



Address by
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WHO EASTERN MEDITERRANEAN REGION
TO THE
REGIONAL MEETING ON EXPANDING UNIVERSAL HEALTH COVERAGE TO
THE INFORMAL SECTOR AND VULNERABLE GROUPS IN THE EASTERN
MEDITERRANEAN REGION

Cairo, Egypt, 1-3 September 2015

Distinguished Participants, Development Partners, Colleagues, Ladies and Gentlemen,

It gives me great pleasure to welcome you to this regional meeting on expanding universal health coverage to the informal sector and vulnerable groups. This meeting brings together renowned global experts, policy-makers, health financing practitioners, civil society organizations and development partners, to share and discuss global evidence and local experiences on what is a global health priority. In a couple of weeks, the world's eyes will be on the United Nations General Assembly in New York, as Heads of State deliberate on the global development agenda for the next 15 years. Universal health coverage has been placed as one of the targets under the proposed social development goal 3 which is to "Ensure healthy lives and promote well-being for all at all ages".

Moving towards universal health coverage and promoting equitable and efficient health care systems is one of the major cross-cutting themes for WHO's work with Member States. WHO's focus on universal health coverage is gaining a new momentum and renewed commitment with the endorsement of the social development goals. The aspiration goes back to WHO's Constitution of 1948 and the Alma-Ata Declaration of 1978. Since then, WHO and its Member States have been working closely to achieve this noble goal.

During the last regional meeting on universal health coverage in December 2013 in Dubai, I made reference to the millions of people in the world and in our region who are deprived of health care or who experience financial hardship because of the way health services are organized, delivered and financed. Undoubtedly, the majority of these people are found among the most needy and vulnerable population groups in any country, regardless of its level of socioeconomic development. Our meeting today and over the next two days will focus on expanding coverage to these populations.

In 2013, the WHO Regional Committee for the Eastern Mediterranean called on Member States in the Region to: “progressively expand coverage to all the population, including deprived groups, rural populations and those working in the informal sector, by introducing and expanding equitable, fair and efficient prepayment arrangements” (EM/RC60/R.2). A framework for action on advancing universal health coverage in the Eastern Mediterranean Region, which was presented to the Regional Committee in October 2014 (EM/RC61/R.1), proposes actions for Member States, including progressively expanding coverage to vulnerable groups, particularly the poor, those in the informal sector, the unemployed, refugees and internally displaced, and migrant or expatriate workers.

As described in the 2010 “World Health Report – Health systems financing: the path to universal coverage”, universal health coverage has three dimensions: financial protection, access to the required package of services and expanding population coverage. Attention has often been diverted towards the first two, to the exclusion of the population dimension which is often considered part of the measurement of the financial protection and the service coverage dimensions. Nevertheless, policy-makers continue to tackle and understand universal health coverage through the lens of the population dimension. The question of “who is covered” and “who is not covered” continues to surface in discussions at the national level. I urge you to take this policy perspective into account in your discussions.

In recent years, we have compiled considerable information on the health financing systems of countries of the Region, including descriptions of the institutional and organizational aspects pertaining to the three functions of collection, pooling and purchasing, and their governance. An overarching challenge in all the countries is the question of how to reach out to people working in the informal sector, especially the most affluent of these. Experience has shown that voluntary schemes do not work; and mandatory ones are difficult to enforce. Various countries have opted for alternate mechanisms and we need to learn from the lessons emerging from those experiences.

The informal sector is not specific to health and countries will continue to have large segments of population in the informal sector unless some form of population registration or widening of the tax base takes place. Equally, socioeconomic development is fully compatible with the existence of the informal sector and does not necessarily limit its existence. We need to know how other sectors tackle the issue of informality and distil lessons from this for the benefit of the health sector. Health is unique, compared to other sectors, and solutions that have worked for other sectors will need to be adapted to the particularities of the health sector.

With regard to vulnerable groups, the poor represent just one category. Others could be added, including children, the elderly, the unemployed, expatriates, people suffering from chronic diseases, refugees and internally displaced persons. Different countries have opted for different approaches to cover these vulnerable groups and perhaps the single common factor in all of their experiences is the need for expanded public investment in the health sector.

During the next three days, we will be listening to and reflecting on various successful experiences of countries in addressing the challenges in their health systems in order to move closer to universal health coverage. Country experiences of what has worked and what has not will be illustrated by national experts. The examples will be discussed in plenary to determine their relevance for Member States of the Region. I look for your active engagement in exploring the lessons learned by the countries that have succeeded in their endeavour, and in discussing their relevance for our Region and your own national context.

In addition, we have also prepared a draft roadmap that provides a set of interventions that countries may wish to consider as they make efforts to cover the informal and the vulnerable segments of the population. I hope that this roadmap will be discussed during the meeting and enriched further with your input before being offered to the countries.

Any lesson learned from the experiences of others still needs to be adapted to the particularities of the countries of the Region, which is also a region of great diversity – something which further complicates matters and calls for innovative and adaptive solutions.

Several countries of the Region are exploring social health insurance as a means to enhance financial protection and limit out-of-pocket payment. Reaching out to the informal sector and vulnerable groups might be even more challenging in such an arrangement – unless innovative sources of funds are used to cover those outside the formal economy within prevailing schemes. The question of fragmentation is becoming a real issue and we would like to hear from you about how other countries have tackled this.

Progress towards universal health coverage can only be achieved if it is well monitored and measured. We have designated a session to discuss monitoring and to reflect on up-to-date thinking in this area. Your contribution and insight are very much needed.

WHO places emphasis on the importance of, and relies heavily on, building partnerships. No single partner will be able to achieve the global agenda of universal health coverage and therefore it is imperative to build sustainable partnerships at global and local levels.

Finally, health sector reform is complex terrain that requires sustained political commitment. At a time when several countries in the Region are going through political and socioeconomic transition, placing universal health coverage high on the development agenda is timely. I look forward to your inputs during the discussion on how best to take this important issue forward in our Region.

I wish you a successful meeting.