



BRIEFING FOR MEMBER STATES

POLITICAL DECLARATION OF THE HIGH-LEVEL MEETING ON UNIVERSAL HEALTH COVERAGE

The Political Declaration of the High-Level Meeting on Universal Health Coverage provides a welcome opportunity to “leave no-one behind” by ending neglected tropical diseases.

NEGLECTED TROPICAL DISEASES ARE DISEASES OF INEQUITY

Universal Health Coverage (UHC) means that all people have access to the full range of quality health services they need, when and where they need them, without financial hardship. It covers the full continuum of essential health services, from health promotion to prevention, treatment, rehabilitation, and palliative care across the life course¹.

Neglected tropical diseases (NTDs) are a group of twenty preventable and treatable diseases that affect 1.65 billion people worldwide. NTDs cause immeasurable suffering. They debilitate, disfigure and can be fatal. By most commonly affecting some of the most vulnerable people in the world, who often live in remote communities, NTDs create generational cycles of poverty and cost low- and middle-income countries billions of dollars every year.

As diseases of inequity, NTD programmes can provide a gateway and act as an indicator for equitable progress towards achieving UHC. NTD interventions are a tracer for equity in UHC and can help ensure we ‘leave no-one behind’. Indeed, NTDs are recognised as a ‘litmus test’ for UHC (Dean et al., 2019).

The link between NTDs and UHC is clear. Without addressing NTDs, no country will achieve UHC, especially when we consider the consequences of climate change and the geographical spread in transmission of NTDs.

THE FINANCIAL IMPACT OF NTDs

Funding NTDs makes solid financial sense. Many low-cost interventions for NTDs exist which are affordable to implement in low-income settings, yield a robust return on investment, and are regarded as a development best-buy. Drug donations for

interventions like preventive chemotherapy, for example, have been particularly efficacious and cost-effective, with over 19 billion tablets donated at the Kigali Summit on malaria and NTDs by the pharmaceutical industry to deliver the WHO

¹ [https://www.who.int/news-room/fact-sheets/detail/universal-health-coverage-\(uhc\)](https://www.who.int/news-room/fact-sheets/detail/universal-health-coverage-(uhc))

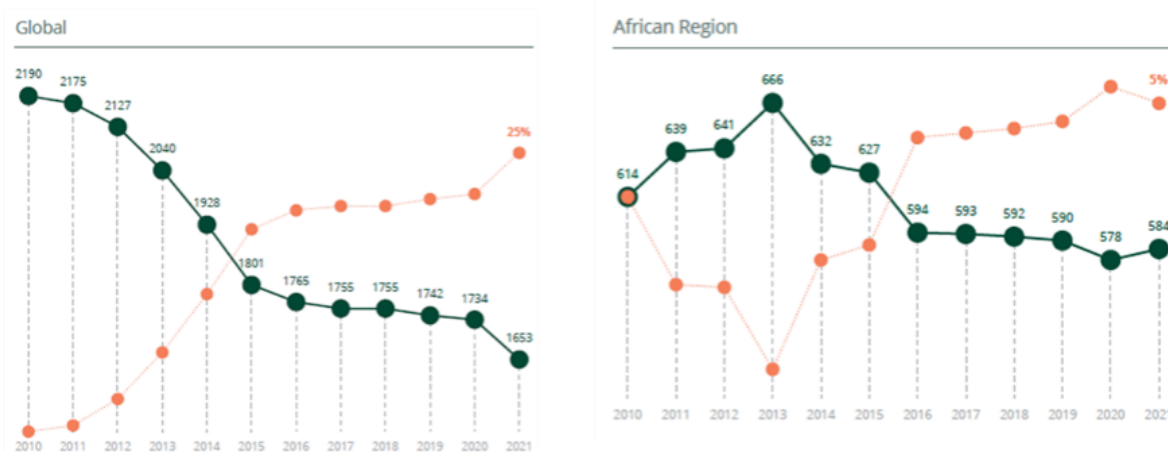


NTD road map so far. The end of NTDs offers a net benefit to affected individuals of about US\$25 for every dollar invested by funders—a 30 percent annualised rate of return.

The COVID-19 pandemic has set back progress on UHC and NTDs, and there is a need for the global community to accelerate their support for stronger health systems. NTD programmes can be leveraged to support us getting back on track with UHC. Unfortunately, instead of being leveraged, NTD programmes are consistently neglected. It has been shown that countries rated highly on their progress towards UHC are ranked low on their NTD treatment coverage. In addition, during the COVID-19 pandemic, NTD programmes were one of the hardest impacted².

The SDG (3.3) indicator for NTDs is a 90% reduction in the number of people requiring an intervention against an NTD by 2030. In 2023, 1.65 billion people still required an intervention against an NTD. This number needs to be reduced by 1.4 billion in the next 7 years if we are to achieve the health SDGs (3.3) and UHC target (3.8).

From the WHO report published January 2023*: number of people requiring interventions against NTDs (green) and associated percentage reduction (orange), 2010-2021



Investments in NTDs have been a global success story to date, with 49 countries having eliminated at least one NTD and 600 million people no longer requiring treatment for them, demonstrating that it is possible to reach some of the world's poorest and most remote communities through creative, low-cost programmes.

Addressing NTDs is essential in our progress towards UHC and achieving the SDGs, ensuring a safer, fairer, and more prosperous world.

WE URGE YOU TO:

² Third global pulse survey conducted by the WHO - [file:///C:/Users/shalford/Downloads/WHO-2019-nCoV-EHS-continuity-survey-2022.1-eng%20\(2\).pdf](file:///C:/Users/shalford/Downloads/WHO-2019-nCoV-EHS-continuity-survey-2022.1-eng%20(2).pdf)

1. **Ensure that the Political Declaration on Universal Health Coverage specifically addresses the needs of the 1.65 billion people currently requiring an intervention against NTDs.** Without action on NTDs, UHC will not be achieved.
2. **Advocate for the WHO NTD service coverage index to be used as an indicator for equity on progress towards UHC.** NTDs affect 1.65 billion people in some of the poorest and most marginalised communities. These are the populations that UHC was designed to help yet are most at risk of suffering from catastrophic out-of-pocket health expenditure, in the bottom billion. There is no better way for Member States to measure progress towards UHC than by measuring the coverage for NTDs. Furthermore, verifiable NTD coverage data is routinely collected from Member States by the WHO. By using NTD treatment coverage as an indicator for equitable access to health, it will give a truer picture of the coverage of UHC and the ability of countries to protect their underserved populations, and help fulfil the goals of the SDGs and the WHO NTD roadmap 2030.

HOW?

There is an opportunity to reflect this in a new paragraph under the **CALL TO ACTION – POLITICAL LEADERSHIP & GOVERNANCE** in the zero-draft of the Political Declaration. We urge you to propose / support the following additional text:

NEW OPI (c) “To ensure progress on universal health coverage is equitable and leaves no-one behind, adopt the WHO service coverage index for neglected tropical diseases as an indicator for equity, which prioritizes services for the poorest and most marginalized communities (*Based on WHA 66.12, 2013 and Lancet Glob Health 2018; 6: e980–88*)³.

3. **Advocate for investments in primary healthcare (PHC) to achieve UHC.** PHC is the backbone of health systems and should be structured to support the delivery of essential packages of care that prioritise underserved communities. It is recognised that 90% of essential interventions for UHC can be delivered through the PHC system. NTD interventions must form part of PHC and be included in essential packages of care.
4. **Ensure that any new investments in UHC, prioritises investments in neglected tropical diseases.** This should include investments in research, innovation and access, for vaccines, new drugs and diagnostics for NTDs. As of May 2023, 49 countries have eliminated at least one NTD and over 600 million fewer people required interventions than in 2010. Yet, despite these incredible impacts, NTD programmes are facing critical funding gaps that threaten progress to date. NTD programmes do not benefit from sustainable and

³ Lancet Glob Health 2018; 6: e980–88, Published Online July 24, 2018
<https://www.thelancet.com/action/showPdf?pii=S2214-109X%2818%2930307-3>, S2214-109X(18)30307-3

predictable financing, relying on the goodwill of donors, threatening progress. It will be essential that any new investments to UHC prioritises NTDs.

5. **Commit to strengthen political leadership and country ownership** of, and investment in, the fight against NTDs by accelerating the integration of NTD services and interventions within national health systems as a central component of UHC **and endorsing the [Kigali Declaration on NTDs](#)**⁴. The Kigali Declaration is a high-level, political declaration that is mobilising political will, community commitment, resources and action, and securing commitments needed to end the suffering caused by NTDs.
6. **Call for a UN High-Level Meeting on Neglected Tropical Diseases in 2025.** To date there have been high-level political meetings on HIV/AIDS, AMR and TB and yet not on NTDs. We need to drive political action and mobilise the resources to deliver SDG 3 in its entirety.

Universal Health Coverage can only be achieved by ending NTDs.

⁴ The Kigali Declaration on Neglected Tropical Diseases has to date been endorsed by the following countries: Belgium, Botswana, Canada, Djibouti, Ethiopia, Germany, Japan, Ghana, Malawi, Nigeria, Papua New Guinea, Rwanda, Switzerland, UAE, UK, United Republic of Tanzania, USA, Timor Leste, Uganda, Vanuatu