



# Various initiatives in Nepal in providing financial support

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# Outline

- Essential Health care Package in NHSP – 2 and Basic Health Care Service Package and its delivery
- Measures adopted to reduce the financial hardship for increased access
- Issues in Free Care
- Next step....



# Basic Primary Health Care Services/ Essential Health Care Services

- Delivery of BPHCS was envisioned in 1991  
**Health Policy** *(The primary objectives are to upgrade the health standards of the majority of the rural population by extending Basic Primary Health Services up to the village level and ... 1991 Health Policy)*

but

- Not Defined and elaborated as EHCS ( Coined in SLTHP and Elaboration + Contextualization in NHSP II)



# Essential health Care Service Package

Programme	Service	Status	Implementation Modality
1. Reproductive Health	1.1 Family planning	Scaling up	Partnerships with FPAN, Marie Stopes, CRS, PSI, NFCC and others
	1.2 Safe motherhood, including newborn care (free institutional deliveries nationwide for all)	Scaling up	Expanding to medical colleges and private hospitals
	<b>1.3 Medical safe abortion</b>	<b>Piloting and scaling up</b>	<b>Partnerships with I/NGOs (Marie Stopes, FPAN and others) and private clinics and hospitals</b>
	<b>1.4 Prevention and repair of uterine prolapse</b>	<b>Piloting and scaling up</b>	<b>Partnerships with medical colleges and private hospitals</b>
2. Child Health	2.1 Expanded program on immunisation	Scaling up	Government
	2.2 Community-Based Integrated Management of Childhood Illness	Maintaining	
	2.3 Nutrition	Scaling up	
	2.3.1 Growth monitoring and counselling	Scaling up	
	2.3.2 Iron supplementation	Maintaining	
	2.3.3 Vitamin A supplementation	Maintaining	
2.3.4 Iodine supplementation	Maintaining		
2.3.5 De-worming	Maintaining		
<b>2.4 Community-based newborn care (emerged as a separate component)</b>	<b>Piloting and scaling up</b>	<b>Partnerships with local governments and inter-sectoral coordination (schools)</b>	
<b>2.5 Expanded nutritional care and support (added to community-based nutrition care, community nutrition rehabilitation with institutional care, and school nutrition programme)</b>	<b>Piloting and scaling up</b>		



# Essential health Care Service Package

Programme	Service	Status	Implementation Modality
3. Communicable Disease Control	3.1 Malaria control 3.2 Kala-azar control 3.4. Japanese Encephalitic control 3.5 Prevention and of snakebites and rabies control	Scaling up Elimination Maintaining Maintaining	Government
	3.6 Tuberculosis control 3.7 Leprosy control	Maintaining Elimination	Partnerships with INF and other NGOs
	3.8 HIV/AIDS/STDs control	Scaling up	Partnerships with I/NGOs
4. Non - Communicable Disease Control	4.1 <i>Community-based mental health programme*</i> 4.2 <i>Health promotion for non-communicable disease control</i>	<i>Piloting and scaling up</i>	<i>Partnerships with local governments and CBOs</i>
	5.1 <i>Promotion and Prevention oral health care</i>	<i>Piloting and scaling up</i>	<i>Partnerships with schools and private clinics and hospitals</i>
6. Eye Care	6.1 <i>Promotion and Prevention</i> 6.2 <i>Examination, correction and surgery</i>	<i>Scaling up</i>	<i>Partnerships with Nepal Netra Jyoti Sangh (NNJS) and Tilganga Eye Hospital</i>
	6.2 <i>Trachoma (SAFE Programme)</i>	<i>Scaling up</i>	<i>Partnerships with NNJS, DWSS and ITI</i>
7. Rehabilitation of Disabled	7.1 <i>Promotion and Prevention</i> 7.2 <i>Rehabilitation, surgery and therapy</i>	<i>Piloting and scaling up</i>	<i>Partnerships with HRDC and Khagendrad Nawa Jeevan Kendra</i>
	8.1 <i>Promotion and Prevention ( water, air quality, sanitation, hygiene, waste disposal, etc.)</i>	<i>Piloting and scaling up</i>	<i>Inter-sectoral partnerships</i>
9. Curative Care	9. 1 Outpatient care at district facilities	Increasing access and use	Partnerships with local governments, NGOs and medical colleges

\* Including Gender -based Violence Services



# Free Care & EHCS

## Services

Family planning	CBNCP
Safe Motherhood including new borne care	Nutrition: Growth monitoring, Vit A, iodine, deworming, iron supplement
CB IMCI	Outpatient care at district hospital
Uterine prolapse	Safe abortion
Treatment for Malaria, KA, JE, HIV, TB, LEP, Snakebite and Rabies	Eye: Examination correction and surgery ; Trachoma
Expanded Program on immunization	Disability : Rehabilitation, surgery and therapy

# Measures for Reducing Financial Hardship

- Free Health Care programme
  - Out and inpatient services SHP, HP, PHCC
  - Listed essential drugs: SHP, HP, PHCC, district hospital
- Outpatient, inpatient and emergency services available in hospital: FCHVs, senior citizens (>60), ultra poor, poor, helpless, disabled
- Expanded Programme for Immunization
- Family planning services
- Safe Motherhood (Aama) Programme in



# Measures for Reducing Financial Hardship

- ANC and PNC: SHP, HP, PHCC, district hospital
- Screening and operation of uterine prolapse problems
- Community based neonatal programme
- Referral for complicated pregnancy/delivery:  
Poor, Dalits, deprived groups, those having complicated cases in 14 districts
- HIV prevention and treatment programme





# Measures for Reducing Financial Hardship

- Treatment, Care and support for TB patients
- Malaria: prevention , treatment and LLIN
- Referral Programs: Deprived, helpless, disabled, underprivileged, pregnant, and patients with TB, HIV/ AIDs or mental illness
- Transportation cost for : Kala-azar and leprosy
- Relief for medical treatment: Underprivileged (reimbursement), Victims of conflict and martyrs' families
- Free health care service to Urban people through 128



# Measures for Reducing Financial Hardship

- Treatment heart, lung diseases. Valve transplant: Poor
- Treatment for cardiovascular problems : Below 15 and above 75 years of age, disabled
- Treatment for kidney, cancer, heart, Alzheimer's, Parkinson's (up to NPR 100,000): Under privileged citizen
- Treatment of eyes: Poor and disabled
- Presbyopia screening and distribution of spectacles : Above 50 years of age
- Kidney dialysis: Above 75 years, Patients with hepatitis B or C, or HIV



# New Impetus in Free Care : From Next Year

- List of essential medicine from 40 to 60 items
- Other Medical supplies 18 different types will be covered by free care



# Issues in Free Care ...

- Some programs covered incentive schemes however drugs and diagnostics were not covered
- Mothers are getting free obstetric care but not the new born
- Basic screening and management for some chronic illness were not covered by the free services
- Other pharmaceuticals like DNS, IV sets etc not covered by free scheme



# Issues in Free Care ...

- Free services with free drugs were limited to district level hospitals, PHCC, SHP and HP
- Some of the programs supported by external funding's only covered drugs, counseling and limited number of laboratory services
- People's expectation for free beyond Essential Health Care Services: free care delivery approach is introduced to specialized services . (Affordable at the given economic context ? But Catastrophic Financial Hardship is felt/observed in such care not in EHCS .)



# Next steps...

- Identify the essential package/basic health care to be delivered at each level of health care (**What ?**)
- Identify mechanism to reduce the financial hardship – e.g. cover the essential package first and move on to the specialized services. (**Clarity on what we are doing and its impact on our goal/objective ?**)
- Phase wise manner integrate the services – pooling the big parallel funds (**Balance with Investment and priority**)
- Free Health Care approach needs to be linked with quality assurance, readiness of the serving institutions and continuous delivery of the service etc (**Remedy to financial Hardship is not just the free care approach**)



Thank You

