Thème 3:
L’engagement de l’état dans le développement de la mutualité est-il nécessaire et souhaitable

Topic 3:
Is the engagement of the state within the development of mutual health organizations necessary and is it worth pursuing?

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WORKSHOP APPROACH

• Additional presentation on:
  1. Case Study: Burkina Faso
  2. Comparison: NHIS Ghana and SNAM Burkina Faso
  3. Challenges and Recommendations
  4. Common Conclusion and Outlook
  5. Questions for discussion
WORKSHOP APPROACH (cont.)--Questions for Discussion

1) Should we accept the abolishing of the mutual and solidarity-based character of mutual schemes for a universal coverage or is it this specific character that can ensure an equal and adequate access to health care for all?

2) Should we favor the general committment of the public authority or are mutual health organisations to be independent and non-governmental?

3) Lessons Burkina Faso can learn from Ghana‘s example
SUMMARY OF WORKSHOP PROCEEDINGS

1. No black and white dichotomy between MHIs and the State/Government;

• MHI is not a panacea for universal access to health care.

• A collaborative effort between Governments & MHIs is needed.

• There’s the need for a coherent way for all actors to think about the comparative advantage of all the actors as MHIs need the state to prosper/for strengthening and the state needs MHIs to help.
2. MHIs need to ensure the following to continue to maintain their status/be strengthened:

   a) Maintain their character (governments should not exercise centralization of MHIs without the governments’ ability to provide all the needed financial resources for health care).

   b) Operate with ethics concerning what to do/not do (and not just concentrate on achieving autonomy)

   c) Have better control of use of monies
SUMMARY OF WORKSHOP PROCEEDINGS (cont. 3)

• 3. Governments should do the following:
  • a) Control/regulated the management of monies by MHIs (civil society should assist in this)
  • b) The government (and all stakeholders) need to keep an eye on health care providers and other managers of MHIs
  • c) Provide a legislation/legal framework on the creation & functioning of MHIs
  • d) Provide Universal Basic Coverage with time; (MHIs should provide coverage for additional needs)
SUMMARY OF WORKSHOP PROCEEDINGS (cont. 4)

4) OTHER ISSUES

• a) Need for regular peer review of our respective countries’ health systems to find out the role each actor needs to play at each time

• b) In defining what needs to be done with provision of health insurance in our respective countries, there is the need for critical contextualization of each country’s situation