Seventy-second World Health Assembly / Soixante et onzième Assemblée mondiale de la Santé
Palais des Nations
May 2019 / Mai 2019

Side event application / Formulaire de demande de réunion parallèle

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2)
Date of application 29 March, 2019
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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* :

Background
UHC and the realisation of people’s right to health should be at the centre of all health systems. Governments have the core responsibility to fulfil this right. While many countries are making great progress on UHC, half the world’s population still lack access to essential health services and increasing numbers face catastrophic and impoverishing health spending. Action is needed to address this situation and to make UHC a reality – while UHC is ambitious, it is affordable. Governments need to increase domestic health expenditure towards a target of 5% of GDP. They should prioritise primary healthcare as the first step towards UHC, ensuring access to health and nutrition services for the most deprived and marginalised, free at the point of use. Donors and development partners must ensure that their aid is transformative and supports nationally-driven UHC plans and priorities. There must be meaningful civil society engagement in the process, playing a vital role in advocating for UHC, including improved financing and equitable access to services, while holding governments and partners to account for delivering on this.

This is a critical year to galvanise political attention and action to drive progress on UHC, with the first-ever High-Level Meeting (HLM) on Universal Health Coverage taking place in September. To ensure that this is a transformational moment it requires bold actions from governments, including national UHC action plans published in advance of the meeting that can be used to hold them to account by national civil society. The World Health Assembly should be leveraged to build political momentum in the lead up to the HLM.

Meaningful civil society engagement is essential in this process, including to demand bold action from governments and development partners. Civil society can contribute in a big way to improving the quality of primary health care services by highlighting gaps and needs and monitoring quality. The role of civil society (including communities) as beneficiaries and key players, including their contributions to health programme planning and improving accountability, can be amplified by participation in an inclusive health governance structure. They add value, and both complement and facilitate the state’s essential function. Leading up to the WHA and HLM, partners and civil society at the national level will mobilise community-based groups, CSOs, government, parliamentarians and other key stakeholders to ensure that their needs and voices are collected and used to shape the global CSO demands for improved action, accountability and resourcing for achieving UHC. The proposed side event will provide a platform to elevate this voice, towards a joint ambition of health for all.

Event Objectives
1. To serve as a galvanising moment to help build political momentum for action in the lead up to the HLM.
2. To provide a platform for national HLM consultation outcomes and national CSO and community voices to influence the discourse and process in the lead up to the HLM and to contribute to the call for action from governments and development partners, particularly around increasing domestic investment in health.
3. To showcase recent national progress on UHC to encourage further action from governments.
4. To highlight the need for strong national and global accountability to monitor progress on UHC and commitments made at the HLM, including through UHC2030 and national civil society accountability processes.

Expected Results
1. The voice and perspectives of civil society are elevated and considered in the lead up to the HLM, including their
calls to action for governments and development partners.
2. The role of civil society is recognised as critical to countries’ UHC progress, including their accountability role.
3. Governments and development partners are motivated to take action on UHC ahead of the HLM.

Session Format

The session will take the format of a moderated talk-show style panel discussion. There will be two parts to the session, with the first panel focusing on inputs and questions emerging from national HLM consultation meetings. The second panel will focus on questions from national/global civil society organisations around policy developments or gaps, with a focus on financing for UHC.

Proposed programme

1) Opening remarks by the Chair (5 minutes)
2) Setting the scene – to make the case why UHC is ambitious but affordable and why countries can and must make progress on UHC, first and foremost through increased domestic investment to strengthen primary health care systems (10 mins)
3) First round (25 mins) 
   a) Inputs and questions from communities/national CSOs to share challenges in accessing health services (i.e. what UHC or lack thereof means to them) and to elevate civil society’s UHC commitments and recommendations for government, emerging from national HLM consultation meetings
   b) Responses from Member States/donor/development partner on key issues raised
4) Second round (25 mins)
   a) Questions from national/global civil society organisations focused on policy developments or gaps, with a focus on financing for UHC
      o National action and reforms that are needed to make progress on UHC, with a focus on domestic financing
      o Ensuring political commitments on UHC are turned into action through appropriate and efficient health spending
      o Ensuring meaningful civil society engagement and the role of civil society in holding governments and development partners accountable
   b) Responses from Member States/donor/development partner on key issues raised with a focus on meaningful inclusion of civil society
5) Moderated discussion with all panelists on what is needed to drive progress on UHC and to make the HLM a transformational moment, with bold actions from governments and partners (20 mins)
6) Reflections and closing remarks (5 mins)

Supporting partner organisations

- CSEM (UHC2030 Civil Society Engagement Mechanism)
- IFRC
- Save the Children
- UHC2030
- UNAIDS
- Action Contre La Faim

Event details / détails de la réunion

Expected number of participants/Nombre de participants attendus: 60-70

Exact title of the meeting/Titre exact de la réunion: Action and accountability on UHC: Building momentum towards the UN High-level meeting

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) ☒

English/Anglais ☐ French/Français ☒ Russian/Russe ☐ Spanish/Espagnol ☐ Chinese/Chinois ☐ Arabic/Arabe ☐
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*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.

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