In 2000, at the turn of the century, the member states of the United Nations (UN) adopted the Millennium Development Goals (MDGs) to guide government action at the international, national, and local levels for the next 15 years [1]. At the end of that period, in September 2015, it was time for the 193 UN member states to design the successors to the MDGs, assessing how far they had been able to go and what remained to be achieved. Thus, the Sustainable Development Goals (SDGs) that guide the 2030 development agenda were developed. It is an ambitious and grand action plan for people, the planet, and prosperity, which seeks to strengthen universal peace [2].

Of the 17 SDGs adopted at the seventieth session of the UN General Assembly, the third SDG (“ensuring healthy lives and promoting well-being for all, at all ages”) is considered the most specific for health. This SDG addresses the provision of universal health coverage (UHC), aiming at providing access to quality health services for all and without financial difficulties [3].

In this context, Primary Health Care (PHC) is of paramount importance [4]. It is a strategy for organizing health care aimed at responding in a regionalized, continuous, and systematic way to most of the population’s health needs in order to integrate preventive and curative actions and focus on care for individuals and communities [5]. With 10 years to the end of this agenda (in 2030) and under the unprecedented effects of an overwhelming pandemic [6], reflecting on the progress that has been made can provide a useful vision and point out important gaps.

However, the document that guides the SDGs does not contain any direct mention of primary health care, which reflects a disappointing implementation of the 1978 Alma-Ata declaration in recent decades [5]. Governments recently reaffirmed their commitment to the SDGs by signing the 2018 Astana Declaration [7], which redefines the functions of primary health care in three: service delivery, multisectoral actions, and citizen empowerment. In this sense, the difference between primary health care and primary services is evident and emphasizes that although the latter is vital, it is only one of the several components necessary for PHC organization; therefore, the SDGs cannot be achieved only by providing health services.

Simply put, at this point, if we can point out something, it is that countries which chose to reorient their health systems from PHC are more likely to reach the SDGs within the established timeframe when compared to countries with health systems focused on hospital care as well as those who opted for low investments in health.

REFERENCES