

Primary health care towards universal health coverage

Draft resolution proposed by Kazakhstan, Mexico, Moldova, South Africa and Turkey

The Executive Board,

Having considered the report Primary health care towards universal health coverage,¹

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

The Seventy-second World Health Assembly,

PP1. Recalling **the 2030 Agenda for Sustainable Development**, adopted in 2015, in particular Sustainable Development Goal (SDG) 3 which calls on stakeholders to ensure healthy lives and promote well-being for all individuals at all ages;

PP2. Reaffirming the commitments [,values,] (Ecuador) [and principles] (Peru, Brazil) expressed in the ambitious and visionary **Declaration of Alma-Ata** of 1978 in pursuit of Health for All (India, US, Uruguay, Australia, Peru, Brazil) (RESERVE EU);

PP3. Welcoming the convening of the **Global Conference on [PHC]/[Primary Health Care: from Alma-Ata towards UHC and the SDGs]** (India) on 25–26 October 2018 in Astana, Kazakhstan, during which Member States renewed their commitment to PHC through a whole-of-society approach around PHC as a cornerstone of a sustainable health system for UHC and health-related SDGs; (RESERVE EU)

PP4. Recognizing that **WHO's 13th General Programme of Work (2019–2023)** defined the essence of UHC as universal access to a strong and resilient people-centred health system with primary care as its foundation; (DEL PP4: Uruguay, US, Ecuador, Peru, Brazil, India)

PP4 ALT1. (EU) Recognizing that the United Nations General Assembly resolution A/RES/67/81 acknowledges that universal health coverage implies that all people have access, without discrimination, to nationally determined sets of the promotive, preventive, curative, and rehabilitative basic health services needed and essential, safe, affordable, effective and quality medicines, while ensuring that the use of these services does not expose the users to financial

¹ Document EB144/12.

hardship, with a special emphasis on the poor, vulnerable and marginalized segments of the population.(DEL PP4 ALT1: Uruguay, US, Ecuador, Peru, Brazil, India)

OP1. **Welcomes** (US, Japan, India, Brazil, Uruguay, Peru)/[**Endorses**](Brazil, India, Kazakhstan, Uruguay) [referring to WHA32.30] (India)/[**Takes note with appreciation of**] (EU, Japan, DEL: Uruguay) the Declaration of Astana adopted at the Global Conference on PHC on 25th October 2018;

OP2. Urges **Member States**¹ to:

OP2 bis. Ensure sustained political commitment to the values and principles of the Declaration of Astana (India);

OP2.1. Take [all the necessary] (Uruguay) measures to implement [the principles of] (DEL: US, India, Uruguay, Brazil, Peru) the Declaration of Astana [as appropriate] (Peru) [at the national level;] (Uruguay) [in solidarity] (India) [into national policies as appropriate;] (EU, DEL: US, India)/[according to national contexts;] (US)

OP3. Requests the **Director-General** to:

OP3.1. Support Member States, in coordination with all relevant stakeholders, in transforming the Declaration of Astana on PHC into action; (India, Australia)

OP3.1. ALT1 (EU) Support Member States, in coordination with all relevant stakeholders, in the implementation [of the principles] (DEL: India, Uruguay, Peru) of the Declaration of Astana [full name of Declaration] (Uruguay)[into national policies] (DEL India);

OP3.2. Develop, in consultation with Member States by the Seventy-third World Health Assembly, an “Operational Framework for Primary health care”, [to be integrated into WHO’s programme of work and budget,] (India, Uruguay) to [strengthen national health systems and] (India, Uruguay, Ecuador) support countries in scaling-up national implementation efforts on PHC (FULL STOP: Chair, US, Uruguay, Ecuador)/[towards]/[to contribute to the achievement of] (RES EU, Norway)/[towards achieving] (US) UHC;

OP3.3. To report on progress on [PHC, including implementing the Declaration of Astana] (Peru, US, Ecuador)/[implementation of the Declaration of Astana including progress made in strengthening PHC systems] (India, Brazil, Turkey), as part of reporting on universal health coverage, through the Executive Board to the World Health Assembly beginning in 2021 and subsequently, every two years thereafter until 2030; (US, Brazil, Turkey, Ecuador) [*Consider moving to last OP (Ecuador, Turkey)*]

OP3.3 ALT. (EU, Uruguay) Ensure that reporting on progress made [by Member States] (Peru, Uruguay, EU; DEL India) in strengthening PHC systems [, including implementation [into national policies of the principles (EU)/[values, principles and commitments] (India) (DEL Uruguay, Peru)[of the Declaration of Astana] (Peru, Uruguay) is incorporated [into]/[as part of] (EU, Ecuador) all reporting on the achievement of

¹ And, where applicable, regional economic integration organizations.

universal health coverage. [beginning in 2021 and subsequently, every two years thereafter until 2030] (Chair) (DEL EU);

OP3.4. Strengthen the institutional capacity and leadership across WHO at all levels of the organization to support PHC [towards achieving]/[and thereby contribute to the achievement of] (EU)UHC (Australia, US)

OP3.4 bis. To ensure that WHO reflects the values and principles of the Declaration of Astana in its work and overall organizational efforts across all levels and strengthen the Secretariat's capacities including capacities of region and country offices to fully support Member States in the efforts in implementing the Declaration (Uruguay, India, Peru)

[Calls upon all relevant stakeholders

OP4.1. to align their actions and support to national policies, strategies and plans in the spirit of partnership and effective development cooperation in implementing the Declaration of Astana;

OP4.2. to support Member States in mobilizing necessary human, technological, financial and information resources to help build strong and sustainable PHC as envisaged in the Declaration of Astana] (India).

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