

# **STATEMENT OF THE ASIA PACIFIC ECONOMIC COOPERATION (APEC) HEALTH WORKING GROUP TO THE UNITED NATIONS HIGH LEVEL MEETING ON UNIVERSAL HEALTH COVERAGE “PROMOTING UNIVERSAL HEALTH COVERAGE: SHARING A PROSPEROUS AND HEALTHY FUTURE”**

## **Preamble**

On the 30<sup>th</sup> anniversary of the formation of the Asia Pacific Economic Cooperation (APEC), we, the representatives of the 21 APEC member economies, call for "Promoting Universal Health Coverage (UHC): Sharing a Prosperous and Healthy Future".

UHC plays an important role in promoting human health and well-being, sustainable economic growth, inclusive social development, and poverty reduction. It is not only one of the health targets of the 17 Sustainable Development Goals of the 2030 Agenda for Sustainable Development adopted by the United Nations, but also considered key to attaining the other health-related targets<sup>1</sup>. Primary Health Care (PHC) is the foundation of an effective and resilient health system and is critical to achieving UHC and the Sustainable Development Goals. Evidence shows that for every \$1 USD invested in PHC services, there is an average return or economic benefit of approximately \$9-\$20 USD<sup>2</sup>.

APEC economies have made sustained and encouraging efforts to promote UHC and address health issues that threaten economic, trade, security and social developments. In recent years, APEC economies, through continuously strengthening gender-responsive health systems and promoting PHC services, have increased their average UHC service coverage index to about 70 – significantly higher than the global average of 64. About 73% of the population of the APEC economies has access to essential health services; and the regional average of out-of-pocket expenditure as a percentage of total health expenditure is about 27%, which is lower than the global average of 32%<sup>3</sup>. As a region with high population density and high economic growth, APEC economies' progress in supporting UHC has made remarkable contributions to achieving UHC globally.

At the same time, we also note that significant changes in demographic structure, economic and trade cooperation, climatic and environmental conditions are emerging in the Asia-Pacific region and the world, which may bring about increased health threats and disease burdens. Millions of people lack access to basic preventative health care services, including access to cost-effective and affordable vaccines, face vaccine hesitancy, and shortage of diagnostic and treatment services for major infectious diseases, such as AIDS, tuberculosis, hepatitis and dengue, malaria

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<sup>1</sup> WHO, A72/14, Universal health coverage, Preparation for the high-level meeting of the United Nations General Assembly on universal health coverage - Report by the Director-General, 25 March 2019.

<sup>2</sup> Jamison, Dean T., et al. "Global health 2035: a world converging within a generation." *The Lancet* 382.9908 (2013): 1898-1955.

<sup>3</sup> Calculated by CNHDRC based on Bank W. Tracking universal health coverage: First global monitoring report[J]. World Bank Publications, 2015.

and non-communicable diseases. Weak health systems in some economies face a serious shortage of public health financing and health human resources, underdeveloped health infrastructures and information systems, and lack sufficient capacities to prevent and respond to health emergencies. Almost 30 million people in the Asia-Pacific region are impoverished each year because of excessive out-of-pocket health expenses, and the trend in some economies is becoming worse.

Noting the existing achievements of UHC and priorities for future health strategies and policy needs, we affirm the values of people-centered health care and services, protecting and promoting individuals' right to the enjoyment of the highest attainable standard of health, and improving the health and well-being of everyone throughout the life-course, in order to achieve equitable, accessible, quality, efficient, and sustainable healthcare in a more cost-effective and systematic way, and ultimately, promoting security, economic growth, and social development in the Asia-Pacific region and the world.

### **Calls for actions to APEC member economies:**

We, the APEC economies, reaffirm the importance of achieving Universal Health Coverage through: encouraging governments to take a leadership role in promoting UHC; promoting people-centred, quality, reliable, and efficient primary health care delivery; increasing health investment and optimizing the allocation and utilization of health funds; improving equitable access to health care services and health insurance; empowering individuals, families and communities to embrace UHC; and promoting immunization and preventative health care services.

**1. Strengthen the leadership of government in promoting UHC.** APEC member economies recognize the responsibility of the whole society in respecting and advancing individuals' right to the enjoyment of the highest attainable standard of physical and mental health. Similarly, APEC economies should make efforts to achieve UHC, recognizing that they can determine their own unique path, within their particular context, taking into account their priorities and institutional frameworks. Health and other sectors should commit to the "Health in All Policies" approach to public policies that systematically takes into account the health implications of decisions, seeks synergies, and avoids harmful health impacts. In line with this, there is a need to ensure the generation and use of evidence in health policy development and decision making through strategies such as but not limited to research and the institutionalization of health technology assessment. We emphasize the importance of strengthening health governance systems and enhancing governance capacities to manage the three dimensions of UHC related to breadth of population coverage, depth of services covered, and financial coverage and protection in order to be able to actively respond to the economic, social, and environmental determinants of health. We urge APEC economies to develop, implement and monitor their health strategic plans and policies in alignment with global efforts towards UHC. We also encourage APEC economies to discuss ways of promoting transparency and performance accountability in the implementation of the UHC and the development of a monitoring framework, building upon metrics outlined in

the WHO and tailored to economy-specific contexts. Lastly, we recognize the value of working closely with the private sector and civil society to develop innovative approaches to UHC.

**2. Promote people-centred, equitable, and efficient quality PHC delivery.** Improving the quality and efficiency of gender-sensitive PHC services is the basis and the most cost-effective way to achieve high-quality UHC<sup>4</sup>. Promoting a people-centred and integrated care (PCIC) model, and expanding the application of health technology assessment (HTA) in selection, procurement, utilization, and management of vaccine, medicines (including traditional/alternative medicine where appropriate), equipment, consumables and health technologies, can also contribute to the achievement of high quality health care and UHC.

The achievement of UHC can be further supported by promoting safe, convenient and appropriate digital health interventions and artificial intelligence technologies, to provide quality reliable health promotion, prevention, treatment, rehabilitation and palliative care to all people. Economies should consider emphasis on (but not limited to): immunization across the life-course; maternal health services; health programs for children and adolescents; prevention, screening, treatment, and management of communicable and non-communicable diseases; strengthening the preparedness and responsiveness of health systems against pandemics and other health emergencies; strengthening the tiered services delivery system and improving effective referral systems between primary and other levels of care; actively responding to the ageing of populations and developing age-appropriate health care and long-term care services for the elderly rooted in community services; and improving the incentive mechanisms to encourage health workers to provide necessary, adequate, high-quality, and efficient services.

**3. Increase health investment and optimize the allocation and utilization of health funds.** Health financing is critical to achieving UHC, shapes the equity, affordability, and accessibility of health services, and serves as drivers of inclusive, sustainable economic growth, particularly in developing economies. Recognizing that each economy determines its own path toward UHC, increased government funding for health services, especially in gender-sensitive PHC services, should align with economic and demographic shifts, and be in accordance with its development contexts and priorities. Economies can apply innovative health financing approaches, and governments can invest in improved health accounting, that encourages integration of holistic gains through health expenditure, and more equitable and efficient financing and improve accountability oversight on resource allocation and budget execution. The APEC economies intend to emphasize the following actions in order to increase health investment and optimize the allocation and utilization of health funds:

- Promote UHC through encouraging a broad and diversified health financing sources to lay a solid foundation for sustainable and inclusive growth in the long-term;
- Explore strategic purchasing based on HTA, improve payment methods towards various

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<sup>4</sup> WHO, A72/13, Universal health coverage, Universal health coverage Community health workers delivering primary health care: opportunities and challenges -Report by the Director-General, 25 March 2019.

bundled and prospective payment systems, and align financing incentives to leverage more prevention, health promotion and other PHC services. This will help reduce unnecessary hospitalizations and the incidence of catastrophic health spending; and,

- Encourage technical cooperation and exchange between economies to assist efforts to achieve UHC.

**4. Improve equity in access to health services and health financial risk protection.** Health inequities arise from the societal conditions in which people are born, grow, live, and work, referred to as social determinants of health. UHC is an important component of poverty reduction, justice and social equity and harmonization. Special attention should be paid to meeting the basic needs of and ensuring the financial risk protection for vulnerable populations or those in vulnerable situations who have difficulties in accessing health care services due to geography, ethnicity, race, gender, age, economic status, migration and other reasons. It is important to also implement and monitor policy interventions aimed at preventing illness-related impoverishment among these groups. Furthermore, we also emphasize the need for an adequate and efficient pool of competent human resources for health and the equitable distribution, to ensure that all populations have access to essential quality health services at appropriate levels of care.

**5. Empower individuals, families and communities, and expand social participation and international cooperation to embrace UHC.** Individuals, families, communities, civil society organizations, and private sector are critical forces for moving towards UHC; other pathways forward include expanding social participation and strengthening international cooperation. The APEC economies emphasize the importance of the following actions:

- Explore and improve the ways to empower these stakeholders to enhance their capabilities and effectiveness in facilitating people’s self-management of health, their participation in agenda setting, policy and guidelines development, as well as contribution to policy and programs implementations related to UHC, and enhancing the accountability of the governance on social determinants of health; and,
- Strengthen development cooperation on health security issues, including pro-actively and effectively preventing and responding to health emergencies, managing cross-border transmission of diseases and health risks, as well as on UHC knowledge and experience sharing, and technical exchanges, to form a more diversified and robust approach to improve global health.

**6. Promote preventative health care services, including the promotion of immunization across the life course.** Health promotion and prevention services for chronic and infectious diseases are a core component of a comprehensive approach to UHC. Vaccination is a key public health tool for achieving UHC. Political commitment to improving access to cost-effective vaccines, addressing vaccine hesitancy, and strengthening the systems and policies that support a resilient vaccine ecosystem should be a priority. The APEC economies plan to highlight the following

actions in order to promote immunization and preventative health care services:

- Develop ambitious but attainable immunization plans and allocate adequate financial and human resources, expand immunization monitoring and quality supervision system, in keeping with APEC economies' legislative and policy frameworks and aligned with their health plans;
- Reduce barriers and improve confidence towards immunization through policy frameworks, including health provider education, community-driven awareness/education programs, dialogue, non-financial incentives, and reminders to vaccinate, which address the social determinants of immunization knowledge, attitudes and beliefs as well as psychosocial and socioeconomic support.

We have a long way to go to achieve UHC and there is no universal path. We urge all economies to cooperate with international organizations to reshape and strengthen their health systems, guided by health target 3.8 (Achieve UHC) of the UN 2030 Sustainable Development Goal. To do this, a whole-of-government whole-of-society, and whole-of-the world approach should be adopted, to ensure that all people have equitable and convenient access to the people-centred, quality, effective and efficient, continuous and integrated essential health services they need with necessary health financial risk protection to prevent suffering financial hardship.