

Health in the post 2015 development agenda

Draft resolution reflecting the outcome of a drafting group

The Sixty-seventh World Health Assembly,

PP1 Having considered the report on Monitoring the achievement of the health-related Millennium Development Goals. Health in the post-2015 development agenda;¹

PP2 Reaffirming the Constitution of the World Health Organization, which states that the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social conditions;

PP3 Reaffirming also the principles of the United Nations Millennium Declaration adopted by the United Nations General Assembly in resolution 55/2, including human dignity, equality and equity, and stressing the need for their reflection in the post-2015 development agenda; *(taken from WHA66.11)*

PP34 Recognizing that health is ~~central to human development as both a contributor~~ a precondition for and an outcome and **indicator of all dimensions of sustainable** that universal health coverage is an important measure of development; *(taken from para 138 of A/RES/66/288)*

PP45 Recalling resolution WHA66.11 on health in the post-2015 development agenda, which urged Member States to ensure that health is central to the post-2015 UN development agenda;

(PP56) Reaffirming the need to sustain current achievements and accelerate efforts in those countries where more rapid progress is needed towards achievement of the health-related Millennium Development Goals;

PP97 Cognizant also of the burden of **maternal, newborn and child morbidity and mortality**, communicable diseases, **including HIV/AIDS, tuberculosis, malaria** and neglected tropical diseases and the rising burden of non-communicable diseases and injuries;

PP68 Acknowledging that universal health coverage implies that all people have access without discrimination to nationally determined sets of the needed promotive, preventive, curative, palliative and rehabilitative essential health services and essential, safe, affordable, effective and quality medicines, while ensuring that the use of these services does not expose the users to financial hardship

¹ Document A67/20.

with a special emphasis on the poor, vulnerable and marginalized segments of the population; (para 10 of A/RES/67/81);

PP9 Recognising that the provision of universal health coverage requires full and effective implementation of the Beijing Platform for Action,⁹ the Programme of Action of the International Conference on Population and Development⁶ and the outcomes of their review conferences, including the commitments relating to sexual and reproductive health and the promotion and protection of all human rights in this context, and emphasizes the need for the provision of universal access to reproductive health, including family planning and sexual health, and the integration of reproductive health into national strategies and programmes; (taken from para 11 of A/RES/67/81)

PP10 Recognising the importance of strengthening health systems and building capacities for broad public health measures, health protection and addressing determinants of health towards attaining equitable universal coverage; (wording partially based on paras 9 and 10 of A/RES/67/81)

PP711 Emphasizing that policies in sectors other than health have a significant impact on health outcomes, hence the need to identify synergies between policy objectives in the health and other sectors through a whole-of-government, whole-of-society and Health in All Policies approach the post-2015 development agenda;

PP812 Appreciating the need for countries to uphold the principles of country ownership and the global community to respect them;

PP13 Recognising that the multi-sectoral nature of achieving health improvement means that progress monitoring must include measuring health systems performance as well as health outcomes that capture mortality, morbidity and disability.

PP104 Recalling resolution WHA63.16 on the WHO Global Code of Practice on the International Recruitment of Health Personnel, which recognized that addressing present and expected shortages in the health workforce is crucial to protecting global health and implementing the post 2015 development agenda, **as well as other previous related WHA resolutions, and welcoming efforts made to strengthen the health workforce including the commitments made by Member States in the Recife Declaration on Human Resources for Health: renewed commitments towards Universal Health Coverage**

OP1 URGES Member States¹

(~~42~~1) to engage actively in discussions on the post-2015 development agenda, respecting the process established by the United Nations General Assembly;

(~~42~~2) to call for the full realization of the right to the enjoyment of the highest attainable standard of physical and mental health and to ensure that health ~~remains~~ is central to the post-2015 development agenda;

¹ And, where applicable, regional economic integration organisations.

~~(2&53)~~ to ensure that the post 2015 development agenda **sustains and builds on accelerated progress towards the health-related MDGs on nutrition, child, maternal, sexual and reproductive health, HIV, tuberculosis and malaria (currently MDGs 1a, 4, 5, 5b and 6), while also addressing the burden of neglected tropical diseases (NTDs);**

~~(4) to recognize universal health coverage as a means to ensure comprehensive health services and financial risk protection as core principle of the health component in the post 2015 development agenda;~~

(4) to recognize that additional attention needs to be paid to newborn health in addressing the unfinished agenda of child health;

(5) to incorporate action to reduce preventable and avoidable burden of mortality, morbidity and disability related to non-communicable diseases, cancers and injuries while also promoting mental health;

~~(46)~~ to recognize **the importance of universal health coverage (incorporating universal access to prevention, promotion, treatment, rehabilitation and palliation)** and financial risk protection as a core principle of the health component in the post-2015 development agenda;

(7) to call for a rights-based approach as a pre-condition for equitable and inclusive sustainable development;

~~(98)~~ to honour their commitments **towards national and international health financing in order to fully implement the post 2015 development agenda;**

~~(109)~~ to **strengthen international cooperation in support of national, regional and global health plans and** to ensure that external funds for specific health interventions are aligned with the national health priorities in the country by fully adhering the principles of aid effectiveness, and that they contribute in a predictable way to the sustainability of financing;

(10) to ensure that regular assessment of progress towards targets and accountability are integral elements of the post-2015 development agenda, including the strengthening of civil registration and vital statistics and health information systems, with disaggregated data to monitor equity;

(11) to sustain and accelerate progress on nutrition, child (particularly newborn health), maternal, sexual and reproductive health, HIV, tuberculosis and malaria, and neglected tropical diseases where appropriate;

~~(312)~~ to strengthen national strategies and plans for the ~~prevention and control for the prevention and control of non-communicable diseases including~~ **cancers, injuries and mental disorders, through the appropriate mix of health promotion, prevention, treatment, rehabilitation and palliation and Neglected Tropical Diseases;**

~~(6&713)~~ to develop ~~effective and efficient health financing systems so as raise adequate funds for health, promote risk pooling among the population prepayment for health services and strategic purchasing in order to~~ **and maintain strong health systems capable of assuring coverage and access with needed services with financial risk protection, including access to quality, safe and affordable health products, medicines, vaccines and diagnostics and**

other medical devices, motivated and trained human resources, appropriate infrastructure, and sustainable financing systems which avoid significant direct payments at the point of delivery and reduce catastrophic health expenditures;

(814) to adopt a multi-sectoral approach to address the social, environmental and economic determinants of health within sectors including, as appropriate, through the Health in All Policies approach, with a view to reducing health inequities and enabling sustainable development;

~~(115) to adopt a systematic and coordinated approach to support and adequately fund research aimed at supporting the implementation of the post-2015 development agenda~~ **to strengthen monitoring of progress and accountability through well-functioning health information systems including birth and death registration and research;**

~~(13) to consider the inclusion of relevant health targets and indicators under relevant sustainable development goals for the post-2015 development agenda;~~

OP2 REQUESTS the Director-General:

(1) to continue active engagement with on-going discussions on the post-2015 development agenda, working with the United Nations Secretary-General, to ensure the centrality of health in all relevant processes;

(2) to continue to provide support to countries, upon request, in articulating their positions on health in the post-2015 development agenda;

(3) to report to the Assembly every two years on progress on the implementation of the post 2015 development agenda as it related to health.

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