

## Statement on Agenda Item 11.5—Primary Health Care Towards Universal Health Coverage

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PATH believes that primary health care (PHC) is the most efficient and cost-effective way to achieve our shared global goals of universal health coverage (UHC) as outlined in the SDGs. PATH encourages WHO and member states to ensure that PHC is viewed from a person- and community-centric perspective that addresses health throughout the life-course, not just through the treatment of a single set of diseases.

Broadening civic engagement and amplifying citizen voice are critical in translating PHC commitments into programs that align with community needs. Mobilized communities are, and should continue to be, actively engaged in planning and monitoring as they are able to foster accountability and represent citizen interest in implementing stronger policies, budgets, programs, and services to improve health and well-being. Individuals are the experts of their own needs, both as consumers and, increasingly, as providers through self-care and caregiving. By underscoring the connections between personal experiences and larger PHC systems, communities can mobilize to demand and co-create accessible, high-quality PHC. Any discussion of UHC or PHC should fully reflect the importance of people-centered, integrated approaches that also hold governments accountable to meeting commitments.

New innovations in health will be needed to achieve UHC/PHC. Biomedical innovation must go hand-in-hand with system improvements so that health technologies are available to those who need them. WHO's approach to UHC/PHC should also fully embrace and leverage the transformative power of digital technologies to achieve PHC. When people have access to their own health data, they can act as informed consumers who can advocate for use of the newest, most effective and efficient tools and resources to respond to their own needs.