



**Statement by
DR. CARLOS CORREA
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OF THE SOUTH CENTRE
TO THE HIGH-LEVEL MEETING ON
UNIVERSAL HEALTH COVERAGE
THE UNITED NATIONS
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Chairperson,

It is an honour to address this High-level Meeting on Universal Health Coverage (UHC) on behalf of the South Centre.

The South Centre is the inter-governmental organization created by developing countries, with currently 54 member States, to undertake policy-oriented research and promote collaboration in pursuing their common interests in international affairs, while recognizing the diversity in their realities and development strategies.

While UHC is part of the Sustainable Development Goals (Goal 3.8), in accordance with the World Health Organization (WHO)'s UHC Global Monitoring Report (2017), much remains to be done to achieve UHC at the global level, notably

- “At least half of the world's population still does not have access to quality essential services to protect and promote health”.
- “800 million people are spending at least 10 percent of their household budget on out-of-pocket health care expenses, and nearly 100 million people are being pushed into extreme poverty each year due to health care costs.”

We acknowledge that access to health is a human right and that UHC is essential to achieve health for all. We adhere to the sustainable development principle of *Leaving No One Behind*, which gives priority to the most vulnerable members of the world's population - children and women, those affected by emergencies, refugees and migrants, marginalized, stigmatized and minority populations, living in extremely difficult circumstances.

It is often unclear where the funding for the implementation of UHC will come from and how developing countries that face budgetary constraints can achieve and sustain it. There are no magic solutions when resources are lacking and the costs of treatments are unaffordable. If conceived as a way of realizing human rights, an UHC system must reach all. Hence, States should ensure through public funding, based on solidarity and the fair redistribution of wealth, that nobody is deprived from health

care.

UHC requires the public provision of essential medicines. Expenditures on medicines and other pharmaceutical products can be catastrophic and a significant driver of poverty and indebtedness in low- and middle- income countries. As noted by the WHO, spending on pharmaceuticals represents “15 to 30% of health spending in transitional economies and 25 to 66% in developing countries. In most low income countries pharmaceuticals are the largest public expenditure on health after personnel costs and the largest household health expenditure.”¹ It is indispensable, therefore, to implement policies that promote competitive markets for pharmaceuticals, particularly in the area of procurement, regulatory approvals (including biologicals) and intellectual property.

In this regard, the High-Level Panel on Access to Medicines established by the United Nations Secretary-General recommended in its landmark 2016 report, *inter alia*, that governments make use of the available space in the Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS) to apply rigorous definitions of invention and patentability standards and use other flexibilities allowed by the Agreement. The South Centre offers its technical support for the effective use of TRIPS flexibilities to promote access to medicines.

The South Centre notes the recognition, in the draft political declaration, of the responsibilities of governments as well as of their right to choose their own path towards achieving UHC. This includes deciding which stakeholders, whether public or private, will be involved in its implementation. There is a need to support at the national level the models of UHC systems that have historically demonstrated their ability to allow a true universal and equitable access to health care. There is also a need for enhanced international cooperation, notably in the fight against Antimicrobial Resistance (AMR), including through an increased support to developing countries to address its multiple causes and effects. AMR is a global challenge that calls for a global solution.

The South Centre will continue to support developing countries as they design and implement measures to achieve UHC and to find solutions to the global challenges faced by the international community.

Thank you.

¹ https://www.who.int/medicines/services/essmedicines_def/en/