Integrating Health in the Post-2015 Sustainable Development Agenda

A thematic synthesis prepared by the Health and Population
Dynamics Cluster within the NGO Major Group

Introduction

The health and population dynamics thematic cluster began work in early 2012 to advocate for the inclusion of public health as a priority within the Rio+20 outcome document and at the June 2012 conference itself. As a result of successful, united efforts, *The Future We Want* contains strong reference to addressing public health as part of the future sustainable development agenda, including potential sustainable development goals (SDGs).

The thematic cluster re-convened in September 2013 as a more expansive, informal group of health-related non-governmental organizations (NGOs) united around the objectives of:

- Protecting the centrality of health in the post-2015 sustainable development agenda;
- Promoting an inclusive and holistic view of health across the framework;
- Amplifying advocacy efforts within the post-2015 process;
- Providing a space for organizations to develop and share collective views on health in post-2015.

Summary

The Future We Want affirms health as "a precondition for, and an outcome and indicator of all three dimensions of sustainable development." Accordingly, the post-2015 sustainable development framework must establish health as an overarching priority, as the Millennium Development Goal (MDG) framework did, promote a health-in-all-policies approach, and ensure that health is integrated across all three dimensions of sustainable development – social, economic, and environmental.

This position paper considers health within the following priority themes and cross-cutting issues:

- Human rights and human security
- · Promoting equality, including gender equity
- Inclusive economic growth
- Climate change

Our position

Achieving the highest attainable standard of physical and mental health for all is a basic human right. It is a prerequisite for sustainable human development, and a central and essential part of the post-2015 development framework. Based on the core values of equity, human rights, human security, and sustainability, our collective priority as we design and agree the future framework must be to protect and promote health and wellbeing for all people, of all ages and abilities.

The Millennium Development Goal (MDG) framework successfully prioritised attention and action on the most critical health issues facing the world's poorest countries in 2000. This progress must continue as we move into the post-2015 era. Our priorities for healthy, sustainable human development must also reflect current trends in epidemiology, globalization, and the political, environmental, social, and economic realities of the 21st century. Finally, any progress on improving health outcomes will require a well-functioning, well-financed health sector, complemented by national policies and programs that prioritize ensuring that all people have access to a package of essential health services across the continuum of care, regardless of their ability to pay.

Therefore, we strongly urge the members of the Open Working Group, and all Member States and relevant stakeholders, to consider the recommendations below:

 Agree on a standalone, overarching, universally applicable health goal that goes beyond diseasespecific, vertical approaches to health, and improves health across the lifecourse. This will enable governments to address pressing health challenges according to national priorities and allocate resources for health as appropriate. This goal should:

- Maintain momentum on achieving the health-related MDGs. SDG targets should accelerate progress on the health-related MDGs and address child and maternal mortality, sexual and reproductive health and rights including family planning, and mortality from infectious diseases including HIV/AIDS, malaria, and tuberculosis.
- Include urgent health and sustainable development challenges, namely non-communicable diseases (NCDs), nutrition, mental health, neglected tropical diseases (NTDs), and road traffic injuries in the proposed SDGs. Attention must be paid to reducing exposure to the main NCD risk factors (tobacco, unhealthy diets, harmful use of alcohol, and physical inactivity), providing proven interventions to combat and contain NTDs, and supporting increased access and investment in new and improved technologies and tools.
- Prioritize strengthening national health systems, with an emphasis on achieving universal health coverage (UHC) and equitable access to the continuum of health services across the lifecourse, developing a skilled and motivated health workforce and robust health information systems and surveillance, and strengthening community-based health care delivery.
- Harness the active and meaningful engagement with non-governmental organizations, civil society, and community-based organizations in developing the post-2015 framework.
- **Develop clear and strong accountability mechanisms**, with adequate and sustainable financing, to support the implementation of the post-2015 framework.

Goals and Targets

In addition to the above, a framework and proposed SDGs and targets to achieve sustainable human development and protect and promote health and wellbeing should be based on the following principles:

- Goals, targets and indicators should be forward-looking, based on projected changes in population size, location, and age structures, all of which influence demand for and supply of key resources and services, including health services;
- Goals and targets should promote human rights for all, including the right to health for people of all ages and abilities;
- Goals and targets should focus on the poorest and most vulnerable and marginalized populations, including women, people living with and affected by HIV, sexual minorities, children and youth, older people, people with disabilities including those suffering the effects of injury, and migrants;
- Goals and targets should be complemented by policies and programs that support health and development throughout the lifecourse and promote healthy aging, ensuring access to services to minimize the social and economic impact of experiencing a health condition;
- The framework should encourage multisectoral action to achieve health by including health-sensitive indicators across all sustainable development dimensions. This will help drive a health-in-all-policies approach, measure progress, and mitigate any unintended adverse health consequences of development policies. Many sustainable development priorities such as population growth rates, migration, urbanization, and increased population densities all have an impact on health.

Framework

Cross-cutting Issues

Human rights and human security

Good health is recognized as a basic human right in a number of international documents, including the Universal Declaration on Human Rights and the constitution of the World Health Organization (WHO). The protection of human dignity and freedoms, and incorporating multisectoral action to ensure reduce vulnerabilities, mitigate risk, and ensure empowerment, are also central to the post-2015 discussions.

A rights-based, human security, age inclusive, gender-responsive, and child and youth-friendly approach to health is essential to reach the poorest, most vulnerable populations. These populations often bear a disproportionate burden of risk and exposure to the determinants of diseases and conditions, and suffer from inadequate access to the necessary prevention, diagnosis, care, and services, disease-related stigma and discrimination, and violation of their human rights. Furthermore, health sector reforms must ensure fulfilment of other human rights, should be complemented by reforms outside the health sector to address social determinants of health, and should be supported by an enabling legal environment that does not tolerate discrimination in the provision of health services.

Promoting equality, including social equity, gender equality and women's empowerment

<u>Gender equity:</u> Girls and women of all ages are particularly vulnerable to barriers in accessing quality health care and services they need, and in exercising their right to health due to marginalization, stigma, and direct and indirect discrimination. This can be particularly critical in the case of comprehensive and integrated sexual and reproductive health services, including maternal health care, breastfeeding, comprehensive sexuality education, access to safe abortion, menopausal services, and non-discriminatory HIV/AIDS services.

Empowering girls and women through education, ensuring their political participation, and access to assets and resources, guaranteeing their sexual and reproductive rights, ensuring the appropriate environment of awareness and support for a mother to initiate and sustain breastfeeding, and eliminating all forms of violence against women and girls of all ages are essential to improving nutrition, health, and wellbeing.

<u>Universal health coverage and access:</u> Universal health coverage (UHC) and access can be an important means to reduce inequalities and promote financial risk protection. It has been described as "a practical expression of the concern for health equity and the right to health." UHC, prioritizing access for the poor and the marginalized to appropriate and affordable health services, can reduce catastrophic health expenditure and preventable mortality, increase healthy life expectancy, harness economic growth, and ensure universal access to health services, regardless of gender, sexual orientation and identity, economic class, disability, ethnicity or age. Indicators should incorporate coverage, equity, affordability, and quality.

Increasing access to life-saving health care and technologies and assuring service delivery coverage of acceptable quality is critical to improving health outcomes and maximising healthy life expectancy. The application of innovative strategies and technologies is critical, alongside increased investments in existing tools and methods that have demonstrated impact on improving the availability, accessibility, and quality of health services to women, children, adolescents and other vulnerable groups across the lifecourse.

<u>Social Determinants of Health:</u> Drivers of health inequities extend far beyond the health sector. Some of the most important factors influencing the health of all populations, but especially the poorest, most

¹ United Nations TST issues brief: Health and Sustainable Development.

² "Positioning Health in the Post-2015 Development Agenda: A WHO Discussion Paper." October 2012. http://www.who.int/topics/millennium_development_goals/post2015/WHOdiscussionpaper_October2012.pdf

vulnerable, and most excluded, are economic, social, environmental, and political. Varying exposures and experiences with determinants including urbanization, employment, trade, education, and political engagement significantly impact the distribution of health equality across populations. Underpinning the emphasis on addressing the social determinants of health is the protection of the rights and empowerment of the freedoms and dignity of all people.

<u>Social protection systems:</u> An adequate institutionalized social protection system that attends to physical barriers (including geographical, mobility, sensory and other barriers), in adherence with the right to health, including through training health workers to ensure they are disability, age, and culturally-sensitive is central to good health in the post-2015 era. It includes promoting healthy lifestyles and environments, and universal access to clean water, hygiene, and sanitation for all people, particularly those most vulnerable to ill health.

<u>Enabling legal environments</u>: Creating an enabling legal environment in all countries to protect all people against discrimination, violence and harmful laws that pose a major obstacle to accessing health services should be a priority. This includes repealing or reforming laws that criminalize homosexual behaviour and discriminate against individuals of diverse sexual orientations and identities, and laws and practices that discriminate against people of any age, women, indigenous peoples, and persons with disabilities. An enabling legal environment also includes amending trade and regulatory policies to ensure access to safe, effective, quality-assured essential medicines and technologies.

Inclusive economic growth

Poverty resulting from uneven economic growth, and subsequent inequalities within and between countries, is one of the greatest determinants of poor health outcomes. Out-of-pocket expenditure on health care is a major determinant of chronic poverty, undermines the economic stability of households, contributes to diminished overall national economic development, and perpetuates the catastrophic intergenerational cycle of poverty. Balanced, inclusive economic growth that supports the poorest people and households will contribute to poverty eradication and ensure that households and countries alike have adequate resources for health-related expenditures.

The post-2015 framework must include policies that ensure the adequate allocation of resources to strengthen national and community-based health care delivery systems and support the implementation of universal health coverage and access, including sexual and reproductive health services, to ensure equity and improved health outcomes for the poorest income quintile, women, children and youth, older people, people with disabilities, and vulnerable and marginalized groups.

Climate change

Approximately one quarter of all death and disability worldwide is due to environmental factors. Climate change and environmental degradation are increasing the risk of extreme weather events, compromising food and water security, and exacerbating existing health risks including increased morbidity and mortality from NCDs; the spread of many infectious diseases; and the outbreak of extreme events. This can lead to death, injuries and the outbreak of water-related diseases, diarrhoea and malnutrition.³ Climate change was estimated to cause 5.5 million disability adjusted life years (DALYs) in 2000.⁴ It will widen social and health inequity through mass environmental displacement, unplanned migration and conflict. Such population insecurity will have profound consequences for the social determinants of health.

Monitoring and Evaluation

Please see Annex 1 for a list of suggested targets and indicators.

³ World Health Organization, Protecting Health from Climate Change (2008); Jonathan A Patz and R sari Kovats, 'Hotspots in climate change and human health', *BMJ*, Vol 325 (November 2002)

⁴ Lancet and UCL Institute for Global Health Commissions, 'Managing the health effects of climate change', Lancet, Vol 373 (May 2009)

Next Steps

The health cluster will continue to track and engage in the discussions of the Open Working Group, promote a focus on health in the post-2015 framework among stakeholders and convene discussions and provide guidance from the civil society perspective on the integration of health into the post-2015 sustainable development framework.

Conclusion

The post-2015 sustainable development framework, including goals, targets, indicators, narrative, and frameworks for partnership, financing, and means of implementation must consider and reflect the centrality of the right for all people of all ages and abilities to achieve the highest attainable standard of physical and mental health. Progress on the health-related MDGs has been impressive and must continue. The framework must also be expanded to reflect emerging health priorities and address the importance of expanding access to essential services across the continuum of care to everyone, regardless of ability to pay. In short, the post-2015 framework must promote health and wellbeing for all people, of all ages, genders, disability, and economic status, everywhere.