

WHO Executive Board 152

Statement by Gavi, the Vaccine Alliance

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Agenda Item #5 – Universal Health Coverage

Reorienting health systems to primary health care as a resilient foundation for universal health coverage and preparations for a high-level meeting of the United Nations General Assembly on universal health coverage

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Excellencies, distinguished delegates,

Gavi, the Vaccine Alliance welcomes the Director General's report. COVID-19 has exacerbated persistent inequities in access to health services and a growing number of people face threats of more frequent pandemics, armed conflict, and financial hardships. It is more important than ever to prioritise Universal Health Coverage (UHC) and realise its goals through context-appropriate approaches.

The preparations for a high-level meeting of the United Nations General Assembly on UHC provides a pivotal opportunity to prioritise UHC at the highest level and catalyse meaningful action. We stand ready to engage and continue working with our partners and Member States towards this goal and would like to offer the following considerations:

- **Leverage routine immunisation as a platform to build resilient primary health care (PHC) systems.** Growing financial constraints necessitate a focus on cost-effective and high impact solutions. As one of the most efficient and cost-effective healthcare interventions with the greatest reach and demonstrated health outcomes, routine immunisation can serve as a useful platform to co-deliver other PHC services. Immunisation brings most households into contact with the health system during the first year of a child's life, allowing communities to interact with the health sector, creating trust and resilient relationships. This is also critical for pandemic prevention, preparedness and response.
- **To ensure universality and that no one is left behind, prioritise reaching zero dose children – those who have not received a single vaccine – and missed communities with the full range of health services.** PHC, as a cornerstone of UHC, should have equity at its heart, with a focus on reaching the most vulnerable and furthest left behind. To reach zero-dose children, an entire service delivery infrastructure is made available to marginalized communities, supporting to build a resilient health system that also enables early detection and effective response towards health threats. A laser focus on reaching these children and their communities with a basic package of PHC services including immunisation should be at the center of any UHC and pandemic preparedness and response strategy. This should include tailored and multi-sectoral strategies aiming to understand and address barriers, including gender barriers, that often extend beyond the health sector.

- **Recognize and resource the health and care workforce as the foundation of future resilience.** Achieving UHC relies on a strong healthcare workforce delivering quality services. Health workers, including community health workers, must be appropriately compensated and ensured safe and decent work conditions with adequate protections including gender sensitive workplace policies that ensures equal pay and protect female health workers from sexual harassment and exploitation.
- **Ensure participatory governance and a coordinated whole-of-society approach for UHC.** Inclusion and accountability are integral to UHC. Civil society and communities must therefore be included in any future UHC plans to foster trust and make the health system more transparent and accountable.
- **Move from commitment to action.** Political processes and high-level commitments made in Geneva and New York need to be aligned and produce concrete policies at the national level. To make tangible progress, international and domestic investments need to support countries in translating commitments to action.