White Paper: Framing National Health Policy
Executive Summary

Introduction
This White Paper is a “think piece” based on on-going inclusive consultations and seeking to frame the discussion to support the development of people centered national health policies, strategies and plans. It is not intended to be a draft or a section of any policy, strategy or plan.

This White Paper aims at framing the national health policy development by focusing on values/principles, objectives and strategic directions for improving the health of the population and reducing inequalities in health.

This paper draws its inspiration and remit from the newly approved Constitution of Egypt. The Constitution explicitly places health high on the national agenda. Article 18 of the Constitution underlines the importance of the right to health and of access to quality health services. It explicitly mandates that government health expenditure be increased to at least 3% of gross domestic product, nearly doubling current health spending.

Since the late nineties, Egypt has initiated a comprehensive health sector reform programme that builds on the substantial progress made in previous years. The programme was built to take into account the strengths and weaknesses of the existing health system, as well as, the social, economic, institutional, and political realities facing the country at the time.

Since that time, unfortunately most reform initiatives and endeavors have not consistently addressed the same vision, principles or strategies. Although there has been political commitment for reform, this has not been sustainable, nor has it been accompanied by sufficient resources and directives to achieve the intended health sector development. Efforts to institutionalize multisectoral actions for health have not been optimized to achieve coordination, integration and complementarity of the various sectors in addressing health and its determinants.

This White Paper sees future national health policy development as a cornerstone of nation building and of efforts to realize equitable socio-economic development in Egypt. As such, the White Paper stresses the importance of harmonizing national health policies, strategies and plans with overall national development plans, as well as feeding into these.

Addressing health goes far beyond the health sector itself. Many articles in the new Constitution address the role of other sectors in promoting the health of the population. A multisectoral approach is acknowledged as a key driver in the process of national health policy development.

Situation overview
The key challenges for the health sector in Egypt are largely known. One of these relates to equity: equity in health outcomes, equity in access to health services, and equity in the burden of health financing. An equity driven health sector can break the illness-poverty cycle, thus attacking at one of the root causes of social injustice in society. As such investing in health is about investing in the socio-economic future of the Nation. Low levels of government health expenditure in the past have resulted in
around 72% of total health spending taking the form of out-of-pocket expenditure. This low investment in health has been reflected in an increased reliance on the private sector for the provision of health services and in market failures that have led to serious compromises in quality, safety, and prevention, as well as in concerns around equity of access to services. Managerial shortcomings in service provision, financing, human resources, information, health technology and governance have also been important.

Investing in health today is also an efficient way of using scarce resources: if the health problems are not dealt with today, they will worsen, imposing an ever-increasing burden on society and on the economy. Global macroeconomic simulations, for example, suggest that the leading NCDs together with mental health problems will cumulatively bring about an economic loss of US$ 47 trillion over the next twenty years. For Egypt, the share of this loss will be in tens of billions of dollars.

The systemic obstacles that need to be tackled largely relate to the fragmentation that exists in all areas and levels of the health system. These obstacles lead to duplication and inefficiencies in allocation of financial and human resources and in capital investment.

The current health financing system, which divides into a multitude of supply and demand side streams, does not allow for an equitable and effective coverage. Universal health coverage will only become a reality once there is a clear strategy for pooling resources in a way that allows for cross-subsidization and for extending the coverage to those who do not currently have it.

**Guiding Principles**

The current landscape in Egypt is conducive to pushing forward new policy and the new Constitution puts health high on the national agenda. However, increased investment in health needs to be accompanied by sectoral reform to tackle current inefficiencies and maximize value for money.

As can be seen from the situation overview, many of the challenges facing Egypt’s health sector are interlinked and tackling them one by one is neither effective nor efficient. As such, the guiding principles and strategic directions that should determine the path forward will need to reflect a holistic approach, where the whole range of issues and challenges are tackled comprehensively, strategically and horizontally.

The comprehensive and the horizontal nature of the approach must also be reflected in the process. As the national policy process advances, dialogue will need to be broadened beyond the public sector and beyond the health sector. This policy dialogue must also aim to promote behavior change among development partners to encourage them to align and harmonize their activities.

1. **Achieving better and equitable Health outcomes**

Health is a fundamental human right of all Egyptians. The overarching goal of a National Health Policy is to improve the health of the entire population. Improving health is an intrinsic goal in itself but is also an important pathway to supporting poverty reduction and the socio-economic development of Egypt.

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2. Protecting and promoting health and ensuring access to essential health services for all with financial risk protection (Universal Health Coverage)

By 2030, Egypt must move towards ensuring access to quality health services for everyone and ensuring that no one suffers financial hardship for health payments. The National Health Policy must ensure the availability of health services and upgrade their quality, so that access to required services is not hindered by financial barriers (such as consultation fees or medicine prices that are beyond the capacity of individuals to pay) or non-financial barriers (geographical, information-based, gender-related, or any other sort of discrimination or stigma). Meanwhile, mechanisms for protection against financial risk should be put in place so that nobody is pushed into hardship or poverty in order to pay for health services.

3. Strengthened role of the government in providing public health services

The role of the state should be fundamental and central to achieving health goals. The government’s role needs to be strengthened both in the provision of public health services and in increasing investment to correct market failures. This includes improving the safety and quality of public health services with a focus on the key health priorities: Hepatitis C, NCDs, MCH, Influenza, Nutrition, etc. Adequate public funding for good quality research that will support public health goals must also be ensured.

4. Ensure effective national governance to address the multisectoral aspects of health and to deal with health sector fragmentation

National health policies, strategies and plans will need to promote the inclusion of the different dimensions of health within a general governance framework that is constructed with adequate legal, regulatory and institutional elements. The new Constitution addresses many issues related to health that are beyond the scope of the Ministry of Health and Population and the health sector at large. This reinforces the need to address the social determinants of health in a multisectoral framework.

5. More money for Health (new Constitution) and More Health for the money (efficiency)

The current low level of public investment in health has led to high levels of out-of-pocket health expenditure and has reinforced domination of market forces through the increased involvement of the private sector and a general commercialization of health services. This has aggravated market failures that are reflected in quality and safety problems (which manifest, for example, in elevated Hepatitis C prevalence), through inequities in access to services (as markets tend to rely on ability to pay) and through an inadequate focus on prevention and promotion (as markets tend to focus on curative care). Reaching the Constitution’s goal of public health expenditure will be crucial in order to counteract the effects of many years of underinvestment.

However, injecting more money into the system alone will not bring about the necessary improvements unless measures are taken to reform the sector and improve efficiency and value for money. This entails making the best use of human, financial and technological resources with clear efficiency driven policies and strategies based on information and evidence, as well as prioritization and focus on cost effective interventions and sound management.
6. Accountability and transparency

Accountability needs to be ensured by improving transparency around decision-making, resource use, and results. This requires the development of well-established, transparent processes for monitoring progress through improved data collection, analysis and dissemination. It also requires that the community be given the opportunity to access information, and that civil society is actively involved in the monitoring process. Strategic and operational plans need to be implemented based on a step-by-step approach, where there is a clear vision of the way forward but where a system is established for monitoring health sector performance with measurable indicators and targets. This will facilitate the rethinking and redefining of strategies and actions as necessary to ensure that overall progress towards the set targets is achieved.

7. Involve all stakeholders in the process including, civil society and the private sector

National Health Policies, Strategies and Plans are more robust and more likely to be implemented effectively if their development is inclusive of all relevant stakeholders, within and beyond the health sector and within and beyond the government. Civil society should be brought in as a key player in policy and strategy making and also in monitoring and ensuring social accountability. The private sector, (for profit and not-for-profit) is a major component of the health sector and need to be included in the policy and planning process.

Strategic Directions

1. Build a consensus around a vision for effectively moving towards Universal Health Coverage

A prerequisite of health sector development is to establish a vision of what that sector would like to achieve and what it could look like in 2030. This includes clarifying the role of the public and private sector and other ministries. Universal health coverage is not a short-term goal, but rather an ongoing long-term process that ultimately aims to achieve full coverage of the entire population with quality health services and without individuals being exposed to the risk of financial hardship linked to paying for care. This requires high-level political commitment, well beyond the Ministry of Health and Population, to the policy and reform processes. It requires political support at Prime Ministerial or higher level together with long-term investment in the health sector, which is consistent with the New Constitution.

2. Put in place a plan with a time frame and measurable indicators

The national policy process needs to be guided by a clear vision and a long-term strategic plan that defines what the health sector should look like in around 15 years’ time, including the roles to be played by the public and private sectors. This long-term plan will also need to link health sector developments with projections regarding macro trends such as demographic dynamics and burden of disease. At an operational level, a five-year plan constitutes a suitable time horizon for a step-by-step approach, allowing for different processes to converge and for adjustments to be made as necessary. This operational plan has to be guided by clear and measurable targets and outputs.

As such, there is a fundamental need to build the institutional base for a strong monitoring and evaluation system. This will have to overcome the pervasive fragmentation within the health system and be linked to a clear national governance structure that brings coherence and unity to a well-developed health information system. A properly designed monitoring and evaluation system is not only a key tool...
for achieving accountability, but it also allows for ongoing learning, for continuous improvement of the planning process, and for timely corrective measures as needed.

3. **Revitalization of the Supreme Council of Health to deal with governance, planning, fragmentation and multisectorality**

The Supreme Council for Health needs to set the direction for national health policy and overall coordination among the health and non-health sectors and stakeholders. It must also bring coherence to the fragmented health sector and will have an important role to play in guiding and coordinating multisectoral interventions and programmes.

The current council was established through a presidential decree and is chaired by the Minister of Health and Population. The council needs to be revitalized and its organizational structure needs to be revised. It should be upstreamed under the umbrella of the Prime Minster (or even higher) so it can effectively encompass all stakeholders: concerned ministries and other governmental and non-governmental actors. The Ministry of Health and Population and other key health actors should be able to positively influence other ministries and political decision makers to take steps that improve the health of Egyptians. This includes addressing the social determinants of health such as education, access to safe water, measures to improve road safety, reducing tobacco use, and enhancing food safety, as well as other measures and interventions that affect the health status of the population.

4. **Put in place a regulatory framework and regulatory institutions that also cover the private sector**

The regulatory framework needs to be extensively revised and updated. This includes regulations that govern human resources for health (licensing, credentialing, remuneration, deployment and management), health financing, health service delivery, information management including flow and communication, pharmaceuticals, health technologies and medical devices. Regulation must effectively cover the entire health sector including its public as well as private entities. Public financial management mechanisms and processes need to be strengthened, from budget formation to the flow of funds to accounting and financial reporting to internal controls.

5. **Focus on key public health programmes**

National policies, strategies and plans must address national priorities such as prevention of communicable diseases, control and management of noncommunicable diseases, nutrition, reproductive health, family planning, drug dependence and other interventions that target the entire population, particularly youth and vulnerable groups. National health policy development should be geared towards securing sufficient investment for these public health programmes. Prioritization should be given to cost-effective interventions to address major public health concerns. Examples of key public health programmes and strategies are the “Action Plan for the Prevention, Care & Treatment of Viral Hepatitis in Egypt 2014-2018” or the “Child and Maternal Health Acceleration Plan for Egypt (2013-15)”.

6. **Improve quality of health services and strengthen human resources for health, especially at the peripheral level**

Improving quality and safety of health services entails a wide range of measures. These include improving staff quality and availability, especially at primary health care level with focus on aligning skills, competencies and clinical experience with the health needs and with the context they work in.
This will entail addressing some of the underlying issues such as geographical distribution, recruitment, education and training (quality and volume of output), remuneration and financial incentives, career paths and supervision.

Clinical guidelines, standards and treatment protocols will need to be applied in health facilities throughout the health sector and at all levels of care. Amongst other actions to be taken, mandatory accreditation must be put in place to ensure quality of staff. Improvements need to be made in reporting systems and in disseminating reports on the quality of health care. Strengthening the Family Health Model and referral system is another key measure for improving the quality of health services.

7. **Increase equity: Health insurance coverage for all Egyptians**

Extending health insurance coverage to the entire population will need to be a long term goal, introduced step by step and relying on strategies that focus on the informal sector and the most vulnerable population groups. One practical example of such a step-by-step approach is to start with universal coverage for smaller packages, such as maternal and child health, as a priority public health intervention. These strategies would include the extension of mandatory Social Health Insurance coverage and establishing effective exemption policies and safety nets for poor and vulnerable groups. Creating and/or unifying benefit packages and making people aware of them will be a key part of these strategies. Strategies for revenue collection will also need to be equity-driven, with contributions (including direct and indirect taxes, social health insurance contributions, etc.) aligned to level of income and ability to pay. This should be coupled with a strengthening of cross-subsidization by merging different pooling mechanisms and funding channels into bigger pools where those who cannot contribute will be covered via the contributions of the better off. Increasing the level of pooling and cross-subsidies will also be an important step in assuring sustainability of the health financing system.

8. **Set and implement measures to improve efficiency and put in place tools for cost containment**

Most, if not all, countries in the world face significant challenges in ensuring efficient use of resources. Improving efficiency in Egypt will link to allocative and technical efficiencies. Focus should be on tackling the leading causes of inefficiencies in all health system areas, such as medicine procurement and prescription, hospital length of stay, or in the choice of the services that are provided and covered. Human and financial resources and capital investments will need to be re-oriented and reallocated in order to reduce duplication and fragmentation. Health Technology Assessments will need to be conducted in a systematic manner in order to orient the health sector towards cost-effective interventions.

Actions need to be taken to change incentives that are detrimental to overall efficiency, such as budget allocations being determined by the number of beads. Purchasing and contracting mechanisms need to be implemented and provider payment reform introduced to offer incentives for more efficient use of resources and to achieve the desired service delivery results. This strategic purchasing should take into account the need to shift focus and funding from treatment to prevention/promotion. The gate keeping mechanism, through an effective referral system that links primary to higher levels of care, will also need strengthening. Management, especially budgeting and financial management, needs to be strengthened throughout the system. This includes administrative functions, financial management, supply chain and assets management, effective supervision, monitoring and evaluation, information management, as well as human resource and health technology management.