

**Political Declaration of the High-level Meeting on Universal Health Coverage**

**“Universal Health Coverage: Moving Together to Build a Healthier World”**

**Synopsis of selected drafts and contested paragraphs of final draft**

Text marked **yellow** in the co-facilitators revised drafts (June, early July) indicates the introduction of new language.

Paragraphs marked **blue** are those still contested by “several delegations” that again **broke the “silence procedure”** for the adoption of the “final revised” draft .

<u>Zero Draft</u> 17 May 2019	Co-Facilitators revised zero draft June 2019	Co-Facilitators revised zero draft (REV. 3)-1, early July 2019	<u>Final Revised Draft</u> 6 August 2019
We, Heads of State and Government and representatives of States and Governments, assembled at the United Nations on 23 September 2019 with a dedicated focus for the first time on universal health coverage, reaffirm that health is a precondition for and an outcome and indicator of all three dimensions of sustainable development and the implementation of the 2030 Agenda for Sustainable Development, and strongly recommit to achieve universal health coverage by 2030, with a view to scaling up the global effort to build a healthier world for all	We, Heads of State and Government and representatives of States and Governments, assembled at the United Nations on 23 September 2019 with a dedicated focus for the first time on universal health coverage, reaffirm that health is a precondition for and an outcome and indicator of <b>the social, economic and environmental</b> dimensions of sustainable development and <b>is a prerequisite for</b> the implementation of the 2030 Agenda for Sustainable Development, and strongly recommit to achieve universal health coverage by 2030, with a view to scaling up the global effort to build a healthier world for all, <b>and in this regard we:</b>	We, Heads of State and Government and representatives of States and Governments, assembled at the United Nations on 23 September 2019 with a dedicated focus for the first time on universal health coverage, reaffirm that health is a precondition for and an outcome and indicator of the social, economic and environmental dimensions of sustainable development and the implementation of the 2030 Agenda for Sustainable Development, and strongly recommit to achieve universal health coverage by 2030, with a view to scaling up the global effort to build a healthier world for all, and in this regard we	We, Heads of State and Government and representatives of States and Governments, assembled at the United Nations on 23 September 2019, with a dedicated focus for the first time on universal health coverage, reaffirm that health is a precondition for and an outcome and indicator of the social, economic and environmental dimensions of sustainable development and the implementation of the 2030 Agenda for Sustainable Development, and strongly recommit to achieve universal health coverage by 2030, with a view to scaling up the global effort to build a healthier world for all, and in this regard we:
1. Reaffirm the right of every human being to the enjoyment of the highest attainable standard of physical and mental health, without distinction of any kind	1. Reaffirm the <b>fundamental</b> right of every human being to the enjoyment of the highest attainable standard of physical and mental health, without distinction of any kind;	1. Reaffirm the right of every human being to the enjoyment of the highest attainable standard of physical and mental health, without distinction of any kind	1. Reaffirm the right of every human being, without distinction of any kind, to the enjoyment of the highest attainable standard of physical and mental health;
2. Reaffirm General Assembly Resolution 70/1 of September 2015, entitled “Transforming our world: the 2030 Agenda for Sustainable Development”, stressing the	2. Reaffirm General Assembly Resolution 70/1 of September 2015, entitled “Transforming our world: the 2030 Agenda for Sustainable Development”, stressing <b>the need for</b>	2. Reaffirm General Assembly Resolution 70/1 of September 2015, entitled “Transforming our world: the 2030 Agenda for Sustainable Development”, stressing the need for	2. Reaffirm General Assembly Resolution 70/1 of September 2015, entitled “Transforming our world: the 2030 Agenda for Sustainable Development”, stressing the need for

<p>importance of health across all the goals and targets of the 2030 Agenda on Sustainable Development, as well as the need for a holistic approach, with a view to leaving no one behind, reaching the furthest behind first</p>	<p>a holistic approach, with a view to leaving no one behind, reaching the furthest behind first, and the importance of health across all the goals and targets of the 2030 Agenda on Sustainable Development, which are integrated and indivisible;</p>	<p>a holistic and people-centered approach, with a view to leaving no one behind, reaching the furthest behind first, and the importance of health across all the goals and targets of the 2030 Agenda on Sustainable Development, which are integrated and indivisible</p>	<p>a comprehensive and people-centered approach, with a view to leaving no one behind, reaching the furthest behind first, and the importance of health across all the goals and targets of the 2030 Agenda for Sustainable Development, which are integrated and indivisible;</p>
<p>3. Reaffirm the Addis Ababa Action Agenda of the Third International Conference on Financing for Development as reflected in resolution 69/313;</p>	<p>3. Reaffirm General Assembly Resolution 69/313 of 27 July 2015 on the Addis Ababa Action Agenda of the Third International Conference on Financing for Development</p>	<p>3. Reaffirm General Assembly Resolution 69/313 of 27 July 2015 on the Addis Ababa Action Agenda of the Third International Conference on Financing for Development, which reaffirmed strong political commitment to address the challenge of financing and creating an enabling environment at all levels for sustainable development in the spirit of global partnership and solidarity</p>	<p>3. Reaffirm General Assembly Resolution 69/313 of 27 July 2015 on the Addis Ababa Action Agenda of the Third International Conference on Financing for Development, which reaffirmed strong political commitment to address the challenge of financing and creating an enabling environment at all levels for sustainable development in the spirit of global partnership and solidarity;</p>
	<p>4. Reaffirm the strong commitments made by Governments, through the United Nations General Assembly platform, on ending tuberculosis, ending HIV and AIDS, malaria, prevention and control of non-communicable diseases, and antimicrobial resistance;</p>	<p>4. Reaffirm the strong commitments made through the political declarations adopted at the High-level Meetings on ending AIDS, on tackling antimicrobial resistance, on ending tuberculosis, and on the prevention and control of non-communicable diseases, as well as the General Assembly resolutions entitled “Consolidating gains and accelerating efforts to control and eliminate malaria in developing countries, particularly in Africa, by 2030”;</p>	<p>4. Reaffirm the strong commitments made through the political declarations adopted at the High-level Meetings on ending AIDS, on tackling antimicrobial resistance, on ending tuberculosis, and on the prevention and control of non-communicable diseases, as well as the General Assembly resolutions entitled “Consolidating gains and accelerating efforts to control and eliminate malaria in developing countries, particularly in Africa, by 2030”;</p>
	<p>5. Recognize that UHC is fundamental for achieving the SDGs related not only to health and well-being, but to eradicate poverty in all its forms and dimensions, ensure quality education, achieve gender equality, provide decent work and economic growth, reduce inequalities, ensure just, peaceful and inclusive societies and to build and foster partnerships, while</p>	<p>5. Recognize that UHC is fundamental for achieving the SDGs related not only to health and well-being, but also to eradicate poverty in all its forms and dimensions, ensure quality education, achieve gender equality and women’s empowerment, provide decent work and economic growth, reduce inequalities, ensure just, peaceful and inclusive societies and to</p>	<p>5. Recognize that universal health coverage is fundamental for achieving the Sustainable Development Goals related not only to health and well-being, but also to eradicate poverty in all its forms and dimensions, ensure quality education, achieve gender equality and women’s empowerment, provide decent work and economic growth, reduce inequalities, ensure</p>

	reaching the goals and targets included throughout the 2030 Agenda for Sustainable Development are critical for the attainment of healthy lives and well-being for all at all ages	build and foster partnerships, while reaching the goals and targets included throughout the 2030 Agenda for Sustainable Development are critical for the attainment of healthy lives and well-being for all throughout the life course	just, peaceful and inclusive societies and to build and foster partnerships, while reaching the goals and targets included throughout the 2030 Agenda for Sustainable Development is critical for the attainment of healthy lives and well-being for all, with a focus on health outcomes throughout the life course;
4. Recall the WHA70.XX on “Preparation for the high-level meeting of the United Nations General Assembly on universal health coverage”, urging the Member States to accelerate progress towards SDG 3.8 on UHC by 2030;	6. Recall World Health Assembly resolution WHA72.XX entitled “Preparation for the high-level meeting of the United Nations General Assembly on universal health coverage”;	6. Recall World Health Assembly resolution WHA72.4 entitled “Preparation for the high-level meeting of the United Nations General Assembly on universal health coverage”; [Ad ref]	6. Recall World Health Assembly resolution WHA72.4 entitled “Preparation for the high-level meeting of the United Nations General Assembly on universal health coverage”;
5. Recognize that health is a long-term investment in the human capital towards the full realization and development of the human potential, and significantly contributes to the protection and empowerment of all people;	7. Recognize that health is a long-term investment in the human capital and development towards the full realization and fulfilment of the human potential, which significantly contributes to the protection and empowerment of all people	7. Recognize that health is an investment in the human capital and social and economic development, towards the full realization of the human potential and significantly contributes to human rights and human dignity as well as the empowerment of all people	7. Recognize that health is an investment in the human capital and social and economic development, towards the full realization of the human potential and significantly contributes to the promotion and protection of human rights and dignity as well as the empowerment of all people;
6. Recognize that universal health coverage means that all people and communities can use the promotive, preventive, curative, rehabilitative and palliative health services they need, of sufficient quality to be effective, while also ensuring that the use of these services does not expose individuals and families to financial hardship;	8. Recognize that universal health coverage means that all people have equal access, without discrimination of any kind, to nationally determined sets of the quality promotive, preventive, curative, palliative, and rehabilitative essential health services needed, and essential, safe, affordable, effective, and quality medicines and vaccines, while ensuring that the use of these services and medicines does not expose the users to financial hardship, with a special emphasis on the poor, vulnerable, and marginalized segments of the population	8. Recognize that universal health coverage implies that all people have access, without discrimination, to nationally determined sets of the needed promotive, preventive, curative, rehabilitative and palliative essential health services, and essential, safe, affordable, effective and quality medicines and vaccines, while ensuring that the use of these services does not expose the users to financial hardship, with a special emphasis on the poor, vulnerable, and marginalized segments of the population; (agreed language from WHA72.4 pp8)	8. Recognize that universal health coverage implies that all people have access, without discrimination, to nationally determined sets of the needed promotive, preventive, curative, rehabilitative and palliative essential health services, and essential, safe, affordable, effective and quality medicines and vaccines, while ensuring that the use of these services does not expose the users to financial hardship, with a special emphasis on the poor, vulnerable, and marginalized segments of the population;

		9. Recognize the need for health systems that are strong, resilient, functional, well-governed, responsive, accountable, integrated, community-based, people-centred and capable of quality service delivery, supported by a competent health workforce, adequate health infrastructure, enabling legislative and regulatory frameworks as well as sufficient and sustainable funding	9. Recognize the need for health systems that are strong, resilient, functional, well-governed, responsive, accountable, integrated, community-based, people-centred and capable of quality service delivery, supported by a competent health workforce, adequate health infrastructure, enabling legislative and regulatory frameworks as well as sufficient and sustainable funding;
	9. Recognize the need to tackle health inequities and inequalities within and across countries through political commitment and national policies that address social, economic and environmental determinants of health	10. Recognize the need to tackle health inequities and inequalities within and among countries through political commitment, policies and international cooperation including those that address social, economic and environmental and other determinants of health	10. Recognize the need to tackle health inequities and inequalities within and among countries through political commitment, policies and international cooperation including those that address social, economic and environmental and other determinants of health;
7. Acknowledge that achieving universal health coverage requires a paradigm shift and recognize UHC as an overarching umbrella for the achievement of healthy lives and well-being for all at all ages;	10. Acknowledge that achieving universal health coverage requires a paradigm shift and recognize UHC as an overarching umbrella for the achievement of healthy lives and well-being for all at all ages		
8. Recognize that action to realize the commitments made for the achievement of UHC is inadequate and that the level of progress and investment to date is insufficient to meet target 3.8 of the Sustainable Development Goals and that the world has yet to fulfil its promise of implementing, at all levels, measures to address the health needs of all, noting that: a. despite major health gains over the past decades, including increased life expectancy, the reduction of maternal and under-5 mortality rates, and successful campaigns against major	11. Recognize that action to realize the commitments made for the achievement of UHC has been inadequate and that the level of progress and investment to date is insufficient to meet target 3.8 of the Sustainable Development Goals and that the world has yet to fulfil its promise of implementing, at all levels, measures to address the health needs of all, noting that: a. despite major health gains over the past decades, including increased life expectancy, the reduction of maternal and under-5 mortality rates, and successful campaigns against major	11. Recognize that action to achieve UHC by 2030 is inadequate and that the level of progress and investment to date is insufficient to meet target 3.8 of the Sustainable Development Goals, and that the world has yet to fulfil its promise of implementing, at all levels, measures to address the health needs of all, noting that: a. at least half of the world's population lack access to essential health services, more than 800 million people bears the burden of catastrophic spending of at least 10% of their household income on health care, and out of pocket expenses drive	11. Recognize that action to achieve universal health coverage by 2030 is inadequate and that the level of progress and investment to date is insufficient to meet target 3.8 of the Sustainable Development Goals, and that the world has yet to fulfil its promise of implementing, at all levels, measures to address the health needs of all, noting that: a. at least half of the world's population lack access to essential health services, more than 800 million people bear the burden of catastrophic spending of at least 10% of their household income on health

<p>diseases, some new threats are emerging, including the resurgence of old and new diseases, the risk of pandemics and the increasing global burden of non-communicable diseases accounting to over 70% of all deaths in the age group 30-70;</p> <p>b. the estimated number of 8 million lives lost each year that should be treatable by the health system in low- and middle-income countries alone remains unacceptably high;</p> <p>c. at least half of the world's population lack access to essential health services, more than 800 million people spend at least 10% of their household income on health care, and such out of pocket expenses drive almost 100 million people into poverty each year;</p> <p>d. at the current pace, up to one third of the world's population will remain underserved by 2030 with no access to health services and a measurable acceleration is urgently needed to reach the health-related targets of the SDGs by 2030;</p> <p>e. the progress achieved at the global level is uneven due to inequities both among and within countries, including the discrepancy in life expectancy of over 30 years between the countries with the shortest and longest life expectancies;</p>	<p>diseases, challenges remain and some new threats are emerging, including the resurgence of old and new diseases, antimicrobial resistance, pandemics and the increasing global burden of non-communicable diseases, including mental health, accounting to over 70% of all deaths in the age group 30-70;</p> <p>b. the estimated number of 8 million lives lost each year that should be treatable by the health system in low- and middle-income countries alone remains unacceptably high;</p> <p>c. at least half of the world's population lack access to essential health services, more than 800 million people spend at least 10% of their household income on health care, and such out of pocket expenses drive almost 100 million people into poverty each year;</p> <p>d. at the current pace, up to one third of the world's population will remain underserved by 2030 with no access to health services and a measurable acceleration is urgently needed to reach the health-related targets of the SDGs by 2030;</p> <p>e. the progress achieved at the global level is uneven due to inequities both among and within countries, including the discrepancy in life expectancy of over 30 years between the countries with the shortest and longest life expectancies</p>	<p>almost 100 million people into poverty each year;</p> <p>b. at the current pace, up to one third of the world's population will remain underserved by 2030 and a measurable acceleration is urgently needed to reach the health-related targets of the SDGs by 2030;</p> <p>c. despite major health gains over the past decades, including increased life expectancy, the reduction of maternal and under-5 mortality rates, and successful campaigns against major diseases, challenges remain with regard to emerging and re-emerging diseases, non-communicable diseases, mental disorders and other mental health conditions as well as neurological disorders, communicable diseases including HIV/AIDS, TB and malaria, antimicrobial resistance, noting that non-communicable diseases account for over 70% of all deaths in the age group 30-69;</p> <p>d. despite the progress achieved at the global level, many health systems are not sufficiently prepared to respond to the needs of the rapidly ageing population;</p>	<p>care, and out of pocket expenses drive almost 100 million people into poverty each year;</p> <p>b. at the current pace, up to one third of the world's population will remain underserved by 2030 and a measurable acceleration is urgently needed to reach the health-related targets of the SDGs by 2030;</p> <p>c. despite major health gains over the past decades, including increased life expectancy, the reduction of maternal and under-5 mortality rates, and successful campaigns against major diseases, challenges remain with regard to emerging and re-emerging diseases, non-communicable diseases, mental disorders and other mental health conditions as well as neurological disorders, communicable diseases including HIV/AIDS, Tuberculosis and malaria, antimicrobial resistance, noting that non-communicable diseases account for over 70% of all deaths in the age group 30-69;</p> <p>d. despite the progress achieved at the global level, many health systems are not sufficiently prepared to respond to the needs of the rapidly ageing population;</p> <p>e. the high prices for some health products, and inequitable access to such products within and among countries, as well as financial hardships associated with high prices of health products continue to impede progress towards achieving universal health coverage;</p>
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<p>9. Strongly reaffirm our political will to achieve universal health coverage and commit to stop the rise of catastrophic out-of-pocket health spending by providing financial risk protection and reverse the trend by 2030, and progressively cover one billion additional people with quality essential health services and quality, essential, affordable and effective medicines, vaccines and technologies for all by 2023, and an additional two billion people by 2030;</p>	<p>12. Strongly reaffirm our political will to achieve universal health coverage and commit to:</p> <p>a. progressively cover one billion additional people with quality essential health services and quality, essential, affordable and effective medicines, vaccines, <b>diagnostics</b>, and technologies for all by 2023, and an additional two billion people by 2030;</p> <p>b. stop the rise of catastrophic <b>and impoverishing</b> out-of-pocket health <b>expenditure</b> by providing financial risk protection and reverse the trend, <b>with a view to eliminating the number of people pushed into poverty due to health related expenses</b> by 2030;</p>		
<p>10. Reaffirm the primary role and responsibility of governments to determine their own path towards achieving UHC and underscore the importance of pursuing whole-of government and whole-of-society approaches, as well as health-in-all-policies approaches, equity-based approaches and life-course approaches;</p>	<p>13. Reaffirm <b>the importance of national ownership and</b> the primary role and responsibility of governments to determine their own path towards achieving UHC, <b>in accordance with national contexts and priorities</b>, and underscore the importance of <b>political leadership for UHC beyond the health sector in order to pursue</b> whole-of government and whole-of-society approaches, as well as health-in-all-policies approaches, equity-based approaches and life-course approaches</p>	<p>12. Reaffirm the importance of national ownership and the primary role and responsibility of governments at all levels to determine their own path towards achieving UHC, in accordance with national contexts and priorities, and underscore the importance of political leadership for UHC beyond the health sector in order to pursue whole-of government and whole-of-society approaches, as well as health-in-all-policies approaches, equity-based approaches and life-course approaches</p>	<p>12. Reaffirm the importance of national ownership and the primary role and responsibility of governments at all levels to determine their own path towards achieving universal health coverage, in accordance with national contexts and priorities, and underscore the importance of political leadership for universal health coverage beyond the health sector in order to pursue whole-of government and whole-of-society approaches, as well as health-in-all-policies approaches, equity-based approaches and life-course approaches;</p>
<p>11. Recognize that primary health care is the most inclusive, effective and efficient approach to enhance people’s physical and mental health, as well as social well-being, and that PHC is a cornerstone of a sustainable health system for UHC and health-related Sustainable Development Goals, as recognized by the</p>	<p>14. Recognize that primary health care is the most inclusive, effective and efficient approach to enhance people’s physical and mental health, as well as social well-being, and that PHC is a cornerstone of a sustainable health system for UHC and health-related Sustainable Development Goals, as recognized by the</p>	<p>13. Recognize that primary health care <b>brings people into first contact with the health system and</b> is the most inclusive, effective and efficient approach to enhance people’s physical and mental health, as well as social well-being, and that primary health care is a cornerstone of a sustainable health system for UHC and health-</p>	<p>13. Recognize that primary health care brings people into first contact with the health system and is the most inclusive, effective and efficient approach to enhance people’s physical and mental health, as well as social well-being, and that primary health care is the cornerstone of a sustainable health system for</p>

Declaration of Astana;	Declaration of Astana	related Sustainable Development Goals, as was declared in the Declaration of Alma-Ata and reaffirmed by the Declaration of Astana	universal health coverage and health-related Sustainable Development Goals, as was declared in the Declaration of Alma-Ata and reaffirmed by the Declaration of Astana;
12. Recognize the fundamental importance of equity, social cohesion and social protection mechanisms to ensure access to health without financial hardship for all people particularly for those who are vulnerable or marginalized;	15. Recognize the fundamental importance of equity, social justice and social protection mechanisms to ensure universal and equitable access to quality health services without financial hardship for all people, particularly for those who are vulnerable, in vulnerable situations or marginalized;	14. Recognize the fundamental importance of equity, social justice and social protection mechanisms as well as the elimination of stigma and discrimination in health-care settings to ensure universal and equitable access to quality health services without financial hardship for all people, particularly for those who are vulnerable or in vulnerable situations	14. Recognize the fundamental importance of equity, social justice and social protection mechanisms as well as the elimination of the root causes of discrimination and stigma in health-care settings to ensure universal and equitable access to quality health services without financial hardship for all people, particularly for those who are vulnerable or in vulnerable situations;
13. Recognize that UHC is fundamental for achieving the SDGs related not only to health and well-being, but to end poverty, ensure quality education, achieve gender equality, provide decent work and economic growth, reduce inequalities, ensure just, peaceful and inclusive societies and to build and foster partnerships, while reaching the goals and targets included throughout the 2030 Agenda for Sustainable Development are critical for the attainment of healthy lives and wellbeing for all at all ages;			
14. Recognize the impact of climate change and environmental degradation on the clean air, safe drinking water, sanitation, sufficient food and secure shelter needed to promote and protect people's health, and underline that resilient and people-centered health systems are necessary to protect all people and, in particular vulnerable communities and	16. Recognize the impact of climate change, extreme weather events and other environmental determinants of health including degradation on the clean air, safe drinking water, sanitation, safe and sufficient food and secure shelter needed to promote human security and protect people's health and the need to foster health in climate change adaptation efforts and	15. Recognize the adverse impact of climate change, natural disasters, extreme weather events as well as other environmental determinants of health, such as clean air, safe drinking water, sanitation, safe, sufficient and nutritious food and secure shelter, on health and in this regard underscore the need to foster health in climate change adaptation efforts, underlining	15. Recognize the consequence of the adverse impact of climate change, natural disasters, extreme weather events as well as other environmental determinants of health, such as clean air, safe drinking water, sanitation, safe, sufficient and nutritious food and secure shelter, for health and in this regard underscore the need to foster health in climate change adaptation

<p>individuals, including those living in small island developing states;</p>	<p>underline that resilient and people-centered health systems are necessary to protect all people, in particular those who are vulnerable or in vulnerable situations, including those living in small island developing states;</p>	<p>that resilient and people-centered health systems are necessary to protect the health of all people and promote human security, in particular those who are vulnerable or in vulnerable situations, particularly those living in small island developing states</p>	<p>efforts, underlining that resilient and people-centered health systems are necessary to protect the health of all people, in particular those who are vulnerable or in vulnerable situations, particularly those living in small island developing states;</p>
<p>15. Recognize that adequate nutrition and sustainable, resilient and diverse nutrition-sensitive food systems are vital for healthier populations</p>	<p>17. Recognize that food security, adequate nutrition and healthy diets and sustainable, resilient and diverse nutrition-sensitive food systems are essential drivers of sustainable development and central elements for healthier populations;</p>	<p>16. Recognize that food security and food safety, adequate nutrition and sustainable, resilient and diverse nutrition-sensitive food systems are important elements for healthier populations</p>	<p>16. Recognize that food security and food safety, adequate nutrition and sustainable, resilient and diverse nutrition-sensitive food systems are important elements for healthier populations;</p>
<p>16. Note with concern that 1.6 billion people live in fragile settings where armed conflicts, protracted humanitarian crises, and health and other emergencies challenge national systems capacities and the provision of essential health services, and stress the urgent need for a more coherent and inclusive approach to strengthen health systems and health security</p>	<p>18. Note with concern that 1.6 billion people live in settings where armed conflicts, protracted humanitarian crises, and health and other emergencies challenge national systems capacities and the provision of essential health services, and stress the urgent need for a more coherent and inclusive approach to strengthen health systems and health security</p>	<p>17. Note that the increasing number of complex emergencies is hindering the achievement of universal health coverage, and that coherent and inclusive approaches to safeguard universal health coverage in emergencies are essential, including through international cooperation, ensuring the continuum and provision of essential health services and public health functions, in line with humanitarian principles; (agreed language from WHA72.4 PP25)</p>	<p>17. Note that the increasing number of complex emergencies is hindering the achievement of universal health coverage, and that coherent and inclusive approaches to safeguard universal health coverage in emergencies are essential, including through international cooperation, ensuring the continuum and provision of essential health services and public health functions, in line with humanitarian principles;</p>
<p>17. Recognize the need for a strong global partnership for Sustainable Development Goals, which engages all stakeholders, including the private sector, civil society, the United Nations system and other actors, to mobilize all necessary financial and non-financial means to collaboratively support the efforts of Member States to achieve health-related Sustainable Development Goals, including universal health coverage and addressing the health needs of those who are vulnerable or in vulnerable</p>	<p>19. Recognize the need for a strong global, regional and national partnership for Sustainable Development Goals, which engages all stakeholders, including the United Nations system, the private sector, civil society, academia, international financial institutions and other actors, to mobilize all necessary financial and non-financial means to collaboratively support the efforts of Member States to achieve health-related Sustainable Development Goals, including universal health coverage and</p>	<p>18. Recognize the need for a strong global, regional and national partnerships for Sustainable Development Goals, which engages all relevant stakeholders to collaboratively support the efforts of Member States to achieve health-related Sustainable Development Goals, including universal health coverage</p>	<p>18. Recognize the need for a strong global, regional and national partnerships for Sustainable Development Goals, which engages all relevant stakeholders to collaboratively support the efforts of Member States to achieve health-related Sustainable Development Goals, including universal health coverage;</p>

situations	addressing the health needs of those who are vulnerable or in vulnerable situations;		
<p>18. Recognize that the world spends 7.5 trillion USD on health, which is close to 10% of global GDP, but that the allocation of public and external funds on health worldwide is disproportionate, considering that:</p> <p>a. one third of global health expenditure is covered by out of pocket expenses while less than 40% of funding on primary health care is from public source in low- and middle-income countries;</p> <p>b. external funding represents less than 1% of global health expenditure and is disproportionately spent given existing health needs, inter alia, the growing burden of NCDs;</p> <p>c. many low-income countries still rely on aid, which accounts for about 30% of national health spending;</p>	<p>20. Recognize that the world spends 7.5 trillion USD on health, which is close to 10% of global GDP, but that the allocation of public and external funds on health worldwide is disproportionate, considering that:</p> <p>a. one third of global health expenditure is covered by out of pocket expenses while less than 40% of funding on primary health care is from public source in low- and middle-income countries;</p> <p>b. external funding represents less than 1% of global health expenditure and is disproportionately spent given existing health needs, inter alia, the growing burden of NCDs;</p> <p>c. low-income countries have increased their reliance on aid, which accounts for about 30% of national health spending;</p>	<p>Recognize that the world spends 7.5 trillion USD on health, which is close to 10% of global GDP, but that the allocation of public and external funds on health worldwide is disproportionate, considering that:</p> <p>a. on average, one third of national health expenditure is covered by out of pocket expenses, while less than 40% of funding on primary health care is from public source in low- and middle-income countries;</p> <p>b. external funding represents less than 1% of global health expenditure and there are important funding gaps given existing health needs, whereas low-income countries still rely on aid, which accounts for about 30% of national health spending</p>	<p>19. Recognize that the world spends 7.5 trillion USD on health, which is close to 10% of global GDP, but that the allocation of public and external funds on health worldwide is disproportionate, considering that:</p> <p>a. on average, one third of national health expenditure is covered by out of pocket expenses, while less than 40% of funding on primary health care is from public source in low- and middle-income countries;</p> <p>b. external funding represents less than 1% of global health expenditure and there are important funding gaps given existing health needs, whereas low-income countries still rely on aid, which accounts for about 30% of national health spending;</p>
<p>19. Recognize that people's engagement and the inclusion of all stakeholders is a core component of health system governance to fully empower them in improving and protecting their own health, contributing to the achievement of universal health coverage</p>	<p>21. Recognize that people's engagement and the inclusion of all stakeholders is one of the core components of health system governance in the achievement of universal health coverage</p>	<p>20. Recognize that people's engagement, particularly of women and girls, families and communities, and the inclusion of all relevant stakeholders is one of the core components of health system governance, to fully empower all people in improving and protecting their own health, giving due regard to addressing and managing conflicts of interest and undue influence, contributing to the achievement of universal health coverage;</p>	<p>20. Recognize that people's engagement, particularly of women and girls, families and communities, and the inclusion of all relevant stakeholders is one of the core components of health system governance, to fully empower all people in improving and protecting their own health, giving due regard to addressing and managing conflicts of interest and undue influence, contributing to the achievement of universal health coverage for all, with a focus on health outcomes;</p>
20. Recognize the importance of	22. Recognize the fundamental	21. Recognize the vital importance of	21. Recognize the vital importance of

<p>strengthening regulatory and legislative frameworks conducive for the achievement of UHC and the role of legislative bodies in this regard</p>	<p>importance of strengthening and implementing legislative and regulatory frameworks for the achievement of UHC and the role of legislative and regulatory bodies in this regard</p>	<p>strengthening, implementing and monitoring legislative and regulatory frameworks and institutions for the achievement of UHC, noting the negative effect of corruption on the ability of States to mobilize resources for universal health coverage</p>	<p>strengthening legislative and regulatory frameworks and institutions for the achievement of universal health coverage;</p> <p>22. Recognize that fighting corruption at all levels and in all its forms is a priority and that corruption is a serious barrier to effective resource mobilization and allocation and diverts resources away from activities that are vital for poverty eradication and sustainable development, which may undermine efforts to achieve universal health coverage;</p>
<p>21. Express concern of the global shortfall of 18 million health workers, primarily in low- and middle-income countries, and recognize the need to build a competent health workforce who are the main drivers of strong and resilient health systems, and further recognize that increased investment in a more effective and socially responsible health workforce can unleash significant socio-economic gains and contribute to the eradication of poverty and reduction of inequality</p>	<p>23. Express concern of the global shortfall of 18 million health workers, primarily in low- and middle-income countries, and recognize the need to build and retain a competent health workforce, including community health workers, who are the main drivers of strong and resilient health systems, and further recognize that increased investment in a more effective and socially responsible health workforce can unleash significant socio-economic gains and contribute to the eradication of poverty in all its forms and dimensions, empowerment of women and reduction of inequality</p>	<p>22. Express concern of the global shortfall of 18 million health workers, primarily in low- and middle-income countries, and recognize the need to train, build and retain a skilled health workforce, including nurses, midwives and community health workers, who are an important element of strong and resilient health systems, and further recognize that increased investment in a more effective and socially accountable health workforce can unleash significant socio-economic gains and contribute to the eradication of poverty in all its forms and dimensions, empowerment of all women and girls and reduction of inequality</p>	<p>23. Express concern of the global shortfall of 18 million health workers, primarily in low- and middle-income countries, and recognize the need to train, build and retain a skilled health workforce, including nurses, midwives and community health workers, who are an important element of strong and resilient health systems, and further recognize that increased investment in a more effective and socially accountable health workforce can unleash significant socio-economic gains and contribute to the eradication of poverty in all its forms and dimensions, empowerment of all women and girls and reduction of inequality;</p>
<p>We therefore commit to scale up our efforts and further implement the following actions:</p>	<p>We therefore commit to scale up our efforts and further implement the following actions:</p>	<p>We therefore commit to scale up our efforts and further implement the following actions:</p>	<p>We therefore commit to scale up our efforts and further implement the following actions:</p>
<p><b>Accelerate high impact interventions</b></p>	<p><b>Accelerate high impact interventions</b></p>	<p>(no sub-titles)</p>	
	<p>24. Accelerate efforts towards the achievement of universal health coverage by 2030, including through financial risk protection, ensuring access to quality essential health</p>	<p>23. Accelerate efforts towards the achievement of universal health coverage by 2030 to ensure healthy lives and well-being for all at all ages,</p>	<p>24. Accelerate efforts towards the achievement of universal health coverage by 2030 to ensure healthy lives and promote well-being for all throughout the life course,</p>

	<p>services and access to safe, effective, quality, and affordable essential medicines, vaccines, diagnostics, and technologies for all,</p>		
	<p>and in this regard reemphasize our resolve to:</p> <p>a. progressively cover one billion additional people with quality essential health services and quality, essential, affordable and effective medicines, vaccines, <b>diagnostics</b>, and technologies for all by 2023, and an additional two billion people by 2030;</p> <p>b. stop the rise of catastrophic <b>and impoverishing</b> out-of-pocket health <b>expenditure</b> by providing financial risk protection and reverse the trend, <b>with a view to eliminating the number of people pushed into poverty due to health related expenses</b> by 2030;</p>	<p>and in this regard reemphasize our resolve to:</p> <p>a. progressively cover one billion additional people with quality essential health services and <b>safe, effective, quality and affordable essential medicines and vaccines</b> by 2023, with a view to cover all people by 2030;</p> <p>b. stop the rise and reverse the trend of catastrophic out-of-pocket health expenditure by providing <b>measures to assure</b> financial risk protection and eliminate impoverishment due to health-related expenses by 2030, <b>with special emphasis on the poor, vulnerable, and marginalized segments of the population</b>;</p>	<p>and in this regard reemphasize our resolve to:</p> <p>a. progressively cover one billion additional people by 2023 with quality essential health services and quality, safe, effective, affordable and essential medicines, vaccines, diagnostics and health technologies, with a view to cover all people by 2030;</p> <p>b. stop the rise and reverse the trend of catastrophic out-of-pocket health expenditure by providing measures to assure financial risk protection and eliminate impoverishment due to health-related expenses by 2030, with special emphasis on the poor as well as those who are vulnerable or in vulnerable situations;</p>
<p>22. Implement most effective, high impact, people-centred, gender-responsive and evidence-based interventions to meet the health needs of all, and in particular the most vulnerable, ensuring universal access to integrated quality health services for the prevention, treatment and control of communicable and non-communicable diseases and conditions, including neglected and rare diseases and disabilities;</p>	<p>25. Implement most effective, high impact, people-centred, gender-responsive and evidence-based interventions to meet the health needs of all, and in particular <b>those who are vulnerable or in vulnerable situations</b>, ensuring universal access to integrated quality health services for the prevention, <b>diagnosis, treatment and care as well as</b> control of communicable and non-communicable diseases and conditions, including neglected and rare diseases and disabilities;</p>	<p>24. Implement most effective, high impact, quality-assured, people-centred, gender- and disability-responsive and evidence-based interventions to meet the health needs of all throughout the life course, and in particular those who are vulnerable or in vulnerable situations, ensuring universal access to nationally determined sets of integrated quality and essential health services for the prevention, diagnosis, treatment and care in a timely manner to address communicable and non-communicable diseases, mental disorders and other mental health conditions as well as neurological disorders, <b>sexual and reproductive</b></p>	<p>25. Implement most effective, high impact, quality-assured, people-centred, gender- and disability-responsive, and evidence-based interventions to meet the health needs of all throughout the life course, and in particular those who are vulnerable or in vulnerable situations, ensuring universal access to nationally determined sets of integrated quality health services at all levels of care for the prevention, diagnosis, treatment and care in a timely manner;</p>

		health, disabilities, eye health conditions, neglected tropical diseases and rare diseases	
23. Implement high impact policy measures to comprehensively address social, economic, commercial, and environmental determinants of health by working across all sectors;	26. Implement high impact policy measures to protect people's health and comprehensively address social, economic, commercial, and environmental determinants of health by working across all sectors through a health-in-all-policies approach	25. Implement high impact policies to protect people's health and comprehensively address social, economic and environmental and other determinants of health by working across all sectors through a whole-of-government and health-in-all-policies approach	26. Implement high impact policies to protect people's health and comprehensively address social, economic and environmental and other determinants of health by working across all sectors through a whole-of-government and health-in-all-policies approach;
<b>Healthy lives</b>	<b>Healthy lives</b>	(no sub-titles)	
25. Prioritize health promotion and disease prevention, through good governance, education and health literacy, as well as safe and healthy cities, enabling people to have increased knowledge and control over their health decisions;	28. Prioritize health promotion and disease prevention, through good governance of health systems, education and health literacy, as well as safe, healthy and resilient cities, enabling people to have increased knowledge to take informed health decisions;	26. Prioritize health promotion and disease prevention, through public health policies, good governance of health systems, education, health communication and health literacy, as well as safe, healthy and resilient cities, enabling people, especially adolescents, to have increased knowledge to take informed health decisions and improve health-seeking behaviour	27. Prioritize health promotion and disease prevention, through public health policies, good governance of health systems, education, health communication and health literacy, as well as safe, healthy and resilient cities, enabling people, throughout their life course, including, among others, adolescents, to have increased knowledge to take informed health decisions and improve health-seeking behaviour;
24. Take measures to promote active and healthy lifestyle, including physical activity in the entire population and for all ages, and ensure a world free from malnutrition in all its forms, where all people have access to adequate food and enjoy diversified, balanced and healthy diets throughout their lives, with special emphasis on breastfeeding and protection of children in their first 1,000 days;	29. Take measures to promote active and healthy lifestyle, including physical activity for the benefit of all people throughout their life course, and ensure a world free from malnutrition in all its forms, where all people have access to safe water and sanitation, safe and adequate foods and enjoy diversified, balanced, nutritious and healthy diets throughout their lives, with special emphasis on breastfeeding from a child's birth up to two years of age and the protection of children in their first 1,000 days;	27. Take multi-sectoral action to promote active and healthy lifestyle, including physical activity for the benefit of all people throughout their life course, and ensure a world free from malnutrition in all its forms, where all people are empowered to take responsibility for their own health and have access to safe drinking water and sanitation, safe, sufficient and nutritious food and enjoy diversified, balanced and healthy diets throughout their life course, with special emphasis to the nutrition needs of women and girls, especially during pregnancy and	28. Take multi-sectoral action to promote active and healthy lifestyle, including physical activity for the benefit of all people throughout their life course, and ensure a world free from malnutrition in all its forms, where all people are empowered to take responsibility for their own health supported by public regulatory measures and have access to safe drinking water and sanitation, safe, sufficient and nutritious food and enjoy diversified, balanced and healthy diets throughout their life course, with special emphasis to the nutrition needs of pregnant and

		lactation, and of infants and young children, especially during the first 1,000 days, including through exclusive breast feeding during the first six months, with continued breastfeeding to two years of age or beyond, with appropriate complementary feeding	lactating women, women of reproductive age and adolescent girls, and of infants and young children, especially during the first 1,000 days including, as appropriate, through exclusive breastfeeding during the first six months, with continued breastfeeding to two years of age or beyond, with appropriate complementary feeding;
		28. Take measures to reduce maternal, neonatal, infant and child mortality and morbidity and increase access to quality health care for newborns, infants and children as well as all women and girls before, during and after pregnancy and childbirth	29. Take measures to reduce maternal, neonatal, infant and child mortality and morbidity and increase access to quality health-care services for newborns, infants, children as well as all women before, during and after pregnancy and childbirth, including in the area of sexual and reproductive health;
	29. Scale up efforts to respond to the needs of the rapidly ageing population, taking into account national contexts, including the need for preventive, curative, palliative and specialized care as well as the sustainable provision of long-term care, to ensure the quality of life	29. Scale up efforts to promote healthy and active ageing, maintain and improve quality of life of older persons and to respond to the needs of the rapidly ageing population, especially the need for promotive, preventive, curative, rehabilitative and palliative care as well as specialized care and the sustainable provision of long-term care, taking into account national contexts and priorities	30. Scale up efforts to promote healthy and active ageing, maintain and improve quality of life of older persons and to respond to the needs of the rapidly ageing population, especially the need for promotive, preventive, curative, rehabilitative and palliative care as well as specialized care and the sustainable provision of long-term care, taking into account national contexts and priorities;
26. Strengthen surveillance systems and routine vaccination capacities to prevent spread and reemergence of communicable and non-communicable diseases;	30. Strengthen health-related surveillance and data systems and routine immunization and vaccination capacities to prevent outbreaks as well as the spread and reemergence of communicable and non-communicable diseases	30. Strengthen public health surveillance and data systems, improve routine immunization and vaccination capacities, provide evidence-based information on countering vaccine hesitancy, and expand vaccine coverage to prevent outbreaks as well as the spread and re-emergence of communicable and non-communicable diseases, including immuno-preventable diseases already eliminated as well as for ongoing	31. Strengthen public health surveillance and data systems, improve routine immunization and vaccination capacities, including by providing evidence-based information on countering vaccine hesitancy, and expand vaccine coverage to prevent outbreaks as well as the spread and re-emergence of communicable and non-communicable diseases, including for vaccine-preventable diseases already eliminated as well as for

		eradication efforts, including for poliomyelitis	ongoing eradication efforts, such as for poliomyelitis;
			32. Strengthen efforts to address communicable diseases, including HIV/AIDS, tuberculosis, malaria and hepatitis as part of universal health coverage and to ensure that the fragile gains are sustained and expanded by advancing comprehensive approaches and integrated service delivery and ensuring that no one is left behind;
			33. Further strengthen efforts to address non-communicable diseases, including cardiovascular diseases, cancer, chronic respiratory diseases and diabetes, as part of universal health coverage;
			34. Also strengthen efforts to address eye health conditions and oral health, as well as rare diseases and neglected tropical diseases, as part of universal health coverage;
27. Scale up efforts to address the growing burden of deaths and injuries related to road traffic, drowning, and mental health, and to take measures to promote and improve mental health services and care;	31. Scale up efforts to strengthen trauma and emergency-care systems as an essential part of integrated health-care delivery, including through intersectoral coordination, to address the growing burden of deaths and injuries including those related to road traffic accidents and drowning;	31. Scale up efforts to address the growing burden of injuries and deaths, including those related to road traffic accidents and drowning, through preventive measures as well as strengthening trauma and emergency-care systems, including essential surgery capacities as an essential part of integrated health-care delivery	35. Scale up efforts to address the growing burden of injuries and deaths, including those related to road traffic accidents and drowning, through preventive measures as well as strengthening trauma and emergency-care systems, including essential surgery capacities as an essential part of integrated health-care delivery;
...and mental health, and to take measures to promote and improve mental health services and care;	32. Implement measures to promote and improve mental health and well-being, including by developing comprehensive services and treatment for people living with mental disorders and other mental health conditions, to address their	32. Implement measures to promote and improve mental health and well-being as an essential component of UHC, including by scaling up comprehensive and integrated services for the prevention, including suicide prevention, as well as treatment for people with mental	36. Implement measures to promote and improve mental health and well-being as an essential component of universal health coverage, including by scaling up comprehensive and integrated services for the prevention, including suicide prevention, as well as treatment for people with mental

	health needs	disorders and other mental health conditions as well as neurological disorders, providing psychosocial support, promoting well-being, strengthening the prevention and treatment of substance abuse, addressing social determinants and other health needs, and fully respecting their human rights, noting that mental disorders and other mental health conditions as well as neurological disorders are an important cause of morbidity and contribute to the NCDs burden worldwide	disorders and other mental health conditions as well as neurological disorders, providing psychosocial support, promoting well-being, strengthening the prevention and treatment of substance abuse, addressing social determinants and other health needs, and fully respecting their human rights, noting that mental disorders and other mental health conditions as well as neurological disorders are an important cause of morbidity and contribute to the non-communicable diseases burden worldwide;
28. Increase access to health information and affordable health services for persons with disabilities and scale up efforts for their empowerment and inclusion, noting that more than one billion persons with disabilities face physical, behavioral and financial barriers;	33. Increase access to health information and affordable health services for persons with disabilities and scale up efforts for their empowerment and inclusion, noting that more than one billion persons with disabilities face physical, behavioral, social, structural, and financial barriers;	33. Increase access to health services for all persons with disabilities, remove physical, attitudinal, social, structural, and financial barriers, provide quality standard of care and scale up efforts for their empowerment and inclusion, noting that persons with some form of disability, representing 15% of the global population, continue to experience unmet health needs	37. Increase access to health services for all persons with disabilities, remove physical, attitudinal, social, structural, and financial barriers, provide quality standard of care and scale up efforts for their empowerment and inclusion, noting that persons with disabilities, representing 15% of the global population, continue to experience unmet health needs;
29. Scale up efforts to provide healthier and safer workplaces and access to occupational health services, and to ensure health coverage for all workers, noting that more than 2 million people die every year from preventable occupational diseases and injuries;	34. Scale up efforts to provide healthier and safer workplaces, access to occupational health services, and health coverage for all workers, noting that more than 2 million people die every year from preventable occupational diseases and injuries	34. Scale up efforts to promote healthier and safer workplaces and improve access to occupational health services, noting that more than 2 million people die every year from preventable occupational diseases and injuries	38. Scale up efforts to promote healthier and safer workplaces and improve access to occupational health services, noting that more than 2 million people die every year from preventable occupational diseases and injuries;
<b>Health Financing</b>	<b>Health Financing</b>	(no sub-titles)	
30. Pursue health financing policies to eliminate financial barriers to access and to respond to unmet needs for health and related social care services, reduce out of pocket payments and ensure financial protection for all,	35. Pursue health financing policies to eliminate financial barriers to access to health systems and to respond to unmet needs for health and related social care services, reduce out of pocket expenditures leading to	35. Pursue efficient health financing policies, including through close collaboration among relevant authorities including finance and health authorities, to eliminate financial barriers to access to quality	39. Pursue efficient health financing policies, including through close collaboration among relevant authorities, including finance and health authorities, to respond to unmet needs and to eliminate

<p>especially for the poor and the most vulnerable;</p>	<p>financial hardship, and ensure financial protection for all, especially for the poor and those who are vulnerable or in vulnerable situations</p>	<p>health services and to respond to unmet needs for essential, safe, affordable, effective and quality health services, medicines, vaccines, diagnostics and health technologies, reduce out of pocket expenditures leading to financial hardship, through better allocation of resources for health with adequate financing for primary health care, and ensure financial risk protection for all, especially for the poor and those who are vulnerable or in vulnerable situations</p>	<p>financial barriers to access to quality, safe, effective, affordable and essential health services, medicines, vaccines, diagnostics and health technologies, reduce out of pocket expenditures leading to financial hardship and ensure financial risk protection for all throughout the life course, especially for the poor and those who are vulnerable or in vulnerable situations, through better allocation and use of resources, with adequate financing for primary health care, in accordance with national contexts and priorities;</p>
<p>31. Scale up efforts to set and reach nationally appropriate spending targets for investments in health consistent with national development strategies and in accordance with the Addis Ababa Action Agenda and transition towards sustainable financing through domestic public resource mobilization;</p>	<p>36. Scale up efforts to ensure there are nationally appropriate spending targets for quality investments in public health services consistent with national sustainable development strategies, in accordance with the Addis Ababa Action Agenda, and transition towards sustainable financing through domestic public resource mobilization</p>	<p>36. Scale up efforts to ensure there are nationally appropriate spending targets for quality investments in public health services, consistent with national sustainable development strategies, in accordance with the Addis Ababa Action Agenda, and transition towards sustainable financing through domestic public resource mobilization</p>	<p>40. Scale up efforts to ensure there are nationally appropriate spending targets for quality investments in public health services, consistent with national sustainable development strategies, in accordance with the Addis Ababa Action Agenda, and transition towards sustainable financing through domestic public resource mobilization;</p>
<p>32. Increase domestic public spending and expand pooling of resources allocated to health and maximize the efficiency and equity of health spending, to deliver cost-effective essential health services, improve service coverage, reduce impoverishment, and ensure financial risk protection;</p>	<p>37. Increase domestic public spending, where necessary, encourage private spending, as appropriate, and expand pooling of resources allocated to health and maximize the efficiency and equity of health spending, to deliver cost-effective, essential, and quality health services, improve service coverage, reduce impoverishment, and ensure financial risk protection</p>	<p>37. Ensure sufficient domestic public spending on health, where appropriate, expand pooling of resources allocated to health, maximize efficiency and ensure equitable allocation of health spending, to deliver cost-effective, essential, affordable, timely and quality health services, improve service coverage, reduce impoverishment from health expenditure and ensure financial risk protection</p>	<p>41. Ensure sufficient domestic public spending on health, where appropriate, expand pooling of resources allocated to health, maximize efficiency and ensure equitable allocation of health spending, to deliver cost-effective, essential, affordable, timely and quality health services, improve service coverage, reduce impoverishment from health expenditure and ensure financial risk protection, while noting the role of private sector investment, as appropriate;</p>
<p>33. Expand services and increase investment on health and other</p>	<p>38. Expand quality essential health services and mobilize investment from</p>	<p>38. Expand quality essential health services, strengthen health systems</p>	<p>42. Expand quality essential health services, strengthen health systems</p>

<p>health-related SDGs in low- and middle-income countries by an additional 3.9 trillion USD in total by 2030, which could prevent 97 million premature deaths globally and add between 3.1 and 8.4 years of life expectancy in these countries;</p>	<p>multiple sources on health and other health-related SDGs in developing countries, noting that an additional 3.9 trillion USD in total by 2030 could prevent 97 million premature deaths globally and add between 3.1 and 8.4 years of life expectancy in low- and middle-income countries</p>	<p>and mobilize resources in health and other health-related SDGs in developing countries, noting that, according to WHO estimates, an additional 3.9 trillion USD in total by 2030 could prevent 97 million premature deaths and add between 3.1 to 8.4 years of life expectancy in low- and middle-income countries</p>	<p>and mobilize resources in health and other health-related Sustainable Development Goals in developing countries, noting that, according to WHO estimates, an additional 3.9 trillion USD in total by 2030 could prevent 97 million premature deaths and add between 3.1 to 8.4 years of life expectancy in low- and middle-income countries;</p>
<p>34. Increase budgetary allocations on health based on national health system architecture, broaden fiscal space, and prioritize spending within the health sector, with the focus on universal health coverage, and in this regard encourage countries, especially those that have not yet achieved the minimum target of 5% of GDP for public spending on health, to increase public spending at an additional 1% to 2% of GDP for expanding access for all to nationally determined sets of essential health services, with a view to achieving such target or higher by 2030;</p>	<p>39. Optimize budgetary allocations on health based on national health system architecture, broaden fiscal space, and prioritize spending within the health sector, with the focus on universal health coverage, and in this regard, while ensuring fiscal sustainability, encourage countries to:</p> <ol style="list-style-type: none"> <li>a. review whether public health expenditure is adequate to ensure access to essential health services;</li> <li>b. increase public spending on health, if necessary, by an additional 1% to 2% of GDP for UHC, especially for those countries that have not yet achieved the minimum target of 5% of GDP for public spending on health, with a view to achieving such target or higher by 2030;</li> </ol>	<p>39. Optimize budgetary allocations on health, in accordance with national contexts and priorities, sufficiently broaden fiscal space, and prioritize health in public spending, with the focus on universal health coverage, while ensuring the fiscal sustainability, and in this regard encourage countries to review whether public health expenditure is adequate to ensure sufficiency and efficiency of public spending on health and to increase public spending by an additional 1% of GDP or more, if necessary, with a special emphasis on primary health care, as appropriate</p>	<p>43. Optimize budgetary allocations on health, sufficiently broaden fiscal space, and prioritize health in public spending, with the focus on universal health coverage, while ensuring the fiscal sustainability, and in this regard encourage countries to review whether public health expenditure is adequate to ensure sufficiency and efficiency of public spending on health and, based on such review, to adequately increase public spending, as necessary, with a special emphasis on primary health care, where appropriate, in accordance with national contexts and priorities, while noting the WHO's recommended target of an additional 1% of GDP or more;</p>
<p>35. Recognize the importance of progressive tax systems and note that the price and tax measures on harmful products, in particular tobacco and alcohol, are an effective means to reduce consumption and related health-care costs and represent a potential revenue stream for financing for development in many countries;</p>	<p>40. Recognize the importance of progressive tax systems, consistent with national policies and international obligations, and note that the price and tax measures on products that have harmful impact on health, such as tobacco and alcohol, are an effective means to reduce consumption and related health-care costs and represent a potential revenue stream for financing for development in many countries</p>	<p>40. Promote and implement policy, legislative and regulatory measures, including fiscal measures as appropriate, aiming at minimizing the impact of the main risk factors for non-communicable diseases, in particular tobacco and the harmful use of alcohol, noting that price and tax measures can be an effective means to reduce consumption and related health-care costs and represent a potential revenue stream for financing</p>	<p>44. Promote and implement policy, legislative and regulatory measures, including fiscal measures as appropriate, aiming at minimizing the impact of the main risk factors for non-communicable diseases, and promote healthy diets and lifestyles, consistent with national policies, noting that price and tax measures can be an effective means to reduce consumption and related health-care costs and represent a potential</p>

		for development in many countries; (based on para 21 of NCDs Political Declaration A/RES/73/2 and Addis Ababa Action Agenda para 32 A/RES/69/313)	revenue stream for financing for development in many countries;
36. Explore ways to provide adequate, predictable and sustainable finances to support national efforts in achieving UHC, through domestic, bilateral, regional and multilateral channels, including traditional and innovative financing mechanisms;	41. Explore ways to provide adequate, predictable, evidence-based and sustainable finances, while improving their effectiveness, to support national efforts in achieving UHC, through domestic, bilateral, regional and multilateral channels, including traditional and innovative financing mechanisms, as well as partnerships with the private sector and other relevant stakeholders	41. Provide adequate, predictable, evidence-based and sustainable finances, while improving their effectiveness, to support national efforts in achieving UHC, through domestic, bilateral, regional and multilateral channels, including international cooperation, financial and technical assistance, traditional and innovative financing mechanisms such as the Global Fund to Fight AIDS, TB and Malaria, GAVI, the Vaccine Alliance and the Global Financing Facility, within their mandate, as well as partnerships with the private sector and other relevant stakeholders, recognizing that health financing is a shared responsibility requiring global solidarity and collective effort	45. Provide adequate, predictable, evidence-based and sustainable finances, while improving their effectiveness, to support national efforts in achieving universal health coverage, in accordance with national contexts and priorities, through domestic, bilateral, regional and multilateral channels, including international cooperation, financial and technical assistance, considering the use of traditional and innovative financing mechanisms such as, inter alia, the Global Fund to Fight AIDS, Tuberculosis and Malaria, GAVI, the Vaccine Alliance, the Global Financing Facility and the United Nations Trust Fund for Human Security, within their respective mandates, as well as partnerships with the private sector and other relevant stakeholders, recognizing that health financing requires global solidarity and collective effort;
<b>Strengthen PHC for UHC</b>	<b>Strengthen PHC for UHC</b>	(no sub-titles)	
37. Expand the delivery of and prioritize investments in primary health care as the cornerstone of a sustainable health system and the foundation for achieving universal health coverage, while strengthening an integrated and effective referral system for secondary and tertiary care;	42. Expand the delivery of and prioritize investments in primary health care as the cornerstone of a sustainable and integrated health system and the foundation for achieving universal health coverage, while strengthening integrated health services networks and effective referral system between primary and other levels of care, and recognize	42. Expand the delivery of and prioritize primary health care as a cornerstone of a sustainable people-centred, community-based and integrated health systems and the foundation for achieving universal health coverage, while strengthening effective referral system between primary and other levels of care, recognizing that community-based	46. Expand the delivery of and prioritize primary health care as a cornerstone of a sustainable people-centred, community-based and integrated health systems and the foundation for achieving universal health coverage, while strengthening effective referral system between primary and other levels of care, recognizing that community-based

	that community-based services constitute a strong platform for primary health care upon which UHC needs to be built	services constitute a strong platform for primary health care	services constitute a strong platform for primary health care;
<b>Quality and affordable access to medicines, vaccines, diagnostics and health technologies</b>	<b>Quality and affordable access to medicines, vaccines, diagnostics and health technologies</b>	(no sub-titles)	
		43. Explore ways to integrate, as appropriate, safe and evidence-based traditional and complementary medicine services within national and/or subnational health systems, particularly at the level of primary health care, according to national context and priorities; (agreed language from OP1(10) WHA72.4)	47. Explore ways to integrate, as appropriate, safe and evidence-based traditional and complementary medicine services within national and/or subnational health systems, particularly at the level of primary health care, according to national context and priorities;
38. Scale up efforts to enhance health systems performance by preventing adverse events in particular and improving patient safety and health care quality in general, noting that UHC can effectively deliver if implemented in high-quality health systems that ensure timely delivery and continuity of care, adaptation to changing needs and public trust;	43. Scale up efforts to build and strengthen quality health systems and enhance their performance by improving patient safety and healthcare quality and preventing adverse events, noting that UHC can effectively deliver if implemented in high-quality health systems that ensure timely delivery and continuity of care, adaptation to changing needs and public trust	44. Scale up efforts to build and strengthen quality health systems and patient safety, built on a foundation of strong primary health care and coherent national quality and safety strategy, noting that universal health coverage can only be achieved if the services are safe, effective, and people-centred, and are delivered in a timely, equitable, efficient, and integrated manner	48. Scale up efforts to build and strengthen quality and people-centred health systems and enhance their performance by improving patient safety, built on a foundation of strong primary health care and coherent national policies and strategies for quality and safe health services, noting that universal health coverage can only be achieved if the services and medical products are safe and effective and are delivered in a timely, equitable, efficient, and integrated manner;
39. Promote increased access to affordable, safe, effective, and quality essential medicines, vaccines, diagnostics and health technologies that ensure quality services and prevent harms to patients and health workers;	44. Promote increased access to affordable, safe, effective, and quality essential medicines, vaccines, diagnostics and health technologies that ensure quality services and their timely delivery and prevent harms to patients and health workers	45. Promote equitable distribution of and increased access to essential, safe, affordable, effective and quality medicines, including generics, vaccines, diagnostics and health technologies that ensure quality services and their timely delivery and prevent harms to patients and health workers	49. Promote equitable distribution of and increased access to quality, safe, effective, affordable and essential medicines, including generics, vaccines, diagnostics and health technologies to ensure affordable quality health services and their timely delivery;
40. Improve availability, affordability	45. Improve availability, affordability	46. Improve availability, affordability	50. Improve availability, affordability

<p>and efficiency of essential health products by increasing transparency in pricing of medicines and health technologies through improved regulations and building a stronger partnership with industries to address the global concern on high prices of essential health products;</p>	<p>and efficiency of essential health products by increasing transparency in pricing of medicines, vaccines, diagnostics, medical devices, health products and other technologies as well as cost of research and development, through improved regulations and building a stronger partnership with industries to address the global concern on high prices of essential health products</p>	<p>and efficiency of health products, in accordance with national and regional legal frameworks and contexts, by increasing transparency of prices and cost of medicines, vaccines, medical devices, diagnostics, assistive products, cell- and gene-based therapies, and other health technologies across the value chain, including through improved regulations and building constructive engagement and a stronger partnership with relevant stakeholders, including industries, the private sector and civil society, to address the global concern on high prices of essential health products and the relationship between research and development costs to the price and volume of sale; (based on WHA72.8 res)</p>	<p>and efficiency of health products by increasing transparency of prices of medicines, vaccines, medical devices, diagnostics, assistive products, cell- and gene-based therapies, and other health technologies across the value chain, including through improved regulations and building constructive engagement and a stronger partnership with relevant stakeholders, including industries, private sector and civil society, in accordance with national and regional legal frameworks and contexts, to address the global concern on high prices of some health products and in this regard encourage WHO to continue its efforts to biennially convene the Fair Pricing Forum with Member States and all relevant stakeholders to discuss the affordability and transparency of prices and costs relating to health products;</p>
<p>41. Promote increased access to affordable, safe, effective and quality medicines, including generics, vaccines, diagnostics and health technologies, reaffirming the World Trade Organization Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS Agreement) as amended, and also reaffirming the 2001 WTO Doha Declaration on the TRIPS Agreement and Public Health, which recognizes that intellectual property rights should be interpreted and implemented in a manner supportive of the right of Member States to protect public health and, in particular, to promote access to medicines for all, and notes the need</p>	<p>46. Promote increased access to affordable, safe, effective and quality medicines, including generics, vaccines, diagnostics and health technologies, reaffirming the World Trade Organization Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS Agreement) as amended, and also reaffirming the 2001 WTO Doha Declaration on the TRIPS Agreement and Public Health, which recognizes that intellectual property rights should be interpreted and implemented in a manner supportive of the right of Member States to protect public health and, in particular, to promote access to medicines for all, and notes the need</p>	<p>47. Promote increased access to affordable, safe, effective and quality medicines, including generics, vaccines, diagnostics and health technologies, reaffirming the World Trade Organization Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS Agreement) as amended, and also reaffirming the 2001 WTO Doha Declaration on the TRIPS Agreement and Public Health, which recognizes that intellectual property rights should be interpreted and implemented in a manner supportive of the right of Member States to protect public health and, in particular, to promote access to medicines for all, and notes the need</p>	<p>51. Promote increased access to affordable, safe, effective and quality medicines, including generics, vaccines, diagnostics and health technologies, reaffirming the World Trade Organization Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS Agreement) as amended, and also reaffirming the 2001 WTO Doha Declaration on the TRIPS Agreement and Public Health, which recognizes that intellectual property rights should be interpreted and implemented in a manner supportive of the right of Member States to protect public health and, in particular, to promote access to medicines for all, and notes the need</p>

<p>for appropriate incentives in the development of new health products;</p> <p>42. Explore and encourage a range of innovative incentives for health research and development, including a stronger partnership between the public and the private sectors, recognizing the need for increasing public health-driven research and development and appropriate incentives in the development of new health products, guided by the core principles of affordability, effectiveness, efficiency, equity and considered as a shared responsibility;</p>	<p>for appropriate incentives in the development of new health products</p> <p>47. Explore, encourage and promote a range of innovative incentives and financing mechanisms for health research and development, including a stronger and transparent partnership between the public and the private sectors, recognizing the need for increasing public health-driven research and development that is needs-driven and evidence-based, as well as appropriate incentives in the development of new health products and technologies, guided by the core principles of safety, affordability, effectiveness, efficiency, equity and considered as a shared responsibility</p>	<p>for appropriate incentives in the development of new health products</p> <p>48. Explore, encourage and promote a range of innovative incentives, including sharing and transfer of technologies on mutually agreed terms and financing mechanisms for health research and development, including a stronger and transparent partnership between the public and the private sectors as well as the academia, recognizing the need for increasing public health-driven research and development that is needs-driven and evidence-based, as well as appropriate incentives in the development of new health products and technologies, including for neglected tropical diseases, rare diseases, and potential areas where market failure exists, guided by the core principles of safety, affordability, effectiveness, efficiency, equity and considered as a shared responsibility</p>	<p>for appropriate incentives in the development of new health products;</p> <p>52. Explore, encourage and promote a range of innovative incentives and financing mechanisms for health research and development, including a stronger and transparent partnership between the public and the private sectors as well as the academia, recognizing the need for increasing public health-driven research and development that is needs-driven and evidence-based, guided by the core principles of safety, affordability, effectiveness, efficiency, equity and considered as a shared responsibility, as well as appropriate incentives in the development of new health products and technologies;</p>
			<p>53. Recognize the important role played by the private sector in research and development of innovative medicines, encourage the use, where appropriate, of alternative financing mechanisms for research and development as a driver of innovation for new medicines and new uses for medicines and continue to support voluntary initiatives and incentive mechanisms that separate the cost of investment in research and development from the price and volume of sales, facilitate equitable and affordable access to new tools and other results to be gained through research and development;</p>
<p><b>Governance and participatory</b></p>	<p><b>Governance and participatory</b></p>	<p>(no sub-titles)</p>	

approach	approach		
<p>43. Engage all relevant stakeholders, including the civil society, private sector, philanthropic foundations, academic institutions and community, as appropriate, through the establishment of participatory governance platforms and multi-stakeholder partnerships, in the development and implementation of health- and social-related policies and progress monitoring to the achievement of national objectives for UHC, while giving due regard to managing conflicts of interest;</p>	<p>48. Engage all relevant stakeholders, including the civil society, private sector, <b>service providers</b>, philanthropic foundations, academic institutions, <b>professional associations, patient representatives, faith-based and community organizations</b>, as appropriate, through the establishment of participatory <b>and transparent</b> governance platforms and multi-stakeholder partnerships, in the <b>evaluation</b>, development and implementation of health- and social-related policies and progress monitoring to the achievement of national objectives for UHC, <b>while giving due regard to managing conflicts of interest and undue influence</b></p>	<p>49. Engage all relevant stakeholders, including the civil society, private sector, academia and community organizations, as appropriate, through the establishment of participatory and transparent <b>multi-stakeholder platforms and partnerships, to provide input to the implementation and evaluation</b> of health- and social-related policies and progress monitoring to the achievement of national objectives for UHC, while giving due regard to <b>addressing and</b> managing conflicts of interest and undue influence</p>	<p>54. Engage all relevant stakeholders, including civil society, private sector and academia, as appropriate, through the establishment of participatory and transparent multi-stakeholder platforms and partnerships, to provide input to the development, implementation and evaluation of health- and social-related policies and reviewing progress for the achievement of national objectives for universal health coverage, while giving due regard to addressing and managing conflicts of interest and undue influence;</p>
<p>44. Strengthen the capacity of national government authorities to exercise strategic leadership and coordination role and strengthen the capacity of local authorities to engage with their respective communities;</p>	<p>49. Strengthen the capacity of national government authorities to exercise strategic leadership and coordination role, <b>focusing on inter-sectoral interventions</b>, as well as strengthen the capacity of local authorities, <b>and encourage them</b> to engage with their respective communities <b>and stakeholders</b></p>	<p>50. Strengthen the capacity of national government authorities to exercise strategic leadership and coordination role, focusing on inter-sectoral interventions, as well as strengthen the capacity of local authorities, and encourage them to engage with their respective communities and stakeholders; <b>[Ad ref]</b></p>	<p>55. Strengthen the capacity of national government authorities to exercise strategic leadership and coordination role, focusing on inter-sectoral interventions, as well as strengthen the capacity of local authorities, and encourage them to engage with their respective communities and stakeholders;</p>
<p>45. Build effective, accountable and inclusive institutions at all levels to ensure social justice, rule of law, and health for all;</p>	<p>50. Build effective, accountable and inclusive institutions at all levels to <b>end corruption and</b> ensure social justice, the rule of law and health for all</p>	<p>51. Build effective, accountable, transparent and inclusive institutions at all levels to end corruption and ensure social justice, the rule of law, good governance and health for all; <b>[Ad ref]</b></p>	<p>56. Build effective, accountable, transparent and inclusive institutions at all levels to end corruption and ensure social justice, the rule of law, good governance and health for all;</p>
<p>46. Strengthen regulatory and legislative frameworks for the achievement of UHC, including by enacting legislations that ensure access to health services, products and vaccines and assure the quality and</p>	<p>51. Strengthen <b>and harmonize legislative and regulatory</b> frameworks for the achievement of UHC, including by enacting legislations that ensure access to health services, products and vaccines, while assuring the quality</p>	<p>52. Strengthen legislative and regulatory frameworks <b>and promote policy coherence</b> for the achievement of UHC, including by enacting legislations and implementing policies that <b>provide greater</b> access to</p>	<p>57. Strengthen legislative and regulatory frameworks and promote policy coherence for the achievement of universal health coverage, including by enacting legislations and implementing policies that provide</p>

<p>safety of services, products and practice of health workers;</p>	<p>and safety of services, products and practice of health workers as well as financial risk protection</p>	<p>essential health services, products and vaccines, while fostering awareness about the risks of substandard and falsified medical products, and assuring the quality and safety of services, products and practice of health workers as well as financial risk protection</p>	<p>greater access to essential health services, products and vaccines, while also fostering awareness about the risks of substandard and falsified medical products, and assuring the quality and safety of services, products and practice of health workers as well as financial risk protection;</p>
	<p>52. Further strengthen responsible and ethical regulatory and legislative system that promotes inclusiveness of all stakeholders, including public and private providers, supports innovation, guards against conflicts of interest and undue influence, and responds to the evolving needs in a period of rapid technological change</p>	<p>53. Improve regulatory capacities and further strengthen responsible and ethical regulatory and legislative system that promotes inclusiveness of all stakeholders, including public and private providers, supports innovation, guards against conflicts of interest and undue influence, responds to the evolving needs in a period of rapid technological change</p>	<p>58. Improve regulatory capacities and further strengthen responsible and ethical regulatory and legislative system that promotes inclusiveness of all stakeholders, including public and private providers, supports innovation, guards against conflicts of interest and undue influence, responds to the evolving needs in a period of rapid technological change;</p>
<p><b>Coherent and coordinated action across sectors and actors</b></p>	<p><b>Coherent and coordinated action across sectors and actors</b></p>	<p>(no sub-titles)</p>	
<p>47. Provide strategic leadership on UHC at the highest political level and promote greater policy coherence and coordinated actions through whole-of-government and health-in-all-policies approaches, and forge coordinated and integrated whole-of-society and multi-sectoral response, while ensuring to align support from all stakeholders to national health policies;</p>	<p>53. Provide strategic leadership on UHC at the highest political level and promote greater policy coherence and coordinated actions through whole-of-government and health-in-all-policies approaches, and forge coordinated and integrated whole-of-society and multi-sectoral response, while ensuring to align support from all stakeholders to national health policies</p>	<p>54. Provide strategic leadership on UHC at the highest political level and promote greater policy coherence and coordinated actions through whole-of-government and health-in-all-policies approaches, and forge coordinated and integrated whole-of-society and multi-sectoral response, while recognizing the need to align support from all stakeholders to achieve national health goals</p>	<p>59. Provide strategic leadership on universal health coverage at the highest political level and promote greater policy coherence and coordinated actions through whole-of-government and health-in-all-policies approaches, and forge coordinated and integrated whole-of-society and multi-sectoral response, while recognizing the need to align support from all stakeholders to achieve national health goals;</p>
<p><b>Strong health and social workforce</b></p>	<p><b>Strong health and social workforce</b></p>	<p>(no sub-titles)</p>	
<p>48. Take immediate steps towards addressing the global shortfall of 18 million health workers in accordance with Global Strategy on Human Resources for Health: workforce 2030, and addressing the growing demand for health and social sectors which</p>	<p>54. Take immediate steps towards addressing the global shortfall of 18 million health workers in accordance with Global Strategy on Human Resources for Health: workforce 2030, and addressing the growing demand for health and social sectors which</p>	<p>55. Take immediate steps towards addressing the global shortfall of 18 million health workers in accordance with Global Strategy on Human Resources for Health: workforce 2030, and addressing the growing demand for health and social sectors which</p>	<p>60. Take immediate steps towards addressing the global shortfall of 18 million health workers in accordance with Global Strategy on Human Resources for Health: workforce 2030, and addressing the growing demand for health and social sectors which</p>

<p>calls for the creation of 40 million health worker jobs by the year 2030;</p>	<p>calls for the creation of 40 million health worker jobs by the year 2030, taking into account local and community health needs;</p>	<p>calls for the creation of 40 million health worker jobs by the year 2030, taking into account local and community health needs; [Ad ref]</p>	<p>calls for the creation of 40 million health worker jobs by the year 2030, taking into account local and community health needs;</p>
<p>50. Develop, improve, and make available evidence-based and culture and gender-sensitive training, skills enhancement and education of health workers as well as promote a continued education and life-long learning agenda and expand community-based health education and training;</p>	<p>56. Develop, improve, and make available evidence-based and culture-, gender-, and disability-sensitive training, skills enhancement and education of health workers as well as promote a continued education and life-long learning agenda and expand community-based health education and training in order to provide quality care for people throughout the life course</p>	<p>56. Develop, improve, and make available evidence-based training that is sensitive to different cultures and specific needs of women, children and persons with disabilities, skills enhancement and education of health workers, including midwives, as well as promote a continued education and life-long learning agenda and expand community-based health education and training in order to provide quality care for people throughout the life course</p>	<p>61. Develop, improve, and make available evidence-based training that is sensitive to different cultures and the specific needs of women, children and persons with disabilities, skills enhancement and education of health workers, including midwives and community health workers, as well as promote a continued education and life-long learning agenda and expand community-based health education and training in order to provide quality care for people throughout the life course;</p>
<p>49. Scale up efforts to promote the recruitment and retention of competent health workers and encourage incentives to secure the equitable distribution of qualified health workers especially in rural and hard-to-reach areas;</p>	<p>55. Scale up efforts to promote the recruitment and retention of competent, skilled and motivated health workers, including community health workers, and encourage incentives to secure the equitable distribution of qualified health workers especially in rural, hard-to-reach and underserved areas, including by providing decent working conditions and appropriate remuneration for health workers working in these areas, noting that highly trained and skilled health personnel continue to emigrate which weakens health systems in the countries of origin</p>	<p>57. Scale up efforts to promote the recruitment and retention of competent, skilled and motivated health workers, including community health workers, and encourage incentives to secure the equitable distribution of qualified health workers especially in rural, hard-to-reach and underserved areas and in fields with high demands for services, including by providing decent and safe working conditions and appropriate remuneration for health workers working in these areas, consistent with the WHO Global Code of Practice on International Recruitment of Health Personnel, noting that highly trained and skilled health personnel continue to emigrate which weakens health systems in the countries of origin</p>	<p>62. Scale up efforts to promote the recruitment and retention of competent, skilled and motivated health workers, including community health workers and mental health professionals, and encourage incentives to secure the equitable distribution of qualified health workers especially in rural, hard-to-reach and underserved areas and in fields with high demands for services, including by providing decent and safe working conditions and appropriate remuneration for health workers working in these areas, consistent with the WHO Global Code of Practice on International Recruitment of Health Personnel, noting with concern that highly trained and skilled health personnel continue to emigrate which weakens health systems in the countries of origin;</p>
<p>51. Provide better opportunities for women to leverage their role and</p>	<p>57. Provide better opportunities and working environment for women to</p>	<p>58. Provide better opportunities and working environment for women to</p>	<p>63. Provide better opportunities and working environment for women to</p>

<p>leadership in the health sector, with a view to increasing the representation, engagement, participation and empowerment of women in the economic workforce and eliminating gender biases and inequity, including unequal remuneration, while noting that women, who currently form 70% of the health and social workforce, still lack leadership roles;</p>	<p><b>ensure</b> their role and leadership in the health sector, with a view to increasing the representation, engagement, participation and empowerment of women in the workforce and eliminating gender biases and inequity, including unequal remuneration, while noting that women, who currently form 70% of the health and social workforce, still <b>often</b> lack leadership roles</p>	<p>ensure their role and leadership in the health sector, with a view to increasing the <b>meaningful</b> representation, engagement, participation and empowerment of all women in the workforce, <b>addressing inequalities and eliminating biases against women</b>, including unequal remuneration while noting that women, who currently form 70% of the health and social workforce, still often <b>face significant barriers in taking leadership and decision making</b> roles</p>	<p>ensure their role and leadership in the health sector, with a view to increasing the meaningful representation, engagement, participation and empowerment of all women in the workforce, addressing inequalities and eliminating biases against women, including unequal remuneration while noting that women, who currently form 70% of the health and social workforce, still often face significant barriers in taking leadership and decision making roles;</p>
<p>52. Protect health workers from all forms of violence, attacks, and discriminatory practices, and to ensure their safe working environment and conditions at all times;</p>	<p>58. Protect health workers from all forms of violence, attacks, and discriminatory practices, and to ensure their <b>decent and</b> safe working environment and conditions at all times <b>as well as ensure health workers' physical and mental health by promoting policies conducive to healthy lifestyles</b></p>	<p><b>59. Take necessary steps to protect</b> health workers from all forms of violence, attacks, harassment, and discriminatory practices, and to promote or advance their decent and safe working environment and conditions at all times as well as ensure health workers' physical and mental health by promoting policies conducive to healthy lifestyles</p>	<p>64. Take necessary steps at the country level to protect health workers from all forms of violence, attacks, harassment and discriminatory practices, and to promote their decent and safe working environment and conditions at all times as well as ensure health workers' physical and mental health by promoting policies conducive to healthy lifestyles;</p>
<p><b>Promoting the use of technologies, innovation and data</b></p>	<p><b>Promoting the use of technologies, innovation and data</b></p>	<p>(no sub-titles)</p>	
<p>54. Strengthen national capacity on health intervention, technology assessment and data collection to achieve evidence-based decisions;</p>	<p>60. Strengthen national capacity on health intervention, technology assessment, data collection <b>and analysis, while respecting patient privacy and promoting data security</b>, to achieve evidence-based decisions <b>at all levels</b></p>	<p>60. Strengthen capacity on health <b>impact and</b> technology assessment, data collection and analysis, while respecting patient privacy and promoting data protection, to achieve evidence-based decisions at all levels, acknowledging the role of digital health tools in empowering patients, giving them access to their own healthcare information and promoting shared decision making <b>between patients and providers</b></p>	<p>65. Strengthen capacity on health intervention and technology assessment, data collection and analysis, while respecting patient privacy and promoting data protection, to achieve evidence-based decisions at all levels, acknowledging the role of digital health tools in empowering patients, giving them access to their own healthcare information, promoting health literacy, and strengthening patient involvement in clinical decision-making with a focus on health professional-patient communication;</p>

<p>53. Invest in and encourage ethical and public-health-driven use of appropriate and user-friendly relevant technologies, including digital technologies, and innovation to increase access to health and social services and related information, improve the cost-effectiveness of health systems and efficiency in the provision and delivery of care, while recognizing the need for an integrated health information system for public health surveillance and the need to narrow the digital divide;</p>	<p>59. Invest in and encourage ethical and public-health-driven use of relevant <b>evidence-based</b> and user-friendly technologies, including digital technologies, and innovation to increase access to <b>quality</b> health and social services and related information, improve the cost-effectiveness of health systems and efficiency in the provision and delivery of <b>quality care in a manner that recognizes the need to build and strengthen interoperable and integrated health information systems for the management of health systems and public health surveillance, as well as the need to protect data and privacy and narrow the digital divide</b></p>	<p>61. Invest in and encourage ethical and public-health-driven use of relevant evidence-based and user-friendly technologies, including digital technologies, and innovation to increase access to quality essential health and related social services and relevant information, improve the cost-effectiveness of health systems and efficiency in the provision and delivery of quality care in a manner that recognizes the need to build and strengthen interoperable and integrated health information systems for the management of health systems and public health surveillance, as well as the need to protect data and privacy and narrow the digital divide</p>	<p>66. Invest in and encourage ethical and public-health-driven use of relevant evidence-based and user-friendly technologies, including digital technologies, and innovation to increase access to quality health and related social services and relevant information, improve the cost-effectiveness of health systems and efficiency in the provision and delivery of quality care in a manner that recognizes the need to build and strengthen interoperable and integrated health information systems for the management of health systems and public health surveillance, as well as the need to protect data and privacy and narrow the digital divide;</p>
<p>55. Collect data, including vital statistics, disaggregated by age, sex, income, disability, geographic location, status, education and other social characteristics needed to monitor progress and identify gaps in the universal and inclusive achievement of SDG3 and all other health-related SDGs;</p>	<p>61. Collect data <b>of high quality</b>, including vital statistics, disaggregated by age, sex, <b>race</b>, income, disability, geographic location, status, education and <b>other characteristics relevant to national context as required</b> to monitor progress and identify gaps in the universal and inclusive achievement of SDG3 and all other health-related SDGs</p>	<p><b>62. Strengthen health information systems, improve civil registration and vital statistics, and collect quality, timely and reliable data disaggregated by income, gender, age, race, ethnicity, migratory status, disability, geographic location,</b> and other characteristics relevant in national contexts as required to monitor progress and identify gaps in the universal and inclusive achievement of SDG3 and all other health-related SDGs, <b>while protecting the privacy of data that could be linked to individuals</b></p>	<p>67. Strengthen health information systems and collect quality, timely and reliable data, including vital statistics, disaggregated by income, sex, age, race, ethnicity, migratory status, disability, geographic location, and other characteristics relevant in national contexts as required to monitor progress and identify gaps in the universal and inclusive achievement of SDG3 and all other health-related Sustainable Development Goals, while protecting the privacy of data that could be linked to individuals, and to ensure that the statistics used in the monitoring progress can capture the actual progress made on the ground, for the achievement of universal health coverage, in line with the 2030 Agenda;</p>
<p><b>Mainstreaming gender, equity and</b></p>	<p><b>Mainstreaming gender, equity and</b></p>	<p>(no sub-titles)</p>	

<p><b>human rights</b></p> <p>56. Ensure universal access to sexual and reproductive health and reproductive rights in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences, including universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes, and recognizing that the human rights of women include their right to have control over and decide freely and responsibly on all matters related to their sexuality, including sexual and reproductive health, free of coercion, discrimination and violence, as a contribution to the achievement of gender equality and the empowerment of women and the realization of their human rights;</p>	<p><b>human rights</b></p> <p>62. Ensure universal access to sexual and reproductive health and reproductive rights in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences, including universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes, and recognizing that the human rights of women include their right to have control over and decide freely and responsibly on all matters related to their sexuality, including sexual and reproductive health, free of coercion, discrimination and violence, as a contribution to the achievement of gender equality and the empowerment of women and the realization of their human rights</p>	<p>63. Ensure universal access to sexual and reproductive health and reproductive rights in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences, including universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes, and recognizing that the human rights of women include their right to have control over and decide freely and responsibly on all matters related to their sexuality, including sexual and reproductive health, free of coercion, discrimination and violence, as a contribution to the achievement of gender equality and the empowerment of women and the realization of their human rights; (CSW63 agreed conclusions)</p>	<p>68. In line with the 2030 Agenda for Sustainable Development, ensure, by 2030, universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes, and ensure universal access to sexual and reproductive health and reproductive rights in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences, as adopted by the General Assembly;</p>
<p>57. Apply a systems-wide approach to mainstream gender perspective when designing and monitoring health policies, taking into account the specific needs of women and girls, with a view to reducing gender-related inequities;</p>	<p>63. Mainstream a gender perspective on a systems-wide basis when designing, implementing and monitoring health policies, taking into account the specific needs of all women and girls, with a view to eliminating gender-related inequities and achieving gender equality in health policy and health system delivery</p>	<p>64. Mainstream a gender perspective on a systems-wide basis when designing, implementing and monitoring health policies, taking into account the specific needs of all women and girls, with a view to eliminating gender-related inequities, achieving gender equality and empowering women in health policies and health systems delivery</p>	<p>69. Mainstream a gender perspective on a systems-wide basis when designing, implementing and monitoring health policies, taking into account the specific needs of all women and girls, with a view to achieving gender equality and the empowerment of women in health policies and health systems delivery;</p>
<p>58. Ensure that no one is left behind , especially those who are vulnerable, stigmatized or marginalized, among others, children, youth, women, older</p>	<p>64. Ensure that no one is left behind, especially those who are vulnerable, stigmatized or marginalized, among others, children, youth, adolescents,</p>	<p>65. Ensure that no one is left behind, with an endeavour to reach the furthest behind first, founded on the dignity of the human person and</p>	<p>70 Ensure that no one is left behind, with an endeavour to reach the furthest behind first, founded on the dignity of the human person and</p>

<p>persons, persons with disabilities, migrants, refugees, people on the move, people with mental health problems or pre-existing medical conditions, regardless of race, religion and political belief or economic and social conditions;</p>	<p>women, older persons, persons with disabilities, indigenous people, people living with HIV/AIDS, migrants, refugees, people on the move, internally displaced persons, prisoners and detainees, people with mental health or neurodevelopmental disorders or pre-existing medical conditions, regardless of race, religion and political belief or economic and social conditions, within a human rights perspective</p>	<p>reflecting the principles of equality and non-discrimination, as well as to empower those who are vulnerable or in vulnerable situations and address their physical and mental health needs which are reflected in the 2030 Agenda for Sustainable Development, including all children, youth, persons with disabilities, people living with HIV/AIDS, older persons, indigenous peoples, refugees and internally displaced persons and migrants; (agreed language from FPGH resolution A/RES/72/139 PP10 and 2019 Political Declaration of the SDG Summit)</p>	<p>reflecting the principles of equality and non-discrimination, as well as to empower those who are vulnerable or in vulnerable situations and address their physical and mental health needs which are reflected in the 2030 Agenda for Sustainable Development, including all children, youth, persons with disabilities, people living with HIV/AIDS, older persons, indigenous peoples, refugees and internally displaced persons and migrants;</p>
			<p>71. Address the particular needs and vulnerabilities of migrants, refugees, internally displaced persons and indigenous peoples which may include assistance, health care, psychological and other counselling services, in accordance with relevant international commitments, as applicable, and in line with national contexts and priorities;</p>
<p><b>UHC in fragile situations and health security</b></p>	<p><b>UHC in fragile situations and health security</b></p>	<p>(no sub-titles)</p>	
<p>59. Prevent and timely respond to outbreaks, epidemics, health hazards or emergencies with health consequences, emerging challenges such as antimicrobial resistance, to ensure an uninterrupted access to and the sustainment of essential health services and distribution systems in armed conflicts, fragile settings and other humanitarian emergencies, including by protecting health infrastructure and facilities from destruction, in accordance with the International Health Regulations core</p>	<p>65. Prevent, detect and timely respond to outbreaks, epidemics, health hazards or emergencies with health consequences, emerging challenges such as antimicrobial resistance, through strengthening health systems to improve preparedness and enhance coordination, in accordance with the International Health Regulations (2005)</p>	<p>66. Strengthen health systems to prevent, detect and timely respond to outbreaks, epidemics, famines, health hazards or emergencies with health consequences and other emerging challenges and to ensure the continuum and provision of essential health services and public health functions, through coherent and inclusive approaches to safeguard UHC in emergencies, in line with humanitarian principles and in accordance with International Health Regulations (2005)</p>	<p>72. Promote strong and resilient health systems, reaching those who are vulnerable or in vulnerable situations, and capable of effectively implementing the International Health Regulations (2005), ensuring pandemic preparedness and the prevention and detection of and response to any outbreak;</p>

capacity requirements;			
			73. Promote more coherent and inclusive approaches to safeguard universal health coverage in emergencies, including through international cooperation, ensuring the continuum and provision of essential health services and public health functions, in line with humanitarian principles;
		67. Enhance emergency health preparedness and response systems, as well as strengthen capacities at national, regional and international levels, including to mitigate the impacts of climate change and natural disasters on health	74. Enhance emergency health preparedness and response systems, as well as strengthen capacities at national, regional and international levels, including to mitigate the impacts of climate change and natural disasters on health;
	66. Ensure an uninterrupted access to and the sustainment of essential health services, including psychosocial support, and distribution systems in armed conflicts, fragile settings and other humanitarian emergencies, including by protecting health infrastructure and facilities from destruction, noting the importance of addressing the particular needs and vulnerabilities of women, children, migrants, refugees and internally displaced persons	68. Ensure continuous delivery of essential health services, including psychosocial support, and distribution systems in armed conflicts and other humanitarian emergencies, including by protecting health infrastructure and facilities from destruction, noting the importance of addressing the particular needs of those who are vulnerable or in vulnerable situations	75. In accordance with international humanitarian law, respect and protect, in situations of armed conflict, medical personnel and humanitarian personnel exclusively engaged in medical duties, their means of transport and equipment, and hospitals and other medical facilities, which must not be unlawfully attacked, and ensure that the wounded and sick receive, to the fullest extent practicable and with the least possible delay, the medical care and attention required;
	67. Scale up efforts at the national, regional and global levels to address antimicrobial resistance, using an integrated and systems-based approach, to ensure affordable access to quality-assured antimicrobial medicines and products as well as their appropriate and rational use	69. Scale up efforts at the national, regional and global levels to address antimicrobial resistance as an essential element for achieving UHC, using an integrated and systems-based one-health approach, to ensure affordable access to quality-assured antimicrobial medicines and products as well as their appropriate and rational use, recognizing the	76. Enhance cooperation at the national, regional and global levels to address antimicrobial resistance, using an integrated and systems-based one-health approach, including through health system strengthening, capacity-building, including for research and regulatory capacity, and technical support and ensure equitable access to affordable, safe, effective and

		importance of the work of the Inter-Agency Coordination Group on AMR and its recommendations as contained in the Secretary-General's report on AMR (A/73/869);	quality existing and new antimicrobial medicines, vaccines, and diagnostics as well as effective stewardship, as antimicrobial resistance poses a challenge to achieving UHC, noting the work of the Inter-Agency Coordination Group on AMR and its recommendations as contained in the Secretary-General's report on AMR (A/73/869) and look forward to the discussion thereof during the 74th session of the General Assembly, taking into account World Health Assembly resolution WHA72.5;
<b>International collaboration</b>	<b>International collaboration</b>	(no sub-titles)	
61. Revitalize and promote strong global partnership to engage all stakeholders to mobilize all necessary financial and non-financial means to collaboratively support the efforts of Member States to achieve UHC and other health-related SDGs, including to address health challenges, raise awareness, share knowledge and best practices, strengthen advocacy for UHC, to leave no one behind;	68. Revitalize and promote strong global partnership, such as the Global Action Plan for Healthy Lives and Well-Being for all and the International Health Partnership for UHC 2030, to engage all stakeholders to mobilize necessary resources to collaboratively support the efforts of Member States to achieve UHC and other health-related targets, including through technical support and capacity building, to address health challenges, raise awareness, share knowledge and best practices, strengthen advocacy for UHC, with a view to leaving no one behind	70. Revitalize and promote strong global partnerships with all stakeholders to collaboratively support the efforts of Member States to achieve UHC and other health-related targets of the Sustainable Development Goals, including through technical support, capacity building and strengthening advocacy, building on existing global networks such as the International Health Partnership for UHC2030, and in this regard look forward to the upcoming launch of the Global Action Plan for Healthy Lives and Well-Being for All	77. Revitalize and promote strong global partnerships with all relevant stakeholders to collaboratively support the efforts of Member States, as appropriate, to achieve universal health coverage and other health-related targets of the Sustainable Development Goals, including through technical support, capacity building and strengthening advocacy, building on existing global networks such as the International Health Partnership for UHC2030, and in this regard take note of the upcoming presentation of the global action plan for healthy lives and well-being for all;
60. Increase global awareness, action and international cooperation towards the achievement of UHC by promoting national, regional and global collaborative frameworks, such as the Global Action Plan for Healthy Lives and Well-Being for All, and international solidarity, including through the commemoration of International UHC Day on 12 December of every year;	69. Increase global awareness, action and international cooperation towards the achievement of UHC by promoting national, regional and global collaborative frameworks and international solidarity, including through the commemoration of International UHC Day on 12 December of every year	71. Increase global awareness, international solidarity, international cooperation and action towards the achievement of UHC by promoting national, regional and global collaborative frameworks and fora, including through the commemoration of International Universal Health Coverage Day on 12 December of every year; [Ad ref]	78. Increase global awareness, international solidarity, international cooperation and action towards the achievement of universal health coverage by promoting national, regional and global collaborative frameworks and fora, including through the commemoration of International Universal health coverage Day on 12 December of every year;

Follow-up mechanism	Follow-up mechanism	(no sub-titles)	
<p>62. By 2020, set national targets for the achievement of universal health coverage in 2030 and develop national indicators that are in line with the 2030 Agenda for Sustainable Development, based on the guidance provided by the World Health Organization, to ensure that SDG official statistics used in the monitoring progress for the achievement of SDG 3.8.1 and 3.8.2 are accurate and can capture the actual progress made on the ground;</p>	<p>70. By 2020, set national targets <b>and indicators</b> for the achievement of universal health coverage in 2030, based on the guidance provided by the World Health Organization, to ensure that SDG official statistics used in the monitoring progress for the achievement of <b>universal health coverage and other health-related SDG targets</b> are accurate and can capture the actual progress made on the ground</p>	<p>72. Set national measurable targets, <b>as appropriate but no later than 2021</b>, for the achievement of universal health coverage in 2030 <b>and strengthen monitoring and evaluation platforms</b> to ensure that SDG official statistics used in the monitoring progress for the achievement of universal health coverage and other health-related SDG targets are accurate and can capture the actual progress made on the ground</p>	<p>79. Set measurable national targets and strengthen national monitoring and evaluation platforms, as appropriate, in line with the 2030 Agenda for Sustainable Development, to support regular tracking of the progress made for the achievement of universal health coverage by 2030;</p>
<p>63. Leverage the full potential of the multilateral system and call upon the relevant entities of the United Nations development system, primarily WHO as the leading agency on health, as well as the reinvigorated UN Resident Coordinators and the UN Country Teams, to assist and support countries in their efforts to implement UHC at the national level, in accordance with their respective national priorities;</p>	<p>71. Leverage the full potential of the multilateral system and call upon the relevant entities of the United Nations development system, primarily WHO as the leading agency on health, as well as the reinvigorated UN Resident Coordinators and the UN Country Teams, <b>within their respective mandates, as well as other global development and health actors</b>, to assist and support countries in their efforts to implement UHC at the national level, in accordance with their respective national priorities</p>	<p>73. Leverage the full potential of the multilateral system, <b>in collaboration with Member States upon their request</b>, and call upon the relevant entities of the United Nations development system, <b>within their respective mandates</b>, primarily WHO as the leading agency on health, as well as the reinvigorated UN Resident Coordinators and the UN Country Teams, within their respective mandates, as well as other <b>relevant global development and health actors, including civil society</b>, to assist and support countries in their efforts to implement UHC at the national level, in accordance with their respective national <b>contexts</b>, priorities <b>and competences</b></p>	<p>80. Leverage the full potential of the multilateral system, in collaboration with Member States upon their request, and call upon the relevant entities of the United Nations development system, within their respective mandates, primarily WHO as the leading agency on health, as well as the reinvigorated UN Resident Coordinators and the UN Country Teams, within their respective mandates, as well as other relevant global development and health actors, including civil society, private sector and academia, to assist and support countries in their efforts to achieve universal health coverage at the national level, in accordance with their respective national contexts, priorities and competences;</p>
<p>64. Reemphasize our resolve to achieve universal health coverage by 2030 and to stop the rise of catastrophic out-of-pocket health spending by providing financial risk protection and reverse the trend by</p>			

<p>2030, and progressively cover one billion additional people with quality essential health services and quality, essential, affordable and effective medicines, vaccines, diagnostics and health technologies for all by 2023, and an additional two billion people by 2030;</p>			
<p>65. Request the Secretary-General, in close collaboration with the WHO, development partners and other relevant initiatives, such as the Global Action Plan for Healthy Lives and Well-Being for All and the International Health Partnership for UHC2030, to promote a multiagency network for all health-related SDGs hosted by the WHO, to provide guidance and assistance to Member States towards the achievement of UHC;</p>	<p>72. Request the Secretary-General, in close collaboration with the WHO, development partners and other relevant initiatives, such as the Global Action Plan for Healthy Lives and Well-Being for All and the International Health Partnership for UHC 2030, to promote a multiagency network for all health-related SDGs <b>coordinated</b> by the WHO, to provide guidance and assistance to Member States towards the achievement of UHC</p>	<p>(74. cont.d) ...and, in close collaboration with <b>relevant</b> UN agencies and other stakeholders including regional organizations, to promote <b>multiagency initiatives that are</b> led and coordinated by the WHO to provide assistance to Member States, upon their request, towards the achievement of UHC and all health-related targets of the Sustainable Development Goals</p>	<p>81. Request the Secretary-General to continue engaging with Member States to sustain and further strengthen the political momentum on universal health coverage and, in close collaboration with relevant UN agencies and other stakeholders including regional organizations, to strengthen existing initiatives that are led and coordinated by the WHO to provide assistance to Member States, upon their request, towards the achievement of universal health coverage and all health-related targets of the Sustainable Development Goals;</p>
<p>66. Request the Secretary-General to continue engaging with Member States to sustain the political momentum on UHC</p>	<p>73. Request the Secretary-General to continue engaging with Member States to sustain <b>and further strengthen</b> the political momentum on UHC...</p>	<p>74. Request the Secretary-General to continue engaging with Member States to sustain and further strengthen the political momentum on UHC ...</p>	
<p>...and to provide, in consultation with the WHO, every two years beginning from the seventy-sixth session, a monitoring report on the progress of Member States in all health-related SDGs, in particular on moving towards UHC across all relevant sectors, including on the implementation of the present declaration, at all levels, ...</p>	<p>... and to provide, in consultation with the WHO <b>as well as other agencies including the World Bank</b>, every two years beginning from the seventy-sixth session, <b>a report</b> on the progress of Member States in the implementation of the present declaration towards achieving UHC and other health-related SDGs across all relevant sectors at all levels <b>as well as recommendations on sustaining funding directed towards health systems strengthening for UHC from different sources including domestic</b></p>	<p>75. Request the Secretary-General to provide, in consultation with the WHO and other relevant agencies, <b>a report during the seventy-fifth session of the General Assembly</b> on the progress made as well as recommendations on the implementation of the present declaration towards achieving universal health coverage, and <b>another report during the seventy-seventh session of the General Assembly</b>, which will serve to inform the <b>high-level meeting to be convened in 2023</b></p>	<p>As a follow-up to this political declaration, we: 82. Request the Secretary-General to provide, in consultation with the WHO and other relevant agencies, a progress report during the seventy-fifth session of the General Assembly, and a report including recommendations on the implementation of the present declaration towards achieving universal health coverage during the seventy-seventh session of the</p>

	funding and ODA		General Assembly, which will serve to inform the high-level meeting to be convened in 2023;
... which will also serve to inform the preparations for a high-level meeting on health in 2023 to be attended by Heads of State and Government in New York, aimed to undertake a comprehensive review of all health-related SDGs under the UHC umbrella, identify gaps and solutions to accelerate progress towards achieving UHC by 2030	74. Convene a high-level meeting on health in 2023 to be attended by Heads of State and Government in New York, aimed to undertake a comprehensive review of all health-related SDGs under the UHC umbrella, identify gaps and solutions to accelerate progress towards achieving UHC by 2030	As a follow-up to this political declaration, we: 76. Decide to convene a high-level meeting on health in 2023 in New York, aimed to undertake a comprehensive review on the implementation of the present declaration to identify gaps and solutions to accelerate progress towards the achievement of universal health coverage by 2030, the scope and modalities of which shall be decided no later than the seventy-fifth session of the General Assembly, taking into consideration the possibility of aligning existing health-related processes	83. Decide to convene a high-level meeting on UHC in 2023 in New York, aimed to undertake a comprehensive review on the implementation of the present declaration to identify gaps and solutions to accelerate progress towards the achievement of universal health coverage by 2030, the scope and modalities of which shall be decided no later than the seventy-fifth session of the General Assembly, taking into consideration the outcomes of other existing health-related processes and the revitalization of the work of the General Assembly.