“We have meanwhile set up a process and there are also independent institutions monitoring which objectives of our G7 meetings we actually achieve. When it comes to these goals we have a compliance rate of about 80%, according to the University of Toronto. Germany, with its 87%, comes off pretty well. That means that next year too, under the Japanese G7 presidency, we are going to check where we stand in comparison to what we have discussed with each other now. So a lot of what we have resolved to do here together is something that we are going to have to work very hard at over the next few months. But I think that it has become apparent that we, as the G7, want to assume responsibility far beyond the prosperity in our own countries. That’s why today’s outreach meetings, that is the meetings with our guests, were also of great importance.”

Chancellor Angela Merkel, Schloss Elmau, 8 June 2015

G7 summits are a moment for people to judge whether aspirational intent is met by concrete commitments. The G7 Research Group provides a report card on the implementation of G7 and G20 commitments. It is a good moment for the public to interact with leaders and say, you took a leadership position on these issues — a year later, or three years later, what have you accomplished?

Achim Steiner, Administrator, United Nations Development Programme, in G7 Canada: The 2018 Charlevoix Summit
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“We recall our commitment to moving toward achieving universal health coverage according to national contexts and priorities, building resilient and sustainable health systems, in order to be able to reach the most affected communities.”

Sahel Partnership Action Plan

<table>
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Background

Universal health coverage (UHC) was first mentioned in the 2000 G8 Okinawa Summit in the context of improving accessibility and affordability of drugs, vaccines, treatments and other preventative measures in developing countries. Similarly, G8 members committed to developing equitable and effective health systems at the 2000 G8 Okinawa Summit.

At the 2005 Gleneagles Summit, members expressed support for African partners’ commitment according to the United Nations Millennium Declaration to ensure all children have access to basic healthcare by 2015 to reduce deaths from preventable causes amongst those most at risk, including women and children. To provide support, members agreed to invest in improving health systems in partnership with African governments by helping train doctors, nurses, community health workers and other health professionals. In light of the aim of AIDS-free generation in Africa, members agreed to work with international organizations such as World Health Organization (WHO) to “develop and implement a package for HIV prevention, treatment and care” to strive for universal access of such packages by 2010. Financing needs for HIV/AIDS will be fulfilled by replenishment of Global Fund to Fight AIDS, Tuberculosis and Malaria. To support the Polio Eradication Initiative, members will continue or increase contributions toward the USD829 million target; the funding gap for 2005 was met. Members also agreed to contribute an additional

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USD 1.5 billion per year to improve access to malaria prevention interventions such as anti-malaria insecticide treated nets, adequate supplies for combination therapies, household residual spraying to reduce the burden of malaria as one of the major causes of death in sub-Saharan Africa.\textsuperscript{2685} G7 leaders took healthcare off of the agenda until the 2008 Toyako Summit.

At the 2008 Toyako Summit, members expressed that they were on track with fighting various infectious diseases such as HIV/AIDS, tuberculosis, and measles. However reaching toward the health Millennium Development Goals (MDGs) remained a challenge.\textsuperscript{2686} Members expressed that they were “determined to honor in full their specific commitments to fight infectious diseases, namely malaria, tuberculosis, polio and working toward the goal of universal access to HIV/AIDS prevention, treatment and care by 2010.”\textsuperscript{2687} Members agreed that a comprehensive approach is needed to address strengthening health systems.\textsuperscript{2688} For sustainable and equitable financing of health systems, members noted they would work with government partners, and welcome the efforts of organizations such as Providing for Health Initiative, International Health Partnership and the Catalytic Initiative to achieve the goal of providing USD60 billion to fight infectious diseases and strengthen health systems.\textsuperscript{2689} Members also stated that they would work with WHO to recruit and retain more health professionals to work toward a ratio of 2.3 health workers per 100 people.\textsuperscript{2690} Considering that MDGs were off track for child mortality and maternal health, members agreed to focus on universal reproductive care.\textsuperscript{2691} Members agreed to continue to fulfill past commitments on malaria by expanding access to insecticide treated nets, with the goal of providing 100 million nets through bilateral and multilateral assistance in partnership with other stakeholders by 2010.\textsuperscript{2692} The 2008 Toyako Summit marked the last summit to address UHC issues until the 2014 Brussels Summit.

At the 2014 Brussels Summit, commitment to improving universal access to affordable and equitable health services was made in relation to improving health of women and children.\textsuperscript{2693} Members stated they were committed to improving health of women and children by “ensuring universal access to affordable, quality, essential health services, strengthening health, education and child protection systems and improving nutrition and access to immunisation.”\textsuperscript{2694} Members will work with GAVI, the Vaccine Alliance to provide vaccines to 30 million children between 2016 and 2020 and to replenish GAVI with help from other public and private donors.\textsuperscript{2695} To address the threat of infectious diseases, members noted their support for Global Health Security Agenda and committed

to “working with partner countries to strengthen compliance with WHO’s International Health Regulations (IHR) and enhance health security around the world.”

At the 2015 Elmau Summit, “enjoyment of highest attainable standard of health” was recognized as a fundamental human right of every being for the first time. Members committed to focus on strengthening health systems, specifically through bilateral programs and multilateral structures.

At the 2016 Ise-Shima Summit, G7 members acknowledged their commitment to ensure well-being of citizens and foster inclusive economic growth by committing to promote UHC. Members also expressed that they will take leadership in reinforcing response to public health emergencies and antimicrobial resistance and promote research and development in these areas, amongst others.

At the 2017 Taormina Summit, G7 members committed to “advancing global health security” and “pursuing policies that advance physical and mental health improvements” across the globe. They recognized that healthy well-being is important to various economic, social and security gains. They committed to “strengthening health systems” to prepare for responding to public health emergencies and other long-term challenges.

At the 2018 Charlevoix Summit, G7 members committed to building “strong, sustainable health systems that promote access to quality and affordable healthcare.” Members recognized that this commitment will enable them to support growth and equal participation that benefits everyone and ensure that citizens lead healthy and productive lives. Members recognized WHO’s role in health emergencies through avenues such as Contingency Fund for Emergencies and World Bank’s Pandemic Emergency Financing facility amongst others and emphasized their need for further development and continued and sustainable financing. Furthermore, members also recommitted to support 76 partners to strengthen implementation of IHR through development of national action plans and use of diverse sources of funding and multi-stakeholder resources.
reaffirmed their support for replenishment of Global Fund to Fight AIDS, Tuberculosis and Malaria in 2019.\textsuperscript{2708}

G7 members’ ongoing commitment to strengthening health systems and improving universal health coverage demonstrates their commitment to the 2030 Agenda for Sustainable Development, also known as the Sustainable Development Goals (SDGs), a resolution unanimously adopted by the UN General Assembly on 25 September 2015.\textsuperscript{2709} This commitment is in line with SDG 3, which is to ensure healthy lives and promote well-being for all at all ages," particularly SDG 3.8 which is to ensure UHC.\textsuperscript{2710}

**Commitment Features**

The G7 committed to “moving towards achieving universal health coverage according to national contexts and priorities, building resilient and sustainable health systems, in order to be able to reach the most affected communities. This commitment is aimed at moving toward universal health coverage based on national contexts and priorities, building resilient and sustainable health systems. UHC is a key aspect of a resilient and sustainable health system. Hence, full compliance will be defined by the strength of the members’ effort to move toward achieving UHC. Within the commitment, the G7 did not specify policies or instruments through which these targets can be met. As such, examples of what actions count toward partial and full compliance are guided by relevant G7 documents and WHO, the leading institution on health.

To “commit” is understood to mean to do or perform, to pledge or bind (a person or organization) to a certain course or policy.\textsuperscript{2711}

To “move towards” is understood to mean taking additional steps to implement universal health systems and should include new initiatives in the area. It should not include past compliance efforts or continued fulfilment of old promises.

**Part One: Moving Toward Universal Health Coverage**

“Universal” is understood to mean all of the intended group. It should not be interpreted to mean a partial or percentage of the whole. It should not be interpreted to mean a small amount or a minority.\textsuperscript{2712}

“Coverage” is defined as the proportion of a population needing an intervention who receive it. Coverage is influenced by supply (provision of services) and by demand from people in need of services.\textsuperscript{2713}

“According to national contexts and priorities” should be understood as taking actions in line with domestic goals and policies.

The WHO definition of “universal health coverage” is that “all people and communities can use the promotive, preventive, curative, rehabilitative and palliative health services they need, of sufficient


\textsuperscript{2711} Appendix I: Dictionary, Reference Manual for Summit Commitment and Compliance Coding (Toronto) 2 May 2016.

\textsuperscript{2712} Appendix I: Dictionary, Reference Manual for Summit Commitment and Compliance Coding (Toronto) 2 May 2016.

\textsuperscript{2713} Appendix I: Dictionary, Reference Manual for Summit Commitment and Compliance Coding (Toronto) 2 May 2016.
quality to be effective, while also ensuring that the use of these services does not expose the user to financial hardship.”

Three components of this definition are: equity in access to health services, quality of health services should be good enough to improve health of service receivers, and cost of services should not pose a risk of financial harm. These three points will be referenced to assess whether an action or initiative is considered compliant.

Examples of compliance include policies or initiatives targeted toward improving universal healthcare, donation of monetary funds or human resources to organizations for universal health coverage, providing state funding for a previous privately funded system and establishing working groups or holding cooperative meetings to ensure progress toward achieving universal healthcare. De-privatizing any component of a health system is considered to demonstrate compliance.

**Part Two: Building Resilient and Sustainable Health Systems**

WHO defines a “health system” as the activities, people, institutions and resources whose goals are to maintain and improve health and combat ill health under the umbrella of policy. Essential components of a strong health system, as defined by WHO, include “a robust financing mechanism; a well-trained and adequately paid workforce; reliable information on which to base decisions and policies; well-maintained facilities and logistics to deliver quality medicines and technologies.”

“Sustainable” is to be understood as the ability to be maintained at a certain rate or level. Policies and initiatives that aim to build more sustainable health systems must specifically target one or more components of a strong health system as outlined by WHO.

“Resilient” is to be understood as the ability to withstand or recover quickly from difficult conditions. Policies and initiatives that aim to build a more resilient health system must demonstrate systemic preparedness to respond to any health crisis, i.e. a difficult situation affecting community health in one or more areas.

“Affected communities” is to be understood as communities whose access to healthcare is disproportionately limited by any geographical, environmental or financial factors. “In order to reach the most affected communities” is to be understood as recognizing the unique challenges faced by such communities and implementing policies or initiatives to target such challenges.

Example of actions that demonstrate compliance include implementation of emergency-preparedness measures, developing crisis-response funds, improving working conditions for healthcare personnel, providing state-funded benefits and/or higher wages to healthcare personnel, and investing in more efficient technology for prevention, diagnosis and treatment. Actions must be targeted toward building resilient and sustainable health systems for affected communities to achieve full compliance.

To achieve full compliance, G7 members must take action aimed at moving toward the achievement of universal health coverage and take action aimed at building resilient and sustainable health systems, especially aimed at reaching the most affected communities.

If only one of two thresholds or parts of this commitment is fulfilled, G7 members will receive a score of 0, or partial compliance. For instance, if a G7 member ensures that action is taken aimed at

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moving toward the achievement of universal health coverage, but does not address actions taken aimed at building resilient and sustainable health systems, it will earn a score of partial compliance.

A score of $-1$, or no compliance, will be assigned if a G7 member exemplifies no demonstrable compliance with either component of this commitment.

Note: Actions taken between 13 April and 3 June 2020 have been included in this report but were not included in the version sent out for stakeholder feedback.

### Scoring Guidelines

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<td>G7 member does NOT take any actions aimed at moving toward the achievement of universal health coverage NOR has taken action aimed at building resilient and sustainable health systems, especially aimed at reaching the most affected communities.</td>
</tr>
<tr>
<td>$0$</td>
<td>G7 member has taken action aimed at moving toward the achievement of universal health coverage OR has taken action aimed at building resilient and sustainable health systems, especially aimed at reaching the most affected communities.</td>
</tr>
<tr>
<td>$+1$</td>
<td>G7 member has taken action aimed at moving toward the achievement of universal health coverage AND has taken action aimed at building resilient and sustainable health systems, especially aimed at reaching the most affected communities.</td>
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**Canada: +1**

Canada has fully complied with its commitment to take action aimed at moving toward the achievement of universal health coverage and to take action aimed at building resilient and sustainable health systems, especially aimed at reaching the most affected communities.

On 20 September 2019, Health Canada authorized the use of Lenvima (lenvatinib) and Keytruda (pembrolizumab) for women who have advanced endometrial cancer under Project Orbis. 2719 Project Orbis is a collaborative project where the regulators from U.S. Food and Drug Administration, Health Canada and the Australian Therapeutic Goods Administration, review cancer drugs at the same time to expedite access for patients in Canada, United States of America and Australia. 2720

On 21 November 2019, Health Canada authorized the use Calquence (acalabrutinib), a new therapy for adults with chronic lymphocytic leukemia under Project Orbis. 2721

On 21 November 2019, the federal Patented Medicine Prices Review Board (PMPRB) announced that it would launch a 60-day consultation period with stakeholders and members of the public. 2722

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This consultation is to evaluate the earlier proposed changes to the Patented Medicines Regulations on 9 August 2019. PMPRB also announced new draft guidelines outlining steps taken by PMPRB staff to assess whether a patented drug is excessively priced and information that pharmaceutical companies must provide for PMPRB staff to make that decision. The Patented Medicines Regulations regulates Canada’s pricing framework for patented drugs and is meant to protect Canadians from excessively high drug costs.

On 19 December 2019, Minister of Indigenous Services Marc Miller and Chief Bobby Cameron of the Federation of Sovereign Indigenous Nations announced funding of CAD2.5 million over the next two years to support a community-driven Youth Empowerment and Healing Wellness Investment. This investment aids the delivery of holistic short-term and long-term solutions focused on the mental, emotional, physical and spiritual well-being of First Nations people. Minister Miller and Chief Cameron outlined their support to build the Youth Empowerment and Healing Wellness Investment in Saskatoon, Treaty Six Territory, Saskatchewan. Indigenous Services Canada also announced an investment of Approximately CAD425 million toward various initiatives toward life promotion and suicide prevention, including a Hope for Wellness Helpline.

On 19 December 2019, Minister Miller and Chief Cameron announced funding of CAD2.5 million over the next two years to support a community-driven Youth Empowerment and Healing Wellness Investment. This investment aims to aid the delivery of holistic short-term and long-term solutions focused on the mental, emotional, physical and spiritual well-being of First Nations

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people.2730 Minister Miller and Chief Cameron also outlined their support to build the Youth Empowerment and Healing Wellness Investment in Saskatoon, Treaty Six Territory, Saskatchewan.2731 Indigenous Services Canada also announced an investment of approximately CAD425 million toward various initiatives focusing on life promotion and suicide prevention, including a Hope for Wellness Helpline.2732

On 29 January 2020, Minister of Public Safety and Emergency Preparedness Bill Blair and Executive Director of the Online Therapy Unit at the University of Regina Heather Hadjistavropoulos announced the launch of an Internet-delivered cognitive behavior therapy pilot project for public safety personnel.2733 This project aims to provide access to mental health care and treatment for public safety personnel, especially in rural and remote areas, who are exposed to traumatic incidents on the job.2734 It will be delivered by the Internet Therapy for Public Safety Personnel team in partnership with the Canadian Institute for Public Safety Research and Treatment.2735 The program is supported by a CAD10 million federal investment, previously announced as part of the National Action Plan on post-traumatic stress injuries.2736 The pilot project will be called the PSP Wellbeing course and will give access to free education and guidance on techniques for managing depression, anxiety and post-traumatic injuries.2737

On 2 March 2020, Minister of Seniors Deb Schulte announced a CAD9 million of investment in projects for seniors in British Columbia through the New Horizons for Seniors Program.2738 This

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funding from the government will ensure that seniors can foster their social inclusion, community engagement and also support healthy aging.2739

On 3 March 2020, Minister of Health Patty Hajdu and Member of Parliament and Special Representative for the Prairies announced funding of approximately CAD2.9 million to improve access to care and services for people living with chronic pain in Canada.2740 CAD1.7 million of this funding will be given to the University of Saskatchewan through Health Canada’s Substance Use and Addictions Program (SUAP).2741 Through this investment, pharmacists will receive special training aimed to facilitate care for people living with chronic pain.2742 CAD1.2 million of this funding will be invested into the Alberta Health Services (AHS) to evaluate and improve opioid prescribing practices by working in conjunction with the Alberta College of Family Physicians and the Canadian Agency for Drugs and Technologies in Health.2743

On 18 March 2020, Minister Hajdu announced that an Interim Order was signed.2744 This order allows for expedited access to COVID-19 diagnostic test kits and related medical devices for use by healthcare providers.2745 This order made two new diagnostic tests readily accessible in Canada: the Roche Molecular System Inc. cobas SARS-CoV-2 diagnostic device and the ThermoFisher Scientific TaqPath™ COVID-19 Combo Kit.2746 This interim order allows the Government of Canada to make health products available to address larger scale public health emergencies.2747

On 26 March 2020, Minister Miller announced the details of the Indigenous Community Support Fund of CAD305 million to aid and support the needs in First Nations, Inuit and Métis Nation

communities related to the COVID-19 pandemic. The Indigenous Community Support Fund is in addition to the COVID-19 Response Fund, which was announced on 11 March 2020. This fund will be used for measures such as support for elders & vulnerable community members, addressing food insecurity, educational support, mental health assistance, emergency response service and general preparedness measures to prevent the spread of COVID-19.

On 30 March 2020, Indigenous Services Canada and the Government of the Northwest Territories (GNWT) agreed to provide and administer CAD2.6 million to help Indigenous families in the Northwest Territories on the land during the COVID-19 pandemic. This federal funding is a part of the “At Home on The Land” initiative and will allow families to maintain safer physical distances in cabins and camps while remaining on their land. It will also ensure that they can acquire necessary provisions such as wood, fuel, first aid equipment, transportation and other items as needed.

On 3 April 2020, the Government of Canada announced that it is awarding Amazon Canada a contract to manage the distribution of personal protective equipment such as masks, gloves and other equipment purchased by the government for healthcare workers. Amazon Canada will be distributing through its Canadian delivery partners, Canada Post and Purolator, to provincial health authorities, hospitals and other government agencies across the country.

On 3 April 2020, Minister Miller and Chief Rudy Turtle of the Asubpeeschoseewagong Netum Anishinabek (Grassy Narrows First Nation) signed an agreement to provide federal funding and


support to construct a mercury care home in Asubpeeschoseewagong Netum Anishinabek.\textsuperscript{2756} Through this agreement, Indigenous Services Canada will provide CAD19.5 million to construct a mercury care home to meet the needs of the community members of Asubpeeschoseewagong Netum Anishinabek who are living with methylmercury poisoning.\textsuperscript{2757}

On 10 April 2020, the Minister of Employment, Workforce Development and Disability Inclusion Carla Qualtrough issued a statement establishing the COVID-19 Disability Advisory Group (CDAG).\textsuperscript{2758} This group will consider real time lived experiences of persons with disabilities during this crisis and provide advice on how to address disability specific issues and how to address systemic gaps and challenges to Minister Qualtrough.\textsuperscript{2759}

Canada fully complied with its commitment to take action aimed at building resilient and sustainable health systems by addressing stigma, investing in health of First Nations communities and with its commitment to take action aimed at moving toward the achievement of universal healthcare coverage by improving access to alternative cancer therapies, maintaining costs of patented drugs and improving access to care for First Nations communities. Canada is also managing its response to COVID-19 through ensuring people have the right supports in place to treat and prevent the disease.

Thus, Canada receives a score of +1.

\textit{Analyst: Arshdeep Aulakh}

\textbf{France: +1}

France has fully complied with its commitment to take action aimed at moving toward the achievement of universal health coverage and to take action aimed at building resilient and sustainable health systems, especially aimed at reaching the most affected communities.

On 19 September 2019, Prime Minister Edouard Philippe met with pharmaceutical manufacturers in Matignon to discuss the shortages of medications in hospitals. Shortages can be attributed to problems in the supply chain.\textsuperscript{2760,2761}


On 15 October 2019, the National Assembly passed a bill, as part of a larger bioethics bill, that serves to legalize in vitro fertilization (IVF) treatment for lesbian and single women within the country.\(^{2762}\) Previously, only infertile heterosexual couples were legally qualified for the treatment.\(^{2763}\) IVF is a medically assisted reproduction method through donated sperm.\(^{2764}\) The bill, pending Senate approval, ensures that the costs of IVF for all women under the age of 43 are fully covered by the healthcare system.\(^{2765}\) However, clinicians at France’s network of public sperm banks noted that the “current supply just meets the demand” and that France may face shortage.\(^{2766}\)

On 12 November 2019, President of France Emanuel Macron and President of Democratic Republic of Congo (DRC) Félix Tshisekedi expressed support for the French-Congolese roadmap, developed by Professor Yves Lévy from France and Professor Muyembe from DRC, to fight against the Ebola epidemic.\(^{2767}\) Three components of the roadmap include: an emergency humanitarian response to provide ground-level support in DRC, strengthening the scientific partnership between French researchers and National Institute for Biomedical Research in Kinshasa and development efforts to strengthen Congolese health system.\(^{2768}\) France pledged EUR71 million for healthcare in DRC between 2019 and 2021 and will make resources from Ministry of Europe and Foreign Affairs, Ministry of Higher Education, Research and Innovation, Ministry for the Armed Forces and Ministry of Solidarity and Health available to “put these efforts in practice.”\(^{2769}\)

On 20 November 2019, the French government promised to absorb approximately EUR10 billion worth of public hospital debt in order to end protests led by French medical professionals against


multi-billion euro spending cuts in regards to the French healthcare system.\textsuperscript{2770} This figure represents nearly one third of total debt.\textsuperscript{2771} Prime Minister Phillipe also promised an additional EUR1.5 billion over for hospitals, along with an EUR800 bonus for 40,000 nurses and other caretakers who earn less then EUR 1,900 per month.\textsuperscript{2772}

On 24 February 2020, Health Minister Olivier Véran announced plans to activate 70 new medical care facilities across the country in order to prepare for possible outbreaks of the coronavirus.\textsuperscript{2773} These facilities are currently used for medical care in conjunction with university hospital centers.\textsuperscript{2774} The decision was made amidst the rising number of coronavirus cases in neighboring Italy.\textsuperscript{2775}

On 21 March 2020, Minister Véran announced that the government has ordered 250 million health masks to protect frontline medical workers in response to current shortages.\textsuperscript{2776} The order was placed with both French and foreign suppliers.\textsuperscript{2777} Minister Véran also announced that the government plans to launch a review into the shortage of protective gear at a later date.\textsuperscript{2778}

On 21 March 2020, Prime Minister Philippe announced that the government has instructed manufacturers and researchers within the country to work on addressing current the current shortage of health masks by finding a means to multiply production lines or by developing alternative health mask prototypes, reusable or otherwise.\textsuperscript{2779}

On 26 March 2020, France announced that a high-speed train will take COVID19 patients from Alsace, one of the regions experiencing a higher proportion of COVID19 cases, to hospitals in less affected regions.\textsuperscript{2780} Each train car will be staffed with a doctor, an intern, an anesthesiologist, and

\begin{footnotesize}
\end{footnotesize}
three nurses. Trains will be transformed so that stretchers are laid over seats and other essential medical equipment is onboard the train.

On 8 April 2020, Minister Véran and the Secretary of State for Digital Cédric O officially announced plans to develop a smartphone application to track the spread of the coronavirus during an interview with Le Monde. The “StopCovid” project has been launched in an attempt to design an application that would act to limit the spread of the virus by identifying chains of transmission. The application would warn users when they have come into contact with an individual who has tested positive for the coronavirus. The application would be installed on a voluntary basis.

On 16 April 2020, President Macron announced that healthcare workers on the frontlines of the COVID19 crisis will receive a bonus of tax-free EUR 500-EUR 1500 per person. Workers from departments that were the most affected will receive more compensation than administrative workers or those in less-affected departments. Overtime wages for healthcare workers will also increase by 50%; this increase will remain tax free.

France has fully complied with its commitment to take action aimed at building resilient and sustainable health systems by absorbing public hospital debts, responding to COVID19 crisis by addressing masks shortage and developing StopCovid and with its commitment to take action aimed at moving toward the achievement of universal healthcare coverage by expanding access to assisted reproductive services.

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Thus, France receives a score of +1.

**Germany: +1**

Germany has fully complied with its commitment to take action aimed at moving toward the achievement of universal health coverage and to take action aimed at building resilient and sustainable health systems, especially aimed at reaching the most affected communities.

On 21 September 2019, Health Minister Jens Spahn travelled to Mexico in order to speak with healthcare workers and offer a speedy visa process to those willing to move to Germany. These actions are aimed at addressing a shortage of nurses and ancillary staff within German care homes as the government faces the struggles of an aging population. Minister Spahn also announced that the recognition of professional qualifications would be accelerated for Mexican workers. These efforts are to meet the goal of finding 10 per cent more care workers to address the care worker crisis and growing need for care workers.

On 7 November 2019, Parliament approved the Act to Improve Healthcare Provision through Digitalisation and Innovation (Digital Healthcare Act, or DVG). Physicians will be able to prescribe digital health apps, which can be covered by the statutory health insurance scheme. Plans are on track for health records for all insured persons to be completely electronic by 1 January 2021. Data for research use will be anonymized and used to gain “better insight into patients with chronic diseases,” according to Minister Spahn. The DVG will invest EUR 200 million per year until 2024 in the innovation fund, making it mandatory for pharmacies and hospitals to be connected with the growing digital infrastructure, making online video consultations commonplace, mandating health insurance funds to offer members opportunities to improve their digital health skills, creating a streamlined process for information collection, storage and exchange within hospital networks, and achieving optimal conditions for patient data protection by adapting provisions of the Fifth Book of Social Code.

On 14 November 2019, the Bundestag passed the Measles Protection Act, which aims to increase immunization rates by instituting compulsory measles vaccinations. As of 1 March 2020, all

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children who are at least one year old must prove that they have received the vaccine or are immune to the measles.\textsuperscript{2798} Unvaccinated children can be barred from attending child daycare facilities or school. Parents who fail to vaccinate their children can be fined up to EUR 2,500.\textsuperscript{2799} The fine can also be imposed on the management of daycare facilities that admit unvaccinated children.\textsuperscript{2800}

On 18 December 2019, Parliament passed a bill that ban medical interventions aimed at deliberately changing or suppressing the sexual orientation or self-perceived gender identity of a person (so-called conversion therapies).\textsuperscript{2801} The law is scheduled to go into effect in mid 2020. Violations of the ban on conversion therapies by arranging, providing or advertising such services are to be punished with a prison sentence of up to one year and a fine of up to EUR 30,000.\textsuperscript{2802} According to Minister Spahn, the new law seeks to recognize that homosexuality is not an illness and that these misleading practices cause undo harm, particularly to those who may be struggling with their sexuality.\textsuperscript{2803}

On 17 March 2020, the Senate of Berlin approved plans to build a new hospital in advance of an expected increase in coronavirus cases.\textsuperscript{2804} The new hospital will be equipped with 1,000 hospital beds and will be used in the event that there is a shortage elsewhere in the state and/or country.\textsuperscript{2805} It will be built with the assistance of the German armed forces.\textsuperscript{2806} No deadline was set for the completion of the new hospital.\textsuperscript{2807}

On 25 March 2020, Parliament passed an aid package to mitigate the economic damage caused by COVID-19.\textsuperscript{2808} The aid package commits a total of EUR750 billion to address the current crisis in Germany.\textsuperscript{2809} Importantly, the aid package includes the COVID19 Hospital Relief Act and the Law for the Protection of the Population in an Epidemic Situation of National Importance.\textsuperscript{2810} The COVID19 Hospital Relief Act aims to lessen the economic burden felt by both hospitals and other


health care facilities, such as nursing homes.\textsuperscript{2811} The act will enable hospitals to increase their care capacity as the number of patients with the coronavirus infection continues to rise.\textsuperscript{2812} The Law for the Protection of the Population in an Epidemic Situation of National Importance aims to improve the government’s responsiveness to epidemics such as the coronavirus by granting the federal government additional competencies for a limited period of time.\textsuperscript{2813}

Germany has fully complied with their commitment to build a more resilient and sustainable health system, particularly through its efforts to digitalize healthcare services and address the coronavirus. Furthermore, Germany has also taken steps toward the achievement of universal health coverage by implementing the COVID19 Hospital Relief Act and investing to expand access of healthcare apps for patients and health service providers.

Thus, Germany receives a score of +1.

\textit{Analyst: Madison Leisk}

**Italy: +1**

Italy has fully complied with its commitment to take action aimed at moving toward the achievement of universal health coverage and to take action aimed at building resilient and sustainable health systems, especially aimed at reaching the most affected communities.

On 30 August 2019, the Italy-China visit by delegations from the Italian Ministry of Health ended, with the discussions focused closely on avian influenza, swine vesicular disease and scientific cooperation as Italy expressed willingness to receive and host Chinese researchers at their institutes to collaborate on food virology research.\textsuperscript{2814} Italy also noted that it aims to work with China to prevent another avian flu outbreak.\textsuperscript{2815}

On 17 September 2019, Minister of Health Roberto Speranza promoted patient equality, and safe use of medicines as national and global healthy priorities during a workshop organized by the Ministry of Health.\textsuperscript{2816} Topics including National Health Service financing, training of healthcare providers and


\textsuperscript{2814} Export Italy-China, the visit of the Ministry of Health delegation ended, Ministry of Health (Rome), 30 August 2019. Access Date: 02 January 2020. http://www.salute.gov.it/portale/news/p3_2_1_1_1.jsp?lingua=italiano&menu=notizie&p=dalministero&id=3872.

\textsuperscript{2815} Export Italy-China, the visit of the Ministry of Health delegation ended, Ministry of Health (Rome), 30 August 2019. Access Date: 02 January 2020. http://www.salute.gov.it/portale/news/p3_2_1_1_1.jsp?lingua=italiano&menu=notizie&p=dalministero&id=3872.

involvement of citizens to work together and improve patient safety levels across the country were discussed.\textsuperscript{2817}

On 29 September 2019, Italy celebrated World Health Day and the Ministry of Health presented at the Cardio Race with an information to raise awareness on the importance of cardiovascular disease prevention, airway management in infants and young children and offered free electrocardiograms and ultrasound requisition for all participants.\textsuperscript{2818}

On 14 October 2019, the epidemiological surveillance for the 2019-2020 influenza season began through the Influnet system, with surveys and biological samples collected by a sentinel of general practitioners and pediatricians to produce weekly reports of influenza outbreaks.\textsuperscript{2819} The influenza vaccination was offered actively and free of charge until the end of December 2019 to subjects aged 65 or over, children over the 6 months of age, all individuals suffering from disease with increased risk of influenza complication, pregnant woman, individual admitted to long-term care facilities, healthcare personnel and subjects who are at high risk of exposure.\textsuperscript{2820}

On 25 January 2020, the Ministry of Health Task Force on COVID-19 met with Minister Speranza and other authorities to ensure adequate availability medical and nursing staff in hospitals and on major airports (Rome and Milan).\textsuperscript{2821}

On 1 March 2020, Economy Minister Roberto Gualtieri announced EUR3.6 billion would be “injected into the economy,” part of which will go toward funding the National Health System.\textsuperscript{2822}

On 17 March 2020, University Minister Gaetano Manfredi announced that he would allow 10,000 medical students into the National Health System and scrap their final examinations to cope with the shortage of medical staff amidst the COVID-19 outbreak.\textsuperscript{2823} These graduates will be expected to work in general practitioners’ clinics and old age homes so that more experienced doctors can work in hospitals burdened with COVID-19 patients.

Italy has demonstrated efforts to fully comply with its commitment to take action aimed at building resilient and sustainable health systems by strategizing to prevent avian flu outbreak, allowing student doctors to join the workforce early and cope with staff shortage, funding National Health System to


cope with COVID-19 and discussing training of healthcare providers, patient safety and patient equality. Italy has also demonstrated efforts to fully comply with its commitment to take action aimed at moving toward the achievement of universal healthcare coverage by providing free electrocardiogram and ultrasounds assessing cardiac health and free flu vaccines to vulnerable populations to avoid an outbreak.

Thus, Italy has been awarded a score of +1.

**Japan: +1**

Japan has fully complied with its commitment to take action aimed at moving toward the achievement of universal health coverage and to take action aimed at building resilient and sustainable health systems, especially aimed at reaching the most affected communities.

On 28 August 2019, at the 7th edition of the Tokyo International Conference on African Development, Prime Minister Shinzo Abe announced that the Japanese government will support Kenya’s universal health coverage.2824

On 29 August 2019, Prime Minister Abe also pledged JPY12 million to support the Nigerian government’s public health sector.2825

On 1 October 2019, the Ministry of Health, Labour and Welfare implemented major medical, nursing care and welfare related changes in response to the consumption tax hike.2826 The Elderly Health Bureau invested public funds to reduce insurance premiums for persons 65 years old or older who are exempt from municipal tax, with specific reduction rage prescribed by individual insurer according to regulation.2827 Over the full year, the government will also invest JPY100 billion to expand experienced and skilled staff for improving nursing home care.2828 For welfare recipients and persons with disabilities, the Social Affairs Bureau Protection Division reports a remuneration reform for disability welfare services focusing on improving the experience and skills of staff.2829

On 5 November 2019, a digital healthcare company MORE Health with an integrated network of physician specialists announced its collaboration with Japan’s Integrity Healthcare, a government-funded company engaged with medical infrastructure, to offer international patients the best medical

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resources in Japan through Co-Diagnosis, a collaborative diagnosis serviced through a cloud-based platform.2830

On 7 November 2019, the Ministry of Health, Labour and Welfare released the schedule and venue for 21 free seminars, to be held in 14 cities nationwide between 6 December 2019 and 23 January 2020.2831 The seminars will disseminate and explain the work style reform of medical staff as they shift to a non-equity medical system under the Revised Medical Law for healthcare professionals.2832

On 18 November 2019, the Ministry of Health, Labour and Welfare held a “Skilled Medical Care” Ambassador Appointment Event to appoint “good medical care” ambassadors, following a round-table conference to address physician burnout and long wait times during weekend consultations, with aims of alleviating excessive burden on healthcare providers.2833

On 29 November 2019, the Ministry of Health, Labour and Welfare approved of the “BRCAnalysis” genetic test to screen for breast cancer patients for Hereditary Breast and Ovarian Cancer syndrome so as to enable earlier treatment.2834

On 1 December 2019, the Ministry of Health, Labour and Welfare in cooperation with the AIDS Prevention Foundation and other related non-governmental organizations held various public awareness events for “World AIDS Day” across Japan to counter discrimination and prejudice against AIDS patients and take initiative to educate health centres and relevant organizations on correct knowledge of AIDS.2835 The event outline included street campaigns, performances by artists who support the advocacy cause, and free HIV testing.2836

On 28 February 2020, the Ministry of Health, Labour and Welfare released a summary sheet of the various efforts implemented by the relevant ministries, local governments, and related organizations to strengthen suicide prevention measures for the month of March.2837 Actions include the expansion of dial-in mental health counseling lines, extension of operating hours and widespread dissemination

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of information about mental health consultation and support via YouTube videos, banners, and search-linked ads.\textsuperscript{2838}

On 4 March 2020, the Department of Economic Affairs addressed in a press release that masks will be distributed preferentially to Nakafurano Town and Kitami City, two of the most affected regions from COVID-19, within a few days to secure about 40 masks per household in order to protect as many residents as possible.\textsuperscript{2839}

On 5 March 2020, the Food Monitoring and Safety Division held its 23rd technical review meeting on food hygiene and management, releasing draft hygiene management guidelines for brown sugar, frozen tofu, chikuwabu, garlic and fuji production.\textsuperscript{2840}

On 6 March 2020, the Ministry of Health, Labour and Welfare announced that COVID-19 testing will be included under national health insurance system.\textsuperscript{2841} Prior to this, individuals could only get tested when recommended by public health centres.\textsuperscript{2842} After this announcement, patients will be able to request testing for themselves from public hospitals or private testing companies without referral from a public health centre.\textsuperscript{2843} The Ministry of Health, Labour and Welfare has also announced that they will take efforts to develop faster testing kits; current testing kits deliver results within a few hours.\textsuperscript{2844}

On 9 March 2020, Prime Minister Abe announced a COVID-19 aid package totalling JPY430.8 billion.\textsuperscript{2845} Part of this package will be allocated toward hospitals to improve medical facilities and stockpile on masks and other personal protective equipment.\textsuperscript{2846}

On 11 March 2020, the Mental and Disability Health Division held its first meeting to discuss implementation of a community-based comprehensive care system for mental illness.\textsuperscript{2847}


On 24 March 2020, the Ministry of Economy, Trade and Industry announced the launch of a free remote health consultation service with doctors in partnership with Mediplat. This service will enable doctors to advise patients based on their symptoms while providing an effective way of triaging potential cases and keeping frontline medical safe unless there is an urgent need for medical treatment.

On 3 April 2020, Ministry of Health, Labour and Welfare advised local governments to accommodate COVID-19 patients with mild symptoms in hotels instead of hospitals to ease the shortage of healthcare facilities, especially in urban areas with high number of COVID-19 cases.

Japan has fully complied with its commitment to take action aimed at building resilient and sustainable health systems by addressing physician burnout and long wait times, improving diagnosis and treatment for Hereditary Breast and Ovarian Cancer syndrome, providing training to medical professionals to reform working styles and improving access to mental health care options. Japan has fully complied with its commitment to take action aimed at moving toward the achievement of universal healthcare coverage by providing free HIV testing and raising HIV awareness, investing in senior citizens’ care, providing more comprehensive healthcare options to international travellers and implementing community-based comprehensive care system for mental illness.

Thus, Japan receives a score of +1.

**United Kingdom: +1**

The United Kingdom has fully complied with its commitment to take action aimed at moving toward the achievement of universal health coverage and to take action aimed at building resilient and sustainable health systems, especially aimed at reaching the most affected communities.

On 3 September 2019, British High Commissioner to Kenya Jane Marriott met with the President of the Republic of Kenya Uhuru Kenyatta. Marriott indicated the UK government’s support of Kenya’s Big Four objectives of affordable housing, food security, manufacturing, and universal healthcare.

On 5 September 2019, Minister for Care Caroline Dinenage announced that the second phase of an adult social care recruitment campaign is underway. The campaign, titled “When you care, everyday makes a difference” aims to increase interest in adult social care as a career, given the shortage of

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122,000 workers. The campaign is geared toward people between ages 20 and 39 who have expressed significant interest in adult social care as a vocation through a survey administered in England. The aim of the campaign is to fulfil the need of 580,000 more social care workers by 2035 to support the ageing population.

On 8 September 2019, Secretary of State for Health and Social Care Matt Hancock announced EUR1 million funding to expand the cost-recovery team at the National Health Service (NHS). Cost-recovery experts serve to reclaim debts of overseas visitors when they receive care in the UK as solely UK residents are eligible for free healthcare. Experts will aide cost-recovery managers in easing administrative burden by helping identify patients that need to be charged, standardizing and implementing rules and exemptions across the country, and improving reporting of income and debt collection. The Department of Health and Social Care (DHSC) reassures their commitment to protecting the most vulnerable people in society, including refugees, victims of modern slavery, asylum seekers and children cared for by local authorities. Improved debt recollection from tourists will enable reallocation of funds to maintain delivery of high-quality front-line patient care at NHS. DHSC also notes that emergent care will be provided to tourists and other non-residents without full payment with debt being recollected after treatment.

On 9 September 2019, the government announced EUR130 million of funding in healthcare innovations for cancer and debilitating illnesses, such as dementia and Parkinson's. EUR50 million will be allocated to NHS diagnostic services and artificial intelligence technology at Centres of

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Excellence. EUR7.5 million will be used for adult social care, while EUR14 million will be used for bioscience initiatives such as developing treatments for diseases and developing vaccines. EUR69.5 million investment through UK Research and Innovation will be directed toward four British projects: Nucleic Acid Therapy Accelerator to develop genetic therapies for various diseases; the Advanced Pain Discovery Platform to better understand pain; the UK Centre of Evidence Implantation in Adult Social Care to implement innovations that enable more people to receive care at home; and tackling multimorbidity to propel drug development and enable earlier diagnosis and lesser progression.

On 10 September 2019, Public Health England (PHE) published a five-year infectious diseases strategy to “prevent, detect, respond to and reduce the impact of infectious diseases.” PHE will be working alongside the NHS and local authorities to integrate diagnostic mechanisms and surveillance systems that enable infection prevention and control, be a global leader in tackling antimicrobial resistance by reducing use of antibiotic treatments, and strengthen England’s and global health protection systems.

On 10 September 2019, the Department of Health in Northern Ireland published the “Protect Life 2” suicide prevention strategy. Northern Ireland has the highest suicide rates when compared to other UK nations. The strategy received an additional EUR1.35 million in funding through the transformation programme and will require additional funding to be fully implemented.

On 11 September 2019, the DHSC announced they were accepting proposals to make the pensions of doctors and nurses more flexible. The government indicated that health care professionals do not take on extra shifts due to facets of the NHS Pension Scheme and pension tax rules as they...
currently stand. Changes in the pension scheme will allow healthcare professionals more flexibility to choose individual pension plans, enabling them to maximize clinical work without high taxes.

On 11 September 2019, Prime Minister Boris Johnson announced a new immigration route that would permit international students to remain in the UK for two years after graduation while looking for a job. The intention is to encourage international talent, including individuals the science, technology, engineering, and math fields (STEM), to remain in the UK and potentially become more involved in breakthroughs in STEM fields, particularly genomics. One EUR200 million project in which graduates can become involved is the world’s largest whole genome sequencing project that aims to improve prevention, diagnosis and treatment of various diseases. Another project by Genomics England in collaboration with NHS has enabled 25 per cent patients with rare diseases to receive a diagnosis for the first time.

On 12 September 2019, eight new female genital mutilation support clinics were opened in communities in England where there is the greatest need with the aim of reaching women before they reach to NHS with life-threatening complications. The clinics aim to address the physical and psychological impact of female genital mutilation through treatment, support, and education on prevention. Funding comes from the EUR33.9 billion the UK government invested in the NHS.

On 23 September 2019, International Development Minister Alok Sharma delivered a speech in New York at the United Nations General Assembly political declaration on universal health

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Minister Sharma announced funding of EUR600 million over 2020-2025 toward Reproductive Health Supplies programme aimed at providing access to family planning resources to more than 20 million women and girls, preventing unplanned pregnancies and unsafe abortions and reducing pregnancy and childbirth complications. Minister Sharma stated that “We cannot achieve Universal Health Coverage without Universal Sexual and Reproductive Health and Rights.”

On 23 September 2019, Minister Hancock confirmed that the UK government will fund healthcare for 180,000 UK nationals in the European Union after Brexit in a no-deal scenario. Healthcare costs will be covered for six months, or up to one year for individuals who are currently undergoing treatment. The UK government will also cover costs while individuals turn to local healthcare as to avoid gaps in coverage.

On 24 September 2019, at the 74th United Nations General Assembly, Chief Medical Officer for England Professor Dame Sally Davies announced funding to combat antimicrobial resistance and noted that universal healthcare coverage cannot be achieved without tackling antimicrobial resistance. EUR6.2 million will be used to strengthen surveillance systems in Africa and Asia that can inform policy decisions and EUR12 million will be used for research collaborations between the

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UK and low and middle income countries. Funding will be provided by the Fleming Fund and the National Institute of Health Research Global Health Research programme.

On 27 September 2019, Prime Minister Johnson pledged EUR200 million to the NHS to improve cancer screening equipment, including magnetic resonance imaging, computerized tomography scanners, and breast screening equipment, which can enable earlier diagnoses. The investment was made in efforts to increase efficiency and patient safety. On 20 October 2019, the government announced the 78 NHS trusts that will receive funding.

On 30 September 2019, the DHSC published the Health Infrastructure Plan. The plan provides capital to build new hospitals, invest in technology, modernize facilities, and ensure the safety of estates. Specifically, EUR2.8 billion was allocated to build six new hospitals by 2025 and 21 other hospitals were provided with seed funding. Overall, 40 schemes for new hospitals fall under the Health Infrastructure Plan.

On 3 October 2019, the DHSC placed hormone replacement therapy products, which currently face shortage, on the list of medicines that face restrictions and cannot be parallel exported to tackle supply shortages. Shortage protocols for the antidepressant fluoxetine were also introduced for the antidepressant fluoxetine. Measures were put in place to address shortages.

On 4 October 2019, PHE announced that 30 million people will receive the flu vaccine for free.²⁹⁰₃ For the first time, all students in primary schools are eligible to receive the free vaccine.²⁹⁰₄

On 9 October 2019, Minister Hancock delivered a speech in Manchester at the NHS Providers Annual Conference.²⁹⁰⁵ He reiterated features of the Long Term Plan Bill, Health Infrastructure Plan, and the health technology body NHSX.²⁹⁰⁶ He also discussed the upcoming release of the People Plan, which addresses the need for more health care workers.²⁹⁰⁷

On 10 October 2019, Department for International Development Ghana Director Philip Smith delivered a speech indicating UK government’s support for mental health care initiatives in Ghana.²⁹⁰⁸ Specifically, Smith discussed improving access to services, and issuing a UK Aid programme aimed at reducing stigma among Ghanaian youth.²⁹⁰⁹ Mental healthcare delivery is indicated as an important component of universal health coverage.²⁹¹⁰

On 19 October 2019, Prime Minister Johnson addressed speculation regarding trade negotiations over the NHS.²⁹¹¹ In the House of Commons, Johnson stated “Our first decision, on which I believe there will be unanimity is that in any future trade negotiations with any country our NHS will not be on the table.”²⁹¹²

On 19 October 2019, Parliamentary Under Secretary of State for Prevention, Public Health and Primary Care Jo Churchill announced the roll-out of electronic prescription services across England.

in November 2019. The electronic prescription service is intended to increase efficiency in the NHS for patients and staff.

On 22 October 2019, the UK government awarded a EUR1.9 million Rough Sleeping Grant to projects that aim to improve access to healthcare for individuals who sleep rough, considering that people experiencing rough sleeping have poorer health than the general population. The six projects involved are located in Lambeth, Newcastle, West Sussex, Portsmouth, and Leeds. The grant aligns with the Rough Sleeping Strategy published by the UK in August 2018.

On 22 October 2019, Minister Hancock approved a EUR184 million capital loan fund for urgent hospital upgrades. 13 trusts will receive funding for upgrades to areas such as equipment, infrastructure, and general safety.

On 22 October 2019, the Women and Equalities Committee appointed by the House of Commons and chaired by Member of Parliament Maria Miller released a report indicating that LGBT health needs are not being adequately met as LGBT individuals are treated as straight and cisgender when interacting with the healthcare system. The report recommends mandated monitoring of sexual orientation and gender identity within the next 12 months. The report also suggests that the NHS Long Term Care Plan should highlight explicit inequalities that the NHS must address.

On 23 October 2019, the Health and Social Care Committee released a report on drugs policy that advocates for a harm reduction approach that would benefit drug users and reduce harm and cost to
surrounding communities. Among their recommendations include shifting responsibility for drug policy from the Home Office to the DHSC and decriminalize drug possession for personal use so as to treat possession for personal use as a civil matter rather than a criminal one. Decriminalization will enable the criminal justice department to reduce costs, funds of which can be reallocated to prevention and treatment programs that save lives of users and provide better protection for communities. On 4 November 2019, the Scottish Affairs Committee published a report on ‘Problem drug use in Scotland’ with conclusions similar to that of the Health and Social Care committee.

On 24 October 2019, Minister Hancock delivered a speech at the Royal College of General Practitioners annual conference and stated his priorities as people, structures, and technology. Hancock reiterated the UK government’s commitments to recruit 20,000 primary care clinical staff and provide an extra EUR4.5 billion for primary and community care each year by 2023-2024. Hancock also referenced the previous launch of the Clinical Negligence Scheme for General Practice in April 2019 that limits personal liabilities for professionals, and plans to rely on healthcare technology such as digitized paper records and electronic prescribing in the future.

On 28 October 2019, the DHSC announced that a EUR1,082,000 fund will be used for personalized bereavement support at 10 NHS areas in England. Individuals who have lost a family member or friend can receive counselling support and mental health services.

On 28 October 2019, the UK government announced a EUR3.5 million investment to treat gonorrhea globally. Gonorrhea particularly impacts women and vulnerable groups.

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government is working in partnership with the Global Antimicrobial Resistance Innovation Fund and the Global Antibiotic Research and Development Partnership.2934

On 31 October 2019, the UK parliament laid legislation to provide personal health budgets to 10,000 individuals eligible for a wheelchair or requiring mental health support under section 117 of the Mental Health Act.2935 On 2 December 2019, the change in law will come into effect.2936 Personal health budgets are used in efforts to personalize care and provide patients with greater control over their health.2937

On 1 November 2019, the DHSC announced that EUR26 million in funding will be allocated to 25 trusts to support implementation of digital prescription technology.2938 The upgrade is in efforts to reduce medication errors, increase the speed of access, and ensure that information is stored in a single electronic record.2939 EUR26 million is the second installment of EUR78 million for the implementation of electronic prescribing systems over the next three years.2940

On 5 November 2019, the DHSC and the Medicines and Healthcare products Regulatory Agency (MHRA) added the measles, mumps, and rubella vaccine to the list of medications that cannot be parallel exported from the UK.2941 The restriction was added in efforts to stop medication shortages for individuals that do not receive coverage from the national immunisation programme and must purchase the vaccine privately, such as overseas workers.2942


On 5 November 2019, Minister Hancock announced that 2,250 inpatients with learning disabilities and autism that are situated in a mental health hospital will have their cases reviewed.\textsuperscript{2943} This decision was made to reduce the number of patients in restrictive settings in accordance with recommendations by the Care Quality Commission.\textsuperscript{2944} Additional measures include increasing transparency regarding inpatients with mental health conditions and providing mandatory training to NHS and social care workers.\textsuperscript{2945} EUR1.4 million government funds will be used to provide the necessary training.\textsuperscript{2946}

On 9 November 2019, Minister Hancock apologized to Bethany, a young girl with autism that was locked up for nearly three years based on terms set forth in the Mental Health Act.\textsuperscript{2947} He indicated that the situation is under a serious case review and recommendations will be made going forward.\textsuperscript{2948}

On 16 December 2019, the Scottish government published “An Integrated Health and Social Workforce Plan for Scotland,” in partnership with the Convention of Scottish Local Authorities.\textsuperscript{2949} The plan presents ideas to planners and employers in local authorities, NHS, third and independent sector to meet health and social care needs by planning resources needed to build sustainable health systems.\textsuperscript{2950}

On 18 December 2019, Minister Hancock delivered a speech at Policy Exchange indicating his prioritization of prevention, people, technology, and infrastructure.\textsuperscript{2951} Hancock reiterated commitments made leading up to the UK general election on 12 December 2019.\textsuperscript{2952} Commitments included building 40 new hospitals in the next decade, establishing 50 million more general
practitioner appointments, and recruiting more healthcare professionals. Recruitment targets include 50,000 nurses, 6,000 general practitioners, and 6,000 primary care professionals. Minister Hancock also announced EUR2 billion to support trainee nurses. Students will receive at least EUR5,000 extra per year and up to EUR3,000 under certain conditions.

On 19 December 2019, newly re-elected Prime Minister Johnson delivered the Queen’s Speech. Johnson promised to dedicate EUR34 billion in the new NHS Funding Bill.

On 4 January 2020, the UK government announced EUR40 million of funding for frontline technology in the NHS. The goal is to reduce the amount of time staff spend logging into computer systems and increase the amount of time dedicated to patients. Also, EUR4.5 million of funding will be directed toward digital adult social care projects to help vulnerable populations live independently.

On 13 January 2020, Chair of NHS England Lord Prior announced a collaboration with pharmaceutical company Novartis at the J.P. healthcare conference in San Francisco. NHS England, the National Institute for Health Research, and Oxford University are involved in the partnership that aims to reduce heart disease among NHS patients. The partnership will offer

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Inclisiran to patients at risk of heart disease which will help them reduce cholesterol levels.\textsuperscript{2964} The partnership also aims to increase the accessibility of NHS infrastructure and technology.\textsuperscript{2965}

On 15 January 2020, Minister Hancock introduced the NHS Long Term Plan Funding Bill to Parliament.\textsuperscript{2966} The bill mandates that the government provide EUR33.9 billion to the NHS every year by 2024, resulting in a total of EUR148.5 billion by 2024.\textsuperscript{2967} The bill will place a “double-lock commitment,” legal obligation on Secretary of State and Treasury to uphold this minimum level of funding for the next four years.\textsuperscript{2968}

On 22 January 2020, the DHSC and PHE stated there would be enhanced monitoring on direct flights from Wuhan, China, to the UK.\textsuperscript{2969} A Port Health team, composed of a port medical inspector, port health doctor, administrative support, and team leader, will be present.\textsuperscript{2970} The team will provide advice and support for travellers that feel unwell, and check for symptoms of COVID-19.\textsuperscript{2971}

On 3 February 2020, the UK government announced EUR20 million in funding for the Coalition for Epidemic Preparedness Innovations.\textsuperscript{2972} The funding will be used to develop vaccines and diagnostics to fight COVID-19 and other infectious diseases.\textsuperscript{2973} Currently, there are three new programs aimed at developing a vaccine against coronavirus.\textsuperscript{2974}

On 4 February 2020, PHE scientists fully sequenced the coronavirus genome.\textsuperscript{2975} The sequence can aid the scientific community in understanding viral mutations and methods of virus transmission.\textsuperscript{2976}

On 6 February 2020, the UK government and NHS announced EUR1.5 billion in funding over the next four years for general practice. The funding will be used to reach the government’s goal of 50 million more general practice appointments by 2024. The funding will be used to recruit 6,000 primary care professionals. Another goal is to develop initiatives for recruiting and retaining doctors. The General Practice Contract for 2020/21 was also updated to include measures such as a greater number of check-ups for new mothers, an increase of 26,000 new staff, more health checks for vaccinations and learning disabilities, expanded referrals for social prescribing, and better safety checks for prescriptions.

On 8 February 2020, Minister Sharma pledged EUR5 million in funding to the World Health Organization (WHO) to support the Emergency Flash Appeal. The funding will be used to train medical personnel and rapid response teams to prevent the spread of COVID-19. The UK will also send experts to the WHO Regional Office for Africa to assist with the international response.

On 10 February 2020, COVID-19 diagnostic tests developed by PHE were introduced across the UK. The rollout expands the number of diagnostic laboratories from one to twelve. The goal is to increase testing capacity across the UK, with the number of tests in England increasing from 100 to 1,000 people each day.

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On 10 February 2020, Minister Hancock announced that the Health Protection (Coronavirus) Regulations 2020 were in effect to reduce the spread of COVID-19. The regulations state that individuals can be restricted if they are deemed a public health threat by health professionals. Regulation 3 indicates that COVID-19 is a serious public health threat. In accordance with Regulation 2, Hancock also designated Arrowe Park Hospital and Kents Hill Park as isolation facilities. On 25 February 2020, Heathrow Ariel Hotel was added as an isolation facility.

On 11 February 2020, the DHSC announced that the impact of coronavirus on medical supply will be monitored. The government asked medical suppliers to conduct business risk assessments to indicate the level of impact. Also, companies were urged to hold existing medical supplies when possible to ensure an adequate supply upon leaving the European Union.

On 13 February 2020, the Medicines and Medical Devices Bill was introduced for NHS hospitals. The bill permits a greater range of professionals to prescribe low risk medicines and introduces new safety regulations for medical devices. Also, the bill allows hospitals to personalize treatments for patients with unique diseases.
On 17 February 2020, the MHRA launched a social media awareness campaign regarding polypharmacy. Individuals can report suspected side effects using the Yellow Card Scheme to inform safe medication usage and regulation.

On 20 February 2020, the UK government announced EUR10 million in funding for medical research. Life Sciences Minister Nadhim Zahawi launched the Innovation Scholars Scheme to generate new technologies and treatments for NHS patients. UK researchers and businesses can use the funding to develop treatments for life-threatening conditions.

On 26 February 2020, PHE and the NHS launched a new COVID-19 surveillance system to prevent the spread of coronavirus. The system will be implemented in some NHS hospital intensive care units and severe respiratory failure centres. The goal of the surveillance strategy is to quickly detect the spread of coronavirus across England.

On 3 March 2020, Prime Minister Johnson announced the coronavirus action plan. An official document was published online to highlight the government’s plans as well as preventative measures citizens can implement. The plan has four stages: contain, delay, research, and mitigate. The plan also discusses measures that should be implemented in the case that the virus becomes a pandemic.

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On 2 March 2020, the MHRA implemented changes to import restrictions on cannabis-based medicines. The changes will allow licensed wholesalers to import larger quantities and hold supplies. These changes will ensure that treatment is not delayed for individuals with rare and serious epilepsy or multiple sclerosis.

On 2 March 2020, the UK, France and Germany committed EUR3 million to Iran through WHO or United Nations agencies. The financial support will be used to aid Iran in their fight against the coronavirus. The three countries also committed material support, such as equipment for laboratory tests, protective body suits, and gloves.

On 3 March 2020, the DHSC announced the next phase of the “We Are The NHS” multimedia recruitment campaign, aimed at recruiting healthcare professionals to the NHS. The latest phase aims to recruit paramedics, radiographers, and nurses. Efforts are aligned with the government’s goal of recruiting 50,000 more nurses and 26,000 primary care professionals to the NHS by 2024/25.

On 3 March 2020 to 10 March 2020, the MHRA Enforcement Team and UK Border Force participated in Operation Pangea XIII which spanned 90 countries. Police and health authorities

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took part in Operation Pangea XIII which aimed to stop online sales of medical and hygiene products to prevent exploitation of high market demand.\(^{3020}\)

On 5 March 2020, Universal Mental Health Day, the DHSC announced EUR1 million in funding for innovative student mental health projects.\(^{3021}\) The funding will be focused on reaching students at risk of mental health concerns, as well as individuals that face barriers in accessing resources.\(^{3022}\)

On 5 March 2020, the UK government listed COVID-19 as a notifiable disease, requiring general practitioners to report any cases to PHE by law.\(^{3023}\)

On 11 March 2020, Chancellor Rishi Sunak announced EUR5 billion for the COVID-19 fund.\(^{3024}\) EUR1.6 billion will be directed to local authorities to assist with the COVID-19 response.\(^{3025}\) Funds will support adult social care workers and services for vulnerable individuals.\(^{3026}\) EUR1.3 billion will support a safe and fast NHS discharge process for patients that no longer require urgent care.\(^{3027}\) Such actions will help vacate 15,000 NHS beds in England.\(^{3028}\)

On 15 March 2020, the DHSC announced EUR16 million in funding in 2020/21 to increase the availability of the drug PrEP across England.\(^{3029}\) The goal is to provide PrEP at sexual health clinics for individuals at high risk of human immunodeficiency virus (HIV).\(^{3030}\) Such actions align with the government’s aim to end HIV transmission by 2030.\(^{3031}\)

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On 16 March 2020, Prime Minister Johnson called on leading manufacturers in the UK to increase production of ventilators among other vital medical equipment to help the NHS. Contributions can be made on several levels, including: design, procurement, assembly, testing, and shipping. On 26 March 2020, Prime Minister Johnson asked suppliers and manufacturers to increase ventilator production.

On 17 March 2020, the UK government announced new ministerial structures to combat COVID-19 across the government. Prime Minister Johnson was to chair daily C-19 meetings that involve four new implementation committees. The Health Secretary chairs the healthcare committee, the Chancellor of the Duchy of Lancaster chairs the general public sector committee, the Chancellor chairs the economic and business committee, and the Foreign Secretary chairs the international committee.

On 17 March 2020, NHS England announced efforts to free up 20,000 of 100,000 hospital beds to cope with COVID-19 patients burdening hospitals. Efforts include postponing non-urgent operations and greater reliance on community care.

On 18 March 2020, Prime Minister Johnson outlined UK foreign aid during a press conference on COVID-19. He stated that the UK pledged EUR91 million to international efforts, and EUR150 million to the International Monetary Fund’s “Catastrophe Containment and Relief Trust” to stop transmission and aid countries in managing the effects of the outbreak.

On 18 March 2020, the UK government announced plans to increase PHE COVID-19 testing to 25,000 hospital patients each day. Point-of-care swab tests will be developed to test suspected patients outside of the hospital.
On 20 March 2020, the UK government announced a parallel export ban for more than eighty medicines relevant to COVID-19.\textsuperscript{3044} The ban will ensure that there is no shortage for coronavirus patients.\textsuperscript{3045} Companies that violate the ban can face consequences by the MHRA.\textsuperscript{3046}

On 20 March 2020, the United States Food and Drug Administration awarded PHE scientists USD500,000 for vaccine and treatment development.\textsuperscript{3047} The funding supports the international response to COVID-19.\textsuperscript{3048}

On 20 March 2020, schools, colleges, and early year settings were closed to reduce the spread of COVID-19 to all students except children of key workers and vulnerable children.\textsuperscript{3049} Entertainment, hospitality, and indoor leisure premises were also closed across England.\textsuperscript{3050} Measures were implemented to reduce the spread of COVID-19.\textsuperscript{3051}

On 21 March 2020, Minister Hancock enacted the Health Protection (Coronavirus, Business Closure) (England) Regulations 2020.\textsuperscript{3052} The measures include prohibition of food and drink sales on various premises.\textsuperscript{3053}

On 21 March 2020, the NHS made a deal with private hospitals to provide 8,000 extra hospital beds in England, 1,200 ventilators, and 20,000 staff to aid the coronavirus response.\textsuperscript{3054}

On 23 March 2020, the UK government announced EUR20 million in funding for the COVID-19 Genomics UK Consortium.\textsuperscript{3055} The NHS, PHE, UK Research and Innovation, Wellcome Sanger

Institute, and other institutions, will work together to facilitate whole genome sequencing of COVID-19 in order to understand spreading patterns and mutations.\(^{3056}\)

On 23 March 2020, the NHSX launched the Techforce19 challenge which can award EUR500,000 in funding overall for technology companies.\(^{3057}\) The goal is to provide digital solutions for individuals who must remain at home due to COVID-19.\(^{3058}\)

On 23 March 2020, Minister Sharma announced EUR20 million of government investment in six coronavirus research projects aimed at vaccine development and treatment.\(^{3059}\) Other projects involve repurposing existing therapies, using antibodies to target the virus, drug testing, and collecting data regarding infected patients.\(^{3060}\)

On 24 March 2020, Minister Hancock stated that the government is seeking 250,000 volunteers to aid the NHS during COVID-19.\(^{3061}\) The NHS Volunteer Responders will help 1.5 million people with tasks such as medicine delivery.\(^{3062}\)

On 24 March 2020, Minister Hancock stated that the ExCel center will be converted to an intensive care unit named NHS Nightingale.\(^{3063}\) The temporary hospital will have 4,000 available beds for potential COVID-19 patients.\(^{3064}\)

On 25 March 2020 the Coronavirus Bill became an Act of Parliament.\(^{3065}\) The bill allows the UK government to implement emergency measures in response to COVID-19 for two years.\(^{3066}\) The bill

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forbids group gatherings and allows the government to order suspected COVID-19 cases to self-isolate, among other measures.3067

On 25 March 2020, the UK government launched the free coronavirus Information Service on WhatsApp.3068 The service is designed to offer information to the public regarding COVID-19, reducing the burden for the NHS.3069 The service will include information about prevention and symptoms, latest statistics, and general advice.3070

On 25 March 2020, the Defence and Security Accelerator (DASA) announced an Open Call for Innovation for industry members interested in developing sanitizing technology for ambulances and other settings.3071 Such measures would reduce the amount of time required to clean ambulances after attending to an individual suspected of COVID-19.3072 DASA is working with the Welsh Government, the Small Business Research Initiative Centre of Excellence, the Welsh Ambulance Service, Innovate UK, and the Defence Science and Technology Laboratory.3073

On 26 March 2020, Minister Hancock announced that 15,266 former professionals in England offered to help the NHS with COVID-19.3074 Also, 5,750 final year medics and 17,000 final year nursing students would be approached to consider assisting the NHS in the following week.3075

On 27 March 2020, the UK government pledged EUR210 million to find a vaccine for the coronavirus.3076 The announcement was made following a virtual summit of G20 leaders.3077

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funds were allocated for the Coalition for Epidemic Preparedness Innovations, bringing the UK total to EUR544 million.\textsuperscript{3078} The total funding involves EUR210 million for vaccine development, EUR40 million for treatment development, and EUR23 million for testing devices.\textsuperscript{3079}

On 27 March 2020, the DHSC launched the new COVID-19 testing program for frontline NHS workers.\textsuperscript{3080} The program will involve both government and industry to increase COVID-10 testing.\textsuperscript{3081} Involved parties include Thermo Fisher Scientific, Amazon, Boots, Royal Mail and Randox, Wellcome Trust, and UK universities.\textsuperscript{3082} The goal is to inform NHS staff whether they need to self-isolate.\textsuperscript{3083}

On 28 March 2020, Minister Sharma temporarily suspended regulations to bring personal protective equipment and hand sanitizers to NHS staff more quickly.\textsuperscript{3084} The intention is to protect healthcare workers on the frontline.\textsuperscript{3085}

On 28 March 2020, Prime Minister Johnson wrote a letter to every household in the UK.\textsuperscript{3086} The intention advised individuals to stay home to protect the NHS and help the public at large.\textsuperscript{3087} The letters will be delivered to 30 million households across the UK to remind individuals to maintain social distancing to limit the spread of COVID-19.\textsuperscript{3088}
On 29 March 2020, Communities Secretary Robert Jenrick announced that the UK government delivered the first of 50,000 free food boxes along with medications supplied by community pharmacies to vulnerable populations.3089

On 29 March 2020, Mental Health Minister Nadine Dorries announced that the PHE published mental health guidance for individuals during the COVID-19 outbreak.3090 Mental health charities donated EUR5 million to help expand service and the guidance is supported by the NHS.3091

On 30 March 2020, Minister Hancock temporarily approved two measures for early medical abortions: early abortion pills up to ten weeks without the need to visit a hospital or clinic, and prescription of pills by registered medical practitioners.3092 The measures were introduced to encourage individuals to stay at home during the COVID-19 pandemic.3093

On 31 March 2020, the MHRA approved a breathing aid for COVID-19 patients.3094 The MHRA guided the University College London and Mercedes Formula One in the development of an adapted Continuous Positive Airway Pressure (CPAP) device.3095 The device functions by providing the lungs with oxygen, reducing the need for a ventilator.3096 Chancellor of the Duchy of Lancaster Michael Gove stated that the 10,000 CPAP devices will be provided to patients.3097

On 31 March 2020, Chancellor Rishi Sunak removed import taxes on medical equipment such as ventilators, coronavirus testing kits, face masks, protective garments, and eye protectors.3098 The

items will not be taxed according to customs duty or import VAT to increase the import of essential items during the COVID-19 pandemic.3099

On 31 March 2020, Chancellor of the Duchy of Lancaster Michael Gove announced the first Penlon ventilators from the government’s challenge will be delivered to the NHS in the following week.3100 More ventilators are expected in the coming weeks.3101

On 1 April 2020, the UK government provided EUR200 million to community pharmacies.3102 An additional EUR100 million will be provided on 1 May 2020.3103 The funding will be used to help pharmacies continue delivering essential services during the COVID-19 pandemic.3104

On 2 April 2020, Minister Hancock pledged that 100,000 COVID-19 tests will take place each day by the end of April.3105 This pledge was part of the 5-pillar plan to increase testing capacity, which states the intention to increase swab testing, deliver increased commercial swab testing, develop blood testing, conduct UK wide surveillance, and create a national testing effort.3106

On 2 April 2020, Minister Hancock announced EUR13.4 billion of NHS debt will be written off.3107 This intention is to provide the NHS with financial support to maintain services and improve infrastructure during the COVID-19 pandemic.3108

On 3 April 2020, the DHSC announced the Randomised Evaluation of COVID-19 Therapy (RECOVERY).3109 RECOVERY will be the largest randomized clinical trial project in the world.3110
1,000 patients across 132 hospitals were recruited thus far to test treatments including Lopinavir-Ritonavir, Dexamethasone, and Hydroxychloroquine. The project received EUR2.1 million from the EUR20 million dedicated for research. Funding sources include the UK Research and Innovation and the DHSC.

On 4 April 2020, Minister Hancock launched the Coronavirus Status Checker on the NHS website. People with coronavirus symptoms can fill out the status checker and answer a questionnaire about their experience with the NHS. The purpose of the Coronavirus Status Checker is to collect information that can inform improvements to the NHS coronavirus response.

On 5 April 2020, the UK government pledged EUR200 million for global COVID-19 response efforts. Of the EUR200 million, EUR130 million is for the United Nations, EUR65 million is for the World Health Organization, and EUR50 million is for the Red Cross. The goal is to minimize the spread of COVID-19 during the second wave.

On 9 April 2020, Minister Hancock launched a diagnostic lab network in Milton Keynes. The lab is the largest in British history and will work to increase national testing. Two other Lighthouse Labs will open in Alderley Park and Glasgow.
On 9 April 2020, the UK government launched a campaign advising the public to remain at home over the Easter weekend. The multimedia campaign aims to minimize the spread of COVID-19.

On 10 April 2020, Minister Hancock published a plan regarding personal protective equipment with three strands: guidance, distribution, and future supply. The purpose is to ensure that the equipment reaches individuals who are most in need. Other existing measures include a 24-hour helpline for emergency equipment drops to healthcare providers and military intervention to help supply equipment. There is also an impending website to aid healthcare providers.

On 10 April 2020, the British Medical Association called on the government to investigate the disproportionate death of black, Asian, and minority ethnic doctors. The first ten doctors who died from the virus in the UK were black, Asian or minority ethnic doctors, in addition to three of six nurses who have died.

On 13 April 2020, Chancellor Sunak announced that EUR14 billion will be allocated to public services from the coronavirus emergency response fund. The NHS and local authorities will receive funding.

The United Kingdom has fully complied with its commitment to take action aimed at building resilient and sustainable health systems through investments in personnel, infrastructure, technology, research, as well as introducing unique strategies, programs, and funding for affected communities. The United Kingdom has also fully complied with its commitment to take action aimed at moving toward the achievement of universal healthcare coverage through providing aid to overseas British
nationals and international citizens, increasing access to vaccines and treatments, introducing supportive services for the public, and contributing additional funding to the National Health Service. Thus, the United Kingdom receives a score of +1.

**United States: +1**

The United States has fully complied with its commitment to take action aimed at moving toward the achievement of universal health coverage and to take action aimed at building resilient and sustainable health systems, especially aimed at reaching the most affected communities.

On 3 September 2019, the U.S. Department of Health and Human Services (HHS) Office of the Assistant Secretary for Preparedness and Response (ASPR) will award USD170 million to Emergent BioSolutions of Gaithersburg, Maryland to purchase the smallpox vaccine for people at high risk for smallpox infection over the next decade. This will build and replenish the Strategic National Stockpile in order to enhance biodefence preparedness. ASPR remains committed to the commitment of developing two additional vaccines and treatments for smallpox; Biomedical Advanced Research and Development Authority (BARDA), a component of ASPR, is still continuing to collaborate with federal and private partners to develop additional smallpox vaccines that can be administered to people at a high risk of infection or reaction to traditional vaccines and to develop antiviral drugs.

On 3 September 2019, the Office for Civil Rights (OCR) at HHS issued guidance on how to ensure equal access to services for all segments of the community during emergency circumstances, particularly Hurricane Dorian. OCR has also declared a public health emergency and waived certain provisions of the Health Insurance Portability and Accountability Act within disaster areas for 72 hours so that patient information can be shared with family members and friends who may assist in their care and between covered entities for treatment purposes, public health activities and to prevent or lessen serious threat to health and safety.

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On 4 September 2019, HHS announced USD 1.8 billion in funding would be going toward states so that they are able to expand access to treatment for the opioid crisis and support gathering of real-time overdose data.  

On 10 September 2019, the HHS Office of the National Coordinator for Health Information Technology provided funding for two Leading Edge Acceleration Projects in Health Information Technology to improve health care for all Americans. Projects aim to develop health information technology infrastructure to focus on consent management, population health research, enhancement of engagement with health research and care amongst underrepresented populations, appropriate data sharing between patients, researchers and clinicians and patient security and privacy.  

On 10 September 2019, HHS through the Health Resources and Services Administration (HRSA) awarded almost USD 9 million to launch Rural Maternity and Obstetrics Management Strategies pilot program. This program aims to improve access to and continuity of maternal obstetric care in rural communities specifically Missouri, New Mexico and Texas. The unique aspect of this program is that network requirements provide a detailed outline of specific stakeholder involvement to focus on developing sustainable strategies at a regional level by focusing on financial stability in care, introducing telehealth and a network-based approach to ensure continuum of care.

On 11 September 2019, HHS through the HRSA awarded USD 50 million for funding 77 health centres to support new organizations and existing health centres in improving access to quality healthcare in both rural and urban communities for vulnerable populations where financial, geographical or cultural barriers to affordable health care exist.

On 12 September 2019, HHS allocated USD 351 million to states, territories and non-profit organizations through the Maternal, Infant, and Early Childhood Visiting Program, that provides voluntary, evidence-based home visiting to pregnant women and parents with young children up to kindergarten to enable many families, especially families considered at-risk, raise healthy children. An additional USD 18.7 million funding toward State Maternal Health Innovation through nine cooperative agreements will aid states to improve maternal health outcomes, particularly reduce maternal mortality.

strategies to reduce maternal mortality. USD1.8 million will be allocated to Alliance for Innovation on Maternal Health (AIM) to build upon AIM’s foundational work to expand reach by addressing preventable maternal mortality outside of hospital and birthing facility settings.

On 18 September 2019, HHS through the HRSA awarded USD85 million to 298 health centres for affordable and accessible oral health services to be used toward the support of new infrastructure which includes equipment purchases, mobile units for inaccessible communities and training of staff to integrate oral health within overall systemic health services.

On 24 September 2019, the Centers for Medicare and Medicaid Services (CMS) announced that on average premiums would decline 23 per cent from 2018 for Medicare Advantage while benefits and enrollment are expected to increase. Secretary Alex Azar of HHS indicated that this would mean “lower costs, more options and benefits tailored to patients’ needs.”

On 30 September 2019, HHS through the Office of Population Affairs (OPA) allocated USD33.6 million to 50 current Title X grantees for the supplementation of family services through prioritizing unserved and underserviced areas and low-income individuals. Grantees that did not comply with statutory and regulatory requirements that did not allow federal funding to be used toward abortion services as a method of family planning relinquished funds. OPA aided in mitigating interruption of services due to voluntary relinquishment of funds.

On 2 October 2019, HHS through the Centers for Disease Control and Prevention awarded USD13.5 million for community involvement for the federal initiative “Ending the HIV Epidemic: A Plan for Americans,” which aims to reduce new HIV infections through investing in locally tailored plans for each community and increasing local health department capacity.


On 10 October 2019, HHS published “Guide for Clinicians on the Appropriate Dosage Reduction or Discontinuation of Long-Term Opioid Analgesics” to provide clinicians with a guide when contemplating or initiating a change in opioid dosage.\textsuperscript{3154} HHS recommends clinicians to not suddenly discontinue or rapidly decrease dosage due to significant risks of opioid withdrawal barring life-threatening circumstances.\textsuperscript{3155} The guide includes issues to consider when changing dosage that include need to treat symptoms of withdrawal and provide behaviour support.\textsuperscript{3156}

On 16 October 2019, Secretary Azar stated that the all-time high approval of generic drugs by the Food and Drug Administration (FDA) contributed to lower drug prices, promoting health and improved access to prescription to drugs.\textsuperscript{3157}

On 22 October 2019, HHS through the Agency for Healthcare Research and Quality announced USD16 million for initiatives to enable over 700 primary care practices to address patients’ unhealthy alcohol use.\textsuperscript{3158}

On 23 October 2019, HHS through the HRSA announced USD319 million for awards to clinicians and students through the National Health Service Corps, to provide quality care to Americans in rural, urban and tribal communities.\textsuperscript{3159} Secretary Azar said that there is a particular focus on improving healthcare in rural communities through building “a strong, sustainable rural healthcare workforce.”\textsuperscript{3160}

On 25 October 2019, HHS through the HRSA announced USD2.27 billion for Ryan White HIV/AIDS Program grants to support HIV primary medical care, medication, and essential support services to Americans to increase access to treatment and medical advances, especially for low income people in hard-to-reach areas.\textsuperscript{3161}

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On 30 October 2019, HSS and Mental Health Services Administration launched “FindTreatment.gov” to connect Americans with substance abuse treatment locations to improve access to treatment, prevention and recovery.3162

On 1 November 2019, the CMS finalized Medicare policies to increase choice through eliminating payment differences between services, encouraging medical innovation and increasing access of them, and empowering senior patients.3163

On 4 November 2019, HHS, the American Society of Nephrology, and National Kidney Foundation signed a memorandum of understanding to create a campaign on kidney disease to increase education, awareness and prevention of chronic kidney disease to improve health.3164

On 14 November 2019, the HHS will provide advanced development support from the Biomedical Advanced Research and Development Authority to test diagnostic technology that distinguishes between viral and bacterial infection through reading gene expressions under a USD6 million contract with Inflammatix Inc.3165 Funding will also enable Inflammatix Inc. to apply for FDA clearance.3166 Development of this rapid diagnostic tool will allow clinicians to make a decision on whether antibiotics are required to treat the infection based on identification of the infection as bacterial.3167 Tests will also enable clinicians to determine the risk of death from organ failure and identify susceptibility to antibiotics, ultimately promoting antimicrobial stewardship and tackling antimicrobial resistance.3168

On 15 November 2019, th HHS announced that CMS issued two rules to increase healthcare price transparency to the public, empowering patients and increasing competition between health providers and health coverage to decrease healthcare costs for Americans.3169 The Transparency in Coverage Rule will require health plans to provide consumers access to cost-sharing information such as an estimation of liability and disclose rates for in-network providers and amounts paid to out-

of-network providers. The other rule will require hospitals to make all hospital standard charges and the minimum and maximum amounts chargeable for common shoppable services, such as X-rays, publicly accessible. CMS will also be provided with enforcement tools such as monitoring, auditing and corrective action plans and the ability to impose a civil fine of USD300. The rules will be finalized by 2021.

On 3 December 2019, HHS launched “Ready, Set, PrEP,” a national program that makes medications for pre-exposure prophylaxis (PrEP), taken daily to prevent HIV, available at no cost to people without prescription drug insurance coverage. This program is a component of ‘Ending the HIV Epidemic: A Plan for America’ that aims to reduce the number of new HIV infections by 90% in the next ten years.

On 5 December 2019, the Indian Health Services (IHS) and the American Academy of Pediatrics Committee on Native American Child Health released clinical recommendations for IHS, tribal, and urban Indian organizations for neonatal opioid withdrawal syndrome and standards of care for screening, diagnosing, and treatment at health care facilities. These standards will improve the quality of care for mothers and their infants that are impacted by the opioid crisis.

On 17 December 2019, HHS through CMS proposed removing financial disincentives to living organ donors through expanding reimbursable expenses for living donors including lost wages, as well as child or elder care so that recipients can receive better quality organs.

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taken in response to the shortage in available kidney donors considering the national waiting list consists of 96,000 people.\textsuperscript{3179} Proposed changes will be in effect starting 2022.\textsuperscript{3180}

On 18 December 2019, HHS, the FDA, and President Donald Trump proposed allowing certain prescription drugs to be imported from Canada.\textsuperscript{3181} This would allow for lower U.S. drug prices and improve access to medication for Americans.\textsuperscript{3182}

On 4 February 2020, HHS and Office of Assistant Secretary for Preparedness and Response (ASPR), announced that they are collaborating with Regeneron Pharmaceuticals Inc. to expand on a previous agreement to develop treatment for COVID19.\textsuperscript{3183}

On 10 February 2020, HHS started the first foundry for American Biotechnology in the nation, which serves to protect and respond to health security threats through the production of technological solutions.\textsuperscript{3184} This will also enable biotechnologies to become a part of daily medical care and emergency response more efficiently and increase the bioeconomy in the United States.\textsuperscript{3185} A commercialization program that will be developed and managed by the Foundry will enable for private sector industries to more efficiently adopt technologies while reducing the need of stockpiling medical equipment, supplies and medications for federal and state governments.\textsuperscript{3186}

On 11 February 2020, HHS and the Office of ASPR announced that they are collaborating with Janssen Research and Development to expand the existing partnership to accelerate the development of a vaccine for COVID19 to assist with public health response.\textsuperscript{3187}

On 18 February 2020, BARDA announced that it will provide expertise and allocate funding to Sanofi Pasteur to support a licensed vaccine for the COVID19 vaccine using Sanofi's recombinant DNA platform, with the aim to ensure health security and prevent future outbreaks.\textsuperscript{3188}
On 18 February 2020, HHS and BARDA announced that they are collaborating with Janssen Research and Development through an existing partnership to develop treatments for coronavirus that reduce the severity of symptoms as well as treat the infection. BARDA is also collaborating with Janssen to develop a vaccine for COVID-19, and has worked with Janssen in the past to develop vaccines for infectious diseases such as Ebola and influenza.

On 26 February 2020, the Health Resources and Services Administration (HRSA) of the HHS awarded USD 117 million as part of the “Ending the HIV Epidemic: A Plan for America (EHE)” initiative toward expanding access to care, treatment, medication, and prevention services for HIV. The aim of EHE is to reduce the number of new HIV infections in the United States by 90 per cent.

On 4 March 2020, HHS planned to purchase 500 million N95 respirators to protect healthcare workers through the upcoming 18 months to ensure the Strategic National Stockpile can meet the needs during the COVID-19 outbreak.

On 4 March 2020, HHS and the Centers for Disease Control and Prevention (CDC) announced funding to support states and local jurisdictions in their COVID-19 response. USD 25 million will be awarded to the states and local jurisdictions with the largest burden of response and preparedness and USD10 million for coronavirus surveillance across the United States.

On 6 March 2020, President Donald Trump signed Coronavirus Preparedness and Response Supplemental Appropriations Act 2020 which consists of USD 8.3 billion of federal funding for states and territories to aid them in preparing to respond to COVID-19 outbreak and in streamlining efforts for more efficient communication between state and federal public health departments.
On 9 March 2020, HHS finalized two rules to provide patients with their health data in order for them to make informed decisions and manage their care.3197 These rules will enable patients to access information within their electronic health records integrated with their health insurance through a smartphone app of their choice and will require more aspects of clinical data, as outlined in US Core Data for Interoperability, to be a part of electronic health records for more efficient transmission of information between different healthcare facilities.3198

On 9 March 2020, HHS announced that they will support Hologic in developing high-throughput COVID-19 diagnostic tests to detect the SARS-CoV-2 genetic material and have results ready for clinicians in under three hours.3199 According to BARDA Director Rick Bright, early detection and rapid testing will enable clinicians to properly treat infections, ultimately mitigating the spread of COVID-19.3200

On 11 March 2020, CDC announced that it will provide over USD 560 million to state and local health departments to support COVID-19 preparedness and response.3201

On 13 March 2020, HHS announced that it will support DiaSorin Molecular with USD 679,000 and and Qiagen with USD 598,000 to aid them in developing diagnostic tests for COVID-19 to detect the virus in approximately one hour.3202

On 17 March 2020, HHS and the Trump Administration announced that Medicare coverage for telehealth visits would be expanded to include telehealth services during the COVID-19 outbreak in order for Americans to access care remotely.3203

On 18 March 2020, HHS, through the HRSA, announced that they will be collecting information from HRSA-funded health centres to assess their involvement in COVID-19 response and support the overall response to the pandemic.3204

On 18 March 2020, HHS announced that it will support Mesa Bioetech with technical expertise and USD 561,330 to develop rapid diagnostic test for COVID-19 in order to detect, and reduce the spread of the virus.\textsuperscript{3205}

On 18 March 2020, HHS announced that it is working toward developing high-volume emergency drug packaging and awarded Apiject Systems America with USD 456 million toward research development to ensure low-cost prefilled syringes for a consortium for Rapid Aseptic Packaging of Injectable Drugs (RAPID) to deliver vaccines and therapeutic drugs.\textsuperscript{3206}

On 20 March 2020, HHS announced that the CDC would be providing funding of USD 80 million to tribes, tribal organizations, and Urban Indian Organizations to increase public health capacities in order to support COVID-19 outbreak management efforts.\textsuperscript{3207}

On 24 March 2020, HHS awarded USD 100 million across 1,381 health centres for screening, testing, medical supplies, and improving telehealth capacities in response to COVID-19.\textsuperscript{3208}

On 24 March 2020, HHS provided USD 100 million for healthcare systems in response to increasing COVID-19 patients to benefit the National Special Pathogen System.\textsuperscript{3209} The National Special Pathogen System leverages a pre-established infrastructure to manage the Ebola outbreak and will apply that approach to treat trauma, burn, cardiac and stroke patients.\textsuperscript{3210} The National Special Pathogen System includes ten regional Ebola facilities amongst other healthcare facilities, one in each HHS region, which have enhanced capability to treat patients infected with special pathogens such as coronavirus and will use training and curriculum provided by National Emerging Special Pathogens Training and Education Centre to help other health centres prepare to respond to the COVID-19 outbreak.\textsuperscript{3211}


On 24 March 2020, HHS announced USD 250 million funding toward providing meals for older adults in the community through grants from the Administration for Community Living as older adults are more vulnerable to COVID-19.3212

On 27 March 2020, President Trump signed the Coronavirus Aid, Relief, and Economic Security (CARES) Act, with investments in over USD 100 billion for hospitals and healthcare providers, in addition to USD 27 billion for vaccines, therapeutics, and personal protective equipment.3213

On 2 April 2020, HHS and the Department of Justice announced that approximately 192,000 N95 respirator masks would be distributed from those who were hoarding the masks and price gouging previously to frontline workers in New York and New Jersey for the COVID-19 efforts.3214

On 6 April 2020, HHS announced the CDC would provide USD 186 million to state and local jurisdictions to support COVID-19 response.3215 This will go toward supplementing existing agreements with lab equipment, supplies, staffing, shipping, infection control, monitoring individuals, and data management in areas that have the highest reported COVID-19 cases.3216 The funding will also go toward supplementing the Emerging Infections Program with increasing surveillance capabilities.3217

On 6 April 2020, HHS announced that they will support the state, territorial and tribal public health labs in all places, including remote and rural populations with “ID NOW COVID-19 rapid point of care test,” which provides results in under 13 minutes.3218 On 8 April 2020, HHS announced a contract with General Motors for USD 489 million for 30,000 ventilators under the Defense Production Act to combat COVID-19.3219

On 8 April 2020, HHS announced an agreement with DuPont for 450,000 TYVEK® suits to be delivered to frontline healthcare workers that week to protect them from COVID-19, with an

additional 2.25 million in the upcoming five weeks, with the option of purchasing up to 4.5 million.\textsuperscript{3220}

On 8 April 2020, HHS awarded USD 1.3 billion to 1,387 health centres to be used toward detection, prevention, diagnosis, or treatment of COVID-19 in addition to maintaining or increasing health capacity and staffing in response to the pandemic.\textsuperscript{3221}

On 8 April 2020, Indian Health Services (IHS) announced they would be expanding telehealth for American Indians and Alaska Natives to access healthcare from home during the COVID-19 pandemic across IHS federal facilities.\textsuperscript{3222}

On 8 April 2020, HHS announced a contract with Philips for USD 646.7 million for 43,000 ventilators under the Defense Production Act to combat COVID-19.\textsuperscript{3223}

On 8 April 2020, HHS announced that licensed pharmacists could administer COVID-19 tests to make them more accessible, under the Public Readiness and Emergency Preparedness Act.\textsuperscript{3224}

On 10 April 2020, HHS will begin to deliver relief funding from the CARES Act, with USD 30 billion going toward supporting healthcare-related expenses or lost revenue from coronavirus, such as testing and treatment for uninsured Americans.\textsuperscript{3225}

The United States has fully complied with its commitment to take action aimed at building resilient and sustainable health systems through improving transparency of hospital costs, proposing programs to combat health crises such as HIV/AIDS, maternal mortality, opioid overuse and antimicrobial resistance. The United States has also demonstrated efforts to fully comply with its commitment to take action aimed at moving toward the achievement of universal healthcare coverage through providing free or lower cost medication, investing in rural healthcare, and reducing Medicaid premiums. The United States has worked toward providing access to care for all during the COVID-19 pandemic through the allocation of funding for testing, research and development, telehealth options to receive healthcare, and purchasing personal protective equipment.

Thus, the United States receives a score of +1.

\textit{Analyst: Sophia DiNicolo}


The European Union has fully complied with its commitment to take action aimed at moving toward the achievement of universal health coverage and to take action aimed at building resilient and sustainable health systems, especially aimed at reaching the most affected communities.

On 12 September 2019, the European Commission partnered with the World Health Organization (WHO) to host a Global Vaccination Summit, in order to spread awareness about the efficacy of vaccines in fighting against preventable diseases. They specifically targeted vaccine misinformation, and the inequity in vaccine coverage rates, as threats to universal health coverage.

On 23 September 2019, the European Commissioner for Health and Food Safety Vytenis Andriukaitis released a statement emphasizing the necessity of increasing efforts toward universal health coverage, if the European Union is to reach the Sustainable Development Goals by 2030. In order to do so, the European Union must support partner countries in building resilient health systems and continue to support in improvement of primary healthcare services. Vytenis Andriukaitis also noted the EU aims to promote a ‘health in all policies’ approach to ensure that all determinants of health are addressed beyond the health sector including water, sanitation, gender equality and nutrition education. The Commissioner also promoted an investment of EUR100 million into the WHO’s Partnership Programme made in June 2019, which aims to both strengthen health systems and universal health coverage.

On 10 October 2019, the Delegation of the European Union to the United Nations released a statement in support of the United Nation’s resolution to realize universal health coverage. They emphasized the European Union’s rights-based approach to health by protecting human rights, including sexual and reproduction rights and affirmed their commitment to striving for universal health coverage in Europe and beyond.

On 17 October 2019, the European Union’s Health Policy Platform hosted its annual meeting focused on establishing the health priorities within Europe. Various health stakeholders and
interest groups attended the meeting which consisted of award presentations to cities, non-governmental organizations and schools for efforts in prevention and reduction of obesity, interactive roundtable discussing promotion of healthy weight in young adults, joint statements by stakeholder organizations discussing various health priorities and thematic network proposals to rally support for projects in the upcoming year. The joint statement of one of the stakeholder groups, Nobody Left Outside, focused on the need to expand coverage to reach the most vulnerable and marginalized groups in Europe.3234

On 10 November 2019, the European Union provided Yemen with EUR79 million in order to sustain their health services amidst a violent conflict.3235 This includes access to sanitation, food, water, and healthcare centres.3236 This is part of a wider European Union project in Yemen, which has to date provided EUR440 million in funds to address the ongoing humanitarian crisis.3237

On 28 November 2019, the European Commission published health reports analyzing the health systems of its thirty Member States.3238 The reports outline how vaccination hesitance, lack of access to mobile health services, and continued healthcare inequities are the main challenges faced by the EU member states.3239 The reports demonstrate that health systems of member states have been shifting preventive healthcare and health promotion.3240 Furthermore, a key finding noted that task shifting, by enhancing the roles of health professionals such as nurses and pharmacists, have demonstrated strong potential in improving the resilience of health systems.3241 Results of the reports will be used to “encourage mutual learning and exchange of good practices.”3242
On 5 December 2019, EU provided a EUR 297 million assistance package to refugees in Jordan and Lebanon.3243 EUR 70 million of these funds are to be used for improving healthcare for vulnerable populations in Lebanon, and EUR 39 million are to be dedicated to improving waste management and health conditions for Syrian refugee camps in Jordan.3244

On 10 December 2019, EU Health and Safety Commissioner Stella Kyriakides announced a plan, entitled the Europe Beats Cancer Plan to tackle access to cancer treatment for 2020.3245 This strategy will rely on emphasis on preventative measures, an expansion in screening processes, increased access to treatments, and e-health data expansion to optimize healthcare delivery.3246

On 18 December 2019, the European Investment Bank granted the biotech company MolMed with a line of credit up to EUR 15 million to spur research and innovation in cancer and rare disease treatments.3247

On 31 January 2019, the EU launched a EUR10 million funding program for COVID-19 research projects, specifically relating to public health preparedness and resilience.3248 This was part of their Horizons 2020 research and innovation programming.3249

On 4 February 2020, the European Commission launched a consultation on Europe’s Beating Cancer Plan.3250 The next steps entail consultations with stakeholders until July, and the plan is expected to be unveiled by the end of 2020.3251

On 1 March 2020, the EU provided EUR 30 million in assistance to Sudan, specifically targeting the expansion of emergency healthcare services, nutrition, and access to clean water.3252

On 6 March 2020, the EU increased funding (an additional EUR37.5 million) from the Horizons 2020 Research and Innovation programming to be used for vaccine development, treatment, and public health preparedness and resilience, to effectively manage the COVID-19 crisis.3253

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On 19 March 2020, the European Commission announced the creation of a stockpile of medical supplies (masks, ventilators, vaccines, medicine), financed up to 90 per cent by the EU. This stockpile is in response to supply shortages due to the COVID-19 pandemic.

On 3 April 2020, the EU put forth guidelines to facilitate cross-border treatments and medical services in response to the extra burden on the healthcare system due to COVID-19. In order to provide support to healthcare systems of its member states, the EU will be reimbursing all costs of health travel and initiating a Clinical Management Support System as a forum for the distribution of information amongst healthcare professionals.

On 8 April 2020, the European Commission requested that its member states ensure the availability of medications, by avoiding national stockpiles and rationing supplies to essential uses, in response to COVID-19.

On 8 April 2020, the EU put forth their plan for addressing the COVID-19 pandemic. Part of this plan permits the delivery of funds to partner countries in order to strengthen health systems to respond to the COVID-19 pandemic, allocating EUR15.6 billion to these actions.

On 17 April 2020, the EU allocated EUR2.7 billion in order to strengthen the healthcare sector in the face of COVID-19. These funds are to be allocated to building emergency health services, such as mobile health units, in addition to funding for medical supplies (masks, ventilators). Additionally, EUR 3.6 million will be allocated to the European Centre for Disease Prevention and Control to enhance their abilities to identify health threats.

The European Union has fully complied with its commitment to take action aimed at building resilient and sustainable health systems through investments in strengthening health systems by

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improving primary care services and investments within partner countries and globally. It has also taken efforts to strengthen the healthcare services of its member states in the face of the COVID-19 pandemic. The European Union has also demonstrated efforts to fully comply with its commitment to take action aimed at moving toward the achievement of universal healthcare coverage through committing to spread awareness about vaccines, supporting partner countries in expanding universal health coverage, discussing health policy priorities through reflection and goal setting.

Thus, the European Union receives a score of +1.

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