Leveraging universal health coverage to address AMR
A note from UHC2030 on the declaration for the UN HLM on AMR

Efforts to control antimicrobial resistance (AMR) and efforts to achieve universal health coverage (UHC) are interlinked and include the same goals – affordable access for everyone, everywhere to quality health services, including for the prevention, diagnosis and appropriate treatment of (drug-resistant) infections. While achieving UHC becomes more difficult with increasing prevalence of AMR, it is through progress towards UHC and building equitable and resilient health systems for all, that we will address AMR as a public health threat. Comprehensive management of AMR means addressing the interconnectedness of health issues across humans, animals, and the environment through a One Health approach while promoting and integrating health system strengthening for UHC.

Key Asks for the Political Declaration:

1. Retain references reaffirming the 2023 Political Declaration of the high-level meetings on UHC.

2. Retain commitment to achieving UHC and further strengthen language in the draft declaration by clarifying that UHC means “ensuring access to the full range of integrated, quality, safe, effective, affordable and essential health services, medicines, vaccines, diagnostics and health technologies needed for health and well-being throughout the life course.” [Source: A/RES/78/4; 11]

3. Strengthen language on financial hardship due to high prices and out-of-pocket expenditures for health products and services, by adding a reference to financial protection: “high prices and out-of-pocket expenditures for health products and services, including antimicrobials, and inequitable access to such products and services within and among countries, as well as financial hardships associated with a lack of financial protection, continue to impede progress towards mitigating the effects of antimicrobial resistance” [Adapted from A/RES/78/4; 11]

4. Strengthen the declaration by committing to investing in “sustainable and resilient health systems based on a primary health care and people-centred approach”. [Source: A/RES/78/4; 3, 15, 23, 53]

5. Retain language on vulnerable populations and the need to reach those who are furthest behind first.

6. Retain language on embedding a whole-of-society approach and social participation involving all relevant stakeholders in health governance for antimicrobial resistance.

7. Retain commitment to invest in the health workforce.
Key messages:

- AMR poses a dire threat to public health, risking catastrophic impacts on progress towards UHC, the sustainable development goals, and a century of medical advancements.

- While drug resistant infections can impact anyone, anywhere, AMR exacerbates pre-existing health and societal inequalities and further hinders access to affordable and life-saving treatments for vulnerable populations, including women and girls.

- Antimicrobial resistance is driven by the misuse and overuse of antimicrobials, often as a substitute for effective good quality health care including adequate infection prevention and control practices.

- Strong health systems, based on a primary health care approach, which people trust and that provide quality health care, promote prevention, timely diagnosis, and appropriate, quality-assured treatment of drug-resistant infections are crucial to address AMR.

- Implementing adequate financial protection measures enables individuals to access essential healthcare services, including proper medical advice, accurate diagnostics, and appropriate and effective antimicrobial treatments.

- By removing barriers to access, individuals are less likely to resort to purchasing medications without prescriptions or turning to unreliable informal sources, mitigating the risk of self-medication, incomplete treatments, substandard and falsified antimicrobials and the accelerated spread of antimicrobial resistance.

- Embedding social participation in decision-making is critical to ensuring that measures to address AMR respond to all people's needs, including those in vulnerable situations, and to creating trust in public policies.

- If left unchecked, AMR will roll back a century of medical progress, damage the environment, interrupt food production, cause more people to fall into extreme poverty and imperil global health security.

- Both UHC and AMR require political leadership and collaboration that goes beyond health. We therefore call on governments to take action during this year’s high level meeting on AMR to build on commitments to leverage UHC to address AMR.

Date of publication: 29 July 2024

UHC2030 is the global movement to build stronger health systems for universal health coverage (UHC). It brings together diverse voices and perspectives for the common goal of achieving UHC, sustaining momentum around UHC commitments and supporting collective action and accountability. Learn more at uhc2030.org.