

Leveraging universal health coverage to address AMR

A note from UHC2030 on the draft 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.

Key Asks for the Political Declaration:

1. Retain references reaffirming the 2023 Political Declaration of the high-level meetings on UHC and build on commitments to leverage UHC as part of the approach for addressing antimicrobial resistance.
2. Insert language reiterating that i) UHC cannot be achieved without addressing antimicrobial resistance and ii) investing in equitable and resilient health systems for UHC is key to tackling antimicrobial resistance.
3. Retain references recognizing the disproportionate impact of AMR on people in vulnerable situations and the role of UHC in reducing health inequalities and reaching those who are the furthest behind.
4. Retain references on committing to invest in health systems, based on a primary health care approach, to deliver high-quality health services to people for prevention, diagnosis and appropriate treatment of infections - thereby directly improving health outcomes and reducing the inappropriate use of antimicrobials, which reduces the emergence and spread of AMR.
5. Insert language on committing to financial protection to ensure affordable access to preventive services (vaccines, WASH, IPC), timely and quality diagnosis, and appropriate quality-assured treatment of infections (including access to existing and new quality safe, efficacious, and affordable vaccines, diagnostics and antimicrobials).
6. Insert language on committing to ensuring a well-trained and motivated health and care workforce working in clean and safe facilities to reduce the emergence and spread of drug-resistant infections and provide quality care for optimal health outcomes.
7. Retain language on embedding a whole-of-society approach and social participation involving all relevant stakeholders in health governance for antimicrobial resistance.

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.
- UHC and action to address AMR will not succeed in isolation from one another. Action is needed at local, national, regional, and global levels to ensure there is an integrated approach for making progress towards UHC and addressing AMR.
- 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.
- Strong health systems are crucial to ensure the ongoing effectiveness of newly developed antimicrobials. New medicines will not remain effective for long if they are introduced to contexts in which systems for managing infection remain weak and weak controls of appropriate antibiotic use.

- 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.
- Countries should strive to develop, finance, implement and monitor comprehensive multi-sectoral national action plans on AMR and establish effective multisectoral coordination mechanisms that are closely linked with national UHC plans, programmes and governance structures.

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.

Additional resource: [Call for actionable steps in response to the rising threat of antimicrobial resistance \(AMR\)](#)

Article	Proposed text modifications
9	Acknowledge the critical role of UHC in ensuring equitable access to health services <i>“Acknowledge the need to ensure that no one is left behind, with an endeavour to reach the furthest behind first, and to achieve universal health coverage to ensure access to quality essential health services and safe, effective, quality, affordable essential medicines, vaccines, diagnostics and health technologies (...)”</i>
ADD	Insert language from A/71/3, 5, 9 to recognize the interlinkages between UHC and AMR <i>“Reiterate that investing in strong health systems capable of providing universal health coverage is a key to tackling antimicrobial resistance and that the goal of universal health coverage is gravely challenged by antimicrobial resistance.”</i>
29	Incorporate language recognizing the need to ensure affordability of antimicrobials <i>“Call on existing financing instruments, including but not limited to the World Bank, Global Fund to Fight AIDS, tuberculosis and Malaria, Gavi, the Vaccine Alliance, Green Climate Fund, Pandemic Fund, Climate Health Fund, Global Environment Facility, Nature4Health, and the Global Biodiversity Framework Fund to expand their scope to include investments in increasing affordable access to effective antimicrobials (...)”</i>
32	Recognize the critical role of financial protection in ensuring access to health services <i>“Accelerate efforts to achieve universal health coverage with financial protection as a means to ensure affordable access to quality essential health services needed for the prevention, diagnosis, and appropriate treatment of infections and antimicrobial stewardship measures;”</i>
33	Highlight affordability of health services as key driver for ensuring equitable access <i>“Promote greater, more affordable and more equitable access to essential oral antibiotics and diagnostics, especially in low- and middle-income countries, by establishing global and national lists of essential medicines using existing tools, diagnostics and vaccines for humans and animals;”</i>
ADD	In the commitments section on human health section reiterate A/RES/78/4, 91 underlining need to ensure decent and safe working conditions for health workers <i>“Promote a decent and safe working environment and conditions for health workers at all times as well as ensure their physical and mental health.”</i>
51	<i>“Invest in sustainable, equitable and resilient health systems, based on a primary health care approach, to achieve universal health coverage with support universal access to essential health services and promote the timely and equitable supply of quality and affordable essential vaccines, diagnostics and antimicrobials, (...);”</i>