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Agenda item 20.5

**HEALTH IN THE POST-2015 UN DEVELOPMENT AGENDA
Draft paper for WHO regional committees, 2013**

Information Document

1. World Health Assembly 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. The resolution also urged 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. At the United Nations High-level Plenary Meeting on the Millennium Development Goals (New York, 20–22 September 2010) and the United Nations Conference on Sustainable Development (Rio+20; Rio de Janeiro, Brazil, 20–22 June 2012) UN Member States gave clear mandates to the UN Secretary-General 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

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 UN 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 Commissions, a citizen outreach programme, and a series of 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 led the health thematic consultation, which ran from September 2012 to March 2013, jointly with UNICEF, while Botswana and Sweden acted as the lead Member States. A web-based consultation drew in 150 000 visitors. Furthermore, over 1600 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. The 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 worldwide 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 (OWG) composed of 30 members nominated from the five United Nations regional groups to prepare a set of sustainable development goals. The OWG will present 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 UN 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.

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.

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 in September 2015 at which, hopefully, a new framework and set of goals will be adopted.

14. 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.

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

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.

⁸ WHA 65.8, May 2012.

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 that 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 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 noncommunicable 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 2 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 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 health care, 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 of 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 intergovernmental 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. WHO will also continue to pursue the use of health indicators as a way of measuring progress in all three pillars of sustainable development.