Key findings from the State of commitment to universal health coverage: Synthesis 2023

What is the State of UHC commitment review?

The State of UHC commitment review brings a unique multistakeholder view to a simple question: What actions are governments taking to fulfil their universal health coverage (UHC) commitments? This review is a political, country-focused and action-oriented tool that complements the more technical and UHC global monitoring reports focusing on UHC indicators on service coverage and financial protection. It follows the 2019 UHC Political Declaration’s Key Targets, Commitments and Follow-up Actions, which outlined eight UHC commitment areas in line with the Action Agenda from the UHC Movement. It supports national accountability and advocacy processes to ensure political leaders are held accountable for their UHC commitments.

In September 2023, political leaders around the world convened at the UN General Assembly high-level meetings on UHC; pandemic prevention, preparedness and response; and tuberculosis. During the meetings, heads of state and government and ministers renewed their countries’ commitment to making progress towards UHC and emphasized the importance of health systems strengthening, with PHC as the foundation to achieve UHC. The 2023 Political Declaration adopted by Member States provides a road map of specific actions to ensure progress towards 2030 and will provide the basis for the work of UHC2030 in reviewing the state of UHC commitment.

In brief: overall trends

- After the 2019 UN high-level meeting on UHC, annual country commitments to UHC almost doubled between 2019 and 2021. Yet, in 2022, the trend stagnated and even reversed in some countries. Although the majority of countries recognize UHC as a goal, which is reflected in laws and national plans, there are few concrete operational steps and lack of adequate public financing for health, setting UHC targets for 2030 further off track.

- Countries’ commitments do not address all three dimensions of UHC: service coverage, population coverage and financial protection. Most commitments address service coverage (43%) and population coverage (42%), with relative lack of commitment and clear targets for financial protection (15%), which is a crucial, integral component of UHC. Reducing financial barriers to health care was systematically under-prioritized, including under-investment.

- Countries continue to rely on disease- and service-specific programmes and interventions instead of operationalizing UHC commitments through comprehensive reforms for comprehensive health benefits and integrated service delivery.
Key findings: UHC commitment areas covered in the review

Action is more urgent than ever, given that more than half of the world’s population – 4.5 billion people – are unable to access essential health services and 2 billion are facing financial hardship due to out-of-pocket health spending. The findings on gaps in action on UHC commitments in the eight areas are provided below:

1. **Ensure political leadership beyond health**: Most countries recognize UHC as a goal but have not taken concrete operational steps to achieving UHC.

2. **Leave no one behind**: Vulnerable individuals and groups continue to face financial and structural barriers to accessing the health services and commodities they need.

3. **Legislate and regulate**: While 89% of countries have made UHC a central goal in their national health policy plans and strategies, 41% have enacted UHC laws to ensure equitable, affordable access to health services.

4. **Uphold quality of care**: The global shortage of health and care workers, lack of support for the health and care workforce and inadequate health-care resources remain challenges to providing effective, safe, people-centred care for all.

5. **Invest more, invest better**: Despite continued increases in overall health expenditure for the COVID-19 response, governments’ current investment commitments and public spending for health are inadequate to achieve UHC.

6. **Move together**: Few countries have a formal, effective accountability mechanism for UHC, with inadequate multistakeholder engagement.

7. **Gender equality**: Although women represent the majority of the health and care workforce, there is lack of commitment to achieving gender equality in the health and care workforce and to increasing women’s representation in overall political leadership for health.

8. **Emergency preparedness**: Countries do not invest sufficiently in health systems strengthening based on PHC to achieve UHC and health security.

**Country profiles**

The **Country profiles dashboards** provide an overview of national commitments made in policies and government documents, progress in action on UHC commitments and insights from state and non-state actors on the country’s progress towards UHC for each country. Their aim is to support national accountability and advocacy, ensuring that political leaders are held accountable for translating their commitments into action. A **User guide** is available for guidance on how to use the dashboards.

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