

# Reaching the Vulnerable with Effective Health Services and Financial Protection

## How Well are We Doing?

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# Four Parts

- + What is vulnerability?
- + How many people are vulnerable?
- + How well are reproductive maternal, newborn, and child health (RMNCH) services reaching these vulnerable people?
- + How well are financial protection programs reaching them?



# Part One: What is Vulnerability? Two Illustrative Definitions

- World Bank Definition
- PMAC Definition

# WHAT IS VULNERABILITY?

## World Bank Definition

Vulnerable people are not now poor, but could easily become so if affected by some shock like illness or drought.

# WHAT IS VULNERABILITY?

## PMAC Definition

“The vulnerable population approach focuses on decreasing health inequalities between socially defined groups...”

- PMAC Secretariat

# Dimensions of Health Vulnerability

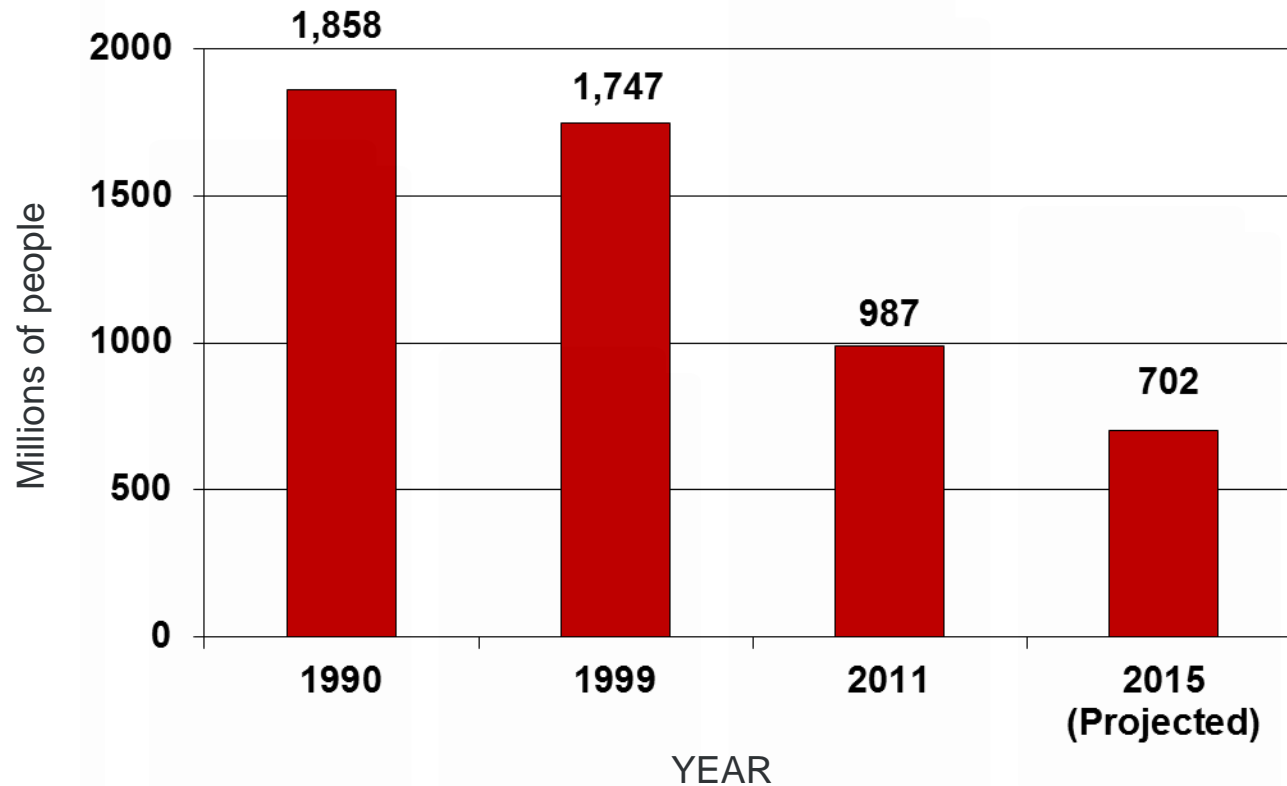
- + Ethnic
- + Gender
- + Religious
- + Economic
- + Place of residence
- + Educational status



## Part Two: How Many People Are Vulnerable?

- Current Situation
- Recent Trends

# NUMBER OF PEOPLE LIVING IN ABSOLUTE POVERTY: Global Total

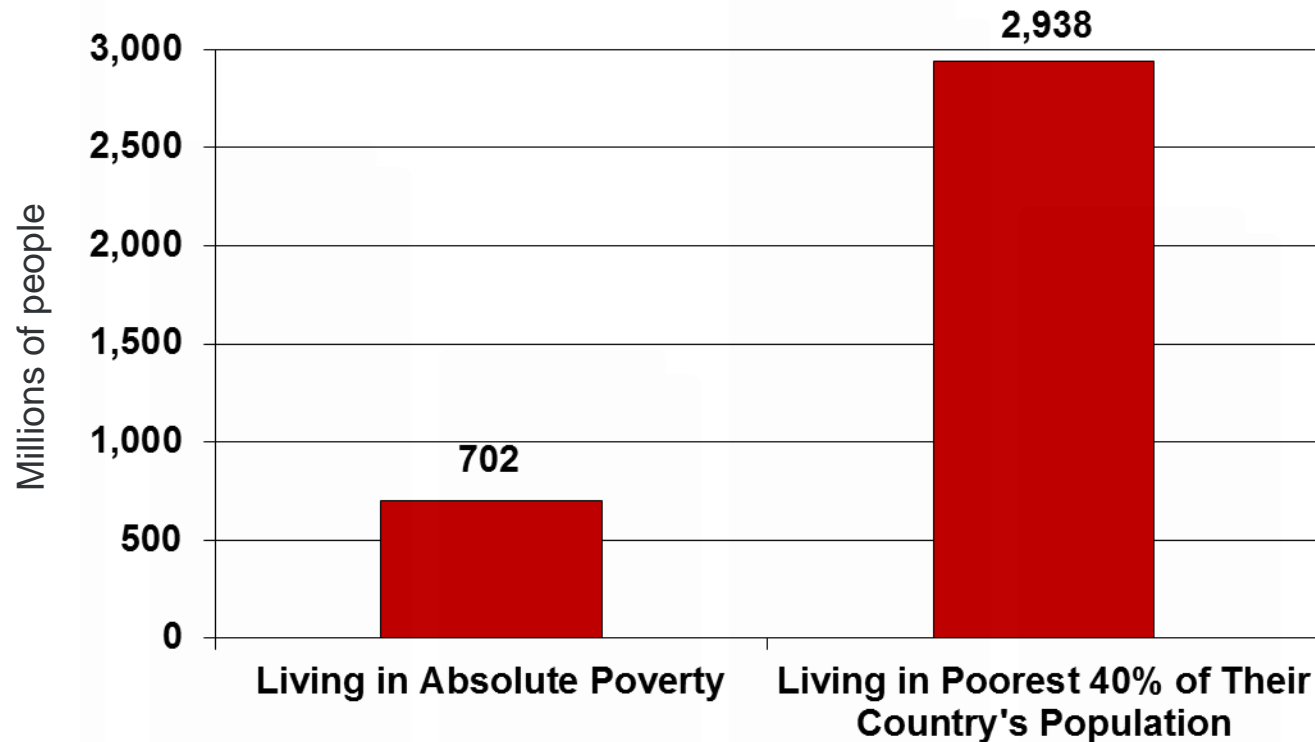


Note: The definition of “absolute poverty” is that of the World Bank—\$1.90 daily per capita income or consumption, at 2011 prices as adjusted for intercountry differences in purchasing power.

Source: Marcio Cruz, et al. 2015. “Ending Extreme Poverty and Sharing Prosperity: Progress and Policies.” World Bank Group Policy Research Note PRN/15/03.



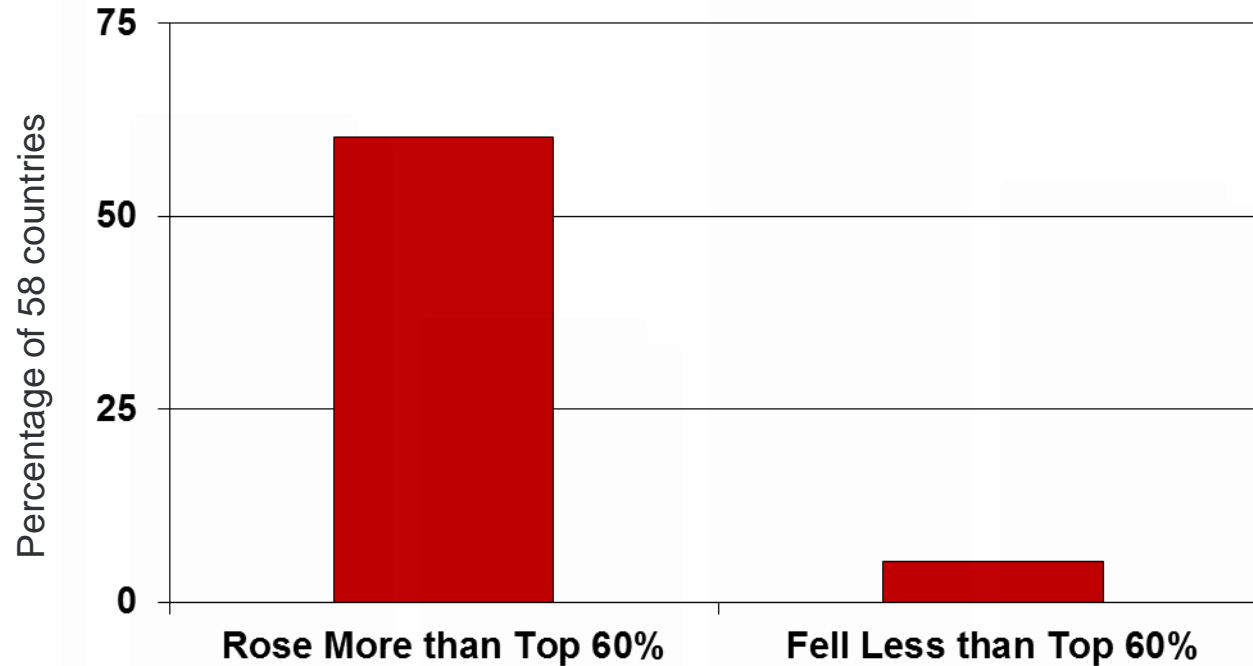
# ESTIMATED NUMBER OF POOR PEOPLE IN THE WORLD, 2015 (Projected)



Note: The definition of “absolute poverty” is that of the World Bank—\$1.90 daily per capita income or consumption, at 2011 prices as adjusted for intercountry differences in purchasing power.

Source: Marcio Cruz, et al. 2015. “Ending Extreme Poverty and Sharing Prosperity: Progress and Policies.” World Bank Group Policy Research Note PRN/15/03.

# INCOME GROWTH AMONG LOWEST 40% of LOWER- AND MIDDLE-INCOME COUNTRY POPULATIONS, c. 2007-12



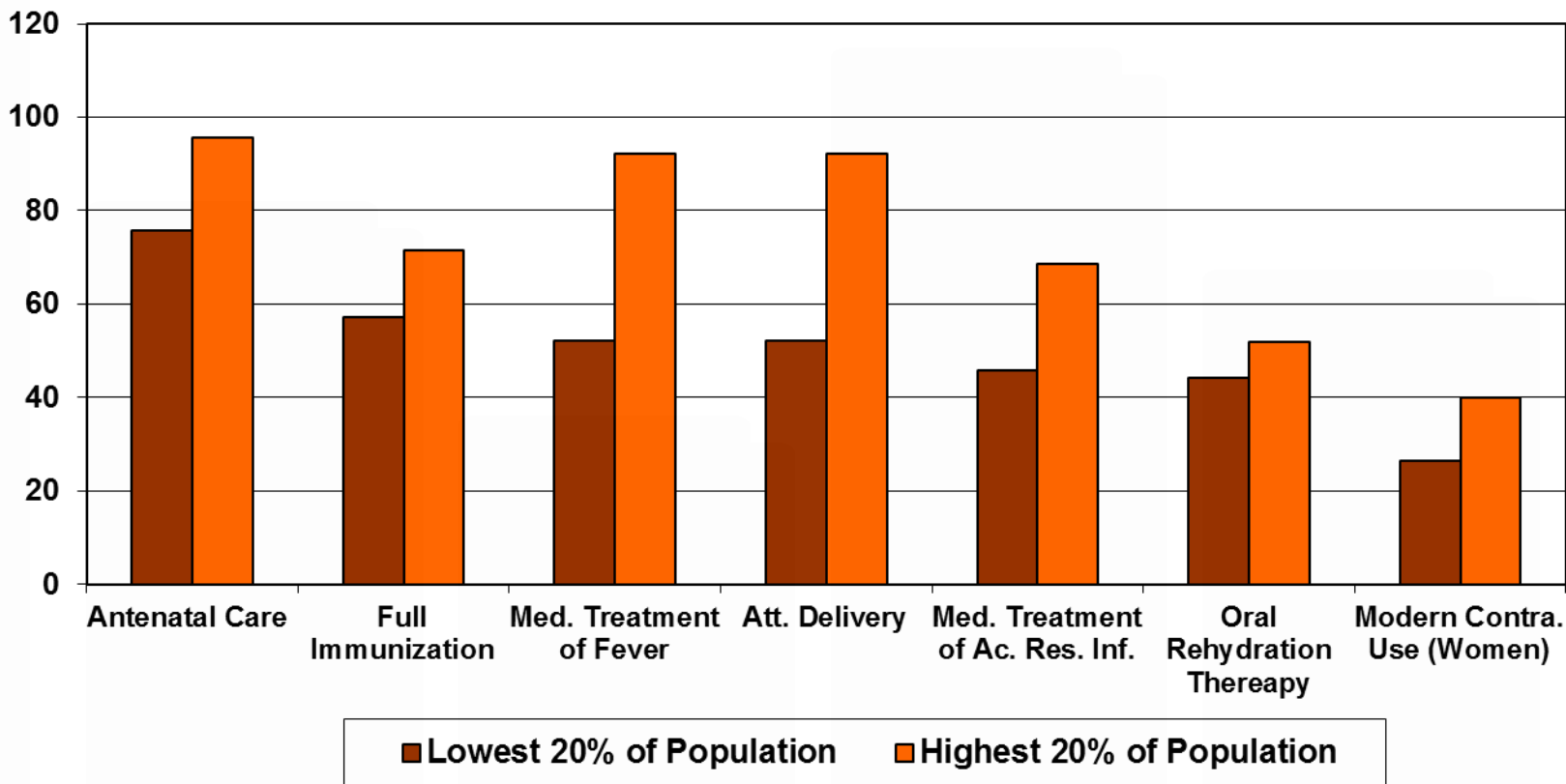
Source: Marcio Cruz, et al. 2015. "Ending Extreme Poverty and Sharing Prosperity: Progress and Policies." World Bank Group Policy Research Note PRN/15/03.



## Part Three: How Well Are RMNCH Services Reaching the Vulnerable?

- Current Situation
- Recent Trends

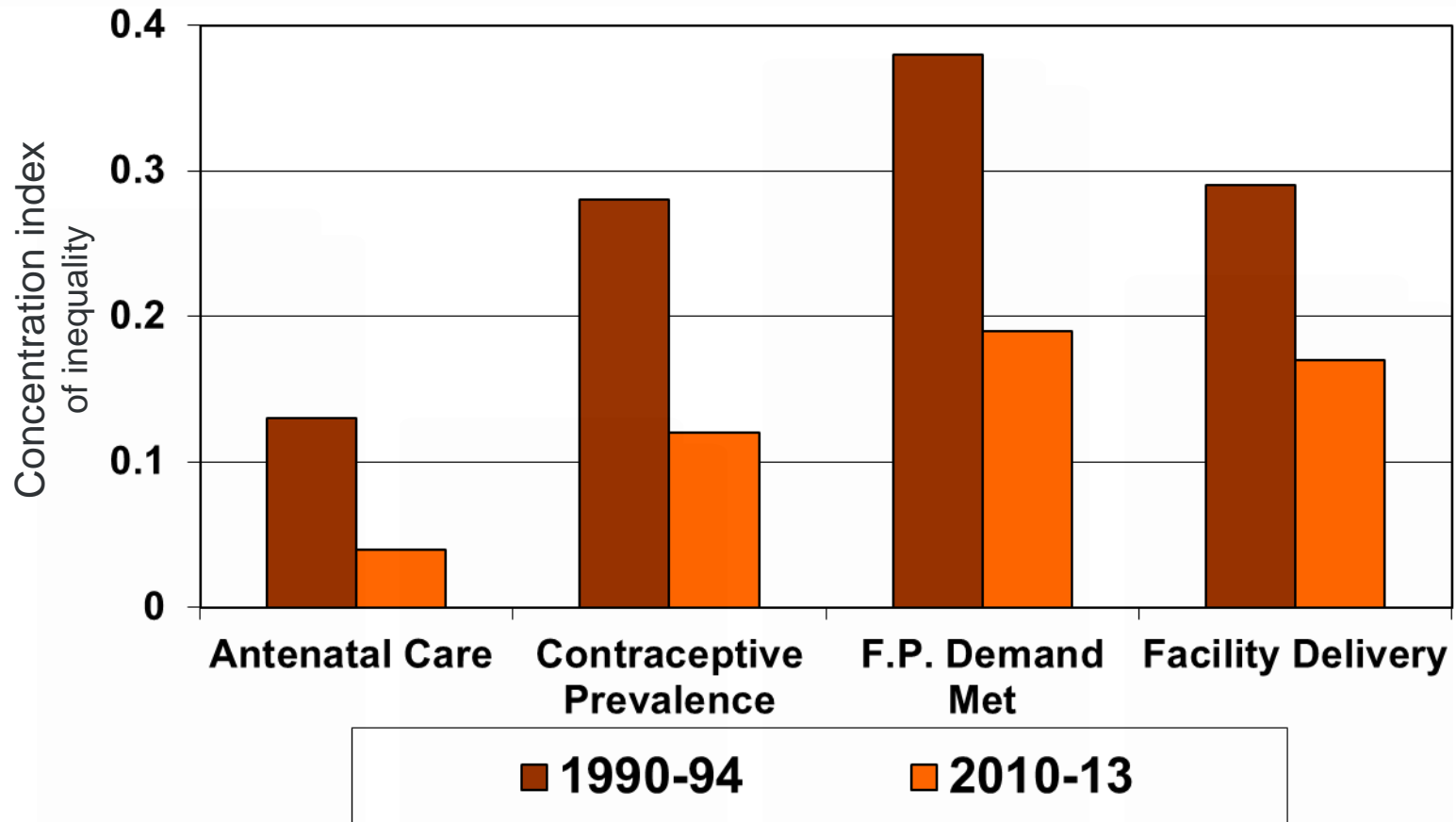
# USE OF BASIC RMNCH SERVICES: Coverage Rates among Lowest and Highest 20% of the Population in Developing and Transitional Countries



Note: Number of countries varies from 45 to 76, according to type of health service covered.

Source: Demographic and Health Surveys

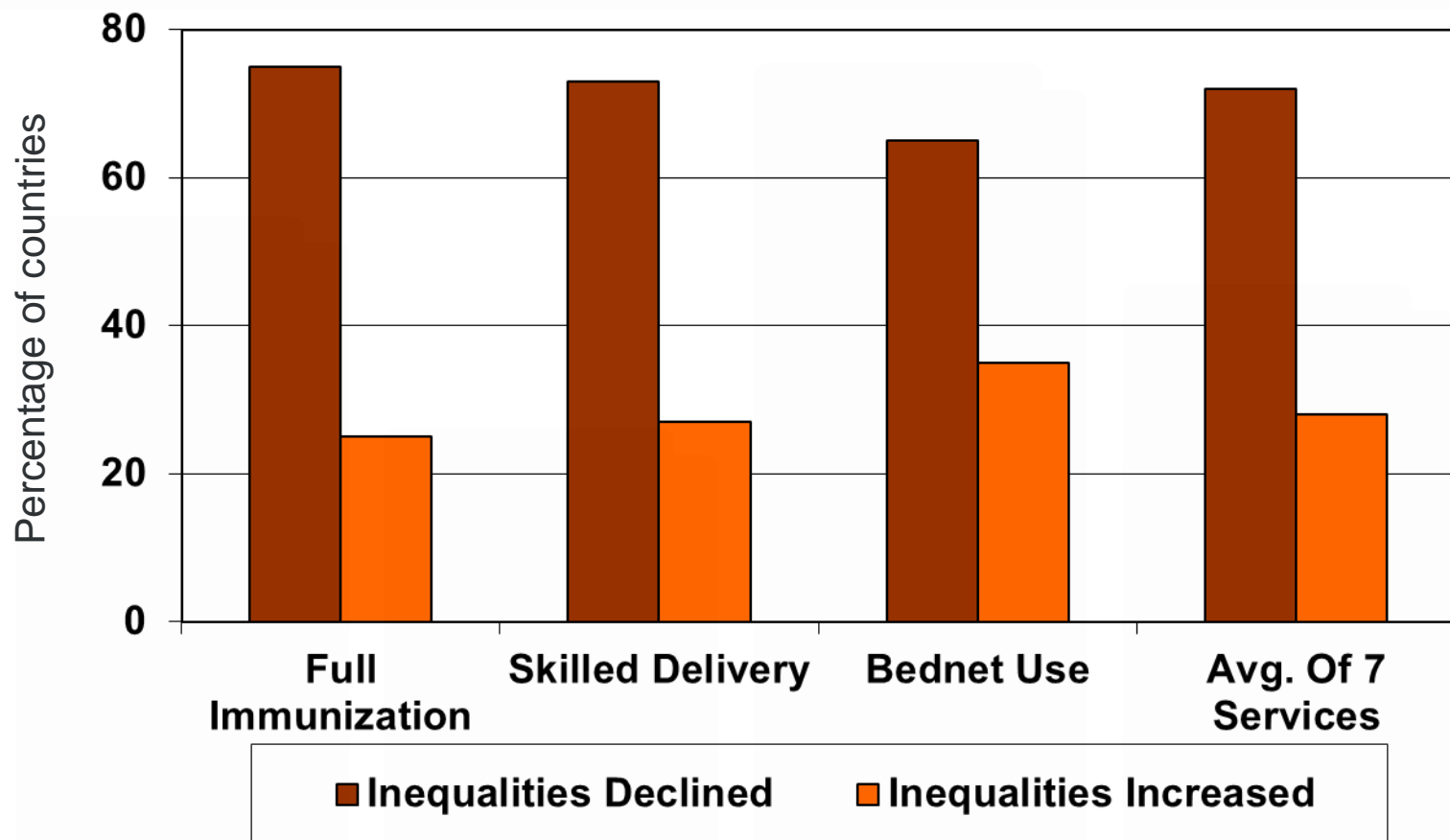
# TRENDS IN INEQUALITY: USE OF BASIC RMNCH SERVICES—Average Experience of 74 Countries



Note: All figures are approximate.

Source: Sarah Alkenbrack, et al. 2015. "Did Equity of Reproductive and Maternal Health Service Coverage Increase during the MDG Era? An Analysis of Trends and Determinants across 74 Low- and Middle-Income Countries." *PLoS One*.

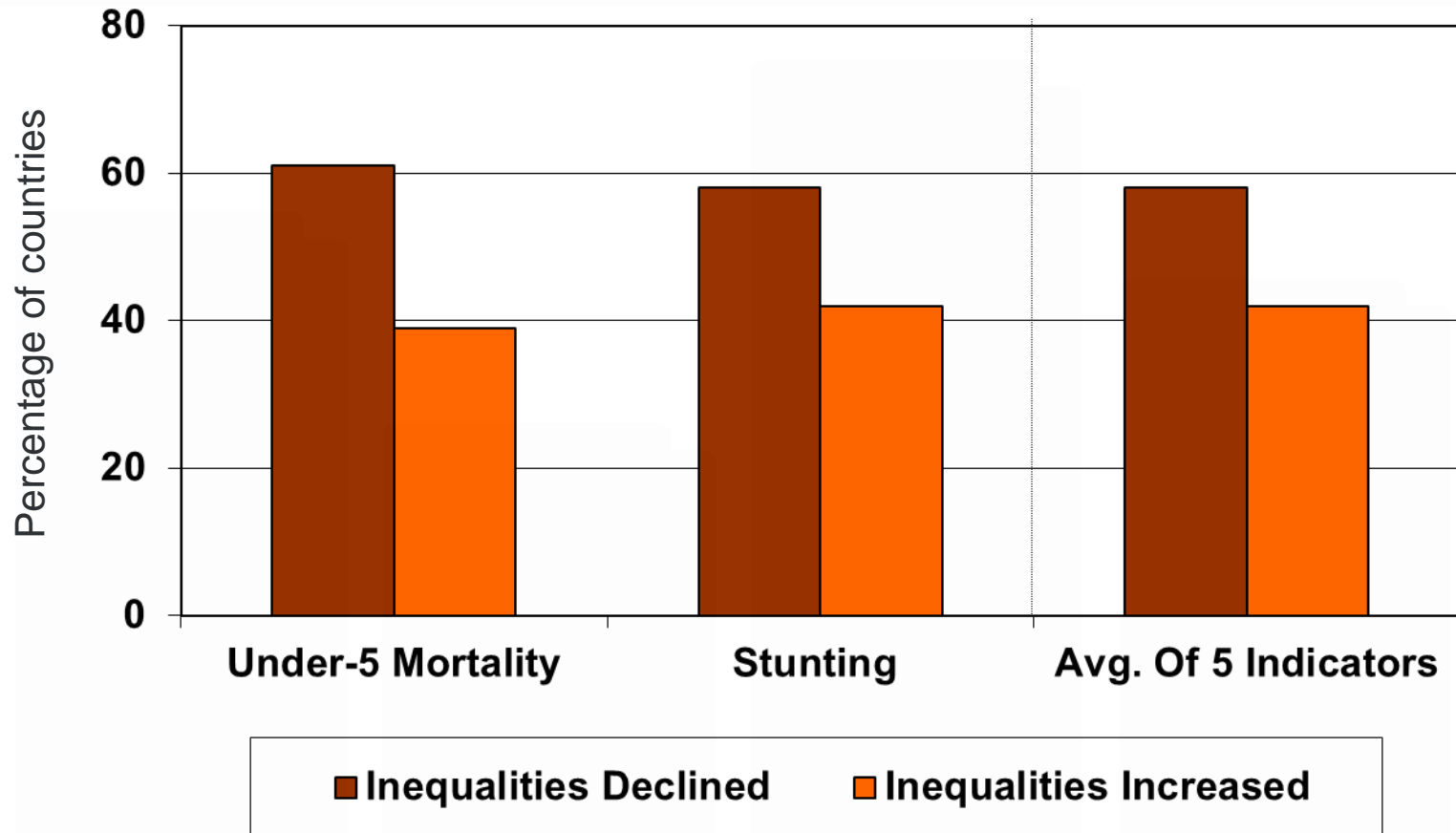
# TRENDS IN SERVICE COVERAGE INEQUALITY: Changes in Inequality between Bottom 40% and Top 60% of Population



Note: Number of countries varies from 23 and 65, according to health service.


Source: Adam Wagstaff, Caryn Bredenkamp, and Leander Buisman. 2014. "Progress on Global Health Goals: Are the Poor Being Left Behind." *World Bank Health Observer*.

# TRENDS IN HEALTH STATUS INEQUALITY: Changes in Inequality between Bottom 40% and Top 60% of Population



Note: Number of countries varies from 23 and 65, according to health service.

Source: Adam Wagstaff, Caryn Bredenkamp, and Leander Buisman. 2014. "Progress on Global Health Goals: Are the Poor Being Left Behind." *World Bank Health Observer*.

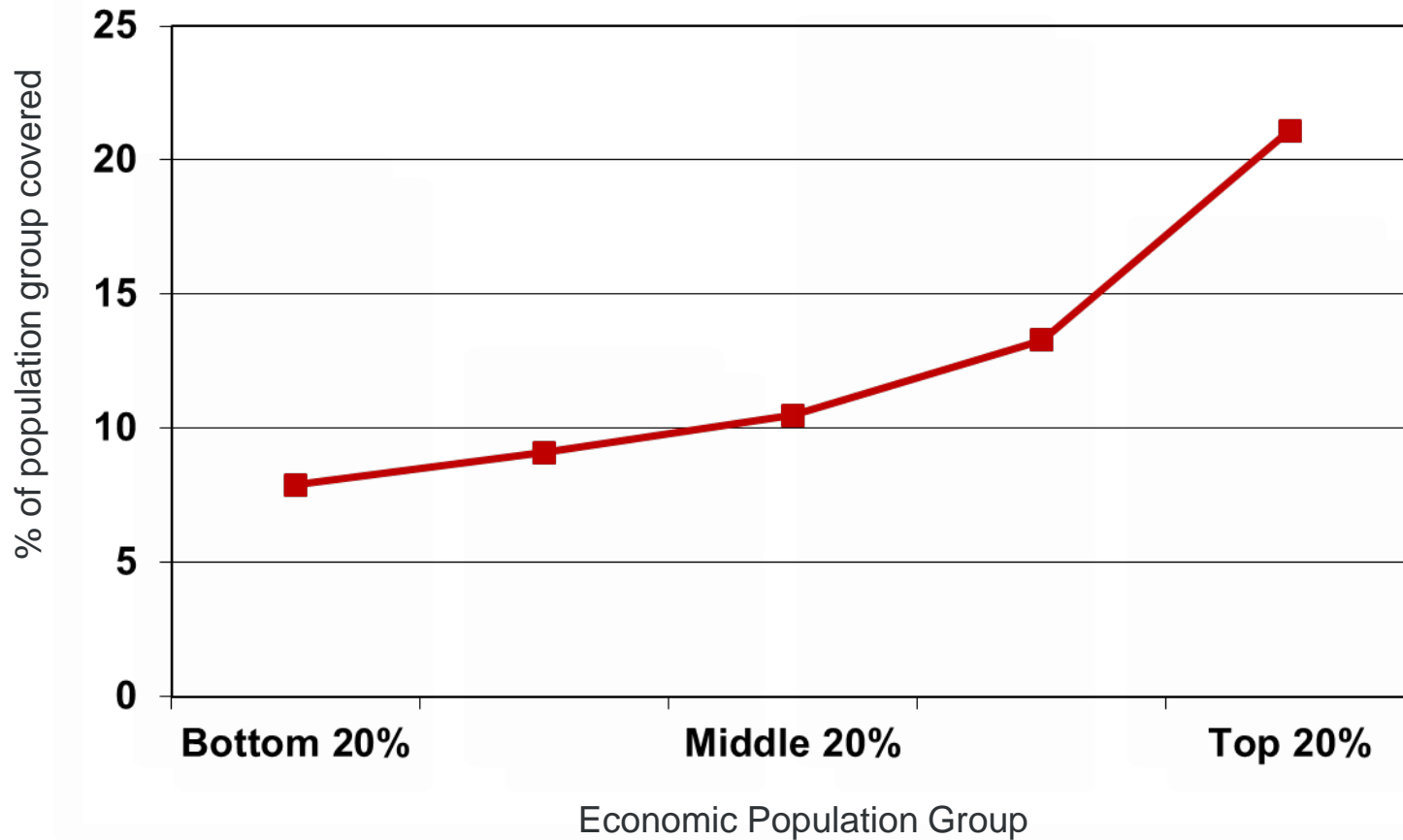


## Part Four: How Well are Health Insurance Programs Reaching the Vulnerable?

- The Overall Record
- The Record of Different Types of Insurance Programs

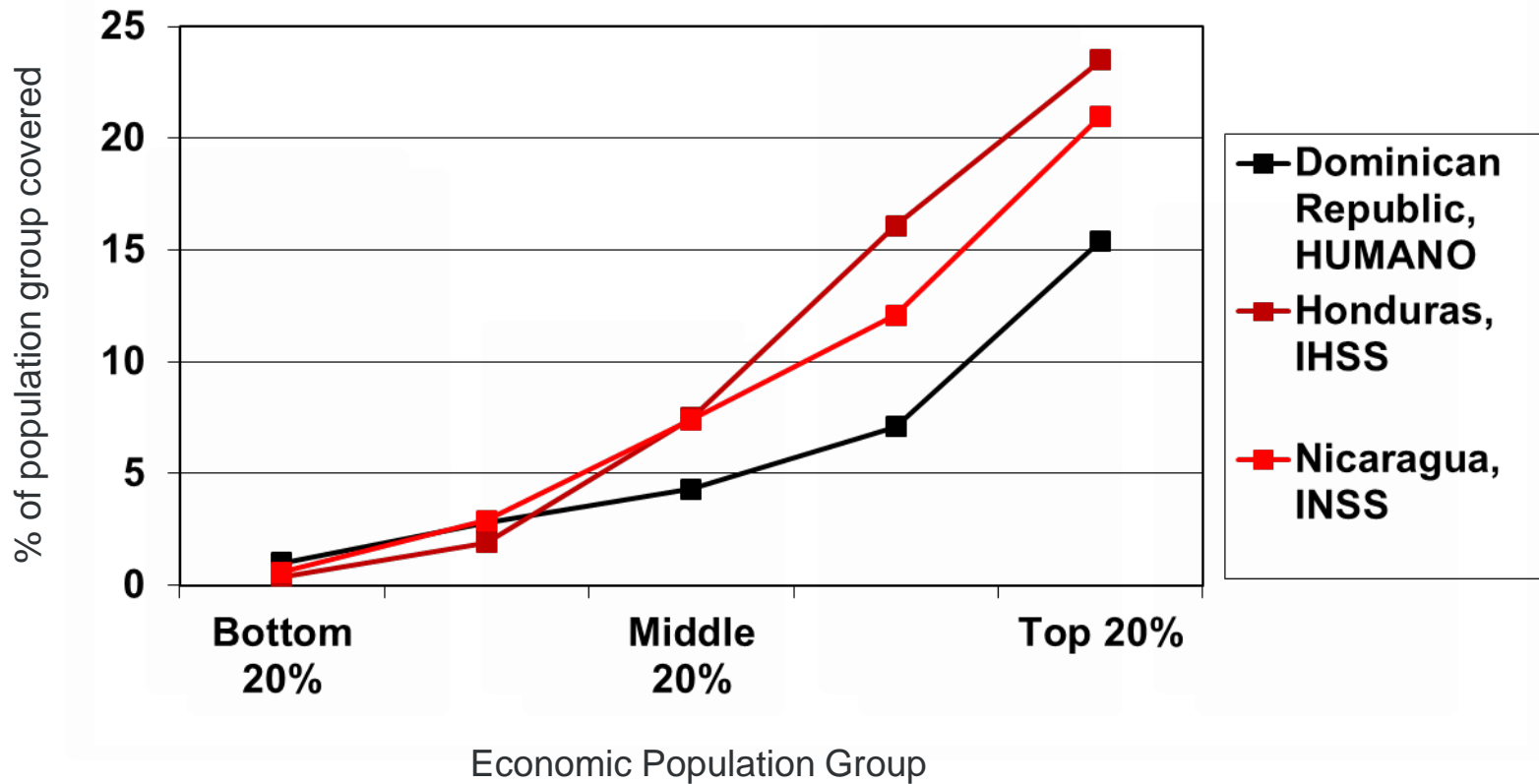


# ENROLLMENT IN HEALTH INSURANCE PROGRAMS: Unweighted Average, 38 Low- and Middle-Income Countries, c. 2008-15



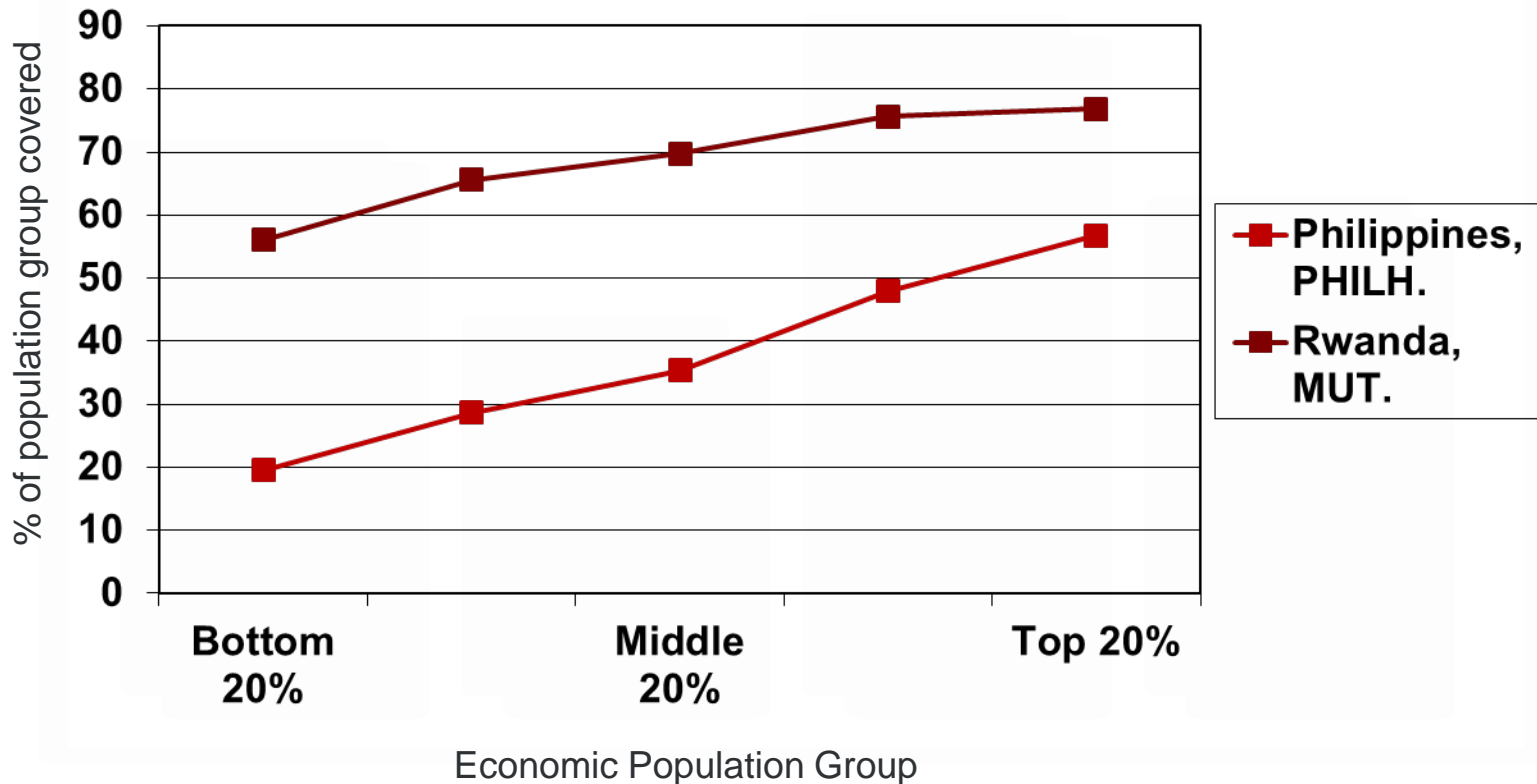
Source: Demographic and Health Surveys

# COVERAGE OF HEALTH INSURANCE PROGRAMS: Pattern I: Traditional Government Social Security and Commercial Programs



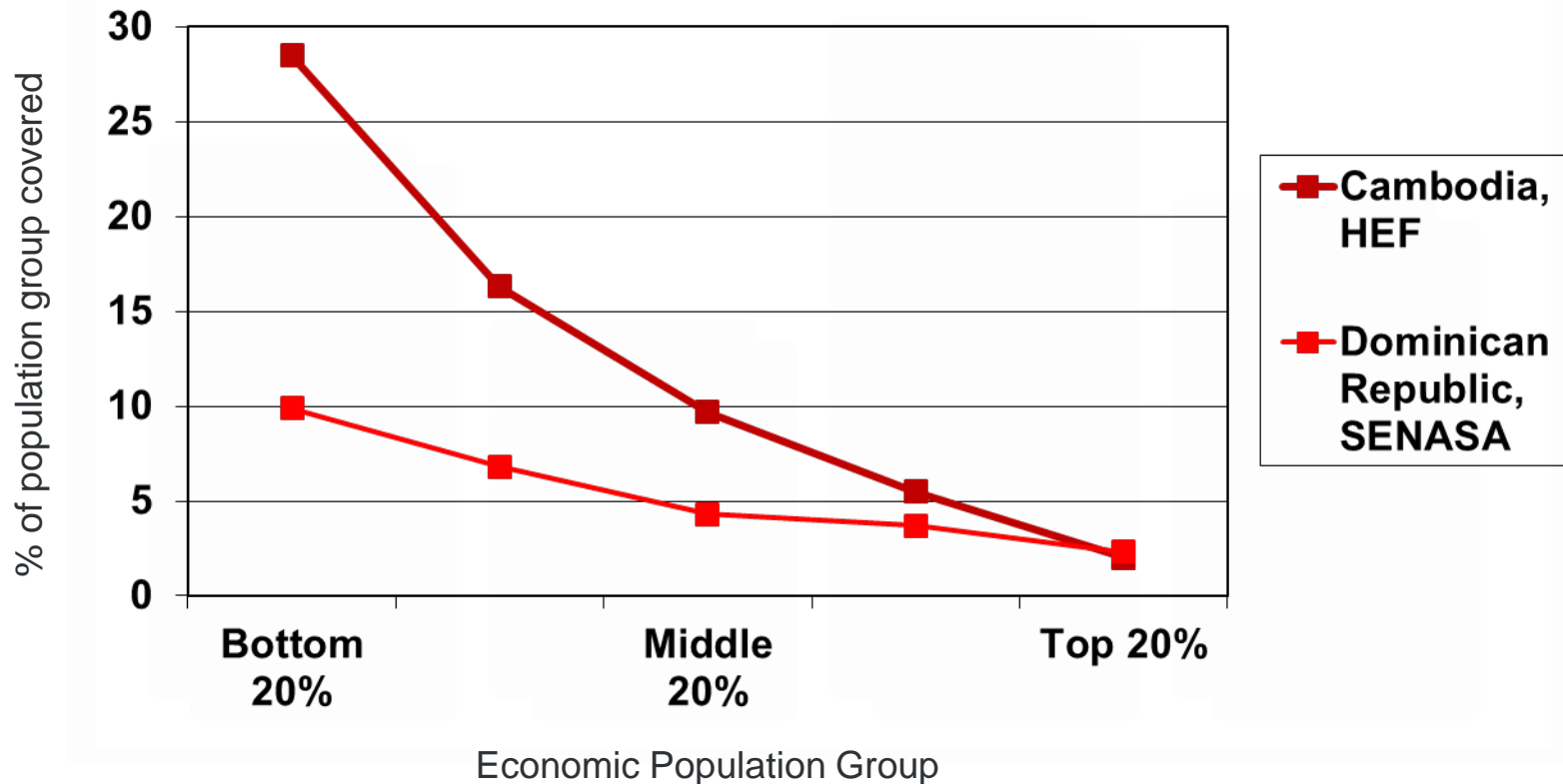
Source: Demographic and Health Service data presented in Davidson R. Gwatkin and Rachel Chase, "Socioeconomic Inequalities among the Direct Financial Beneficiaries of Health Insurance Program," Unpublished Manuscript, 2014.

# COVERAGE OF HEALTH INSURANCE PROGRAMS: Pattern II: Government Social Programs for the Entire Population (i.e., UHC)



Source: Demographic and Health Service data presented in Davidson R. Gwatkin and Rachel Chase, "Socioeconomic Inequalities among the Direct Financial Beneficiaries of Health Insurance Program," Unpublished Manuscript, 2014.

# COVERAGE OF HEALTH INSURANCE PROGRAMS: Pattern III: Government Social Programs for the Poor



Source: Demographic and Health Service data presented in Davidson R. Gwatkin and Rachel Chase, "Socioeconomic Inequalities among the Direct Financial Beneficiaries of Health Insurance Program," Unpublished Manuscript, 2014.

# HP+

## HEALTH POLICY PLUS

*Better Policy for Better Health*



<http://healthpolicyplus.com>



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