

# EU boosts healthcare plan

By Gloria Nakajubi

Experts under the European Union funded SPEED project implemented by Makerere University School of Public Health have put together practical interventions that could accelerate Uganda's dream of achieving quality and universal health care.

Titled *Universal Health Coverage In Uganda: Looking Back and Forward to Speed Up the Progress*, the 454 page book gives a nuanced discussion on health care challenges and practical interventions.

The book that was edited by associate professor Freddie Ssengobu, Suzanne N. Kwanuka, Elizabeth Rutemberwa and Elizabeth Ekirapa-Kiracho is a product of the three-year project that was funded to the tune of €3.1m (about sh15b).

Discussed under the five major themes coverage reforms, governance, financing, service delivery and priority interventions, the project brings together over 50 experts from a multidisciplinary background and organisations such as the Economic Policy Research Centre at Makerere University, National Planning Authority, Uganda National Health Consumers Organisation, the Human Sciences Research Council in South Africa and the Institute



Thomas Tiedemann, Ag head of European Union Delegation to Uganda exchanges copies of books with Sarah Opendi, the state minister for Health as other officials from Makerere University look on after the universal health coverage book launch at Serena Hotel Kampala on May 3. Photo by Juliet Kasirye

of Tropical Medicines in Antwerp, Belgium.

**Specific chapters**

The specific chapters according to the book were devised from the perspective of applied policy analysis – where policy problems are analysed from vital perspectives of stakeholders, beneficiaries and systems capabilities.

Unlike conventional analyses, policy analysis seeks to explicate the problem within its real-life context. "Applied policy analysis was used to clarify and frame

the problems for policy actions and innovations. In this process, the authors make attempts to find actors and entry points to resolve the problems within the context of vital stakeholders, resources and institutions. This is vital to identifying the technical and political economy variables that are central to understanding the problem and identifying feasible solutions," reads the forward.

**Coverage**  
This theme explores such topics as framing the

**THE DEVELOPMENT PARTNERS CONTRIBUTE 46.5%, WITH PRIVATE SOURCES ESPECIALLY HOUSEHOLDS AND HEALTH INSURANCE TAKING UP THE 38.4%**

determinants of health and well-being for universal health coverage as discussed by Ssengobu and Charles Hongo.

It also covers universal health coverage (UHC) and social protection agenda, challenges and policy considerations for Uganda by John Sokamete, Judith Matabazi and Aloysius Ssenyonjo and how developments at global and regional levels are influencing progress towards universal health coverage in Uganda as discussed by Remco van de Pas, Aloysius Ssenyonjo and Barr Criel.

UHC as discussed by experts is meant to promote health care without the concept is aimed at mitigating catastrophic health expenditure by making services affordable to all and comprehensive enough to address the health care needs of individuals in the community.

Universal coverage evokes the principle of equity and social protection – "leaving no one behind". Health as expressed by the experts is not a one ministry objective and therefore there is need to have these mainstreamed into social and development programming. Health in all policies is thus

service delivery terrain has become progressively more marketised to the detriment of the population, especially the poor.

These are some of the issues that make governance particularly sticky but critical for universal health care. In responding to the above challenges, the experts propose the following interventions:

- A deliberate shift in health policies from planning for universal health care to promoting health.
- The health ministry and the Office of the Prime Minister should endeavour to holistically promote health by emphasising sectoral collaboration across education, water and sanitation sectors.
- Others are road, works, agriculture and environment sectors using the health-in-all-policies strategy.
- Strengthen regulatory, accountability and enforcement mechanisms at all levels and across different sectors in the health sector.
- Health development partners (HDPs) should be monitored to ensure that it does not lead to inequity in service delivery or threaten the resilience of the system.
- The Government should strengthen community governance systems for oversight over the health, water, sanitation and environment. Added to that is education, agriculture and nutrition sectors to ensure accountability at population level.

"In order to discuss the implications of good governance for UHC in Uganda, it is necessary to reiterate that the state, as an organ in charge of the health system needs to ensure that its policies facilitate fair approaches to providing preventive, curative, rehabilitative and palliative health services of sufficient quality to the whole population," the experts emphasise.

**Financing**  
Financing for health care remains one of the single most complex factors at the heart of health service delivery in the country.

Currently, Uganda covers just about 15.3% of the entire health sector budget. The development partners contribute 46.5%, with private sources especially households and health insurance taking up the 38.4%.

Under the financing theme, the different authors delve into such topics as resource mobilisation in the context of moving towards universal

# through new book

## Priority interventions

resources and health risks for universal advancement in Uganda and purchasing health care services for universal health coverage.

Health financing according to the experts is about raising adequate funds for health in ways that ensure people can use needed services and are protected from financial catastrophe or impoverishment associated with having to pay for them.

In one of the chapters under this theme, Baine and others argue that the Government budget allocation to health has consistently been low with the biggest percentage borne by external funding and household out-of-pocket expenditure.

This they say raises sustainability, access to services and financial catastrophic concerns.



Thomas Tiedemann, the head of European Union Delegation to Uganda with Sarah Opendi launching the Universal Health Coverage book at Serena Hotel Kampala

**Achieving UHC**  
To achieve UHC in Uganda, the team proposes a number of interventions:

- Adoption of alternative financing mechanisms to increase funding for health.
- These may include tax reform to incorporate alternative tax measures such as 'sin-tax', tapping into the informal sector resources and promoting health insurance.

- Improvement of efficiency gains, especially by streamlining procurement systems, monitoring and supervision and enhancing absorptive capacity within the health sector.
- Strengthening the resource co-ordination mechanisms that brings together external funds in a basket will improve

planning and implementation, the alignment of funds to essential or priority national health interventions and programmes and reduce duplication of resources and effort.

In the longer term, the government should gradually reduce dependence on external funding.

The last theme handled in the book explores such concepts as health promotion, making family planning programmes accessible for all, non-communicable diseases in low income countries, outbreak management, child survival and maternal health.

Health promotion as discussed in the book contributes to disease prevention which reduces the amount of sickness in the population, thereby reducing the number of hospital visits and, presumably, lowering the costs of health care.

Citing examples such as the successful campaign that saw the reversal of the devastating trend of HIV epidemic in the 1990s, health promotion remains a model that needs to be considered significantly in a bid to achieve UHC.

The book as expressed by the health minister Sarah Opendi during the launch held at Serena Hotel in Kampala last week will work as an important guide in policy and decision-making as the country moves to transform the health sector.

Health (PPPI) framework to include mechanisms to tap into private organisations corporate social responsibility (CSR) obligations and channel them into health.

**Service Delivery**  
Through discussions around physical health infrastructure, health workforce development and managing health technologies to advance universal health coverage, the authors under this theme explore the tools or resources that support service delivery.

This covers buildings, plants medical devices (equipment for health facilities and IT equipment), transport

and health care waste management. The absence or presence of certain physical infrastructure according to the experts may sustain or impede the expansion of health services and access to health services by certain populations. It can also lead to high costs of health care.

For UHC to be realised, experts argue that the public and private sectors need to be co-ordinated as one health care system, an effective referral system should be instituted, it should ensure that all populations are served and that services are accessible and safety nets instituted.

### Congratulations

Riverzoni Consortium for Civic Competence (RWCO) and Hivos join the rest of the world in congratulating the European Union upon achieving 65 years of shared progress as they mark the Europe Day since the treaty of Rome. We highly appreciate your continued support towards peace building in the Riverzoni region. RWCO and Hivos are implementing a project on community action to prevent and manage conflicts and human rights violations in the Riverzoni region of Uganda (Kasese, Kamwenge, Moroto and Bandedigo Districts) funded by the European Union for three years (2016-2018).

Through this project we have trained 40 Foot Peace Ambassadors (FPAs). They have been instrumental in training of 1200 community members in peace building and conflict analysis, facilitated quarterly grassroots meetings on promoting peaceful coexistence and sports for peace events in the region. Documented community conflicts and human rights violations issues and presented them to leaders for action. The FPAs have reached more than 12,000 community members who are assisting in mitigating conflicts in the region.

Our close collaboration with heads of cultural institutions, FBOs and Local Governments as change agents has enhanced cooperation among different agencies and entities further contributing to a peaceful coexistence in the region.

look forward to continued cooperation and collaboration with the EU as we seek lasting peace in the Riverzoni region.

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RWCO IS A CONSORTIUM OF:

## Supporting Policy Engagement for Evidence-based Decisions (SPEED) for Universal Health Coverage in Uganda

The SPEED Project, Makerere University School of Public Health, congratulates His Excellency the Ambassador Attilio PACIFICI - EU Ambassador to Uganda on the EU Day 2018

SPEED was launched in 2015, and is a five-year partnership – supported by European Union (EU). The Partnership comprises Makerere University School of Public Health (MaSPH), Uganda National Health Users Consumers' Organisation (UNHCO), Economic Policy Research Centre (EPRC), National Planning Authority (NPA), Institute of Tropical Medicine (ITM) Antwerp Belgium, and Human Science Research Council (HSRC), South Africa. The main objective for SPEED is to strengthen capacity for policy analysis, advice and influence. At MaSPH and partner institutions and contribute to accelerating progress towards Universal Health Coverage (UHC) and health systems resilience in Uganda. With the generous funding from the EU, SPEED has been able to register tremendous achievements in advancing the UHC agenda in Uganda. We highlight below a few areas of SPEED engagement within the last one year:

- 1 The International Symposium on Health Financing for Universal Health Coverage in Low and Middle Income Countries.**
- 2 The Malaria Prevention Campaign and Launch of the Mass Action Against Malaria (MAAM)**

stakeholder has to play in advancing the UHC agenda in their respective contexts.

Presentations and discussions centred around five key themes: (1) Ensuring financial risk protection using public funds; (2) Risk sharing and pooling through insurance; (3) Leveraging health benefits from investment in non-health sectors; (4) Strategic purchasing and results-based financing (RBF); and (5) Global health initiatives and innovative financing.

In a symposium statement, various stakeholders and duty bearers, including government reaffirmed their commitment to work towards the realization of UHC including by lobbying and advocating for additional budget allocation to the health sector; Creating a framework for workable multi-sectoral collaborations for health, creating a balance between the curative and preventive agendas, streamlining health system governance and accountability, and implementing strategic health financing reforms that enhance efficiencies and value for money in the health sector.

Malaria prevention has been one of the key advocacy areas for SPEED work, owing to the burden that malaria inflicts on the Economy, and wellbeing of the population. In this regard, SPEED has been working with various stakeholders in not only providing evidence of but also advocating for implementation of effective malaria control interventions. SPEED has closely worked with and provided research evidence and technical support to the Uganda Parliamentary Forum on Malaria (UPFMA), the Ministry of Health, Health Control Program, Non-State Actors, World Health Organization, among others. Key milestones include: Profiling malaria in Uganda, participation in high level engagements, technical and policy makers, Minister of Health, Members of Parliament who are key decision makers, and the Speaker of the Parliament of Uganda. These efforts culminated into the launch of the Mass Action

His Excellency Yoweri Kaguta Museveni, President of the Republic of Uganda, The President committed up to US\$ 300 Billion fund to fight and eliminate Malaria from Uganda, through a multi-pronged approach including Scaling up IIRS, LLITNs, Larvae spraying, among others.

Honourable Sarah Opendi (Minister of State for Primary Health Care) and Mr. Thomas Tiedemann (Acting Head of Cooperation at the EU Delegation in Uganda) officially launching UHC-SPEED book

Completion and Launch of the Universal Health Coverage Book

One of the core areas of SPEED work, has been providing relevant evidence and technical advice to policy makers and stakeholders. As Uganda continues to shape its roadmap towards the realization of UHC in Uganda, it is imperative to document the evolution of the health system that is charged with spearheading the UHC agenda. The book: 'Universal Health Coverage in Uganda: Looking Back and Forward to Speed up the Progress' was written by the SPEED Team together with varied experts, and was launched on May 3, 2018, by the Minister of State for Primary Health

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