UNITED NATIONS HIGH-LEVEL MEETING ON UNIVERSAL HEALTH COVERAGE IN 2019

KEY TARGETS, COMMITMENTS & ACTIONS

In September 2019, world leaders endorsed the most ambitious and comprehensive political declaration on health in history at the United Nations High-Level Meeting (UN HLM) on Universal Health Coverage (UHC).

We all have a critical role to play in ensuring that leaders are held accountable to their promises, and that their words translate to action. The first step is knowing exactly what leaders committed to during the UN HLM.

This document summarizes the key targets, commitments and follow-up actions contained within the UHC Political Declaration for the UN HLM in 2019, in relation to the Key Asks from the UHC movement.

By bringing together the key asks and political declaration commitments in this way, this document provides an outline for strategic multi-stakeholder advocacy and accountability to help translate UN HLM commitments into action.

Key Asks from the UHC Movement

The Key Asks from the UHC movement (UHC Key Asks) were developed over a three-month period in consultation with all actors of the UHC movement: parliamentarians, civil society, the private sector, agencies, networks and academia. The UHC Key Asks fed into the UHC Political Declaration as the foundation for coordinated advocacy efforts that all partners promoted together throughout the preparation of the UN HLM.

‘Everyone, everywhere should have access to quality and affordable health services. We call on political leaders to legislate, invest and collaborate with all of society to make UHC a reality.’

Key Ask 1: Ensure political leadership beyond health
Key Ask 2: Leave no one behind
Key Ask 3: Legislate and regulate
Key Ask 4: Uphold quality of care
Key Ask 5: Invest more, invest better
Key Ask 6: Move together
Across the Key Asks: Commit to gender equality and women’s and girls’ rights
Political Declaration of the UN High-level Meeting on UHC
“Universal Health Coverage: Moving Together to Build a Healthier World”

The political declaration is an historic commitment by leaders that places UHC at the heart of the 2030 Agenda for Sustainable Development.

‘We, Heads of State and Government and representatives of States and Governments, assembled at the United Nations on 23 September 2019’:

5. Recognize that universal health coverage is fundamental for achieving the Sustainable Development Goals related not only to health and well-being, but also to eradicating poverty in all its forms and dimensions, ensuring quality education, achieving gender equality and women’s empowerment, providing decent work and economic growth, reducing inequalities, ensuring just, peaceful and inclusive societies and to building and fostering partnerships, while reaching the goals and targets included throughout the 2030 Agenda for Sustainable Development is critical for the attainment of healthy lives and well-being for all, with a focus on health outcomes throughout the life course;

6. Reaffirm the importance of national ownership and the primary role and responsibility of governments at all levels to determine their own path towards achieving universal health coverage, in accordance with national contexts and priorities, and underscore the importance of political leadership for universal health coverage beyond the health sector in order to pursue whole-of-government and whole-of-society approaches, as well as health-in-all-policies approaches, equity-based approaches and life-course approaches;

9. Recognize that universal health coverage implies that all people have access, without discrimination, to nationally determined sets of the needed promotive, preventive, curative, rehabilitative and palliative essential health services, and essential, safe, affordable, effective and quality medicines and vaccines, while ensuring that the use of these services does not expose the users to financial hardship, with a special emphasis on the poor, vulnerable, and marginalized segments of the population;

Organised around the UHC Key Asks, this document includes edited extracts from the political declaration, with reference to relevant declaration paragraph number(s) for each target, action or commitment.

Full text is available online: https://undocs.org/en/A/RES/74/2

KEY TARGETS

The political declaration identifies key action areas to frame the political objectives, guide implementation and accelerate action toward UHC. It also includes several targets that form a strong basis for tracking progress.

‘We therefore commit to scale up our efforts and further implement the following actions’:

Access and financial risk protection: 24. Accelerate efforts towards the achievement of universal health coverage by 2030 to ensure healthy lives and promote well-being for all throughout the life course, and in this regard re-emphasize our resolve:

a. To progressively cover 1 billion additional people by 2023, with a view to covering all people by 2030;

b. To stop the rise and reverse the trend of catastrophic out-of-pocket health expenditure and eliminate impoverishment due to health-related expenses by 2030;

Resource mobilization: 42. Expand quality essential health services, strengthen health systems and mobilize resources in health in developing countries, noting that, according to World Health Organization estimates, an additional 3.9 trillion dollars in total by 2030 could prevent 97 million premature deaths and add between 3.1 and 8.4 years of life expectancy in low- and middle-income countries;

Public spending on health: 43. Optimize budgetary allocations on health, sufficiently broaden fiscal space, and prioritize health in public spending, while ensuring fiscal sustainability, and adequately increase public spending, as necessary, with a special emphasis on primary health care, where appropriate, in accordance with national contexts and priorities, while noting the World Health Organization recommended target of an additional 1 per cent of gross domestic product or more;

Health workforce: 60. Take immediate steps towards addressing the global shortfall of 18 million health workers and addressing the growing demand for health and social sectors which calls for the creation of 40 million health worker jobs by 2030.
Ensure Political Leadership Beyond Health

Commit to achieve UHC for healthy lives and well-being for all at all stages, as a social contract.

Health-in-all-policies: 26. Implement high-impact policies to protect people’s health and comprehensively address social, economic and environmental and other determinants of health by working across all sectors through a whole-of-government and health-in-all-policies approach;

Prioritize public health: 27. Prioritize health promotion and disease prevention, through public health policies, good governance of health systems, education, health communication and health literacy, as well as safe, healthy and resilient cities;

Leadership capacity: 55. Strengthen the capacity of national government authorities to exercise a strategic leadership and coordination role, focusing on intersectoral interventions, as well as strengthen the capacity of local authorities;

Strategic political leadership: 59. Provide strategic leadership on UHC at the highest political level and promote greater policy coherence and coordinated actions through whole-of-government and health-in-all-policies approaches, and forge a coordinated and integrated whole-of-society and multisectoral response;

UHC in emergencies: 73. Promote more coherent and inclusive approaches to safeguard UHC in emergencies, including through international cooperation;

UNSG and political momentum: 81. Request the Secretary-General to continue engaging with Member States to sustain and further strengthen the political momentum on universal health coverage;

Milestone:
79. Set measurable national targets and strengthen national monitoring and evaluation platforms, to support regular tracking of the progress made for the achievement of universal health coverage by 2030;

Leave No One Behind

Pursue equity in access to quality health services with financial protection.

Reduce financial barriers: 39. Pursue efficient health financing policies, to respond to unmet needs and to eliminate financial barriers to access, reduce out-of-pocket expenditures leading to financial hardship and ensure financial risk protection for all throughout the life course, especially for the poor and those who are vulnerable or in vulnerable situations;

Access to medicines and health products: 49. Promote equitable distribution of and increased access to quality, safe, effective, affordable and essential medicines, including generics, vaccines, diagnostics and health technologies to ensure affordable quality health services and their timely delivery;

Health workforce: 61. Develop, improve, and make available evidence-based training that is sensitive to different cultures and the specific needs of women, children and persons with disabilities, and expand community-based health education and training in order to provide quality care for people throughout the life course;

Vulnerable/excluded people: 70. Ensure that no one is left behind, with an endeavour to reach the furthest behind first, empower those who are vulnerable or in vulnerable situations and address their physical and mental health needs, including all children, youth, persons with disabilities, people living with HIV/AIDS, older persons, indigenous peoples, refugees and internally displaced persons and migrants;

Resilient health systems: 72. Promote strong and resilient health systems, reaching those who are vulnerable or in vulnerable situations, and capable of effectively implementing the International Health Regulations (2005);
Create a strong, enabling regulatory and legal environment responsive to people’s needs.

**Transparency of prices**: 50. Improve availability, affordability and efficiency of health products by increasing transparency of prices across the value chain, including through improved regulations and building constructive engagement and a stronger partnership with relevant stakeholders, including industries, the private sector and civil society, in accordance with national and regional legal frameworks and contexts;

**Effective institutions**: 56. Build effective, accountable, transparent and inclusive institutions at all levels to end corruption and ensure social justice, the rule of law, good governance and health for all;

**Regulatory capacities**: 58. Improve regulatory capacities and further strengthen responsible and ethical regulatory and legislative system that promotes inclusiveness of all stakeholders, including public and private providers, supports innovation, guards against conflicts of interest and undue influence, and responds to the evolving needs in a period of rapid technological change;

**Milestone:**

57. Strengthen legislative and regulatory frameworks and promote policy coherence for the achievement of universal health coverage, including by enacting legislation and implementing policies that provide greater access to essential health services, products and vaccines, while also fostering awareness about the risks of substandard and falsified medical products, and assuring the quality and safety of services, products and practice of health workers as well as financial risk protection;

Build quality health systems that people and communities trust.

**Quality needs-based interventions**: 25.Implement the most effective, high-impact, quality-assured, people-centred, gender- and disability-responsive, and evidence-based interventions to meet the health needs of all throughout the life course;

**Primary health care**: 46. Expand the delivery of and prioritize primary health care as a cornerstone of a sustainable people-centred, community-based and integrated health system and the foundation for achieving universal health coverage, while strengthening effective referral systems between primary and other levels of care;

**Safe, quality, people-centred health systems**: 48. Scale up efforts to build and strengthen quality and people-centred health systems and enhance their performance by improving patient safety, built on a foundation of strong primary health care and coherent national policies and strategies for quality and safe health services;

**Health workforce**: 62. Scale up efforts to promote the recruitment and retention of competent, skilled and motivated health workers, and encourage incentives to secure the equitable distribution of qualified health workers especially in rural, hard-to-reach and underserved areas and in fields with high demands for services;

**Evidence-based decisions**: 65. Strengthen capacity on health intervention and technology assessment, data collection and analysis, while respecting patient privacy and promoting data protection, to achieve evidence-based decisions at all levels, acknowledging the role of digital health tools in empowering patients, giving them access to their own health-care information, promoting health literacy, and strengthening patient involvement in clinical decision-making with a focus on health professional-patient communication;

**Innovation and technology**: 66. Invest in and encourage ethical and public health-driven use of relevant evidence-based and user-friendly technologies, including digital technologies, and innovation to increase access to quality health and related social services and relevant information, improve the cost-effectiveness of health systems and efficiency in the provision and delivery of quality care;

**Milestone:**

24. Reemphasize our resolve to progressively cover one billion additional people by 2023 with quality essential health services and quality, safe, effective, affordable and essential medicines, vaccines, diagnostics and health technologies, with a view to cover all people by 2030;
Sustain public financing and harmonize health investments.

**Nationally appropriate spending targets:** 40. Scale up efforts to ensure there are nationally appropriate spending targets for quality investments in public health services, consistent with national sustainable development strategies, and transition towards sustainable financing through domestic public resource mobilization;

**Public financing:** 41. Ensure sufficient domestic public spending on health, where appropriate, expand pooling of resources allocated to health, maximize efficiency and ensure equitable allocation of health spending, while noting the role of private sector investment, as appropriate;

**External financing:** 45. Provide adequate, predictable, evidence-based and sustainable finances, while improving their effectiveness, to support national efforts in achieving universal health coverage, through domestic, bilateral, regional and multilateral channels, including international cooperation, financial and technical assistance, considering the use of traditional and innovative financing mechanisms, as well as partnerships with the private sector and other relevant stakeholders, recognizing that health financing requires global solidarity and collective effort;

**Invest in new technologies and innovation:** 66. Invest in and encourage ethical and public health-driven use of relevant evidence-based and user-friendly technologies, including digital technologies and innovation, to increase access to quality health and related social services and relevant information, improve the cost-effectiveness of health systems and efficiency in the provision and delivery of quality care;

**Sustain public financing and harmonize health investments.**

**Private sector innovation:** 53. Recognize the important role played by the private sector in research and development of innovative medicines;

**Whole of society approach:** 59. Forge a coordinated and integrated whole-of-society and multisectoral response, while recognizing the need to align support from all stakeholders to achieve national health goals;

**Global partnerships:** 77. Revitalize and promote strong global partnerships with all relevant stakeholders to collaboratively support the efforts of Member States, including through technical support, capacity-building and strengthening advocacy, building on existing global networks such as the International Health Partnership for UHC2030, and in this regard take note of the upcoming presentation of the global action plan for healthy lives and well-being for all;

**Milestone:**

43. Optimize budgetary allocations on health, sufficiently broaden fiscal space, and prioritize health in public spending, while ensuring fiscal sustainability, and adequately increase public spending, as necessary, with a special emphasis on primary health care, where appropriate, in accordance with national contexts and priorities, while noting the World Health Organization recommended target of an additional 1 per cent of gross domestic product or more;

**Milestone:**

54. Engage all relevant stakeholders, including civil society, the private sector and academia, as appropriate, through the establishment of participatory and transparent multi-stakeholder platforms and partnerships, to provide input to the development, implementation and evaluation of health- and social-related policies and reviewing progress for the achievement of national objectives for universal health coverage;
Emphasize gender equality, redress gender power dynamics and ensure women’s and girls’ rights as foundational principles for UHC.

Women’s empowerment in the health workforce: 63. Provide better opportunities and working environments for women to ensure their role and leadership in the health sector, with a view to increasing the meaningful representation, engagement, participation and empowerment of all women in the workforce, addressing inequalities and eliminating biases against women, including unequal remuneration while noting that women, who currently form 70 per cent of the health and social workforce, still often face significant barriers in taking leadership and decision making roles;

Sexual and reproductive health: 68. Ensure, by 2030, universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes, and ensure universal access to sexual and reproductive health and reproductive rights;

Gender perspective in all policies: 69. Mainstream a gender perspective on a systems-wide basis when designing, implementing and monitoring health policies, taking into account the specific needs of all women and girls, with a view to achieving gender equality and the empowerment of women in health policies and health systems delivery;

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