

Seventy-first World Health Assembly / Soixante et onzième Assemblée mondiale de la Santé

Palais des Nations May 2018 / Mai 2018

Side event application / Formulaire de demande de réunion parallèle

Contact

Name/Nom: Permanent Mission of the Republic of Indonesia to the UN, WTO and Other

International Organization in Geneva on behalf of MIKTA Countries.

Cp: Ms Tika Wihanasari Tahar, First Secretary

Date of application: 5 April 2018

Delegation(s)/Délégation(s Mexico, Indonesia, Republic 0f Korea. Turkey, Australia (MIKTA) and Maldives. Others cosponsor will follow

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Concept

Description of proposed side event, including objective, expected results, proposed programme and speakers* / Description de la réunion parallèle proposée, y compris les objectifs, les résultats attendus, l'ordre du jour et les orateurs* :

"Member States Commitment to the Global Movement towards Universal Health Coverage: Focused Actions on Primary Health Care and Financing for Effective Delivery

MIKTA Ministerial Panel Discussion – WHA 71 Side Event

Tuesday, May 22nd 2018 (tbc)

(90 minutes)

Concept Note

Background

MIKTA is a platform for informal partnership between Mexico, Indonesia, the Republic of Korea, Turkey and Australia. It is led by the countries` respective Foreign Ministers, and was created in 2013. In 2016, in the 8th MIKTA Foreign Ministers Joint Communique, MIKTA countries recommitted to the implementation of the 2030 Agenda for Sustainable Development, recognizing that full implementation would require stronger institutional capacities supported by highest level of political commitment and international cooperation. As member of G20, MIKTA Countries also highlighted that the goal of achieving Universal Health Coverage (UHC) and thus of realizing UHC Sustainable Development Sub-Goal (3.8) depends on efforts to strengthen health systems, as stated in Berlin Declaration of the G20 Health Ministers.

Agenda 2030 set a broad and ambitious agenda for a safer, fairer and healthier world by 2030. To ensure healthy lives and promote well-being for all at all ages (SDGs Goals 3), it is imperative to achieve universal health coverage (UHC) by working together effectively to strengthen health systems and improve health outcomes.

In this regard, responding to the call by the global health community and Director General of WHO Dr Tedros Adhanom Ghebreyesus for Member States' political leadership to take three concrete steps towards UHC. Member States, including MIKTA countries, are committed to responding to this call.

One area where concrete actions are needed is addressing service delivery challenges, such as lack of access to quality heatlh care services, which would support the GPW13 goal of providing 1 billion people with access to care. Where health care is accessible, it is often fragmented, of poor quality and focused on supply-oriented models rather than being responsive to the comprehensive needs of people and communities. People and communities also lack the education and information needed to inform decisions about their own health and healthcare, and to meaningfully engage in decisions about how health care is delivered.

Rationale

Universal Health Coverage, whereby all people and communities have access to needed quality health services without risk of financial hardship, cut across the SDG health targets and contributes to promoting health security and equity. Countries that progress towards UHC will make progress towards the other health related target across different sectors, and towards all the SDG goals.

As a group of countries, with a combined population of more than half a billion people, MIKTA countries are committed to supporting both national and global progress towards UHC. The Director General of WHO recently called for the Head of State of WHO Member States to commit to national actions to support global progress towards UHC. Given this call, it is timely for countries to: highlight their existing commitment to achieving UHC; share country experience on how to overcome the challenges to doing so; and, discuss how international cooperation can best support global progress towards UHC.

An integrated, people-centred approach to UHC is crucial to the development of health services that can respond to emerging and varied health challenges, including urbanization, unhealthy lifestyles, ageing populations, the dual disease burden of communicable and non-communicable diseases, multi-morbidities, and rising health care costs. Strengthening health systems to progress towards UHC will also contribute to building the IHR Core Capacities countries need to prevent, detect and respond to disease outbreaks and other public health crises.

Strong primary health care is the foundation of a successful health system and for achieving UHC; it is an effective, equitable and cost-effective way to address many of the health challenges of the 21st century.

Objective and Expected Outcomes:

- 1. To highlight the existing national-level commitments of countries representing all the regional groups in WHO to accelerating progress towards UHC, particularly through improvements in primary health care.
- 2. To share experiences of, and identify challenges to, effective delivery at primary health care at national and regional levels.
- 3. To identify potential areas for fostering cooperation on improving primary health care in the context of progressing towards UHC

Proposal for Panel Discussion

The panel discussion would be open to all participants of the 71th World Health Assembly. High-level panelists from Mexico, Indonesia, South Korea, Turkey and Australia, as well as the WHO Secretariat, UHC2030, and other interested partners, will present their views on how best to:

- Reform health care delivery models and strengthen primary health care services as the main strategy for achieving UHC.
- Improve delivery models in remotes area (e.g. empowerment of community health workers)
- Enhance equity, with a focus on financing and ensuring participation of poor and marginalized populations

Event details / details de la réunion

Expected number of participants/Nombre de participants attendus : 100
Exact title of the meeting/Titre exact de la réunion: "Member States Commitment to the Global Movement towards Universal Health Coverage: Focused Actions on Primary Health Care and Financing for Effective Delivery
Interpretation/Interprétation Interpretation may be provided in the official languages and the estimated costs are as follows: 2 languages: 2561 CHF; 3 languages: 5123 CHF; 6 languages: 11953 CHF.
L'interprétation peut être assurée dans les langues officielles aux coûts estimés suivants : 2 langues-2561 CHF; 3 langues : 5123 CHF; 6 langues : 11953 CHF.
Are interpretation services requested? / L'interprétation est-elle requise ? Yes/Oui ☐ No/Non ☐
(If yes, which languages)/(Si oui, en quelle langue)

Room Layout/Aménagement des salles

Other language/autre langue:

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Le type de mobilier et les installations techniques dans les salles ne permettent pas de modifier l'aménagement de celles-ci. Pour tout renseignement sur l'emplacement ou la disposition des salles au Palais des Nations voir le lien : http://www.unog.ch/80256EE60057CB67/(httpPages)/BAE3AF717207A5AF80256EF80049C552?OpenDocument

*Badges/ Badges d'accès

WHA side events are for participants of the WHA and, as such, panellists and participants should be drawn from those participating in the Health Assembly.

Les réunions parallèles sont réservées aux participants de l'Assemblée; Les orateurs de ces réunions doivent donc être choisis parmi ceux-ci.

Please complete the form and send it to / Merci de remplir le formulaire et de l'envoyer à hqqoverningbodies@who.int