

WHO BACKGROUND GUIDE

Universal Health Coverage

INTRO:

The Universal Health Coverage (UHC) is an international health initiative which ensures that all people receive quality, essential health services without having to face financial issues. Despite all the advancements made, a lot of the world's population still lacks access to basic health care facilities. Rising cost of treatments, insurance, broken health systems and the economical inequalities between nations all create barriers to UHC. UHC aligns with Sustainable Development Goal 3 (SDG-3), emphasizing health equity.

Definition of Key Terms:

- Universal Health Coverage (UHC): Access to healthcare for everyone, without having to face financial issues.
- Health Equity: Fair access to healthcare resources, regardless of any socio-economic status.
- Primary Health Care (PHC): The first point of contact people have to medical services, including treatment, prevention, diagnosis.
- Out-Of-Pocket-Expenditure: Medical expenses not paid by insurance or government
- Health Financing: Systems that fund healthcare, delivery, etc.

General Overview:

Universal Health Care, or UHC, aims to guarantee healthcare access to everyone, without having to cause any financial strain or hardships. The issue was first noticed/Recognized with the Alma-Ata Declaration in 1978, and further reinforced through SDG-3 in 2015.

About 2 billion people yearly face financial hardship due to healthcare expenditures.

Many countries lack sustainable healthcare financing and lack trained workforce.

Low-Income/Developing countries struggle with medical infrastructure, supply chains, as well as corrupt insurance systems.

The issue is still prominent as unequal access to healthcare worsens outcomes, growing burden of both chronic, and infectious diseases, and the inflation in healthcare costs.

About 930 million people yearly spend at least 10% or more of their household income on medical expenses, and nearly 100 million people are being pushed into poverty annually due to medical finances.

Major Parties Involved:

- **World Health Organization (WHO);** leads global health efforts by setting international health standards, supporting countries in achieving Universal Health Coverage.
- **World Bank;** finances health-system development and provides policy guidance to help countries strengthen healthcare infrastructure.
- **Ministries of Health (of all concerned nations);** design and implement healthcare policies, manage public hospitals and insurance programs.
- **NON GOVERNMENTAL ORGANIZATIONS SUCH AS:**

Médecins Sans Frontières (MSF); MSF provides emergency medical care and essential health services in crisis zones.

PATH; PATH develops and deploys innovative health technologies and strategies to improve healthcare delivery.

Oxfam (Focusing mainly on poverty alleviation); Oxfam advocates for equitable healthcare access and social protection systems.

- **Private Insurance Sectors;** supply medical services, develop health markets.

TIMELINE OF KEY EVENTS:

1. 1978: Alma-Ata Declaration calls for “Health for All”
2. 2015: SDGs adopted using UHC objectives.
3. 2019: First Global UHC Monitoring Report.
4. 2023: Acceleration of UHC strategy by WHO.

Previous Attempts:

- WHO-UHC Partnership
- Financing initiatives of Healthcare by the World Bank
- Gavi & Global Fund support programmes.

Possible Solutions:

Expanding expenditure on public health and subsidized insurance.

Strengthening primary healthcare and tele-health access.

Regulation of medication prices and expansion of essential drug availability.

Public-Private Partnerships for hospital-technology development.

Proper Training and Recruiting of Medical Workforce.

Appendices:

- Alma-Ata Declaration (1978)

- SDG-3 Framework (2015)
- WHO UHC Monitoring Report

Bibliography:

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WHO BACKGROUND GUIDE REDO

TACKLING NON COMMUNICABLE DISEASES

Introduction:

Non-Communicable Diseases (NCDs, including Heart Diseases, Cancer, Diabetes, etc.) are the world's leading cause of death. Once considered as the illness of more wealthier populations, NCDs now haunt low-income, middle-income, and developing nations due to lifestyle risk factors, weak prevention systems as well as limited access to early diagnosis, treatment, and even prevention. Addressing NCDs has become essential to work towards SDG-3, and to ensure sustainable healthcare systems.

Definition of Key Terms:

Non-Communicable Diseases (NDCs): Diseases which cannot be transmitted from person to person.

Risk Factors: Smoking, Usage of Alcohol, Air pollution, Unhealthy Diet, Lack of Physical Activity.

Early Detection: Medical checks done to diagnose diseases before they do harm.

Health Promotion: Activities that encourage healthy behaviours/lifestyles.

General Overview:

NCDs are long-term diseases, which if occur, can require life-long care, expensive treatments, and prevention-based strategies.

They are driven by lifestyle transition, industrialization as well as aging populations.

- Around 41 million people die annually, representing about 71% of global deaths.
- Around 85% of all premature deaths occur in developing nations

It remains a prominent issue as it remains the fastest growing health threat globally, including an increase in diabetes, obesity, and pollution-linked diseases as well as the increase in these chronic diseases right after the Covid-19 Pandemic.

- **3.4 million deaths** in 2024 due to diabetes for adults aged 20-79 (Due to diabetes alone)
- More than **8 million deaths every year** globally from tobacco use.
- **4-5 million deaths per year** due to physical inactivity

MAJOR PARTIES INVOLVED:

- WHO NCD-Prevention Program – Leads global efforts to prevent and control non-communicable diseases.
- UICC (Union for International Cancer Control) – Coordinates international cancer control efforts, advocates for stronger cancer policies.
- World Heart Federation – Works to reduce cardiovascular disease globally through research, advocacy, prevention programs.
- World Diabetes Foundation – Funds diabetes-prevention and care projects in low- and middle-income countries.

PREVIOUS ATTEMPTS:

- WHO NCD Action Plan (2013-2030)
- "Best Buys" strategy: taxes on sugar/tobacco, lifestyle campaigns

POSSIBLE SOLUTIONS:

Implementing high taxation on tobacco, sugary drinks, alcohol, etc.

Mandating food labels, and regulating trans-fats and sodium.

Universal access to cancer screening.

Increasing the number of public exercise spaces, and nutrition programmes in school.

Expanding the number of chronic care centres.

APPENDICES:

- WHO Global NCD Action Plan
- UN NCD Commitments
- SDG-3 Targets

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<https://www.who.int/publications/i/item/9789240075269> (Global status report on noncommunicable diseases. 2023.)

<https://www.who.int/news-room/fact-sheets/detail/diabetes> (Diabetes. WHO Fact Sheet, 2024.)

<https://www.uicc.org>

<https://www.worldbank.org/en/topic/universalhealthcoverage>

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