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HEALTH IN THE POST-2015 DEVELOPMENT AGENDA

Panel on Progress and Challenges

Background

1. Resolution WHA66.11 (2013) of the World Health Assembly requests the Director-General “to include the discussion of health in the post-2015 UN development agenda as an agenda item in the 2013 meetings of the WHO regional committees and to present a report on those discussions, through the Executive Board at its 134th session in January 2014, to the Sixty-seventh World Health Assembly.” (See reference document in annex for use in discussions).
2. The consultation process on the post-2015 development agenda began in late 2011, coordinated by the United Nations. Since then, parallel consultation processes have been carried out at the global, regional, and national level.
3. The first parallel consultation process began in 2012 with the creation of the High-level Panel of Eminent Persons selected by the United Nations Secretary-General. Five eminent persons from the Region of the Americas were selected: Ambassador María Ángela Holguín, Foreign Minister of Colombia; Dr. Izabella Teixeira, Minister of Environment of Brazil; Ambassador Patricia Espinosa, former Secretary of Foreign Affairs of Mexico; Dr. Gisela Alonso, President of the Cuban Agency of Environment; and Mr. John Podesta, Chair of the Center for American Progress and a visiting professor at Georgetown University Law Center.
4. The second process was completed through national and subnational consultations coordinated by the United Nations Development Program (UNDP) in 50 countries. To date, 11 countries in the Region have been selected to carry out these consultations: Bolivia, Brazil, Colombia, Costa Rica, Ecuador, El Salvador, Guatemala, Honduras, Haiti, Peru, and Saint Lucia.

5. The third process was completed through thematic consultations coordinated by several United Nations agencies,¹ with support from some countries. The thematic consultations are on: *inequalities* (UNICEF and UN-Women; Denmark and Ghana), *health* (WHO and UNICEF; Sweden and Botswana), *hunger, food, and nutrition security* (FAO and WFP; Spain), *energy* (UN-Energy, UNIDO, DESA, World Bank, and UNDP; Norway and Mexico), *governance* (UNDP and OHCHR; Germany), *education* (UNESCO and UNICEF; Canada), *conflict and fragility* (UNDP, UNICEF, United Nations Peacebuilding Commission, and the United Nations Office for Disaster Risk Reduction; Finland), *water* (UN-Water, UNICEF, and the WHO/UNICEF Joint Monitoring Program for Water Supply and Sanitation; Netherlands and Switzerland), *growth and employment* (ILO and UNDP; Japan), *environmental sustainability* (UNDP and UNEP; France and Costa Rica), and *population dynamics* (DESA, UNFPA, UNEP, UN-Habitat, and IOM; Switzerland).

6. In a parallel process, the United Nations Secretary-General established the Sustainable Development Solutions Network, led by Prof. Jeffrey Sachs. This network brings together academics from around the world to discuss practical solutions for sustainable development.

7. At the Rio+20 conference, the Member States agreed to draft the Sustainable Development Goals. The resulting progress report is expected in September 2013 and the final version is scheduled to be presented to the 69th United Nations General Assembly in September 2014.

8. Several thematic consultations on health have been coordinated by the WHO and UNICEF: one at the global level and two at the regional level with ministry of health representatives, with mayors and local indigenous and Afro-descendent leaders, and with civil society organization representatives.

Results of Discussions on Health in the post-2015 Development Agenda

9. The discussions on health in the post-2015 development agenda have raised the following main points:

- (a) It is recognized that health should be central to discussions on sustainable development, since it not only contributes to development, but is a key indicator

¹ UNICEF: United Nations Children's Fund; FAO: United Nations Food and Agriculture Organization; WFP: World Food Program; UNIDO: United Nations Industrial Development Organization; DESA: Department of Economic and Social Affairs; UNDP: United Nations Development Program; OHCHR: Office of the United Nations High Commissioner for Human Rights; UNESCO: United Nations Educational, Scientific, and Cultural Organization; ILO: International Labor Organization; UNEP: United Nations Environment Program; UNFPA: United Nations Population Fund; IOM: International Organization for Migration.

- of inclusive, equitable, people-centered, and human-rights based development. This position was supported by the Rio Declaration on the social determinants of health (2012).
- (b) For the post-2015 development agenda, clarification is needed regarding how sustainable development differs from the dominant development models and how it can clearly define the role of health, as well as intersectoral action to ensure “health in all policies.”
 - (c) It will be necessary to step up efforts to ensure that the new development goals include targets related to noncommunicable diseases, equity, and the right to health, as well as universal access to drinking water and sanitation. Health plays a role in several other Millennium Development Goals, such as poverty eradication, social protection, and natural disasters, which represent, globally and regionally, a heavy burden of disease such as noncommunicable diseases, and risk factors including mental health.
 - (d) A core goal to include is universal health coverage, as an operational target, understood as access to health for all with quality that addresses people’s needs in a human rights framework and in response to social determinants. It must include access to all key interventions (promotion, prevention, treatment, rehabilitation, among other.) as well as social protection in health for all. This goal requires strong, equitable national health systems that can deliver quality services.
 - (e) The overall vision of the post-2015 development agenda must focus on “well-being” and “living well” for all and include as an overarching goal: achieving the highest level of health at all stages of life.

Overall Objective of the Discussion

10. The overall objective of this panel is to study the post-2015 development agenda consultation processes with the Region’s ministers of health and other stakeholders, following up on commitments made in the United Nations in the year 2000 by 189 Heads of State and of Government. WHO and the Pan American Health Organization (PAHO) have made a clear commitment to the Millennium Development Goals 2000-2015 (MDGs) and are reaffirming this commitment in the consultation process that will culminate with the goals that will be established for the post-2015 period.

Specific Objectives of the Discussion

- (a) Present the results of the global thematic consultations on health and their regional level implications.
- (b) Convey the perspective of the eminent persons from the Region and the results of the consultation process carried out in the Region.

- (c) Convey the reflections and results from the consultation carried out by PAHO with mayors and civil society organizations, documented in a position paper sent to WHO as input for the Botswana meeting.
- (d) Analyze the role of PAHO/WHO in support to Member States in national and thematic consultation processes and how the commitments expressed in these consultations are included in the PAHO Strategic Plan 2014-2019.
- (e) Put the issue on the political agenda of the Member States of the Organization and reinforce the need for strengthening national and subnational consultations on health in the post-2015 development agenda.

Proposed Discussion Topics

11. The following presenters and topics are proposed:
 - (a) The office of the WHO Director-General will present the process carried out worldwide to position health in the post-2015 development agenda, including the results of the thematic consultation on health held in Botswana, as well as the main points raised in the document that will be submitted to the United Nations as a result of the consultations.
 - (b) The Foreign Ministry of Colombia will present the results of the regional consultation on sustainable development held 7-9 March 2013 to discuss the post-2015 development agenda and the implications for the health and development agenda.
 - (c) The Director of the Integral Health Coordination Program (PROCOSI) will present the perspective of non-governmental organizations in the process of positioning health in the agenda. PROCOSI is the Bolivian nongovernmental organization that was selected by WHO to carry out a national consultation and that participated in the regional consultation organized by PAHO in Antigua, Guatemala, on 12-24 February 2013.
 - (d) The Director of the Pan American Sanitary Bureau (PASB) will present guidelines for three processes to support Member States in the post-2015 development agenda in light of the challenges stated in the PAHO Strategic Plan 2014-2019: *(i)* continue to strengthen technical cooperation aimed at the countries that have the greatest difficulty in meeting certain MDG targets or indicators; *(ii)* strengthen consultation processes in the Region to ensure that health is properly included in the agenda, so as not only to strengthen universal health coverage, but also to address the social determinants of health; and *(iii)* ensure that health for all is considered in regional intersectoral discussions on sustainable development, as stated at the regional meeting in Bogotá (Colombia).
 - (e) The President of the Directing Council will chair the dialogue with the Ministers.

Participants and Guests

12. The following persons will attend the panel discussion:
- Ministers of health and other representatives of the Member States.
 - Directors or representatives of United Nations agencies and development banks.
 - Members of the different diplomatic corps and ambassadors to the Organization of American States.
 - Representatives of nongovernmental organizations.
13. The following official documents establish PAHO/WHO's commitment to help Member States attain the MDGs:
- (a) Since 2004, PAHO has expressed a strong commitment to the MDGs and health targets (Document [CD45/8](#)), reflected in the resolution adopted by the 45th Directing Council (Resolution [CD45.R3](#)), as well as in the progress report submitted in 2011 (Document [CE148/INF/5](#)).
 - (b) In the same line, the World Health Assembly has carried out periodic reviews of the MDGs (Documents [A63/7](#) of 2010 and [A65/14](#) and [A65/15](#) of 2012) and expressed its commitment in Resolution [WHA63.15](#) (2010).
 - (c) The report "Monitoring the achievement of the health-related Millennium Development Goals: Health in the post-2015 development agenda (Report by the Secretariat)" (Document EB132/12) presented to the 132nd Session of the WHO Executive Board (January 2012).
 - (d) The report "Accelerating progress towards the Millennium Development Goals: options for sustained and inclusive growth and issues for advancing the United Nations development agenda beyond 2015," 66th Session of the United Nations General Assembly (Document [A/66/126](#), 11 July 2011).
 - (e) [WHO/World Bank Ministerial-level Meeting on Universal Health Coverage](#) (several documents).
 - (f) [WHO fact sheet on the Millennium Development Goals](#).
14. In order to assist the ministries of health and the PAHO country offices during these consultation processes, PAHO has prepared a set of tools that are available online at: <http://new.paho.org/mdgpost2015/>.

Action by the Directing Council

15. The Directing Council is invited to take note of this report and make recommendations that it considers relevant.

HEALTH IN THE POST-2015 DEVELOPMENT AGENDA

Draft paper for WHO Regional committees, 2013*

1. Resolution WHA 66.11 requested the Director-General “to include the discussion of health in the post-2015 UN development agenda as an agenda item in the 2013 meetings of the WHO regional committees and to present a report on those discussions, through the Executive Board at its 134th session in January 2014, to the Sixty-seventh World Health Assembly”. It also urges Member states “to ensure that health is central to the post-2015 UN development agenda” and to actively engage in relevant discussions.
2. The Millennium Development Goals have proven to be a powerful force in maintaining support for health as a crucial element of development. The simplicity of the framework, readily understandable objectives, and the focus on quantitative monitoring have proved durably engaging. Securing the place of health in the next generation of global goals is a priority for WHO.
3. UN Member States have given clear mandates to the UN Secretary-General at the United Nations High-level Plenary Meeting on the Millennium Development Goals (New York, 20–22 September 2010) and at the United Nations Conference on Sustainable Development (Rio+20; Rio de Janeiro, Brazil, 20–22 June 2012) on how the process of preparing for the United Nations’ post-2015 development agenda should unfold.
4. This report summarizes what has happened to date in response to both mandates and outlines the process leading up to 2015. It also briefly reviews the narrative that emerged from the global thematic consultation on health as well as how health has been addressed in the reports of the High Level Panel (HLP) and the Sustainable Development Solutions Network (SDSN), and during the initial discussions of the Open Working Group (OWG) in June 2013.

PROCESS TO DATE

5. In June 2012 the United Nations Secretary General convened a High-level Panel of Eminent Persons, co-chaired by the Presidents of Indonesia and Liberia and the Prime Minister of the United Kingdom of Great Britain and Northern Ireland. The Panel included leaders from civil society, the private sector and government. The panel delivered its report in early June 2013.¹

* Document provided by WHO.

¹ *A New Global Partnership: eradicate poverty and transform economies through sustainable development*. The Report of the High-Level Panel of Eminent Persons on the Post-2015 Development Agenda, June 2013.

6. As an early input to its deliberations, the High-level Panel received a report from a United Nations System Task Team² representing organizations from across the United Nations system. The report sets out a broad framework for post-2015 based on inclusive economic development, environmental sustainability, inclusive social development (including health), and peace and security, underpinned by human rights, equality and sustainability. The main report was accompanied by thematic papers, including one on health written by WHO in partnership with UNICEF, UNFPA and UNAIDS.

7. Subsequently, the United Nations Development Group (UNDG) led a “global conversation” on the post-2015 agenda through a series of at least 100 national consultations, regional consultations facilitated by the United Nations Regional Economic Commissions, a citizen outreach programme, and a series thematic global consultations. The topics covered were inequalities; population dynamics; health; education; growth and employment; conflict and fragility; governance; environmental sustainability; food security and nutrition; energy; and water.

8. WHO jointly led the health thematic consultation, which ran from September 2012 to March 2013, with UNICEF, with Botswana and Sweden as the lead Member States. A web-based consultation drew in 150,000 visitors, and over 1,600 individuals representing Member States, academia, civil society, UN agencies, global health partnerships and the private sector took part in 14 face-to-face consultations in Africa, Asia, South America, North America, and Europe. Outcomes of all these meetings, as well as over 100 papers submitted are available on a web-based platform.³ The report of the consultation⁴ which was finalized through a High-level Dialogue in Gaborone, Botswana was submitted to the High Level Panel prior to the finalization of its report and formed the basis of a paper considered by the 66th World Health Assembly (A66.47).

9. In parallel, the UN Secretary-General established the Sustainable Development Solutions Network (SDSN) led by Professor Jeffrey Sachs. The network was used to convene academics world-wide to focus on practical solutions to sustainable development issues. The report was designed as an input to both the Secretary General’s report to the 68th UN General Assembly and to the Open Working Group. The SDSN report was delivered in June 2013.⁵

10. Lastly, at the Rio+20 conference Member States agreed to establish an Open Working Group composed of 30 members nominated from the five United Nations regional groups to prepare a set of sustainable development goals. The OWG will present

² *Realizing the Future We Want for All*. The Report of the UN System Task Team on the Post-2015 UN Development Agenda, June 2012.

³ www.worldwewant2015.org/health.

⁴ *Health in the Post-2015 Agenda*. The Report of the Global Thematic Consultation on Health. April 2013.

⁵ *An action Agenda for Sustainable Development*. Report for the UN Secretary-General, 6 June 2013.

a progress report in September 2013 and finalize its work in time for the 69th United Nations General Assembly in September 2014.

11. To coordinate all these streams of work the Secretary-General has been supported by a Special Adviser on Post-2015 Development Planning. The Special Adviser was an ex-officio member of the High Level Panel and, working as part of a senior coordination group, has a mandate to ensure links between the Open Working Group and other parts of the consultative process. Her work in health has been supported directly by WHO.

12. The culmination of this phase of the process will be a Special Event on September 25th 2013 during the opening of the UN General Assembly to review progress made towards the achievement of the Millennium Development Goals and to chart the way forward.⁶

FUTURE ROADMAP

13. The draft outcome document⁷ for the special event will, inter alia, lay out a roadmap for the process leading up to a summit at Heads of State and Government level in September 2015 at which it is hoped a new framework and set of goals will be adopted.

14. In the meanwhile, the OWG will resume its work on different sectors in November and start considering goals in more detail early in 2014. The intention is for the OWG to complete its tasks by September next year. An additional working group mandated by Rio + 20 – an Expert Committee on Sustainable Development Financing - will also start work in August 2013 and complete its task by September 2014.

15. Over the year following the Special Event this September, the President of the General Assembly will convene a number of events under the theme “The post 2015 Development Agenda – Setting the Stage”. A stocktaking event will be held for all UN Member States in Spring 2014 and the Secretary-General is then requested to present Member States with a synthesis of the full range of inputs received, prior to the launch of the final inter-governmental process at the 69th UNGA in September 2014, culminating in the Heads of State/Government Summit one year later.

⁶ Background documents for the Special Event will include the Secretary General’s report on the post-2015 development agenda; a progress report from the OWG; and a synthesis report of the country and thematic consultations prepared by the UNDG MDG Task Force. At the time of writing (July 2013) these documents had not been finalized.

⁷ The Outcome document for the September 2013 Special Event has not been finalized at the time of writing and so the road map should be regarded purely as indicative. The key point to make at this stage is that despite the plethora of activities that have taken place already, the process of agreeing on goals and targets – which can only be finalized in a full inter-governmental process - is at a relatively early stage.

HEALTH IN THE POST 2015 AGENDA: THE STORY SO FAR

16. The final section of this report summarizes where things currently stand with regard to health in any future set of goals.

17. Even before the first consultations on post-2015 began health featured prominently in the UN General Assembly Resolution 66/288 “*The Future we Want*” which recognized health “as a precondition for and an outcome and indicator of all three dimensions of sustainable development”.

18. This position was reinforced by the Rio Declaration on Social Determinants of Health⁸ and by UNGA resolution 67/81 on global health and foreign policy, which, inter alia recommended that consideration be given to including universal health coverage (UHC) in the discussion on the post-2015 UN development agenda.

19. Early discussions on the role of health emphasized the importance of sustaining, and indeed accelerating, work on the current health MDGs. At the same time, it was widely recognized that the health agenda was now broader and that noncommunicable diseases must be included. In addition, there was a strong concern to embed the importance of health equity and for health to be framed as a fundamental right. Given the wide range of interests within the health sector, the key challenge was to find an *inclusive* way of framing a health goal which would accommodate all these different concerns. Lastly, there is a need to demonstrate clearly the links between health and other aspects of sustainable development.

20. The report of the Botswana meeting developed a clear narrative about the role of health based on these considerations. It had three elements: (a) health is a critical component of sustainable development and human well-being and thus contributes to the overarching purpose of any new set of global goals; (b) the concern of a health goal will be to maximize health at all stages of life – this will include accelerating and completing work on the current MDGs and extending work to cover noncommunicable diseases; and (c) universal health coverage (UHC) is both a means to the end of achieving these outcomes *and* a desirable end in itself.

21. The final point is worth emphasizing. While some participants maintain that UHC is only a means to achieving better health outcomes. Others advanced the view that it is a desirable goal that people value in its own right – through the assurance that they have access to all the services they need without incurring major financial risk.

22. The key message of the High Level Panel’s report is to end absolute poverty in the context of sustainable development by 2030. To this end they propose five transformative changes which provide the under-pinning principles. These are: leave no

⁸ WHA65.8, May 2012.

one behind; put sustainable development at the core; transform economies for jobs and inclusive growth; build peace and effective, open and accountable public institutions; and forge a new global partnership.

23. These principles are then translated into an illustrative set of 12 goals and 51 targets. The major theme of the health consultation was picked up by the Panel in goal four: “Ensure healthy lives”. The five targets that go with this goal are: “end preventable infant and under-five deaths; increase by x% the proportion of children, adolescents and at-risk adults and older people that are fully vaccinated; decrease the maternal mortality ratio to no more than x per 100,000; ensure universal sexual and reproductive health and rights; and reduce the burden of disease from HIV/AIDS, tuberculosis, malaria, neglected tropical diseases and priority non-communicable diseases.” The HLP then go on to say “Though we focus on health outcomes in this goal, to achieve these requires universal access to basic health care.”

24. Health has a role in several other proposed goals. Ending poverty (goal 1) includes two health related targets: coverage of people who are poor and vulnerable with social protection; and building resilience and reducing deaths from natural disasters. Goal two on gender equality and women’s empowerment includes prevention and eliminating all forms of violence against girls and women. Goal 5 on food security and nutrition includes reducing stunting, wasting and anemia. Goal 6 on universal access to water and sanitation includes a focus on safe drinking water and reducing open defaecation. Goal 10 on good governance and effective institutions includes the provision of free and universal legal identity such as birth registration. Goal 11 on stable and peaceful societies includes the reduction of violent deaths and the elimination all forms of violence against children.

25. The report of the Sustainable Development Solutions Network (SDSN) also includes illustrative goals. For health this is expressed in terms of “Achieve health and wellbeing at all stages of life”. In contrast to the HLP, however, universal access that “includes sexual and reproductive healthcare, family planning, routine immunizations, and the prevention and treatment of communicable and noncommunicable diseases” is included as a specific target.

26. The Open Working Group has held one specific discussion on health. While the official summary report is not yet published, the co-facilitators in their verbal summary acknowledged that UHC was central to sustainable development. While many Member States supported UHC as an overarching health goal others spoke in favour of healthy life expectancy, better health across the life span, or maximizing life across all stages of life with UHC as the means towards these ends. A large number of member states emphasized that UHC would of necessity be a key component of any well-functioning social protection framework and stressed the importance of addressing NCDs in the post 2015 framework. Most member states emphasized that sexual and reproductive health and rights need to be a key component the health framework post 2015. Several

also emphasized women's health, youth and the linkages between health and other sectors (such as transport, energy, housing, environment and agriculture).

CONCLUSIONS

27. The process of framing a new set of global development goals has reached the end of its first phase culminating in a Special Event at the 68th UN General Assembly in September 2013. There remains a further two years to go during which a full inter-governmental process will decide on the framework and goals to be adopted. Much of the discussion will be conducted by Ministries of Foreign Affairs and Permanent Missions to the UN in New York. Ensuring that Ministries of Health keep their national representatives informed and well-briefed, with a coherent narrative on the role and importance of health, will be key to the successful conclusion of this process.

28. In terms of substance the position of health is so far well established. The narrative that is emerging is an inclusive one based on maximizing health at all ages with universal health coverage either as a means and/or as an end itself. This approach allows a wide variety of interests within the health sector to be accommodated as part of a single framework. WHO's position is to maintain this strategy so as to avoid competition between different health conditions, different health interventions or different population groups. We also will continue to pursue the use of health indicators as a way of measuring progress in all three pillars of sustainable development.