EXECUTIVE BOARD 101st Session

Provisional agenda item 8

EB101/9 16 December 1997

Health-for-all policy for the twenty-first century

Resolution WHA48.16 adopted by the Forty-eighth World Health Assembly in May 1995 requested the Director-General "to take the necessary measures for WHO to secure, at a special event connected to the World Health Assembly of 1998, in conjunction with the fiftieth anniversary of WHO, high level political endorsement of a health charter based on the new global health policy, in order to obtain political ownership of the policy and commitment to its implementation". In accordance with this request a draft WHO charter/declaration based on the health-for-all policy for the twenty-first century is attached for consideration by the Executive Board.

DRAFT WORLD HEALTH CHARTER/DECLARATION

I

We, the Member States of the World Health Organization (WHO), reaffirm the principle enunciated in its Constitution that the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being; in doing so, we affirm the dignity and worth of every person, and the equal rights, equal duties and shared responsibilities of all for health.

П

People's health and well-being are the ultimate aim of social and economic development; throughout the world, action for health and development is intended to benefit each individual as well as each community, society and nation, allowing people to participate fully in economic and social life; in pursuit of health for all we are committed to the ethical concepts of equity, solidarity and social justice, and thus it is imperative to pay the greatest attention to those most in need, burdened by ill-health or receiving inadequate services for health, especially vulnerable groups and poor people, acknowledging that health improves when social and economic inequities affecting groups and countries are reduced.

Ш

We reaffirm our determination to address the basic determinants and prerequisites for health in each country and worldwide. These include: peace and security; equitable economic growth; sustainable use of resources and a healthy environment including adequate and safe water and food as well as clothing and shelter; equal opportunity for participation in economic and social life based on the empowerment of women and men; education and literacy; health promotion and information to ensure healthy lifestyles; control of disease and ill-health; and essential health care of adequate quality including reproductive health care; in ensuring these prerequisites, due respect will be shown for the culture, beliefs, right to privacy and autonomy of persons.

IV

We draw to the attention of all people the implications of the rapidly changing world health situation and the consequent need to endorse, adopt and implement the policy for health for all for the twenty-first century; in doing so, we recognize that any action for health should be based on community participation, the active involvement of people, strengthening of the role of the family and mobilization of societal forces in health action.

V

We call on all partners for health to work together and make the social commitment to apply the knowledge, standards, essential technology and services of quality that will reduce the burden of ill-health; we advocate technology that promotes and maintains health and that is most appropriate, ethical, equitably beneficial and acceptable to those who need and use it.

VI

We recommit ourselves to strengthening, adapting and reforming as appropriate our health systems and services in order to ensure universal access and recourse to health services that are affordable and of good quality, and that are sustainable throughout life for present and future generations; we intend to ensure the availability of the essentials of primary health care as defined in the Declaration of Alma-Ata¹ and developed in the new policy; we will enhance health development in response to the current and likely future health conditions, socioeconomic circumstances and aspirations of the people, communities and countries concerned, through appropriately managed public and private action for health.

VII

We will ensure that:

- the aims, action and responsibilities outlined in this Charter/Declaration are carried out through clear plans that set priorities for health development in accordance with local, national and international policies for health for all;
- all who provide human, technical, material and financial resources for health make them appropriate and sufficient to meet the priorities in a spirit of solidarity;
- implementation of the policy is supported by legislation and infrastructure;
- those who provide resources as well as the intended beneficiaries of the aims and action are made accountable.

VIII

We recognize that in carrying out the action and responsibilities, all nations, communities, families and individuals are interdependent; their solidarity is mutual and each is responsible for all; as a community of nations, we will act together to meet common threats to health and to promote universal well-being.

ΙX

We express our determination to create: a stronger sense of social and legal responsibility and care and of health and biomedical ethics; gender sensitivity; respect for cultural and spiritual values; concern for the benefit of the individual and opposition to violence; attention will be given to both potentially favourable or adverse effects of development, trade and environmental policies and practices on health and health services development.

X

We, the Member States of the World Health Organization, hereby resolve to promote and support the rights and principles, action and responsibilities enunciated in this Charter/Declaration through concerted action, with full participation and partnership among all elements of society, calling on all peoples and institutions to share in the vision of health for all in the twenty-first century, and to endeavour in common to realize it.

¹ Adopted at the International Conference on Primary Health Care, Alma-Ata, 6-12 September 1978, and endorsed by the Thirty-second World Health Assembly in resolution WHA32.30 (May 1979).