Abstract of parallel session: 15

Bridging the gap between health care research and policy

Title: Public Health Services and Universal Health Coverage: An unbalanced relationship

Presenting Author(s):   Rosemary James[1]

Institutes: 1) School of Medicine, National University of Galway, Ireland

Authors (s):   Rosemary James[1]

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Abstract

Background

Universal Health Coverage (UHC) was first endorsed by WHO at the 58th World Health Assembly in 2005 and is defined as "access to key promotive, preventive, curative and rehabilitative health interventions for all at an affordable cost, thereby achieving equity in access". Valuing UHC improves overall health outcomes while cost-effectively strengthening health systems and aiding to attain other Sustainable Development Goals (SDGs). However, it is becoming apparent that the promotive and preventive aspects are not being as prioritized in countries working toward UHC. UHC has been seen to not initially benefit communities that are at most need of health services. UHC in some ways, undermine public health services (PHS), compromising long-term health system investments. The Essential Public Health Operations (EPHOs), devised by the WHO Regional Office for Europe in, are the overarching framework for Public Health Service (PHS) delivery. There are ten, and they are all considered essential in any health system. There is yet to be a global framework for measuring UHC coverage - due to unique health needs of each country, and lack of available service coverage data. In spite of this, there are various tracer indicators which the WHO suggests member states use. In 2016 there was sixteen proxy tracer indicators proposed, to be the monitoring framework for UHC. These indicators fall under four categories: Service capacity and access, Reproductive, maternal, newborn and child health, Infectious Diseases, and Non-Communicable diseases (NCDs). However, as disease burden is shifting – with NCDs accounting for more than half the global burden of disease, and injuries for 11%, and Health System Strengthening rapidly becoming a sustainable trend, there has been pressure to add certain tracer indicators. Hence in recent literature, there has been "candidate indicators" arising. Candidate indicators, a "small set of potential UHC tracer indicators for diseases and conditions which are close to meeting the criteria for tracer indicator status" are selected based on the availability of data in countries, and the scope for their monitoring.

Methods

An analysis was conducted to estimate which UHC tracer indicators align with which EPHO. The EPHO descriptions from the Self-Assessment Tool and the tracer indictor metadata from the WHO's Technical Note was used for this comparative analysis, using systematic text condensation, which is defined as a descriptive and explorative method for thematic analysis of multiple collections of qualitative data. A two-step gap analysis was then conducted. The step-one analysis estimated which tracer indicators align with which EPHO to gauge the level of overlap. The step-two analysis was conducted to identify which EPHO services were not mentioned in the UHC tracer indicator method of measurement and estimation. The rationale used was subjective and based on the terminology used in each EPHO description and tracer indicator description. For analysis of the SDG indicators, the Revised List of Global SDG Indicators for these SDGs were mapped against the ten EPHOs, with causal pathway rationale to map which EPHO directly contributes to their attainment.

Discussion

When examining the UHC proxy tracer indicators, Surveillance, Research, and Disease Prevention are the EPHOs which most markedly impact UHC attainment. Mental health, substance abuse, nutrition, occupational safety, health literacy, self-management of chronic disease, and injury prevention are the EPHO services found to be least related to the UHC proxy indicators. In summary, the sixteen UHC tracer indicators are all somewhat related to the ten EPHOs. The EPHOS impact all UHC tracer indicators, and five SDGs. Overall, by measuring UHC, a member state is not gaining a picture of its PHS. In fact, it would be irresponsible to assume that having good outcomes for UHC is representative of a comprehensive PH system. UHC should therefore not be considered a good indicator of PHS coverage. It could be that a member state has attained exceptional UHC scores from the tracer indicators, yet not necessarily exceptional PHS, as the tracer indicators do not align completely with the EPHOs. Member states will not be able to gain a clear picture of their health services covered by UHC, without more comprehensive indicators, which balance the EPHOs proportionally.


Figure 1.0 The reversible relationship between PHS, UHC and SDGs to illustrate PHS contribution to the attainment of five SDGs.

Conclusions

It is evident that all EPHOs contribute to the attainment of UHC and five SDGs. Currently, there are PHS not comprehensively covered by the UHC tracer indicators, that need further attention or at the least, monitoring. UHC candidate tracer indicators should aim to be more conscientious of balance of the EPHOs. More focus should be placed on the EPHOs when measuring UHC, to ensure that all member states are investing in sustainable health systems strengthening, providing equitable health service

access for all. Therefore, EPHO self-assessments should also take place alongside UHC measurement, to comprehensively strengthen health systems.
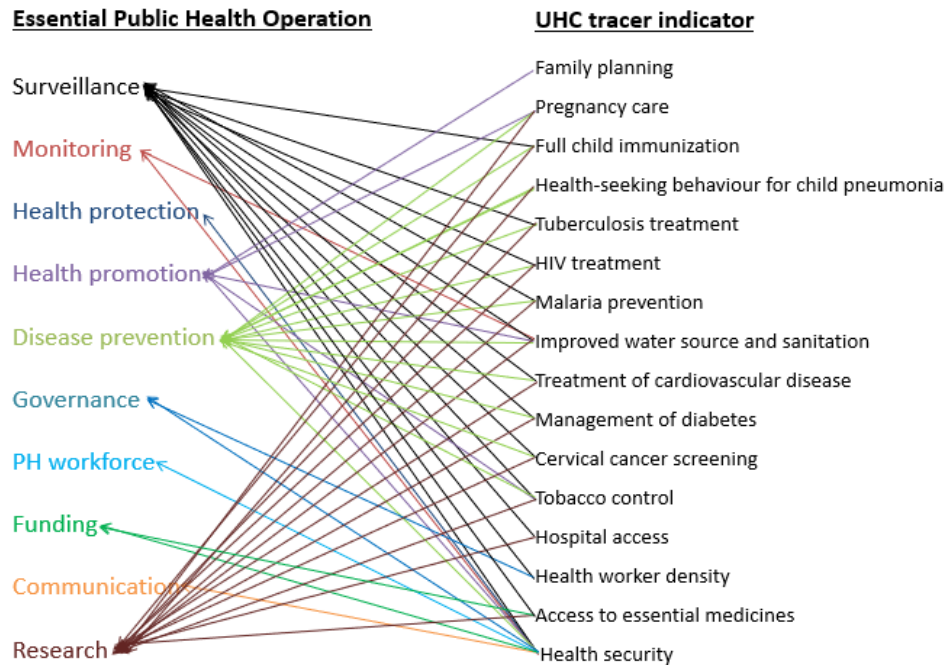
Figure 2.0 An unbalanced relationship is seen between the sixteen UHC proxy tracer indicators and the ten EPHOs.

Key points

1. Essential Public Health Operations directly contribute to the attainment of five Sustainable Development Goals and to UHC achievement.

2. All ten Essential Public Health Operations contribute to all sixteen UHC proxy tracer indicators, to an extent.

3. When considering the balance of the UHC proxy tracer indicators against the Essential Public Health Operations, there is heterogeneous coverage. There are indications that this current basket of tracer indicators is not a balanced measure, nor inclusive, of the full spectrum of Essential Public Health Operations. However, all Essential Public Health Operations are essential.

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