

Introduction

The world is lagging behind in achieving universal health coverage (UHC) with “very few countries having managed to improve service coverage and reduce catastrophic out of pocket health spending” (WHO, 2023). Despite UHC requiring access to comprehensive services to all people when and where they need them, access to noncommunicable diseases, reproductive, maternal, newborn and child health care in Africa is well below targets (Arhin, 2023; Dowou, 2023). Africa is also faced with threats of epidemics, antimicrobial resistance and the exacerbative effects of conflict and climate change, all of which impede the sustainable achievement of UHC.

Bridging the gap

Innovation must be employed to get the most impact out of limited resources. By addressing the following areas comprehensively, countries can make significant progress toward achieving UHC:

1. **Health systems strengthening** through investing in infrastructure development, expanding the workforce and supply chain strengthening. Investing in building and upgrading health facilities, particularly in underserved areas, training, recruiting and retaining more healthcare professionals to ensure adequate coverage and improved service delivery, as well as improving the procurement and distribution systems of health products will result in a more resilient health system (Ismail, 2024),
2. Expanding **financing for health** is required across all building blocks of the health system, and governments must allocate more finances for health, noting that the Abuja declaration benchmark is 15% of GDP. On the demand side, the goal is to ensure financial protection of health seekers by reducing their out of pocket costs. This can be attained through efficient use of resources for sustainable health financing mechanisms including universal health insurance, tax-based funding, and community health funds (Arhin, 2023; Bertram, 2024; Kazibwe, 2024).
3. **Equity and accessibility** – The health system must reach all population groups, including rural and urban, rich and poor, vulnerable and marginalized communities. An accurate vital statistics national system is essential in identifying the most

vulnerable who shall need the most protection, ensuring an equitable health system.

4. **Quality of care** - Establishment and implementation of standards and guidelines to ensure that all patients receive high-quality services. Adequate pre- and post-qualification training that is in tandem with the population needs is also essential in assuring quality of care. Patient and health worker safety is another integral part of a quality assured health system
5. Building a rich **data and research** ecosystem– a robust health information system supported by a culture of data collection, management, and analysis is necessary for evidence based decision making and continuous improvement.
6. An **enabling policy and regulatory environment** will ensure that mixed health systems thrive on the strengths of both public and private sectors, and incentivize innovation incubation and scaling.
7. **Action oriented respectful partnerships** through local and international collaboration between private, public and development partners shall enhance the sharing of knowledge, resources, and best practices, increase funding, and amplify impact of interventions. Exhaustive stakeholder engagement in planning and guideline development improves trust between public and private sectors, enhances transparency and accountability in the allocation and use of resources and ensures that innovative ideas from all stakeholders benefit the health system.

Conference structure

The 2 day conference shall convene health system experts from government, private sector and development partners to bring forward solutions to bridge the gap in attaining UHC in Africa.

Program tracks

1. Financing for health
2. Comprehensive services and quality of care
3. Digital health solutions
4. Expanding access to diagnostics
5. The nexus between climate change and health

References

Arhin, K et al. (2023) Assessing the efficiency of health systems in achieving the universal health coverage goal: Evidence from sub-saharan africa. *Health Economics Review*, 13(1), pp. 25. doi:<https://doi.org/10.1186/s13561-023-00>.

Arhin, K. & A.-D. D. (2023) Performance evaluation of national healthcare systems in the prevention and treatment of non-communicable diseases in sub-Saharan Africa. *PLoS One*, 18(11), p. e0294653. <https://doi.org/10.1371/journal.pone.0294653>.

Bertram, K. et al. (2024) Confronting the elephants in the room: Reigniting momentum for universal health coverage. *The Lancet*, 403(10437), pp. 1611-1613. doi:[https://doi.org/10.1016/S0140-6736\(24\)00365-9](https://doi.org/10.1016/S0140-6736(24)00365-9).

Dowou, R. et al. (2023) Increased investment in universal health coverage in Sub-Saharan africa is crucial to attain the sustainable development goal 3 targets on maternal and child health. *Archives of Public Health*, Volume 81, pp. 1-6. doi:<https://doi.org/10.1186/s13690-023-01052-z>.

Ismail, A et al. (2024) Health systems' capacity in availability of human resource for health towards implementation of universal health coverage in kenya. *PLoS One*, 19(1), p. doi:<https://doi.org/10.1371/journal.pone.0297438>.

Kazibwe, J. et al. (2024) The impact of health insurance on maternal and reproductive health service utilization and financial protection in low- and lower middle-income countries: A systematic review of the evidence. *BMC Health Services Research*, Volume 24, pp. 1-20. doi:<https://doi.org/10.1186/s12913-024-10815-5>.

WHO (2023) *Tracking universal health coverage 2023 global monitoring report*. [Online]

Available at: <https://www.who.int/data/monitoring-universal-health-coverage> [Accessed 15 01 2024].

For partnership opportunities in this conference please email Dr Daniella Munene, Head of External Affairs at Africa Health Business on: DMunene@africahb.com

