



STATEMENT HIGHLIGHTING CONTRASTS BETWEEN THE 2019 AND 2023 UHC POLITICAL DECLARATIONS

REFERENCES TO HIV

In the 2023 Political Declaration (PD) on Universal Health Coverage (UHC), there are four explicit references to HIV compared to the 2019 declaration, which had three. The 2023 PD includes reaffirming previous Political Declarations on HIV and AIDS. It also acknowledges the disruptive impact of the COVID-19 pandemic on the HIV response, including referencing new HIV infection rates ([Para 5](#)). Furthermore, the declaration commits to strengthening efforts, advancing comprehensive approaches, integrating service delivery, and sustaining and expanding the achievements of the HIV response ([Para 55](#)). Unfortunately, although both Declarations reference the need to sustain multilateral organisations ([2019 Par 45, 2023 Para 89](#)), they do not include explicit, quantifiable financial commitments to bolster the HIV response, particularly concerning multilateral entities such as the Global Fund and Unitaid.

The significance of the HIV response extends beyond HIV specific initiatives; it offers valuable lessons and insights applicable to the broader UHC movement. These insights highlight the critical importance of political commitment, meaningful community engagement, the protection of human rights, and increased equitable access to essential medicines. Unfortunately, these vital aspects were not addressed in the 2019 or the 2023 Declarations.

HUMAN RIGHTS LANGUAGE

It is disheartening to observe that the language pertaining to human rights in the PDs has either stagnated or regressed. A notable regression is seen in the removal and omission of a paragraph referencing social justice that was present in the 2019 PD ([Para 56](#)). Additionally, there is a conspicuous absence of explicit references to the LGBTQ+ community and criminalised communities, such as people who use drugs and sex workers, in both the 2019 and 2023 Declarations, and there has been no discernible progress in reference to equity-related matters. In 2019, the PD explicitly stated that reproductive healthcare is fundamental to achieving UHC ([Para 68](#)); regrettably, this statement has been omitted from the 2023 version. Reproductive healthcare is inherently connected to human rights as it encompasses individuals' rights to make informed choices about their reproductive health, have access to essential services, and maintain bodily autonomy.

This trend is concerning because human rights play a pivotal role in the context of UHC. The removal of language and references related to human rights and social justice undermines the principles of inclusivity and equity that are fundamental to UHC. Furthermore, the absence of explicit references to criminalised and marginalised communities and the omission of sexual and reproductive healthcare as a fundamental aspect of UHC hinders the advancement of comprehensive healthcare services accessible to all. Human rights principles not only uphold the dignity and rights of individuals but also form the bedrock of equitable healthcare systems. Therefore, the regression in human rights language within the PDs is a cause for concern, as it may impede progress towards achieving truly universal and inclusive healthcare.

COMMUNITIES

The 2023 PD demonstrates some progress by incorporating the term "communities" thirteen times, a significant increase from the eight mentions in the 2019 PD. Moreover, it introduces new language recognising the significance of community-based health services within primary healthcare ([Para 32](#)). However, an essential differentiation lies in the absence of the term "community-led," which was missing in the 2019 PD and mentioned only once in the 2023 PD. [Para 33](#) in the 2023 PD states, "acknowledge the potential role of community-led initiatives and community engagement in building trust in health systems". The term "potential role" undermines the significance of community leadership by suggesting a mere possibility rather than acknowledging the concrete and essential contribution of community leadership. Furthermore, both the 2019 and 2023 Political Declarations do not mention community-led monitoring, which is essential for keeping healthcare programs transparent and accountable to communities. Additionally, they lack specific funding commitments for community responses.

The absence of emphasis on "community-led" in the 2023 PD signifies a missed opportunity to recognise the critical aspect of community leadership in healthcare, which is more essential than community involvement or basing health services within communities. Community leadership empowers communities to actively shape their healthcare priorities, adapt services to their unique needs, take ownership of sustainable solutions, and address longstanding power imbalances in global health, fostering a more effective and sustainable healthcare system. The rationale given by opposing member states for not including the language of 'community-led' was that it would put undue burden and responsibility on communities – a rationale that uses the language of concern to maintain power in government hands and the status quo of top-down development. Additionally, both the 2019 and 2023 PDs lack sufficient focus on funding and sustainability, vital components for the success and long-term viability of community-based health services. Therefore, while the 2023 PD takes steps toward recognising the role of communities, there remains a need for a stronger emphasis on community-led approaches, funding, and sustainability.

INTEGRATION

The 2023 PD demonstrates significant advancements in recognising the importance of integrated, person-centred care compared to its 2019 predecessor. It not only preserves but also expands upon references to this approach, emphasising its pivotal role in achieving global health targets. Additionally, the 2023 PD adopts a forward-looking perspective by acknowledging the importance of coordination across health-related processes during the United Nations General Assembly (UNGA) and future health-related High-level Meetings. This holistic approach recognises that integration should extend beyond service delivery and encompass policy and governance.

CONCLUSION

In conclusion, the 2023 UHC Political Declaration made commendable strides in prioritising person-centred care and underlining the necessity for better coordination in health-related processes. Additionally, there are increased references to HIV and increased recognition of the importance of communities. These are promising steps towards improving healthcare systems. However, it's disheartening to note that the 2023 declaration exhibited stagnation in terms of human rights, notably by failing to explicitly mention criminalised and marginalised communities. Furthermore, the 2023 declaration missed a significant opportunity to strengthen essential aspects of healthcare delivery and equity. This was evident in its failure to include vital funding commitments for multilateral organisations like the Global Fund and to place sufficient emphasis on community leadership and funding commitments for community-led responses. It is imperative that future efforts in this domain focus on addressing these deficiencies to ensure that UHC truly encompasses all aspects of healthcare, including human rights and equitable funding mechanisms.

For a full annex of the paragraphs mentioned, see [here](#).