

PROVISIONAL SUMMARY RECORD OF THE FIFTEENTH MEETING

**WHO headquarters, Geneva
Monday, 30 January 2017, scheduled at 14:30**

Chairman: Dr R. BUSUTTIL (Malta)

CONTENTS

	Page
1. Noncommunicable diseases (continued)	
Cancer prevention and control in the context of an integrated approach (continued).....	2
2. Promoting health through the life course	
Progress in the implementation of the 2030 Agenda for Sustainable Development.....	5
The role of the health sector in the Strategic Approach to International Chemicals Management towards the 2020 goal and beyond	12
Global Strategy for Women's, Children's and Adolescents' Health (2016–2030): adolescents' health.....	15

FIFTEENTH MEETING

Monday, 30 January 2017, at 14:30

Chairman: Dr R. BUSUTTIL (Malta)

1. NONCOMMUNICABLE DISEASES: Item 10 of the agenda (continued)

Cancer prevention and control in the context of an integrated approach: Item 10.5 of the agenda (documents EB140/31 and EB140/31 Add.1) (continued)

The representative of JAPAN¹ said that national legislation and action plans on cancer control were regularly reviewed, taking into account the needs and views of patients, specialists and other stakeholders. The national cancer control plan was focused on reducing mortality, improving the quality of life of all cancer patients and their families, and building a society that enabled cancer patients to lead a fulfilled life. His country would be pleased to share its experience with others in the formulation of an integrated cancer prevention and control strategy. Japan had submitted a proposed amendment to the draft resolution and looked forward to further discussion on the text, with a view to its finalization.

The representative of the EUROPEAN SOCIETY FOR MEDICAL ONCOLOGY, speaking at the invitation of the CHAIRMAN, said that, despite the substantial progress made, only a minority of patients had access to the latest treatment. Further efforts were necessary to reduce the gap in cancer survival rates between high-income countries and low- and middle-income countries. She called on the Secretariat to strengthen its leadership and provide guidance to Member States on the development of frameworks to build national health systems to ensure patients' access to timely and cost-effective cancer treatment. A draft resolution on cancer should be included on the agenda of the Seventieth World Health Assembly.

The representative of the INTERNATIONAL FEDERATION OF MEDICAL STUDENTS' ASSOCIATIONS, speaking at the invitation of the CHAIRMAN, emphasized the need for a paradigm shift towards an integrated approach to cancer prevention, diagnosis and care. He urged all Member States to establish primary health care approach that focused on prevention, in particular by advocating healthy lifestyles, and underscored the need to ensure access to medicines. He called on Member States to promote national cancer research and funding, under the leadership of WHO. Greater involvement of young people in the global movement against cancer was essential; to that end, the Federation was making every effort to encourage their participation in cancer prevention awareness activities.

The representative of the INTERNATIONAL ASSOCIATION FOR HOSPICE AND PALLIATIVE CARE INC., speaking at the invitation of the CHAIRMAN, welcomed the focus on pain relief and palliative care in the draft resolution, particularly the call to implement resolution WHA67.19 (2014) on the strengthening of palliative care as a component of comprehensive care throughout the life course. She suggested amending paragraph 2(4) of the draft resolution, to read: "to intensify collaboration with all stakeholders with the aim of scaling up cancer prevention and control and improving the quality of life of cancer patients, including through palliative care services".

¹ Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.

The representative of the UNION FOR INTERNATIONAL CANCER CONTROL, speaking at the invitation of the CHAIRMAN, said that the draft resolution should include a reference to the collection of population-based mortality data disaggregated by cancer type; highlight the importance of cancer-specific risk factors in prevention strategies; and include oral cancer in the list of cancers in paragraph 1(7). In addition, the draft resolution should emphasize the need for evidence-based protocols both for childhood and adult cancer management; underline the importance of stepwise and resource-stratified guidance; and refer to opportunities for integrating cancer care into existing health services, especially for children, adolescents and women. Furthermore, it should refer to the need to link the objectives related to health systems strengthening for cancer prevention and control with the attainment of universal health coverage and the achievement of Sustainable Development Goal 3 (Ensure healthy lives and promote well-being for all at all ages). It should also refer to the importance of innovative financing approaches, improving accountability, and highlighting World Cancer Day as a platform for improving national awareness.

The representative of the WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE, speaking at the invitation of the CHAIRMAN, welcomed the reference in the report to the importance of integrating palliative care services in the continuum of cancer care. The draft resolution should refer to the need to include palliative care in all national cancer control plans; the importance of comprehensive support, including psychological and spiritual care, and legal and financial support; and the unique care needs of infants, children, adolescents and young adults with cancer.

The representative of MEDICUS MUNDI INTERNATIONAL – INTERNATIONAL ORGANISATION FOR COOPERATION IN HEALTH CARE, speaking at the invitation of the CHAIRMAN, said that the report reproduced many aspects of resolution WHA58.22 (2005) on cancer prevention and control, which signified that limited progress had been made. The report failed to provide in-depth analysis of the notion of integrated care, recognize challenges to the monitoring of standards in cancer prevention, diagnosis and care, particularly in the private sector, and address the institutional challenges to building networks for efficient cancer care. He urged WHO to consider international pricing of vaccines, drugs and equipment in the context of paragraph 1(8) of the draft resolution, and promote innovation for cancer medicines. Expediting the implementation of the WHO Framework Convention on Tobacco Control was crucial to reduce risk factors for cancer and a framework should be developed in the same vein to regulate the food and beverage industry. Lastly, he urged WHO to establish a commission to prepare an integrated action plan on ending childhood obesity.

The representative of STICHTING HEALTH ACTION INTERNATIONAL, speaking at the invitation of the CHAIRMAN, called on WHO to raise the profile of cancer treatment and develop a strategy to reduce the barriers to access to new cancer medicines, vaccines and diagnostic tests, including high prices. The draft resolution should set out measures to enhance transparency and improve data on drug prices, and on costs of and access to research and development. He requested the Secretariat to: identify a list of cancer medicines which, if made available at affordable prices, would be considered essential; study the feasibility of establishing a “push and pull” fund for research and development among countries, ensuring delinkage from product prices; and convene a global forum to develop a strategy for equal and expanded access to new technologies.

The representative of the INTERNATIONAL NETWORK FOR CANCER TREATMENT AND RESEARCH, speaking at the invitation of the CHAIRMAN, said that, in order to ensure the high quality of cancer research, researchers in low- and middle-income countries should have the same access to the results of studies as researchers in high-income countries, including information on any methodological difficulties encountered. Measures should be taken to ensure that the results from published research were made available to all cancer researchers in online research databases.

The representative of the WORLD CANCER RESEARCH FUND INTERNATIONAL, speaking at the invitation of the CHAIRMAN, said that the draft resolution should explicitly refer to healthy lifestyles as part of cancer prevention activities and should call for increased taxation on unhealthy commodities. It was critical to recognize the importance of preventing industry interference in public health policy-making and ensuring feasibility and health equity in the development of national cancer prevention and control policies and plans. He welcomed the call for the development of a world report on cancer, which should be regularly updated based on the latest evidence, in collaboration with key stakeholders.

The representative of the GLOBAL DIAGNOSTIC IMAGING, HEALTHCARE IT AND RADIATION THERAPY TRADE ASSOCIATION, speaking at the invitation of the CHAIRMAN, said that an integrated cancer care model would help to improve prevention, early diagnosis and early interventions, and would contribute to the achievement of Sustainable Development Goal 3. She supported the recommendations to develop and implement a national cancer control plan, with a focus on equity and access, and strengthen health care systems to improve access to timely diagnosis and treatment.

The representative of IARC said that the mission of IARC, WHO's cancer agency, was to provide a scientific evidence base for cancer prevention and control. IARC was currently financed by 25 Participating States from among WHO Member States. However, in the light of the increasing demands being placed on IARC and its ability to contribute to cancer control at the global level, he would welcome discussions with Member States on becoming Participating States. IARC was pleased to work with the WHO Secretariat on the development of a public health and policy-oriented world report on cancer, which would build on the five-yearly world cancer reports produced by IARC, and enhance collaboration between WHO headquarters and regional offices. In addition, IARC was actively engaged with the WHO Secretariat in the context of the agenda on noncommunicable diseases, and was a member of the United Nations Inter-agency Task Force on the Prevention and Control of Non-communicable Diseases. It also worked closely with the WHO Secretariat on hazard identification and risk assessment, but he recognized the need to reinforce that cooperation.

The ASSISTANT-DIRECTOR GENERAL (Noncommunicable Diseases and Mental Health) thanking participants for their comments, said that, given the large number of proposals put forward, structuring them into a resolution, principles and a strategy would prove challenging. Furthermore, the proposals did not fully take into account WHO's role as a body that both set international standards on health and provided support at the country level. Specific attention should be paid to the issue of cancer registries, which were not established in all countries, and to ensuring effective collaboration with the pharmaceutical industry in order to guarantee fair, equal and affordable access to cancer medicines and treatment. Urgent dialogue was required on how to address the growing gap between high-cost and affordable cancer medicines, and the significant difference in cancer mortality rates between countries in Africa and those in Europe and North America. Given the importance of the subject of cancer prevention and control, and the need to advance cancer control efforts, he proposed that Member States could hold further discussions on the draft resolution at the current session, with a view to reaching a consensus on the text.

The Board noted the report.

The CHAIRMAN took it that the Board wished to establish an informal drafting group to allow for further discussion on the draft resolution, with the aim of reaching a consensus.

(For continuation of the discussion, see the summary record of the eighteenth meeting, section 3.)

It was so agreed.

2. PROMOTING HEALTH THROUGH THE LIFE COURSE: Item 11 of the agenda

Progress in the implementation of the 2030 Agenda for Sustainable Development: Item 11.1 of the agenda (document EB140/32)

The representative of ALGERIA, speaking on behalf of the Member States of the African Region, welcomed the six proposed instruments of change and enabling factors contained in the report. Within that context, the first Regional Forum on Strengthening Health Systems for the Sustainable Development Goals and Universal Health Coverage had been held in Windhoek, Namibia, in December 2016. WHO should continue to play a leading role in health issues within the United Nations system, and ensure that its approach was in line with the objectives of WHO reform and the 2030 Agenda for Sustainable Development. Support for the implementation of the 2030 Agenda at the national level and for the broadening and strengthening of partnerships and the role of communities was essential. To that end, WHO should ensure the availability of sufficient financing, and Member States and all development partners should undertake to mobilize new and additional resources; consideration should be given to raising assessed contributions. Emphasis should be placed on technology transfer and the need to guarantee sustainable and adequate human and financial resources for regional and country offices, particularly in the African Region, in order to support the development and implementation of multisectoral action plans at the national level. Universal health coverage should be regarded as the cornerstone of the right to health.

The representative of MALTA, speaking on behalf of the European Union and its Member States, said that the candidate countries the former Yugoslav Republic of Macedonia, Montenegro and Serbia, the country of the stabilization and association process and potential candidate Bosnia and Herzegovina, as well as Ukraine, the Republic of Moldova and Georgia aligned themselves with her statement. Expressing support for the instruments of change and enabling factors, she requested clarity on how they would be used to guide and provide oversight on the Organization's work at the global, regional, national and local levels. The next report by the Secretariat should include details of the work already conducted on essential public health functions, as such work contributed to the 2030 Agenda and the attainment of universal health coverage. WHO should explain how it could add maximum value at the country level, including by supporting the implementation of key health strategies and programmes, such as the allocation of adequate human resources in country offices, and the introduction of standards, guidance and regulations. A greater focus on health priorities was needed, while ensuring that capacities were not spread too thinly.

She asked for clarification on how WHO would align the work to achieve the Sustainable Development Goals with the draft proposed programme budget 2018–2019 and called on the Secretariat to prepare a report on the status of current efforts in that regard for presentation to the Executive Board at its 141st session. In addition, greater detail should be provided on the impact of the actions agreed upon in resolution WHA69.11 (2016) on health in the 2030 Agenda for Sustainable Development, with respect to capacities and resources at all levels of the Organization.

The representative of THAILAND said that many countries with low gross domestic product per capita, including Thailand, had already proven that it was possible to attain universal health coverage, as called for in Sustainable Development Goal 3. Political commitment, the implementation of proposed actions, the building of sufficient local capacity for health systems research and management, and community engagement and ownership were vital for the attainment of that Goal. The International Health Partnership for Universal Health Coverage 2030 must focus on cooperation between developing countries in order to enhance health system capacities in those countries and in order to enable them to elaborate and implement country-specific policies and programmes, and should be driven by the need to take a horizontal approach.

The representative of the RUSSIAN FEDERATION said that her Government had adopted a number of measures to attain the health-related Sustainable Development Goals, including a health care development plan and an interdepartmental strategy for promoting healthy lifestyles and preventing and controlling noncommunicable diseases. As a result, infant and maternal mortality rates had decreased, and life expectancy had risen. Within the context of the 2030 Agenda, it was essential to undertake further joint activities on priority areas such as communicable and noncommunicable diseases, and road traffic crashes.

The representative of CANADA said that implementation of the 2030 Agenda would require horizontal, cross-disciplinary and multisectoral work both within WHO and with its health development partners. To ensure that no one was left behind, a gender equality and human-rights-based approach should be institutionalized into all of WHO's work. The Sustainable Development Goals should not be seen as an add-on to WHO's current activities, but should shape and inform its strategic plans, programmes and budget.

Her Government had established priorities and programmes that were closely aligned with the Goals, such as those on dealing with inequality and indigenous health. It was also collaborating with global partners to support the implementation of the health- and gender-related Goals in other countries. Canada's international development programmes and policies would focus on critical issues related to women and girls, such as their health rights and empowerment; concerted efforts in that area would be key to the achievement of the Goals. The Secretariat should continue to support Member States in meeting all the health-related targets, and promote multisectoral collaboration at the global and country levels, and throughout the Organization.

The representative of MEXICO said that implementation of the 2030 Agenda was a commitment on the part of the State, which involved the participation of various governmental institutions. Her Government was working to ensure interinstitutional collaboration and had developed intersectoral lines of action to achieve the Sustainable Development Goals. Although the support provided by WHO headquarters and regional offices for the implementation of the 2030 Agenda was welcome, it was necessary to strengthen interagency coordination, as well as coordination within WHO in terms of the drafting of implementation policies and the alignment of the programme budget.

The representative of NEPAL said that her Government had incorporated the health-related Sustainable Development Goals into its current health sector strategy. Greater technical support was required to overcome the considerable challenge of tackling the social and environmental issues posed by the Goals, particularly for developing countries such as Nepal. The Secretariat should develop a tool to assess the alignment of existing policies, strategies, frameworks and mechanisms to enable country and regional prioritization. Additional efforts were necessary to strengthen country capacities to monitor health outcomes, including the enhancement of civil registration and vital statistics systems, with an emphasis on cause-of-death data. The Secretariat should redefine WHO's role and capacity in the context of the Goals, and enhance the focus on areas such as human resources, health financing, leadership and coordination.

The representative of CHINA said that, as part of efforts to implement the health-related Sustainable Development Goals, her Government had adopted the Healthy China 2030 plan, and had hosted the eleventh G20 Summit, which had adopted an action plan to support the implementation of the 2030 Agenda. China had also collaborated with WHO to organize the 9th Global Conference on Health Promotion, whose outcomes included the adoption of the Shanghai Declaration on Promoting Health in the 2030 Agenda for Sustainable Development and the Shanghai Consensus on Healthy Cities 2016. WHO should continue to apply its comparative advantage as the main platform for the provision of technical support and transfer of skills to Member States. Her Government was willing to share its experience with WHO and other international entities.

The representative of VIET NAM said that although the 2030 Agenda for Sustainable Development was a global agenda, it could be achieved only if it was tailored to individual country contexts. The Secretariat should help Member States to define Sustainable Development Goal road maps in line with their capacities and resources. Implementation of the 2030 Agenda would afford an opportunity for WHO to enhance its country focus and ensure well-funded operations in countries. WHO should support national capacity-building for monitoring progress towards meeting the Goals and for developing robust information systems, and continue to lead efforts to encourage a multisectoral approach.

The representative of BAHRAIN said that, despite overall progress towards meeting the Millennium Development Goals in the Middle East, disparities persisted between countries, some of which had been affected by crises and conflicts that had undermined the quality of health care and threatened to jeopardize development progress. Implementation of the 2030 Agenda for Sustainable Development would open up new perspectives for health and development for all. Technical support and capacity-building were required to enable all Member States to assess their own progress towards the implementation of the 2030 Agenda and the attainment of the Sustainable Development Goals.

The representative of the UNITED STATES OF AMERICA expressed support for the alignment of WHO's work with the health targets of the 2030 Agenda for Sustainable Development. The six instruments of change and enabling factors presented in the Secretariat's report would serve as a valuable framework to guide the Secretariat's efforts to adapt and strengthen its processes to support Member States in implementing the 2030 Agenda. Recognizing the value of expanding access to good-quality essential health services for all across the life course, he said that household expenditure on health as a share of total household income was the best indicator to measure progress in that regard.

The representative of KUWAIT said that the 2030 Agenda for Sustainable Development was a tool to improve the lives and dignity of all. While Sustainable Development Goal 3 related directly to health, well-being was central to the achievement of all of the Goals. Social justice was also crucial. Environment and health were also inextricably linked. Efforts to meet the Goals were required at the country level, and in that regard the capacity of WHO country offices should be enhanced, and cooperation with regional offices and WHO headquarters should be increased. Sharing experiences and best practices between Member States would be to the benefit of all.

The representative of COLOMBIA said that the report's emphasis on the importance of an intersectoral approach was particularly welcome. Research and development would be essential to the successful implementation of the 2030 Agenda for Sustainable Development. Innovation should be encouraged, not only as a development issue, but also with a view to disseminating information and transferring knowledge with regard to health. The collection and analysis of good-quality data was particularly important. To achieve the Goals, efforts to mobilize human, financial and technological resources must be enhanced. Country-specific approaches would be required, tailored to the context in

each Member State. Continued cooperation must be ensured between WHO and other organizations of the United Nations system in the implementation of the 2030 Agenda, and, to that end, WHO should participate actively in the 2017 High-level Political Forum on Sustainable Development, where progress towards meeting Goal 3 would be reviewed.

The representative of the NETHERLANDS noted with satisfaction the acknowledgement that further steps could be taken to align the programme budget with the Sustainable Development Goals. The identification of the six instruments of change and enabling factors was welcome. While the impact of other sectors on health was a subject of frequent discussion, it should not be forgotten that health also had an impact on the work of other sectors. That impact should be leveraged to encourage intersectoral action and create more equal partnerships.

The representative of URUGUAY,¹ speaking also on behalf of Canada, Chile, Denmark, Estonia, Finland, Germany, Monaco, Mozambique, the Netherlands, Portugal, Sweden and Switzerland, said that non-discrimination and equality were at the heart of the 2030 Agenda for Sustainable Development. Violence against women, gender inequality, discrimination and other violations of human rights were related to poor health outcomes. Universal access to sexual and reproductive health and rights, embedded in comprehensive primary health services, was essential. The Sustainable Development Goals would not be achieved if women were unable to decide freely and responsibly if and when to have children, and without unfettered access to comprehensive, good-quality health services and information. Given the importance of those rights in the context of poverty alleviation and sustainable development, they should be considered as health interventions under the broader aims of Sustainable Development Goal 3. WHO, along with its partners, had a key role to play in assisting governments in delivering their commitments under the 2030 Agenda, and the incoming Director-General would be expected to demonstrate strong leadership in that regard.

The representative of BANGLADESH¹ said that WHO's efforts to promote an intersectoral approach to implementing the 2030 Agenda for Sustainable Development were welcome, in particular to promote coordination with the environment sector. The new national five-year health sector programme placed a strong emphasis on the health-related Sustainable Development Goals. Many countries were impeded in their efforts to achieve the Goals owing to a lack of understanding of the concept of universal health coverage, and in particular of the practicalities of how to mobilize resources and make the health sector more efficient in the face of shortages. The Secretariat should provide technical support to Member States, in particular developing countries, to help them achieve universal health coverage as key to meeting the Goals.

The representative of LITHUANIA¹ said that WHO's focus on an intersectoral approach to the implementation of the 2030 Agenda for Sustainable Development was welcome. Country ownership of the Sustainable Development Goals was crucial, and, as such, WHO should provide support at the country level, in particular by ensuring the adequate staffing of its country offices. A small number of key indicators should be identified to ensure the focused and effective monitoring of progress towards meeting the Goals, while minimizing the reporting burden on Member States. She also welcomed WHO's emphasis on the importance of research and development and innovation for sustainable development.

The representative of JAPAN¹ said that a multisectoral approach and strong leadership were essential for achieving the Sustainable Development Goals. Universal health coverage was also crucial and her Government had been making efforts to share its knowledge and experience in that regard, and

¹ Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.

to provide support through bilateral and multilateral engagement. Efforts were also being made to strengthen elements of health service provision that were key to development at the national level, including infectious disease control, health systems strengthening, women's health and poliomyelitis eradication.

The representative of PANAMA,¹ observing that 14 of the 17 Sustainable Development Goals were linked to health, said that WHO must engage in permanent and strong cooperation with all stakeholders to promote implementation of the 2030 Agenda for Sustainable Development. Member States must set technical and policy priorities in their national health plans, using a coordinated, intersectoral approach, and renewing their commitment to universal health coverage to achieve better health outcomes. To that end, her Government had incorporated the objectives of the national health strategy into policies across all sectors. Local engagement and joint and transparent action on the part of the international community were essential.

The representative of BRAZIL,¹ speaking on behalf of the Member States of the Region of the Americas, said that implementation of the 2030 Agenda constituted an opportunity to improve governance for health. WHO had a key role to play in that regard and in promoting the linkages between health and the broader development agenda and a harmonized approach across the three levels of the Organization, including by placing universal health coverage at the heart of efforts to achieve the Goals. It should therefore participate actively in the 2017 High-level Political Forum on Sustainable Development and the 2030 Agenda for Sustainable Development follow-up and review process. WHO should support national and regional efforts for the collection and analysis of reliable, transparent data, which was crucial for monitoring progress. The Member States of the Region remained committed to working with the Secretariat for change and to achieve health equity.

The representative of AUSTRALIA¹ welcomed WHO's focus on strengthening health systems and promoting universal health coverage as necessary prerequisites to attaining the Sustainable Development Goals. It was particularly crucial that vulnerable and disadvantaged populations were granted access to essential health services. The Secretariat should continue to support Member States by providing practical support tailored to country contexts and national priorities, contributing to the evidence base on health systems strengthening and shaping the global and regional health architecture to facilitate progress at the country level. Account should be taken of the limited capacity of some countries to undertake burdensome reporting and follow-up.

The representative of CHILE,¹ emphasizing the integrated nature of the Sustainable Development Goals, said that progress towards achievement of Goal 3 depended on the progress made towards all the other Goals. WHO should seize the opportunity provided by the 2030 Agenda for Sustainable Development to create better health systems and spotlight the fundamental role of health in development.

The representative of SWITZERLAND¹ said that enhanced mobilization efforts and the promotion of an intersectoral approach throughout the Organization were essential to achieving the objectives of the 2030 Agenda. She encouraged WHO to continue aligning its work with the policy orientations outlined in United Nations General Assembly resolution 71/243 (2016) on the quadrennial comprehensive policy review of operational activities for development of the United Nations system. Furthermore, WHO should develop robust partnerships and play a leading role in efforts to meet the Sustainable Development Goals.

¹ Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.

The representative of UNFPA said that Sustainable Development Goal 3 would be fully achieved only by addressing the social determinants of health and root causes of health challenges. Accordingly, a review of the implementation efforts for Goal 3 should underscore linkages with other Goals. The link between Goal 3 and Goal 5 (Achieve gender equality and empower all women and girls) was particularly relevant. Deeply rooted gender-based discrimination and violence, and other barriers to the autonomous decision-making of women and girls, must be tackled in order to achieve the goal of healthy lives for all.

The representative of the INTERNATIONAL PLANNED PARENTHOOD FEDERATION, speaking at the invitation of the CHAIRMAN, expressed concern that the link between Sustainable Development Goals 3 and 5 had not been adequately reflected in the report, particularly as gender inequality, discrimination and violence against women and girls were strongly related to poorer health outcomes. Sexual and reproductive health and rights, which had not been included in the report, should be considered as one of the broad aims of Goal 3.

The representative of the FDI WORLD DENTAL FEDERATION, speaking at the invitation of the CHAIRMAN, said that the Federation had recently launched a new oral health definition that focused on health, rather than disease, and addressed physiological, social and psychological attributes essential to well-being. He supported a Health in All policies approach, and agreed that responsibility for health in sustainable development extended well beyond the health sector.

The representative of the INTERNATIONAL COUNCIL OF NURSES, speaking at the invitation of the CHAIRMAN, said that WHO must use its unique position to capitalize on the opportunities to improve health in all 17 Sustainable Development Goals. Progress in achieving other health-related Goals should be measured and monitored. The successful application of the Framework of Engagement with Non-State Actors was crucial in order to strengthen partnerships, and the shift to people-centred primary health care should continue. Nurses should be actively involved in implementing health interventions in support of Goal 3, and governments should harness nurses' expertise and involve them in policy development.

The representative of the INTERNATIONAL ASSOCIATION FOR HOSPICE AND PALLIATIVE CARE INC., speaking at the invitation of the CHAIRMAN, expressed concern at the absence of a reference to palliative care in the report, in particular as there were currently no indicators to measure progress in that area within the 2030 Agenda for Sustainable Development. Welcoming the report's emphasis on equity, she said that access to palliative care was one of the most inequitable health issues in the world. She encouraged governments to include information on the integration of palliative care in their reports to the 2017 High-level Political Forum on Sustainable Development.

The representative of the INTERNATIONAL FEDERATION OF MEDICAL STUDENTS' ASSOCIATIONS, speaking at the invitation of the CHAIRMAN, said that civil society must be involved in the implementation of the Sustainable Development Goals. The importance of including young people in local, regional and international processes must be recognized, and he called for the strengthened engagement and involvement of young people in global health.

The representative of the WORLD HEART FEDERATION, speaking at the invitation of the CHAIRMAN, welcomed the efforts to create systems to ensure the centrality of health in the 2030 Agenda for Sustainable Development. Member States should facilitate intersectoral partnerships with relevant stakeholders and strengthen health systems in order to respond to the increasing burden of noncommunicable diseases. Noting the importance of adequate and sustained financial resources in addressing noncommunicable diseases, he highlighted the benefits of the taxation of unhealthy commodities, and the importance of sustained official development assistance for health, especially in

low-income countries. Such assistance must be related to the actual burden of disease, and he called for the disaggregation of spending, using noncommunicable disease-specific tracker codes.

The representative of the INTERNATIONAL SOCIETY OF NEPHROLOGY, speaking at the invitation of the CHAIRMAN, said that there were a number of structural risk factors that increased the risk of kidney disease, such as an absence of sustainable access to generic medication, poverty, the disempowerment of women and a lack of education. She welcomed the holistic, life-course approach embedded in the Sustainable Development Goals, and called for increased efforts to strengthen health systems, achieve universal health coverage and reduce the burden of kidney disease. Integrated strategies within comprehensive noncommunicable disease packages were needed for the early detection and prevention of kidney disease.

The representative of the ALLIANCE FOR HEALTH PROMOTION, speaking at the invitation of the CHAIRMAN, said that the Alliance had recently adopted a declaration and call to action stressing the importance of health promotion in achieving the Sustainable Development Goals and highlighting the importance of action such as educating and empowering communities to take responsibility for their own health, facilitating local community opportunities for information exchange and supporting structural change, along with others similar to those listed in the Secretariat's report. Civil society involvement was crucial for the implementation of international commitments, such as the Sustainable Development Goals.

The representative of THE SAVE THE CHILDREN FUND, speaking at the invitation of the CHAIRMAN, said that urgent action on universal health coverage was needed to achieve the targets of Sustainable Development Goal 3. Poor and marginalized communities would be left behind unless countries built national health systems to which all citizens contributed fairly and unless essential services were provided free of charge at the point of use to everyone. Noting that universal health coverage could not be attained through vertical donor health projects, he expressed support for the International Health Partnership for Universal Health Coverage 2030. He called for contributions to that initiative, which required significant funding and political backing.

The DIRECTOR (Strategy, Policy and Information) said that intersectoral action and health systems strengthening were essential elements in building universal health coverage. The realization of equity and sustainable finance, and the strengthening of scientific research and innovation, were some of the enabling factors essential to meeting the ambitious targets set. With regard to comments that the report had not given sufficient emphasis to such areas as essential public health functions, international partnerships, the role of non-State actors, and sexual and reproductive health and rights, he said that a more detailed report would be presented to the Seventieth World Health Assembly. Target 3.7 on universal access to sexual and reproductive health care services and the related target 5.6 on access to sexual and reproductive health and rights were vital components of the health-related Goals. Work was continuing to align the draft proposed programme budget 2018–2019 with the Sustainable Development Goals, and consideration would also be given to aligning the thirteenth general programme of work with the Goals. The 2017 High-level Political Forum on Sustainable Development would provide an opportunity to discuss health in the context of the other Sustainable Development Goals and to demonstrate the importance of intersectoral action by multiple stakeholders for improving health.

The DIRECTOR-GENERAL said that the Sustainable Development Goals offered an opportunity for the membership of WHO to take positive action to ensure that no one was left behind. Noting the centrality of women and health for sustainable development, she said that linkages between Goal 3 and other Goals had to be established. Multisectoral action and a Health in All policies approach were essential, and WHO would be pleased to work within the Framework of Engagement

with Non-State Actors. Consideration was being given to the opportunities that the Sustainable Development Goals offered to strengthen reform across all three levels of the Organization and to support countries in achieving the Goals based on their national development plans. The Goals would be reflected in the draft proposed programme budget 2018–2019, which was the last under the Twelfth General Programme of Work, 2014–2019. Discussions on the thirteenth general programme of work would begin during the current year, and she would brief the incoming Director-General on the importance of ensuring a smooth transition for the work on the health-related Sustainable Development Goals and of recognizing the need for financial sustainability in their implementation.

The Board noted the report.

The role of the health sector in the Strategic Approach to International Chemicals Management towards the 2020 goal and beyond: Item 11.2 of the agenda (document EB140/33)

The representative of CANADA, speaking on behalf of the Member States of the Region of the Americas, welcomed the draft road map to enhance health sector engagement in the Strategic Approach to International Chemicals Management towards the 2020 goal and beyond. The draft road map would constitute a useful tool for Member States. She welcomed the inclusion of broader actions allowing Member States to tailor implementation to their own contexts, and acknowledged that the achievement of the suggested outcomes would depend on factors such as capacity, resources, political commitment and international cooperation. Speaking on behalf of her own country, she said that Canada had been pleased to support the development of the draft road map through the secondment of a Canadian expert. The Executive Board should recommend the adoption by the Seventieth World Health Assembly of a decision endorsing the draft road map. She encouraged all health ministries to participate actively in the first intersessional meeting of the Strategic Approach to International Chemicals Management, to be held in Brasilia in February 2017.

The representative of the GAMBIA, speaking on behalf of the Member States of the African Region, said that, in general, chemicals management capacity in the Region remained low. He drew attention to the Libreville Declaration on Health and Environment in Africa, which provided an opportunity to align the policies of the health and environment sectors, establish strong institutional mechanisms for intersectoral collaboration, and better integrate the sound management of chemicals with other development goals. The draft road map would help Member States in identifying areas of primary focus for engagement and additional actions for chemicals management.

The representative of the PHILIPPINES said that key elements for consideration in the draft road map should include: developing more standardized methods to evaluate the effectiveness and impact of policies and progress; preventing ill-health caused by chemicals throughout the life course; building capabilities to deal with chemical incidents and emergencies and achieve core capacities under the International Health Regulations (2005); promoting alternatives to highly toxic and persistent chemicals; filling gaps in scientific knowledge; and elaborating globally harmonized methods for chemical risk assessment. He encouraged WHO and other international organizations to facilitate integrated financing through the Global Environment Facility and other funding sources to support the Strategic Approach to International Chemicals Management. The Secretariat should ensure effective collaboration among partners and stakeholders concerning legally binding agreements on chemicals and waste.

The representative of THAILAND expressed support for the four action areas of the draft road map and highlighted persistent challenges in the area of chemicals management, including the illegal sale of banned chemicals, the excessive use of pesticides, and new risks from nanoparticles. Chemical industries should respect the principles of human rights, with particular emphasis on safeguarding

human health and equity. She called for increased efforts to raise awareness of chemical safety and promote effective intersectoral action at the government level. She expressed concern that processes associated with the Strategic Approach to International Chemicals Management were being driven mainly by the public sector; that had not been the case with its predecessor, the Intergovernmental Forum on Chemical Safety, which had encouraged more equal participation from all partners and whose secretariat had been hosted by WHO.

The representative of the UNITED STATES OF AMERICA welcomed efforts to develop the draft road map for presentation to the Seventieth World Health Assembly. Collaboration, including between the environment and health sectors, was necessary to communicate information about the chemicals used in products and processes, and to coordinate efforts to assess public health risks and fill gaps in scientific knowledge. She encouraged efforts on sharing risk assessment issues specific to health – action supported by the WHO Chemical Risk Assessment Network – but recognized that risk assessment practices were often specific to national circumstances and priorities. She noted the actions required of the Secretariat and Member States under the draft road map to meet the goals of the Global Alliance to Eliminate Lead Paint, and looked forward to continued collaboration in strengthening the role of the health sector towards achieving the 2020 goal and relevant targets of the 2030 Agenda for Sustainable Development.

The representative of the RUSSIAN FEDERATION said that the Ministry of Health was playing an important role in implementing the updated national policy on chemicals management. The collection, analysis and presentation of objective scientific data on the possible health impacts of different chemical substances throughout their life cycles were essential for risk assessment, management decisions and appropriate policies. Such data should also be gathered in connection with “safe” alternatives to highly toxic and persistent chemicals in order to evaluate the risks to health and the environment. The draft road map required further refinement and she would be submitting proposed amendments to the text.

The representative of CHINA, recalling that his Government had already taken a number of steps to minimize the harmful effects of chemicals on health and the environment, said that some developing countries and countries in transition were hindered in their efforts to achieve the 2020 goal by a lack of financial and technical resources. The Secretariat should: help countries to implement actions in line with national circumstances; enhance efforts in the area of chemical management training and capacity building; focus more on developing countries with respect to the funding and promotion of clean and safe technology transfer; and strengthen cooperation with Member States.

The representative of URUGUAY,¹ recognizing the importance of a multisectoral response in the sound management of chemicals, said that the draft road map would foster the effective participation of the health sector in reducing risk, raising awareness and protecting the most vulnerable population groups from the harmful effects of chemical exposure. WHO should assume a leadership role at the international level by participating actively in the implementation of the health priorities in the Strategic Approach to International Chemicals Management and contributing to the relevant targets of the Goals of the 2030 Agenda for Sustainable Development. Once the draft road map had been finalized, the Secretariat should prepare a draft decision for adoption at the Seventieth World Health Assembly.

¹ Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.

The representative of GHANA¹ suggested that it might be necessary to develop an overarching international convention to address specifically health concerns related to international chemicals management. The illegal international trade in chemicals waste and toxins, which had not been covered in the draft road map, was one of the five objectives of the Strategic Approach to International Chemicals Management and should be addressed by WHO. Noting that low institutional and regulatory capacities in most developing countries posed a major challenge to international chemicals management, she encouraged technology transfer from developed countries to developing countries for capacity building.

The representative of ANGOLA,¹ expressing support for the draft road map, recalled that the Luanda Commitment, adopted by African health and environment ministers in 2010, had made chemicals management a top health and environmental priority for Africa. However, many countries experienced a shortage of resources to strengthen chemical safety regimes. There was a lack of coherence and synergy among relevant institutions, and limited, if any, data on many chemical products, so the implementation of relevant international policies remained uneven. International regulatory frameworks on chemicals must be strengthened to achieve the relevant targets of the Sustainable Development Goals. Developing countries must enjoy facilitated access to safer and more affordable alternatives to hazardous chemicals, and urgent attention must be given to the issue of illegal international trade in chemicals and hazardous waste. He sought clarification of the means provided for in the draft road map to facilitate access to the financial and other resources required for sound management of chemicals, and of the logical order for implementing the four action areas.

The representative of GERMANY,¹ welcoming the draft road map and its proposed actions, said that strengthening the role of the health sector in the Strategic Approach to International Chemicals Management was essential. She called on other sectors to follow WHO's example by demonstrating their commitment to the Strategic Approach, noting the importance of the sound management of chemicals throughout their life cycle for sustainable development. The Executive Board should recommend the adoption by the Seventieth World Health Assembly of a decision endorsing the draft road map.

The representative of CHILE¹ said that his country had taken a number of actions to promote the sound management of chemicals and hazardous waste, which included updating policies on storage and import, developing information systems, implementing the Globally Harmonized System of Classification and Labelling of Chemicals, and establishing a mechanism for evaluating environmental health risks. It was essential to consider the health impact of chemicals.

The representative of THE WORLD MEDICAL ASSOCIATION, INC., speaking at the invitation of the CHAIRMAN, said that it was vital to involve the health sector in the Strategic Approach to International Chemicals Management. The overall goal should be to ensure a continuous improvement in the safety of chemicals, not simply the safe management of hazardous chemicals. Clear and specific hazard reduction outcomes were required to assess progress. Health professionals should play a role in all four action areas, not just education and training, and be included in briefing sessions on chemicals and health at the national, regional and international levels.

The representative of the UNION FOR INTERNATIONAL CANCER CONTROL, speaking at the invitation of the CHAIRMAN, welcomed the development of the draft road map and its references to noncommunicable diseases. The Secretariat and Member States should strengthen understanding and public awareness of the links between chemicals and noncommunicable diseases, including

¹ Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.

through further research on risks and population exposure. They should also develop tools and provide guidance to strengthen national policies and disseminate good practice, and promote the participation of civil society in monitoring and implementation initiatives. Efforts should also be made to protect public health from conflicts of interest; actions to safeguard against industry interference should be incorporated into the draft road map. Governments should also promote the use of safer alternatives to commonly used highly hazardous chemicals.

The DIRECTOR (Department of Public Health, Environmental and Social Determinants), thanking representatives for their useful comments, said that intersectoral collaboration was vital for the sound management of chemicals and waste. She agreed that organizations of the United Nations system must adopt a coordinated and consistent approach in responding to countries' requests for funding from the Global Environment Facility and other sources, and noted that a coalition involving WHO, UNEP and WMO had been established in December 2016 to ensure the harmonization of relevant activities. Member States were invited to submit additional comments on the draft road map to the Secretariat by 10 February 2017. The Secretariat stood ready to produce a draft decision on the draft road map, and would be pleased to prepare a progress report concerning the health impact of waste for consideration by the Seventieth World Health Assembly.

The Board noted the report.

Global Strategy for Women's, Children's and Adolescents' Health (2016–2030): adolescents' health: Item 11.3 of the agenda (document EB140/34)

The representative of SWEDEN, also speaking on behalf of Denmark, Estonia, Finland, France, the Netherlands and the United Kingdom of Great Britain and Northern Ireland, said that efforts needed to be maximized to meet the needs and secure the rights of adolescents, including those concerning sexual and reproductive health. While the reporting on the 16 key indicators of the indicator and monitoring framework for the Global Strategy for Women's, Children's and Adolescents' Health (2016–2030) – which provided a snapshot of progress towards the survive, thrive and transform objectives of the Global Strategy – was welcome, important data were lacking, and the Secretariat should report on all 60 indicators in future reports. The lack of monitoring on the impact of unsafe abortion was a concern, and access to safe abortion services must be covered in future reports. Sexual and reproductive health care, information and services, including access to contraceptives, must be human rights-based, comprehensive and accessible to all. The human rights-based approach to health policies and programmes was far from realized, which meant that many women, children and adolescents continued to be denied their human rights. She fully supported the establishment of the High-level on the Health and Human Rights of Women, Children and Adolescents and looked forward to its recommendations. She would appreciate a technical briefing from the Secretariat on the High-level Working Group's work during the Seventieth World Health Assembly.

The representative of PAKISTAN said that the poor quality of data – which was a constant problem for developing countries – and inadequate health information systems would pose a major challenge to monitoring the Global Strategy for Women's, Children's and Adolescents' Health (2016–2030). His country recognized the importance of shaping healthy behaviour in adolescence and had made adolescent health one of its national health priorities. Another period that should be given greater attention in the context of the Global Strategy was the first 1000 days from conception, which were crucial in terms of neurodevelopment. Efficient and cost-effective interventions to promote early child development could have an important impact on cognitive and social and emotional development, but coverage was low.

The representative of the PHILIPPINES said that, given the importance of early childhood development as a foundation for life-long health, educational attainment and economic productivity, consideration should be given to cost-effective screening for newborns as a public health intervention strategy. WHO should play a key role in facilitating universal access to newborn health services.

The representative of the UNITED STATES OF AMERICA said that the maternal, newborn and child health indicators contained in the report, and the statistics on family planning and nutrition, masked significant inequities both within and among countries. Improvements to country health information systems and data quality were crucial in order to track progress on all indicators. Member States must continue to prioritize policies and programmes to promote equitable access to high-impact interventions and improve quality of services to accelerate progress on ending preventable child and maternal deaths. A strong focus on the health and well-being of adolescents, particularly girls, was not only critical to achieving the Sustainable Development Goals and the objectives of the Global Strategy, but could also have a lasting impact on the lives of their families and communities.

The representative of NEPAL said that action to address adolescents' health would have a long-term impact on the overall health of populations and play a crucial role in achieving the Sustainable Development Goals. The South-East Asia Region had updated its regional implementation guidance on adolescent health in line with the Global Strategy and the Global Accelerated Action for the Health of Adolescents implementation guidance. Modern information and communication technologies could be used as a tool to address the health needs of adolescents and promote healthy lifestyles.

The representative of the NETHERLANDS said that his Government had recently launched a global, multistakeholder fundraising initiative known as "She decides". That initiative sought to rally financial support to sustain and, if possible, increase funding for family planning, sexual education and health care, including access to safe abortion and contraceptives in support of the right of women and girls to decide, freely and for themselves, whether and when to have children. He thanked those Member States that had already joined the initiative, or had expressed an interest in doing so, and encouraged others to join.

The meeting rose at 17:30.

= = =