Universal Health Coverage—looking to the future

Universal Health Coverage (UHC) is defined by WHO and the World Bank as when "all people receive the health services they need without suffering financial hardship when paying for them". UHC is central to the UN Sustainable Development Goals (SDGs), adopted in September, 2015, with a specified target in SDG 3—ensure healthy lives and promote wellbeing for all at all ages. The SDGs are interconnected but good health underlies them all. UHC has been acknowledged by the World Bank, WHO, the G7, and multiple governments as fundamental for realising the goal of sustainable development. Although some governments were unsupportive of UHC's inclusion in the SDGs (such as the UK), its inclusion created a clear objective, while also sending a strong and important political signal.

On Dec 12, 2016, the third annual International Day of Universal Health Coverage will be marked, and progress towards UHC discussed and celebrated globally. This year's theme is "health for all", with a call to "act with ambition". Several hundred partners, including global organisations such as The Rockefeller Foundation, WHO, the World Bank Group, and Oxfam, are behind the initiative, and all agree that the best way to achieve health for all is through UHC.

Further to consensus on the importance of good health for sustainable development, the UHC movement has also brought agreement about financing health. As Rob Yates, Senior Fellow at Chatham House, reported to *The Lancet*: "The remarkable consensus (given previous battles over the years) is that the countries should publicly finance their health systems if they want to achieve UHC." Donor coordination to achieve UHC is crucial. That leaders such as Jim Kim of the World Bank and Margaret Chan of WHO are explicitly and repeatedly saying that UHC can only be achieved through public financing, sends the strongest possible message against health-care user fees: they must be abolished, and services must be provided free at the point of delivery. User fees inevitably punish the poor.

The emerging trend is for governments to take responsibility for financing their health systems, and not to pursue alternatives to public finance. Yet some countries remain complacent—including the UK. In not funding its health system adequately, the NHS share of GDP has declined and services are struggling. *The Lancet*'s NHS Manifesto published in October drew attention to the pressures that threaten sustainability in the UK. Of particular concern is that the UK spends 30–50% per capita less on health than countries including Germany, Ireland, Australia, and Sweden.

During the past 3 years there have been several countries with notable success, but also local challenges. Georgia has recently successfully switched to a publicly financed health system. In India, the Modi government has been disappointingly inactive in supporting UHC, and has reduced the funding of national health programmes (although regional initiatives are emerging and show great promise). In this week's issue, a World Report describes a network of local Mohalla clinics that are successfully serving populations otherwise deprived of health services.

Increasingly, political leaders seem to be presenting a shared global vision for UHC. It is notable that so many former and current heads of state are active in promoting UHC: including Shinzō Abe, the Prime Minister of Japan, and other leaders of the G7. It would seem that political leaders are collectively more committed to UHC than to previous agendas around strengthening health systems (although this situation could change under President Trump). That UHC brings broad population benefits could in part explain this trend.

Next week, an important step towards the goal of UHC takes place in Geneva. In September, Margaret Chan announced the creation of the International Health Partnership for UHC 2030 (UHC 2030). The purpose of this new partnership is to coordinate efforts to strengthen health systems and deliver UHC, including financial risk protection. On Dec 12–13, UHC 2030 brings countries and agencies together to establish the partnership as a formal global health systems coordination platform. It will also seek commitments from all parties as to next steps in the movement towards UHC. 2017 will be a milestone year for UHC. It promises to be the moment when words are translated into deeds. UHC 2030's role is not only to ensure that this opportunity is seized but also that governments don't renege on their promises and commitments. ■ *The Lancet*

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For more on the **International Day of Universal Health Coverage** see http://universalhealthcoverageday.org/welcome/

For the **NHS Manifesto** see **NHS Manifesto** *Lancet* 2016; **388:** e24–27