



The Republic of Union of Myanmar

National Unity Government

Ministry of Health

Announcement (1/2021)

April 20, 2021

The National Unity Government, Republic of the Union of Myanmar mandated the Union Minister, Ministry of Health has formulated a **strategic healthcare plan** (abridged) for the interim period of six months, from April to September 2021, to provide the public with a quintessential healthcare system. The guiding principles of this strategic healthcare plan is based upon the Federal Democratic Charter's vision and mission of providing Universal Health Coverage under a Federal Healthcare System.

The pillars of this Strategic Healthcare Plan are as follows:

1. Community Health System

Charity workers are to be the frontline healthcare providers in the community health system. With the help of the regional development associations, other development partners and charitable groups in the area, we intend to provide basic health care. For this to happen healthcare committees and healthcare support groups are to be established.

2. Leadership and Governance

Decentralization shall be part of the process to be able provide Universal Health Coverage under the Federal Healthcare System. The Health Ministry shall be at the helm to help realise this objective. The Ministry shall help coordinate funding and assistance from international organisations. In addition, evidence of the military dictatorship's violations of healthcare workers' human rights shall be formally documented and presented in a court of law.

3. Service Delivery

Regular healthcare programmes that are fundamental in a healthcare system (Maternal and Perinatal healthcare, Vaccination programmes, Nutritional health and development, HIV programmes, anti-Tuberculosis programmes, Malaria campaigns, Communicable and Noncommunicable diseases programmes, Mental Health, Trauma Care) will be accomplished initially. Patient Referral Systems will also be established. These programmes will be organised in partnership with the government hospitals, private hospitals, Ethnic Health Organisations and Civic societies. Modern communications systems such as Telehealth and e-Health will also be incorporated into the healthcare system. In providing healthcare, Federal Democracy Charter's edict, equity and conflict sensitivity will be adhered to with utmost importance.

4. Health Workforce

All healthcare workers, doctors, healthcare workers in the private sector, non-government organisations, traditional medicine organisations, civic societies, societies in villages, wards and tracts are all taking part in the Civil Disobedience Movement united as one empowering the interest of the populace. It is also to be noted that the medical diaspora abroad, with their expertise and support, is an important valuable asset to the workforce.

5. Health Information System

Using the modern Information Technology, we shall set up systems and networks whereby information, knowledge and administrative data can be efficiently shared.

6. Medical Products and Technologies

As long as COVID-19 is still prevalent in Myanmar, with the need to restart the vaccination programme, we will need to acquire the vaccines with the assistance of the World Health Organisation and other friendly organisations. In addition, we will need to keep important diseases like HIV, TB, and Malaria at bay by effective planning.

7. Health Financing

The tax revenue not contributed to the military regime, can be diverted towards the Strategic Healthcare Plan. Donations from friendly countries will need to be used wisely and proportioned equitably where needed. Villages, wards, and tracts would all need to keep emergency funds set aside for emergency healthcare purposes.

For the Strategic Healthcare Plan to be endorsed, innovative thinking and methods together with a plan for a future healthcare system that will be resilient to pandemics and conflicts had to be formulated. This future healthcare system shall be the mainstay as a bridge for peace, for all, regardless of race, religion, sex, age, social status, education, etc., with no impediment to equity and social inclusion. For this to materialise we shall work together, hand in hand,

with United Nations Agencies, development partners, doctors, private healthcare personnel, non-government organisations, ethnic healthcare organisations, civic societies and organisations in the villages and wards.

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