

## **Preparation for the high-level meeting of the United Nations General Assembly on universal health coverage**

**Draft resolution proposed by Bangladesh, Botswana, Canada, China,  
Finland, Georgia, Indonesia, Japan, Malta, Russian Federation,  
Sri Lanka, Switzerland, Thailand and Uruguay**

The Executive Board,

Having considered the Director-General's report on "UHC: Preparation for the high-level meeting of the United Nations General Assembly on universal health coverage",

RECOMMENDS to the Seventy-second World Health Assembly the adoption of the following resolution:

The Seventy-second World Health Assembly,

(PP1) Recalling the WHO Constitution which recognizes that the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition;

(PP2) Recalling UNGA resolution 70/1 entitled "Transforming our world: The 2030 Agenda for Sustainable Development" by which Member States adopted a comprehensive, far-reaching and people-centred set of universal and transformative sustainable development goals and targets, that are integrated and indivisible, and recognizing that achieving UHC will greatly contribute to ensuring healthy lives and well-being for all at all ages;

(PP3) Recognizing that health is a precondition for and an outcome and indicator of all three dimensions – economic, social and environmental – of sustainable development;

(PP4) Acknowledging that the Sustainable Development Goals are aimed at realizing the human rights of all, leaving no one behind and reaching those farthest behind first by, inter alia, achieving gender equality and empowerment of women and girls;

(PP5) Recognizing that through the adoption of the 2030 Agenda and its Sustainable Development Goals in September 2015, Heads of State and Government had made a bold commitment to achieve universal health coverage (UHC) by 2030, including financial risk

protection, access to quality essential health care services and access to safe, effective, quality and affordable essential medicines and vaccines for all;

(PP6) Recognizing also that Heads of State and Government committed to ensuring, 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;

(PP7) Recalling resolution WHA69.11 which recognizes that UHC implies that all people have access, without discrimination, to nationally-determined sets of the needed promotive, preventive, curative, palliative, and rehabilitative essential health services, and essential, safe, affordable, effective, and quality medicines, while ensuring that the use of these services does not expose the users to financial hardship, with a special emphasises on the poor, vulnerable, and marginalized segments of the population;

(PP8) Recalling the United Nations General Assembly resolution 67/81 of 12 December 2012, entitled “Global health and foreign policy” which urges governments, civil society organizations and international organizations to collaborate and to promote the inclusion of UHC as an important element on the international development agenda, and a means of promoting a sustained, inclusive and equitable growth, social cohesion and well-being of the population, as well as achieving other milestones for social development;

(PP9) Recognizing the responsibility of governments to urgently and significantly scale up efforts to accelerate the transition towards universal access to affordable and quality health care services and reaffirming the primary responsibility of Member States to determine and promote their own paths towards achieving UHC;

(PP10) Recalling the United Nations General Assembly resolution A/RES/69/313 on the Addis Ababa Action Agenda of the third International Conference on Financing for Development on 27 July 2015, which reaffirmed the strong political commitment to address the challenge of financing and create an enabling environment at all levels for sustainable development in the spirit of global partnership and solidarity, and encouraged countries to consider setting nationally appropriate spending targets for quality investments in health and better alignment of global health initiatives’ programmes to national systems;

(PP11) Recalling also the United Nations General Assembly resolution 72/139 of 12 December 2017, entitled “Global health and foreign policy: addressing the health of the most vulnerable for an inclusive society”, in which Member States decided to hold a high-level meeting of the General Assembly in 2019 on UHC;

(PP12) Recalling further the United Nations General Assembly resolution 72/138 of 12 December 2017, entitled “International Universal Health Coverage Day”, in which Member States decided to proclaim 12 December as International Universal Health Coverage Day;

(PP13) Reaffirming WHO Member States’ commitment to the resolution WHA71.1, on Thirteenth General Programme of Work, to support the work towards the achievement of the vision “triple billion” goals, including one billion more people benefitting from UHC, one billion more people protected from health emergencies, as well as further contributing to one billion more people enjoying better health and well-being;

(PP14) Recalling UNGA resolution A/RES/73/2 of 10 October 2018 on the Political Declaration of the third High-level Meeting of the United Nations General Assembly on the prevention and control of non-communicable diseases which committed to promote increased access to affordable, safe, effective and quality medicines and diagnostics and other technologies, reaffirming the World Trade Organization Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS Agreement), as amended, and also reaffirming the 2001 Doha Declaration on the TRIPS Agreement and Public Health, which recognizes that intellectual property rights should be interpreted and implemented in a manner supportive of the right of Member States to protect public health and, in particular, to promote access to medicines for all, and notes the need for appropriate incentives in the development of new health products;

(PP15) Reiterating that health research and development should be needs driven, evidence-based, guided by the core principles of affordability, effectiveness, efficiency and equity and considered a shared responsibility;

(PP16) Recalling all previous World Health Assembly resolutions aimed at promoting physical and mental health and well-being, as well as contributing to the achievement of UHC;

(PP17) Noting with great concern that the current slow progress in achieving UHC means that many countries are not on track to achieve target 3.8 of the SDGs;

(PP18) Noting that health is a major driver of economic growth;

(PP19) Noting that current government spending on and available resources for health, particularly in many low- and middle-income countries, are not adequate for achieving UHC, including financial risk protection of the population;

(PP20) Acknowledging the important role and necessary contribution of NGOs, private sector entities, philanthropic foundations, and academic institutions, as appropriate, to the achievement of national objectives on UHC, and the need in this regard for synergy and collaboration among all relevant stakeholders;

(PP21) Recognizing the role of parliamentarians in advancing the UHC agenda;

(PP22) Noting that investment in strong, transparent, accountable, and effective health service delivery systems, including an adequately distributed, skilled, motivated, and fit-for-purpose health workforce;

(PP23) Recognizing that effective and financially sustainable implementation of UHC is based on a resilient and responsive health system with capacities for broad public health measures, prevention of diseases, health protection, health promotion, and addressing of determinants of health through policies across sectors, including promotion of the health literacy of the population;

(PP24) Noting that the increasing number of complex emergencies are hindering the achievement of UHC, and that coherent and inclusive approaches to safeguard UHC in emergencies, including through international cooperation, ensuring the continuum and provision of essential health services and public health functions, in line with humanitarian principles, are essential;

(PP25) Recognizing the fundamental role of primary health care (PHC) in achieving UHC and other health-related SDGs and targets as envisioned in the Declaration of Astana on PHC and in providing equitable access to a comprehensive range of services and care that are people-centred, gender-sensitive, high quality, safe, integrated, accessible, available and affordable, which contribute to the health and well-being of all;

(PP26) Recognizing that patient safety, strengthening health systems, and access to quality promotive, preventive, curative, as well as rehabilitation services and palliative care, are essential to achieving UHC;

(OP1) URGES Member States:<sup>1</sup>

(OP1.1) To accelerate progress towards achieving SDG target 3.8 on UHC by 2030, leaving no one behind, especially the poor, vulnerable and marginalized population;

(OP1.2) To support the preparation for the high-level meeting of the United Nations General Assembly in 2019 on universal health coverage, participate at the highest possible level, preferably at the level of Head of State and Government, and engage in the development of the action-oriented consensus political declaration;

(OP1.3) To continue to mobilize adequate and sustainable resources for UHC, as well as to ensure efficient, equitable and transparent resource allocation through good governance of health systems, to ensure collaboration across sectors, as appropriate, and have a special focus on reducing health inequities and inequalities;

(OP1.4) To support better prioritization and decision-making notably by strengthening institutional capacities and governance on health intervention and technology assessment, to achieve efficiencies and evidence-based decisions, while respecting patient privacy and promoting data security, and encourage the greater and systematic utilization of new technologies and approaches, including digital technologies and integrated health information systems as a means of promoting equitable, affordable, and universal access to health and to inform policy decisions in support of UHC;

(OP1.5) To continue investing in and strengthening primary health care as a cornerstone of a sustainable health system, to achieve UHC and other health-related SDGs, with a view to providing comprehensive range of services and care that are people-centred, high quality, safe, integrated, accessible, available and affordable, as well as providing public health functions as envisioned in the Declaration of Astana on PHC and implement its commitments;

(OP1.6) To continue investing in and strengthening gender-sensitive health care services that address gender-related barriers to health and secure women and girls' equitable access to health, to realize the right to the enjoyment of the highest attainable standard of health for all and achieve gender equality and the empowerment of women and girls;

(OP1.7) To invest in an adequate, competent and committed health workforce and promote the recruitment, development, training, and retention of the health workforce in

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<sup>1</sup> And, where applicable, economic integration organizations.

developing countries, especially in LDCs and SIDS by active implementation of the Global strategy on human resources for health: workforce 2030;

(OP1.8) To promote access to affordable, safe, effective, and quality medicines, vaccines, diagnostics, and other technologies;

(OP1.9) To support research and development on medicines and vaccines for communicable and non-communicable diseases, including neglected tropical diseases, particularly those that primarily affect developing countries;

(OP1.10) To consider integrating, as appropriate, safe and evidence-based traditional and complementary medicine services within the national and/or sub-national health systems, particularly at the level of PHC according to national context and priorities;

(OP 1.11) To promote more coherent and inclusive approaches to safeguard UHC in emergencies including through international cooperation, ensuring the continuum and provision of essential health services and public health functions, in line with humanitarian principles;

(OP 1.12) To promote health literacy in the population, especially among vulnerable groups, to strengthen patient involvement in clinical decision-making with a focus on the health professional-patient communication, and to further invest in easily accessible, accurate, understandable, and evidence-based health information including through internet;

(OP 1.13) To continue to strengthen prevention and health promotion by addressing the determinants of health and health equity through multisectoral approaches involving the whole-of-government and the whole-of-society, as well as the private sector;

(OP1.14) To strengthen monitoring and evaluation platforms to support regular tracking of the progress in improving equitable access to a comprehensive range of services and care within the health system and financial risk protection and make best use of it for policy decisions;

(OP1.15) To make the best use of the annual International Universal Health Coverage Day, including by considering appropriate activities, in accordance with national needs and priorities;

(OP2) Call upon all development cooperation partners and stakeholders from the health sector and beyond to harmonize, synergize, and enhance their support to countries' objectives in achieving UHC, and encourage their engagement in, as appropriate, the development of the Global Action Plan for Healthy Lives and Well-Being for All to accelerate the progress on Sustainable Development Goal 3 and other health-related SDGs and targets in order to achieve the agenda 2030;

(OP3) REQUESTS the Director-General:

(OP3.1) To fully support Member States' efforts, in collaboration with the broader UN system and other relevant stakeholders towards achieving UHC by 2030, in particular

with regard to health systems strengthening, including by strengthening WHO's normative work and its capacity to provide technical cooperation and policy advice to Member States;

(OP3.2) To work closely with the Inter-Parliamentary Union to raise further awareness among Parliamentarians about UHC and fully engage them in advocacy and for sustained political support towards achieving UHC by 2030;

(OP3.3) To facilitate and support the learning and sharing of UHC experiences, best practices, challenges and lessons learned across WHO Member States, including by engaging relevant non-State actors, as appropriate, as well as initiatives such as the International Health Partnership UHC2030, and in support of the preparatory process and the High-level Meeting of United Nations General Assembly on UHC;

(OP3.4) To produce a report on UHC as a technical input to facilitate informed discussions at the HLM;

(OP3.5) To make the best use of International Universal Health Coverage Day to drive the UHC agenda, including by encouraging increased political commitment to UHC;

(OP3.6) To report the biennial progress in implementing this resolution, starting from Seventy-third World Health Assembly until 2030, as part of existing reporting on WHA69.11.

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