

Well-being and health promotion

The Seventy-fifth World Health Assembly,

Having considered the consolidated report by the Director-General;¹

Considering the vast implications that current economic, environmental and social conditions have on the health of societies, communities and people and the potential that health promotion, health protection and disease prevention have on enhancing the capacities of people to protect and improve their health and well-being, in addition to health and social measures by governments;

Reaffirming that health is a state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity;

Reaffirming also, as enshrined in the WHO Constitution, 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 condition;

Further reaffirming that the objective of WHO shall be the attainment by all peoples of the highest possible level of health;

Reaffirming that governments have a responsibility for the health of their peoples, which can be fulfilled only by the provision of adequate health and social measures;

Recalling United Nations General Assembly resolution 70/1 (2015) on transforming our world: the 2030 Agenda for Sustainable Development, which identified as part of the new Agenda, that to promote physical and mental health and well-being, and to extend life expectancy for all, we must achieve universal health coverage and access to quality health care, and affirmed that no one must be left behind;

Recalling also United Nations General Assembly resolution 67/81 (2012), which recognized that effective and financially sustainable implementation of universal health coverage is based on a resilient and responsive health system that provides comprehensive primary health care services, with extensive geographical coverage, including in remote and rural areas, and with a special emphasis on access to populations most in need, and has an adequate skilled, well-trained and motivated workforce, as well as capacities for broad public health measures, health protection and addressing determinants of health through policies across sectors, including promoting the health literacy of the population;

Further recalling the 2008 report of the Commission on Social Determinants of Health and the three overarching recommendations of the Commission: to improve daily living conditions, to tackle

¹ Document A75/10 Rev.1 (item 18.2, WHO's implementation framework for Billion 3).

the inequitable distribution of power, money and resources; and to measure and understand the problem and assess the impact of action;

Recalling also the Thirteenth General Programme of Work, 2019–2025 and the target of one billion people enjoying better health and well-being by 2025;

Building on the legacy of the Ottawa Charter for Health Promotion, 1986 and noting the outcomes of other previous global conferences on health promotion;

Acknowledging that the health and well-being of the population is associated with peace, security, stability, improved productivity and economic growth and that socially and economically unfair and largely avoidable inequities within and between countries may have a reverse impact;

Noting that health is produced and that it can be endangered in all environments of society, which is why promoting health and well-being requires environmentally and financially sustainable action and investment by multiple sectors of government and input from wider society, including multisectoral engagement with social and economic actors, from individuals, communities, nongovernmental organizations and the private sector;

Acknowledging that successful promotion of health and well-being builds on complementary and essential approaches, including: a Health in All Policies approach, emphasizing that public policies and decisions made in policy areas other than health impact citizens' health and its determinants; a whole-of-government approach, referring to the joint activities performed by diverse ministries, public administrations and public agencies in order to provide common solutions; as well as a whole-of-society approach, stressing the role of participatory governance and partnerships with different non-State actors at all levels, including the private sector, nongovernmental organizations, communities and individuals;

Acknowledging also that the promotion of health and well-being can address determinants of health and/or risk factors at population, community, specific group or individual levels and in different contexts, taking into account the specific needs of people in vulnerable situations, including the removal of attitudinal, institutional and environmental barriers encountered by persons with disabilities;

Noting the increasing impact on premature mortality from noncommunicable diseases, the continued burden caused by communicable diseases and the new demands they both put on governments in the protection and promotion of health in order to achieve health equity and ensuring universal health coverage;

Emphasizing that in order to have capacity for health-informed decisions and health-seeking behaviours individuals must have achieved an appropriate level of health literacy;

Stressing that the development of interventions at population, community and individual levels to further increase health literacy and improve health outcomes must be guided by evidence, in particular from social and behavioural science, with consideration given to using innovative approaches, communication channels and technologies;

Noting that many persons with disabilities, particularly girls and women, face barriers in accessing information and education, including with regard to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences as adopted by the United Nations General Assembly;

Recalling that multisectoral action on social, environmental and economic determinants of health, for the entire population and proportionate to the level of disadvantage of people in vulnerable situations, is essential to create inclusive, equitable, economically productive, resilient and healthy societies with healthy environments that make healthy options the easy options to choose;

Acknowledging the importance of national, international and global cooperation and solidarity for the equitable benefit of all people and the important role that relevant multilateral organizations, under the leadership of WHO, have in articulating and promoting norms and guidelines and identifying and sharing good practices for supporting actions on social, environmental and economic determinants of health;

Considering that positioning human health and well-being as one of the key features of what constitutes a successful, inclusive and fair society in the 21st century is consistent with our commitment to human rights at national, regional and international levels,

1. URGES Member States:

- (1) to strengthen health promotion and disease prevention through high-impact public policies, based on scientific evidence and best available knowledge, across sectors, developed through participatory processes; to strengthen health systems and to address health determinants and reduce risk factors, including through appropriate regulation; and to use health and health equity impact assessments in their development in order to achieve equitable outcomes;
- (2) to strengthen the health system and empower the health workforce, including by base and continuous training, in the provision of health promotion, disease prevention and health communication at all levels of health services, including by using innovative approaches, communication channels and technologies, ensuring that people in vulnerable situations have access to information;
- (3) to develop enabling environments conducive to health by addressing determinants of health across sectors and by reducing risk factors and thus make it easier for individuals to make healthy choices to support the realization of healthy, safe and resilient communities;
- (4) to accelerate efforts to ensure healthy lives and promote well-being and universal health coverage by 2030 for all throughout the life course, and in this regard re-emphasize our resolve to cover one billion additional people by 2025 with quality essential health and mental health services, quality, safe and effective essential medicines, vaccines, diagnostics and health technologies, and essential and quality health information, with a view to cover all people by 2030;
- (5) to ensure the implementation of country- and context-specific essential public health functions to protect and promote health and to prevent diseases;
- (6) to ensure universal access to sexual and reproductive health care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes;
- (7) to consider taking steps to include basic health knowledge in curricula to ensure that everybody has an appropriate level of health literacy and implement effective, high-impact, quality-assured, people-centred, gender-, disability- and health literacy-responsive,

equity-oriented and evidence-based interventions, mindful of cultural contexts to meet the health needs of all throughout the life course, and in particular of persons with disabilities and people in vulnerable situations, ensuring universal access to nationally determined sets of integrated quality health services at all levels of care for health promotion, disease prevention, diagnosis, treatment and care, and rehabilitation in a timely manner, including promoting return-to-work programmes;

(8) to support establishment, as appropriate, of mechanisms for generating, gathering and sharing evidence for developing high-impact policies to promote and protect people's physical, mental and social well-being and comprehensively address structural, social, economic, environmental and other determinants of health by working across all sectors through a whole-of-government, whole-of-society and Health in All Policies approach;

(9) to consider, as appropriate, establishing governmental, regional, subregional and local structures responsible for population-level health promotion, with sustainable financing, and continuous reporting; and to strengthen population-based health promotion implementation and ensure its resilience;

(10) to promote health and well-being through coordinated and multisectoral action throughout the life course and by providing conditions for people to access and enjoy clean and safe water, healthy food from sustainable food systems, clean air, tobacco-free environments and social participation, free from all forms of discrimination and inequalities and where all people are able and empowered to take responsibility for their own health and well-being;

(11) to design and orient public systems and infrastructures, including health systems that serve people's needs, that are accessible and affordable to all to ensure health equity contributing to sustainable and resilient economic development;

2. REQUESTS the Director-General:

(1) to develop, within the mandate of WHO, a framework on achieving well-being, building on the 2030 Agenda for Sustainable Development with its 17 Sustainable Development Goals and identify the role that health promotion plays within this, in consultation with Member States, for consideration by the Seventy-sixth World Health Assembly in 2023, through the Executive Board at its 152nd session;

(2) to develop as part of that framework an implementation and monitoring plan that includes identifying and supporting the translation into practice of innovative approaches for well-being using health promotion tools, new technologies and approaches to contribute to the WHO general programme of work;

(3) to provide technical support to Member States in strengthening their governance, financing, human resources, evidence generation, data disaggregation and research structures for well-being and health promotion;

(4) to promote and recommend scientifically sound interdisciplinary research to develop the evidence base for interventions for the promotion of health and well-being at population, community and individual levels, including by using big data, building on the measurement systems of the Sustainable Development Goals;

(5) to report on the implementation of this resolution to the Seventy-seventh World Health Assembly in 2024, the Seventy-ninth World Health Assembly in 2026 and the Eighty-fourth World Health Assembly in 2031, through the relevant sessions of the Executive Board.

Eighth plenary meeting, 28 May 2022
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