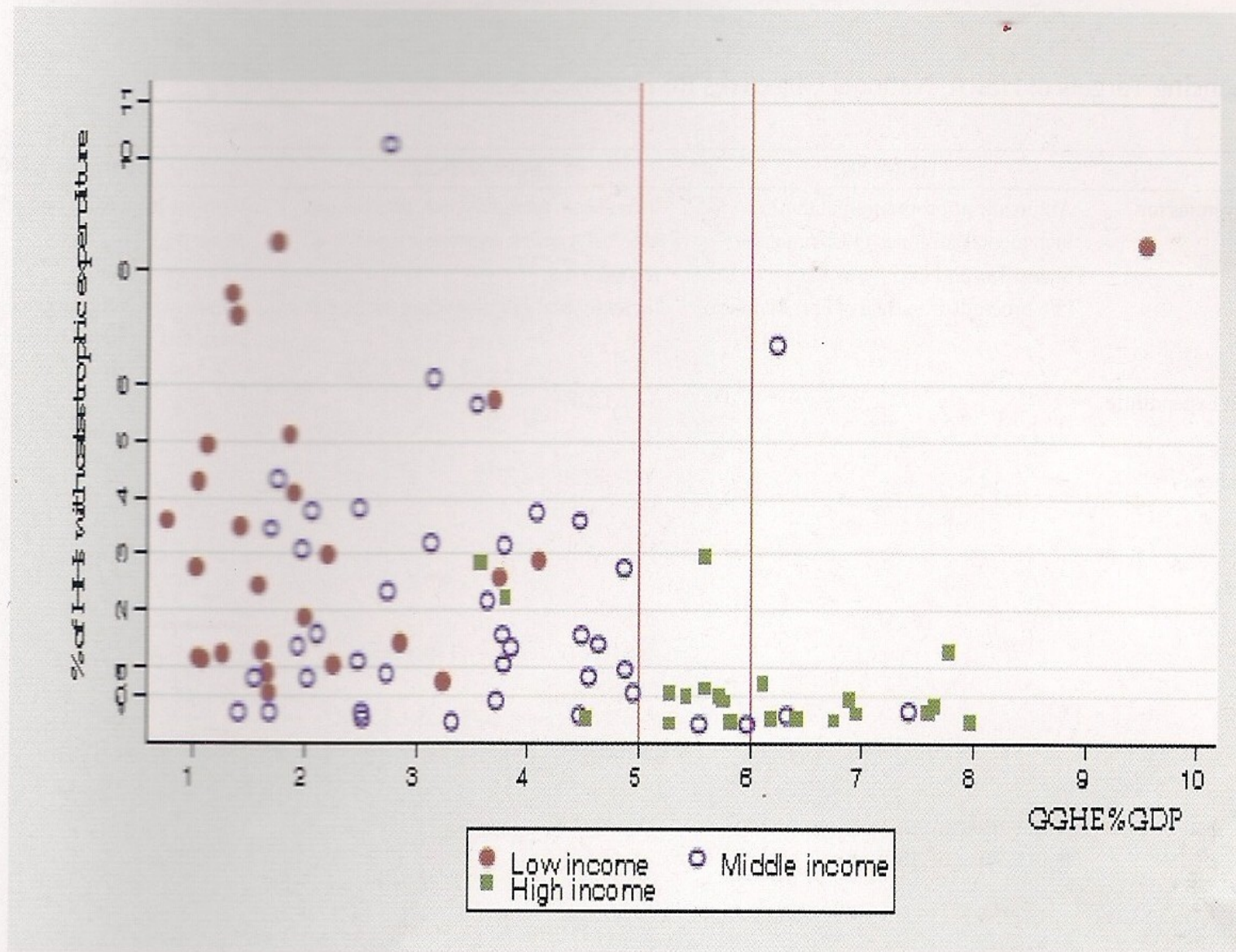


Health Professions Education and Development

Dr. Ernesto O. Domingo





Appendix 1. Public Health Spending and % of Household catastrophic health expenditure

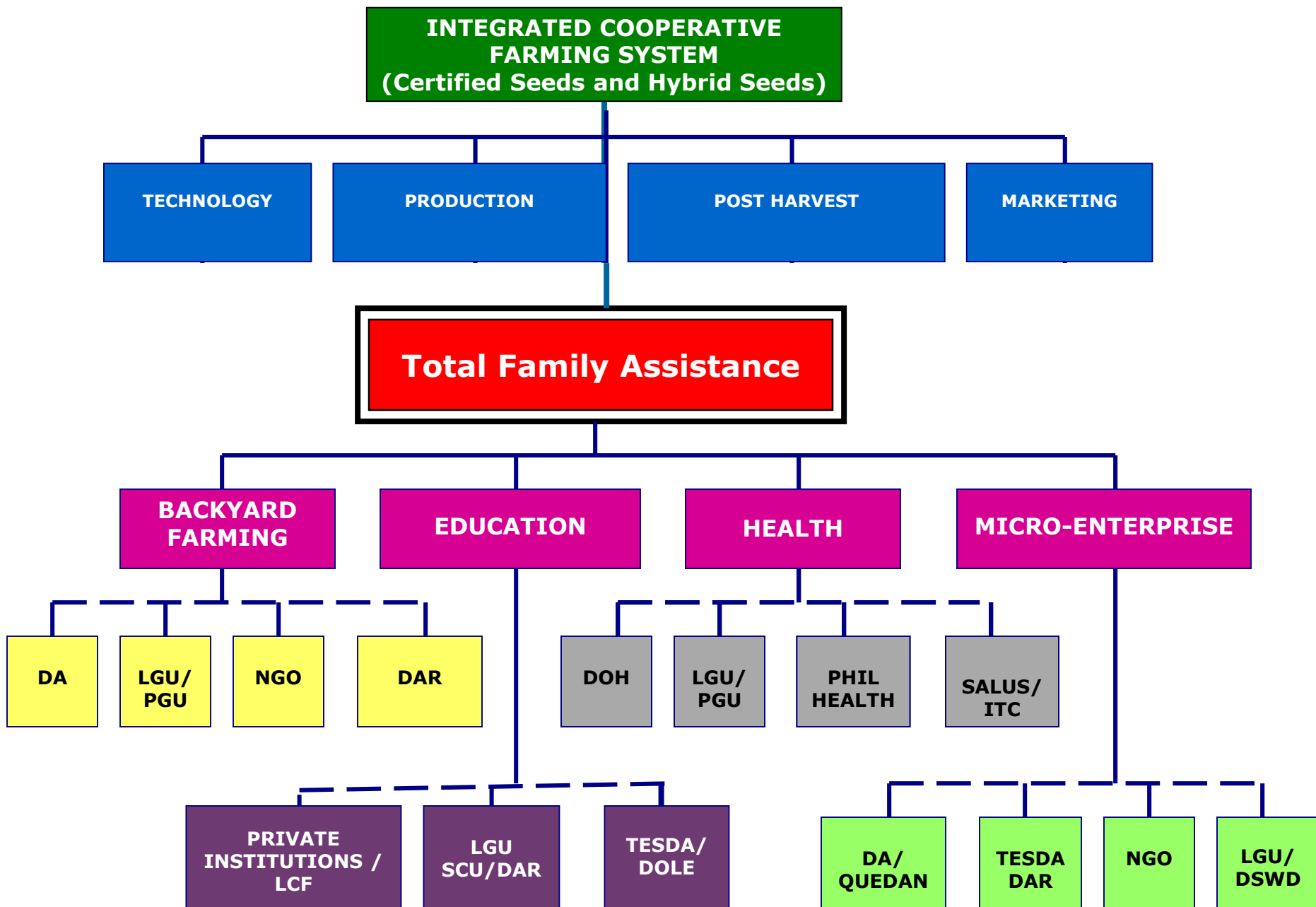
(Source: Xu, K, Evans DB, Kawabata K, et al. 2003. Household catastrophic health expenditure: a multi-country analysis. The Lancet. Vol(362):111-117)



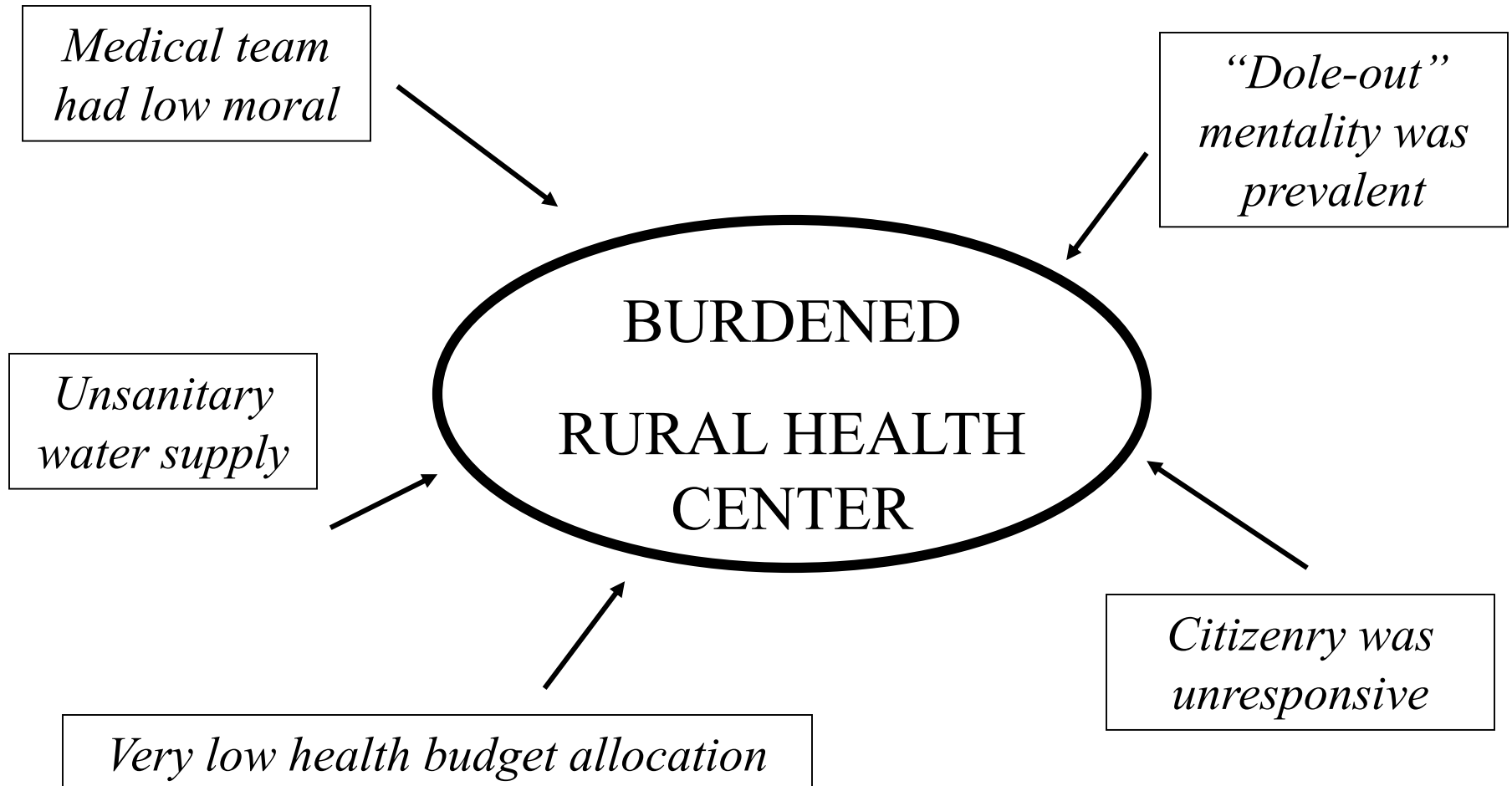
BUILDING COMMUNITIES

A DEVELOPMENT STRATEGY

The late **Mayor Sonia Lorenzo's** experience in
San Isidro, Nueva Ecija



San Isidro's Societal Divide





ALLOCATION OF 16.21% MUNICIPAL BUDGET TO HEALTH

Social ROI

Monetary equivalent of Social
Benefits & Outcomes

SROI =

Money, Supplies, People's
Time, Borrowed Facilities



Social ROI

Putting all the elements together

$$\text{SROI} = \frac{\text{Social Benefits} - \text{Operating Costs}}{\text{Investments}}$$

$$\text{SROI} = \frac{\text{P977,866} - \text{P347,640}}{\text{P108,000}}$$

$$\text{SROI} = \mathbf{584\%}$$

Local experience: San Isidro

- The first years, implemented **livelihood** projects
- Beneficiaries defaulted , loans were **spent on catastrophic illnesses** – health conditions which lead to spending more than ½ of the family budget after food
- Decided to **improve health services**
- Livelihood projects became successful
- Municipality developed from **5th class to 2nd class**



Reclassification of the Town:

2005 - 2007

2nd Class Municipality
(P45M or more but less than P55M)

== P51,362,591.83



2000 - 2004

4th Class Municipality
(P20M or more but less than P30M)

== P17,227,070.15



1996 - 1999

5th Class Municipality
(P4M or more but less than P8M)

== P5,240,000.00

Note: Reclassification is every Four (4) Consecutive Years

Investment in Health

(UN Commission on Health, Employment and Economic Growth 2000-2011)

- $\frac{1}{4}$ of economic growth in low/middle income countries is the result of the value of improvement in health
- ROI in health is 9:1
- Result in increase by one (1) extra year of life which increase the GDP per capita by 4%
- Results in demographic dividend
- Produce multiplier effect that enhances economic growth

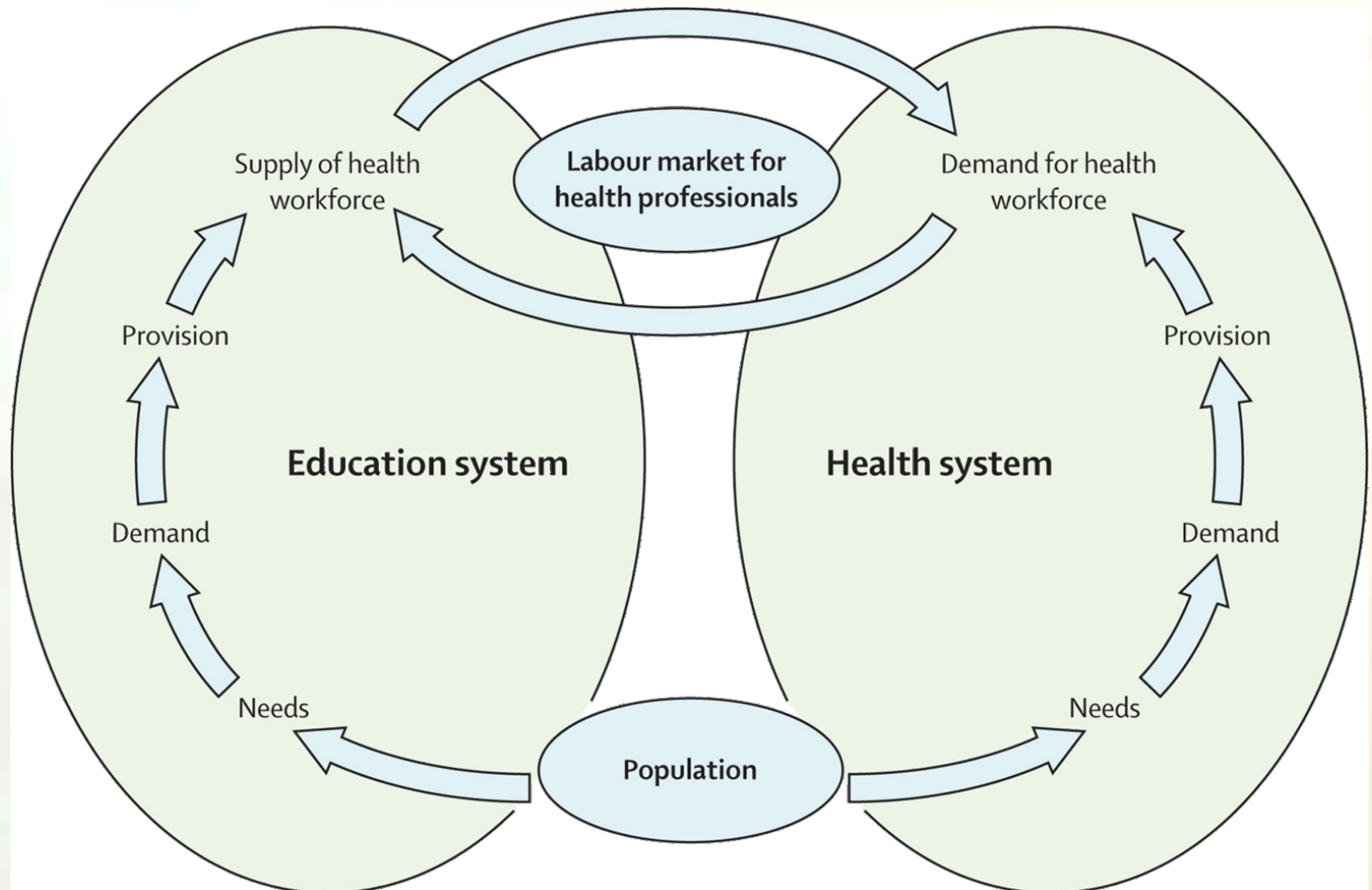
Targeted Investment in Health System (Including Health Work Force)

Promotes economic growth via

- economic output
- social protection
- social cohesion
- innovation
- health security



**EDUCATION OF HEALTH PROFESSIONALS
FOR THE 21ST CENTURY:
A GLOBAL INDEPENDENT COMMISSION**



Health professionals for a new century: transforming education to strengthen health systems in an interdependent world

- “Professional education has NOT kept pace with these challenges
- Fragmented, outdated & static curricula that produce ill-equipped graduates
- Mismatch of competencies to patient & population needs
- Poor teamwork
- Narrow technical focus without contextual understanding
- Predominant hospital orientation at expense of primary care
- Weak leadership to improve health system performance”

Education, Training and Skills

Scale up transformative, high-quality education and lifelong learning so that all health workers have skills that match the health needs of populations and can work to their full potential.

All countries can do more to prioritize investments in education. Education models should shift away from narrow specializations to focus on lifelong building of locally relevant competencies. Generally, there is a need to relax unnecessary barriers to entry. Addressing geographical inequities is a priority and democratic transitions present opportunities to strengthen youth education for employment in the health sector. Evidence reinforces the effectiveness of community-based health workers, including health professionals as well as other cadres.

Health Service Delivery and Organization

Reform service models concentrated on hospital care and focus on prevention and on the efficient provision of high-quality, affordable, integrated, community-based, people-centered primary and ambulatory care, paying special attention to underserved areas.

Health systems organized around clinical specialties and hospitals will need to shift towards prevention and primary care. There is no prescription for a perfect mix of public and private health-care provision. Government should adopt policies that cover the performance of the whole sector. Social business models are emerging as a private-sector, socially oriented solution to serve the unserved. Public policies and regulatory bodies must protect the interests of the public and ensure that professional interests do not dominate.

Opportunities

ALL FOR HEALTH TOWARDS HEALTH FOR ALL

PHILIPPINE HEALTH AGENDA 2016-2022

PAULYN JEAN B. ROSELL-UBIAL, MD, MPH, CESO II
Secretary of Health

