

Subject: Ensuring universal health coverage as defined by equitable access to health services for all, with an emphasis on access to care for vulnerable populations

Sponsors: Costa Rica, Grenada, Haiti

Signatories: Argentina, Brazil, Canada, Chile, Colombia, Cuba, Dominican Republic, Ecuador, Honduras, Jamaica, Mexico, Peru, Saint Lucia, Uruguay

Defining vulnerable populations as sectors that currently lack or are at the risk of lacking access to health services,

Recognizing that vulnerable populations vary depending on the individual nation, including but not limited to: marginalized groups such as refugees, documented and undocumented immigrants, those of low socioeconomic status, mothers, children, the elderly, and LGBTQ+ populations, as well as geographically isolated populations or populations at high risk of natural disasters or violent conflict,

Affirming the need for the availability of a baseline set of health services for all people,

Noting that having a functional health information system is a prerequisite for achieving efficient and quality health care provision for all populations,

Realizing that the optimal method of health system financing varies among nations,

Recognizing that a successful UHC system must be sustainable,

The General Assembly Plenary,

1. *Requests* the creation of a health information system to collect data and monitor outcomes to tailor health systems to the needs of a given nation or area
 - a. *Requests* that individual nations assess health care needs and available resources by creating health information systems to collect and analyze data and monitor outcomes
 - i. *Recommends* that such an assessment is audited by the WHO in collaboration with NGOs before implementation of a UHC system
 - b. *Suggests* a focus on outcomes in determining the success level of a UHC program

2. *Urges* the provision of a basic set of services to be available to all, including but not limited to maternal and child health care, primary care, and preventative care
 - a. *Strongly suggests* that the basic scope of services in a given nation be expanded beyond the three broad areas stipulated above to encompass specific health needs of each country
 - i. *Strongly urges* that the issue of mental health be made a priority when deciding to expand the scope of basic services provided
 - b. *Recommends* results-based implementation of services in accord with the data generated by health information systems
3. *Endorses* the development by member states of systems for UHC in which everyone, especially the most vulnerable, has access to needed health services without incurring financial hardships
 - a. *Encourages* the creation of partnerships and collaborations between countries, which may be necessary to make the development of such a system feasible in some developing nations
 - b. *Encourages* encourages better targeting and coordination of existing funds to address international issues, including but not limited to migrant populations, disease epidemics, international information databases, and assistance to countries in need with regards to individual universal healthcare coverage systems.
 - c. *Supports* the exploration of various financing schemes for individual contributions on a country-by-country basis
 - i. *Supports* allocating funds to provide a safety net for those who are unable to pay for health care
 - d. *Affirms* countries' responsibility to develop cost-effective health coverage systems
 - i. *Emphasizes* strengthening prevention-based programs as a way to potentially lessen financial burdens from preventable diseases, especially among vulnerable populations
4. *Urges* the expansion of health services into underserved regions to provide primary and preventive health services
 - a. *Suggests* the development of health facilities in both rural and urban regions to help lessen the geographical barriers and opportunity cost to health care access for vulnerable populations
 - b. *Encourages* the development of an able and plentiful health workforce to ensure that people of all regions have access to quality health care
 - i. *Suggests* that the aforementioned workforce also serve to educate the local populous with regards to personal healthcare

- ii. *Calls* upon both individual nation as well as the international community to begin a self-sustainable training program, focusing on developing community health worker programs
 - 1. *Encourages* the formation of CHW programs that are integrated with existing or developing health systems, including supervision and remuneration
- c. *Suggests* utilizing local infrastructure to maximize efficient resource allocation and ensure cultural competency
- 5. *Expresses* its appreciation for NGO participation, and encourages focused exit strategies for countries to remain self-reliant and sustainable