



## UHC by 2030:

# Safeguard Good Health and Human Rights for All

This week, the world commemorates Human Rights Day and Universal Health Coverage (UHC) Day on the 10th and 12th of December respectively, an affirmation of every person’s inalienable civil, political, economic, social, and cultural rights, including the fundamental right to health. “**Our Everyday Essentials**”, this year’s Human Rights Day theme, emphasises that human rights should be positive, essential and attainable for all in our daily lives. Yet, this year’s UHC Day theme “**Unaffordable Health Costs? We’re Sick of It!**” reminds us of the immense challenge that key and vulnerable communities – including millions of people living with, vulnerable to and/or affected by HIV, tuberculosis (TB) and malaria worldwide – face in accessing essential health services due to financial cost, among other significant barriers.

In 2015, the world committed to protecting every person’s right to good health and well-being through the Sustainable Development Goals (SDGs); yet as of 2021, more than half of the world’s population were not fully covered by essential health services<sup>1</sup>. In recent years, progress in the UHC Service Coverage Index (SCI) has stagnated, with the majority of countries experiencing worsening or no significant change in service coverage<sup>2</sup>. Additionally, about a quarter of all people face financial hardship accessing their right to health, including 1 billion people who experience catastrophic out-of-pocket health spending and 344 million people forced deeper into extreme poverty due to the cost of health services<sup>3</sup>. Despite decades of global progress, the Asia-Pacific region remains heavily impacted by the epidemics of HIV, TB, and malaria, with a significant number of countries still having laws that hinder fair and equal access to healthcare for key and vulnerable populations.

“The world is severely off track to achieving the UNAIDS 2025 human rights targets with many countries still criminalising sex work, drug use, and same-sex behaviour. Epidemics are diseases of injustice and progress towards UHC must also go hand-in-hand with redressing human rights violations and existing inequalities,” said Fairy Abdulghani, Regional Coordinator of the Asia Pacific Network of Sex Workers (APNSW). “Given the enormous advancements we have made in health technology and expertise, we have a moral duty to ensure no one – especially communities affected by poverty, marginalisation, and discrimination – is left behind.”

The Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund) is the largest multilateral funder of global health grants in low and middle-income countries and has played a significant role in moving the needle on human rights and UHC in collaboration with governments, the private sector, health workers, civil society and communities. Global Fund interventions actively address human rights-related barriers to health, including stigma, discrimination, and criminalisation on the basis of gender, SOGIESC, legal status, and nationality. The Global Fund’s remarkable progress in controlling HIV, TB and malaria has contributed to 70% of the total improvement in UHC SCI from 2000–2021, while also freeing up an estimated 2.9 billion hospitalisation days, averting 5.5 billion outpatient visits, and

<sup>1</sup> [Billions left behind on the path to universal health coverage](#). World Health Organization. Accessed 5 December 2025.

<sup>2</sup> [Tracking universal health coverage: 2023 global monitoring report](#). Geneva: World Health Organization and International Bank for Reconstruction and Development / The World Bank; 2023.

<sup>3</sup> [Fact sheet: Universal health coverage \(UHC\)](#). World Health Organization. Accessed 5 December 2025.





generating US\$103 billion in cost savings for national healthcare systems by the end of 2023<sup>4</sup>. However, during the Eighth Replenishment Summit on 21st November, pledges to the Global Fund had fallen markedly short with just 63% raised (US\$11.34 billion) out of a US\$18 billion target – putting millions of lives and decades of progress in disease control, expanded health coverage, and human rights in serious jeopardy.

“Achieving UHC is necessary to safeguard not only every person’s right to health, but also our collective security, stability, and economic prosperity,” said Joji Sugawara, Vice President, Health and Global Policy Institute / Advisory Group Member, UHC2030 Civil Society Engagement Mechanism. “However, recent funding cuts and chronic underinvestment in health have pushed progress towards achieving UHC and the SDGs off-course. With five years till 2030, global leaders must recommit to investing in global health to advance UHC and make good on our shared global commitments to build a more equitable and sustainable world.”

On 6 December 2025, the UHC Knowledge Hub was officially launched in Tokyo, Japan at the UHC High-level Forum which provided a platform for senior officials from Ministries of Health and Finance, international organisations and development partners to engage in a strategic dialogue on advancing UHC through strengthened collaboration and innovative approaches to health financing and systems reform. Cambodia, the Philippines and Indonesia are countries from the AP region to be supported in improving the equity, alignment, and effectiveness of domestic and international health financing.

“The UHC Knowledge Hub is essential for clarity on how country structures engage with each other to complement ongoing efforts in UHC for health systems that are responsive to physical and mental health needs, given that health is a right for all,” said Masaki Inaba, Co-Chair & Programme Director at Africa Japan Forum (AJF) and Treasurer of GFAN AP Steering Committee. “With the launch of this collaborative initiative supported by the Government of Japan and established by WHO and the World Bank Group for training, capacity building, peer-to-peer learning, advocacy, and convening, we stress the importance of engaging communities and civil society throughout country-level processes as well as the centrality of the Knowledge Hub for robust, diverse and inclusive multi-stakeholder participation.”

As communities and civil society living with, affected by and/or vulnerable to HIV, TB, malaria and other communicable and non-communicable diseases; who experience unequal access to safe, effective, and affordable essential medicines and vaccines; and who are denied or restricted in the enjoyment of our human rights, we call on world leaders, decision-makers, and all stakeholders to:

- **Rally for additional and increased pledges to the Global Fund’s Eighth Replenishment**, to meet the US\$18 billion investment target<sup>5</sup> needed to save up to 23 million lives, avert 400 million new infections, and sustain progress made towards UNAIDS human rights & UHC2030 targets.
- **Repeal restrictive and discriminatory laws that criminalise key and vulnerable populations** as well as **enact legal protections that uphold full enjoyment of human rights for every person**. Reverse the impact of laws that impinge on human rights of key and vulnerable populations and hinder access to safe and quality healthcare, and introduce protective safeguards that promote inclusive access to health services as set forth in the 2021 Political Declaration on HIV/AIDS.
- **Increase mobilisation of domestic resources for health** to meet a minimum allocation of 5% of GDP<sup>6</sup> on health spending to ensure sustainable and equitable PHC and to avoid catastrophic out-of-pocket health costs for everyone including the most vulnerable.

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<sup>4</sup> [Results Report 2025](#). The Global Fund.

<sup>5</sup> [Eighth Replenishment Investment Case](#). The Global Fund.

<sup>6</sup> [WHY 5% of GDP](#). Civil Society Engagement Mechanism for UHC2030. 2019.

