

Multi-sectoral approach and Coherence in government: Cornerstones for attaining Universal Health Coverage in Uganda



By Dr. Aloysius Ssenyonjo

Every 12th December, the global health community commemorates the day in 2012 when the United Nations General Assembly resolved to support national and international efforts towards Universal Health Coverage (UHC) hence: the UHC Day! Going through the UN resolution one quickly recognizes the emphasis on multi-sectoral approach to improving population health and achieving UHC.

First and foremost, the UN asserted that health is cross-cutting policy issue and a precondition and an outcome and indicator of sustainable development, therefore improving people's health requires concerted efforts of all legitimate role bearers. To this end, countries were urged to continue to encourage, establish and support or strengthen multisectoral or intersectoral national policies and plans especially in addressing the underlying determinants of health. The health of people is associated with social and economic conditions, the improvement of which is a social and economic policy issue. Put another way, health represents the collective effect of social, economic and physical life conditions. Health disparities arise from the societal conditions in which people are born, grow, live, work and age, referred to as social determinants of health. These

factors interact to affect health and disease burden of individuals and populations. This reality points to the fact that achieving health goals in any setting (country/district and even globally) cannot be left to the health sector alone.

But to what extent are the other sectors aware of their influence on the health of Ugandans and act in a way to leverage their work to make the required contributions? What are the opportunities and incentives for dialogue among these agencies? A few years ago, the Ministry of Foreign Affairs recommended the exportation of Ugandan health workers to Trinidad & Tobago; a decision that caused public uproar especially among stakeholders in the health sector. Apparently, the influence of that decision on the work of the Ministry of Health and negative effect on delivery of health services was not taken into account. About a year ago, there was a typhoid epidemic in Kampala and the President was bitter with the Ministry of Health for not anticipating and adequately mitigating the problem. However, on deeper scrutiny, the problem was that Kampala residents were accessing contaminated water. Of course, you very well know that it is not the health ministry in charge of water in this country. The story goes on. What is common to both these cases, is that actions of "non-health sectors" affect health and with potentially very dire consequences.

However, evidence shows that ensuring sectors work together in a synergistic and coherent manner for population issues is not an easy feat. We need to acknowledge challenges facing efforts to bring sectors together through interministerial committees or sector Technical working groups. These have to be made functional through incentives to stimulate and sustain collaboration. We should also learn from successful multisectoral responses to epidemics, disasters and HIV/AIDS in this country. I contend that we need a shared understanding among government entities on their contribution to health. However, The National Development Plan II highlights that mandates of government entities are often contradicting, overlapping and duplicated. This in turn undermines the comprehensive government efforts to address crosscutting issues such as improving the health of Ugandans. Unless this is addressed, we shall continue to bemoan weaknesses in public sector management and administration as one of the most binding constraints to achieving Uganda's development aspiration including UHC.

There is need for deeper reflection on reforms within government to facilitate cross-sectoral approaches. Possibilities include modalities for joint planning, funding and implementation of government programs. We need an ambitious plan and mindset to overhaul the system for better and sustainable approaches and results. To what extent can the National Vision 2040 and the respective NDPs be launch pads for cross-sectoral collaboration for health and UHC in Uganda?

Dr. Aloysius Ssenyonjo is the Project Manager for the SPEED Project, Makerere University School of Public Health.