

GOVERNMENT OF JAMAICA

STATEMENT BY

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ON THE OCCASION OF THE 3RD ANNUAL MINISTERIAL MEETING OF THE GROUP OF FRIENDS OF UNIVERSAL HEALTH COVERAGE AND GLOBAL HEALTH, HELD UNDER THE THEME:

"INVESTING IN HEALTH SYSTEMS STRENGTHENING FOR UNIVERSAL HEALTH COVERAGE THROUGH A PRIMARY HEALTH CARE-ORIENTED APPROACH"

ON THE MARGINS OF THE 77TH SESSION OF THE UNITED NATIONS GENERAL ASSEMBLY HIGH-LEVEL WEEK

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Excellencies, distinguished guests,

I wish to thank the Co-Chairs of the Group of Friends of Universal Health Coverage and Global Health for extending an invitation to Jamaica to participate in this timely and very important exchange.

In 2019, Jamaica launched its Vision for Health 2030 Plan which embraces the results-based management framework established in the SDGs and enshrined in our national development plan. We have thereby taken into account the progressive realisation of universal access to health and universal health coverage as a central approach. However, like many other countries, the COVID-19 pandemic exacerbated the existing vulnerabilities in Jamaica's healthcare system, including structural weaknesses, and precipitated a health crisis.

As we attempt to build back stronger and more resilient, it is clear that the discussions on economic growth and development can no longer view healthcare as a cost to the public purse, but instead as an investment in our people for future prosperity. It is in this vein that the Jamaican Government embarked on a decade-long reform of its primary healthcare system to ensure that the changing demands for healthcare services are met, as well as the continuity of these services in the event of a pandemic or natural disaster. With the triple threat of communicable diseases, non-communicable diseases and climate change, it has never been more important to reform the primary care system in order to support resilience.

In keeping with the Vision for Health, the provisions of the Primary Care Reform Plan 2021-2030 put primary care as the first point of contact and at the core of the health system through the integration of primary and secondary care facilities – including public health departments, diagnostic and therapeutic sites, and hospitals. Its provisions also enable collaboration among health teams, as well as between public and private partners. In this way, the health system becomes more responsive to the needs of vulnerable populations, including the chronically ill and disabled, persons with mental illness, the elderly, as well as low-income or homeless individuals.

Excellencies,

Like other middle-income countries and Small Island Developing States, Jamaica has made significant efforts to increase spending on health during the pandemic. However, developing countries like us have also had to defer investment in pandemic recovery and cut national expenditure in health and other priority areas of socio-economic development to service debt.

The fiscal constraints in developing countries are further eroding progress on the health and poverty-related SDGs, pushing into poverty those who have to pay out-of-pocket for primary health services. Closing the gap will require a strong mix of domestic and international investments – a substantial increase in development assistance in health,, stronger engagement of the private sector, and innovative health-financing policy solutions.

The financing needs to support the 2030 Agenda and related framework for development must be adequately addressed within the multilateral system. In this regard, Jamaica reiterates its call for the reform of the international financial architecture to ensure appropriate access to concessional financing for highly indebted Middle-Income Countries and SIDS.

In the present global and health emergency, financing instruments such as debt swaps, state contingency debt instruments and specialized liquidity funds will create the fiscal space to address issues of debt repayment but also channel wellneeded investments into healthcare, climate resilience, social spending on health and education to promote economic growth and development.

Urgent action is also needed at the multilateral level to ensure the scaling up of international public finance through concessionary finance, reduction in lending rates and addressing debt overheads to reduce debt burden. Moreover, financial flows must be aligned to sustainable development, addressing the unique vulnerabilities of SIDS and their national priorities in order for the SGDs to be tangible, meaningful and attainable.

Excellencies,

I believe we all understand that without good health and effective and accessible health care services, there can be no sustainable development. Healthcare is indeed an investment and we must pivot our thinking to ensure that our investments have the greatest return to ensure a positive and resilient future for generations to come. For Jamaica, this is non-negotiable and a social and economic imperative.

In looking ahead to the High-Level Meeting on Universal Health Coverage in 2023, we urge fellow Member States to continue the call for sustainable global health financing as we re-engage the social contract that involves all citizens in this new paradigm for healthcare.

I thank you.