

## TASK 4.1 ■ HEALTH INFORMATION: SHARING EXPERIENCES

a) Read the information below. Please underline what is new or strikes you as interesting or useful.

Lack of access to information remains a major barrier to knowledge-based healthcare in developing countries despite it being considered the information age.

**Health information is about:**

- Health Status of people
- Health determinants
- Health care providers
- Health facilities and systems
- Health system components
- Health financing and expenditures

The development of reliable, relevant, usable information requires cooperation among a wide range of professionals including healthcare providers, policy makers, researchers, publishers, information professionals, indexers, and systematic reviewers.

**Health information is generated through:**

- Events related to humans which are recorded –births, deaths, disabilities etc.
- Provision of services at health facilities that are recorded – expenditure, number of patients being seen etc.
- Surveys and studies conducted on health and related matters.

**Health information can be used:**

- For data analysis to identify and highlight concerns.
- To influence health policy and plans
- To improve health facility functioning and efficiency
- To identify areas of neglect and inadequacy
- To demand greater budget allocations
- To highlight failures by the government to

All of us – rich and poor, governments, companies and individuals – share responsibility of ensuring that everyone has access to information, means of prevention and treatment.

b) How would you summarise the value of health information for your health and budget work?

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## TASK 4.2 ■ BARRIERS TO INFORMATION AND HOW TO OVERCOME THEM

Health information and budget information maintained by national governments frequently do not reflect international best practices for transparency in health and budgets information. *What are some typical barriers that members of CSOs experience when they try to access information for their health and budget advocacy?*

**Brainstorm** as many barriers as you can think of and record your ideas in the column below.

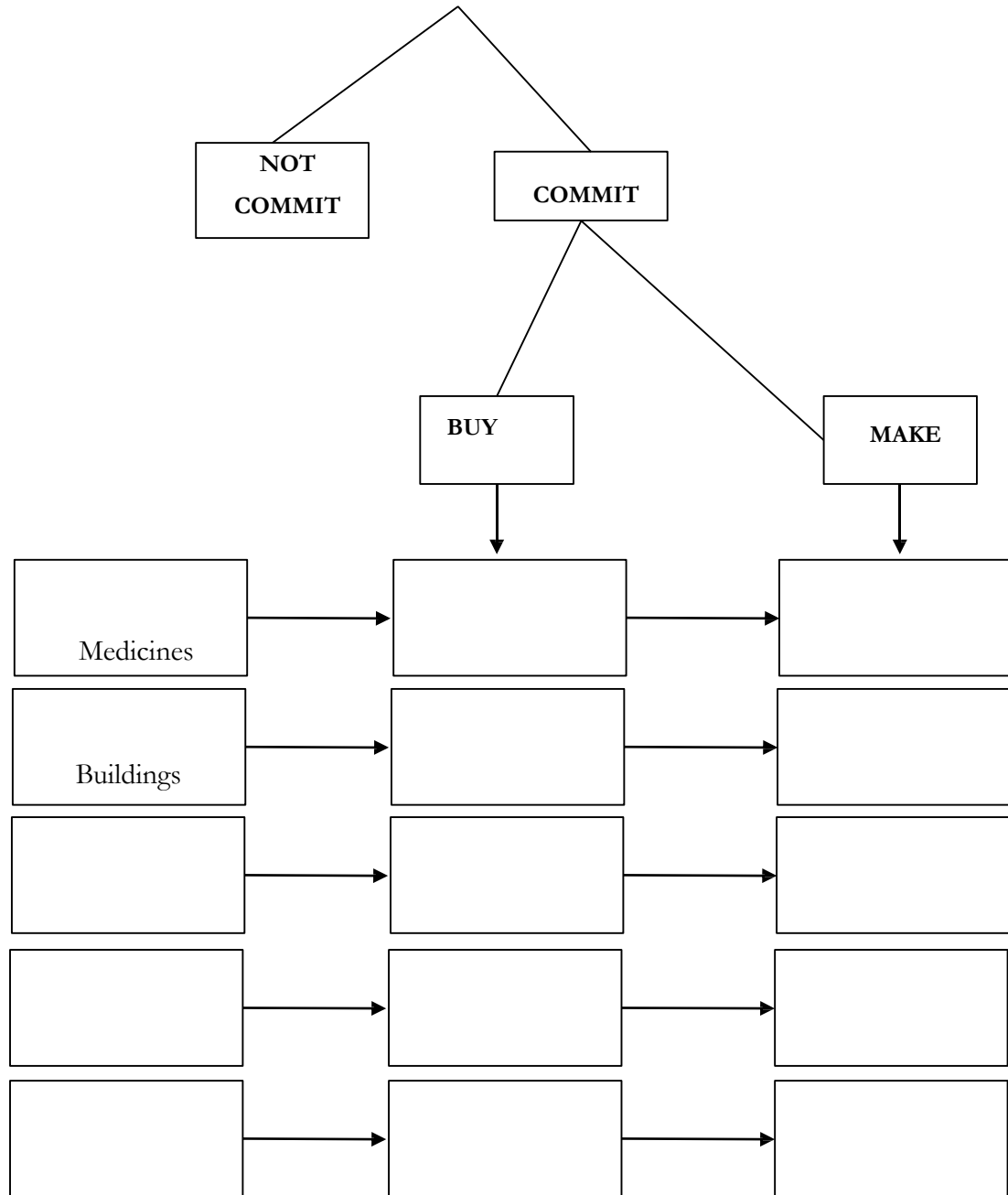


What strategies can be used to overcome these barriers? Write your ideas in the column below.

BARRIERS IN ACCESS TO INFORMATION	STRATEGIES TO OVERCOME BARRIERS

## TASK 4.3 ■ THE DECISION TREE: GOVERNMENT DECISIONS ABOUT HEALTH CARE

Use the chart below to record ideas emerging from the discussion.



## **TASK 4.4 ■ THE IMPACT OF VARIOUS HEALTH SYSTEMS AND FINANCING MECHANISMS ON ACCESS TO HEALTH CARE**

### **3 WAYS GOVERNMENTS FINANCE THE PROVISION OF HEALTH CARE**

<b>Private: Private</b>	<b>Public: Private</b>	<b>Public: Public</b>
<b>Government does not commit to provide health care</b>	<b>Government commits to buy health care</b>	<b>Government commits to directly provide health care</b>

Reflecting on the presentation about the three ways government finances the provision of health care, discuss the following question with your partner: “What impact, if any, do you think each of these public financing mechanisms has on those accessing the health system and on what it costs them?” Please provide examples and we’ll hear some of your responses in plenary.

#### **PRIVATE: PRIVATE**

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#### **PUBLIC: PRIVATE**

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#### **PUBLIC: PUBLIC**

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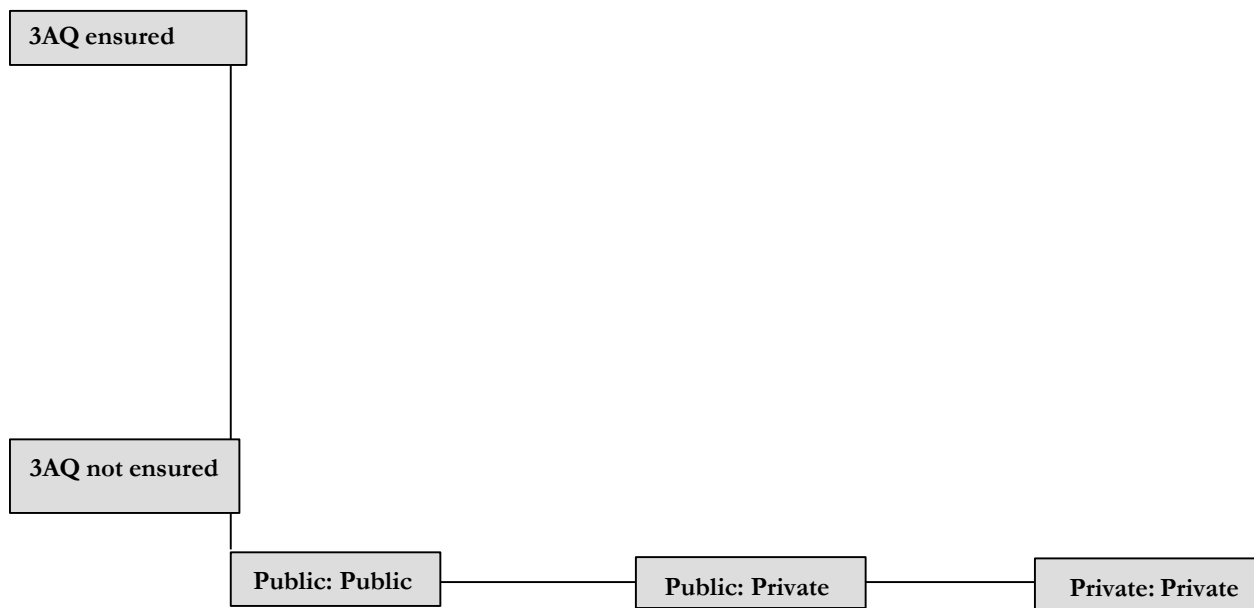


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**How are these terms useful to you?**

## TASK 4.5 ■ WHAT DOES MY GOVERNMENT COMMIT TO PROVIDE?

1. Which financing mechanism applies in your country? Place your country on the matrix below. How does this affect universal access to health care in your country? We'll hear some of your responses in plenary.



2. How would you describe your country's health system and financing mechanism?

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3. What further questions could you ask about what your government has committed to do with regard to the provision of health care?

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## TASK 4.6 ■ FINANCING OF HEALTH CARE IN CENTRALIZED AND DECENTRALIZED HEALTH SYSTEMS

1. Reflecting on the presentation on financing of health care systems and working with others from your country, draw a diagram illustrating the sources of and flow of funding to primary, secondary and tertiary health services in your country.
2. Read the text in this box:

Human rights obligations apply to local governments because they are a constituent element of government or because national government has devolved powers to them. In both cases, the primary responsibility for protecting and promoting rights lies with the national government, which has the double responsibility to monitor local government performance to ensure that rights are respected, and enable local governments to perform their duties by providing them with adequate powers and resources.

- International Council for Human Rights Policy  
*Local Government and Human Rights: Doing Good Service*  
(p.20)

Recall the government's obligation to use the maximum of available resources to realize the right to health, and the obligation to raise and spend its resources in a non-discriminatory way. What do these obligations mean for how national and local governments should finance the health system?

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## **TASK 4.7 ■ ACCESSING HEALTH CARE IN SUNRISE STATE, POLARUS**

- 1) Gather in your Polarus groups. After reading the Polarus case study (below) and relevant sections of the Polarus Sourcebook., discuss the health issue allocated to your group.
- 2) Copy a table like the one below onto flipchart paper and complete the table together.
- 3) With the other members of your Polarus group, take a walk and identify what you could research or ask about your issue based on the findings of the other groups.
- 4) We will see and hear each group's findings.

Issue Description: \_\_\_\_\_

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KEY CHALLENGES RELATING TO THIS ISSUE	WHAT SHOULD BE CHANGED?	WHO IS RESPONSIBLE FOR THE CHANGE?	WHAT WILL BE THE 3AQ IMPLICATIONS?	WHAT WILL BE THE BUDGET IMPLICATIONS?
1.				
2.				
3.				