

Universal Health Coverage and its Conceptual Interpretation

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ABSTRACT

The current definition of universal health coverage lacks several elements essential to advance public health. This article aims to discuss the concept and interpretation of universal health coverage and suggests an inclusive definition that is applicable to states, governments, and the societal and economic sectors ultimately responsible for public health. We will discuss the complexity and social determinants of universal health coverage, and the need for health to be built through social action, together with the states, governments and all societal actors, within a supportive legal framework. One suggestion is to consider health coverage as the ability of society, states and governments to respond to population health and well-being, which includes legislation, infrastructure availability, social capital and technology, as well as comprehensive planning, organizational, action and financing strategies to protect the health of the whole population, equally and inclusively.

KEYWORDS Universal health coverage, public health, social action, Cuba

INTRODUCTION

The right to health is the core value of universal health coverage that must be universally promoted and protected. Universal coverage reinforces the need for an interdisciplinary approach to define and implement policies and interventions to address social determinants of health and strengthen society's commitment to promoting health and well-being for all, with emphasis on poor and vulnerable population sectors.[1]

However, universal health coverage is defined as the health system's ability to respond to the population's needs, such as infrastructure availability, human resources, health care technologies (including medications) and organization and financing strategies to cover the population.

According to the World Health Organization, universal health coverage is defined as:

Universal health coverage is defined as ensuring that all people have access to needed promotive, preventive, curative and rehabilitative health services, of sufficient quality to be effective, while also ensuring that people do not suffer financial hardship when paying for these services.[2–4]

This definition lacks several elements essential to advance public health. This article aims to discuss universal health coverage and its conceptual interpretation, and suggests a definition that is applicable to all states, governments, and societal and economic sectors ultimately responsible for public health.

UNIVERSAL HEALTH COVERAGE, CURRENT CONCEPTUALIZATION AND IMPLICATIONS

Etymologically, coverage means protection, shelter, responsibility; universal means total, absolute and complete; and health means biological, mental and social well-being. Therefore, universal health coverage can be defined literally as total responsibility for biological, mental and social well-being of the population, specifying those who are ultimately responsible for population health.

The definitions of universal health coverage provided in the Introduction point to health services and systems as being responsible for health, and imply the need for health services to provide care that adapts to people's needs and demands while keeping updated on health-related scientific and technological developments.[5]

Some issues are not reflected in the current definition of universal coverage, such as its complexity, social determinants and the need for all sectors and actors to participate in promoting health through a social process.[6,7] This gives the interpretation of health an underlying focus on illness, bringing with it the danger of equating issues of health and illness, and basing solutions entirely on medical care, limited to the health sector.[8,9] This in turn increases dependence on the market, making health care more expensive (with ever-increasing acquisition of technologies for illness diagnosis and treatment) and reinforces barriers to universal access.[10]

Deepening our understanding of the causes of health problems and their potential resolution requires pooling ways of constructing knowledge[7] from health sciences, social sciences, political science, biology, economics, history and public administration.

Health institutions and those from other social and population sectors must work together on interrelated, sustainable actions to create health policies that are truly effective, efficient and equitable, and in which all affected participate, each contributing according to their own mission and assuming shared responsibility.

A collective good is produced when individuals interact and work together for social action,[11,12] which is what guarantees social protection in health and avoids exclusion.[13]


UNIVERSAL HEALTH COVERAGE, PROPOSED DEFINITION WITH RATIONALE

In summary, as Professor Rojas Ochoa argues, community health does not get better or worse by itself, but is closely connected to political, economic and social contexts; political

will; education; development of art and literature; the power of social participation; interdisciplinarity; teamwork and above all, intersectoral cooperation. Strategies to promote health must be truly comprehensive.[14]

Comprehensive health development requires, in addition to comprehensive and integrated social action, a supportive legal system that can process requests and complaints resulting from violations committed by different social bodies, organizations and institutions, to ensure the right to health.

One proposed definition for universal health coverage that includes states and governments together with all actors and sectors that make up society, could be:

The ability of society, states and governments to respond to population health needs, through legislation, infrastructure availability, and social and technological capital, as well as comprehensive planning, organization, action and financing strategies to protect the health of the entire population, equitably and inclusively. 

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