<table>
<thead>
<tr>
<th>REGION</th>
<th>COUNTRY</th>
<th>Population (000)</th>
<th>UHC Adequate Sanitation (%)</th>
<th>UHC Health Service Coverage Index (%)</th>
<th>Data Availability (%)</th>
<th>UHC Child Immunization Coverage (%)</th>
<th>Types of Immunization Data Collection</th>
<th>SDG 3.C Health Workforce Health Professional Density per 10,000 Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asia</td>
<td>Bangladesh</td>
<td>166,796</td>
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<td>46</td>
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<td>77</td>
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<tr>
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<td>96</td>
<td>55</td>
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<tr>
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<td>47</td>
<td>76</td>
<td>8</td>
<td>12.7</td>
</tr>
</tbody>
</table>
Strategic Partnership for International Health Regulations (2005) and Health Security (SPH) Health System, UHC, SDG Aggregated Indicators for SPH

a. UHC-2030 Partner Countries

The UHC-2030 Strategic Health Coverage 2020 provides a multi-stakeholder platform to promote collaborative working at global and country levels on health systems strengthening. UHC-2030 is a transformation of IHATT into the UHC-2030 Strategic Health Coverage 2020 Development Goals. As it was expanded its scope to include health systems strengthening to achieve universal health coverage.

b. UHC Partnership Target Countries

The UHC Partnership comprises a broad mix of health experts working hand in hand to promote UHC by fostering multi-sectoral dialogue, aligning and building health systems governance, developing health financing strategies and supporting their implementation, and enabling effective development cooperation in countries. Data source: https://uhcsupport.org/sp.html/about/

1. NHPFV Availability

Current Plan is up to-date / valid

Current Plan needs to be updated (plan years has ended).

The National Health Policy Frameworks (NHPFV) are an overarching national document that guides the development of health and related sector in the country. In some countries it may be combined with other related sector such as social development. The availability of this national plan ensures that health development is planned and considered as one of the priorities in the country.

2. Emergency Grade

Country with WHO Graded Emergency as presented in the table. Data Source: https://extranet.who.int/spp/country-status

- Grade 1
- Grade 2
- Grade 3

The Graduated Emergency is an acute public health event or emergency that requires an operational response by WHO and/ or other UN agencies. The grading is performed by the WHO Global Health Security agendas. The WHO Emergency Support Team is coordinated by focal point in the regional office.

3. WHO FCS (Fragile and Conflict-Affected States)

Country with high levels of poverty and debt overhang which are eligible for special assistance from the donors and partners to response to crises in particular country which have a systemic impact on the delivery of health services. WHO FCS (Fragile and Conflict-Affected States) 

https://www.ghsagenda.org/assessments

Source: https://www.who.int/gho/topics/nphp/index_2616170.pdf

4. WHO Health IT and Conflict-Country List

This list is a group of countries or territories which are categorized by the degree of fragility and conflict. Countries or territories with very high conflict and security status, with updated list being released annually from 2006 onwards. The most recent contained 35 countries and territories: 1–10 are from HICP, 11–20 from EBRD, 21–30 from AMRO, EBRD, and SAQR. Inclusion on the harmonized list of fragile situations occurs if a country has a harmonized Country Policy and Institutional Assessment (CPIA) country rating of 5 or lower, and the country is a Fragile and Conflict-Affected Region.

https://www.who.int/gho/cabinet/uhc-service-coverage.jsp

5. WHO HIP (Humanitarian Response Plan)

Countries included in the WHO Humanitarian Response Plan 2017. The response plan is in the appeal to the donors and partners to respond to the crisis in particular country which have a systemic impact on the delivery of health services. WHO HIP plans form part of the overall humanitarian response plans developed by partners in consultation with affected populations.

Data source: https://www.who.int/hrp/about.html

6. CADDRI (The Capacity for Disaster Reduction Initiative)

CADDRI was set up as a mechanism aimed at responding to the need for a coordinated and coherent UN-wide support to Governments in their capacity building and response to the impacts of disasters, in line with the Sendai Framework for Disaster Risk Reduction (2015-2030). CADDRI brings together six United Nations organizations – UNESCO, UNICEF, UNFPA, WHO, and WFP – as Executive Partners – and IFRC, IOM, OCH, UNESCO, UNFPA, UNICEF, UNOPS, WFP, and WHO/GDFR as Observers to develop a comprehensive and coordinated international capacity development for disaster risk reduction to countries at risk.

https://www.cadri.net/en/where-we-work

7. JEE

Country states that have evaluated their IHRecore health indicators. To use the JEE, select a country from the list of countries. The JEE is a valuable tool for policy makers and others who wish to assess the health status of a country and the progress that has been made in improving health outcomes.

https://www.who.int/jee/about

8. NAPHS – National Action Plan for Health Security

The National Action Plan for Health Security (NAPHS) is a process designed to ensure health systems are robust and resilient to new and emerging health threats. NAPHS was established to support Member States in meeting the global health security targets identified in the International Health Regulations (2005) and Health Security (SPH) Health System, UHC, SDG Aggregated Indicators for SPH.

https://extranet.who.int/spp/country-data

9. WHO Regional groups

Regional groups: Africa, Americas, Eastern Mediterranean, Europe, South-East Asia, Western Pacific. Data source: https://www.who.int/hrp/about.html

WHO Region of the Americas: Antigua and Barbuda, Argentina, Bahamas, Barbados, Belize, Bolivia (Plurinational State of), Brazil, Canada, Chile, Colombia, Costa Rica, Cuba, Dominica, Dominican Republic, Ecuador, El Salvador, French Guiana, Grenada, Guatemala, Guyana, Haiti, Honduras, Jamaica, Mexico, Nicaragua, Panama, Paraguay, Peru, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname, Trinidad and Tobago, the United States of America, Uruguay, Venezuela, Washington D.C.

WHO South-East Asia Region: Bangladesh, Bhutan, Democratic People’s Republic of Korea, India, Indonesia, Lao People’s Democratic Republic, Malaysia, Maldives, Myanmar, Nepal, Sri Lanka, Thailand, Timor-Leste.

WHO European Region: Albania, Andorra, Armenia, Austria, Azerbaijan, Belarus, Belgium, Bosnia and Herzegovina, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Georgia, Germany,dsn, Georgia, Germany, Greece, Greenland, Hungary, Iceland, Ireland, Italy, Kosovo, Kyrgyzstan, Latvia, Liechtenstein, Lithuania, Luxembourg, Malta, Monaco, Montenegro, Netherlands, Norway, Poland, Portugal, Republic of Moldova, Romania, Russian Federation, San Marino, Serbia, Spain, Sweden, Switzerland, Turkey, Ukraine, United Kingdom, Uzbekistan, Vatican City State (Holy See), former Yugoslav Republic of Macedonia, Turkey, Turkmenistan, Ukraine, the United Kingdom, Uzbekistan, Vietnam

WHO Eastern Mediterranean Region: Afghanistan, Bahrain, Djibouti, Egypt, Indonesia, Islamic Republic of, Jordan, Kuwait, Lebanon, Libya, Oman, Qatar, Saudi Arabia, Somalia, Sudan, Syrian Arab Republic, Tunisia, Turkey, United Arab Emirates, Yemen

WHO Western Pacific Region: Australia, Brunei Darussalam, Cambodia, China, Cook Islands, Fiji, Korea, Japan, Kiribati, People’s Democratic Republic of Korea, Malaysia, Marshall Islands, Micronesia (Federated States of), Mongolia, Nepal, New Zealand, Nauru, Palau, Papua New Guinea, Philippines, Republic of Korea, Samoa, Solomon Islands, Tonga, Tuvalu, Vietnam, Vanuatu

Data source: https://extranet.who.int/spp/country-data

i. UHC

- Population

Data on population in a country or region as of July 1, 2015. Figures are presented in thousands. Data for urban and rural areas. Data are from the most recent WHO population database. Data are available from the most recent UN Country Partnership Document.

Data Source: https://extranet.who.int/spp/country-data

- UHC - Adequate Sanitation (%)

The population of countries under at least basic sanitation services, that is, improved sanitation facilities that are shared by no more than 1 household. Data are available from the most recent UN Country Partnership Document.

Data Source: https://extranet.who.int/spp/country-data

- UHC Coverage Index (%)

Country Data Availability

Coverage of essential health services: defined as the average coverage of essential services based on tra interventions that include reproductive, maternal, newborn, child health, and maternal health (index for the said 10 immunizations) with the denominator of available types of immunization data in the corresponding country.

Due to data limitations, not all data collection systems used to compute the index are direct measures of service coverage. These proxy indicators will be replaced in future years when more data become available. The selected indicator is meant to represent the broad range of essential health services necessary for progress towards UHC; they should not be interpreted as a recommended basket of services.

Data Source: https://extranet.who.int/spp/country-data

- UHC Child Immunization Coverage (%) & Types of Immunization

Monitoring the global epidemiological situation allows the WHO to have an up-to-date overview of the status of the disease burden in the world. The World Health Organization (WHO) uses a standardized country data collection system to monitor global epidemiological trends.

Due to data limitations, not all data collection systems used to compute the index are direct measures of service coverage. These proxy indicators will be replaced in future years when more data become available. The selected indicator is meant to represent the broad range of essential health services necessary for progress towards UHC; they should not be interpreted as a recommended basket of services.

Data Source: https://extranet.who.int/spp/country-data

- UHC Immunization Coverage (%)

The service coverage index combines 16 tracer indicators of service coverage into a single summary measure. The coverage index is a measure of the percentage of population that has been vaccinated against a specified disease or combination of diseases. The index is calculated using a weighted average of the coverage for each of the 16 tracer indicators.

The service coverage index combines 16 tracer indicators of service coverage into a single summary measure. The index is calculated using a weighted average of the coverage for each of the 16 tracer indicators. A single or multiple country event with moderate public health consequences: a single or multiple country event with minimal public health consequences: a single or multiple country event with limited public health consequences.

Data Source: http://apps.who.int/gho/data/node.wrapper.imr?x-id=4834

- UHC System Availability

Data on the service coverage index are available in the database. Availability of data in the database is currently presented by WHO. Data are most recent as of February 1, 2018.

http://apps.who.int/gho/data/node.wrapper.imr?x-id=4834

- UHC Child Immunization Coverage (%)

The service coverage index combines 16 tracer indicators of service coverage into a single summary measure. The index is calculated using a weighted average of the coverage for each of the 16 tracer indicators. A single or multiple country event with moderate public health consequences: a single or multiple country event with minimal public health consequences.

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Data Source: https://www.uhc2030.org/about-us/uhc2030-partners/

- UHC Health Workforce

The service coverage index combines 16 tracer indicators of service coverage into a single summary measure. The index is calculated using a weighted average of the coverage for each of the 16 tracer indicators. A single or multiple country event with moderate public health consequences: a single or multiple country event with minimal public health consequences.

Due to data limitations, not all data collection systems used to compute the index are direct measures of service coverage. These proxy indicators will be replaced in future years when more data become available. The selected indicator is meant to represent the broad range of essential health services necessary for progress towards UHC; they should not be interpreted as a recommended basket of services.

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