**Assessing the weakness of an existing diseases programme should be a good way for strengthening the health systems toward Universal Health Coverage: case of Mauritius.**

**DR. Laurent MUSANGO****¹; Mr. Premduth BURHOO****²; Dr. Faisal SHAIKH¹; DR. Maryam TIMOL³**

**¹ World Health Organisation, Country Office of Mauritius.**

**² Mauritius Health Institute (MIH)**

**³ Ministry of Health and Quality of Life (MOHQL)**

**Introduction**

Non-Communicable diseases (NCDs) are the leading cause of death, disease and disability in Mauritius. The four major NCDs (cardiovascular disease, cancer, chronic obstructive pulmonary diseases and diabetes), account for nearly 81% of all deaths and 85% of the disease burden. The WHO Regional Office for Europe initiated a three-year work programme on health systems strengthening to accelerate improvements in NCD outcomes. As Mauritius shares a similar epidemiological profile as many countries in the Europe, it was suggested to use the same tool used in Europe for a similar assessment in Mauritius.

**Methodology**

The country assessment starts with a thorough analysis of the main NCD outcome indicators together with an overview of the time trends noted over the past 15 years. An analysis of fifteen health system features that may represent a challenge or present an opportunity for improved delivery of core NCD interventions and services were then carried out. A participatory and flexible approach was used for this assessment; a multidisciplinary team was set up to carry out the assessment. Five Working Groups (WGs) of 5-6 members each were constituted to review the 15 health system features and two workshops were organized one to present preliminary findings and conclusions to other WGs and stakeholders and another one to validate the report. The report identified keys opportunities that the country may continue to build on as well as challenges and possible solutions to address them through strengthening health systems toward UHC and services for NCDs outcomes.

**Results**

Political commitment to strengthen Health systems for NCDs outcomes, explicit priority-setting approaches, interagency cooperation, coordination across providers, effective model of service delivery with effective management, integration of evidence into practice, incentive systems of human resources for health, and free healthcare services including medicines and laboratory tests to users were identified as opportunities that need to continue to be strengthen and to build PHC on them. However, the following challenges that need to be mitigate were also identified: the population which is not adequately empowered to change behavior, inefficiency role that the Primary Health Care in the country and weaknesses in the diagnostic and preventive services, power exploration of data generated by the health system and unavailability of modern information solutions.

**Conclusion and recommendations**

Based on the assessment of features as well as the challenges identified and the discussions with key stakeholders, policy recommendations such as foster a culture of continuous improvement of quality of care at all levels, restore confidence in public health services and balance private sector development, reengineer health services organisation to put PHC at the centre of UHC, empower communities for healthier environment and lifestyles and reach the unreached population especially the poor were suggested for improvement of health systems toward UHC. The road map for the implementation of the recommendations was also approved by the Ministry of health and stakeholders.