



PARLIAMENTARIAN GUIDE

6 ACTION STEPS TO ACHIEVE UNIVERSAL HEALTH COVERAGE



Global Parliamentarians Supporting Universal Health Coverage



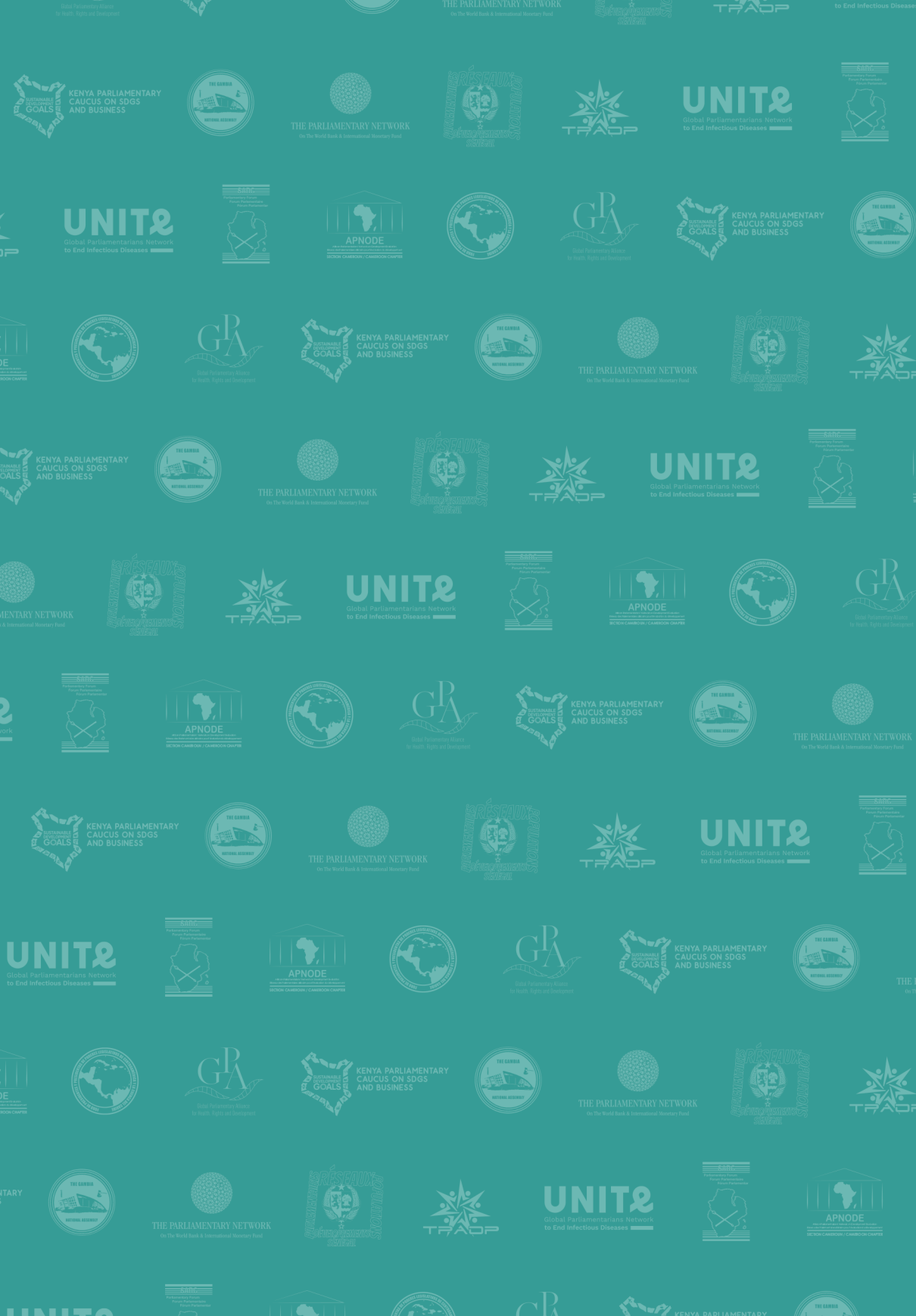


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The Parliamentarian Guide on Universal Health Coverage (UHC) is a politically neutral capacity-building resource that enables members of parliament to focus and reflect on what they can do within their mandate to advance the objectives of key global health policy frameworks. It is designed to encourage political responsiveness to health and health-related concepts and seeks to guarantee accountability across all facets of health.

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We hope this capacity-building resource, initiated by African Parliamentarians, is valuable and that it will be used by all political parties across the globe to accelerate the achievement of UHC by 2030.

Introduction

Parliaments are the central institution through which laws are created and governments are held accountable. Parliamentarians, through their mandate, have the obligation of converting citizens' aspirations into legislation and the responsibility of translating policy commitments into measurable actions. Their power is actualised through the establishment and sustenance of political direction, budget appropriation, international law ratification, pre- and post-legislative scrutiny, oversight and accountability. While their power and mandate are clear, parliamentarians evidently operate within an intricate ecosystem of electorate aspirations and competing political ambitions.

The UHC Parliamentarians Guide is a politically neutral capacity-strengthening tool that enables members of parliaments (MPs) from all political parties to focus and reflect on what they can do within their mandate to advance the objectives of key global health policy frameworks. It is designed to encourage political responsiveness to health and health-related concepts, and seeks to guarantee accountability across all facets of health. The guide presents a step-by-step guide to achieving Universal Health Coverage (UHC) for parliamentarians and a compendium of ten modules to learn about the history of global efforts to address specific health agendas, the role of parliamentarians and recommendations to strengthen health programmes to respond to population needs. The step-by-step guide helps MPs translate global commitments on UHC into concrete country actions through six steps: Lead, Protect, Legislate, Advocate, Invest and Collaborate. Each module enhances parliamentarians' understanding of specific health policy frameworks and highlights the role that parliamentarians can play to accelerate the progress of a specific health programme as an essential health package of UHC. Compelling recommendations are made to guide actions and initiatives that parliamentarians may undertake to realise success under each module.

This project aims to accelerate progress and generate political and financial momentum towards the achievement of UHC by inspiring subject-matter sensitivity and accountability around health and health-related concepts.

This guide is no substitute for deeper policy analysis; however, it provides space within which conversations, and process considerations can be made to accelerate ratification, domestication, financing and monitoring of key clauses containing global frameworks. It can also help set targets and timelines and even support parliamentarians in organising multi-sectoral monitoring mechanisms to achieve critical development targets, particularly in this era where nations are grappling with the economic and public health impacts of the global COVID-19 pandemic.



Why is Achieving Universal Health Coverage an Important Political Agenda for Parliamentarians?

Universal Health Coverage (UHC) ensures all people, everywhere, can access quality, essential and affordable health services and is the core driver of the [UN Sustainable Development Goal 3: Good Health and Well-being](#) (SDG3). Moving towards UHC requires strengthening health systems, including creating robust public financing structures and pooling funds from compulsory funding sources and supporting the availability, accessibility, and capacity of healthcare workers to deliver quality, people-centred, integrated care. It also requires life course approaches and a focus on primary health care (PHC) as a step zero for achieving UHC. To achieve UHC, all global leaders and other stakeholders must come together to ensure coherent action and to build trust and accountability by widening participation in health governance at all levels.

For the achievement of UHC, gender equality is critically important to redress gender power dynamics and ensure and protect women's and children's rights, including: supporting women's empowerment in the health workforce, advancing sexual and reproductive health, changing harmful gender norms, and eliminating political, economic and social gender barriers that prevent all people from enjoying their right to health. We urge political leaders to recommit to gender equality as one of the foundational principles for UHC.

Additionally, the COVID-19 pandemic has a huge impact on health systems, economies and the lives, livelihoods and wellbeing of people and communities around the world. This is a reminder that leaders must recognise the interconnectedness of UHC and health emergencies and remember their UHC commitments. It is also essential to promote strong and resilient health systems for enhancing health emergency preparedness and response.

A Parliamentarian's Role in Delivering the Right to Health

Parliamentarians play an important role in advancing the UHC agenda and they have the ability to deliver the right to health to all the constituents of their nation. In developing laws and legislation and ensuring an adequate budget for those laws to be implemented, parliamentarians are able to prescribe an essential package of primary health care services that underpin a national UHC strategy. Keeping the right to health at the centre of health policy and legislation means ensuring that sufficient resources are allocated so that no one is left behind.

Strategic Advocacy Pillars on Universal Health Coverage

PILLAR I: Build political support and grassroots demand for UHC at the country level to motivate policies and investments that leave no one behind.

PILLAR II: Develop national action plans, define measurable results and celebrate steps forward.

PILLAR III: Support a broad, inclusive and cohesive advocacy community to maximise the reach, coordination and impact of UHC advocacy.

There are key action steps that are aligned to each pillar to provide more guidelines on how you, as parliamentarians, can work to advance UHC Commitments in your country.

Action Steps for Parliamentarians to Achieve Universal Health Coverage

The following 6 steps provide a framework to create an agenda, set milestones and take action for achieving UHC by 2030 through the following six steps.



STEP 1: LEAD

Ensure Political Leadership Beyond Health – Commit to achieving UHC for healthy lives and wellbeing for all at all stages, as a social contract.

- **Implement** policies through a health-in-all-policies approach that comprehensively address social, economic, environmental and other determinants of health.
- **Prioritise** health promotion and disease prevention through public health policies, good governance of health systems, education, health communication and health literacy, as well as healthy cities.
- **Provide** strategic leadership at the highest political level and promote greater policy coherence and coordinated actions through all levels of government.
- **Set** measurable national targets and strengthen national monitoring and evaluation platforms to support regular tracking of the progress and to evaluate the impact of policies and programmes.



STEP 2: PROTECT

Leave No One Behind – Pursue equity in access to quality health services with financial protection.

- **Establish** resilient, responsive and inclusive health systems that are accessible to all, irrespective of socioeconomic or legal status, health condition or any other factors.
- **Pursue** efficient health financing policies that respond to unmet needs and eliminate financial barriers to access.

- **Establish** health systems that promote equity, reduce stigma and remove barriers based on multiple types of discrimination.
- **Ensure** to reach the furthest behind of populations, including vulnerable people, and empower them by addressing their physical and mental health needs.



STEP 3: LEGISLATE

Regulate and Legislate – Create a strong, enabling regulatory and legal environment responsive to people’s needs.

- **Strengthen** legislative and regulatory frameworks that promote responsiveness and inclusiveness of all stakeholders.
- **Implement** national quality control mechanisms or minimum national quality health service standards.
- **Build** effective, accountable, transparent and inclusive institutions at all levels to end corruption and ensure good governance.
- **Improve** the availability, affordability and efficiency of health products by increasing transparency of prices across the value chain.



STEP 4: ADVOCATE

Uphold Quality of Care – Build quality health systems that people and communities trust.

- **Implement** effective, quality-assured, people-centred interventions with measures built in for quality assurance and optimisation.
- **Strengthen** the capacity for health interventions through assessment, data collection and analysis to achieve evidence-based decisions at all levels.
- **Invest** in health technology innovation, including the promotion of digital health tools and AI to provide new opportunities to respond to the unique needs of each person.
- **Scale-up** efforts to promote the recruitment, training and retention of health workers, especially in rural, hard-to-reach and underserved areas.



STEP 5: INVEST

Invest More, Invest Better – Sustain public financing and harmonise health investments.

- **Set** nationally appropriate spending targets for investments in health consistent with sustainable national development strategies that ensure the efficient and equitable allocation of resources.
 - **Prioritise** debt restructuring to address the debt sustainability challenges faced by many countries.
 - **Ensure** sufficient domestic public spending on health and pool health financing to maximise efficiency and ensure that everyone can access the health services they need without financial hardship.
 - **Foster** strong alignment among global health stakeholders and development partners to support financing mechanisms.
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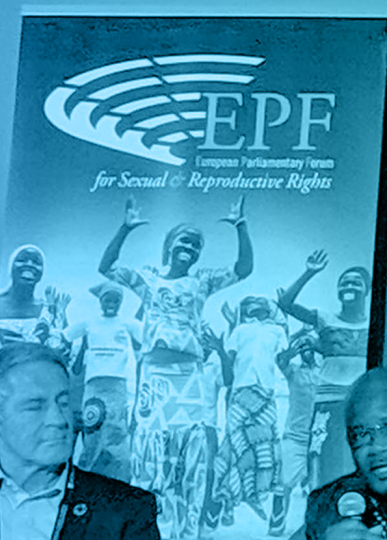
STEP 6: COLLABORATE

Move Together – Establish multi-stakeholder mechanisms for engaging the whole of society for a healthier world.

- **Enable** and **introduce** processes for the structured and meaningful engagement of diverse stakeholders, including government, civil society, the private sector, youth and academia.
- **Empower** individuals, families, communities, local providers and civil society organisations by strengthening and enhancing community capacity to get involved in decision-making and accountability processes.
- **Improve** health literacy, legal and systems literacy and capacity for health decision-making through a multi-sectoral approach at the local level.
- **Revitalise** and **promote** strong global partnerships with relevant stakeholders to collaboratively support the efforts of Member States.

WOMEN DELIVER 2019 CONFERENCE

Vancouver, Canada



The role of the law in upho

SIDE EVENT

6 June 2019 | 5-7 pm | Room 208-2

The event will bring together parliament and reproductive health and rights (SRHR) to discuss the real impact of laws in upholding or undermining SRHR and how laws are truly responsive to human rights obligations.



World Health
Organization



Ensure political leadership beyond health

Commit to achieve UHC for healthy lives and well-being for all at all stages, as a social contract.



Leave no one behind

Pursue equity in access to quality health services with financial protection.



Legislate and regulate

Create a strong, enabling regulatory and legal environment responsive to people's needs.



Uphold quality of care

Build quality health systems that people and communities trust.



Invest more, invest better

Sustain public financing and harmonize health investments.



Move together

Establish multi-stakeholder mechanisms for engaging the whole of society for a healthier world.

← Emphasize gender equality, redress gender power dynamics and ensure women's and girls' rights as foundational principles for UHC.



Gender equality



→ Promote strong and resilient health systems for enhancing health emergency preparedness and response.

Emergency preparedness

Make the commitment today to place UHC at the forefront of your political agenda and objectives.

The Political Declaration on Universal Health Coverage: "Moving Together to Build a Healthier World"

In September 2019, world leaders endorsed the most ambitious and comprehensive political declaration on health in history at the [United Nations High-Level Meeting on UHC](#) (UN HLM). The day of the UN HLM was filled with optimism, as leaders reaffirmed their commitments to achieve UHC and ensure healthy lives and wellbeing for all by 2030. Following the political declaration, a [resolution](#) was also adopted by the 141st [Inter-Parliamentary Union](#) (IPU) Assembly in October 2019, calling for parliaments to take all legal and policy measures to achieve UHC by 2030. The resolution urges parliaments to put in place effective UHC legislation to ensure that the right to public health and medical care is guaranteed for all in law and in practice, without discrimination.

We all have a critical role to play in ensuring that leaders are held accountable for their promises and that their words translate to action. The first step is knowing exactly what leaders committed to during the UN HLM. UHC2030 summarised the key targets, commitments and follow-up actions contained within the [UHC Political Declaration for the UN HLM in 2019](#), in relation to the Key Asks from the UHC movement. To learn more about the agreed UHC Commitments in 2019, please visit the [UHC Commitment page](#) on the [UHC Day campaign microsite](#) (NOTE: International UHC Day is December 12).

In 2020, UHC2030 also initiated the [State of UHC Commitment](#) to curate diverse views of a range of stakeholders on the current situation and commitments to progress towards UHC by 2030. The first review was published in December 2020, including an online dashboard on the [UHC Data Portal](#), which provides a snapshot of both the state of individual country UHC commitments and an overview of global progress to facilitate cross-country comparisons.

We all have a critical role to play in ensuring that leaders are held accountable for their promises and that their words translate to action.



Roles of Parliamentarians in Specific Health Agendas

The concept of UHC has been developed as a political tool to unite various health agendas, prioritise health as political agenda and encourage governments to invest more and better in health. Achieving UHC does not compete with but instead makes meaningful and positive inroads for all areas of health. This includes improving more integrated coverage across wider populations and focusing national governments on domestic resource mobilisation. In low- and middle-income countries, receiving official development assistance can free up limited donor resources for more targeted, last-mile, vertical health programmes. Furthermore, the human rights imperative of the SDGs implores us to support the notion that everyone is entitled to the quality health services they need without facing financial hardship. UHC supports programme-specific health initiatives in the following ways:

- **Promoting** the availability of health services by driving functioning health systems and consequential government commitments to health.
- **Advancing** the right to health and universal access to quality, affordable services.
- **Ensuring** that “leave no one behind,” one of the key principles of the SDGs, underpins all work in health.
- **Encouraging** governments to deliver health services based on principles of human rights, equity and need, and guiding governments to increase and/or make available the resources needed to achieve this.



UHC LEAVES NO ONE BEHIND.

Let's work
together towards
good health and
well-being for all.



The Coalition of
Partnerships for UHC
and Global Health

The 2023 UN HLM will be a significant opportunity for Heads of State to reaffirm their commitment to UHC and to recognise the role of UHC as an overarching umbrella for SDG 3: good health and well-being. Recognizing the need for greater collaboration and harmonisation across health stakeholders and programmes, the [Coalition of Partnerships for UHC and Global Health](#) was established in the 2021 UN High-Level Political Forum on Sustainable Development to unite health leaders and advocates in a common goal to align advocacy and accountability efforts to achieve UHC and advance the SDGs.

The following are the roles of parliamentarians in specific health agendas, according to each country's situation and population demands. To learn more about the history of global efforts to address certain health agendas, parliamentarian's roles, and recommendations to strengthen health programmes to respond to population needs, please read each module in the annex.

1. Primary Health Care

P rimary Health Care (PHC) is an approach that includes services delivered to individuals and communities with a focus on health promotion, disease prevention, health equity and community involvement. Rooted in the community, PHC is inter-professional, integrated and coordinated, and it puts people first with the aim of improving the health of the entire population. While PHC is grounded in a community development approach, it is deeply affected by national policies, budgets and approaches.

COVID-19 has taught us that PHC, embedded in a robust health system, can be better prepared to prevent, detect and respond to infectious diseases and epidemics. Keeping the right to health at the centre of any PHC package ensures that it is accessible, equitable, safe, of high quality, comprehensive, efficient, acceptable, available and affordable. It also ensures that health systems are able to deliver continuous, integrated services that are people-centred and gender-sensitive.



THE ROLE OF PARLIAMENTARIANS

- **Encourage** the adoption and use of PHC Initiatives (e.g. [PHCPI](#)) to navigate the challenging task of measuring the various population health metrics and identify priority needs and areas for improving PHC as the backbone of UHC.
- **Mobilise** stakeholders to tackle the economic, social and environmental determinants of health and lobby for the full achievement of equal socioeconomic opportunities for all.

- **Allocate** funding and provide oversight to ensure the removal of long-standing barriers to PHC so that all citizens have access to affordable, integrated, people-centred and gender-sensitive services.
- **Advance** policy, strengthen regulation and finance infrastructure to ensure the delivery of high-quality PHC services as a priority pillar of a national health policy. High-quality PHC is the outcome of strong service delivery and the result of well-organised and managed services, backed by a strong system and adequate inputs, such as human resources, infrastructure, drugs and supplies.
- **Prepare** and **ensure** the delivery of essential and timely health services in times of calm and in times of crisis.

2. Health Systems Strengthening

Health Systems Strengthening (HSS) comprises the key means to achieve UHC. Health systems are commonly understood as all the public and private organisations, institutions and resources mandated to improve, maintain and restore health. The [joint vision for healthy lives](#) outlines the scope of health systems performance and indicates policy entry points through which HSS can advance UHC.

Within the framework of the joint vision, parliamentarians must consider three essential policy areas for health systems.

Service delivery, or the point at which people interact with their health systems. Actions to strengthen HSS in this context include the expansion of frontline services and investment in skilled health workers, and improving access to medicines and health technologies, to name a few.

Health financing, an area that entails providing the necessary resources so that health systems can adequately address people’s health needs. This can be achieved by strategic purchasing, expansion of pooling arrangements and progressive taxation to prioritise health.

Governance, to provide a solid foundation for collective decision-making in health that is based on principles of transparency, accountability, participation, integrity and capacity. Fostering citizen’s platforms, promoting freedom of information and expanded use of quality data and adopting legal frameworks to support access to quality health services are just a few of examples of how to bolster inclusive and effective health systems.



THE ROLE OF PARLIAMENTARIANS:

- **Act** on behalf of constituents so that constituents' needs are addressed by engaging relevant stakeholder groups. Ensure people-centred service delivery, in line with the 2030 agenda commitment to 'leave no one behind', particularly by ensuring vulnerable and marginalised groups and people affected by diseases can benefit from UHC progress.
- **Ensure** governments are held accountable and promote transparency for UHC progress by keeping track of relevant indicators such as SDG [indicators](#) 3.8.1 on coverage of essential health services and 3.8.2 on financial protection.
- **Allocate** public resources through national budgets and the design and approval of legislation with country-specific solutions in mind.
- **Ensure** vulnerable and marginalised groups and people affected by diseases are included in multi-stakeholder policy dialogues.

3. Budget Appropriation and Accountability

The legislative role in economic and budget matters is defined in public finance management instruments and operationalised through an elaborate fiscal architecture that primarily includes Parliament, the National Treasury, the Controller of Budget, the Commissions on Revenue Allocation, and the Auditor General. The annual budget is the primary funding instrument that countries can use to fund their national health policy and strategy. Improving budget efficiency requires linking expenditures to information and moving from passive to active support to all elements of the health system.

Mechanisms and approaches at the parliamentary level include interrogating the use of public funds for better transparency and accountability, from budget preparation to financial monitoring and allocating resources toward inputs and services. Dialogue between parliamentary champions and the relevant budget committees at various stages of the budget cycle is key in strengthening oversight. The rapid response to COVID-19 has also demonstrated new ways for the public and the private sectors to work together, and these need to be explored to advance and augment financial resources and capacity for the public good.



THE ROLE OF PARLIAMENTARIANS:

- **Plan** and **manage** financial resources to support the implementation of various programmes and projects that best promote the development of the country.
- **Identify** gaps and weaknesses where they exist, in accordance with the issues or priorities conveyed by constituents.
- **Prioritise** and **implement** responsive and impactful health programmes and policies within the country's financial capability and as dictated by the prevailing economic conditions. Parliamentarians have a mandate to conduct budget advocacy, analyses, amendments and performance monitoring.
- **Advocate** for the prioritization of health, even before the budget preparation process.
- **Contribute** proactively to the budget estimation and review process, which is intended to facilitate the review of the proposed budget with government input.
- **Advocate** for integrated budget documents that include comprehensive details on domestic revenue, macroeconomic indicators and Official Development Assistance, in view of giving clarity and visibility on state finances.
- **Assist** in improving aid flows as envisaged under the 2005 Paris Declaration, and ensure accountability and openness on the use of aid funds.
- **Ensure** that international yardsticks on development effectiveness are adopted, such as during the High-Level Political Forum on Sustainable Development and in The Addis Ababa Action Agenda.
- **Adopt** and **use** [UHC2030's toolkit](#), which helps strengthen the capacities of parliamentarians, civil society and media for health budget literacy, advocacy and accountability.

4. Global Health Security

Global health security (GHS) can be achieved with strong and resilient public health systems that can prevent, detect and respond to infectious disease threats wherever they occur in the world. Increasingly, however, the fundamental interdependence between GHS and UHC suggests the need to expand the definition of GHS beyond emerging infectious diseases. A public health crisis such as



the devastating COVID-19 pandemic and inadequate health systems combined have demonstrated how governments can be destabilised and public trust and confidence eroded, posing a significant risk to national and global security and economies. Multi-sectoral action and meaningful partnerships are critical to improving health and mitigating risks that may arise from the accidental or intentional release of chemical, biological, radiological and nuclear weapons. Public health, national security, economic stability and human capital development are inextricably linked. Progress in GHS requires having metrics that are regularly monitored, reported and evaluated.

Beyond the immediate impact of the pandemic itself, COVID-19 has shown the convergence of health security, non-communicable and communicable disease risks, including mental health, and environmental degradation and their impact on the most vulnerable. The progress achieved in recent decades towards improving physical and mental health outcomes and reducing health inequities is now at risk due not only to COVID-19, but more fundamentally to critical under-investment in Common Goods for Health (CGH). CGH are the core population-based functions or interventions that are essential to the health and wellbeing of entire societies, such as integrated disease surveillance systems, disease prevention and public health policies and strategies, health and environmental regulations and regulatory systems, and public health and emergency management institutions.



THE ROLE OF PARLIAMENTARIANS:

- **Support** improving emergency preparedness response systems and mechanisms that are integral to infectious disease control and health systems strengthening. Negotiate and adopt normative rules for the surveillance, diagnosis and reporting of public health emergencies towards the attainment of a new era of global health governance.
- **Address** issues of inadequate compliance with global health security standards and poor oversight and accountability of finances expended during emergencies and crises.
- **Engage** with national health, finance and other authorities, as well as with the public more broadly, in investing in CGH.
- **Address** underprovided CGH functions and establish systems that support health security, preparedness and resilience.

5. Immunisation

Immunisation is linked to 14 out of 17 SDGs. [The Immunization Agenda 2030](#) sets an ambitious, overarching global vision and strategy for vaccines and immunisation for 2021–2030. It is based on a conceptual framework of seven strategic priorities to ensure that immunisation fully contributes to stronger PHC for achieving UHC by 2030.

Despite the knowledge and availability of vaccines and the successes generated by expanded immunisation programmes, millions of children and adults die each year from vaccine-preventable diseases. The critical challenge for most nations now is how to reduce vaccine resistance in emerging complex populations to ensure effective uptake and to fully secure and provide funding for vaccine procurement. The development of innovative outreach systems, as well as sustained government commitment and parliamentary lobbying and advocacy to fund such innovations, is crucial. The time to act is now, and action is required by every person, everywhere.

THE ROLE OF PARLIAMENTARIANS:

- **Support** the provisioning of a direct line within the health budget and ensure the necessary resources to deliver vaccines and training for community-level health workers and to implement vaccine campaigns. As vaccination can be given in combination with other health interventions, it represents a vehicle for pooled resources, including supply chain management and procurement of commodities that are useful for other services beyond vaccination.
- **Determine** whether new vaccines that are entering the WHO-recommended schedule for routine immunisation are needed for their respective populations. Support legislation that emphasises the effective integration of vaccines with other essential health services to ensure that vaccine benefits are enjoyed throughout the life course. While the current health systems are mainly structured for childhood vaccines, the age cohort requiring vaccination is ever-expanding.
- **Implement** a robust legal framework for preventive care and ensure adequate domestic investments for sustainable research and development so that vaccines are available, equitably distributed and affordable.
- **Establish** a broad and diversified revenue base with the financial capacity to raise sufficient resources, understanding the extent of the gap between what international assistance provides and what their own national budgets can offer. Consideration should be taken when designing domestic financing for immunisation as an effort not just for prevention of infectious disease but to also to secure financial protection for poor and vulnerable groups.

6. SRHR and RMNCAH-N+FP

Every year, 293,000 women worldwide die from preventable maternal causes. This is a source of shame for the global community and the most extreme example of the violation of women and children's rights. Two regions, Sub-Saharan Africa and South Asia, account for 86% of maternal deaths worldwide. Sub-Saharan Africa suffers the highest maternal mortality, with an average of 200,000 maternal deaths a year. This is unacceptable and preventable; for instance, the use of contraception alone can substantially reduce pregnancy-related health risks for women. With UHC increasingly receiving global attention, there is a unique opportunity to ensure that UHC efforts incorporate Sexual and Reproductive Health and Rights (SRHR) interventions that are grounded in evidence and based on human rights principles. SRHR is at the centre of UHC and is critical for achieving the SDGs.

To effectively meet the SRHR needs of people, we must take a comprehensive approach. To deliver on SRHR and reproductive, maternal, newborn, child and adolescent health and nutrition and family planning (RMNCAH-N+FP), health and political systems require a combination of "Continuum of Care" and "Protection of Rights" structures that work effectively to meet the needs of populations. The integration and better coordination of SRHR and RMNCAH-N+FP in health and policy interventions and programmes play an important role in improving health and wellbeing for all. Delivering on SRHR and RMNCAH-N+FP requires ensuring that citizens are free to make their own choices about their bodies without any forms of discrimination, stigma, violence or coercion. Another crucial element is the establishment of resilient health systems, which allow for task shifting to different facilities and community-based cadres to deliver quality health care and services.

Parliamentarians must ensure that three cross-cutting principles are integrated into essential SRHR interventions: equitable access, quality of care and accountability. These are key to reaching a comprehensive approach to SRHR and to advancing both the SRHR aspects of Agenda 2030 and health system reforms.



THE ROLE OF PARLIAMENTARIANS:

- **Encourage** budget allocation and investments to accelerate the realisation of international and regional SRHR and RMNCAH-N+FP commitments – including increasing domestic funds for the purchase of contraceptive products (on average 10% per year) – to fulfill global and regional promises such as the [International Conference on Population and Development](#) (ICPD) and [Family Planning 2030](#) (FP2030).
- **Ensure** that efforts towards achieving UHC are anchored on principles of equity, equality, social justice and the right to health for all. SRHR is an essential element of UHC and an integral part of the right to health for all.

- **Use** evidence and data in decision-making. UNFPA, EPF, the Ouagadougou Partnership, FP2030 and other partners have produced a number of country dashboards that provide a snapshot of an individual country's progress and areas for improvement in delivering on the ICPD25 agenda.

7. Gender Equality

Millions of girls and women are currently “invisible”, preventing them from fully participating in their communities and restricting their access to rights and opportunities. Their invisibility is exacerbated by incomplete, missing or underutilised data about the barriers that girls and women face, their potential to transform societies, and what works to improve their wellbeing. The challenges that women and girls face are intersectional, complex and systemic, and are more deeply felt at the bottom of the socioeconomic pyramid. Girls deprived of opportunities at home are vulnerable in their communities and marginalised in society.

While social integration and inclusion play an essential role in accelerating progress for the achievement of gender equality, deep-rooted obstacles characteristically exclude the poorest and the disadvantaged from participating and accessing opportunities for economic growth and financial independence. The disempowerment and exclusion of marginalised and underserved populations, including children, youth, women, people with disabilities and older people, restricts their ability to participate in decision-making and prevents them from influencing policy processes at all levels. It is important for parliamentarians to recognize and call out any policy and legislative provisions or practices that marginalise and limit the rights of vulnerable populations as a result of class, disability status, country, religious affiliation, ethnic background, gender or any other identifier. Of the 17 SDG goals, 3, 5, 10 and 16 stand out as essential in achieving gender equality both among the population and in parliament. The role of parliamentarians is best articulated in Goal 16, which aims to “promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels”.

THE ROLE OF PARLIAMENTARIANS:

- **Develop** “effective, accountable and transparent institutions at all levels” as well as “responsive, inclusive, participatory and representative decision-making at all levels”. In some countries, this has been translated to a quota system, where a certain percentage of seats in parliament are reserved for women. Demand evidence and

use gender statistics to close gaps, in line with provisions adopted by the Beijing Platform for Action in 1995, the Political Declarations of the Commission on the Status of Women, and the Sustainable Development Summit in 2015.

- **Promote** social integration by fostering societies that are stable, safe and just, and that are based on the promotion and protection of all human rights, as well as on non-discrimination, tolerance, respect for diversity, equality of opportunity, solidarity, security, and participation of all people, including disadvantaged and vulnerable groups and persons, in line with the provisions of the World Summit for Social Development and the outcome of the twenty-fourth special session of the General Assembly.
- **Participate** actively in dedicated parliamentary committees, networks and caucuses, which have had considerable success in initiating gender equality laws and in ensuring other legislation does not discriminate against any gender.
- **Establish** collaborative relationships, both among parliamentary committees and outside institutions, in academia, business and civil society. Applying a gender lens to legislation can help parliamentarians see the nuances and need for differentiation in approaches as part of agenda-setting, legislative review and gender-responsive budgeting. Only in this way can meaningful legislative action be taken to eliminate gender-based violence, increase access to SRHR throughout the life-course, advance girls' education and increase women's participation in leadership and governance.
- **Build** accountability mechanisms that ensure evidence and disaggregated data by sex, age and disability are made publicly available. This will help determine who is reached and who is left behind and how best to achieve gender equality at scale.

8. HIV/AIDS

UNAIDS statistics indicate that there were approximately 38 million people globally living with HIV in 2019. Approximately 26 million people were accessing antiretroviral therapy as of late June 2020, and 7.1 million people did not know that they were living with HIV. While records indicate a steady decline in new infections, the epidemic is far from over. The [Political Declaration on HIV and AIDS in 2016](#) adopted at the 70th session of the UN General Assembly sought to accelerate the fight against HIV as well as work towards ending the AIDS epidemic by 2030. The declaration recognises that HIV/AIDS poses a formidable challenge to the development, progress and stability of our respective societies and to the world at large.

Meeting the 2030 deadline requires an exceptional and comprehensive global response that considers poverty and inequality as causes and consequences of the spread of the virus. Urgent and exceptional action is required at all levels to curb the devastating effects HIV/AIDS, particularly for women and adolescent girls. The compounded effect that COVID-19 has brought on already vulnerable populations requires that parliamentarians provide decisive leadership, sustain funding commitments, take strategic oversight action, and support the optimisation of emerging digital tools and technologies to help inform, educate, reform and accelerate progress in HIV/AIDS prevention, treatment, care and support.

THE ROLE OF PARLIAMENTARIANS:

- **Initiate** and **promote** the evidence- and rights-based HIV responses that are crucial to achieving universal access to HIV prevention, treatment, care and support for all. With the right investments, parliamentary response to HIV/AIDS could make the goal of an “HIV-free generation” a reality. Strong policies and a favourable political environment are key to capitalising on this moment of opportunity.
- **Support** legal and policy frameworks that respect, protect and fulfil the rights of people living with, at risk of and affected by HIV throughout their life-course, in all relevant settings. In addition, lead a coordinated national response to HIV/AIDS that rejects criminalisation and discrimination of people living with HIV/AIDS.
- **Strengthen** legislation and financing to research institutions invested in the development of long-acting treatments, cures and vaccines as well as of new treatments to address drug-resistant strains. This includes the review, development and prioritisation of new policies and regulations revolutionising interventions that increase access to antiretroviral treatment, pre-exposure prophylaxis and harm reduction for key populations who are at high risk of acquiring HIV.
- **Strengthen** and **facilitate** the funding, efficiency and effectiveness of national, multilateral and multi-sectoral cooperation, engage people living with HIV, key populations, women and civil society groups in the policy process, and ensure that the global, regional and local response to HIV is fully integrated into a ‘One Health’ approach that is enhanced by bold political will in all areas of the continuity of care.
- Through your oversight and accountability role, **optimise** opportunities to ensure that the public health ecosystem, PHC and other systems interact seamlessly to improve access to a range of public health prevention, treatment, care, adherence and relevant social services.



METHODES CONTRACEPTIVES



Implants

Préservatif féminin

Préservatif masculin

B.C.S 25373138/70266483



Ligature des trompes



Vasectomie

9. The Human Right to Science

An important component of UHC is to promote scientific advancements and the application of those advancements so that they benefit everyone. Good science is a critical determinant of good health care. It provides the evidence and information needed for quality health care and the tools needed to deliver the best possible health services.

The Human Right to Science recognises the value of science relative to the right to health to advance UHC. It also guarantees everyone's right to participate in and benefit from scientific progress and its applications. This right provides a platform to advocate for more innovation in health care and for initiatives aimed at ensuring equitable and fair access to health care for all.

Furthermore, integrating the Human Right to Science in the UHC agenda advances the goal of promoting a human rights-based approach to health care that is informed by the principles of equity and need. It also provides a framework to ensure that more resources are allocated to health care.

THE ROLE OF PARLIAMENTARIANS:

- **Sponsor** legislation and programmes to remove barriers to access the health care benefits of scientific progress, to ensure that advancements in medicine and health care meet the highest scientific and ethical standards, and to expand educational opportunities in the STEM fields so that the public becomes more and better informed about their health and innovation in the health care sector.
- **Advocate** for expanding the human and financial resources allocated to innovation in health care. A human rights approach to science places parliamentarians in a critical position to oversee and implement laws and policies that advance everyone's rights to science.
- **Protect** vulnerable groups and remove barriers and limitations to the freedom of scientific research that is incompatible with Article 15 subsection 4 of the International Covenant on Economic, Social and Cultural Rights.
- **Review** legislation to ensure that the victims of violations have legal remedies to redress harms to their human rights and that people have access to the basic education and skills necessary for the comprehension and application of scientific knowledge. Ensure that scientific education in public and private schools respects the best available scientific knowledge. In the allocation of public resources, prioritise research in areas where there is the greatest need for scientific progress, namely in health, food and other basic needs related to economic, social and cultural rights and the wellbeing of the population, especially with regard to vulnerable and marginalised groups.

- **Adopt** mechanisms aimed at aligning government policies and programmes with the best available, generally accepted scientific evidence, and ensure that health professionals are properly trained in using and applying modern technologies and medicines resulting from scientific progress.

10. NCDs and the Digital Divide

C OVID-19 has highlighted the non-communicable disease (NCD) burden across the world, as those living with NCDs are at increased risk of becoming severely ill with the virus. NCDs are increasing globally due to an ageing global population, urbanisation, lifestyle changes, and inequitable access to healthcare. COVID-19 has severely impacted the ability of countries to address and respond to NCDs and caused broad disruptions to health services. Protecting people with major risk factors of NCDs and addressing COVID-19's impact on mental health are an integral part of the immediate response to the pandemic.

SDG target 3.4 aims to reduce premature mortality from NCDs by a third by 2030 relative to 2015 levels, and to promote mental health and well-being. Many countries have fallen behind on performance on effective coverage for NCDs compared with those for communicable diseases and maternal and child health. UHC, by definition, includes preventive, promotive, curative and rehabilitative health services, and mobilising digital solutions is particularly important for these interventions.

However, the digital divide remains a global issue, manifesting at different degrees in different regions of the world. As the world becomes more digitised, it is important to bridge this divide at the same rapid speed. The digital revolution has impacted the health care sector in many positive areas. These innovations must be enhanced in a progressive manner that allows for global digital cooperation that is inclusive, respectful, human-centred, conducive to human flourishing, transparent, collaborative, accessible, sustainable and harmonious. Shared values become even more important during periods of rapid change, limited information and unpredictability, as evidenced by current discussions of cooperation relating to artificial intelligence and COVID-19. By providing affordable access to digital health care, policymakers can ensure no one is left behind by the digital revolution and accelerate the achievement of UHC.

THE ROLE OF PARLIAMENTARIANS:

- **Ensure** the inclusion of preventive, promotive and rehabilitative services as part of the essential UHC package.

- **Advocate** for support and care of people with mental health conditions and protect their human rights and dignity in policy dialogue.
- In legislating and overseeing the digital transformation on national levels, **ensure** relevant infrastructure for digitisation is allocated in national budgets as part of the preparations for inclusive global digital cooperation.
- **Participate** in the proposed [Internet Governance Forum](#) (IGF) to build on existing strengths, including well-developed infrastructure and procedures, acceptance in stakeholder communities, gender balance in IGF bodies and activities, and an inclusive, participatory network of global netizens.
- **Adopt** specific policies to support full digital inclusion and digital equality for women and other traditionally marginalised groups. This is of particular importance in low-resource nations where digital penetration remains shallow. Policies should include targeted capacity development for increased digital literacy for female entrepreneurs and policymakers to increase digital awareness and protection from online harassment.
- **Encourage** international organisations to investigate barriers to digital inclusion and equality for women and marginalised groups, and then issue global guidelines or recommendations to promote action that lifts these barriers.
- **Collaborate** with the technology sector to make more sustained and serious efforts to address the gap in female technology employees and management and to include women's voices when determining online terms and conditions.
- **Raise** awareness among policymakers and the general public about the transformative impact of digital technologies. Identify bridges to improved digital cooperation by identifying and addressing policy, research and information gaps and searching for ways to improve interdisciplinary thinking and cross-domain action on digital technologies.

YOUTH FRIENDLY Services Centre

Young
& Empowered
& Accountable
& Healthy

CLINIC
MONDAY - FRIDAY 8.00A.M. - 5.00P.M.
SATURDAY 8.00A.M. - 1.00P.M.
SERVICES OFFERED:

- STI Screening & Treatment
- Breast Cancer Screening
- Pregnancy Test
- Curatives | Referrals
- Family Planning
- Pap smear Test
- Antenatal Care
- Postnatal Care

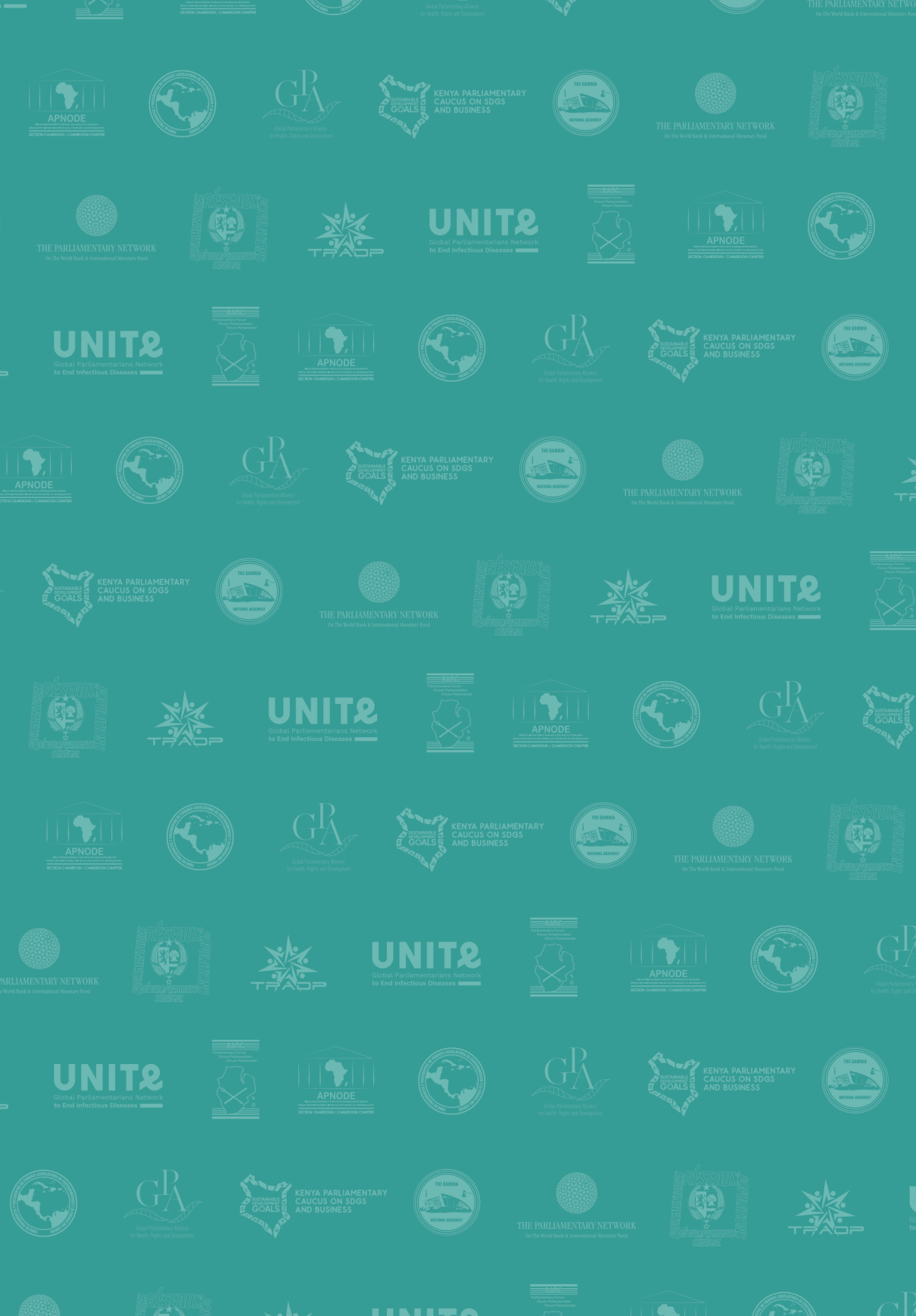
Let's say...
FAMILY PLANNING SERVICES
STI TREATMENT & PREVENTION
HIV/AIDS SERVICES



- I. [UN HLM 2019, Key Targets, Commitments and Follow-up Actions](#)
- II. [State of Commitment to Universal Health Coverage, 2020](#)
- III. [State of UHC Commitment Country Profile Dashboard](#)
- IIII. A Compendium of Ten Modules

Each module enhances the parliamentarians' understanding of specific health policy frameworks and highlights the role that parliamentarians can play to accelerate the progress of one particular health agenda under the umbrella of UHC.

- **Module 1:** Primary Health Care
- **Module 2:** Health System Strengthening
- **Module 3:** Budget Appropriation and Accountability
- **Module 4:** Global Health Security
- **Module 5:** Immunisation
- **Module 6:** SRHR and RMNCAH-N+FP
- **Module 7:** Gender Equality
- **Module 8:** HIV/AIDS
- **Module 9:** The Human Right to Science
- **Module 10:** NCDs and the Digital Divide





A capacity-building resource initiated by African Parliamentarians