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## ***Achieving universal health coverage by 2030: The role of parliaments in ensuring the right to health***

***Amendments to the draft resolution submitted within the statutory deadline by the delegations of Canada, China, Congo, Cuba, Finland, France, Germany, India, Iran (Islamic Republic of), Italy, Mongolia, Norway, Philippines, Serbia, South Africa, Sweden, Switzerland, Thailand, Turkey, United Arab Emirates and United Kingdom***

### **PREAMBLE**

#### Preambular paragraph 1

Amend to read as follows:

(1) *Recalling that, as defined in the Universal Declaration of Human Rights, ~~“everyone has the right to a standard of living adequate for the health and well-being of himself and of his family” and, as defined~~ affirmed in the Constitution of the World Health Organization (WHO), "the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition", and that the right to health is protected by the International Covenant on Economic, Social and Cultural Rights as well as other widely ratified international instruments, including the International Convention on the Elimination of All Forms of Racial Discrimination, the Convention on the Elimination of All Forms of Discrimination against Women, the Convention on the Rights of the Child and the Convention on the Rights of Persons with Disabilities,*

*(Canada)*

#### New preambular paragraph 2bis

Add a new paragraph after preambular paragraph 2 to read as follows:

**(2bis) Convinced that health is fundamental and is both a prerequisite for and a factor in countries' sustainable development,**

*(Congo)*

Preambular paragraph 4

Amend to read as follows:

- (4) *Welcoming* the ~~September 2019 United Nations~~ **Political Declaration adopted at the seventy-fourth session of the United Nations General Assembly** High-Level Meeting on universal health coverage,  
(Mongolia)

Amend to read as follows:

- (4) *Welcoming* the September 2019 United Nations High-Level Meeting on universal health coverage **and recalling important commitments and goals set in the area of Financing for Development for the world's governments in the context of the Addis Ababa Action Agenda**,  
(Norway, Sweden)

Amend to read as follows:

- (4) *Welcoming with high appreciation* the September 2019 United Nations High-Level Meeting on universal health coverage,  
(Thailand)

Preambular paragraph 6

Amend to read as follows:

- (6) *Noting* that UHC means ~~that~~ **national health policies and programmes in which** all individuals and communities are able to receive the full spectrum of essential health services, from health promotion to prevention, treatment, rehabilitation and palliative care, that these services are of high quality and delivered in a respectful manner, and that using these services does not cause individuals and communities financial hardship,  
(Cuba)

Amend to read as follows:

- (6) *Noting* that UHC means that all individuals and communities **have access, without discrimination, are able to receive** the full spectrum of **affordable, essential and high-quality** health services, from health promotion to prevention, treatment, rehabilitation and palliative care, ~~that these services are of high quality and~~ **which are** delivered in a respectful manner, ~~and that using these services does not~~ **without causing them** individuals and communities financial hardship,  
(South Africa)

Amend to read as follows:

- (6) *Noting* that UHC means that all individuals and communities are able to receive the full spectrum of essential health services, from health promotion to prevention, **diagnosis**, treatment, rehabilitation and palliative care, that these services are of high quality and delivered in a respectful manner, and that using these services does not cause individuals and communities financial hardship,  
(Serbia)

Amend to read as follows:

- (6) *Noting* that UHC means that all individuals and communities are able to receive the full spectrum of essential health services, from health promotion to prevention, treatment, rehabilitation and palliative care, that these services are **available, accessible, acceptable and** of high quality and delivered in a respectful manner, and that using these services does not cause individuals and communities financial hardship,  
(Germany)

Amend to read as follows:

(6) *Noting* that UHC means that all individuals and communities are able to receive the full spectrum of essential health services from health promotion to prevention, treatment, rehabilitation and palliative care, **at the time of need**, that these services are of high quality and delivered in a respectful **and equitable** manner, and that using these services does not cause individuals and communities financial hardship,

(Philippines)

Amend to read as follows:

(6) *Noting* that UHC means that all individuals and communities are able to receive the full spectrum of essential health services, from health promotion to prevention, treatment, rehabilitation and palliative care, that these services are of high quality and delivered in a respectful manner, and that using these services does not cause individuals and ~~communities~~ **families** financial hardship,

(Thailand)

Preambular paragraph 7

Amend to read as follows:

(7) *Also noting* that, although major progress has been made towards UHC, half the world's population still lacks access to necessary health services, that about 100 million people are pushed into extreme poverty each year because of health expenses, ~~and that~~ 800 million people spend at least 10 per cent or more of their household budget on health-care expenses, **that about 830 women die from preventable causes related to pregnancy and childbirth every day and 99 per cent of all maternal deaths occur in developing countries, particularly for women living in rural areas and poorer communities, and that an estimated 74 per cent of maternal deaths could be averted if all women had access to interventions for addressing pregnancy and birth complications, in particular emergency obstetric care,**

(South Africa)

Preambular paragraph 8

Amend to read as follows:

(8) *Recognizing* that UHC must ensure **that services are provided on an equal and non-discriminatory basis and** that no one is left behind, in particular the vulnerable, stigmatized or marginalized and, among others, children, youth, women, the elderly, **indigenous people**, people living with disabilities, people with rare or neglected diseases, migrants, refugees, people on the move, and people affected by mental health conditions or pre-existing medical conditions, ~~regardless of race, religion, political belief or economic and social conditions,~~

(Canada)

Amend to read as follows:

(8) *Recognizing* that UHC must ensure that no one is left behind, in particular the vulnerable, stigmatized or marginalized and, among others, children, youth, women, the elderly, people living with disabilities, people with rare or neglected diseases, migrants, refugees, ~~people on the move, and people affected by mental health conditions or pre-existing medical conditions, etc.,~~ regardless of race, religion, political belief or economic and social conditions,

(India)

Amend to read as follows:

(8) *Recognizing* that UHC must ensure that no one is left behind, in particular ~~the~~ vulnerable, **disadvantaged**, stigmatized or marginalized **people** and, among others, children, youth, women, the elderly, people living with disabilities (**especially women and children**), people with rare or neglected diseases, migrants, refugees, people on the move, and people affected by mental health conditions or pre-existing medical conditions regardless of race, religion, political belief or economic and social conditions,

*(Islamic Republic of Iran)*

Amend to read as follows:

(8) *Recognizing* that UHC must ensure that no one is left behind, in particular the vulnerable, stigmatized or marginalized and, among others, children, youth, women, the elderly, **indigenous peoples**, people living with disabilities, people with rare or neglected diseases, migrants, refugees, people on the move, and people affected by mental health conditions or pre-existing medical conditions, regardless of race, religion, political belief or economic and social conditions,

*(Finland)*

New preambular paragraphs 8bis and 8ter

Add two new paragraphs after preambular paragraph 8 to read as follows:

**(8bis) *Expressing grave concern at the negative impact of unilateral coercive measures on human rights and the right to development,***

**(8ter) *Deeply disturbed by the negative impact of unilateral coercive measures on the right to life, the rights to health and medical care, the right to freedom from hunger and the right to an adequate standard of living, food, education, work and housing (A/HRC/RES/40/3, para. 21), and alarmed by the disproportionate and indiscriminate human costs of unilateral sanctions and their negative effects on the civilian population, in particular women and children, of targeted States (A/HRC/RES/40/3, para. 22),***

*(Islamic Republic of Iran)*

Preambular paragraph 9

Amend to read as follows:

(9) *Expressing concern* that women, children ~~and~~, adolescents, **the elderly, and people living with disabilities** bear the greatest burden of ill health and preventable deaths, and often have limited financial resources to pay for essential health care,

*(South Africa)*

Amend to read as follows:

(9) *Expressing concern* that women, children and adolescents bear the greatest burden of ill health and preventable deaths, and often have limited financial resources to pay for essential health care, **thus placing women at an economic disadvantage and higher risk of poverty,**

*(Philippines)*

New preambular paragraph 9bis

Add a new paragraph after preambular paragraph 9 to read as follows:

**(9bis) *Noting with concern* that women bear higher out-of-pocket health-care-related expenses, which is attributed to certain limitations or non-coverage of reproductive health services under UHC,**

*(Philippines)*

Preambular paragraph 10

Amend to read as follows:

(10) *Recognizing* that primary health care, **and particularly immunization campaigns**, is the most inclusive, effective and efficient approach to enhancing people's physical and mental health and well-being, and that such health care is also the cornerstone of a sustainable health system capable of UHC, and welcoming the intergovernmental commitment in the 2018 Declaration of Astana to strengthen primary health care systems as an essential step towards achieving the SDGs,

*(France)*

Preambular paragraph 11

Amend to read as follows:

(11) *Insisting* on the importance of **equitable, well-resourced, accessible and integrated** people-centred health services, patient safety, and quality health care, **including the availability of a skilled workforce, affordable safe medicines and technologies, and effective accountability mechanisms – i.e. health ombudsman, impact assessment and policy review process**, as core components of health-system governance in order to fully empower people to improve and protect their own health,

*(South Africa)*

New preambular paragraph 11bis

Add a new paragraph after preambular paragraph 11 to read as follows:

**(11bis) *Noting the importance* of continued commitment and progress towards the implementation of the WHO Global Strategy on Human Resources for Health: Workforce 2030, as well as the implementation of the outcomes of the United Nations High-Level Commission on Health Employment and Economic Growth in supporting human resource requirements as a building block for strong health systems and the foundation for achieving UHC,**

*(Philippines)*

Add a new paragraph after preambular paragraph 11 to read as follows:

**(11bis) *Underlining* the constitutional dimension of the right to health and the importance of allocating specific percentages and portions of national budgets to health, as it is a cornerstone to achieving comprehensive sustainable development,**

*(United Arab Emirates)*

Preambular paragraph 12

Amend to read as follows:

(12) *Underlining* that investment in UHC is an investment in human capital that generates jobs, increases growth and reduces inequalities, including gender inequality, and recalling the importance of ~~increased and sustainable~~, **adequate** health funding,

(Thailand)

New preambular paragraphs 12bis and 12ter

Add two new paragraphs after preambular paragraph 12 to read as follows:

**(12bis) *Emphasizing* that, in order to carry out effective action aimed at ensuring UHC, the numbers of medical staff must be adequate to meet demand but currently medical staff in many countries are totally inadequate to meet requirements, and that the increase in medical staff calls for providing an adequate answer to the expectations of thousands of medical graduates who would like to specialize but are prevented from doing so because of the lack of funds for grants and the lack of facilities to perform the practical activities that are fundamental in the medical professions,**

**(12ter) *Whereas* in many countries the problem that risks penalizing health-care supply and therefore UHC lies in the large-scale retirement of many medical doctors who in many cases have had to be retained in service well beyond retirement age due to lack of staff,**

(Italy)

Preambular paragraph 13

Amend to read as follows:

(13) *Being mindful* that progress towards UHC also requires the political, social, economic, environmental and climate determinants of health to be addressed, **which may also require addressing discriminatory laws, policies and practices that prevent women and adolescents from seeking good-quality health services,**

(South Africa)

New preambular paragraph 14bis

Add a new paragraph after preambular paragraph 14 to read as follows:

**(14bis) *Expressing its concern* at the increasing number of refugees around the world, taking into account that providing health care for refugees can be a great burden for host countries, some of which are hosting millions of them, and recognizing the responsibility of the international community to take solid steps in providing refugees with UHC,**

(Turkey)

Preambular paragraph 15

Amend to read as follows:

(15) *Conscious* of the connection between ~~global health security~~ **public health emergency preparedness** and UHC, and of the need to continue delivering essential health care in emergency and fragile situations, and determined to take action to prevent epidemics and the spread of disease by advocating and supporting countries' compliance with the International Health Regulations (2005) and to ensure strong public health capacities to prevent, detect and respond to emergencies,

(India)

Amend to read as follows:

(15) *Conscious* of the connection between global health security and UHC, and of the need to continue delivering essential health care in emergency and fragile situations, and determined to take action to prevent epidemics and the spread of disease by advocating and supporting countries' compliance with the International Health Regulations (2005) and to ensure **their respective** strong public-health **core** capacities to prevent, detect and respond to **public health risks, particularly during** emergencies,

(Germany)

Amend to read as follows:

(15) *Conscious* of the connection between global health security and UHC, and of the need to continue delivering essential health care in emergency and fragile situations, and determined to take action to prevent epidemics and the spread of disease by advocating and supporting countries' compliance with the International Health Regulations (2005) and to ensure strong public health capacities to prevent, detect and respond to **health** emergencies,

(Cuba)

#### Preambular paragraph 16

Amend to read as follows:

(16) *Recognizing* that ~~achieving the achievement of UHC requires a paradigm shift, and that UHC is an overarching umbrella~~ **is intrinsic** to ~~achieve~~ **achieving** healthy lives and well-being for all, at all ages, **and that it** requires strong and sustained political commitment at all levels,

(Canada)

### **OPERATIVE PART**

#### Operative paragraph 1

Amend to read as follows:

1. *Reaffirms* that the **devotion of maximum available resources to the** ~~of progressive realization of UHC is possible and affordable~~ for all countries, and calls on parliaments and parliamentarians to take all ~~possible~~ **legal and policy** measures to achieve UHC by 2030;

(South Africa)

Amend to read as follows:

1. *Reaffirms* that the progressive realization of UHC is possible and **should be made** affordable for all countries, and calls on parliaments and parliamentarians to take all possible measures to achieve UHC by 2030;

(India)

Amend to read as follows:

1. *Reaffirms* that the progressive realization of UHC is possible, **achievable** and affordable for all countries **even in challenging settings**, and calls on parliaments and parliamentarians to take all possible **and applicable** measures **in order to help their respective governments** to achieve UHC by 2030 **and to ensure high-quality, affordable and accessible health care**;

(Islamic Republic of Iran)

Amend to read as follows:

1. *Reaffirms* that the progressive realization of UHC is ~~possible and an~~ **affordable commitment for 2030** for all countries, and calls on parliaments and parliamentarians to take all possible measures to achieve UHC by 2030;

(Cuba)

Operative paragraph 2

Amend to read as follows:

2. *Urges* parliaments to put in place a robust ~~legal~~ **policy** framework to make UHC a reality, and to ensure that ~~the right to health is guaranteed~~ **access to essential health care as appropriate to a country's context is assured** for all in ~~law~~ **policy** and in practice, without discrimination;

(India)

Amend to read as follows:

2. *Urges* parliaments to put in place a robust legal framework ~~to make for UHC a reality, to~~ **ensure effective implementation of UHC legislation in reality**, and to ensure that the right to health is guaranteed for all in law and in practice, without discrimination;

(Thailand)

Amend to read as follows:

2. *Urges* parliaments to put in place a robust legal framework to make UHC a reality, and to ensure that the right ~~to~~ **of everyone to public health and medical care** is guaranteed for all in law and in practice, without discrimination;

(Islamic Republic of Iran)

Amend to read as follows:

2. *Urges* parliaments to put in place a robust legal framework to make UHC a reality, and to ensure that the right to health is guaranteed for all in law and in practice, without discrimination, **especially noting that the impact is compounded when an individual suffers multiple or intersecting forms of discrimination**;

(Finland)

Operative paragraph 3

Amend to read as follows:

3. *Also urges* States to work closely with their national parliament ~~and~~, **supported by** the IPU, to raise further awareness among parliaments and parliamentarians about UHC and fully engage them in the process, so as to sustain political support towards achieving UHC by 2030;

(India)

New operative paragraph 3bis

Add a new paragraph after operative paragraph 3 to read as follows:

- 3bis. Further urges parliaments to work for UHC to be established henceforth as a feature of national development plans and policies; health being at once a prerequisite for and a factor in countries' sustainable development;**

(Congo)

Operative paragraph 4

Amend to read as follows:

4. *Calls on* States to ensure that national health policies and programmes are evidence-informed, ~~and in conformity with~~ **consistent with** international human rights standards, **and developed through an inclusive and participatory process**, and urges parliaments to remove legal or other barriers preventing access to health services, including through clear guidance to and adequate training of health personnel;

*(Canada)*

Amend to read as follows:

4. *Calls on* States to ensure that national health policies and programmes are ~~evidence-informed~~ **results-based** and in conformity with international human rights standards, and urges parliaments to remove legal or other barriers preventing access to health services, including ~~through clear guidance to and adequate training of health personnel~~ **by strengthening primary health care and human resources**;

*(Cuba)*

Amend to read as follows:

4. *Calls on* States to ensure that national health policies and programmes are evidence-informed and in conformity with international human rights standards, and urges parliaments to remove legal or other barriers preventing access to health services, including through clear guidance to and adequate training of health personnel **in accordance with their national context**;

*(India)*

Amend to read as follows:

4. *Calls on* States to ensure that national health policies and programmes are evidence-informed and in conformity with international human rights standards, and urges parliaments to remove legal or other barriers preventing access to health services, including through clear guidance to and adequate training of health personnel, **including by supporting dual vocational training**;

*(Switzerland)*

New operative paragraph 4bis

Add a new paragraph after operative paragraph 4 to read as follows:

- 4bis. *Calls on* parliaments to acknowledge the adverse effects of unlawful unilateral coercive measures in any kind which endanger the physical and mental health and well-being of the people of the countries in question and reverse their progress in achieving health goals;**

*(Islamic Republic of Iran)*

Add a new paragraph after operative paragraph 4 to read as follows:

- 4bis. *Urges* States to implement regulations to ensure that each medical graduate has the right to pursue his/her specialization funded through grants, by envisaging adequate and effective planning both to bridge shortcomings in individual specialist branches, thus improving UHC, and to allow the absorption of all the graduates who have been waiting for years for the opportunity to become specialized;**

*(Italy)*

Operative paragraph 5

Amend to read as follows:

5. *Calls for* priority to be given to the availability, accessibility and affordability of ~~primary-~~ health-care services, including essential services for women, children, adolescents and other vulnerable groups, **particularly at the primary-health-care level**;

*(India)*

Amend to read as follows:

5. *Calls for* priority to be given to the availability, accessibility, ~~and affordability~~ **acceptability and quality** of primary-health-care services, including essential services for women, children, adolescents and ~~other~~-vulnerable groups;

*(Germany)*

Amend to read as follows:

5. *Calls for* priority to be given to the availability, accessibility and affordability of primary-health-care services, including essential services for women, children, adolescents and other vulnerable groups, **and affordable health services for people living with disabilities or chronic physical and mental health conditions, and for efforts to empower and include them to be scaled up; governments should allot funds especially to the treatment of mental illness, which is very expensive and definitely beyond the reach of ordinary citizens**;

*(Philippines)*

Amend to read as follows:

5. *Calls for* priority to be given to the availability, accessibility and affordability of primary-health-care services, including essential services for women, children, adolescents and other ~~vulnerable~~-groups **in vulnerable positions**;

*(Finland)*

New operative paragraph 5bis

Add a new paragraph after operative paragraph 5 to read as follows:

- 5bis. Encourages States to implement prevention and education programmes to promote the health literacy of their citizens and to address behaviour-related health concerns, such as alcohol and tobacco use, occupational health and safety, obesity and sexually transmitted diseases;**

*(Canada)*

Add a new paragraph after operative paragraph 5 to read as follows:

- 5bis. Urges States – in order to meet a broad-based request from citizens to be accompanied towards the end of their lives in a dignified and as painless a manner as possible – to include palliative care and pain relief in their basic health-care services;**

*(Italy)*

Add a new paragraph after operative paragraph 5 to read as follows:

**5bis. Calls on parliaments to use their oversight powers to hold governments accountable for treating the poor, and to provide them with access to medicines, vaccines and all other health necessities;**

*(United Arab Emirates)*

Operative paragraph 6

Amend to read as follows:

6. *Calls on* parliaments to strengthen health systems so as to reduce maternal, newborn ~~and~~, child **and adolescent** mortality and morbidity by strengthening sexual, reproductive, maternal, newborn and adolescent services, promoting in particular breastfeeding, immunization and early childhood development interventions;

*(Germany)*

Amend to read as follows:

6. *Calls on* parliaments to strengthen health systems so as to reduce maternal, newborn and child mortality and morbidity by strengthening sexual, reproductive, maternal, newborn and adolescent **health and nutrition** services, promoting in particular breastfeeding, immunization and early childhood development interventions;

*(United Kingdom)*

Amend to read as follows:

6. *Calls on* parliaments to strengthen health systems so as to reduce maternal, newborn and child mortality and morbidity by strengthening sexual, reproductive, maternal, newborn and adolescent **health** services, promoting in particular breastfeeding, immunization and early childhood development interventions;

*(India)*

Amend to read as follows:

6. *Calls on* parliaments to strengthen health systems so as to reduce maternal, newborn and child mortality and morbidity by strengthening sexual, reproductive, maternal, newborn and adolescent services, promoting in particular breastfeeding, **systematic** immunization **campaigns** and early childhood development interventions;

*(France)*

Operative paragraph 7

Amend to read as follows:

7. *Urges* parliaments to ensure that health-sector interventions for protecting sexual and reproductive health **and rights**, especially for adolescents, are combined with preventive and educational measures in other sectors, in particular with respect to promoting gender equality and combating child marriage, early and unintended pregnancies, and gender-based violence, including female genital mutilation;

*(Germany)*

Amend to read as follows:

7. *Urges* parliaments to ensure that health-sector interventions for protecting sexual and reproductive health, especially for adolescents, are combined with **promotive, early detection**, preventive and educational measures in other sectors, in particular with respect to promoting gender equality and combating child marriage, early and unintended pregnancies, and gender-based violence, including female genital mutilation;

*(South Africa)*

Amend to read as follows:

7. *Urges* parliaments to ensure that health-sector interventions for protecting sexual and reproductive health, especially for adolescents, are combined with preventive and educational measures in other sectors, in particular with respect to promoting gender equality and combating child, **early and forced** marriage, early and unintended pregnancies, and gender-based violence, including female genital mutilation **or other forms of gender-based violence**;

*(Islamic Republic of Iran)*

New operative paragraph 7bis

Add a new paragraph after operative paragraph 7 to read as follows:

- 7bis. Calls on parliaments to ensure that national policies to implement UHC address malnutrition in all its forms, with special attention to the nutritional needs of adolescent girls, pregnant and lactating women and children during the first 1,000 days;**

*(United Kingdom)*

Operative paragraph 8

Amend to read as follows:

8. *Calls on* parliaments to promote and foster access to **essential**, affordable, safe, effective and good-quality medicines, vaccines, diagnostics and other technologies, **without discrimination**, and to support research and development in medicines and vaccines for communicable and non-communicable diseases;

*(Islamic Republic of Iran)*

Amend to read as follows:

8. *Calls on* parliaments to promote and foster access to affordable, safe, effective and good-quality medicines, **medical devices**, vaccines, diagnostics and other technologies, and to support research and development in medicines and vaccines for communicable and non-communicable diseases;

*(Serbia)*

Amend to read as follows:

8. *Calls on* parliaments to promote and foster access to affordable, safe, effective and good quality medicines, **contraceptives**, vaccines, diagnostics and other technologies, and to support research and development in medicines and vaccines for communicable and non-communicable diseases **that primarily affect developing countries**;

*(India)*

Amend to read as follows:

8. *Calls on* parliaments to promote and foster access to affordable, safe, effective and good-quality medicines, vaccines, diagnostics and other technologies, and to support **innovation**, research and development in medicines and vaccines for communicable and non-communicable diseases **as well as the latest technology on mental sickness which is non-invasive**;

*(Philippines)*

New operative paragraph 8bis

Add a new paragraph after operative paragraph 8 to read as follows:

- 8bis. Urges parliaments to promote the immunization programmes of their respective governments as the most effective, preventive measure against infectious diseases, and to enact measures that will tighten patient safety regulations during the clinical testing of new vaccines to allay public fears of vaccination;**

*(Philippines)*

Operative paragraph 9

Amend to read as follows:

9. *Underlines* the need for accessible **and high-quality** health information and affordable health services for people living with disabilities or chronic physical and mental health conditions, and for efforts to empower and include them to be scaled up;

*(Islamic Republic of Iran)*

Amend to read as follows:

9. *Underlines* the need for accessible **early diagnosis, support,** health information and affordable health services for people living with disabilities or chronic physical and mental health conditions, and for efforts to empower and include them to be scaled up;

*(France)*

Amend to read as follows:

9. *Underlines* the need for accessible health information and affordable health services, **especially** for people living with disabilities or chronic physical and mental health conditions, and for efforts to empower and include them to be scaled up;

*(India)*

Operative paragraph 10

Amend to read as follows:

10. *Encourages* a partnership-based approach to achieving UHC on a whole-of-government and whole-of-society basis, and invites parliaments to raise public awareness of UHC and engage communities and all relevant stakeholders in the development of plans and strategies that respond to their realities **in accordance with their national context;**

*(India)*

Operative paragraph 11

Amend to read as follows:

11. *Underlines* the need for a systematic approach to issues of gender, equity and human rights in health planning and decision-making processes, ~~and urges parliaments to insist on the establishment of robust national indicators and disaggregated data for measuring progress on UHC;~~

*(Germany)*

Amend to read as follows:

11. *Underlines* the need for a systematic approach to issues of gender, equity and human rights in health planning and decision-making processes, and urges parliaments to ~~insist on~~ **promote** the establishment of robust national indicators ~~and disaggregated data~~ for measuring progress on UHC;

*(India)*

Amend to read as follows:

11. *Underlines* the need for a systematic **and coherent approach** to issues of gender, **justice**, equity and human rights in health planning and decision-making processes, and urges parliaments to insist on the establishment of robust national indicators, **trustworthy routine health information systems** and disaggregated data for measuring progress on UHC **in order to do new crucial research for the transformation of low-quality health systems to high-quality ones**;

*(Islamic Republic of Iran)*

Amend to read as follows:

11. *Underlines* the need for a systematic approach to issues of gender, equity and human rights in health planning and **informed participation of individuals and communities, particularly women, in health-related** decision-making processes, and urges parliaments to insist on the establishment of robust national indicators and disaggregated data for measuring progress on UHC;

*(South Africa)*

Amend to read as follows:

11. *Underlines* the need for a systematic approach to issues of gender, equity and human rights in health planning and decision-making processes, **including health information systems which generate reliable evidence on health needs to ensure sound policy choices**, and urges parliaments to insist on the establishment of robust national indicators and disaggregated data for measuring progress on UHC;

*(Philippines)*

New operative paragraph 11bis

If the German amendment to operative paragraph 11 is adopted, add a new paragraph after operative paragraph 11 to read as follows:

- 11bis. **Urges parliaments to insist on the establishment of robust national indicators and disaggregated data for measuring progress on UHC, and underlines the need for accessible health services for people living with disabilities or chronic physical and mental health conditions, and for efforts to empower and include them to be scaled up;**

*(Germany)*

Add a new paragraph after operative paragraph 11 to read as follows:

- 11bis. **Calls for regular reporting and accurate use of disaggregated data to remove gender-based discrimination in the implementation of UHC;**

*(Philippines)*

Operative paragraph 12

Replace operative paragraphs 12 and 13 with the following paragraphs, and place these paragraphs after operative paragraph 2:

12. ***Calls on parliaments to ensure sustainable health financing via a predominant reliance on public funds, which requires the allocation of adequate domestic resources, including through increased budgets where needed, as well as through measures to promote efficiency, cost containment and a stable basis for funding;***
13. ***Calls on parliaments to ensure financial protection in order to reduce out-of-pocket payments for health services and to eliminate financial barriers that prevent access to health;***

*(Germany)*

Amend to read as follows:

12. *Calls on parliaments to **mobilize and** allocate adequate ~~domestic~~ resources for the progressive realization of UHC through sustainable health financing, including through increased budgets where needed, as well as through measures to promote efficiency, cost containment and a stable basis for funding;*

*(India)*

Amend to read as follows:

12. *Calls on parliaments to allocate adequate domestic resources, **insofar as each country's means allow**, for the progressive realization of UHC through sustainable health financing, including through increased budgets where needed, as well as through measures to promote efficiency, cost containment and a stable basis for funding;*

*(France)*

Amend to read as follows:

12. *Calls on parliaments to allocate adequate domestic resources for the progressive realization of UHC through sustainable health financing, including through increased budgets where needed, as well as through measures to promote efficiency, cost containment and a stable basis for funding, **mindful of the nominal minimum target for domestic resources identified by WHO as equivalent to 5 per cent of GDP;***

*(United Kingdom)*

Amend to read as follows:

12. *Calls on parliaments to **consider the Addis Ababa Action Agenda on Financing for Development and** allocate adequate domestic resources for the progressive realization of UHC through sustainable health financing, including through increased budgets where needed, as well as through measures to promote efficiency, cost containment and a stable basis for funding, **such as the taxation of alcohol, tobacco and sugar;***

*(Philippines)*

Amend to read as follows:

12. *Calls on parliaments to allocate adequate domestic resources for the progressive realization of UHC through sustainable health financing, including ~~through increased~~ **SDG-oriented** budgets ~~where needed~~, as well as through measures to promote efficiency, ~~and cost containment and a stable basis for funding;~~ **and***

*(Mongolia)*

Amend to read as follows:

12. *Calls on* parliaments to allocate adequate domestic resources for the progressive realization of UHC through sustainable health financing, including through increased budgets where needed, as well as through measures to promote efficiency, **quality**, cost containment and a stable basis for funding;

*(Cuba)*

Amend to read as follows:

12. *Calls on* parliaments to allocate adequate domestic resources for the progressive realization of UHC through sustainable health financing, including through increased budgets where needed, as well as through measures to promote efficiency, **equity**, cost containment and a stable basis for funding;

*(Thailand)*

New operative paragraph 12bis

Add a new paragraph after operative paragraph 12 to read as follows:

- 12bis. Urges States to allocate more resources for the recruitment of new doctors and health-care staff, undertaking positive action in the relevant international fora aimed at easing the overly hard budget constraints implemented during the past decade;**

*(Italy)*

Add a new paragraph after operative paragraph 12 to read as follows:

- 12bis. Also calls on parliaments to ensure that training for human resources is on a par with the reliability of health facilities' equipment in order to bridge the gap sometimes observed between human resources and adequate health infrastructure;**

*(Congo)*

New operative paragraph 13bis

Add a new paragraph after operative paragraph 13 to read as follows:

- 13bis. Strongly urges States and all parties to armed conflict to ensure health care and to develop effective measures to prevent and address acts of violence, attacks and threats against medical personnel and humanitarian personnel exclusively engaged in medical duties, their means of transport and equipment, as well as health centres, hospitals and other medical facilities and also schools and training centres in armed conflict, in accordance with the Geneva Conventions and their Additional Protocols and United Nations Security Council resolution 2286 on the protection of health care in armed conflict, bearing in mind that such attacks render efforts to build up health systems impossible;**

*(Germany)*

Add a new paragraph after operative paragraph 13 to read as follows:

- 13bis. Urges parliaments to promote women's health in designing their national UHC programme, thus guaranteeing their access to quality health-care services;**

*(Philippines)*

Operative paragraph 14

Amend to read as follows:

14. *Requests* parliaments in countries providing official development assistance to work towards increasing their country's assistance for health, **reminding developed countries of their commitment according to the United Nations General Assembly Resolution to contribute at least 0.7 percent of their GDI to official development assistance**, and urges parliaments to ensure that governments and international funding partners align their financial support with health systems, plans and priorities designed to achieve UHC in recipient countries;

*(Norway, Sweden)*

Amend to read as follows:

14. *Requests* parliaments in **developed** countries providing official development assistance to work towards increasing their country's assistance for health, and urges parliaments to ensure that governments and international funding partners align their financial support with health systems, plans and priorities designed to achieve UHC in recipient countries;

*(China)*

Amend to read as follows:

14. *Requests* parliaments in countries providing official development assistance to work towards increasing their country's assistance for health, **including for research and development**, and urges parliaments to ensure that governments and international funding partners align their ~~financial~~ support with **national** health systems, plans and priorities designed to achieve UHC in recipient countries;

*(India)*

Operative paragraph 15

Amend to read as follows:

15. *Calls on* parliaments to use ~~their oversight powers~~ **all generic parliamentary functions** to hold governments accountable for **the effective implementation of** their UHC commitments, monitor the impact of UHC policies and programmes, and encourage governments to take corrective action where necessary, and urges parliaments to establish mechanisms to follow up on the implementation of this resolution;

*(South Africa)*

Amend to read as follows:

15. *Calls on* parliaments to use ~~their oversight powers~~ to hold governments accountable for their UHC commitments, monitor the impact of UHC policies and programmes, and encourage governments to take corrective action where necessary, and urges parliaments to establish mechanisms to follow up on the implementation of this resolution **in accordance with their national context**;

*(India)*

Amend to read as follows:

15. *Calls on* parliaments to use their oversight powers to hold **their respective national** governments accountable for their UHC commitments, monitor the impact of UHC policies and programmes, and encourage governments to take corrective action where necessary, and urges parliaments to establish mechanisms to follow up on the implementation of this resolution;

*(Islamic Republic of Iran)*

New operative paragraph 15bis

Add a new paragraph after operative paragraph 15 to read as follows:

- 15bis. *Underlines the transformational potential of technology-based health innovations and new models of health care to accelerate progress towards achieving UHC, especially in low- and middle-income countries;***

*(United Arab Emirates)*

Operative paragraph 16

Amend to read as follows:

16. *Also calls on public authorities, **especially health institutions, to observe strict ethical standards of care** and, **along with** other national and international entities, to ensure continued care and treatment for people in armed conflict, fragile contexts, or health and other emergencies, such as natural disasters;*

*(Philippines)*

Amend to read as follows:

16. *Also calls on public authorities and other national and international entities to ensure continued **health-care services** and treatment for ~~people~~ **the victims of** ~~in~~-armed conflicts, fragile contexts, or health and other emergencies, such as natural disasters;*

*(Islamic Republic of Iran)*

Amend to read as follows:

16. *Also calls on public authorities and other national and international entities to ensure continued care and treatment for people in armed conflict, fragile contexts, or health and other emergencies, such as natural disasters, **in accordance with the national context;***

*(India)*

New operative paragraph 16bis

Add a new paragraph after operative paragraph 16 to read as follows:

- 16bis. *Urges that antibiotic resistance be included as a global indicator or an intermediate goal in the SDGs, recognizing that antimicrobial resistance (AMR) is a serious and pressing global health threat and that measures designed to counteract antibiotic resistance are an important aspect of protection against threats to human health and ensuring access to necessary medicines, calls for full implementation of the Interagency Coordination Group recommendations, and calls on the Tripartite agencies and the United Nations Environment Programme to step up their work on AMR, especially to support countries to implement their national action plans;***

*(Norway, Sweden)*

Add a new paragraph after operative paragraph 16 to read as follows:

- 16bis. *Calls on the relevant authorities of the international community to create an effective mechanism for all countries to share the joint responsibility of providing refugees with adequate health services and achieving UHC for refugees wherever possible;***

*(Turkey)*

Operative paragraph 17

Amend to read as follows:

17. *Further calls on* parliaments to take all possible measures to ensure global health security by preventing the spread of diseases, **particularly through systematic immunization campaigns**, and strengthening surveillance and response systems, and to advocate for the implementation of the International Health Regulations (2005) and for the allocation of appropriate resources to meet countries' obligations and address critical gaps in public-health capacities to prevent, detect and respond, **and to combat counterfeit medicines**;
- (France)*

Amend to read as follows:

17. *Further calls on* parliaments to take all possible measures to ensure global health security by preventing the spread of diseases and **other public health events as well as** strengthening surveillance and response systems, and to advocate for the implementation of the International Health Regulations (2005) and for the allocation of appropriate resources to meet countries' obligations and address critical gaps in **their respective** public-health **core** capacities to prevent, detect and respond **to public health risks**;
- (Germany)*

Amend to read as follows:

17. *Further calls on* parliaments to take all possible measures to ensure global health security by preventing the spread of diseases and strengthening surveillance and response systems, and to advocate for the implementation of the International Health Regulations (2005) and for the **mobilization and** allocation of appropriate resources to **help** meet countries' obligations and address critical gaps in public-health capacities to prevent, detect and respond;
- (India)*

Operative paragraph 18

Amend to read as follows:

18. *Urges* parliaments to address the political, social, economic, environmental and climate determinants of health as enablers and prerequisites for sustainable development, **to support health improvements** and to promote a multisectoral approach to **tackling** health **inequalities**;
- (Islamic Republic of Iran)*

Amend to read as follows:

18. *Urges* parliaments to address the political, social, economic, environmental and climate determinants of health as enablers and prerequisites for sustainable development, and to promote a multisectoral approach to health **in accordance with their national context**;
- (India)*

New operative paragraph 18bis

Add a new paragraph after operative paragraph 18 to read as follows:

- 18bis. Urges States to step up international cooperation to achieve UHC, particularly protection against financial risks, access to good-quality essential health services and access to safe, effective, affordable and good-quality medicines and vaccines for all;**
- (Cuba)*

Operative paragraph 19

Amend to read as follows:

19. *Requests* parliaments **to promote their own paths towards achieving UHC** to facilitate and support the learning and sharing of UHC experiences, best practices, challenges and lessons learned across IPU Member Parliaments and their parliamentarians;

*(Islamic Republic of Iran)*

Amend to read as follows:

19. *Requests* parliaments to facilitate and support the learning and sharing of UHC experiences, best practices, challenges and lessons learned ~~across IPU Member Parliaments and their parliamentarians~~, **supported by the IPU**;

*(India)*

Operative paragraph 20

Amend to read as follows:

20. *Also requests* the agencies of the United Nations system, in particular WHO, to provide countries with coordinated, multifaceted support aimed at achieving UHC, ~~and requests the IPU to collaborate with WHO and other partners in monitoring progress towards~~ **the achievement of UHC, because WHO has a mandate to evaluate health indicators**, and ~~building to boost~~ the capacity of parliaments and parliamentarians to develop and monitor national UHC policies.

*(Cuba)*

Amend to read as follows:

20. *Also requests* the agencies of the United Nations system, in particular WHO **and all relevant international partners**, to provide countries with coordinated, multifaceted support aimed at achieving UHC **in accordance with their national contexts and priorities**, and requests the IPU to collaborate with WHO and other partners in ~~monitoring~~ **measuring** progress towards UHC and building the capacity of parliaments and parliamentarians ~~to develop and monitor national~~ **to help achieve UHC policies by 2030**.

*(India)*

Amend to read as follows:

20. *Also requests* the agencies of the United Nations system, in particular WHO, to provide countries with coordinated, multifaceted support aimed at achieving UHC, and requests the IPU to collaborate with WHO and other partners in monitoring progress towards UHC and building the capacity of parliaments and parliamentarians to develop and monitor national UHC policies **through the establishment of strong, learning health-care systems**.

*(Islamic Republic of Iran)*

New operative paragraph 20bis

Add a new paragraph after operative paragraph 20 to read as follows:

- 20bis. Requests parliaments and parliamentarians to work for States' implementation of the conclusions of the meetings on achieving UHC, particularly those of the United Nations High-Level Meeting on universal health coverage held in September 2019, and calls on the IPU to provide its Members with all the tools required for the follow-up and evaluation of those recommendations.**

*(Congo)*