Key issues

• Several million people in the WHO European Region are impoverished and even more face financial hardship as a result of illness because they have to pay out-of-pocket for health care.
• High levels of out-of-pocket payments undermine protection against the financial risk of ill-health and increase social inequalities.
• Universal health coverage involves extending coverage of health services to the whole population, expanding the range of effective services and reducing user charges.

What is universal health coverage?
Universal health coverage (UHC) ensures that all people are able to access effective, good-quality health services when they need them, without experiencing financial hardship. It reflects the values and principles underpinning health systems in Europe – universality, access to good-quality care, equity and solidarity.

Situation in the WHO European Region
• Most countries in the WHO European Region offer universal population coverage, but many people still have to pay out-of-pocket for needed health services.
• Out-of-pocket payments are more likely to be catastrophic or impoverishing where levels of public spending on health are low.
• Medicines are usually the largest driver of high out-of-pocket payments.
• Poorer people and those with chronic conditions are particularly likely to face financial barriers to accessing health care. This widens the health divide within and across countries.
• The economic crisis has challenged UHC. Since the crisis began, some countries have seen an increase in unmet need for health care due to cost and an increase in the incidence of catastrophic or impoverishing out-of-pocket payments.

Three dimensions to consider when moving towards UHC:
• the proportion of the population covered,
• the range of effective services covered,
• the share of costs covered.

The role of policy-makers
Moving towards UHC requires political commitment, leadership and good governance. Health financing policy plays a key role in strengthening financial protection. Policy-makers should enable a shift towards:
• financing mechanisms based on compulsory income-related pre-payment with risk pooling;
• extending coverage to the whole population;
• the removal of financial barriers to accessing cost-effective care;
• investment in cost-effective services, including preventive measures to reduce the need for subsequent treatment;
• provider incentives for efficient, equitable and high-quality health services.

WHO’s response

“Universal coverage is the hallmark of a government’s commitment, its duty, to take care of its citizens, all of its citizens.”

Dr Margaret Chan
WHO Director-General

In 2010, the World Health Report was entitled Health systems financing: the path to universal coverage. The report mapped what countries can do to move towards UHC. Building on new research and country experiences, it provided an agenda for countries at all stages of development.

The WHO Regional Office for Europe offers tailored policy advice and policy dialogues on key issues in health financing policy. It also offers capacity-building through national and regional courses, such as the Barcelona Course on Health Financing, with a focus on UHC.

Useful links
http://www.who.int/universal_health_coverage/en/
http://www.euro.who.int/en/health-topics/Health-systems/health-systems-financing/activities/learning-opportunities-and-training-courses/barcelona-course-on-health-financing
Questions and proposals to WHO on universal health coverage: