

Country reviews of financial protection in Europe

WHO Barcelona Office for Health Systems Strengthening

The WHO Barcelona Office is a centre of excellence in health financing for universal health coverage (UHC). We work with Member States across WHO's European Region to promote evidence-informed policy making.

A key part of our work is to assess country and regional progress towards UHC by monitoring financial protection – the impact of out-of-pocket payments for health on living standards and poverty. Financial protection is a core dimension of health system performance and an indicator for the Sustainable Development Goals.

We support countries to develop policy, monitor progress and design reforms through a combination of health system problem diagnosis, analysis of country-specific policy options, high-level policy dialogue and the sharing of international experience. Our office is also the home for WHO training courses on health financing and health systems strengthening for better health outcomes.

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About the series

This series of country-based reviews monitors <u>financial protection</u> in European health systems by assessing the impact of out-of-pocket payments on household living standards. Financial protection is central to universal health coverage and a core dimension of health system performance assessment.

What is the policy issue?

Financial hardship occurs when out-of-pocket payments for health are large in relation to a household's ability to pay. Out-of-pocket payments may not be an issue if they are small or paid by people who can afford them, but even small out-of-pocket payments can cause financial hardship for poor people and those who have to pay for treatment such as medicines on an ongoing basis.

Where a health system provides weak financial protection, people may not have enough money to pay for health care or to meet other basic needs such as food, housing and utilities. Weak financial protection can therefore undermine access to health care, lead to ill health and deprivation and exacerbate inequalities.

Why is monitoring financial protection useful?

The overall aim of the series is to provide policymakers and others with robust, context-specific and actionable evidence that they can use to move towards universal health coverage and to break the link between ill health and poverty.

In addition to presenting detailed evidence on financial protection, each review draws on other sources of information and analysis to identify the health system factors that strengthen and undermine financial protection, as well as factors beyond the health system, such as changes in living standards.

The reviews also consider unmet need for health care (instances in which people need health care but do not receive it due to access barriers); highlight implications for policy; and draw attention to areas that require further analysis.

How do country reviews assess financial protection?

Each review is based on analysis of data from national household budget surveys. Using household spending as a proxy for living standards, it is possible to assess:

- how much households spend on health out of pocket in relation to their capacity to pay: out-of-pocket payments that exceed a threshold of a household's capacity to pay are considered to be *catastrophic*
- household ability to meet basic needs after paying out of pocket for health; out-of-pocket payments that push households below a poverty line or basic needs line are considered to be impoverishing
- how many households are affected by catastrophic and impoverishing out-of-pocket payments (incidence); which households are most likely to be affected (distribution); and the breakdown of catastrophic out-ofpocket payments by type of health service (structure)
- changes in any of the above over time

How are the reviews produced?

The reviews are produced by country experts in collaboration with WHO. To ensure consistency, each review adopts a standard approach based on a template. All of the reviews are edited by WHO and subject to external peer review.

Which countries are covered?

In its first phase the series covers 25 countries: Albania, Austria, Croatia, Cyprus, the Czech Republic, Estonia, France, Georgia, Germany, Greece, Hungary, Ireland, Kyrgyzstan, Latvia, Lithuania, the Netherlands, Poland, Portugal, the Republic of Moldova, Slovakia, Slovenia, Sweden, Turkey, Ukraine and the United Kingdom. The series will be extended to other countries in the WHO European Region in a second phase.

Further information

For more information about the series, please contact **Sarah Thomson**.

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