

### **Focus area 3: Health Population Dynamics**

We would like to thank the co-chairs and the Secretariat for the targets proposed in this section and would like to present the following comments:

As regards the targets d), e), f) on universal health coverage, universal access to affordable and essential medicines and universal access to comprehensive sexual and reproductive health for all, we think that they are more tools to achieve the concrete goals than targets. As regards target f) on sexual and reproductive health, in our opinion it is a repetition and a duplication of target from FA5 on women's empowerment and we propose to place this target only under one FA (FA3 or FA5).

As regards the concrete targets, we would like to propose the following wording:

- b) by 2030 ~~end-reduce by x %~~ the epidemics of [major communicable diseases including](#) HIV/AIDS, tuberculosis, malaria and neglected tropical diseases<sup>i</sup> [and prevent new infections](#) . (The targets should be realistic to achieve. In this context we should use the word “reduce and prevent” instead of “end”). The same applies to target h) when we propose to change “eliminate” for “reduce by x%” or “prevent”.
- c) reduce by x% the risk of premature mortality from non-communicable diseases (NCDs), injuries and promote mental health with strong focus on prevention [and early diagnosis](#).

### **Focus Area 4: Education and long-life learning**

We support the targets proposed by the co - chairs. Education plays a significant role in eradication of poverty. We also welcome the references to the marginalized groups, including women and persons with disabilities. As regards the concrete comment in target a) we would like to delete “for all girls and boys” as it is already understood by “universal”.

We welcome the reference to quality education and ICT training. We note that there is an important link with the private sector, markets and job creation, which should be addressed here.

