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# ACCESS TO UNIVERSAL HEALTH COVERAGE THROUGH HIGH-PERFORMING HEALTH CARE

The term “Universal Health Coverage” or UHC, encompasses a concept of broad access to essential health care, including safe, effective, quality and affordable essential medicines and vaccines, along with protection from catastrophic financial risk.

Access to UHC means that all people and communities can use the promotive, preventive, curative, rehabilitative and palliative health care they need, of sufficient quality to be effective, while also ensuring that the use of this care does not expose the user to financial hardship. Access to UHC also means empowering people, families, and communities to take responsibility for their own health, as well to practice and promote positive, risk-avoiding behaviors for optimal health and well-being.

Meeting the goal of achieving access to UHC requires integrated care focused on the needs of people and communities. Health care organized around the comprehensive needs of people and communities will help empower them to take a more active role in their health and the delivery of care.

In most cases, access to UHC should incorporate all available resources, including financing, offered by both government and non-governmental actors, including the private sector and civil society, especially community- and faith-based organizations.

Achieving access to UHC requires contributions from public and private health institutions to meet a set of standards that collectively indicate high-performing health care. To help deliver on this aspirational goal, we work together to create high-quality health care that is **Accountable, Affordable, Accessible, and Reliable**.

We do this by supporting national efforts to create high-performing health institutions, whether public, private or non-profit; and by recognizing that a constellation of high-performing public and private health institutions make up a high-performing health system, in which people get the care they need in ways they trust. When they need care, it is available at an affordable cost, and within a reasonable distance.

High-performing health institutions promote, protect, and help maintain health for all people.

The U.S. Agency for International Development (USAID) contributes to the capacity of governments, civil society, and the private sector to become self-reliant, by allowing partners to implement durable, localized, comprehensive solutions to health care effectively and more thoroughly, and promoting commitment, responsiveness, and accountability at the local level.





## USAID builds **high-performing health institutions** through:

- Facilitating domestic investments;
- Focusing on primary health care;
- Supporting patient ecosystems;
- Strengthening civil society and the private sector;
- Bringing innovative approaches to scale;
- Paying deliberate attention to community and individual resilience;
- Engaging and aligning with partners across sectors; and
- Evaluating market dynamics for the development of innovative products and approaches.

## **ACCOUNTABLE** health care means **society as a whole works together to ensure care meets people's needs.**

*Oversight and collaboration on the quality of care and patient satisfaction are critical to accountability. In the Republic of Indonesia, USAID-funded civil society organizations (CSOs) successfully advocated for the Government to prioritize reducing the preventable deaths of moms and newborns. The Government designated funding for an effective hospital-referral system; new, updated training sessions for hospital health workers; and regular emergency drills. At one health center in a village called Kampili, these CSOs pinpointed low-quality care as the biggest challenge to safe, successful labor and delivery. This spurred the design and implementation of new training for Kampili's health workers, including midwives, to ensure they have the right skills and tools to stabilize laboring moms during emergency situations, increasing their chances for a healthy delivery. This joint effort has scaled up in 30 Districts and cities—in at least 150 hospitals and 300 health centers.*

## **ACCOUNTABLE** health care means:

- Communities, civil society, and the private sector engage with local, regional, and national governments as partners in the management, funding, and oversight of health institutions;
- Mechanisms are in place to ensure patients' privacy and satisfaction with care;
- Information regarding the financing, delivery, and outcomes of care (at a population level) are publicly available;
- Good health outcomes, supported by self-directed, family-centered positive health behaviors, are sustained;
- Licensing agencies and professional organizations are responsible for credentialing providers, accrediting facilities, and setting standards in partnership with the national (and/or local) government; and
- Recourse or appeal options are available for patients or communities dissatisfied with health care.

## **AFFORDABLE** health care means that money spent on care provides the best value possible.

*In 2016, Unitaid, in collaboration with the U.S. President's Malaria Initiative (PMI) and other partners, launched a partnership to stimulate the development of, and facilitate access to, new insecticides for controlling malaria. The Next-Generation Indoor Residual Spray Project uses a co-payment program to lower the cost of novel, long-lasting insecticides, while improving the forecasting of demand and fostering competition to keep prices affordable. By supporting increased access to, and use of, these long-lasting insecticides in 14 African countries, the partnership has expanded the market and protected approximately 76 million people from malaria.*

### **AFFORDABLE** health care means:

- Routine or unexpected health care costs, including for medications or supplies, do not impoverish people;
- People continue to seek needed care after considering the total cost of that care (e.g., the cost of services, drugs, supplies, transport and care for family members left behind or who accompany the patient);
- People opt to participate in pre-payment or insurance plans, to improve their ability to access health care and protect themselves from financial hardship because of illness;
- Governments allocate financial and human resources for health to meet priority needs, and work with the private sector and civil society to increase domestic funding and ensure the adequate distribution of such resources; and
- Safe and effective essential medicines are available without undue financial hardship to obtain them, along with mechanisms to ensure their responsible use (at the right time, for the right conditions, and at the right doses).



## **ACCESSIBLE** health care means it is available when and where people need it and can use it, and meets quality standards.

*In the United Republic of Tanzania, community health workers (CHWs) are critical sources of health information. Using a mobile application financed by USAID, CHWs had the technology and resources to reach more people. As a result, they increased the number of families registered to receive information on voluntary family planning and supplies by more than 300 percent. Though CHWs provide information and supplies directly in homes, the use of the mobile application allowed health workers to track registered patients more easily, and remind them when they are due for check-ups and continued care. This innovation has led to a 15-fold increase in follow-up visits in the home and to health facilities, compared to the paper-based registration system used previously.*

### **ACCESSIBLE** health care means:

- Health facilities and medicines are located within a reasonable distance, and are consistently open on a regular schedule known to the community, and have the staff and equipment to fulfill their designated functions;
- Alternative care options exist to extend the reach of traditional health facilities, including both paid and volunteer community health workers, as well as digital or e-health applications, drug shops/pharmacies, mobile outreach, etc.;
- Quality of care for priority interventions meets established standards from both providers as well as consumers, and is consistent across all facilities, regardless of whether they are public, private, non-profit, or faith-based;
- Emergency health care and related transportation are available;
- People understand when, why, and where to get the care they need and are motivated to seek it; and
- Providers deliver health care in a manner that ensures equitable health outcomes and promotes dignity and respect for all patients and providers.



**RELIABLE** health care is of high quality and delivered in a timely manner that promotes dignity and respect for all patients and providers.

*Under the Global Health Security Agenda (GHSA), the Republic of Senegal is improving the recruitment, distribution, retention, and motivation of health workers in hard-to-reach areas to improve capacity-building to prepare for outbreaks of deadly diseases. Health facilities along the borders with Ebola-affected countries closed during the 2014-2016 outbreak, which left residents of rural communities along the porous borders without nearby health facilities for routine care, even as the virus continued to spread. The Senegalese are building resilience through strengthening the workforce to prepare and respond to outbreaks. USAID helped the Ministry of Health in Dakar evaluate and update its National Human Resources Development Plan to include insights into the training and distribution of health workers throughout the country and permit the re-deployment of workers to meet needs in surveillance and response to infectious diseases.*

**RELIABLE** health care means:

- Health facilities and health workers have the right supplies and quantity of commodities needed to deliver care, including running water and sanitation services, reliable sources of energy, and appropriate procedures to prevent infections;
- Health workers have the knowledge, skills, motivation, credentials and cultural understanding to provide care; are engaged in continuing education; are regulated through professional and licensing associations, and supported through retention strategies;
- Health facilities are able to meet the standards of accrediting organizations, and effectively engage their communities and the people they serve;
- Systems to manage pharmaceuticals and logistics are in place so that medicines, devices and commodities are safe and of expected quality, and with controls that minimize the risk of theft or falsification;
- Health workers are safe from violence, assault, or harassment, and protected against natural disasters, disease outbreaks, and emergencies;
- Patients trust that institutions and providers will give them the care they need in a way that meets their needs respectfully, without stigma, shame, fear, or abuse; and
- Care continues during times of disruption, shock, or crisis.

