Working Document for 5 - 9 May Session of Open Working Group

Focus area 3. Health and population dynamics

Healthy life at all ages for all

- a) by 2030 reduce the maternal mortality ratio to less than 40 per 100,000 live births¹, end preventable new-born and child deaths and reduce by x% child and maternal morbidity²
- b) by 2030 end the epidemics of HIV/AIDS, tuberculosis, malaria and neglected tropical diseases³
- c) reduce by x% the risk of premature mortality from non-communicable diseases (NCDs), injuries and promote mental health with strong focus on prevention⁴
- d) achieve universal health coverage (UHC), including financial risk protection, with particular attention to the most marginalized poor and those in vulnerable situations⁵
- e) by 2030 ensure universal access to affordable essential medicines and vaccines for all.⁶
- f) ensure universal access to comprehensive _sexual and reproductive health for all, including modern methods of family planning naccordance with ICPD
- g) decrease by x% the number of deaths and illnesses from indoor and outdoor air pollution and other forms of environmental degradation⁸
- h) Eliminate narcotic drug and substance abuse⁹

Appropriate means of implementation

- Ensure that in the context of the right to health and the need for developing countries to have affordable access to affordable medicines, TRIPS flexibilities can and should be used by developing countries to obtain, use and produce affordable generic medicines
- Respect the right to use, to the fullest extent, the provisions contained in the Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS Agreement), the Doha Declaration on the TRIPS Agreement and Public Health which provide flexibilities for the protection of public health, and in particular to promote access to medicines for all and encourage the provision of assistance to developing countries in this regard (Rio20, P142)
- Promote Further collaboration and cooperation at the national and international levels to strengthen health systems through increased health financing, recruitment, development and training and retention of the health workforce, through improved distribution and access to safe, affordable, effective and quality medicines, vaccines and medical technologies, and by improving health infrastructure (Rio20, P143)
- Support research and development of vaccines and medicines for the common diseases of developing countries
- Promote global partnerships in the field of health

Focus area 4. Education and life-long learning

Provide inclusive quality education and life-long learning for all

- a) by 2030 ensure universal, free, equitable access to and completion of quality primary and secondary education for all girls and boys, leading to effective learning outcomes¹⁰
- b) ensure that persons with disabilities have access to inclusive education, skills development and vocational training¹¹
- c) by 2030 increase by x% the proportion of children able to access and complete quality pre-primary education¹²
- d) by 2030 achieve universal youth and adult literacy, with particular attention to women and the most marginalized¹³
- e) by 2030 increase by x% the number of young and adult women and men with vocational training, technical, engineering and scientific skills¹⁴
- f) integrate relevant knowledge and skills in education curricula, including ICT skills¹⁵, education for sustainable development, and awareness raising on culture's contribution to sustainable development¹⁶
- g) all schools to provide safe and healthy learning environment for all students¹⁷

Appropriate means of implementation

expand by x% globally the number of scholarships for students from developing countries in particular LDCs to enroll in higher education programmes in developed countries and other developing countries, with focus on science, engineering and management

Promote global partnerships in the field of education

Endnotes

¹ Australia/Netherlands/UK; Ethiopia.

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² Similar proposals from Mexico/Peru, Latvia, Greece, Netherlands/UK/Australia, Ethiopia, Sweden, Argentina/Bolivia/Ecuador; Zambia (Southern African Group); Benin (LDCs); Trinidad and Tobago (CARICOM); Montenegro/Slovenia; Denmark/Ireland/Norway.

³ Similar proposals for addressing this cluster of communicable diseases from: Colombia/Guatemala ("reduce"); Denmark/Ireland/Norway, Latvia(prevent and treat); Ethiopia ("end epidemics of…"); Mexico/Peru ("reduce incidence"), Sweden ("elimination of HIV/AIDS, prevention and reduction" of others); AOSIS ("strengthen fight against"); Canada/Israel/US ("AIDS free generation", "prevent and treat communicable diseases"); Romania/Poland; Zambia (Southern African Group); Benin (LDCs); Trinidad and Tobago (CARICOM); Women, Children and Youth, Indigenous Peoples, SLoCat, the Psychology Coalition at the UN and the World Society for the Protection of Animals.

⁴ Similar proposals from: Denmark/Norway/Ireland ("prevent and treat"); Sweden ("decrease incidence of NCDs, through reducing exposure to harmful substances, unhealthy diets, etc.); AOSIS; Canada/Israel/US ("reduce premature morbidity from NCDs"); Argentina/Bolivia/Ecuador ("full access to prevention, treatment, care and support related to NCDs"); Romania/Poland; Zambia (Southern African Group); Benin (LDCs); Trinidad and Tobago (CARICOM); Montenegro/Slovenia; Cyprus/Singapore/UAE; Brazil/Nicaragua; Women, Children and Youth, Indigenous Peoples, SLoCat, the Psychology Coalition at the UN and the World Society for the Protection of Animals.

⁵ Benin (LDCs); Trinidad and Tobago (CARICOM); Brazil/Nicaragua; Iran; Montenegro/Slovenia; Romania/Poland; Sweden. Similar proposals from: Mexico/Peru; Colombia/Guatemala ("progress towards quality universal health coverage"); Ethiopia ("comprehensive health services for all"); Japan; Latvia

("quality universal health care"); Greece ("achieve UHC"); Argentina/Bolivia/Ecuador ("access to health care and services in exercise of the right to health") and addressing financial risk (Japan, Mexico/Peru); Possible indicator: providing for the health needs of persons with disabilities, youth, migrants, and ageing populations.

⁸ Australia/Netherlands/UK; Argentina/Bolivia/Ecuador; Mexico/Peru; Zambia (Southern African Group); Benin (LDCs); Sri Lanka; Montenegro/Slovenia; China/Kazakhstan/Indonesia.

⁷ Ethiopia ("universal access to comprehensive sexual reproductive health and reproductive rights); Denmark/Ireland/Norway ("universal access to sexual and reproductive health and rights"); Australia/Netherlands/UK; France/Germany/Switzerland; Trinidad and Tobago (CARICOM) ("improved quality of and access to sexual and reproductive health"); Finland; Montenegro/Slovenia; China/Kazakhstan/Indonesia.

⁸ Denmark/Ireland/Norway; Sweden; Romania/Poland ("Address social and environmental causes of disease"); Cyprus/Singapore/UAE; Women, Children and Youth, Indigenous Peoples, SLoCat, the Psychology Coalition at the UN and the World Society for the Protection of Animals.

⁹ Sweden; Women's MG

¹⁰ Colombia/Guatemala, Denmark/Ireland/Norway, Ethiopia, France/Germany/Switzerland, Mexico/Peru, Pakistan, Sweden, USA/Canada/Israel; NB: indicators should be disaggregated wherever possible to identify progress of the poorest and most marginalized including persons with disabilities.

11 Sweden, Poland/Romania, UK/Australia/Netherlands, Denmark/Norway/Ireland, Greece, G77

¹² Guatemala/Colombia; Australia/Netherlands/UK; Denmark/Ireland/Norway; NB: indicators should be disaggregated wherever possible to identify progress of poorest and most marginalized.

13 G77, Bulgaria/Croatia, Denmark/Ireland/Norway, Poland/Romania, Sweden, USA/Canada/Israel

¹⁴ Benin on behalf of LDCs, Australia/Netherlands/UK, Denmark/Ireland/Norway, Ethiopia, Guatemala/Colombia, Mexico/Peru, Pakistan, Sri Lanka, USA/Canada/Israel; indicators could include: % of youth NEET (not in education, employment or training), average duration of unemployment (by age and gender).

¹⁵ Ethiopia, India, Latvia, Sri Lanka, Sweden

¹⁶ Argentina/Bolivia/Ecuador, Denmark/Ireland/Norway

17 Mexico/Peru, Romania/Poland