

Draft joint statement for UNGA HLM on UHC delivered by the Prime Minister of St. Maarten as part of The Kingdom of the Netherlands on behalf of Australia, Belgium, Canada, Finland, France, Germany, Guinea, Netherlands, Norway, Peru, Philippines, South Africa, Spain, Sweden, United Kingdom [...]

Mr. President,

It is my pleasure to deliver this statement on behalf of the governments and peoples of Australia, Belgium, Canada, Finland, France, Germany, Guinea, Netherlands, Norway, Peru, Philippines, South Africa, Spain, Sweden, United Kingdom [...], as well as my own country St. Maarten as part of The Kingdom of the Netherlands.

Mr. President, I would like to join previous speakers in congratulating you on your election and wishing you a successful tenure. We wish to express our appreciation and give thanks to Ambassador Imnadze of Georgia and Ambassador Srivihok of Thailand, for steering the negotiations on the Political Declaration on Universal Health Coverage (UHC) to success. We thank Director-General Tedros Adhanom Ghebreyesus of WHO for his support and look forward to his continued leadership in advancing UHC. We also acknowledge the outstanding contributions of civil society to this process.

Mr. President, today, the adoption of the Political Declaration and this historic High-Level Meeting on Universal Health Coverage constitute a defining moment for the benefit and the well-being of millions of people around the world. UHC is fundamental for achieving all sustainable development goals. We believe that the implementation of this Political Declaration will be a major contribution to a world in which every person's right to health is protected. As we celebrate this milestone, I would like to address the importance of sexual and reproductive health and rights to realize UHC and achieve the SDGs, in four points:

First, we strongly believe that SRHR is an integral part of Universal Health Coverage and the SDGs. For UHC to be genuinely universal, it must embrace all health services, including sexual and reproductive health and rights (SRHR). Sexual and reproductive health services in UHC programs need to be of good quality, available, accessible and acceptable to all women and girls across the life course, free of stigma, discrimination, coercion and violence. Many examples of national UHC schemes encompassing SRHR, around the world, have demonstrated the significant difference such programs can make in preventing risks, reducing harm, and ultimately saving lives.

Second, investing in SRHR has proven to be affordable, cost-effective, and cost saving. Such investments significantly contribute to reducing financial risk, decrease the burden on health systems, and hence foster economic development, poverty reduction and sustainable development. Around sixty-two percent of sexual and reproductive health services are financed out-of-pocket by patients, with alarming implications for equitable access to these preventable and life-saving services. With a limited investment of nine US dollars per person, per year, these essential services can be available to all.

Third, **gender-related barriers to accessing UHC must be addressed, including by direct involvement of women, adolescents and marginalized groups in policy and program design.** Gender inequalities are a barrier to the realization of the right to health and universal and equitable access to quality health services. They are also a barrier to achieving the SDG targets of reducing maternal mortality, ensuring universal access to SRHR, addressing gender-based violence as well as harmful practices.

Lastly, Mr. President, **investing in comprehensive sexual and reproductive health services in UHC is necessary to address the needs of women, girls, adolescents and people in the most marginalized situations who need these the most.** According to the recent Guttmacher-Lancet report on SRHR, more than half of the world population will have limited or no access to sexual and reproductive health services over their reproductive years. Focusing on the needs of the poorest and most vulnerable women, adolescent girls and young people in UHC programs is necessary to close the gap in access, equity and gender equality, to empower women and girls tangibly, and achieve universality, *leaving no one behind*.

In closing Mr. President, we wish to reassure you of our full commitment and support to the implementation of the Political Declaration on Universal Health Coverage in our respective countries and abroad.
I thank you.