

Country: Belize

Committee A

Items: (13.1 & 13.2), (13.3 & 13.5)

May 25, 2023

Agenda item 13.1 Universal Health Coverage

Belize thanks the Director General for the report on item 13.1. Belize is committed to achieving Universal Health Coverage and has been strengthening its health systems towards this achievement. Universal health coverage means that everyone receives quality health services, when and where they need them, without incurring financial hardship. The UHC essential service coverage index for Belize has been increasing over time and was estimated at 67% in 2019 using a scale of 0 to 100, set by WHO. This is defined as the average coverage of essential services based on tracer interventions that include reproductive, maternal, newborn and child health, infectious diseases, noncommunicable diseases and service capacity and access, among the general and the most disadvantaged population.

As a measure of SDG indicator 3.8.1, the UHC service coverage index combines 14 tracer indicators of service coverage into a single summary measure. This indicates that while this indicator has been improving over time, there is still great work ahead as we continue the movement towards achieving Universal Health Coverage by undertaking relevant reforms in the health sector.

In addition, according to the WHO Global Health Expenditure database, government health spending in Belize as a percentage of health spending has been progressively increasing over the years from 53.1% in 2005 to 71.8 in 2020, with out-of-pocket spending decreasing over this 15-year period from 32% in 2005 to 21.9% in 2020. This indicates that the increased government investments in health is relieving individuals' out-of-pocket expenditures and decreasing the financial burden of healthcare, especially for vulnerable groups.

Efforts are being made to strengthen the primary health care approach and improve financing for health including the expansion of the coverage under the National Health Insurance scheme. Let me say that approximately 35% of the population is already covered by a National Health Insurance for primary health care services, and it is currently being expanded to the northern part of Belize where it will cover another 20% of the population.

Strengthening health systems based on a strong primary health care model is crucial to building back better and accelerating progress towards Universal Health Coverage and health security. As we aim to continue this movement and achieve greater health gains, it is imperative for us to work together with all stakeholders to reorient our health systems to primary health care as a resilient foundation for universal health coverage.

Item: 13.2 Political Declaration of the third high-level meeting of the General Assembly on the prevention and control of non-communicable diseases and mental health.

Belize also thanks the Director General for the report on item 13.2. Non-communicable diseases are the leading cause of death and disability globally, killing more than three in five people worldwide and responsible for more than half of the global burden of disease.

These health problems are causing and perpetuating poverty while hindering economic development in low- and middle-income countries. If they continue their upward trend, NCDs are estimated to cause a cumulative loss of output of \$47 trillion between 2011 and 2030.

With Belize concluding the implementation the National Plan of Action for the Prevention and Control of Non-communicable Diseases 2013-2023 this year, it is imperative for us to conduct a robust evaluation of this plan to identify gaps and bottlenecks in the health system. While many strides have been made in the last decade, we are cognizant that more needs to be done in order to address this public health issue. It therefore vital for us to join forces with key partners and stakeholders so as to ensure maximum health gains. **The burden is already too heavy to bear.** Belize has not quantified the economic nor the social burden being placed on families by the complications and premature mortality associated with NCDs. However, there is evidence that young adults in the productive age are already being classified with resulting disabilities.

As governments, it is important for us to share agendas with our UN partners as a follow up to the last high-level meeting on NCDs in 2018. If NCDs are our number one killer, then addressing the determinants and root causes should be our number one priority. We must commit together and strengthen leadership and governance in all areas to have the necessary resources and capacities to overcome these obstacles and the burden of NCDs. We recognize these are complex health and social issues, but we are also confident that as a global community, we can work together to develop and implement robust evidence-based policies and programs to combat the burden of NCDs. As a country, Belize remains committed!

Agenda item 13.3. Substandard and falsified medical products

Belize thanks the Director General for the report on item 13.3. Access to safe, effective and quality medical products is a crucial element of Universal Health Coverage. Yet, every day, substandard and falsified medical products enter the global, regional and national supply chain systems resulting in socioeconomic cost and damage to health, stockouts, and not to mention, dissatisfaction of patients and loss of trust in health systems. Substandard and falsified medicines, vaccines, and other medical products not only increase disease prevalence, exacerbate antimicrobial resistance and produce adverse health effects, they also waste resources, result in economic loss and increase out-of-pocket spending on medical treatment.

To address these challenges, Belize has made significant efforts towards addressing substandard and falsified medical products in the country:

- In 2020, Belize became an Associate Member of the WHO Program for International Drug Monitoring (WHO PIDM). This accomplishment is the result of a focused effort on the part of the government of Belize with support from PAHO to strengthen regulatory functions including registration, pharmacovigilance, and post market surveillance.
- Belize's strategy to improve its regulatory system makes use of new regional systems available to CARICOM countries, including CARPHA's Caribbean Regulatory System, and its market surveillance reporting platform, VigiCarib.
- Belize participates in the regular global Regulatory Updates meetings especially during the time of the COVID-19 pandemic, the monthly PAHO regional Pharmacovigilance network meetings and the falsified and substandard medicines meetings.
- It has recently launched the 10th Edition of the Belize Drug Formulary and Therapeutic Manual, 2020-2023, as well as the Over-the-Counter Medicines List.
- During the COVID-19 pandemic, it issued advisories on the unauthorized use of medicines and remedies for COVID-19 that are not supported by evidence, according to PAHO/WHO guidance.
- The MOHW is currently undergoing sensitization and identified focal persons for the WHO Global Benchmarking Tool (GBT) for Evaluation of National Regulatory Systems of Medical Products. Findings from this evaluation could be used to develop an Institutional Development Plan (IDP) to further strengthen the regulatory capacity of Belize.
- In response to client complaints about substandard medicines and evidence of such, the country is making increased efforts to procure medicines from suppliers who meet the required standards in the country.
- The Drug Inspectorate Unit is being strengthened to ensure that the drugs being delivered to Belize comply with the specification and requirements as per the annual tendering process. This unit is supported by the Chemist and Druggist Act of Belize.

We strongly believe that through strong collaboration and a shared vision, we can strengthen health products selection, quantification, procurement and forecasting in Belize and globally.

Agenda item 13.5 Infection Prevention and Control (IPC)

Belize also thanks the Director General for the report on item 13.5. Over the last decades, the spread of the emerging and re-emerging infectious diseases has exposed the shortcomings of the Infection Prevention and Control Programs (IPC) globally, even though the gaps tend to be more evident in low- and middle-income countries and in health facilities with limited resources. Additionally, the increasing incidence of health care-associated infections (HAIs) and antimicrobial resistance (AMR) which jeopardize the safety and wellbeing of the patients are significant justification to improve IPC locally, nationally, regionally, and globally.

Being aware of the magnitude of the IPC issues and based on some lessons learnt from the COVID-19 pandemic, the Government of Belize is taking important steps to comply with the vision of the Global Strategy on Infection Prevention and Control (GSIPC) with a people-centered approach and prioritizing actions to ensure that by 2030, everyone accessing or providing health care is safe from associated infections. This will be made possible through the effective governance and leadership of the Ministry of Health and Wellness in implementing a series of strategic actions aimed at promoting adherence to Infection Prevention and Control practices.

The strategic actions will create an enabling environment to comply with at least 4 of the 8 strategic directions of the vision and objectives of the Global Strategy for Infection Prevention and Control (GSIPC) through the following:

- Advocacy and communications
- Data for action
- IPC integration and coordination, and
- Collaboration and stakeholders' support

Belize remains fully committed in strengthening these areas in order to support the robust implementation of practical and evidence-based IPC policies and programs to protect health care workers and the entire Belizean population.