

UHC2030 STEERING COMMITTEE 3rd Session - 4-5 June 2018 Hotel Novotel Geneva, Switzerland

MOBILIZING HIGH-LEVEL SUPPORT FOR UNIVERSAL HEALTH COVERAGE AND STRENGTHENING ACCOUNTABILITY FOR HEALTH IN THE SUSTAINABLE DEVELOPMENT GOALS

For Information	For Review & Advice	For Approval	\boxtimes
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MOBILIZING HIGH-LEVEL SUPPORT FOR UNIVERSAL HEALTH COVERAGE AND STRENGTHENING ACCOUNTABILITY FOR HEALTH IN THE SUSTAINABLE DEVELOPMENT GOALS

This document presents an initial proposal for how UHC2030 can contribute to the formal Sustainable Development Goals (SDGs) and UN-related processes to mobilize and sustain political support for UHC and strengthen accountability for health in the SDGs, thereby delivering on selected objectives in the UHC2030 advocacy and accountability strategies.

1) Background

There is growing momentum on Universal Health Coverage (UHC) as a country and global priority. At the global level, this is demonstrated by the official recognition of 12 December as International UHC Day by the UN General Assembly (A/RES/67/81)¹; target 3.8 on UHC in the SDGs and the framing of UHC as a key driver to ensure healthy lives and promote well-being for all at all ages (A/RES/70/1); and the UHC Forum 2017 in Tokyo around UHC Day, hosted by the government of Japan in partnership with UHC2030, WHO, The World Bank Group and UNICEF which brought political leadership and multi-stakeholder partners together to accelerate progress towards UHC (Tokyo Declaration on Universal Health Coverage). Political momentum is key to accelerate efforts to achieve UHC, and ensure that equitable pathways are pursued to also deliver on the SDG commitment to leave no one behind. Strengthening accountability mechanisms for health can help to do this.

2) Opportunity

With action and momentum from governments, international agencies, civil societies around the world, and in particular, the leadership of Thailand (the chair of the Foreign Policy and Global Health Network in 2017), the date of 12 December was recognised at the end of 2017 as International Universal Health Coverage Day (A/RES/72/138). The UN General Assembly also decided to hold a UN high-level meeting on universal health coverage in 2019 (HLM-UHC). The resolution also recognised UHC2030 for the first ever as a relevant partnership to provide support to the Member States for the development and strengthening of the sustainability of UHC (A/RES/72/139). The UHC Monitoring Framework developed by WHO and the World Bank was approved to measure SDG target 3.8 for UHC (A/RES/71/313) and granted the status to report its progress to the high-level political forum (HLPF) for SDGs. The timing of the next High Level Political Forum (HLPF) thematic review of SDG3 would be 2020. In 2019, the HLPF will focus on reducing inequities which is an opportunity to strengthen the narrative and approach to operationalising Leaving No One Behind (LNB) in UHC.

Furthermore, Head of States Germany, Ghana and Norway have emphasised the importance of a single action plan for SDG3 (AP4SDG3), which includes concrete milestones on the road to 2030 while reflecting the interdependency with other SDGs². They propose that WHO guides – together with the heads of the other relevant organisations – the elaboration of *one* joint "Global Action Plan for Healthy Lives and Well-being for All" to be presented by October 2018 at the 10th World Health Summit in Berlin.

These processes, meetings and plans present opportunities for political commitments that will accelerate progress towards UHC. UHC2030 can support with framing the narrative and convening partners to promote multi-stakeholder buy-in to concrete actions. These should be defined collectively, but could include the agreement of interim targets, framing leaving no one behind so that UHC is a movement for health equity and better use of official processes such as

¹ Campaign led by the UHC Coalition calling for the recognition of UHC Day, initiated by the Rockefeller Foundation.

² Letter from Germany, Ghana and Norway regarding action plan for SDG3

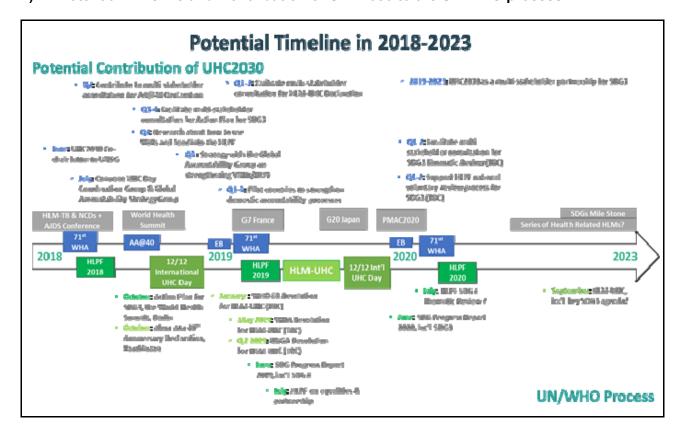
the voluntary national reviews (VNRs) which serve as a basis for the regular reivews by the HLPF to celebrate successes and catalyse remedial actions.

3) UHC2030 contribution to the formal SDG process and UN-related activities

As a multi-stakeholder partnership for UHC officially recognized in the UNGA resolution above, UHC2030 could add value to the member states dialogue with other stakeholders, including civil society, academia and the private sector, to maximize their engagement in and contribution to the implementation of health goals and targets through a multi-stakeholder approach. Potential contributions of UHC2030 are the followings:

- 1. Coordinate annual International UHC Day campaigns with multi-stakeholder partners to maintain the political momentum of UHC both global and country level.
- 2. Contribute to planning for HLM-UHC in 2019, facilitating multi-stakeholder engagement. To this end, UHC2030 will consider establishing a multi-stakeholder group to strategize on contribution to global accountability. We propose that the HLM-UHC could advocate for:
 - a. Increased data availability and effective use of SDG Indicators 3.8.1 and 3.8.2 (i.e. service coverage & financial protection).
 - Strengthened domestic multi-stakeholder accountability mechanisms that feed into SDG3 official accountability processes, including the VNRs for HLPF, with linkages to domestic multi-stakeholder sector reviews.
 - c. Reaffirm the opportunity of UHC as an overarching umbrella for achieving SDG3, with greater collaboration and harmonisation across sub-sectoral health constituencies at country and global levels.
- 3. Support countries to strengthen multi-stakeholder engagement in VNRs that feed into the HLPF in 2020.

4) Potential Timeline and Contribution of UHC2030 to the UN/WHO process



5) Discussion and decision points in the June 2018 Steering Committee

- Discuss potential timeline and contribution of UHC2030 to the UN/WHO process
- Brainstorm added value of the HLM-UHC and HLPF 2020 outcomes for the UHC movement
- Approve the ToR for the International UHC Day Coordination Group and the Global Accountability Strategy Group (annexes 1 and 2)
- Agree to send a co-chair letter to UN Secretary General on behalf of UHC2030 (annex 3)

6) Annexes

- Annex 1: TOR for the International UHC Day Coordination Group
- Annex 2: TOR for the International Accountability Coordination Group
- Annex 3: Co-chair letter to UNSG regarding UHC2030's contribution
- Annex 4: Letter from Germany, Ghana and Norway regarding Action Plan for SDG3
- Annex 5: Reference list of UNGA Resolutions and Timeline

Terms of Reference for International UHC Day Coordination Group

1) Background

In 2012, the <u>UHC Coalition</u> launched a petition calling for recognition of 12 December as UHC Day to commemorate the data that UN General Assembly official recognised UHC approach for the first time. UHC Coalition stands more than 1,000 organisations strong and has been committed to making the UHC Day the most impactful yet.

In 2017, a <u>total of 160 UHC Day events</u> took place in 45 countries and included marches, high-level roundtables, civil society and policymaker workshops, media engagements and more. The events brought diverse partners together to explore how to drive progress toward universal health coverage. People demanded political action is calling for local and national leaders to take clear steps towards health for all.

With action and momentum from governments, international agencies, civil societies around the world, including the leadership of the Foreign Policy and Global Health Network, this date has now been <u>formally recognised by UN General Assembly</u>.

2) Opportunity

The UN General Assembly resolution on 'Global health and foreign policy: addressing the health of the most vulnerable for an inclusive society', recognizes UHC2030 as a relevant initiative to provide support to Member States, especially through a technical assistance and capacity-building programme, for the development and strengthening of the sustainability of universal health coverage at the national level with the aim of promoting access to health services for the most vulnerable' (OP 21, A/72/L.28). There is a need to coordinate broader multi-stakeholder's involvement in this annual campaign for UN Official Day beyond the previous civil society-led coordination group.

<u>UHC2030 has been supporting UHC Coalition partners to organise UHC Day campaigns</u> since the establishment of this partnership in 2016. In line with the <u>Accelerating Political Momentum for Universal Health Coverage: UHC2030 Framework for Advocates</u>, UHC2030 has facilitated the development of annual UHC Advocacy Guide thorough multi-stakeholder consultative process to support various partners to advocate UHC both globally and locally. UHC2030 has also contributed preparation of the World Health Day 2018 on UHC, partnering WHO and Civil Society Organizations. Building on the experience and mandate of, UHC2030 is well positioned to coordinate multi-stakeholder partners to organise International UHC Day across the World.

3) Scope of work

UHC2030 will convene a multi-stakeholder Coordination Group of International UHC Day (12/12CG), a mix of Member States, organisations of the United Nations system and other global organisations, as well as other relevant stakeholders, including civil society, non-governmental

organisations, the private sector and academia (see indicative list in Annex). UHC2030 Core Team with support from a contractor will serve as the secretariat of the 12/12CG. The 12/12CG will be responsible for the scope of the following work:

- Develop a campaign microsite and other relevant campaign materials for International UHC Day, building on the existing efforts of UHC Coalition, World Health Day 2018 and annual UHC Advocacy Guide.
- Consult and reach out to relevant partners as necessary.
- Map both global and country campaigns and collect records of these activities (e.g. documentation, video, photo) to make it united annual campaign across the World
- Leverage social media and partner networks to expand the reach of their activities and events.
- Provide technical support to prepare and raise funding for campaigns on the ground.

4) Deliverables

- June: Convene the 12/12CG
- July-August: Develop coordination plan for International UHC Day 2018, including fundraising and technical supports to campaign organisers on the ground
- September-October: Develop a campaign microsite and other campaign materials
- November: Map campaign information and provide in-kind support to campaigners
- December: Collect records of campaigns across the World and present a summary of International UHC Day on the microsite

5) Budget

A total of up to USD XXX will be allocated from UHC2030 budget to coordinate International UHC Day. This amount does not include small grants to support organising UHC Day campaigns, which would be funded by various global or country partners.

Annex - List of indicative members

10 members of the following multi-stakeholder groups will be selected:

- UN System: UN Office of Secretary-General (1)
- UN System: WHO Communications Department (1)
- UN System: World Bank Health, Nutrition and Population, Communications Team (1)
- UN System: UNICEF Communications Team (1)
- Member States: Foreign Policy and Global Health Network (2)
- Civil Society: Civil Society Engagement Mechanism (2)
- Private Sector: Private Sector Engagement Mechanism (1)
- Academia: Health System Global (1)

Potential existing resources to be inherited for International UHC Day:

UHC Coalition: <u>universalhealthcoverageday.org/@UHC_Day</u>#HealthForAll



World Health Day 2018 (UHC): apps.who.int/uhc/en/ #HealthForAll



UHC2030 Advocacy Guide: www.uhc2030.org/ #UHC2030 #HealthForAll





ANNEX 2

Terms of Reference

Global Accountability Strategy Group

1. Background

As a multi-stakeholder partnership for universal health coverage (UHC), UHC2030 is committed to facilitate accountability for progress towards UHC and, through this, to contribute to a more coherent approach to accountability across health in the Sustainable Development Goals.

The SDG mechanisms for follow-up and review, involving Voluntary National Reviews (VNRs) and the High Level Political Forum (HLPF), present an important opportunity to take stock of progress - bringing focus to who is benefitting and who is left behind from efforts to expand coverage — and to mobilise political will for remedial action. They are an opportunity to stimulate a more coherent approach, bringing together the different health target agendas into an integrated review, linking with national sector review processes. They are also an opportunity to strengthen multi-stakeholder engagement in accountability processes at country and global levels. Yet, to date, this potential remains largely untapped. From initial discussions with partners, there is a mutual interest in mobilising the VNRs and HLPF to advance accountability for health in the SDGs and accelerate equitable progress.

Political momentum for UHC is high, with an upcoming High Level Meeting on UHC (HLM-UHC) in 2019¹, and various important milestones in advance of this.² It is anticipated that health will be on the agenda for the HLPF in 2020. This provides an important series of global opportunities to leverage to advance accountability for health in the SDGs.

This document proposes that UHC2030 convenes a time-bound Global Accountability Strategy Group, as per the background paper on *Mobilising High-Level Support for UHC and Strengthening Accountability for Health in the SDGs* that went to the Steering Committee in June 2018.

2. Objectives

UHC2030 will convene a time-bound Global Accountability Strategy Group with the objectives of:

- Promoting a collaborative approach across health constituencies to strengthening and mobilising VNRs and the HLPF for health in the SDGs, with a particular emphasis on multi-stakeholder participation
- Developing recommendations for the HLM-UHC (and other key milestones) to advance accountability for health in the SDGs.

¹ As agreed in UNGA resolution: OP 24 A/RES/72/139.

² These include the Alma Ata 40th Anniversary, the Berlin Health Summit, the World Bank/IMF Annual and Spring meetings, the World Health Assembly, and the G20.



The strategy and recommendations from this group will inform the UHC2030 accountability workplan for 2019/20 and the UHC2030 contribution to the HLM-UHC political declaration and other key moments.

3. Membership

The Global Accountability Strategy Group could include representation from the United Nations Department of Economic and Social Affairs (UN DESA), the UHC2030 Civil Society Engagement Mechanism (CSEM), selected countries from the UHC2030 Steering Committee who are willing to engage and bring their perspective, representatives from global health initiatives/partnerships (e.g. PMNCH, GFF, GFATM, Gavi, Stop TB etc.) who have a mutual interest in an aligned effort to strengthen the VNRs and HLPF.

It is recommended that this group is convened from July – December 2018 to develop the strategy and recommendations and then to review its need to continue or alternative working arrangements for the period of implementation of the joint strategy. The Group would liaise with WHO and other partners, including UN agencies, the World Bank Group and global health initiatives who are collaborating to develop a Global Action Plan for SDG3.

4. Scope of work/deliverables

The specific workplan will be defined by the Global Accountability Strategy Group itself, but initial suggestions include:

- A review of what has worked well for the VNRs/HLPF to date and why (including what hasn't and why not), across sectors (July-Oct)
- A joint strategy for UHC2030 and partners to have a collective approach to strengthen
 accountability for health in the SDGs, under the umbrella of UHC, through the VNRs
 (linked to national sector reviews) and HLPF, including leveraging the HLM-UHC and
 other key moments (Sept-Nov) This could include recommendations for how to
 strengthen non-state actor accountability for health in the SDGs
- Recommendations of proposed actions for different stakeholders for the HLM-UHC outcome document and other key moments to inform advocacy messaging by UHC2030 and partners (Oct-Dec).

5. Ways of working

It is proposed that the Global Accountability Strategy Group could meet monthly by teleconference, with email exchange as necessary in between, and an in-person meeting during the UNGA to discuss initial findings of the review and begin to develop the strategy.

6. Budget

Budget will be required for the review and in-person meeting(s).

Co-chair letter to UNSG regarding UHC2030's contribution





Mr António Guterres United Nations Secretary-General United Nations Headquarters 405 East 42nd Street, New York, NY, 10017, USA

10 June 2018.

Dear Mr. Guterres,

On behalf of members and networks of the International Health Partnership for UHC 2030 (UHC2030), we reaffirm our commitment to work together with renewed urgency to accelerate progress towards universal health coverage (UHC), as articulated in target 3.8 in the SDGs. The SDGs set a broad and ambitious agenda for a safer, fairer and healthier world by 2030. To ensure healthy lives and promote well-being for all at all ages, we must achieve UHC by working together effectively to strengthen health systems and improve health outcomes in all countries.

Progressive pathways towards universality that endeavour to first reach the most vulnerable and marginalised population groups are key to ensure no one is left behind. This involves building and expanding equitable, resilient and sustainable health systems, funded primarily by public finance, and based on primary health care, that deliver integrated, comprehensive people-centred and quality health services for all, while taking necessary measures to protect households from financial hazards due to health expenditures. Such efforts should be led by national governments, in support of national health policies and plans, building on and strengthening existing sector-wide processes to avoid fragmentation.

UHC2030 provides a multi-stakeholder platform to promote collaborative working in countries and globally on health systems strengthening, and advocates increased political commitment to UHC and facilitates accountability and knowledge sharing. As a co-organiser of the UHC Forum 2017 in Tokyo, we coordinated diverse views of stakeholders beyond governments and development partners, including parliamentarians, civil society organisations, academia, media and the private sector. We advocate monitoring progress and accountability for the results of SDG target 3.8. by 2030. We will mobilise our partners and the general public to celebrate International UHC Day.

We welcome the decision of the UN General Assembly on global health and foreign policy: addressing the health of the most vulnerable for an inclusive society (December 2017) to hold a high-level meeting in 2019 on UHC. We also acknowledge the call to promote and strengthen, member states dialogue with other stakeholders, including civil society, academia and the private sector, to



maximise their engagement in and contribution to the implementation of health goals and targets through an intersectoral and multi-stakeholder approach.

As part of the preparation of the high-level meeting, we will explore a proposal for strengthening the accountability process around SDG3, particularly in the context of voluntary national reviews conducted in the High Level Political Forum.

We, as the relevant initiative recognised in the resolution above, are ready to support you and your member states in any way we can contribute to the preparation of the UN high-level meeting on UHC as well as the high-level political forum SDG 3 thematic review in 2020.

Yours faithfully,

Dr. Takao Toda Co-Chair of UHC2030 Steering Committee Committee Vice-President Japan International Cooperation Agency

Dr. Githinji Gitahi Co-Chair of UHC2030 Steering Global CEO and Director General AMREF Health Africa Group

cc Jim Yong Kim President World Bank Group Washington DC, USA

cc Tedros Adlhanom Gebreyesus Director General The World Health Organization Geneva, Switzerland

cc Permanent Representatives of Japan, Germany, EU, Thailand, Chile, South Africa, Kenya, Liberia, Senegal.

UHC2030 Members

- Afghanistan Australia Benin
- Belgium Burkina Faso
- Burundi Cambodia
- Cameroon Canada
- Cape Verde
- Chad Chile
- Côte d'Ivoire
- Comoros
- DR of Congo Denmark
- Djibouti

- El Salvador
- Ethiopia
- European
 - Union / European
 - Commission
- Finland
- France
- Gambia
- Germany
- Ghana
- Guinea
- Guinea Bissau
- Haiti Indonesia
- Italy Iran

- Japan
- Kenya
- Liberia
- Luxembourg Madagascar
- Mali
- Mauritania
- Mozambique Myanmar
- Netherlands
- Nepal
- Niger Nigeria
- Norway
- Pakistan
- Portugal Rwanda

- Senegal
- Sierra Leone
- South Africa
- Spain
- Sudan
- Sweden
- Thailand
- Togo
- Uganda
- United Kingdom
- United States -USAID
- Vietnam
- Zambia

20 Avenue Appia, 1211 Geneva 27 Switzerland 1818 H Street NW, Washington DC 20433 U.S.A

- African Development Bank
- GAVI Alliance
- Global Fund to Fight AIDS TB & Malaria
- International Labour Organization
- International Organisation for Migration
- OECD
- UNAIDS
- UNICEF
- UNDP
- UNFPA
- WHO

- World Bank
- Bill and Melinda Gates Foundation
- Rockefeller Foundation
- United Nations Foundation
- African
 Platform for
 Universal
 Health
- Amref Health Africa
 - BRAC, Bangladesh
- Community Family and

- Aid Foundation -
- Ghana
 Community
 Working
 Group on
 - Health Zimbabwe
- Health
 Enabled South Africa
- International Federation of Medical Students Associations
- International Federation of Red Cross and

- Red Crescent Societies
- Management Science for Health
- Medicus
 Mundi
 International
 Network
- Outreach Scout Foundation -Malawi
- Positive Generation -Cameroon
- Worldwide
 Hospice
 Palliative Care
 Association

UHC2030 Related Initiatives

- Alliance for Health Policy and Systems Research
- P4H Network for health financing and social health protection
- Global Health Workforce Network
- Global Service Delivery Network
- Health Data Collaborative
- Health Systems Global
- Health Systems Governance Collaborative
- Inter-agency Pharmaceutical Coordination Group
- Inter-agency Supply Chain Coordination Group
- Joint Learning Network for UHC
- Primary Health Care Performance Initiative
- Universal Health Coverage Partnership

Annex 4 Letter from Germany, Ghana and Norway regarding Action Plan for SDG3





BUNDESREPUBLIK DEUTSCHLAND DIE BUNDESKANZLERIN

April 2018

Dear Dr. Tedros,

We as members of the United Nations have adopted in September 2015 the 2030 Agenda for Sustainable Development with its 17 SDGs. Being closely interrelated with other SDGs such as equality, clean air, nutrition, liveable cities education and ending poverty, the goals and targets enshrined in SDG 3 aim at ensuring a healthy life for everybody throughout the lifecycle. We are, as many other leaders, fully committed to do our utmost to reach these noble goals.

Since the adoption of the 2030 Agenda, we are already two years into the period of implementation. Global health is benefiting from strong investments by many dedicated state and non-state actors. Many organisations in the global health sector are already taking the right direction by setting up their operations and strategic plans along the lines of SDG 3 commitments and indicators.

However, more needs to be done to achieve our shared goals and we believe it is necessary that all relevant actors rally fully behind the SDG 3 and related targets. We believe that all efforts should be developed further into *one* joint "Global Action Plan for Healthy Lives and Well-being for All". Such action plan should include concrete milestones on the road to 2030 while reflecting the interdependency with other SDGs. It would, thus, create an added value for governments as well as global actors to regularly monitor the progress achieved, and to identify necessary adjustments for full implementation of SDG 3 by 2030. As we believe that increasing domestic resources and efficient service delivery will be critical for faster progress towards the SDGs, the Global Action Plan could also serve as a sound basis to mobilize those resources.

As a first step, global actors such as WHO, UNAIDS, UNICEF, UNODC, UNDP, the World Bank, the Global Fund to fight AIDS, Tuberculosis and Malaria, the Global Alliance for Vaccination and Immunization, the Global Financing Facility and other relevant organisations could be brought together to streamline their efforts. We would like to propose that WHO, as the leading global health institution, guides – together with the heads of the other relevant organisations – the elaboration of such a plan to be presented by October 2018 at the 10th World Health Summit in Berlin. It could then serve as a nucleus for WHO member states to discuss and support this important vision by complementing it with their own initiatives.

We on our side stand ready to support you in any way we can in this important endeavour.

Dr. Angela Merkel

Chancellor of the Federal Republic of Germany

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Nana Addo Dankwa Akufo-Addo

President of the Republic of Ghana

Wara alupaled

Erna Solberg

Prime Minister of the Kingdom of Norway





BUNDESREPUBLIK DEUTSCHLAND DIE BUNDESKANZLERIN

Dr Tedros Adhanom Gebreyesus Director General The World Health Organization Geneva, Switzerland

cc Antonio Guterres Secretary General United Nations New York, NY, USA

cc Jim Yong Kim President Worldbank Group Washington DC, USA

cc Achim Steiner Administrator UN Development Programme New York, NY, USA

cc Michel Sidibé Executive Director UNAIDS Geneva, Switzerland

cc Henrietta H. Fore Executive Director UNICEF New York, NY, USA

cc Peter Sands Executive Director The Global Fund to Fight AIDS, Tuberculosis and Malaria Geneva, Switzerland

cc Seth Berkley CEO Global Initiative for Vaccination and Immunization Geneva, Switzerland

cc Dr. Mariam Claeson Director Global Financing Facility Washington DC, USA

List of related UNGA Resolutions and Detail Timeline

1. References to relented UNGA resolutions

A/RES/70/1 Transforming our world: the 2030 Agenda for Sustainable Development

26. To promote physical and mental health and well-being, and to extend life expectancy for all, we must achieve universal health coverage and access to quality health care. No one must be left behind. We commit to accelerating the progress made to date in reducing newborn, child and maternal mortality by ending all such preventable deaths before 2030. We are committed to ensuring universal access to sexual and reproductive health-care services, including for family planning, information and education. We will equally accelerate the pace of progress made in fighting malaria, HIV/AIDS, tuberculosis, hepatitis, Ebola and other communicable diseases and epidemics, including by addressing growing anti-microbial resistance and the problem of unattended diseases affecting developing countries. We are committed to the prevention and treatment of non-communicable diseases, including behavioural, developmental and neurological disorders, which constitute a major challenge for sustainable development.

Goal 3. Ensure healthy lives and promote well-being for all at all ages

3.8 Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all

A/RES/71/313 Global indicator framework for the Sustainable Development Goals and targets of the 2030 Agenda for Sustainable Development

- 3.8.1 Coverage of essential health services (defined as the average coverage of essential services based on tracer interventions that include reproductive, maternal, newborn and child health, infectious diseases, non-communicable diseases and service capacity and access, among the general and the most disadvantaged population)
- 3.8.2 Proportion of population with large household expenditures on health as a share of total household expenditure or income

A/RES/72/139 Global health and foreign policy: addressing the health of the most vulnerable for an inclusive society

11. Calls upon Member States to promote and strengthen, as appropriate, their dialogue with other stakeholders, including civil society, academia and the private sector, in order to maximize their engagement in and contribution to the implementation of health goals and targets through an intersectoral and multi-stakeholder approach, while at the same time safeguarding public health interests from undue influence by any form of real, perceived or potential conflict of interest,

through the management of risk, the strengthening of due diligence and accountability, the promotion of policy coherence and an increase in the transparency of engagement;

- 21. Requests the Secretary-General, in close collaboration with the World Health Organization, development partners and other relevant initiatives, such as the International Health Partnership for UHC2030, to provide support to Member States, especially through technical assistance and capacity-building programmes, for the development and strengthening of the sustainability of universal health coverage at the national level with the aim of promoting access to health services for the most vulnerable;
- 24. *Decides* to hold a high-level meeting in 2019 on universal health coverage, and requests the President of the General Assembly, in close collaboration with the Director General of the World Health Organization and in consultation with Member States, to propose options and modalities for the conduct of such a meeting, with a view to ensuring the most effective and efficient outcomes, including potential deliverables, complementing and building on existing efforts in this regard, before the end of the seventy-second session;

2. Proposed Detail Timeline

- June 2018: Co-chair letter to UNSG regarding UHC2030's contribution
- July 2018: Convene International UHC Day Coordination Group
- July 2018: Convene a Global Accountability Group
- September 2018: Global Accountability Group & International UHC Day Coordination Group meeting on the margins of UNGA
- Q3 2018: Research about how to use VNRs and feed into the HLPF, link with national planning/review processes, multi-stakeholder engagement
- October 2018: World Health Summit, Berlin Action Plan for SDG3 launched
- October 2018: Alma-Ata 40th Anniversary Declaration
- December 2018: International UHC Day around the world
- Q4 2018: Strategy with the Global Accountability Group on strengthening VNRs/HLPF in selected countries with lessons for others, and framing UHC/health accountability
- Q1-4 2019: Pilot countries to strengthen accountability processes—Member States engagement in VNRs, links with national health sector review, feed into HLPF 2020
- January 2019: WHO EB Modality Resolution for HLM-UHC (TBC)
- May 2019: WHA Modality Resolution for HLM-UHC (TBC)
- Q2 2019: UNGA Modality Resolution for HLM-UHC (TBC)
- July 2019: HLPF 2019 on reducing inequalities potential opportunity to promote LNB in health related SDGs, UHC, also potential to promote the experience of UHC2030 as a multi-stakeholder partnership (SDG17 on promoting partnership)
- July/September 2019: HLM-UHC (TBC)
- December 2019: International UHC Day
- Q1-2 2020: Support HLPF national voluntary review process for SDG3 (TBC)
- June 2020: SDG Progress Report 2020, including SDG3
- July 2020: Contribute to HLPF SDG3 Thematic Review (TBC)