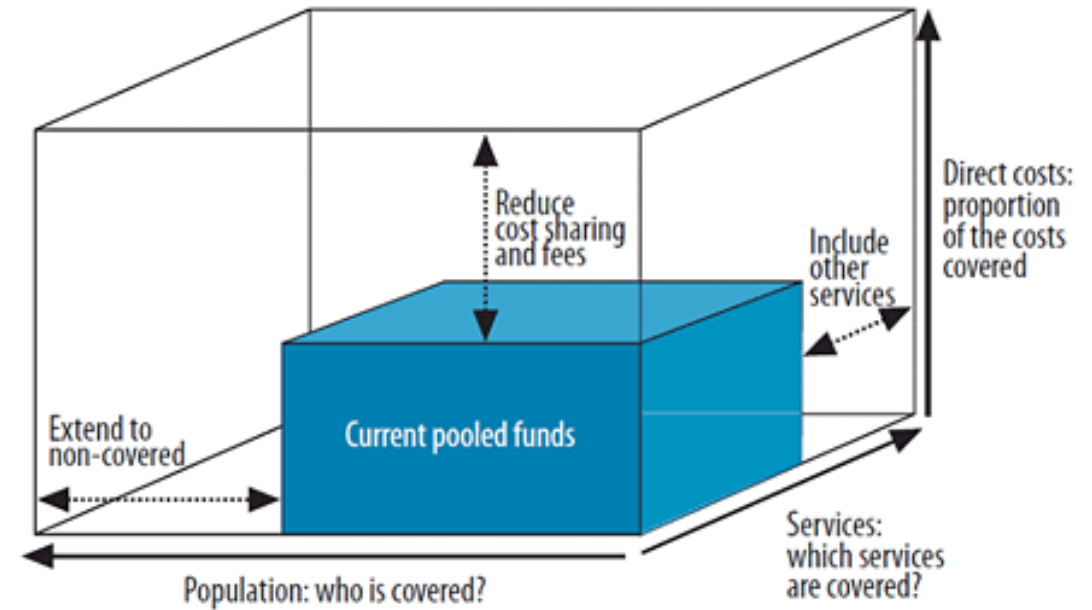
Ministry of Health and Family Welfare

Universal Health Coverage

According to the World Health Organization (WHO), Universal Health Coverage (UHC) means that **all people have access to the health services they need, when and where they need them, without financial hardship.**

UHC has three dimensions with respect to coverage (Who), services (What), and financial protection (How).

- **WHO:** All people, including the poorest and most vulnerable.
 - **WHAT:** Full range of essential health services.
 - **HOW:** Costs shared among entire population through pre-payment and risk-pooling
- UHC is a destination , not a goal



Three dimensions to consider when moving towards universal coverage

TARGET **3•8**



**ACHIEVE UNIVERSAL
HEALTH COVERAGE**

Universal Health Coverage is the part of Sustainable Development Goal: 3

**Ensure Healthy Lives and Promote Well-being for
All at All Ages**



SDG Target 3.8

SDG Target : 3.8 “Achieve universal health coverage, including financial risk protection, access to quality essential health- care services and access to safe, effective, quality and affordable essential medicines and vaccines for all”.



Indicator 3.8.1 Coverage of essential health Service



Indicator 3.8.2 Proportion of Population (proportion of population face catastrophic expenditure) with large households expenditures on health as a share of total household expenditure or income

How UHC be measured?

Monitoring progress towards UHC should focus on 2 things

- The proportion of a population that can access essential quality health services
- The proportion of the population that spends a large amount of household income on health

UHC Coverage Index

Together with the World Bank, WHO has developed a framework to track the progress of UHC by monitoring both categories, taking into account both the overall level and the extent to which UHC is equitable, offering service coverage and financial protection to all people within a population, such as the poor or those living in remote rural areas.

WHO has come up with an integrated assessment framework that include-

1. Coverage index of essential health services grouped into four categories
 - Reproductive, maternal, newborn, and child health
 - Infectious diseases
 - Non-communicable diseases
 - Service capacity and access
2. A measure of financial protection against the costs of services

**UHC can only be achieved
when the health system is
strong”**

- (WHO, 2010)

Key Indicators Progress

Coverage Essential Service index	56%ⁱ
Population with large health expenditures as a share of total expenditure or income	24.7% (10% threshold) ⁱⁱ

ⁱ Joint estimate of MOHFW and WHO, 2021. According to WHO-SEARO estimates, coverage index for Bangladesh is 50%

ⁱⁱ Household Income and Expenditure Survey, 2016, BBS

Couple of questions

- What do we need to get healthy?
- What do we need to be healthy?
- What do we need to stay healthy?
- Do we get help from well trained work force?
- Do we get treatment that helps us get better?
- Do we get medicines and other health products we need?
- The big question is who will pay the bill?
- Are there policies in place to make quality services available to everyone everywhere?
- Do we have information available to make the right decisions?

Key Challenges

- Inadequate funding for whole health system [3-4% of GDP]
- Poor predictability of budget allocations and low budget execution
- Essential Service Package exists but adequate budget do not flow to ensure delivery
- Insufficient use of resources
- High out-of-pocket expenditure which is 67% of Total Health Expenditure
- Ensure quality of Care
- Shortage of Human resources, lack of training, skill-mix imbalance quality service provision etc.
- Identification and reaching hard-to-rich areas and population (marginalized, socially excluded etc,)
- Lack of information on available services and lack of awareness regarding their own entitlements.

Key Challenges

- Inadequate capacity of regulatory bodies: HR, power
- Insufficient/non-functional coordination with Local Government Division for urban health
- Non-functional referral system [clients bypassing local health posts]
- Facility readiness
- Excessive use of unnecessary drugs and lab tests

Thank You