Health research for universal health coverage

At least half of the world’s population cannot obtain essential health services, according to a report from the World Bank and WHO. Each year, large numbers of households are pushed into poverty because they must pay for health care out of their own pockets.¹ WHO’s World Health Day 2018 focuses on universal health coverage.

Universal health coverage means that all people and communities can use the promotive, preventive, curative, rehabilitative and palliative health services they need, of sufficient quality to be effective, while also ensuring that the use of these services does not expose the user to financial hardship.²

DG Research and Innovation, through its FP7 and Horizon 2020 framework programmes, aims to provide evidence to support health systems across Europe and beyond to achieve efficient, accessible and equitable health care for all.

Global health research

Global health research contributes to reducing the growing inequities in health, notably in terms of access, availability, affordability and acceptability of quality health care. The Sustainable Development Goal 3, adopted by the United Nations summit in September 2015, is dedicated to improving global health by ensuring healthy lives and promoting well-being for all, at all ages. Through these research actions, the European Commission reinforces the impact of its actions by involving all relevant stakeholders, and by providing data and evidence-based recommendations to policy makers.

Project examples

The PERFORM project aimed to reinforce health management workforce at district level in Ghana, Tanzania and Uganda, thus addressing the workforce deficit in sub-Saharan countries. The management strengthening activities developed approaches to improve workforce performance based on situation analysis.

The aim of the follow-up project PERFORM2scale is to develop and evaluate a sustainable approach to scaling up a district level management strengthening intervention in different and changing contexts. A framework and strategy for scaling up the intervention will be developed with government agencies in Ghana, Malawi and Uganda. The scale-up framework and strategy will be subjected to process evaluation to identify opportunities and barriers, and outcome evaluation.

The **COST-Africa** project implemented and evaluated a surgical training intervention targeted at ‘clinical officers,’ who are trained non-physician clinicians that form the backbone of Africa’s district hospital services. These clinical officers were trained to deliver major surgery at district hospitals in Malawi and Zambia, making surgery more accessible to the patients, and improving the quality of care.

The follow-up project **SURG-Africa** is drawing lessons from two large-scale successful projects that have trained and supervised non-physician clinicians to deliver essential and emergency surgery in four African countries. Based on comprehensive surgical systems analyses, it will put in place national surgical information systems, and will test innovative interventions for making specialist supervision of district surgery feasible and affordable. Epidemiological, economics and implementation research will evaluate the impact of this intervention, and provide evidence for policymakers.

**SURE** examined how policymakers can link healthcare resources to medical and administrative needs for maternal and child health, mental health and improving access to health services in low-income countries. The project developed policy briefs for seven African countries, addressing priority problems, which had a positive effect on the policy dialogue.

**Horizon Prizes**

The majority of maternal deaths occur in developing countries, largely due to preventable or treatable conditions. The **Horizon Prize for the Birth day** was awarded on 13 February 2018 to three solutions that best demonstrated a reduction in maternal and/or newborn morbidity and mortality during facility-based deliveries. These solutions are novel, safe and scalable.

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