

The Republic of the Union of Myanmar



The 22nd ASEAN-Japan High Level Official Meeting on Caring Societies “ Promoting the Development of Human Resources Related to UHC ”

November 25-27,2024

Kawasaki City, Japan

Myanmar delegates



Myanmar Team

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Presentation outlines:

- ❖ Health Status and Access to health Services**
- ❖ Strategies and Workforces for Vulnerable**
- ❖ Strategies/Efforts for Social Security**
- ❖ Lesson Learned**

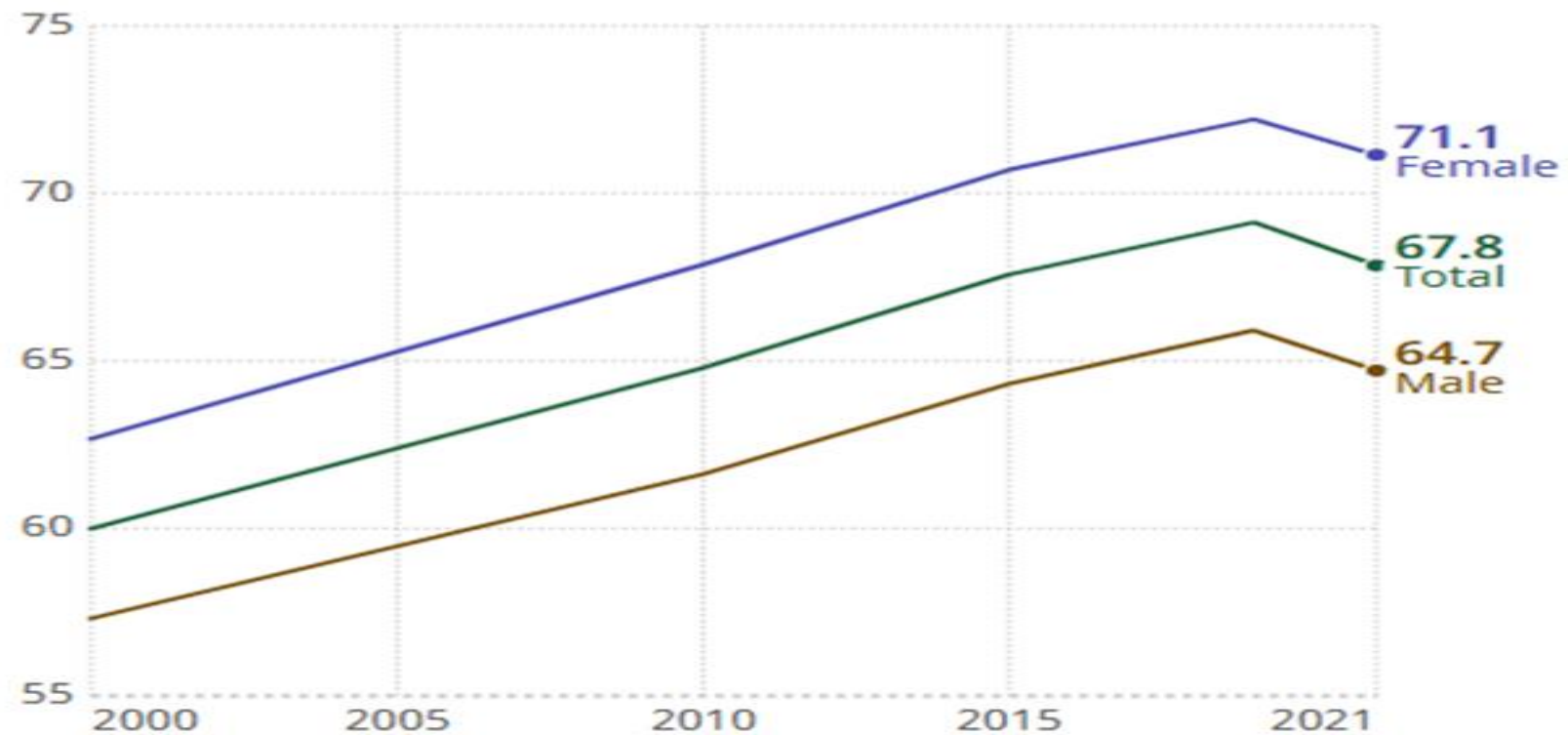
Health Status and Access to Health Services

- **In Myanmar, the current population is 54,133,798 as of 2023 , Life Expectancy at Birth (Years) has improved 7.85 years from 60 years in 2000 to 67.8 years in 2021**
- **Universal health coverage (UHC) is about ensuring all people get the quality health services they need, without experiencing financial hardship.**
- **UHC has two dimensions – access to needed health care, and financial protection.**
- **The availability, accessibility, acceptability and quality of health workers is recognized as central to the achievement of universal health coverage**
- **The increased population has brought with it a need for change and modernization within the healthcare sector. The administration of the healthcare system is distributed between the public and private sectors, in terms of finance and supply. Nevertheless, all administrative functions are ultimately overseen by the Ministry of Health (MoH).**

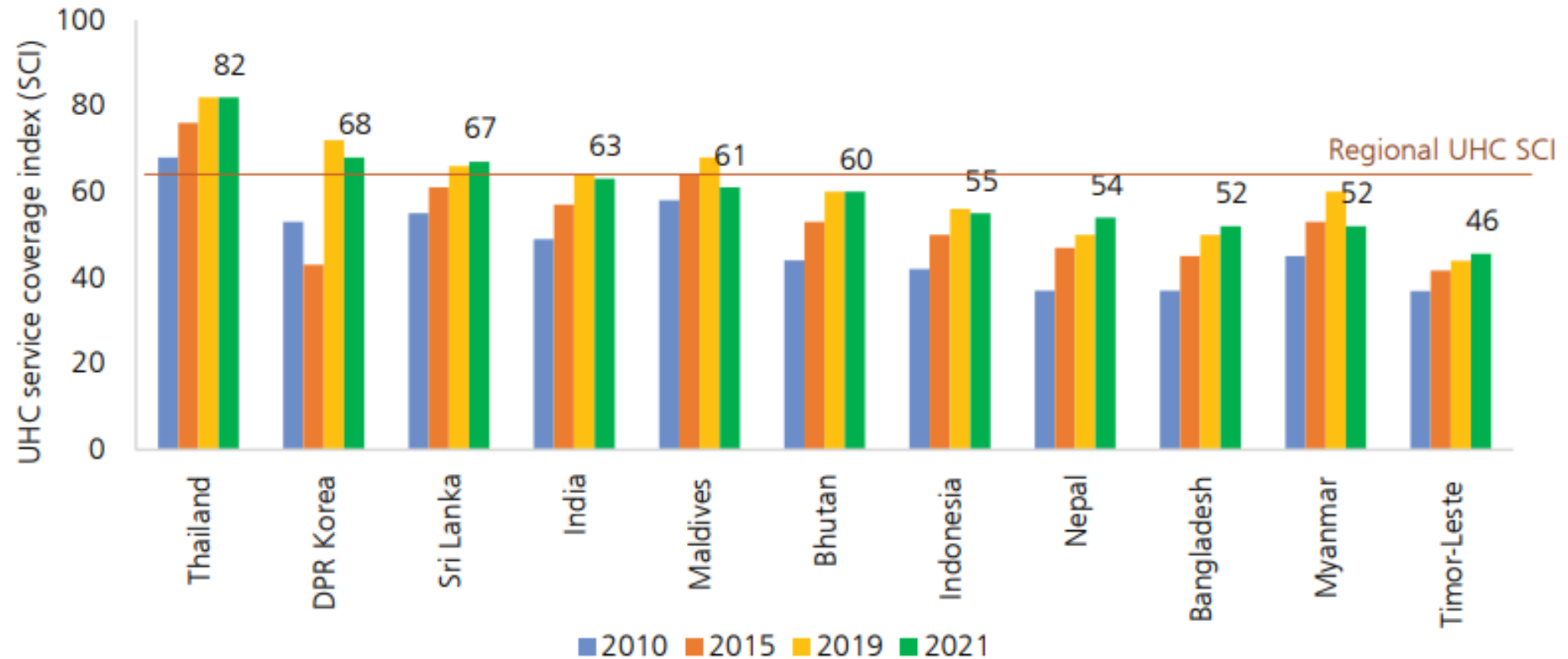
Life Expectancy at Birth 2021

Life expectancy at birth

The average number of years that a newborn could expect to live. Myanmar, both sexes, 2000 - 2021.

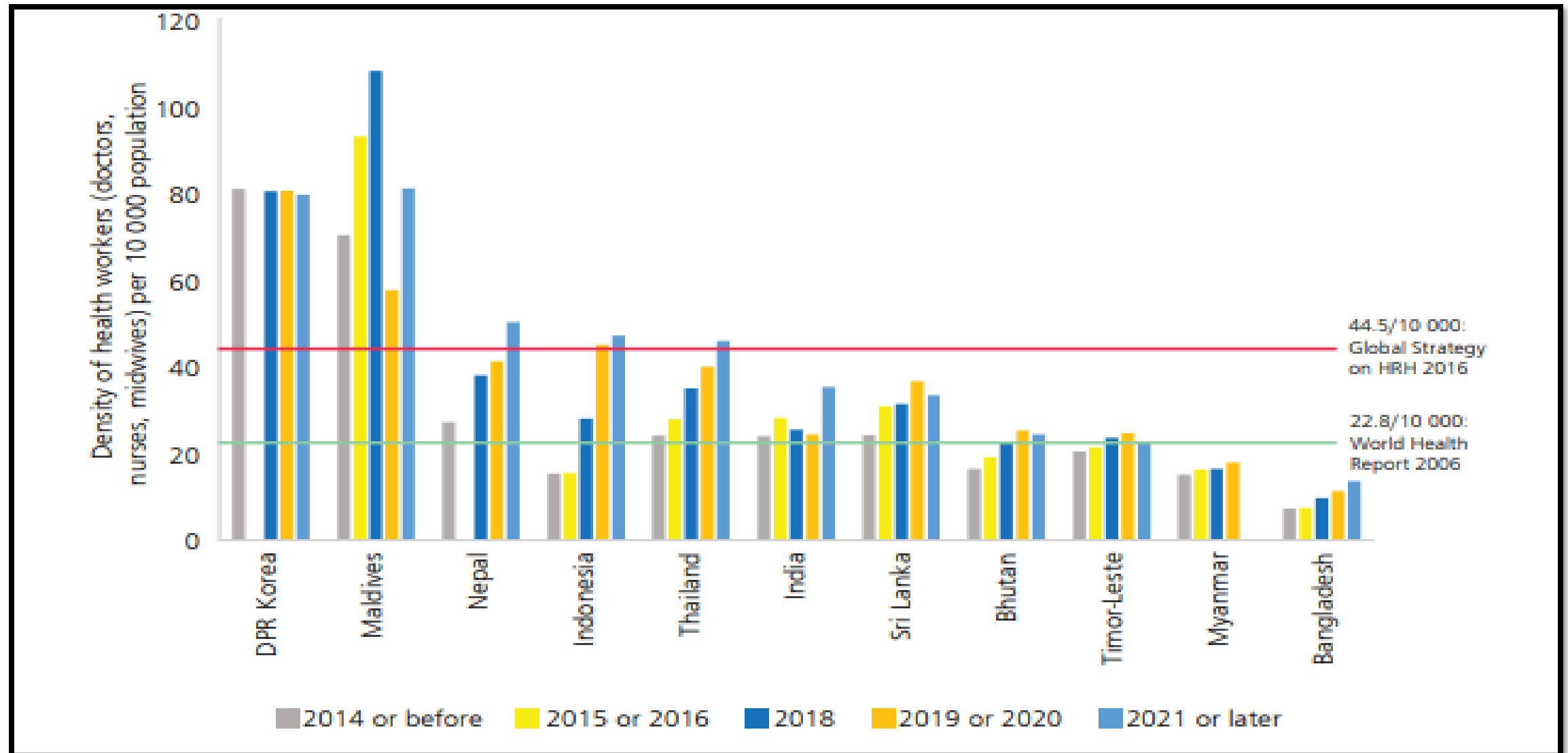


Gains in UHC SCI among Member States of the SE Asia Region, 2010–2021

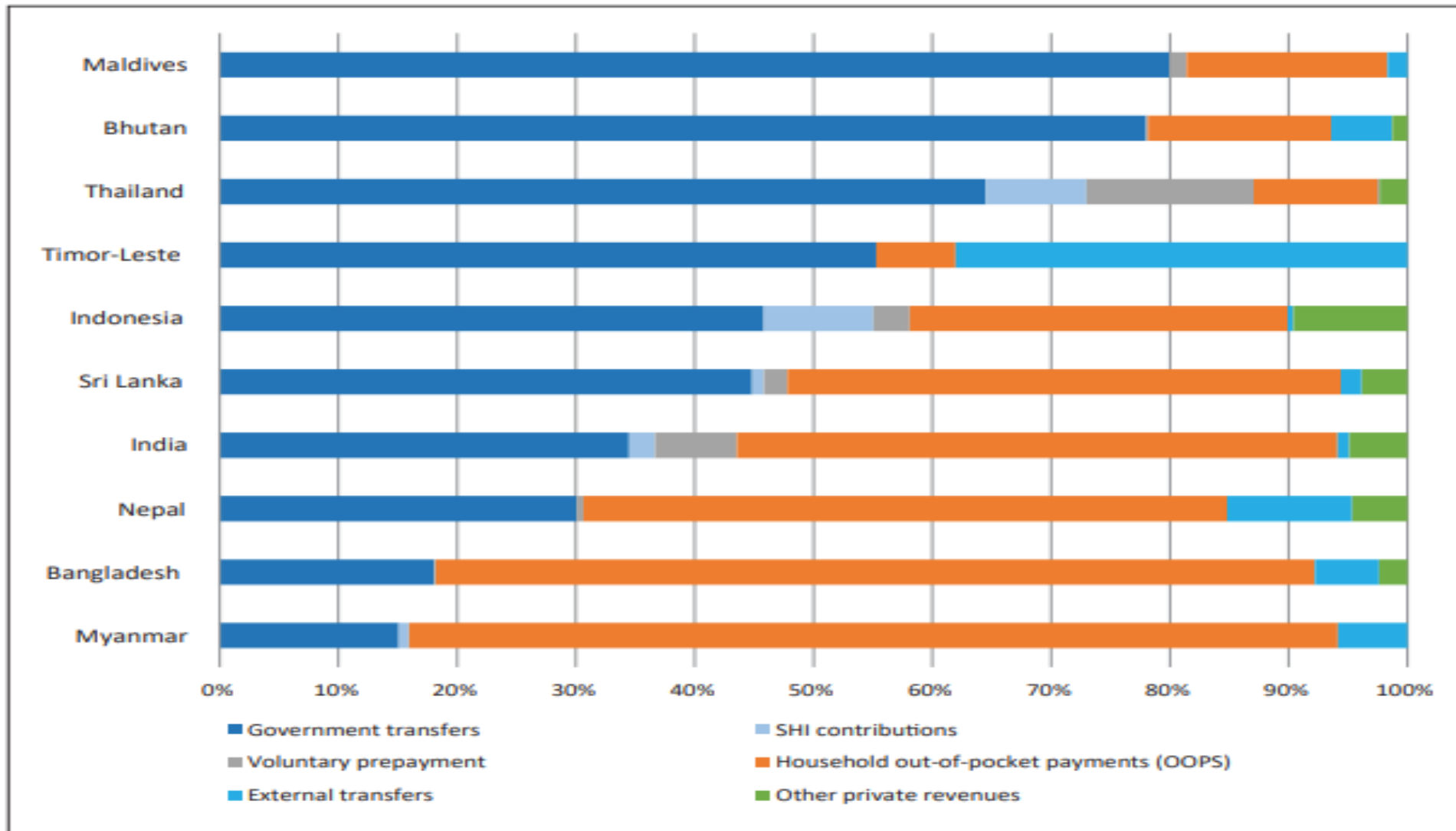


Source: WHO Global Health Observatory, accessed on 17 July 2023

Trends in the availability of doctors, nurses and midwives in the WHO SE Asia Region countries, 2014–2024



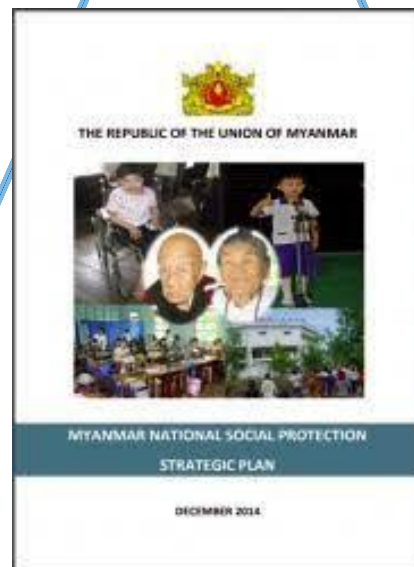
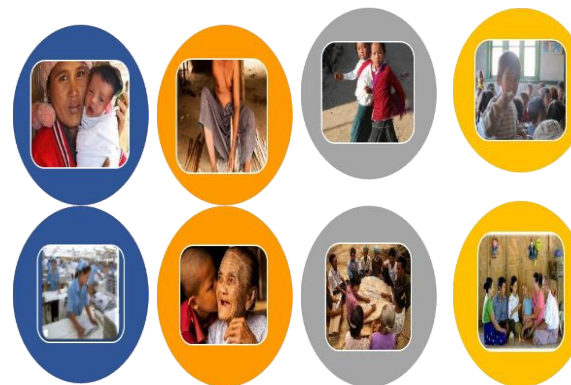
Sources Of Health Financing 2020



Source: WHO Global Health Expenditure Database, <https://apps.who.int/nha/database/ViewData/Indicators/en-> accessed June 22 2023

Strategies and Workforces for Vulnerable

NATIONAL SOCIAL PROTECTION STRATEGIC PLAN



It was approved and released on December 2014.

Eight Flagships



**Maternal and Child
Cash Transfer
programme - MCCT**



**Programme to provide
financial support to
people with
disabilities**



**Programme to provide
financial support to children
between the ages of 3 and 15**



**School
Nutrition
Programme**



**To get employment for
thepublic and vocational
education programme**



**Social
Pension**



**Programme to
provide financial
support to ISHG**



**Integrated Social Protection
Services**

Maternal and Child Cash Transfer-MCCT

Objective of MCCT

- In the first 1000 days of human life, to meet the nutritional brains and bodies properly started from 2017-2018 financial year and till now.

21.406 Billion Kyats

**473684
Beneficiaries**



Social Pension for the Older Persons

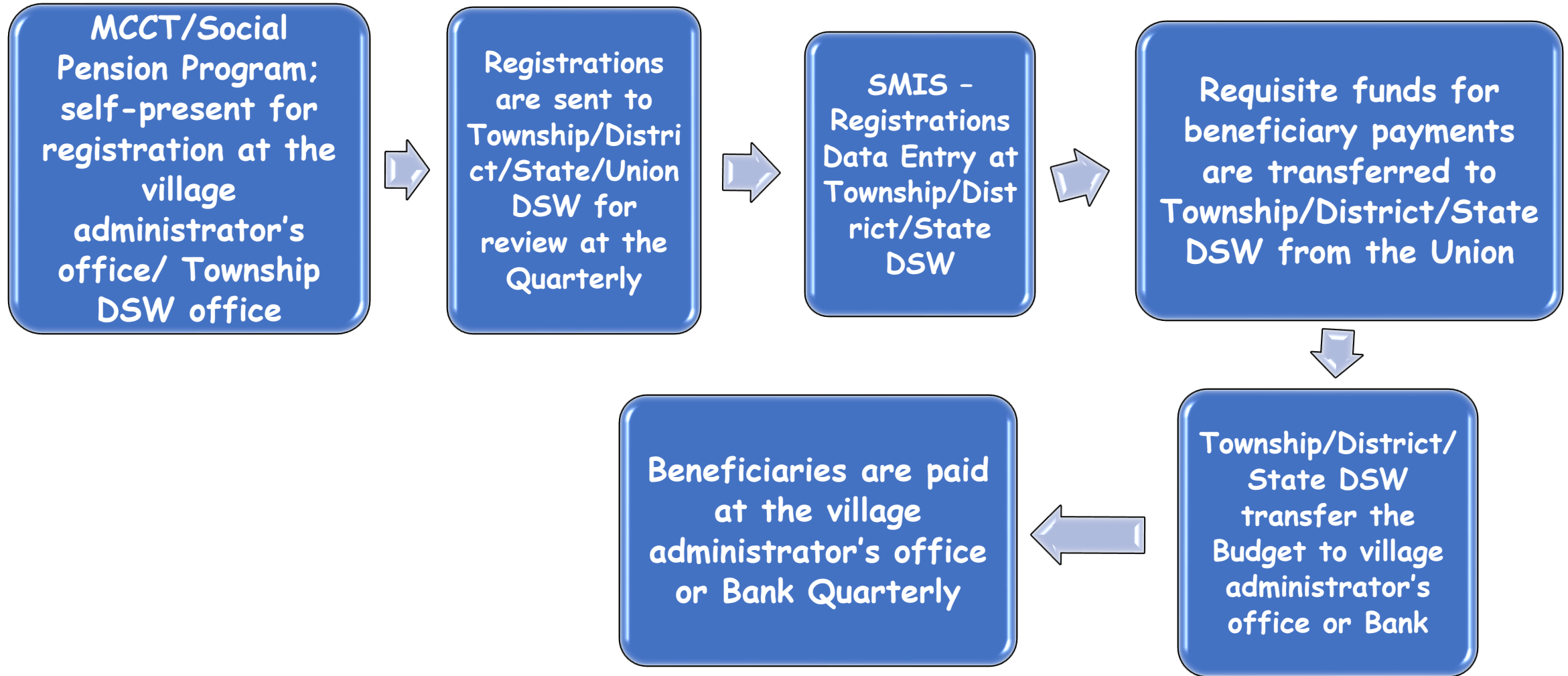
- The older persons aged at 90 and above started from 2017-2018 financial year and till now.
- In 2018-2019 financial year ,the program reduced its eligible age into 85 and above.

22.394 Billion Kyats

**248322
Beneficiaries**



Distribution of Cash with the assistance of the General Administrative Department (GAD) and its network of village/ward administrators or Bank



Integrated Social Protection Services

- ❑ Established Case Management Information System (CMIS)
- ❑ To support women headed household
- ❑ To provide the vulnerable groups (children under three years, pregnant women, persons with disability, older persons aged at 75 and above)
- ❑ To provide the Case Management Services through well trained case managers and providing 24 hours (Hot line No. 1566)
- ❑ Established One Stop Women Services Center (OSWSC) to provide Psychosocial Support, connect the health care services, to help the access to justice
- ❑ To provide one time grant for single mothers for livelihood to get regular income



Strategies/Efforts for Social Security

Social and Health Care Support provided by Social Security Board



- ❑ According to Social Security Law, 2012, Social Security Board implemented the Health and social care insurance system; Family Support Insurance System; Work Injury Benefit Insurance System as follows:
 - 3% for employer and 2% for employee for contribution
 - Medical treatment and cash benefit for sickness
 - Medical treatment and cash benefit for maternity and confinement
 - Medical treatment for the insured after retirement
 - Funeral benefit for decease due to any cause
 - Health care and aid benefit in time of natural disaster
 - Survivors' benefit arising out of decease not owing to work
- ❑ With the implementation of Social Security Law 2012, there're increasing numbers in insured person and now about 1,300,000 insured persons
- ❑ As there're increasing numbers of insured persons, the SSB extended the coverage of healthcare services through 3 Worker's Hospitals, 96 SSB Clinics, 1 Traditional Clinic, 61 Enterprise Clinics, 72 Contracted (Provider Purchaser Split) Clinics, 3 Mobile Medical Units and 16 Birth Services Clinics.
- ❑ The monthly average patients : Inpatients - 700 – 800 , Outpatients – 140,000 – 150,000

Benefits Under Health and Social Care Insurances System



Health care
benefits



Maternity
benefits



Paternity
benefits



Benefit for adoption of
baby under 1 year



Medical treatment
for baby under 1
year



Family Assistance
benefit



Health care services and
benefits for retired
persons



Funeral benefit



Drug cost and travel
cost benefit

Lessoned Learned

- **Strategies and Implementation on Development of Human Resources for Health only forecast on health sector only.**
- **To secure the healthy Society, not only improving access to quality health care, developing the society that protect health is crucial for UHC, such as social welfare benefits for vulnerable population, jobs opportunities, policies and laws that protect vulnerable group.**
- **Accurate targeting of vulnerable populations is a significant challenge in Myanmar due to limited data availability and the difficulty in accessing remote and conflict-affected areas. As a result, social protection programs may fail to reach those who need them most.**
- **Social protection systems that focus only on short-term financial relief without considering long-term human development can perpetuate poverty. It is crucial to complement cash transfers with investments in education, healthcare, and skills development.**
- **Limitations for Health Care Services Availability due to providing services to only Insured Workers from (126) covered townships Under Social Security Law, 2012**
- **Because of such limitations, multi sectors approaches to create a society that protect the health and wealth of the people is crucial**



Thank You