### PERSPECTIVES

## Universal health coverage alliance towards equity in health services by 2030 as a means to achieve key sustainable development goals in Zambia

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# A Perspective on Universal Health Coverage in Zambia

In December 2006 Zambia launched Vision 2030 to guide the development of the country into a prosperous middleincome country whose one of the key tenets is to ensure a Healthy and Productive population contributing to the socio-economic development of the nation. This aspiration assures that all people access quality health care [1]. This pronouncement which in essence closely relates to Universal Health Coverage (UHC) was followed by Zambia's government signing up for the International Health Partnership (IHP+) in 2007 [2]. Political commitment to and national ownership of UHC has been evident for more than a decade in Zambia. UHC being the provision of quality health services that all people need and have access to without financial, geographic and social barriers has been attained by a number of countries but continue to be target yet to be achieved for the majority of developing countries.

Systematic interventions targeted at an improved health status of the peoples of member states the world over have been formulated for many decades with some positive gains but not reaching set goals for all populations. Some of these efforts include the Alma Mata Declaration of 1978; Health for All by 2000; the Ouagadougou Declaration on primary health care of 2008; the Millennium Development Goals 2000-15 and in 2015 the Sustainable Development Goals Agenda 2030 (SDG 2030.) [3].

On 23 September 2016, the WHO announced the formulation of the International Health Partnership (IHP+) for UHC 2030 as a revival of momentum to deliver improved health outcomes across the globe. This UHC 2030 alliance is aligned to the Sustainable Development Goals (SDG) 2030 with a commitment to leaving no one behind. The failure to align and comply with the "seven behaviours" success factors for IHP+ contributed to aid ineffectiveness and a consistent lack of adequate partnership harmonization in many countries including Zambia [4]. In 2016 the Sustainable Development Goal Partnership Framework (2016-21) was launched in Zambia as a modality that underscores the engagement of the United Nations family in Zambia with the government in all sectors including the health sector.

One of the challenges of achieving UHC has been inadequate financing for its implementation. Although up to 80% of UHC can be funded through domestic resources in Zambia, this has tended to be from out of pocket payments pushing the borderline poor to outright poverty. The contribution through social protection safety nets such as social cash transfers support and or independently of social health insurance schemes are best practices applied

to reduce out of pocket expenditure and avert poverty. Countries which have successfully sustainably achieved UHC have diligently addressed out of pocket expenditure [5].

The road towards UHC in Zambia began in 2007 when the



Figure 1 His Excellency, President Edgar Chagwa Lungu (green tracksuit) challenges The Honourable Minister of Health Dr Chitalu Chilufya MP (blue tracksuit) to push-ups during the national health week, 2017. Photo/MoH

health systems through a health sector transformative agenda focusing on primary health by care emphasizing in that order promotive, preventive, curative, rehabilitative and palliative health care services. In all these consideration, the

government through recognition of social

at improving health care to its people with support from government and limited contribution from health sector partners. The desired goals were not readily realized largely due to failure by partners to comply with the 7 behaviours necessary for successful health sector outcomes [2]. Some of these behaviours were needed for partners support to rally around the same strategic plan, with priorities adhered to with financial and other support systems as well as monitoring and evaluation approaches. Some reasons for the failure to apply the principles of aid effectiveness were seen in the persistent fractionation of development partner programmes, insufficient coordination between all stakeholders of the health sector and the lack of ownership of externally funded health programmes by the Zambian government.

country was one of the first 26 signatories to IHP+ targeted

determinants of health is providing unprecedented attention for attaining UHC by 2030 in line with its blue print Vision 2030.

The timing and convergence of UHC 2030 is aligned to the SDG 2030 with focus on the SDG 3 on equitable health outcomes and wellbeing, global public health security and resilient societies. In addition, UHC 2030 is a success factor for achieving other SDGs which constitute social determinants of health such as SDG 1 on reduction of poverty, SDG 4 on quality education, SDG 5 on gender quality, SDG 8 on inclusive development and decent jobs and SDG 16 on inclusive societies [6].

The new Government of the Republic of Zambia following the elections in August 2016 has launched a paradigm shift in the health sector reviving the goal of attainment of UHC. The Vision 2030 includes the strong commitment by the Government of Zambia to sustainably strengthen public

# Transformative agenda in the health sector in Zambia towards UHC 2030

All the UN member states including Zambia agreed on achieving UHC as one of the targets for the Sustainable Development Goals (SDG) 2030. Most of the developed countries have already achieved UHC. Zambia has recently renewed her efforts to comprehensively strengthening health. The key elements of this renaissance focus on the sector is restructuring of the public health sector with one key decision made of establishing the Directorate of Health Promotion, Environment and Social Determinants whose thrust is to promote good life styles, behaviours and prevention of disease. In addition, the new directorate is anchoring intersectoral collaboration arising from the fact that most of the determinants of health lie outside the health sector.

Health system strengthening buttressed by a robust and well-trained human resource and complemented by evidence based strategies and the other pillars of health systems are paramount to achieve UHC. The government recruited more than two thousand health workers in 2016 and another 7,400 in 2017 to improve expected minimum health worker ratio of 23 per 10,000 populations required meeting UHC [7].

This acclamation towards a promotive and preventive approach was followed by the launch of the inaugural National health week held from 27 November to 4 December 2016 by His Excellency the President of Zambia; Mr. Edgar Chagwa Lungu represented by the Her Honour the Vice President Madam Inonge Wina. This national event targeted prevention of disease through empowerment of individual, families, communities and the entire nation to promote healthy living including physical activity, consumption of fruits and vegetables, keeping environments and surrounding clean, as well as the cessation of tobacco use and alcohol abuse.

The highest-level commitment to the transformative agenda for achieving UHC has been underscored by the second National Health Week from 2 May to 6 May 2017 which was officially launched in Lusaka by His Excellency the President of Zambia. The key areas of Health Promotion, Primary Health Care, Social Determinants of Health and the Environment are combined with encouragement to engage in physical activity and general prevention measures for non-communicable diseases. The Cabinet of Zambia has approved the practice of Health in All policies which is an undertaking to ensure recognition that health is a domain of many ministries. Until now health has been the sole mandate of the Ministry of Health yet other government sectors inter alia nutrition, agriculture, transport, housing, infrastructure, and environment are equally key.

In Zambia, the subject of out of pocket expenditure is being managed through two modalities; firstly, through fiscal expansion of social cash transfer and secondly through partner contribution to the same targeted at vulnerable populations countrywide. In addition, the National Social Health Insurance Scheme is at an advanced stage with Parliament expected to pass the bill before the end of 2017.

Stakeholder engagement through comprehensive policy dialogues particularly Civil Society and private sector requires strengthening. The Directorate of Health Promotion, Environment and Social Determinants and the Directorate of Health Policy and Planning are expected to galvanize stakeholder coordination and intersectoral collaboration.

In addition, the Zambia Medical Association in liaison with Health Professions Council of Zambia can facilitate the engagement of these stakeholders in aligning their activities to the priorities of the National Health Sector Plan 2017 -2021 in the interim and long term to UHC 2030. Indeed, it's very cardinal to ensure that no one is left behind be it public, private, civil society, non – government organizations, academia, media, professional bodies, leadership at various levels as we move towards UHC 2030.

As afore said, the requisite inputs for UHC 2030 are either in place or in advanced phases of finalization for successful implementation and achievement of health sector expectations of Vision 2030 and UHC/SDG 2030 [8]. With unprecedented political will being demonstrated at all levels, what remains is continued health system strengthening and advocacy by walking the talk in this critical area of UHC by 2030 and Zambia shall never be the same.

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