

A declaration on Universal Health Coverage

Highlights from the first United Nations High-Level Meeting on UHC

The first United Nations High-Level Meeting on Universal Health Coverage (HLM-UHC), was held as a special Summit of the 74th UN General Assembly on 23 September 2019.

This was an opportunity to mobilise the global community and secure political commitment from heads of state and governments to accelerate progress of moving towards UHC by 2030.

This summit of more than 190 world leaders agreed to a historic Political Declaration of the High-Level Meeting on UHC.

The declaration has more points of convergence between member states and partners than disagreements and it was adopted by consensus during the meeting. In his opening statement, Dr Tedros Adhanom Ghebreyesus, the Director-General of the World Health Organization (WHO) said, "This declaration represents a landmark for global health and development. ...Our vision is not health for some. It's not health for most. It's health for all."

In the declaration, Member States and delegates re-affirm their commitment to move towards UHC and acknowledge that they are off-pace and that they need to do more. Fulfilling the commitments in the Declaration would mean a billion more people would have access to quality, affordable health in the next four years, on the road to extending access to 5 billion by 2030.

Preparation of this political declaration was an inclusive and interactive six-month process. Global civil society input was coordinated through the Civil Society Engagement Mechanism (CSEM2030), through which CSOs made six 'Key Asks'.

The political declaration did not fully embrace all the Asks but there are many areas of concurrence that reinforce the 2030 Agenda for Sustainable Development and align with some of the asks set out above that were made ahead of the meeting. Key elements of the declaration are set out below.

Primary Health Care (PHC) is central to moving towards UHC. The UN Secretary-General and many member

states stressed that UHC can only be realised with quality PHC services that are affordable and comprehensive.

Focus on **health promotion and the**



health workforce including women health workers, and issues of remuneration. This includes availability and access to high impact range of services such as for example robust mental health services, immunisations, and pre- and post-natal care.

Global health leaders called for **leaving no one behind** on the journey to achieving UHC. The declaration makes specific reference to the right to health and non-discrimination which reinforce agenda 2030. This will require putting at the centre of programmes and policies the most marginalised populations, including those in poor and conflict-affected settings. Moving towards gender equity is critical and especially as women, girls, and young people are some of the most vulnerable and marginalised groups who need UHC the most to ensure they are given the chance to live healthy, productive lives.

Other keys issues were **sexual and reproductive health rights (SRHR) and migration, community engagement, and the need for partnerships**. While there was tension on SRHR language, there was in general a concurrence on the goals of programmes. The United States, represented by Health and Human Services Secretary Alex Azar, led a group of countries to formally disassociate with language contained in the political declaration related to the guarantee of SRHR: 'We do not accept the terms "sexual and reproductive health" and "sexual and reproductive health and reproductive rights" in this Declaration and note that only

documents approved by the General Assembly may inform their understanding and implementation,' he said.

Notwithstanding this position, however, a coalition of 58 countries released a statement, read by the Netherlands delegation, which affirmed the need for SRHR as part of the UHC umbrella if we are truly going to be able to achieve health for all.

This tension emphasises the need to contextualise language for interpretation and communication in various cultural contexts at country level which must always be stressed for success in moving towards SRHR.

Data and country-level accountability, including calls for national targets and monitoring for tracking progress, are a key part of the declaration. There are also commitments to **health financing**, particularly reduction of out-of-pocket costs, investment in PHC, and placing people and communities at the centre of health systems.

Now, after the Assembly, the hard work of making UHC a reality begins. The WHO was tasked to produce a progress report in 2023. The Global Action Plan for Healthy Lives and Well-being, which launched on 24 September, will be the blueprint for all 12 global health and development agencies, as well as national governments to begin to expand health services and build infrastructure to meet populations' health needs. Major financing questions will have to be answered based on individual country contexts, with a mix of domestic financing and international aid funding streams. There is a call for an increase equivalent to 1% of countries' GDP in allocations to PHC specifically to close potential funding gaps.

As WHO's Dr Tedros said during the summit, 'Health is not an outcome of development; it is a prerequisite.' Ultimately, healthy people are essential for sustainable development – whether that be ending poverty, increasing education, promoting peaceful societies, or even protecting the environment.



WORLD
HEALTH
SUMMIT

REGIONAL MEETING
AFRICA
KAMPALA, UGANDA
APRIL 27-28, 2020



SAVE THE DATE

WORLD HEALTH SUMMIT REGIONAL MEETING 2020 AFRICA

Date: April 27-28, 2020
Location: Kampala, Uganda
Venue: Speke Resort & Munyonyo
Commonwealth Resort

Hosted by Uganda's Makerere University, the 2020 World Health Summit Regional Meeting will be the first in Africa. Join the international leaders and experts coming together to address the biggest challenges in global health – in the region and around the world.

More Information:

www.worldhealthsummit.org

TOPICS

- The Health of the African Youth
- Advancing Technology for Health in Africa
- Global Health Security
- Non-Communicable Diseases
- Inter-Sectoral Action for Health
- Universal Health Coverage

Contact:

Dr. Charles Batte
Makerere University
dr.cbatte@gmail.com
+256 700800618



WORLD
HEALTH
SUMMIT

M8Alliance
Academic Health Centers, Universities and National Academies



MAKERERE UNIVERSITY