Integrated strategies that prioritize disadvantaged groups are essential to ensure that no one is left behind, accelerating progress towards UHC and the SDGs.
Universal health coverage (UHC) is a cornerstone of efforts to achieve better health and development outcomes, providing a platform for achievement of the health-related targets of the Sustainable Development Goals (SDGs). Following the endorsement of the UHC regional action framework at the sixty-sixth session of the WHO Regional Committee for the Western Pacific in October 2015, WHO developed three guidance documents to support Member States to strengthen health systems to achieve UHC.
Introduction

Universal health coverage (UHC) is a cornerstone of efforts to achieve better health and development outcomes, providing a platform for achievement of the health-related targets of the Sustainable Development Goals (SDGs). Following the endorsement of the UHC regional action framework, *Universal Health Coverage: Moving Towards Better Health*, at the sixty-sixth session of the WHO Regional Committee for the Western Pacific in October 2015, WHO developed three guidance documents: *Regional Action Agenda on Achieving the Sustainable Development Goals in the Western Pacific*, *SDG & UHC Regional Monitoring Framework*, and *Universal Health Coverage and Health in the Sustainable Development Goals Baseline Report*.

WHO also established and convened the UHC Technical Advisory Group (TAG). In addition, WHO has supported Member States with country-specific challenges and priorities to strengthen the attributes of high-performing health systems – quality, efficiency, equity, accountability, sustainability and resilience.

Quality

The quality and safety of health services, delivered at the individual and population levels, are fundamental to UHC. WHO support over the past year included training on hospital quality and patient safety and a meeting of the health-care quality improvement network.

To improve access to quality medicines, WHO supported strengthening of regulatory systems by convening the regional alliance for national regulatory authorities, subregional workshops for the Mekong and the Pacific, and technical support to countries on national regulatory authority benchmarking, quality management system development and pharmacovigilance. Support on traditional medicine included a regional meeting held in Seoul, Republic of Korea, hands-on laboratory training,
analyses in 11 countries. Support was provided to Member States in shaping incentives for appropriate service provision including in Cambodia, China, the Lao People’s Democratic Republic, Mongolia and Viet Nam.

**Equity**

Leaving no one behind is a core principle of both UHC and the SDGs. WHO supported Member States to improve financial protection and reduce barriers to access. In Viet Nam, WHO prepared a series of policy briefs and undertook policy dialogues on health sector reform, including health workforce education, strengthening of primary health care and improving linkages with hospitals. WHO also led a policy roundtable in Singapore on integrated, people-centred services.

The Third Meeting on Access to Medicines under UHC in the Asia Pacific Region discussed improved access to high-cost medicines and price setting. The Price Information Exchange for Medicines was relaunched, and Malaysia, the Philippines and the Republic of Korea shared their latest pricing data. Technical support was provided for underserved populations including development of policies that foster healthy and active ageing, for health workforce distribution, and for facilitated expansion of the Global Network for Age-friendly Cities and Communities in the Western Pacific Region.

and technical assistance to Cambodia, Fiji and the Federated States of Micronesia.

To strengthen health workforce regulation, WHO held a policy roundtable in Melbourne, Australia, identifying key issues for countries – clear legislative frameworks, capable regulatory bodies, and strong linkages between education institutions and regulatory bodies – and provided follow-up technical support in Cambodia, Fiji, the Lao People’s Democratic Republic, Papua New Guinea and Viet Nam.

**Efficiency**

Making the best use of resources for health is increasingly important in the context of reduced external funding for health and the increasing costs of health care. WHO supported Member States in the alignment of health system architecture to population needs, including revision of the role delineation policy in Solomon Islands, minimum-package-of-activities guidelines in Cambodia, and documentation of integrated service delivery models in New Zealand and Solomon Islands.

WHO also supported the development of an analytical framework for sustainable financing of public health priorities and technical support in Cambodia, Mongolia and Viet Nam, as well as the generation and use of national health accounts and household survey data.

Sustainable and effective pharmaceutical systems, with safe, effective and affordable medicines available at all levels of health care, are crucial for UHC.
Accountability

Accountability entails stakeholders providing information and justifying their decisions and actions, with the imposition of sanctions and rewards. Work has progressed on the development of health information systems including for the health workforce and traditional medicine, as well as for the analysis and use of this information for policy dialogue and decision-making.

WHO also worked with Member States to strengthen government leadership and the rule of law through the review of legislative frameworks, including a review of public health legislation in Viet Nam and support to the Philippines on responding to potential federalist constitutional reforms. WHO continued to support the Health Leadership Development Initiative and Global Health Learning Centre as key health leadership development initiatives in the Region.

Sustainability and resilience

WHO has worked across technical divisions to support Member States in improving the sustainability and resilience of health systems. In particular, essential public health functions were introduced as a key theme in work on health system development and were a key focus for the UHC TAG in 2016.

Related technical assistance and support to Member States over the past year included work on sustainable financing and the transition from global health initiatives, linkages between communicable and noncommunicable disease control, and health system implications of the International Health Regulations, known as IHR (2005). The health system team participated in the IHR (2005) Joint External Evaluation process for Viet Nam.

Next steps

WHO will continue to support Member States in the development and implementation of their road maps for UHC as a platform for the achievement of the SDGs. The 2017 UHC TAG meeting will provide the opportunity to review progress, share lessons learnt, and prioritize at the country and regional levels. WHO will continue to facilitate and develop new partnerships and new ways of working to realize the ambitions of the SDGs and ensure that no one is left behind.

WHO and partners support the first national multi-stakeholder workshop on antimicrobial resistance in the Lao People’s Democratic Republic during the 2016 World Antibiotic Awareness Week.
1. Partnering in new ways to achieve the SDGs in the Region

In September 2015, United Nations Member States adopted the 2030 Agenda for Sustainable Development. The SDGs, which apply to all countries at all stages of development, recognize that health influences and is influenced by broader cultural, economic, political and social factors. Achieving health in the SDGs requires new partnerships and new ways of working. It requires whole-of-system, whole-of-government and whole-of-society approaches that leave no one behind.

In response to requests by Member States, the WHO Regional Office for the Western Pacific developed the Regional Action Agenda on Achieving the Sustainable Development Goals in the Western Pacific in consultation with regional programmes, country offices, Member States and experts. The action agenda builds on existing global and regional strategies and identifies 12 action domains across four guiding questions:

- What are countries aiming to achieve, and how will they know?
- What are the policy and programme priorities for leaving no one behind?
- How will countries put their priorities into effect?
- How can the health sector drive the agenda?

The action agenda highlights the importance of realizing “win–wins” through collaboration across sectors and engagement of stakeholders beyond government. Best buys for partnerships across sectors include policies and interventions in education and early childhood development, agriculture, urban development and infrastructure, the environment and social protection.

In supporting countries in implementation, initial priorities include strengthening partnerships across sectors and stakeholders. For example, in November 2016, the Second Regional Forum of WHO Collaborating Centres in the Western Pacific brought together more than 140 collaborating centres to review progress, share best practices, strengthen partnerships and identify ways to support Member States in achieving the SDGs. Also in November 2016, as part of WHO’s whole-of-government approach to supporting countries to enhance the effective use of law for health, WHO supported the National Assembly of the Republic of Korea to convene the 2nd Annual Meeting of the Asia-Pacific Parliamentarian Forum on Global Health, bringing together 45 parliamentarians from 17 countries in the Western Pacific and South-East Asia regions to promote the role of parliamentarians in achieving health in the SDGs.

As a further example, in March 2017, WHO collaborated with the Government of South Australia on a global conference in Adelaide, Australia, on Health in All Policies: Progressing the Sustainable Development Goals. The conference built on the outcomes of the 9th Global Conference on Health Promotion in Shanghai, China, in November 2016, and provided an opportunity to explore how different regions and countries with varying governance settings are advancing and sustaining Health in All Policies. The Adelaide conference resulted in an outcome statement: Implementing the Sustainable Development Agenda through good governance for health and wellbeing: building on the experience of “Health in All Policies.”
2. Advancing health through attention to gender, equity and human rights

The SDGs provide new impetus for advancing health through attention to gender, equity and human rights. This requires partnerships and action within the health sector, across other sectors within government and beyond government.

Elements of these partnerships and examples of successful or promising practices were captured in a summary booklet of short stories, which was launched on 8 March 2017 (International Women’s Day). They also fed into the development of a longer regional report intended to inform future efforts on advancing health through attention to gender, equity and/or human rights in the context of the SDGs.

At the same time, given that gender-based violence is a significant public health concern in the Western Pacific Region, efforts were made to strengthen this area of work in partnership across the Organization.

A regional campaign – Human Together – was launched during a high-level side event at the October 2016 session of the WHO Regional Committee for the Western Pacific, building on social and political mobilization and technical support to countries in previous months. The campaign was replicated at the country level during the 16 Days of Activism against Gender-Based Violence. Ten Member States, with representatives from multiple sectors, also participated in a November 2016 regional meeting on Multi-Sectoral Services to Respond to Gender-Based Violence against Women and Girls in Asia and the Pacific, organized by WHO, the United Nations Population Fund and UN Women, with inputs from the United Nations Office on Drugs and Crime.

These efforts are just the beginning. They provide a starting point for change. Programmes can start where possible by considering issues, asking critical questions, and identifying linkages between their programme and gender, equity and/or rights. It is hoped that lessons learnt will help accelerate efforts to build partnerships for action and advance health through attention to gender, equity and/or rights within the Region.

The Human Together campaign uses posters like this one – and other tools – to challenge communities to eliminate gender-based violence.
3. **FAO–OIE–WHO support for multisectoral partnership to combat AMR**

The fight against antimicrobial resistance (AMR) is a global development issue that requires multisectoral partnerships. Collaborative action through successful governance at the national level can serve as a model for effective partnership in the era of the SDGs.

Significant progress has been made on the implementation of the *Action Agenda for Antimicrobial Resistance in the Western Pacific Region* and the *Global Action Plan on Antimicrobial Resistance*. Through collective support from the Food and Agriculture Organization of the United Nations (FAO), the World Organisation for Animal Health (OIE) and WHO, 9 countries have launched multisectoral national action plans, and 11 more are finalizing such plans.

The collaboration among FAO, OIE and WHO supports subregional initiatives to identify common gaps and challenges, as well as the way forward for collective action on AMR. In January 2017 – at the Meeting on Multisectoral Action on AMR in Cambodia, the Lao People’s Democratic Republic and Vietnam – representatives from agriculture, environment, health and trade sectors collectively developed a five-year road map for national and subregional action. In February 2017, 13 Pacific island countries identified collective actions at the Meeting on Quality Assurance and Rational Use of Essential Medicines. A third subregional FAO–OIE–WHO initiative brought together representatives from agriculture and health ministries from 12 countries and areas to identify recommendations for the Region in finalizing and implementing national action plans, in particular on systems strengthening, behaviour change, AMR surveillance and monitoring of antimicrobial consumption across sectors.

At the national level, FAO, OIE and WHO are working together to support multisectoral governance mechanisms that include, but are not restricted to, ministries of agriculture and health. In November 2016, two dozen countries and areas held national campaigns during World Antibiotic Awareness Week employing a collective One Health approach targeting health professionals and students from the human and animal health sectors with the key message “think twice before using antibiotics”. National multisectoral partnerships supported by FAO, OIE and WHO are needed to strengthen the global effort to combat AMR.
4. Working in partnership to bring health and finance together

Sustainable financing of public health priorities will become increasingly relevant in the context of the SDGs and continue to require collaboration between health and finance, as well as other sectors. This collaboration is supported by WHO through country teams as well as through regional efforts.

For example, at the regional level, WHO in collaboration with the Asian Development Bank and the World Bank, supported a workshop in 2016 that gathered key policy-makers in ministries of health and finance, as well as the insurance industry, from countries across Asia.

Sustainable financing of public health priorities is a particular health financing challenge shared by countries in the Region. WHO is working with the health and finance sectors to prepare for and respond to reductions in funding from global health initiatives, including strategies on ensuring the adequacy of domestic financing, improving health system efficiency through health financing reform, and managing the transition in funding sources and channels to improve overall health system performance. WHO support has included the development of an analytical framework and country-specific support to plan and manage a smooth transition from vertically funded disease programmes to domestic financing systems.

Support to the health sector in improving public financial management systems also is an important element of work on sustainable financing of public health priorities and on strengthening collaboration between the finance and health sectors. This work includes improving flexibility in resource allocation and enables the health sector to be more strategic in shaping incentives with service providers to ensure the public interest and the advancement of UHC.
5. Collaborating to strengthen regulatory systems

Regulatory systems are a key action domain to achieve UHC and are essential for the protection and promotion of public health. WHO is working with partners and supporting Member States to strengthen their regulatory systems, including in the areas of medicines and the health workforce.

WHO has a well-established partnership with many national regulatory authorities and affiliated institutions, such as national control laboratories in the areas of medicines quality assurance and biological standardization and evaluation. For example, the partnership with the Ministry of Food and Drug Safety of the Republic of Korea has enabled both funding and technical support to strengthen vaccine, biomedicine, pharmaceutical and traditional medicine regulation in the Region.

This partnership provides consistency and reliability in country support and enables WHO to take a well-planned strategic approach based on specific country needs that have been identified through benchmarking activities by the national regulatory authorities.

WHO also has a wide range of partnerships to strengthen health workforce regulation in the Region. The partnership with the Australian Health Practitioner Regulation Agency has strengthened and grounded technical support to policy-makers and regulators in the Region in the development of effective, appropriate and efficient regulatory systems. It also has facilitated the identification and sharing of best regulatory practices and common challenges, including through publications and policy dialogue. In particular, the partnership informed a policy roundtable held in 2016 alongside the 12th International Conference on Medical Regulation convened by the International Association of Medical Regulatory Authorities.

WHO will continue to collaborate with partners and support Member States in strengthening regulatory systems to advance UHC and promote and protect public health.