## **Make This Time Different. Prioritize Primary Health Care** as a 3-for-1 Investment Towards Health for All.

An open letter signed by 239 organizations and 157 individuals across 65 countries urging leaders to prioritize a primary health care approach across the 2023 UN High-Level Meetings on Universal Health Coverage and Pandemic Prevention, Preparedness, and Response, and the 2023 midpoint of the Sustainable Development Goals.

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### Primary health care is 'primary' for a reason.

We call on national, regional and global actors to prioritize primary health care as a 3-for-1 investment in universal health coverage, health security and better health and well-being. All three of these goals depend on the same health systems, and primary health care is their common foundation.

For more than 40 years, the world has made ambitious commitments to create a healthy future for all - from the Declarations of Astana (2018) and Alma-Ata (1978), to the UN Sustainable Development Goals (SDGs) (2015) to the UHC Political Declaration (2019), which has been referred to as the most comprehensive set of health commitments ever adopted. Along the way, global leaders have repeatedly recognized primary health care (PHC) - an approach that can reach every community and meet the vast majority of people's health needs throughout their lives - as the foundation of strong health systems and the key to greater well-being, social and economic prosperity, and equity.

#### Yet for more than 40 years, the reality of these commitments has fallen short of their promise.

Instead of acting on lessons learned to build the health systems people want and need, we keep retreating into patterns of crisis and inaction – leaving millions of lives and livelihoods in the balance. The COVID-19 pandemic and other emerging health threats continue to test the resilience of health systems and prove that we still aren't prepared to meet the challenge. As a result, additional negotiations have been launched to strengthen pandemic preparedness and response, including calls for a pandemic treaty, reform to the International Health Regulations, and a new fund to help prevent future health emergencies. Efforts are also underway to make up lost ground in the fight against leading infectious and non-communicable diseases. However, without a strong foundation of primary health care to address growing gaps in essential health services, the most vulnerable communities will remain most susceptible to any threat, local or global, to their health and well-being.

It is time for a radical reset. 2023 will see several UN High-Level Meetings – including one on Universal Health Coverage and one on Pandemic Prevention, Preparedness, and Response - as well as the midpoint of the Sustainable Development Goals. All of these moments represent major opportunities to stop repeating history and begin a new chapter of sustained action, recognizing primary health care as the crucial link between these urgent health goals.

Together, we can make this time different by strengthening health systems through a primary health care approach, starting with three overdue shifts:

#### 1. Prioritize people who have been failed by the system, not those who already benefit from it.

#### GOVERNANCE

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Change who has the power to set policy agendas and allocate resources at all levels of government so that the wealthy, privileged, or most vocal few are no longer dictating the lives of the many. Teams of decision-makers must reflect the expertise of all the diverse communities that health systems are meant to serve, or else decisions will keep leaving the same people behind.

EQUITY

- Require that patients, patient advocates, frontline health care providers (who are predominantly women) and communities be included as equal partners in the leadership and management of health care service delivery.
  These are some of the people best-positioned to identify crucial gaps and drive solutions that we have missed in the past.
- Insist on international agreements and responses including for matters of global health security that foster genuine solidarity, equity, and mutual learning across countries, and no longer permit the most powerful donors, leaders, entities, and nations to put their priorities above the rest.

# 2. Give the people what they want: quality health services in their community that work around their needs, preferences, and everyday lives – instead of requiring financial or personal sacrifices to get a trusted standard of care.

#### SERVICE DELIVERY

Earn trust by consistently delivering primary care services that meet everyone's needs across the lifespan. Services must be respectful, fully responsive, proactive, and well-managed, with reliable entry points in every community.

#### QUALITY

- Invest in a well-resourced, protected, diverse, and skilled team-based health workforce at community, sub-national, and national levels so that health workers can ensure patient satisfaction and meet all essential health needs in times of crisis and calm.
- Set measurable targets and report disaggregated data transparently on quality across all pillars of primary health care (e.g., capacity, performance, and impact). This should include external and community-led reviews of how government policies, structures, and funds are translating to quality services for all.
- Demand systems that guarantee high-quality care for all people and communities. Remove all financial and other barriers to health services so that everyone, particularly the most marginalized groups, can get the quality care, products, and information they need – and entire families, communities, and economies will benefit.
- Prioritize human rights, gender equity, and social determinants of health through multisectoral action, and involve communities as partners in their own care, recognizing that good health starts outside of the clinic.

## 3. Treat primary health care as an investment, not a cost, to build resilience into the foundation of the health system and improve health outcomes for all.

## FINANCING

Drive more, better, and localized investments toward health systems based on primary health care, allocating funds according to each community's and country's needs and priorities. More public financing is especially key in countries that receive donor support, to lessen dependence on priorities that may not align with national strategic plans.

RESILIENCE

- Instead of diverting resources from one crisis to the next, ensure that every program for pandemic prevention, preparedness, and response includes specific investments for improving primary health care as the foundation of resilient health systems that can adapt to new threats and sustain comprehensive health services, no matter what.
  - Establish policies and systems of mutual accountability to uphold people's fundamental right to health, sustain PHC investments, and keep improving population health and well-being even as administrations come and go.
  - Earmark financing to strengthen health data, surveillance, information systems and community engagement in PHC, and use comprehensive assessments to drive better decision-making. Everyone must be counted and included to leave no one behind.

**It is past time** to translate the will to achieve Health for All into meaningful benefits for people and communities around the world. The 2023 UN High-Level Meetings on Universal Health Coverage and Pandemic Prevention, Preparedness, and Response, as well as the mid-point of the Sustainable Development Goals, represent major opportunities to take what we have learned and build the world we want.

To make this time different, we urge leaders and Member States to prioritize primary health care in these negotiations as a 3-for-1 investment in universal health coverage, health security, and better health and well-being for all.

Together, we can rise to meet the challenges around us, and turn a corner toward unprecedented times that future generations will thank us for.

## **Signed By: The Advisors to the Allies Improving PHC**

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Salud para Todos Argentina Todos Frente al Chagas / Chagas Disease Alliance

#### Australia

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#### Belgium

Research Center on Health Policies and Systems - International Health, School of Public Health, ULB

#### Benin

Coalition des OSC du Bénin pour la Couverture Universelle en Santé (COBCUS)

#### Bhutan

Ministry of Health, Bhutan

#### Botswana

The Botswana Network on Ethics Law HIV AIDS (BONELA) Success Capital Organisation

#### Brazil

Intersectoral Forum to Fight NCDs in Brazil (ForumDCNTs) Umane

#### Cambodia

Health Action Coordinating Committee KHANA Center for Population Health Research

Khmer HIV/AIDS NGO Alliance (KHANA)

#### Cameroon

Academic and Career Development Initiative Cameroon Building Capacities for Better Health Africa, Cameroon Organisation For Health in Sustainable Development (OHISD)

Reconciliation and Development Association Trans-Plant Cameroon

#### Canada

Centre for Sustainable Access to Health in Africa

#### Cote d'Ivoire

La Ruche Health

#### **Democratic Republic of the Congo**

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Egyptian NCD Alliance

#### **Ethiopia** Ministry of Health, Ethiopia Oromia Regional Health Berou

#### The Gambia

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#### Georgia

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#### Germany

Kinder Consulting

#### Ghana

African Islamic Economic Foundation Alliance for Reproductive Health Rights Ghana Institute of Management and Public Administration

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Network of Persons Living with HIV/AIDS -GHANA (NAP + GHANA)

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University for Development Studies

#### Greece

Hellenic Academy of General Practice/Family Medicine & PHC

#### India

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Banka BioLoo Limited Dakshayani and Amaravati Health and Education GCFORCB Organisation

Patient Academy for Innovation and Research Social Alpha Swasti

#### Indonesia

The Airlangga Centre for Health Policy Save the Children Indonesia

#### Israel

CHEN - Patient Fertility Association

#### Japan

Health and Global Policy Institute (HGPI)

#### Jordan

Jordan Society of Family Medicine - JSFM

#### Kenya

Activate Action Amref Health Africa Baerbel Jennert Foundation BOKA HAVEN Community AID Transformation Alliance Group (CATAG) Community Fight Against GBV and HIV/AIDS Community Health Volunteers Confraternity of Patients Kenya (Cofpak)

Faith Acts Research Support and Training (FARST - Africa) Good Health Community Programmes Great daughters of Nyakach Health NGOs Network (HENNET) HealthX Africa Heart to Heart Smile Humanity for Orphans, Youth and Widows Initiatives Kenya (HOYWIK) Inuka Success Organization Jijenge Youth Kenya Female Advisory Organization Kisumu Action for Disability Development Network (KADDNENT) Kisumu County Community Health Workers Network Kisumu Medical and Education Trust (KMET) Kisumu Social Inclusion Network (KSIN) Living Goods Local Initiatives Development Agency MAAYGO Make Me Smile Kenya Mimbi International School - Medical Clinic Mumbo International Options (Evidence for Action-MamaYe) Organization of African Youth SHAPE CBO Shift For Change (S4C) SODECA STADA Kenya Stage Media Arts Stessis Digital Medical Systems Support Heal and Purpose to Elevate (SHAPE) Supporting Girls in Education TINADA Youth Organization Ugenya Youth Community Development Project Winam Chanua Dada CBO (CHADALA) YESAM

#### Lebanon

Imam Sadr Foundation

#### Lesotho

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#### Liberia

Rural Women and Girls' Rights Foundation

#### Malawi

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#### Mexico

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#### Nepal

Public Health Research Society Nepal

#### Netherlands

European Forum for Primary Care WONCA ICPC Foundation

#### Nigeria

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LaGray Chemical Co Limited

Lami Fatima Babare Cervical Cancer Foundation

#### MWAN PAS

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Nigeria Association of Social Workers

NOIPolls Limited

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Planned Parenthood Federation of Nigeria

Society for Conservation and Sustainability of Energy and Environment in Nigeria (SOCSEEN) Ukana West 2 Community Based Health

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West African Institute of Public Health Women in Media Communication Initiative (WIM)

#### Pakistan

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#### Portugal

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#### Sierra Leone

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#### South Africa

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#### South Sudan

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#### Zambia

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#### Zimbabwe

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