

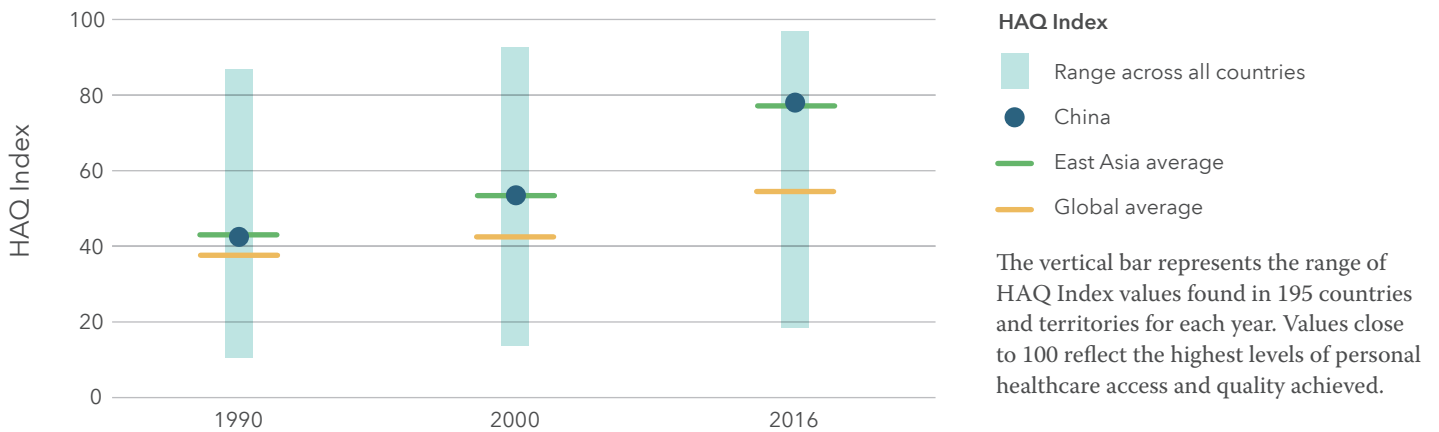
China

Monitoring national levels of healthcare access and quality is critical to understanding where countries can improve health service delivery. Researchers used findings from the Global Burden of Disease (GBD) study to estimate a summary measure of personal healthcare access and quality, the Healthcare Access and Quality (HAQ) Index, for 195 countries and territories from 1990 to 2016. Key results for China are highlighted here, while all results can be found at bit.ly/HAQ-GBD2016.

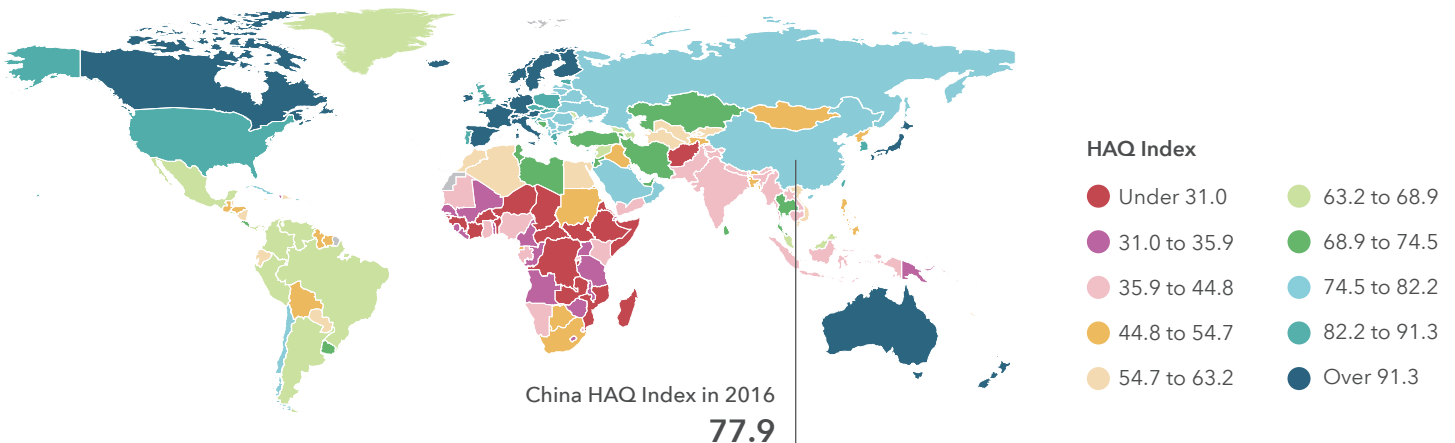
Key results on healthcare access and quality

- Globally, healthcare access and quality, as measured by the HAQ Index, improved from 37.6 in 1990 to 54.4 in 2016, on a scale of 0 to 100. For China, healthcare access and quality increased from 42.6 in 1990 to 77.9 in 2016.
- Despite overall gains in healthcare access and quality, the gap between the highest and lowest levels increased from 1990 to 2016. Among other countries in East, Southeast Asia, and High-income Asia Pacific, 2016 HAQ Index scores ranged from 36.6 in Laos to 94.1 in Japan.
- From 2000 to 2016, the global pace of progress accelerated for the HAQ Index, improving by an average of 1.6% per year. From 1990 to 2000, the world saw overall healthcare access and quality improve by an average of 1.2% per year.
- For China, HAQ Index performance improved at an average rate of 2.4% per year from 2000 to 2016. Between 1990 and 2000, China recorded, on average, a 2.3% per year gain in healthcare access and quality.

Tracking healthcare access and quality in China from 1990 to 2016



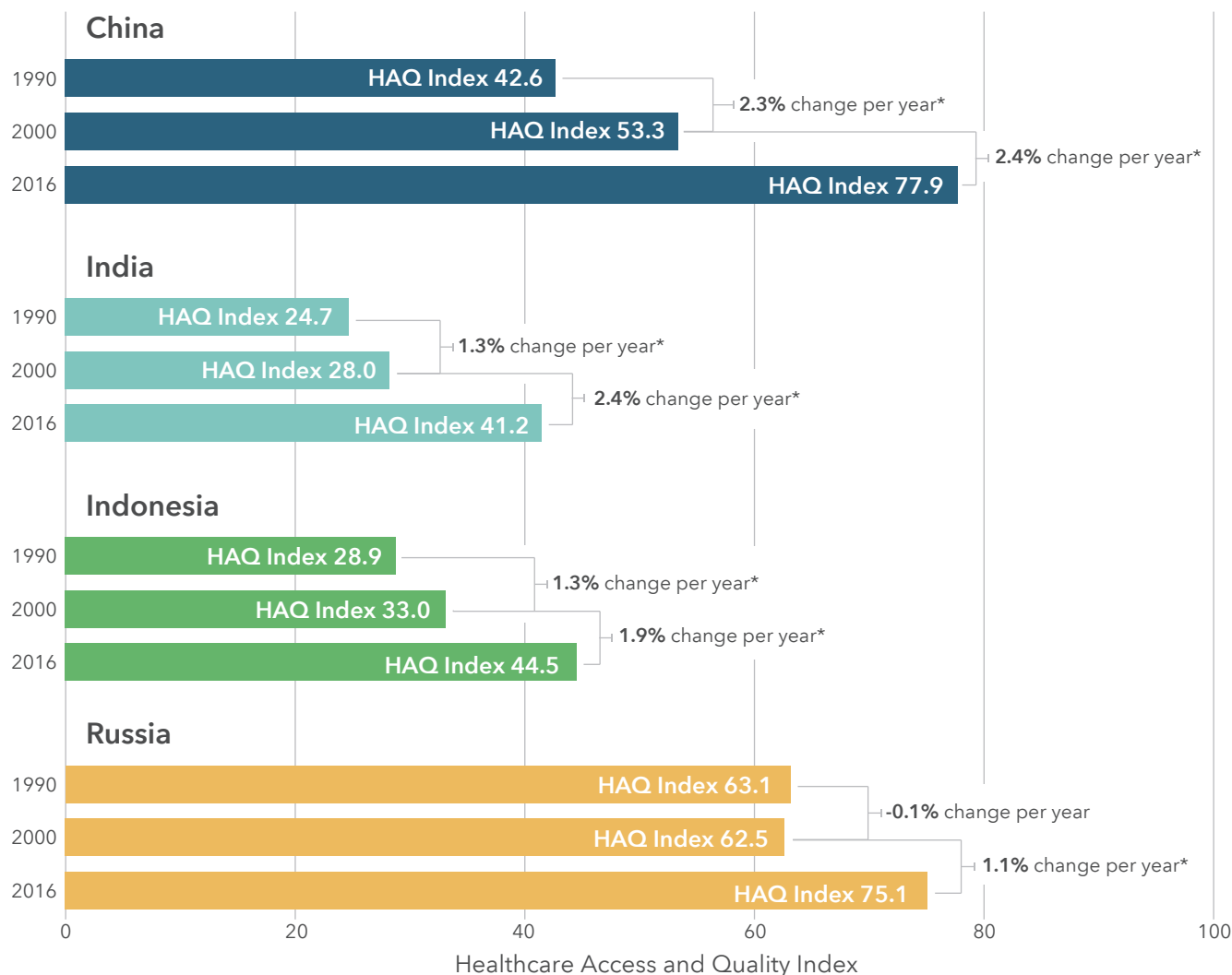
Mapping healthcare access and quality worldwide in 2016



Comparing the pace of progress on healthcare access and quality from 1990 to 2016

Understanding how quickly – and consistently – a country improved its HAQ Index performance over time has major policy implications. Accelerated progress in more recent time periods may reflect the effects of health investments, whereas slowed or stalled gains provide a warning sign that health system advances may not be keeping pace with population health needs.

This figure shows the HAQ Index for China and three comparator countries in 1990, 2000, and 2016, as well as the average rate of change per year from 1990 to 2000 and 2000 to 2016. Stars indicate the average rate of change was statistically significant for that time period.



Definitions

Healthcare Access and Quality (HAQ) Index

Provides a summary measure of personal healthcare access and quality for a given location. This measure is based on risk-standardized mortality rates or mortality-to-incidence ratios from causes that, in the presence of quality healthcare, should not result in death – also known as amenable mortality. HAQ Index performance is shown on a scale of 0 to 100, with 0 reflecting the worst observed levels across countries from 1990 to 2016 and 100 being the best observed during this time.

Source

GBD 2016 Healthcare Access and Quality Collaborators. Measuring performance on the Healthcare Access and Quality Index for 195 countries and territories and selected subnational locations: a systematic analysis from the Global Burden of Disease Study 2016. *The Lancet*. 2018 May 22. bit.ly/HAQ-GBD2016.

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