



European Union

Statement

WHO

77th World Health Assembly

(27 May – 1 June 2024)

Item 11.1 Universal Health Coverage

Geneva, 29 May 2024

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EU Statement

Chair,
Director General,
Excellencies,
Colleagues,

This statement is made on behalf of the EU and its Member States.

The candidate countries North Macedonia, Montenegro, Serbia, Albania, Ukraine, Bosnia and Herzegovina* and Georgia align themselves with this statement.

UHC is a fundamental condition for realizing the human right to health. Despite the existing political consensus and commitments reflected in the UNGA's political declarations on UHC and in the Sustainable Development Goals, global progress, in this respect, has slowed down.

UHC must be a priority with two core aspects: I) improving access to quality health services, leaving no one behind, to get better health outcomes and reduce health inequalities, II) providing financial protection to populations to reduce financial hardship, especially for those with lower income.

The development of Primary Health Care (PHC) has proven to be the best vehicle for achieving UHC more quickly, comprehensively, effectively, and equitably. Improving PHC also requires increased sustainable investment in education, training, and remuneration of health workforce. As it is crucial to have sufficient availability of a well trained, well-paid and motivated health workforce, we

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

welcome WHO's ambition in the GPW, to address health workforce shortage, and the ongoing evaluation of the impact of the WHO Global Code of Practice on the International Recruitment of Health Personnel. We also support the creation of WHO Academy.

Health systems and services need to be inclusive, integrated and people centred, since equity of access and participation at all levels of care are central to UHC. Community-oriented primary care, primary healthcare integration, social prescribing and public health services to reach people that are not effectively covered in the regular system, are fundamental elements to improve health and uptake of health services. This will increase accessibility and address patient needs at an early stage, thus relieving the burden on higher levels of care.

In pursuit of health equity, we consider it critical to not only acknowledge that gender-specific barriers to good health exist, but to actually address these barriers head-on. Hence, gender-responsive approach needs to be applied when developing and implementing UHC-related policies and plans. Only then can we achieve the SDG's promise to reach first those who are the furthest behind first, including women, girls and persons in vulnerable and marginalized situations.

The EU remains committed to the promotion, protection and fulfilment of all human rights and to the full and effective implementation of the Beijing Platform for Action and the Programme of Action of the International Conference on Population and Development (ICPD) and the outcomes of their review conferences and remains committed to sexual and reproductive health and rights (SRHR) in this context. The EU further stresses the need for universal access to quality and affordable comprehensive sexual and reproductive health information, education, including comprehensive sexuality education, and health-care services. These are fundamental aspects of UHC and also serve as an important entry point to build trust between communities and the health system and provide health care providers with an opportunity to address other critical health needs, including infectious diseases with pandemic potential.

Following the effects of the COVID -19 pandemic and subsequent economic crises, political action is urgent to resume progress in ensuring quality health services for all, including for persons in vulnerable and marginalized situations and protecting them from catastrophic and impoverishing out-of-pocket health expenses.

The goal of ending impoverishment due to health-related expenses by 2030 can only be achieved with strong intersectoral political commitment and through actions by all stakeholders within and beyond health, in a whole of society approach.

Concerning the resolution to be adopted under this agenda item, the EU flags its Explanation of position delivered with regard to the use of "those" in the wording "those in vulnerable situation", which the EU, following the rights-based person-centered approach, understands to refer solely to "persons".

Thank you.