



Improving access to quality health care through community health financing

Prepayments key in Universal Health Coverage

**NO ONE SHOULD GO BANKRUPT
WHEN THEY GET SICK**



**17% FALL
OR FALL DEEPER
INTO POVERTY* SEEKING
HEALTH SERVICES**

SOURCE: WORLD HEALTH ORGANIZATION / WORLD BANK GROUP (2015) - SURVEY OF 37 COUNTRIES

*US \$2/DAY

HEALTH FOR ALL: RIGHT. SMART. OVERDUE.

MUBENDE

Village Health Savings take root in Mubende

Save for Health Uganda (SHU) is working with rural communities in Mubende district to entrench the culture of saving for their health care through village health savings and loan associations (VHSLAs).

Unlike other savings groups that only focus on economic empowerment of their members, VHSLAs enable members to save money both for health care and other needs. This is done through providing an opportunity for members to get community health insurance (CHI) for their families using part of the money they save in groups.

SHU introduced the VHSLAs initiative in Mubende in October 2015 to ease payment of CHI premiums for low income earners. Currently, there are 308 families saving for health under this initiative in 10 parishes in Kassanda and Bukuya sub-counties. A total of 1,276 individuals are able to access timely and quality health care services through VHSLAs.

VHSLAs have greatly boosted uptake of CHI in the area. Today, a total of 2,096 individuals, including those paying premiums directly, area covered in the two sub-counties.



Members of a VHSLA in Namabaale parish, Kassanda sub-county open their savings box.

One of the posters developed by the Global Coalition for Universal Health Coverage to mark UHC Day

By Proscovia Nnamulondo

On December 12, 2015 the world marked the annual Universal Health Coverage (UHC) Day. This marked the three-year anniversary since the endorsement of the day by a resolution of the United Nations General Assembly of December 2012.

The resolution called upon States to, among other things, 'ensure that health financing systems evolve so as to avoid significant direct payments at the point of delivery and include a method for prepayment of financial contributions for health care and services as well as a mechanism to pool risks among the population in order to avoid catastrophic health-care expenditure and impoverishment of individuals as a result of seeking the care needed'.

The theme for 2015 was Health For All: Right. Smart. Overdue. It was intended to highlight health as a human right, its numerous economic benefits, and its essential contribution to sustainable development.

While addressing the International

conference on UHC in the new development era held in Japan from 16th to 17th December, the Director-General of the World Health Organization (WHO), Dr. Margaret Chan, said UHC contributes to efficiency since schemes for financial protection encourage people to seek care early, when the prospects of successful treatment are greater and the costs much lower.

WHO defines UHC as people receiving needed quality health services without financial hardship. The core tenets of UHC are: prioritize the poorest; increase reliance on public financing; reduce (if not eliminate) out-of-pocket payment; and develop the health system.

UHC is the eighth target under the 2030 health goal for sustainable development adopted by the United Nations in September 2015.

It is estimated that nearly one out of three households in Africa and Southeast Asia borrow money or sell assets to pay for health.

Learn more about UHC in the link below

<http://universalhealthcoverageday.org/news/>

40 schemes launch New Year of health care access



SHU Executive Director, Mr Makaire Fredrick (right), hands over a certificate of health care access to a member of Nakikoota CHI scheme in Luwero district at the Launching ceremony held on 10th December 2015

LUWERO

By Esther Nakiryowa

A total of 40 community health insurance (CHI) schemes in Luwero, Nakaseke and Nakasongola districts launched a new year of accessing health care services on 10th December 2015.

The launch of a scheme year, which runs for 12 months, is marked by issuance of new health care access cards to all families that have fully paid premium for the year.

The annual premium ranges between shs7,500 and shs10,300 per person. By the launching day, a total of 5,002 individuals had fully paid their premium while others were given a grace period of one month to

clear.

Scheme members will access outpatient, inpatient, dental, maternity and eye care services from Kiwoko and Nakaseke hospitals in Nakaseke, Bishop Caesar Asili hospital in Luwero and Franciscan health centre Kakooze in Nakasongola district.

Speaking at the launching ceremony for Nakikoota scheme in Luwero district, SHU Executive Director, Mr Makaire Fredrick, asked members to lobby political leaders during the ongoing campaigns to enact a National Health Insurance law and provide for government subsidies to CHI schemes. He added that CHI enables the poor to access quality health services without incurring debts.

Kitovu Hospital gets new radiology block and equipment

MASAKA

By Robert Kabale

Kitovu hospital, the major health care services provider for CHI schemes in Masaka district, recently completed construction of a new radiology block equipped with a modern digital X-ray machine, which has greatly improved provision of X-ray services to scheme patients and the general population.

The block is also used for ultra sound scan services and has space reserved for

Computerized Tomography (CT) scan equipment yet to be acquired.

Sr. Namuwulya Gorret, the Hospital Administrator, says the new facility completed in August 2015 was constructed with funding from the hospital, Friends of Kitovu Hospital and ElectricAid – Ireland.

According to Ms. Nambalirwa Sarah, the Radiographer, the new X-ray machine has reduced waiting time for patients and they are no longer referred to other imaging service providers as was the case when the block was being constructed.



The new radiology block



Ms Nambalirwa in the new X-ray room.



Nalongo Christine Kalanzi, member, Kakooge CHI scheme in Nakasongola district.

Scheme members' corner

My name is Nalongo Christine Kalanzi. I am married to Mr Kalanzi. We enrolled in Kakooge CHI scheme in 2002. By then, only 10 households in this area had initially accepted to take up CHI.

I currently have 21 members in my family, including my husband, our children and grandchildren. We are all members of the scheme. Every year, we pay shs35,000 as premium for the entire family. The amount we pay is small because it is just a contribution to a pool where

money paid by all scheme members is kept.

Every member who falls sick is entitled to health care of up to shs170,000 per episode of sickness.

We are benefiting a lot from the scheme because we seek care early when we fall sick. Personally, I have gained skills in public speaking and basic arithmetic from attending CHI leadership training sessions.