

# Why should developed countries care about Universal Health Coverage?

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This year's World Health Organization (WHO) hand hygiene global campaign on the 5<sup>th</sup> of May has one clear message: Universal Health Coverage (UHC) for all. UHC is the right of all people to have access to quality healthcare services without putting their financial well-being at risk<sup>1</sup>, and embodies the health-related goals put forward in the United Nations Sustainable Development Goals (SDGs) in 2015.<sup>2</sup>

Progress towards attaining UHC concerns all countries, regardless of level of income or development. Though there are of course large differences between countries, no country in the world can proclaim having a perfect UHC across the entirety of their health systems.<sup>3,4</sup>

Healthcare-associated infections (HAI) are the most frequent adverse events in healthcare delivery worldwide.<sup>5</sup> Hundreds of millions of patients are

affected by HAI each year, leading to significant mortality and financial losses for health systems and patients.<sup>6</sup> The burden of HAI is estimated around 7% of patients admitted to hospitals in high-income countries, and thought to be between two and twenty times greater in low and middle income countries.<sup>7</sup> Infection prevention and control (IPC) is a cornerstone and primary indicator of healthcare quality all over the world, with hand hygiene remaining the most simple and effective measure to prevent HAI.<sup>4</sup>

In addition to having a high rate of HAI, the use of health services is comparatively very low in developing countries.<sup>7</sup> It has been identified that many barriers contribute very heavily towards decreased utilization rates, most notably: cost of care, lack of access to health facilities, poor access to supplies and medications, insufficient staff to patient ratios, etc.<sup>8,9</sup>

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Additionally, low use of health services was strongly correlated with the perception of poor quality of care as noted by users.<sup>10</sup>

Thus, it is not surprising that when people speak about UHC, they might think that the initiative mainly concerns low income countries. However, having such a narrow vision for UHC will create its own issues as it is highly relevant for all countries. We tend to think that just because a country is wealthy, all citizens must have good access to care, although, this is often not the case. The United States is a prime example - more than half of 2000 US citizens surveyed in a poll on patient perception in healthcare said that they had forgone or delayed accessing medical care in the last year due to cost.<sup>11</sup> In addition to avoiding costs by delaying or evading treatment, there is a high percentage of the population that remains uninsured or underinsured, despite the fact that government expenditures on healthcare are roughly 17% of GDP.<sup>12</sup> Government assessments also show great differences in quality between states (Figure 1).<sup>13</sup>

Switzerland, which is reputed to have a very functional high-quality health system, faces similar issues. Switzerland spends around 12% of its GDP on health, and although a mandatory insurance policy has been in place since 1994, over 13% of the population still avoid seeking medical care for economic reasons.<sup>14,15</sup> In fact, forgoing care because of its cost is a frequent situation in many developed countries, with estimated prevalence ranging from 4% to 30%.<sup>16</sup>

Besides these direct issues concerning access to and costs associated with care in developed countries, there are a number of indirect issues as well. The world is more globalized, interconnected and interdependent than ever. Significant proportions of the world's populations have become hyper-mobile, and although some regions have witnessed more exchanges than others, human air travel spans the whole globe (Figure 2).<sup>17,18</sup> According to the United Nations World Tourism Organization, about 1,326 million people arrived at international airports in 2017.<sup>19</sup> Microbes do not stop at borders, and can spread rapidly from one corner of the globe to another. This was seen all too clearly with the worldwide panic that surrounded the H5N1, H1N1, and SARS epidemics in the 2000s.

Suddenly, issues such as how countries use antibiotics in livestock and how they export that livestock can have a profound effect on the rest of the world. Other more nuanced issues are just as important, such as if farmers are using first line antibiotics that, in the age of antimicrobial resistance, should probably be saved for human use, or if they are using them on large scale as growth promoters or as prophylaxes for inadequate husbandry. Multidrug-resistant organisms might emerge in one part of the world and quickly spread to others, causing worldwide issues with antimicrobial resistance. Basic IPC measures, and in particular, hand hygiene are the best tools to combat the spread of resistance by preventing either infections or cross-transmission of resistance in the first place.<sup>20</sup>

We need a one health approach that takes humans, animals, and ecosystems into account. What affects one of us, affects all.<sup>21</sup> Thinking of the world only in terms of “developed” and “undeveloped” is simply too black and white, and is associated with a loss of understanding of the granularity in the differences and of the specific challenges of individual health systems.

All countries- not just the developing ones- must invest in UHC, both for addressing inequalities at the national level as well as promoting global health.<sup>22</sup> We invite all of you to take action toward a Universal Health Coverage by participating to the WHO hand hygiene campaign on May 5, 2019, “Clean care for all – it’s in your hands”. WHO invites all healthcare facilities to join the 2019 WHO Global Survey on IPC and Hand Hygiene by using two validated assessment tools; one for evaluating the core components of IPC programmes and the other for a deep dive in hand hygiene activities (<https://www.who.int/infection-prevention/campaigns/ipc-global-survey-2019/en/>). On a facility level, the use of these tools gives institutions a clear understanding of the strengths and weaknesses of their IPC and hand hygiene promotion programmes, and provides concrete actions to address existing gaps.

Globally, this survey will allow WHO to provide a situational analysis on the level of progress of current IPC and hand hygiene activities around the world and inform future efforts and resource use for IPC capacity building and improvement. Global Surveys using

the Hand Hygiene Self-Assessment Framework were already conducted in 2011 and 2015,<sup>23-25</sup> making this year's survey even more crucial for tracking the implementation of hand hygiene and IPC on a global scale.

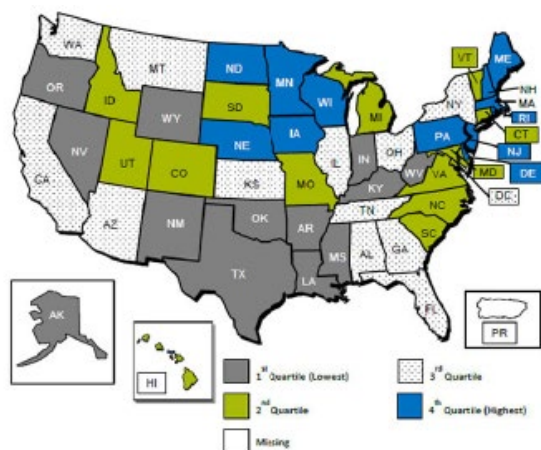
Each country in the world is concerned by UHC and improvement in IPC contributes toward quality UHC. "Clean care for all – it's in your hands"!

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**Figure 1. Overall quality of care, by state, 2014-2015<sup>13</sup>**



**Figure 2. The global aviation network<sup>18</sup>**

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