



European Union

Statement

WHO

158th Executive Board

(2 – 7 February 2026)

Item 9 – Universal Health Coverage

Geneva, xx February 2026

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EU Statement

Chair,

I am delivering this statement on behalf of the EU and its 27 Member States.

The candidate countries North Macedonia, Montenegro, Serbia, Albania, Ukraine, Republic of Moldova¹ and Georgia as well as Armenia align themselves with this statement.

Universal Health Coverage is fundamental to the right to health and relies on strong primary healthcare to build resilient health systems that are also capable of addressing cross-border health threats. Equitable access to health care and life-saving treatments, requires addressing persistent barriers, including gender inequality, financial barriers, discrimination and other forms of inequalities and inequities. It also requires safeguarding access to essential health services and information as health systems adapt to demographic change, or face disruption due to conflict and climate change, affecting women, girls and persons in vulnerable situations disproportionately.

WHO must focus on supporting Member States in the following areas:

- **Addressing shortages in the Health Workforce.** The projected shortfall of 11.1 million health workers globally by 2030 must be urgently addressed by boosting the supply of health professionals, that includes fair and ethical recruitment from abroad, avoiding brain drain and ensuring a career path, optimising skills mix, digitalisation, implementing task sharing, and improving retention of health workers, including by improved working conditions, besides strengthening primary health care and communities engagement. The WHO Academy will play a key role in supporting efforts to adequately train the healthcare workforce.
- **Promoting financial sustainability and social protection.** The EU underscores the importance of scaling up inclusive social protection systems, and investing in quality, cost-effective healthcare services. We invite Member States, including developing countries, to identify and access domestic resources, with efficient, innovative, equitable and sustainable financing mechanisms to reduce out-of-pocket health expenditures by households and avoid economic barriers to health services, particularly for the most vulnerable, in line with Member States commitment², including through international cooperation and assistance, as appropriate. The Secretariat should advance the development of the Global Strategy on Transplantation to facilitate equitable access and promote innovation.

¹ North Macedonia, Montenegro, Serbia, and Albania continue to be part of the Stabilisation and Association Process.

² IHR Art 44

- **Improving the accessibility to treatment of rare diseases.** The expansion of UHC must also aim to reduce disparities between countries, particularly in the treatment of rare diseases, a major public health issue. This may require strengthening healthcare systems beyond primary healthcare and specific consideration within national social protection systems. We believe the Secretariat's work on mapping of existing standards and norms, preparing a technical report on rare diseases, as well as addressing data gaps on patients and establishing a workstream promoting UHC for persons living with rare diseases is crucial.

Finally, the EU welcomes the momentum on UHC and remains committed to working with all Member States and stakeholders to deliver on its promise.

Thank you.