UNIVERSAL HEALTH COVERAGE (UHC): INNOVATION, EQUITY AND THE NEW ECONOMY OF HEALTH

The Global Health Centre at the Graduate Institute of International and Development Studies in Geneva, the Johns Hopkins Institute for Applied Economics, Global Health, and the Study of Business Enterprise, and Rabin Martin, a global health strategy consultancy, have embarked on a research collaboration to explore several critical dimensions of the move to universal health coverage.

UHC has become the catchphrase for a game-changing new focus of the global health debate. It challenges all countries - regardless of their level of development - to make comprehensive health services available to all of their citizens in a way that uses available resources efficiently, ensures quality, improves health outcomes equitably and guards against the risk of catastrophic out-of-pocket expenditures.

Of course, countries will differ in the way they move toward universal health coverage, based on a wide range of factors – political, economic, social, epidemiological and technical. As UN member states define the new agenda around the post-2015 sustainable development goals, universal health coverage has been integrated as a key means to “ensure healthy lives and promote well-being for all at all stages”, and as a result is going to remain on the health diplomacy agenda for the coming years.

THE PROJECT AIMS

The starting point of this project is the insight that health and health care constitute a major economic force in most countries and that this economic relevance and power must be applied to support the goals of UHC.

This project proposes to explore the concept of a health economy, to define its scope and to understand its implications for the evolution of UHC over the coming decades.

Three workshops have already been conducted to frame the key direction of the project - in Geneva, Baltimore and on the occasion of the WHS in Berlin - bringing together about 60 high-level experts and decision makers.

The three workshops have confirmed that among some individuals in the global health community there is still mistrust in relation to markets and the role of the private sector in health, and many proponents of UHC are deeply suspicious of private sector engagement, be it of insurance companies, pharmaceutical companies or other private actors. At the same time, there is a significant expansion globally of private sector involvement in health, not only from the healthcare industry but also from new actors such as IT and social media companies, high powered consultancy firms, a wide range of suppliers as well as a new wave of foreign direct investment. This “health economy” is estimated to account for roughly 10% of global GDP. The actors involved in the health economy shape both population health and supply and demand of health service delivery, and contribute significantly to the wider macroeconomic, social and political context.

The project will explore the key governance challenges that arise for country governments, donor organisations, the private sector and civil society at the interface of the health economy and the drive to universal health coverage as a national responsibility of governments.

Questions that have arisen in the three workshops already conducted include: How will the global forces that drive the growth
of the private sector affect national health systems? Is it possible to have a health economy that is committed to fairness, quality and responsible use of societal resources and focused on producing health outcomes equitably? How can the private sector best contribute to the goals of UHC? What examples of common interest already exist? Do governments have a strategy for private sector involvement? Is regulation up to speed? How are things done? What works at scale? What fails? Can private sector involvement in UHC help marry the goals of innovation, equity and development? How do private providers influence policy at the national level? The project will draw upon the definitions and the debate on the “green economy” and on aligned goals in health care that have been conducted over the last several years to articulate a framework for understanding the private sector role in achieving universal health coverage.

Starting from the unique perspective of the rapidly changing global health economy, the project will apply the lenses of innovation, equity and development to better understand if it is possible to bring together key market and government actors to take UHC further within a specific country context. What role do regulation, multi-sectoral cooperation, and partnerships play in achieving universal health coverage? How to differentiate between the financing of UHC and the provision of UHC?

Some issues that have emerged from the three workshops already conducted include:

Innovation: What out-of-the-box solutions can the private sector contribute? Which innovations in service delivery have worked? What market incentives have been used and might be required? Rapid developments in telecommunication, for instance, are making cross-border solutions for health more accessible. MHealth is allowing outreach to populations not thought possible a few years ago — investments in broadband are becoming an important investment in health. New forms of social protection (social impact bonds) and social insurance as well as social business for health are being developed.

**Equity:** How can the private sector contribute to achieving universal health coverage? In many countries, access to affordable health care remains elusive. Yet, it is one of the most important mechanisms of poverty reduction. In these countries with limited resources the major part of health care is provided by the private sector, including informal providers; often this leads households to fall into poverty through out-of-pocket payments. Too many countries face limited capacity to regulate and to govern a public-private mix adequately, with due attention to such factors as market entry, pricing, purchasing and quality. As they expand coverage, too many countries neglect to invest in public health, health promotion and prevention. Chronic diseases cost rise as NCDs control is neglected.

**Development:** The global health industry is growing rapidly — presently it is calculated to be worth USD 6.5 trillion per year and predicted to grow to USD 10 trillion in the near future. New industries are entering the health market. Health care workers as well as patients are moving across borders and some countries are investing in health tourism in order to promote economic growth. Cross-border health threats are increasing — they include not only infectious diseases but also NCDs and antimicrobial resistance — and need to be controlled through innovation and cooperation. As countries invest significantly in expanding coverage, the danger of corruption and waste can increase if there are no appropriate regulatory safeguards. How to balance health as a right with health as a major global market?

**THE PROJECT APPROACH**

The project is built on the notion of dialogue. It will have both a research and a service orientation.

**Literature reviews:** Development and regular updating of an annotated bibliography on recent literature around UHC and in particular the role of the new economy of health. Available for download at: rabinmartin.com/our-insights/reports and graduateinstitute.ch/globalhealth/publications

**Situational analysis:** Analysis of the context in which this project is going to evolve, focusing in particular on on-going initiatives, projects, programs, and activities, such as the SDG implementation discussions, both to ensure this project responds to an unmet need and is complementary to on-going work in this domain.

**Mapping innovations:** Assessment of innovations related to the role of the private sector in UHC - the aim is to collect and analyse a number of innovative solutions using a set of established criteria, highlight their characteristics, discuss their potential impact and potential to be replicated.

**Stakeholder analysis:** Development of a guide outlining the main actors involved in this topic and stressing their respective roles and partnership opportunities, as well as underlining additional involvement opportunities, based on the identified innovations mentioned above.

**Writing & publication:** Publishing a book of scholarly essays that will include practical recommendations based on the project’s outcomes.

**A series of events and policy dialogues** will take place in the course of the project period to explore the different agendas related to the new economy of health and to launch the book.

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