Constituency Statement on item 13.3 - Universal Health Coverage

Final Version - Do not edit

Thank you

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Distinguished delegates,

There can be no Universal Health Coverage without addressing noncommunicable diseases and mental health - these are central to efforts to realise UHC. Yet, progress remains off track for 2030.

We welcome the DG's report but are deeply concerned by the slow pace of progress and integration, especially given the increasing NCD burden, representing 74% of global deaths.

We urge Member States to accelerate UHC implementation by:

- 1) refocusing on people-centred, rights-based primary health care;
- 2) integrating prevention, early diagnosis, screening, treatment, rehabilitation, palliative and long term care services into national health benefit packages;

- 3) investing in NCD including circulatory health services through sustained resources for UHC, expanding social protection, and implementing costeffective interventions, the NCD 'best buys'; WHO HEARTS, and WHO PEN-Plus:
- 4) engaging civil society and people living with NCDs to keep UHC people-centered;
- 5) establishing accountability mechanisms and disaggregated data to leave no one behind.

We welcome the resolution on strengthening global health financing and the adaptation and uptake of WHO norms and standards. In the context of budget constraints, we call for an ambitious global financing target and the implementation of health taxes, generating domestic resources, preventing NCDs, and contributing to UHC.

We also support the resolutions on enhancing medical imaging capacity, and on addressing rare diseases, to achieve SDG 2030 targets.

Finally, the 2025 UN HLM on NCDs is a key opportunity to take stock on UHC as well, providing leadership needed to accelerate progress.

Thank you

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