



WORLD HEALTH ORGANIZATION

FIFTY-EIGHTH WORLD HEALTH ASSEMBLY

A58/63
25 May 2005

Fifth report of Committee B

Committee B held its tenth meeting on 25 May 2005 under the chairmanship of Dr José Pereira Miguel (Portugal).

It was decided to recommend to the Fifty-eighth World Health Assembly the adoption of the attached resolutions relating to the following agenda items:

13. Technical and health matters

13.2 Achievement of health-related Millennium Development Goals

Two resolutions entitled:

- Accelerating the achievement of the internationally agreed health-related development goals including those contained in the Millennium Declaration, as amended
- Working towards universal coverage of maternal, newborn and child health interventions, as amended

Agenda item 13.2

Accelerating the achievement of the internationally agreed health-related development goals including those contained in the Millennium Declaration

The Fifty-eighth World Health Assembly,

Having considered the report on achievement of the health-related Millennium Development Goals;¹

Recalling the commitments made in the United Nations Millennium Declaration adopted by the United Nations General Assembly in September 2000² and the United Nations Secretary-General's road map towards its implementation;³

Recognizing that the internationally agreed development goals including all those contained in the United Nations Millennium Declaration, especially the health-related goals, mark a turning point in international development, represent a powerful consensus and commitment between rich and poor nations, and set clear priorities for action and benchmarks against which to measure progress;

Recognizing that health is central to achievement of the internationally agreed development goals, including all those contained in the United Nations Millennium Declaration, and that such goals create an opportunity to position health as a core part of the development agenda and to raise political commitment and financial resources for the sector;

Noting with concern that current trends suggest that many low-income countries will not reach the internationally agreed health-related development goals, including those contained in the United Nations Millennium Declaration, that many countries may achieve them only among their richer population groups, broadening the inequalities, and that urgent action is needed;

Recognizing the importance of using applicable human-rights instruments in efforts to achieve the internationally agreed health-related development goals, including those contained in the Millennium Declaration;

Acknowledging that rapid progress will require political commitment and a scaling-up of more efficient and effective strategies and actions, greater investment of financial resources, adequately staffed and effective health systems, capacity-building in the public and private sectors, a clear focus on equity in access and outcomes, and collective action within and between countries;

Recognizing that internationally agreed development goals, including those contained in the United Nations Millennium Declaration, are complementary and synergistic and cannot be achieved in isolation as health is central to the achievement of non-health goals and their attainment will affect

¹ Document A58/5.

² United Nations General Assembly resolution 55/2.

³ Document A/56/326.

health targets, including those for HIV/AIDS, tuberculosis and malaria, and other targets set by the Health Assembly;

Recalling that at its Thirty-eighth session (April 2005) the Commission on Population and Development emphasized: “the importance of integrating the goal of universal access to reproductive health by 2015 set at the International Conference on Population and Development into strategies to attain the internationally agreed development goals, including those contained in the Millennium Declaration, in particular those related to improving maternal health, reducing infant and child mortality, promoting gender equality, combating HIV/AIDS, eradicating poverty and achieving universal access to primary education”;¹

Recognizing WHO’s leadership with the World Bank on the High-Level Forum on the Health MDGs (Abuja, 2004) and the impact this has had in catalysing action and progress on the internationally agreed health-related development goals, including those contained in the United Nations Millennium Declaration;

Recalling resolution WHA55.19 which calls on the international donor community to increase its assistance to developing countries in the health sector; and which encourages developed countries that have not done so to make concrete efforts towards the target of 0.7% of gross national product (GNP) as official development assistance to developing countries, and 0.15% to 0.2% of GNP of developed countries to least developed countries, as reconfirmed at the Third United Nations Conference on the Least Development Countries (Brussels, 2001), and encourages developing countries to build on progress made in ensuring that official development assistance is used effectively to help achieve development goals and targets;

Noting that the Heads of State and Government of the Organization of African Unity at the African Summit on HIV/AIDS, Tuberculosis and Other Related Infectious Diseases (Abuja, 2001) pledged to set a target of allocating at least 15% of their annual budget to the improvement of the health sector;²

Noting that many countries have cooperation and partnership mechanisms with civil-society, including nongovernmental organizations, the broader community, religious organizations and the private sector which cover all levels of the administration (national, regional and district);

Recognizing the importance of action and empowerment for gender equality in bringing about more equitable and effective approaches to national development,

1. REQUESTS Member States:

(1) to reaffirm the internationally agreed health-related development goals, including those for health development contained in the United Nations Millennium Declaration;

(2) to develop and implement in the context of existing policy and planning processes nationally relevant “road-maps” on the achievement of the internationally agreed health-related

¹ Draft resolution E/CN.9/2005/L.5, 11 April 2005, paragraph 3.

² Abuja Declaration on HIV/AIDS, Tuberculosis and Other Related Infectious Diseases, paragraph 26.

development goals, including those contained in the United Nations Millennium Declaration, which incorporate the following actions to accelerate progress:

- (a) prioritizing the internationally agreed health-related development goals, including those contained in the United Nations Millennium Declaration, within national development and health plans, including where appropriate Poverty Reduction Strategy Papers, plans that are led by national governments with support from development partners and civil society, and take into account the overall health priorities of the countries concerned; and ensuring that priorities for health and poverty reduction are reflected in associated budgets and expenditure frameworks;
- (b) raising the level of funding for effective interventions that address health conditions relevant to the achievement of the internationally agreed health-related development goals, including those contained in the Millennium Declaration;
- (c) implementing related Health Assembly resolutions, including resolution WHA56.21 on child and adolescent health, resolution WHA57.12 on reproductive health and resolution WHA57.14 on HIV/AIDS, which are components of a global partnership for development and crucial for attainment of the internationally agreed health-related development goals, including those contained in the Millennium Declaration, and the goal of universal access to reproductive health by 2015 set at the United Nations International Conference on Population and Development (Cairo, 1994); and establishing or sustaining national monitoring mechanisms for measuring progress towards achievement of the agreed goals;
- (d) strengthening collaboration and partnership among relevant sectors, including ministries of finance, and with the international financial institutions, on investments in the health sector with a view to increasing the share of overall government resources allocated to health and, where appropriate, to revise ceilings on public-sector spending to allow for increases in health spending financed from development assistance;
- (e) strengthening the core functions of public or private components of the health system, as appropriate, in line with the Declaration of Alma Ata (1978) so that they contribute to the delivery of better and more equitable health outcomes in areas relevant to the internationally agreed health-related development goals, including those contained in the Millennium Declaration;
- (f) improving health and nutrition information systems, including strengthening of vital registration systems, supported by critical health-systems research, in order to inform policy-making, while avoiding an increase in the reporting burden and emphasizing the need for data disaggregated by age, socioeconomic quintile, sex and ethnicity; and to strengthen monitoring and evaluation systems that promote accountability, empowerment and participation;
- (g) to ensure that health and development policies are underpinned by a gender analysis and to strive for gender equality and women's empowerment;
- (h) to strengthen equity and nondiscrimination in development efforts and to facilitate the empowerment and participation of the population in decision-making processes;

2. CALLS on developed and developing countries to address with shared responsibility the growing crisis of human resources for health; and on developed countries to strive towards self-sufficiency without adversely impacting on the human resource situation in developing countries and to provide support to developing countries to achieve self-sufficiency through planning, training, recruitment and retention of all categories of health professionals;
3. URGES developed countries that have not done so to make concrete efforts towards the target of 0.7% of gross national product (GNP) as official development association to developing countries, and 0.15% to 0.2% of GNP of developed countries to least developed countries, as reconfirmed at the Third United Nations Conference on the Least Development Countries (Brussels, 2001);
4. URGES developing countries to continue to build on progress made in ensuring that official development assistance is used effectively to help achieve development goals and targets;
5. URGES those countries which are Members of the Organization of African Unity to fulfil their commitment made at the African Summit on HIV/AIDS, Tuberculosis and Other Related Infectious Diseases (Abuja, 2001) to set a target of allocating at least 15% of annual budget to the improvement of the health sector;¹
6. REQUESTS the Director-General:
 - (1) to ensure that priority actions to support Member States in accelerating progress towards the internationally agreed health-related goals, including those contained in the Millennium Declaration, are reflected in the Programme budget 2006-2007, in future budgets, and in the Eleventh General Programme of Work; and to develop a coherent and adequately resourced strategy, with clear goals and deliverable products, for advancing work in the areas mentioned below, and to report to the Health Assembly on progress;
 - (2) to provide support to Member States, at their request:
 - (a) to develop outcome-oriented and adequately resourced policies and strategies for health development;
 - (b) to strengthen the capacity of public and private health systems, as appropriate, to deliver equitable outcomes on a national scale, through measures that require interdepartmental collaboration, and to convene and support nationally led teams that work with all local actors in order to facilitate access to all sources of financing; develop the education, recruitment and retention of health professionals; integrate community health workers into overall systems; and implement resolution WHA57.19 on international migration of health personnel;
 - (c) to identify vulnerable groups with specific health needs and to devise appropriate programmes that deliver equitable outcomes;
 - (d) to strengthen intersectoral linkages to address the social and environmental determinants of health;

¹ Abuja Declaration on HIV/AIDS, Tuberculosis and Other Related Infectious Diseases, paragraph 26.

- (e) to engage in technical and policy dialogue with international financial institutions, including on the impact of their policies on health-related needs; to lead harmonization and coordination processes among development partners in health; and to ensure alignment of support around country priorities;
 - (f) to use appropriate monitoring and evaluation frameworks, including those related to universal access to reproductive health, that measure progress towards the internationally agreed health-related development goals, including those contained in the Millennium Declaration, in order to determine cost-effective programmes that achieve better health and nutrition outcomes without adding to the reporting burden in countries;
 - (g) to promote research that guides successful implementation of activities to achieve internationally agreed health-related development goals, including those contained in the Millennium Declaration;
- (3) to ensure that due attention is devoted to the particular health problems of countries emerging from conflict and other forms of crisis;
- (4) to support actively and contribute to, in the context of reform of the United Nations system, heightening the impact and effectiveness of the United Nations Country Teams; to simplify further, harmonize and coordinate procedures within the United Nations system and with other partners; and to improve alignment of the United Nations inputs with national priorities;¹
- (5) to promote efforts that increase coherence and coordination in development assistance for health so that resources effectively strengthen broad-based health systems;
- (6) to participate appropriately in the high-level plenary of the United Nations General Assembly on the outcome of the Millennium Summit (September 2005).

¹ See also resolution WHA58.25.

ANNEX



Health in the Millennium Development Goals

Millennium Development Goals, targets and indicators related to health

Health targets		Health indicators
GOAL 1: ERADICATE EXTREME POVERTY AND HUNGER		
Target 1	Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day	
Target 2	Halve, between 1990 and 2015, the proportion of people who suffer from hunger	4. Prevalence of underweight children under five years of age 5. Proportion of population below minimum level of dietary energy consumption
GOAL 2: ACHIEVE UNIVERSAL PRIMARY EDUCATION		
Target 3	Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling	
GOAL 3: PROMOTE GENDER EQUALITY AND EMPOWER WOMEN		
Target 4	Eliminate gender disparity in primary and secondary education, preferably by 2005, and at all levels of education no later than 2015	
GOAL 4: REDUCE CHILD MORTALITY		
Target 5	Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate	13. Under-five mortality rate 14. Infant mortality rate 15. Proportion of one-year-old children immunized against measles
GOAL 5: IMPROVE MATERNAL HEALTH		
Target 6	Reduce by three-quarters, between 1990 and 2015, the maternal mortality ratio	16. Maternal mortality ratio 17. Proportion of births attended by skilled health personnel
GOAL 6: COMBAT HIV/AIDS, MALARIA AND OTHER DISEASES		
Target 7	Have halted by 2015 and begun to reverse the spread of HIV/AIDS	18. HIV prevalence among pregnant women aged 15-24 years 19. Condom use rate of the contraceptive prevalence rate 20. Ratio of school attendance of orphans to school attendance of non-orphans aged 10-14 years
Target 8	Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases	21. Prevalence and death rates associated with malaria 22. Proportion of population in malaria-risk areas using effective malaria prevention and treatment measures 23. Prevalence and death rates associated with tuberculosis 24. Proportion of tuberculosis cases detected and cured under DOTS (directly observed treatment short-course)
GOAL 7: ENSURE ENVIRONMENTAL SUSTAINABILITY		
Target 9	Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources	29. Proportion of population using solid fuels
Target 10	Halve by 2015 the proportion of people without sustainable access to safe drinking-water and sanitation	30. Proportion of population with sustainable access to an improved water source, urban and rural
Target 11	By 2020 to have achieved a significant improvement in the lives of at least 100 million slum dwellers	31. Proportion of population with access to improved sanitation, urban and rural
GOAL 8: DEVELOP A GLOBAL PARTNERSHIP FOR DEVELOPMENT		
Target 12	Develop further an open, rule-based, predictable, non-discriminatory trading and financial system	
Target 13	Address the special needs of the least developed countries	
Target 14	Address the special needs of landlocked countries and small island developing states	
Target 15	Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long term	
Target 16	In cooperation with developing countries, develop and implement strategies for decent and productive work for youth	
Target 17	In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries	46. Proportion of population with access to affordable essential drugs on a sustainable basis
Target 18	In cooperation with the private sector, make available the benefits of new technologies, especially information and communications	

Sources: "Implementation of the United Nations Millennium Declaration", Report of the Secretary-General, A/57/270 (31 July 2002), first annual report based on the "Road map towards the implementation of the United Nations Millennium Declaration", Report of the Secretary-General, A/56/326 (6 September 2001); United Nations Statistics Division, Millennium Indicators Database, verified in July 2004; World Health Organization.

Agenda item 13.2

Working towards universal coverage of maternal, newborn and child health interventions

The Fifty-eighth World Health Assembly,

Concerned by the high level of maternal, newborn and child morbidity and mortality in the world, by the fact that the maternal mortality ratio worldwide has not changed substantially over the past decade, by the slow pace of progress in improving maternal, newborn and child health, by the growing inequalities between and within Member States, and by the continuing need to address gender inequalities;

Alarmed by the inadequate resources for maternal, newborn and child health and by the lack of appreciation of the great impact of maternal, newborn and child health in sustaining socioeconomic development;

Concerned by the inadequacy of vital registration and other data required to produce accurate information on maternal, infant and under-five mortality, on their breakdown by socioeconomic groups, on income quintiles, and on urban rural differentials;

Mindful that cost-effective interventions exist to meet the health needs of women, newborns and children;

Aware that care needs to be provided as a seamless continuum both throughout the life-cycle and spanning individuals, families, communities and the various levels of the health system, including reproductive health care, thus creating an integrated approach to maternal, newborn and child health;

Convinced that only through coordinated and concerted action and unprecedented resource mobilization at international and national levels will it be possible to deal with the global crisis that currently affects the health workforce and strengthen health systems in order to end the exclusion of the poor, the marginalized and the underserved;

Welcoming the increased commitment of the international community and WHO to the health of women, newborns and children, and to meeting the internationally agreed development goals, including those contained in the Millennium Declaration;

Recalling resolution WHA56.21 welcoming the strategic directions for child and adolescent health and development, resolution WHA57.12 adopting the strategy to accelerate progress towards the attainment of international development goals and targets related to reproductive health and aware of the need for stepping up efforts to achieve international goals for reproductive, maternal, newborn and child health and development, and resolution WHA55.19 which calls for an increase in investment in health in developing countries;

Recalling the goals and objectives of the World Summit for Children (New York, 1990), the Programme of Action of the International Conference on Population and Development (Cairo, 1994), and the Beijing Platform for Action of the Fourth World Conference on Women (Beijing, 1995) and their respective follow-ups; the United Nations General Assembly special session on HIV/AIDS

(New York, 2001); the United Nations General Assembly special session on children (New York, 2002);

Recalling also the Delhi Declaration on Maternal, Newborn and Child Health (April 2005);

Welcoming *The world health report 2005: Making every mother and child count* and the guidance offered by the associated policy briefs,

1. URGES Member States:

- (1) to commit resources and to accelerate national action towards universal access and coverage with maternal, newborn and child health interventions, through reproductive health care;
- (2) to establish or sustain national and international targets, and to establish monitoring mechanisms for measuring progress towards the achievement of agreed goals, particularly the target on universal access to reproductive health by 2015;
- (3) to involve all key stakeholders, including civil society organizations and communities, in setting priorities, developing plans and programmes, measuring progress and evaluating impact;
- (4) to improve the quality and completeness of vital registration and other relevant household-survey data, where appropriate, to reflect mortality differentials among mothers, infants and under-fives;
- (5) to adopt and implement, in line with international agreements, the legal and regulatory frameworks to promote gender equality and protect the rights of women and children, including equal access to health care, with special attention for those thus far excluded, particularly the poor, the marginalized and the underserved;
- (6) to ensure that national strategic-planning and budgetary processes include interventions at political and programme level to strengthen health-care delivery systems for effective and rapid advance towards universal coverage, including:
 - (a) realigning the content of programmes for maternal, newborn and child health and nutrition, incorporating their management structures and services, and embedding them in core development processes for health systems in order to ensure that reproductive health care is fully integrated;
 - (b) addressing the workforce crisis by drawing up national plans for development of human resources for health that include financial incentives and mechanisms for equitable deployment and retention, especially for rural primary care, so as to give the poor better access to care;
 - (c) building realistic scenarios, with their costing and budget implications, for scaling up the health systems required for delivering maternal, newborn and child health care;
 - (d) building the institutional capacity to manage appropriate financing reform, inter alia a move from user fees to prepayment mechanisms and pooling systems,

including tax-based and insurance systems, in order to achieve the goal of universal access and financial and social protection;

(e) building a national consensus around the need for moving towards universal coverage, with mechanisms for predictable, sustained and increased funding; around maternal, newborn and child health at the core of the citizen's health care, including entitlements where appropriate; and around the human-resources-for-health crisis as a national priority;

(f) creating partnerships between government, civil-society organizations, private sector entities and development agencies to maintain the political momentum, overcome resistance to change, and mobilize resources;

(g) establishing participation mechanisms for not-for-profit civil-society organizations and religious organizations in order to strengthen accountability mechanisms and systems of checks and balances;

2. REQUESTS the Director-General:

(1) to strengthen the coordination, collaboration and synergies of WHO's programmes on reproductive, maternal, newborn and child health, its programmes on malaria, HIV/AIDS, tuberculosis and health promotion, and its programme on health systems development, in support of countries;

(2) to ensure that WHO fully participates in harmonization efforts within the United Nations system, supports efforts of Member States to establish policy coherence and synergies between and within national and international initiatives in maternal, newborn and child health, particularly between those taken by partners within the United Nations system and others;

(3) to support the efforts of national health authorities to ensure that reproductive, maternal, newborn and child health are systematically included in frameworks for socioeconomic development and plans to ensure sustainability;

(4) to further collaborate with relevant partners to produce information on health status inequalities, such as through UNICEF's Multiple Indicator Cluster Surveys or Demographic and Health Surveys, in order to inform appropriate and specific policy actions by all concerned partners;

(5) to intensify technical support to Member States for developing their institutional capacity for achieving international goals and targets through universal access to, and coverage of, reproductive, maternal, newborn and child health programmes, in the context of strengthening health systems;

(6) to mobilize the international community so that it commits the additional resources required to achieving universal access to, and coverage of, reproductive, maternal, newborn and child health care;

(7) to declare an annual world maternal, newborn, and child health day in order to ensure continued global visibility of the reproductive, maternal, newborn and child health agenda and to provide an opportunity for countries and the international community to reassert their commitment to this issue;

(8) to report biennially to the Health Assembly on progress towards reducing exclusion and achieving universal access to, and coverage of, reproductive, maternal, newborn and child health care, and on the support provided by WHO to Member States to attain this goal.

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