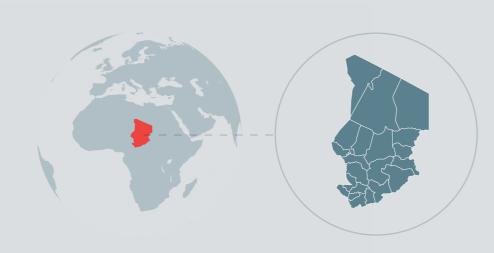


EVOLUTION OF UHC IN CHAD

Countries learning from each other to achieve and maintain Universal Health Coverage (UHC)



CONTEXT

Chad, like other countries in the subregion, is faced with a health situation characterised by high morbidity and mortality due to epidemics



Building health infrastructure



Biomedical equipment



Logistics

(meningitis, measles, cholera,

non-communicable diseases.

and maternal diseases.

etc.), other communicable and

To meet these challenges, the government has made tremendous efforts to put in place the following prerequisites:



Training



2014 - 2017

NATIONAL SOCIAL PROTECTION STRATEGY

2014

Development of the National Social Protection Strategy (SNPS, 2016-2020)

Technical and financial partners in the health sector have signed a pact (2019-2021) to strengthen the implementation of health policies.

The pact aims to improve the effectiveness of development in the health sector by creating a framework that clearly defines responsibilities and priorities.

MAIN ACTORS IN THE HEALTH SYSTEM



The state remains the main official provider of health care through the public health service network, while the European Union, the World Health Organization, UNICEF, the Global Fund, the World Bank, UNFPA, etc. are assisting Chad in developing health policies and strategies.

The private, lucrative sector in Chad is poorly developed, although it has grown in importance in recent years, especially in N'Djamena.



insurance.

Capital **Official language** Independence

Area

N'Djamena 12°06'N 16°02'E Arabic, French from France: 11 August 1960 Total: 1,284,000 km² Water: 1.9%

GENERAL INFORMATION

Chad is a landlocked country in Central Africa with an area of 1,284,000 km2 and a population of approximately 16,2 million (INSEED 2020). Geographically and culturally, it is a crossing point between North Africa and and sub-Saharan Africa. It is divided into 23 regions, 47% of whose surface area consists of desert. Chad's context is characterised by a

severe economic crisis that has resulted in a considerable drop in public resources due to the fall in oil prices, illustrated by the decline in public spending by the State from €2,370 million in 2014 to €1,604.78 million in 2020 (MFB, 2020). However, agriculture and livestock remain the basis of Chad's economic development and contribute 23% and 18% of GDP, respectively.



Chad remains one of the poorest countries in the world. The UNDP Human Development Index for 2019 ranks it 187th out of the 189 poorest countries. Life expectancy at birth in 2020 was estimated at 52.9 years, one of the lowest in sub-Saharan Africa.



"Despite the enormous challenges facing the health system, Chad is progressing at its own rhythm in the establishment of Universal Health Coverage. But for that to happen, it will take a strong political will and a substantial sensitisation of the stakeholders to mobilise technical skills and a plurality of financial means over time."

Chad has several opportunities for moving towards UHC despite the inefficiency of the health system in terms of human resources, the drug supply circuit and the low budget execution rate. In addition to the existence of health strategy documents, the macroeconomic framework produced by the Ministry of Finance reveals that real GDP per capita will increase over the next few years. The budget balance will be in surplus and will increase between 2021 and 2023.

The experiments in strategic health care purchasing conducted over the past few years, the ongoing institutionalisation of a strategic purchasing centre, and the upcoming operationalisation of the Medical Assistance Plan can be reasonably expected to allow progress toward universal health insurance in Chad.

HEALTH FINANCING IN CHAD

Households are the primary source of financing with 63.1% in the form of direct payments and voluntary health insurance schemes, followed by public financing of 36.9%, of which 21.1% comes from technical and financial partners.

The resources dedicated to the health sector are pooled at the Public Treasury with regard to public resources and external budget support, and at the National Social Security Fund (CNPS), private insurance companies and mutual health insurance companies with regard to individual and group contributions.





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