



**Multi-stakeholder Hearing
UN High-Level Meeting on UHC in 2019
29 April 2019**

STATEMENT BY THE INTERNATIONAL SOCIETY OF NEPHROLOGY

Honorable chair, distinguished delegates,

On behalf of the International Society of Nephrology and supported by the NCDA, we welcome today's efforts to ensure UHC is truly advanced in all health systems.

From the kidney health community perspective, this is a fundamental step to ensure that inequality is minimized across all sectors, strong health systems are implemented and equity is maximized through integrated care.

Approximately 850 million people worldwide live with some form of kidney disease. Delivery of dialysis and transplantation consumes a disproportionate 2–3% of the annual health-care budget in high-income countries, and induces catastrophic expenditure in over 90% of patients in lower income settings. Over 2 million people die every year because of lack of access to treatment. Kidney disease is also intricately linked to increased morbidity and mortality from other diseases including cardiovascular disease, diabetes and hypertension; infections such as HIV, malaria, TB and hepatitis; and climate change.

We thus call on member states and all stakeholders to strive to implement the following key policies to advance UHC:

1. **Advance financial protection** (e.g. development of innovative public and/or private funding and increased efforts towards affordable and equitable treatment)
2. **Develop and strengthen comprehensive and integrated healthcare services** (e.g. continuum of care that spans from health promotion and prevention to screening, diagnosis, treatment, rehabilitation and palliative care as well as implementation of management programs which address co-morbidities)
3. **Improved focus on early prevention** (e.g. Population-based approaches and implementation of WHO Best Buys: including screening of at-risk populations, universal access to essential diagnostics, increased use of generics, availability of affordable basic technologies & essential medicines and task shifting from doctors to front-line healthcare workers.)
4. **Implement whole of government, whole of society, health in every policy** (e.g. Multisectoral actions involving the elaboration of high-level policies across the environmental, agriculture, finance, trade, transport, urban planning, education, and sport departments)

Thank you