YOU PAID WHAT?

Universal Health Coverage and Medical Oxygen

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Every Breath Counts Coalition

16 April 2024
Universal health coverage (UHC) means that all people have access to the full range of quality health services they need, when and where they need them, without financial hardship. It covers the full continuum of essential health services, from health promotion to prevention, treatment, rehabilitation and palliative care.

World Health Organization (WHO)
By 2030, achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all.

WHAT IS SDG 3.8?

United Nations
As a measure of SDG indicator 3.8.1, the UHC service coverage index combines 14 tracer indicators of service coverage into a single summary measure, including (4) Child treatment: % children <5 with symptoms of acute respiratory infection in 2 weeks pre-survey for whom advice or treatment was sought from a health facility or provider.

United Nations
The world is off track to make significant progress towards the UHCSDG target by 2030 as improvements to health services coverage have stagnated since 2015, and the proportion of the population that faced catastrophic levels of out-of-pocket health spending has increased.

World Health Organization, 2023
HOW DOES ASIA PERFORM?

World Health Organization, 2023
The South-East Asia Region continued to be the second worst-performing region in the world on catastrophic out-of-pocket health spending. However, in Thailand, the % of the population spending more than 10% of household budget out-of-pocket healthcare fell from 5.6% in 2000 to 1.9% in 2019.

WHO/World Bank, 2023
Fig. 4.9. Incidence of financial hardship across per capita consumption quintiles, most recent estimate available, selected countries

<table>
<thead>
<tr>
<th>Country</th>
<th>Quintile 1</th>
<th>Quintile 2</th>
<th>Quintile 3</th>
<th>Quintile 4</th>
<th>Quintile 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nepal (2016)</td>
<td>65</td>
<td>12</td>
<td>12</td>
<td>4</td>
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<tr>
<td>Bangladesh (2016)</td>
<td>45</td>
<td>15</td>
<td>10</td>
<td>5</td>
<td>0</td>
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<tr>
<td>Timor-Leste (2014)</td>
<td>20</td>
<td>10</td>
<td>5</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Myanmar (2017)</td>
<td>15</td>
<td>10</td>
<td>5</td>
<td>1</td>
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</tbody>
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WHO/World Bank, 2023
WHAT ARE THE UHC MONITORING REPORTS?

WHO/World Bank, 2015-2023
WHAT DO THEY SAY ABOUT OXYGEN?

NOTHING!
WHAT ABOUT THE UHC POLITICAL DECLARATIONS?

2019
oxygen = zero
vaccine = 12X

2023
oxygen = zero
vaccine = 24X

2027
?
WHAT ABOUT THE NEW WHO OXYGEN RESOLUTION?

Reaffirming the critical role of medical oxygen in the achievement of the SDGs for health, including...accelerating progress towards universal health coverage (target 3.8).
WHAT ABOUT THE NEW WHO OXYGEN RESOLUTION?

Member States

(1:2) to develop costed national plans to increase access to quality assured, affordable medical oxygen systems and personnel to meet the identified needs of all patients in the context of national achievement of the health-related SDGs and universal health coverage.

(1:11) to monitor access to safe, affordable, quality assured medical oxygen and related services throughout their health systems, as part of national efforts to achieve universal health coverage.
WHAT ABOUT THE NEW WHO OXYGEN RESOLUTION?

Director-General

(2:1) to continue to highlight medical oxygen as an essential medicine and to highlight the related priority medical devices and infrastructure that must be available to all patients who need them as part of quality health systems contributing to universal health coverage.
WHAT DO WE KNOW ABOUT THE COSTS OF MEDICAL OXYGEN?

Kenya: The price of oxygen cylinders has gone up. My mother has a huge debt because I need oxygen and she tries her best to get it for me. The bills just keep on piling up.

Nigeria: When the oxygen was removed, we moved her to the house until she breathed her last. It was a terrible experience. The family is poor. We don’t have money. That was the reason we lost the woman.

Egypt ($US7 daily income per capita): The price of a cylinder hiked up to $US255 from $US115 before the spread of the virus.
WHAT DO WE KNOW ABOUT THE COSTS OF MEDICAL OXYGEN?

Brazil ($US21 daily income per capita): At the height of the shortage crisis in Brazil’s Manaus region in January [2021], the price of a 50-liter oxygen container went up 6.5 times, to almost $US1,200.

Peru: I feel helpless, angry and furious, I feel like my hands are tied. My father is sick and we can’t afford something that is so essential for him to survive.

Mexico ($US21 daily income per capita): At the height of the oxygen shortage in Mexico, a cylinder of oxygen cost more than $US800, up to 10 times the cost paid by a US hospital.
WHAT DO WE KNOW ABOUT THE COSTS OF MEDICAL OXYGEN?

Indonesia ($US9 daily income per capita): The price for a tank of oxygen had jumped to $US140 from the usual $US50.

PNG ($US7 daily income per capita): When we went to the oxygen bottle supplier, BOC, we were confronted with the reality of the high cost of the oxygen bottle ($US193), flowmeter ($US110), and regulator ($US412).

India ($US5 daily income per capita): One man in India told AFP that he paid 45,000 rupees, about $US600, for a cylinder of oxygen. That is about nine times its normal price.
The COVID-19 pandemic has amplified these high out-of-pocket costs for oxygen in every region of the world, exposing the tragic results when patients cannot afford to pay. A study by The Bureau of Investigative Journalism in August 2020 documented high and varied prices for oxygen across Africa and found small rural hospitals in Kenya and Nigeria paying five to 10 times more for a cylinder of oxygen than a London hospital.
WHAT CAN WE DO TO CHANGE THAT?

UNIVERSAL HEALTH COVERAGE (UHC) DAY

Why the costs of medical oxygen must be included in Universal Health Coverage

12 December 2021
Every Breath Counts calls on all national governments to ensure that:

1. Pulse oximetry and oxygen are free at the point-of-care, especially for patients most at risk of death from hypoxemia.
2. Pulse oximetry and oxygen are available in primary health facilities and to transport hypoxemic patients to higher-level health facilities. No patient should die of hypoxemia because their primary health facility did not have oxygen nor could provide any en route to a hospital.
3. Pulse oximetry and oxygen are available at all secondary and tertiary hospitals.
4. Health facilities at all levels have adequately trained and remunerated health staff to accurately operate pulse oximeters and oxygen therapies (from all sources), and have expertise in administering invasive and non-invasive ventilation, and all the associated respiratory care technologies.
5. Health facilities at all levels have adequately trained and remunerated biomedical engineering staff to maintain pulse oximeters and oxygen therapies (from all sources) and have expertise in maintaining invasive and non-invasive ventilation, and all the associated respiratory care technologies.
Tell us how much you are paying for medical oxygen...

#EveryBreathCounts  #UHC2030
Documenting the Crippling Costs of Oxygen Treatment

To document the high out-of-pocket costs of oxygen treatment, Every Breath Counts is launching a new campaign on Universal Health Coverage Day - You Paid WHAT? The Crippling Costs of Oxygen Treatment. If you are an adult or the parent of a child who has incurred high out-of-pocket costs for medical oxygen in recent years, we want to hear from you. Simply answer the seven simple questions below. Your identity will be protected. We will be collating and sharing publicly the information you provide, without attribution, to raise awareness.
Lancet Global Health Commission on Medical Oxygen Security

Patient Testimony

Pakistan: My treatment cost 5,000,000 rupees ($US18,000) and I had to get 2,000,000 ($US7,000) from my parents, 2,000,000 ($US7,000) in loans from friends and family, and 1,000,000 ($US4,000) from my father’s health insurance.

Bangladesh: At that time oxygen cylinders cost about 20,000 taka ($US180) each and you had to refill every 2-3 hours. It is almost impossible for patients who are not highly paid to afford medical oxygen.

Pakistan: The government doesn’t support oxygen purchases. People have to pay for their own. It cost me 840,000 rupees ($US3,000) for my concentrator and should last for life.
WHAT CAN YOU DO FOR OXYGEN IN UHC?

Opportunities for Action

1. UHC2030 and UHC Day (12 December 2024)
2. Lancet Global Health Oxygen Commission, 2025
3. Disease Control Priorities 4 (DCP4), 2025
4. UHC High-level Political Meeting, 2027
5. What will you be doing?
**WHAT IS UHC 2030?**

https://www.uhc2030.org/

- **Steering Committee** (Co-chairs Gabriela Cuevas Barron, former Mexican MP and honorary President of the IPU, Dr Justin Koonin, President, AIDS Council of New South Wales)

- **Political Advisory Panel**
  - Ms. María Fernanda Espinosa Garcés, President of the 73rd Session of UNGA
  - Dr. Vytenis Povilas Andriukaitis, Former European Commissioner
  - Prof Ilona Kickbusch, Graduate Institute for International and Development Studies
  - Dr. Sania Nishtar, Member of the Senate of Pakistan (now Gavi CEO)
  - Joy Phumaphi, Executive Secretary, African Leaders Malaria Alliance
  - Ms. Emilia Saiz, Secretary General of the United Cities and Local Governments
  - Mr. Elhadj As Sy, Chair of the Board, Kofi Annan Foundation
  - Prof. Keizo Takemi, Member of the House of Councillors, Japan
  - H.E. Mrs. Fawzia bint Abdulla Zainal, Speaker of the Council of Representatives

- **Secretariat**
  - World Health Organization, the World Bank, and OECD
WHAT IS UHC DAY?

12 December

https://universalhealthcoverageday.org/

#HealthforAll
WHAT IS THE LANCET OXYGEN COMMISSION?

THE LANCET GLOBAL HEALTH COMMISSION

MEDICAL OXYGEN SECURITY

Find out more...

https://stoppneumonia.org/latest/lancet-global-health-oxygen-commission/
Disease Control Priorities (DCP) assess the most up-to-date evidence on the most cost-effective interventions to address the burden of disease in low-resource settings.

There have been three editions and a fourth will be published in 2024:

- DCP 1: 1993
- DCP 2: 2006
- DCP 3: 2015-18
- DCP 4: 2024+

Core partners include University of Washington, World Bank, Fogarty International Center, World Health Organization, Gates Foundation, + more
Convene a high-level meeting on universal health coverage in 2027 in New York, aimed to undertake a comprehensive review on the implementation of the present declaration to identify gaps and solutions to accelerate progress towards the achievement of universal health coverage by 2030, the scope and modalities of which shall be decided no later than the eightieth session of the General Assembly, taking into consideration the outcomes of other existing health-related processes and the revitalization of the work of the General Assembly.

Political Declaration of the High-level Meeting on Universal Health Coverage, 2023
WHAT CAN YOU DO TO MAKE THE CASE?

PubMed search results for "oxygen universal health coverage" show 3 results.