Focusing on local community involvement, coordinated financing and strengthened digital platforms for sustainable universal health coverage

Key messages

- Mobile network operators, digital and online repository (archive) platforms such as health information systems play a vital role in the description of epidemics, health related risks and their potential spread, vaccine coverage, resource allocation and intervention scale up. This is critical in management and decision-making towards sustainability of universal health coverage (UHC) and sustainable development goals (SDGs).

- Local healthcare workers and communities have valuable experiential knowledge about their landscape hence the need to involve them in participatory planning processes such as priority setting and resource allocation.

- Cross-sectoral collaboration and sound coordination are key facilitators in the financing of sustainable UHC and SDGs.

Introduction

Universal health coverage (UHC) ensures that all people have access to health services when and where needed without financial hardship. The delivery of these services is anchored on 3 pillars: service delivery, health financing and population coverage. Achieving UHC is one of the world nations’ targets set when adopting the SDGs in 2015. The UHC pursuit by countries is critical to improve equity in health services, provide quality services and financial protection for their populations.

Health financing policy is an integral part of efforts towards UHC, aligned to the pursuit of UHC and health system reforms that need to improve coverage. In Sub-Saharan Africa (SSA), 27 out of 48 countries are affected by direct out-of-pocket payments (OOPs) for healthcare services that are greater than 30%.

Protecting populations from the negative financial consequences of paying for health services out of their own pockets reduces the risk of impoverishment resulting from use of life savings, sale of assets and unsustainable borrowing resulting in families being trapped in vicious cycles of poverty. UHC includes the full spectrum of essential quality health services, from health promotion to prevention, treatment, rehabilitation, and palliative care across the life course.

In Africa, innovative strategies such as digital health platforms are needed for attainment of the ambitious UHC. The promise of digital health to advance the UHC 2030 agenda has increasingly taken center stage with the World Health Organization (WHO) pushing for digital solutions. The growth in the use of mobile phone around the world is expanding the reach and potential of digital health solutions. It has been established that 67% of the global population is currently subscribed to mobile phone services, with some 700 million new mobile subscribers predicted to join by 2025 (Natalie Donback, 2019).

The relationship between health-care professionals and community members has an impact on the health and well-being of both groups. The outcomes of these interactions influence and determine how the health system performs to achieve a shared UHC goal (see table 1).

Review process

A review team was constituted that had members of the 8th East African Health and Scientific Conference (EAHSC) who had an interest and were currently involved in work that was related to the theme. This team reviewed relevant abstracts presented during the conference touching on the identified theme. A summary of the key messages was made. Additionally, a search was made on PubMed and Google Scholar on relevant published articles related to the theme and synthesis of the same done. This was to identify and document corroborating evidence to work presented in the conference. Overall synthesis was then done and this is presented in this brief as key messages and recommendations for consideration by the Partner States.
### Table 1: Related publications cited

<table>
<thead>
<tr>
<th>Study title</th>
<th>Intervention</th>
<th>Key findings</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kiendérébéogo, J. A., et al., (2021). Reinforcing locally led solutions for universal health coverage: a logic model with applications in Benin, Namibia and Uganda. BMJ global health, 6(2), e004273. <a href="https://doi.org/10.1136/bmjgh-2020-004273">https://doi.org/10.1136/bmjgh-2020-004273</a></td>
<td>African Collaborative for Health Financing Solutions (ACS)</td>
<td>Technical assistance to low-income and middle-income countries takes a top-down approach as a pre-packaged set of activities that stifles programme co-design and local capacity building in a way that skirts real country needs and hampers local ownership. Innovative approaches are needed to equip local communities and governments with the required skills and resources to put countries in control so that local actors can steer their own UHC processes and maintain responsibility to move them forward.</td>
<td>Supporting change is a long-term endeavor and broad support from all stakeholders is essential for a real paradigm shift in donors’ relations with their country counterparts, for effective and lasting results. Africa suggests processes focused on promoting demand-driven knowledge exchanges and learning; multi-stakeholder and sectoral collaboration; and accountability mechanisms which hold great potential to help overcome obstacles in progressing towards UHC.</td>
</tr>
<tr>
<td>Kutzin J. (2013). Health financing for universal coverage and health system performance: concepts and implications for policy. Bulletin of the World Health Organization, 91(8), 602–611. <a href="https://doi.org/10.2471/BLT.12.113985">https://doi.org/10.2471/BLT.12.113985</a></td>
<td>Health Financing</td>
<td>Health financing for universal coverage implies that reforms in collection, pooling, purchasing, and benefit design are aimed specifically at improving one or several of those objectives and goals, as measured at the population or system level.</td>
<td>All health financing systems perform these functions, and as stated in the World Health Report 2010, every country can do something to move towards UHC.</td>
</tr>
<tr>
<td>Tumusiime, P., et al., (2019). Towards universal health coverage: reforming the neglected district health system in Africa. BMJ global health, 4(Suppl 9), e001498. <a href="https://doi.org/10.1136/bmjgh-2019-001498">https://doi.org/10.1136/bmjgh-2019-001498</a></td>
<td>UHC-friendly district health system</td>
<td>African countries have adopted primary health care (PHC) approaches in their national plans and strategies to improve health outcomes and recognize the central position of the district health system (DHS) in its delivery. The DHS is the closest administrative level to the people that was created by the colonialists to be completely subordinate to the central government to the extent that it is unable to effectively anchor UHC.</td>
<td>A UHC-friendly DHS must have authority to make informed decisions, set its priorities, develop management capacity, and control and channel its resources towards the development of a UHC that is equitable and accessible.</td>
</tr>
</tbody>
</table>
Focusing on local community involvement, coordinated financing and strengthened digital platforms for sustainable universal health coverage.


Community engagement is an important process in the implementation of health interventions. Community engagement is also an important means of identifying mechanisms to move towards UHC as well as an end in itself. To support and promote community engagement as normative within the context of health systems, the evidence base needs to be strengthened.

Engaging communities in decisions that affect their lives is key to strong and robust societies translating to sustainability.


Community engagement is also important in the identification of mechanisms to move towards UHC as well as an end in itself. To support and promote community engagement as normative within the context of health systems, the evidence base needs to be strengthened.

UHC will not be achieved until health systems and their diverse stakeholders are ready to engage with each other in effective ways.

Maarten Paul Maria Jansen; et al. (2019). A sustainable approach to universal health coverage. Open Access Published: August, 2019. DOI:https://doi.org/10.1016/S2214-109X(19)30252-9

Evidence informed deliberative processes (EDPS) framework for local health authorities and communities. The EDPs framework can facilitate priority setting for universal health coverage.

Local health authorities and communities need guidance on how they can set fair and sustainable priorities. The EDPs framework can facilitate priority setting for universal health coverage.

Results

During the East Africa Health Scientific Conference subtheme 4 focusing on UHC, seven abstracts were presented as shown in table 2 below. The discussion was on cascading, financing, community involvement, digital platforms, and cross-collaboration for health diplomacy towards attainment and sustainability of UHC in the region.

Table 2: Findings from the abstracts

<table>
<thead>
<tr>
<th>Study title</th>
<th>Intervention</th>
<th>Key findings</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessing elderly population health needs and health systems’ capacity for</td>
<td>Cascading UHC to all areas of the East African Region</td>
<td>The implementation of UHC policy and interventions in all Kenyan counties</td>
<td>The need to strengthen old-age specific health services in counties of Kenya</td>
</tr>
<tr>
<td>the implementation of Universal Health Coverage in Kenya. Priscah Otambo</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2021)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health diplomacy – a bridge to the internalization of the health financing</td>
<td>Cross -sectoral interventions in health financing</td>
<td>There is need for cross-sectoral interventions to facilitate UHC</td>
<td>There is need to implement strategies to bridge the gap between the haves and have nots</td>
</tr>
<tr>
<td>progress matrix in Burundi. Alexander Nimubona (2021)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Application of research evidence repository system for decision-making in</td>
<td>Research outcomes archives and repository systems in the region</td>
<td>Availability of online repository platforms enhances decision-making</td>
<td>Repository system can be cascaded into all the counties in Kenya and the region as a whole for evidence-based decision-making</td>
</tr>
<tr>
<td>Bungoma County, Kenya. Dennis Magu et.al., (2021)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Unlocking Mobile network operators (MNO) data to enhance decision-making and emergency response efforts in Malawi. Tenly Snow (2021)

Focusing on local community involvement, coordinated financing and strengthened digital platforms for sustainable universal health coverage

Mobile network operators (MNO)

MNO data can similarly be used to characterize epidemics and other health risks or events, vaccine coverage or their potential spread, health resource allocation and scaling

MNO can safely and ethically be integrated into traditional Ministry of Health (MOH) health information models

Critical review of literature on health financing reforms in Uganda progress, challenges, and opportunities for achieving UHC. Walter Dennis (2021)

Health financing reforms

Changes in focus of health financing objectives have been informed by low per capita expenditures.

There is need for comprehensive assessment of the bottlenecks in health financing

The use of stories-of-significant change to elucidate health systems changes with potential to inform universal health coverage national aspirations from six pilot counties in Kenya. James Kariuki (2021)

Local knowledge and processes innovations

County healthcare workers have valuable experiential knowledge about their local health landscape and their contribution during priority setting and resource allocation should not be overlooked by decision-makers.

Local knowledge and process innovations should supplement national guidelines in the realization of UHC and SDGs

Digitalizing Tanzania’s health system: Co-developing a national digital health strategy and primary health care roadmap to achieve universal health coverage. Eden Tarimo (2021)

Digital platforms

Digital platforms have a role in health information management towards attainment of UHC

A co-developed digital health system will help in attainment of UHC and SDGs

**Conclusion**

The conference had interactive sessions which focused on several approaches that can be applied towards the effective sustainability of UHC and SDGs. The abstracts presented approaches and innovations that can be applied to cascade health services equitably and efficiently in a timely manner.

**Recommendations**

- Strategies that involve cross-sectoral collaboration and coordination are pivotal and need to be incorporated into the sustainable financing of UHC.

- Local knowledge and process innovations are important in supplementing national guidelines for coordinating global health policy solutions to improve health for all and need to be incorporated by the governments and non-state actors.

- A co-developed integrated online repository system supplemented by mobile network operators securely and ethically anchored to traditional health information models need to be cascaded in the region for evidence-based decision-making towards the sustainability of UHC and SDGs.
### References


### Authors:

Rachel Githiomi¹, David Kariuki¹, Doris Njomo²

1. Ministry of Health, Nairobi, Kenya
2. Kenya Medical Research Institute (KEMRI), Nairobi, Kenya