

## Meeting of the General Assembly Open Working Group on Sustainable Development Goals United Nations - New York – 17-19 June 2013

## European Union and its Member States - Speaking Points on "Health, Population dynamics"

[These address the themes of session as well as the issues raised in the background briefs]

The EU and its Member States stress the need to **integrate the work on SDGs and on a "post-2015 development agenda"**. We promote a single overarching post-2015 framework that is universally applicable and recognises that poverty eradication and sustainable development are mutually reinforcing and interlinked. The following are preliminary ideas and we are committed to listen, consider, interact and assess proposals made by others.

We thank the Technical Support Team (TST) for the issues briefs which provide a good basis for discussion.

## 1. Health

- Health is core to inclusive and sustainable development. The elaboration of the post-2015 framework should identify health as a global priority in order to address one of the cornerstones of poverty eradication and sustainable development. This is underpinned by a resolution proposed by 46 Member States of the Afro region and co-sponsored by the EU, the 35 Member States of the Americas Region, Croatia and Switzerland during the 66th session of World Health Assembly (WHA66.11, May 2013) which requests Member States to ensure that health is central to the post-2015 UN development agenda<sup>1</sup>. We further welcome the importance the High-level Panel of Eminent Persons attributes to health in its report to the UNSG.
- Health is an essential component of basic living standards and an integral part of the right to an adequate standard of living which should be granted to each individual<sup>2</sup>. Poor health can deepen poverty either through <u>user charges</u> for health services and care, or through the loss of income of a sick household member. Each year 100 million people world-wide are pushed further into poverty and 150 million suffer from catastrophic health expenditures due to the absence of social health protection mechanisms<sup>3</sup>.. Healthy populations and sustainable national health is good economics<sup>5</sup>.
- We also recognize the **impact global environmental factors** have on health. Indoor and outdoor air and chemical pollution, absence of clean drinking water and sanitation, land or water contamination and other environmental factors are responsible for as much as a quarter of the total burden of disease world-wide, and cause several millions premature deaths every year<sup>6</sup>. A holistic

Deleted: ¶

<sup>5</sup> Staff Working Document 'Investing in Health', 2013, (Europe 2020 policy framework)

<sup>&</sup>lt;sup>6</sup> WHO Fact Sheet No. 313, September 2011; TST issues paper: Health and Sustainable Development, June 2013.



<sup>1</sup> Health in the post-2015 UN development agenda, sixty-six World Health Assembly, Agenda item 14.1, 25 May 2013,<sup>2</sup> Universal Declaration of Human Rights; Communication (2013) 'Decent Life for All', Council Conclusions 'The overarching post-2015 agenda', May 2013).

 <sup>&</sup>lt;sup>3</sup> Res. A/67/81 on Global Health and Foreign Policy "Recommends that consideration be given to including universal health coverage in the discussion on the post 2015 UN Development Agenda" (OP25)
<sup>4</sup> Agenda for Change, COM(2011) 637 final; COM(2013) 'Decent Life for All', 92 final).

approach is thus important to acknowledge the cross-sectoral linkages between health and other themes, and to take into account the social, economic and environmental determinants of health.

- Human rights and equity, gender equality and women's empowerment, solidarity, governance and accountability are key principles that should be properly integrated in the elaboration of the future framework and as basis for future health sector interventions. This is underpinned by the EU values of solidarity for equitable and universal coverage of quality health services<sup>7</sup>.
- Access to basic goods and services, including health promotion, protection, prevention and health care, is essential in order to improve health outcomes and reduce burden of diseases. It is central to sustainable development and embraces its three dimensions: economic, environmental and social development.
- The elaboration of the post-2015 framework needs to address **the unfinished business related to the current health MDGs**, in particular the slow progress on maternal health and universal access to reproductive health, and embrace new global health challenges such as the growing human and economic burden of non-communicable diseases. Achieving the health-related MDGs remains crucial as a foundation for long and healthy lives and we remain particularly concerned by the unacceptably high number of maternal deaths. Health systems should pay special attention to gender equality, women's needs and rights, including combating gender-based violence.
- While impressive progress has been made on the health-related MDGs globally, the progressive reduction of inequalities remains central. **Inequities and inequalities** in access to basics health services should be addressed through **strengthening health systems** and implementing universal health coverage, and by setting policy priorities and allocation of resources according to needs, such as gender inequalities, poverty and marginalized or potentially vulnerable population groups. This should aim at delivering comprehensive quality health promotion, prevention, and services for all, without discrimination, and financial hardship.<sup>8</sup>
- We also welcome the UN-led thematic consultation on health and the discussions of the High Level Dialogue that was held in Gaborone, Botswana in March 2013.. The five suggested topics for further reflection Maximizing healthy lives; accelerating progress on the health MDG agenda; Reducing the burden of major NCDs; Ensuring universal health coverage and access; taking action on the social and environmental determinants of health are positioned at different levels and should therefore not be considered as competing concepts.
- Maximizing healthy lives reflects the broader dimensions of human well-being which depends on contributions from a range of sectors such as health, education, decent work and social protection, gender equality, food and nutrition, environment, security etc. Universal health coverage and access to comprehensive quality health services and affordable medicines constitutes the health sector specific contribution to such a broader dimension of sustainable well-being. The other three topics (accelerating progress on the health MDG agenda; reducing the burden of major NCD and taking action on the social and environmental determinants of health) should be addressed within the two overarching concepts of maximizing healthy lives and universal health coverage.
- All targets and indicators should be clear, disaggregated, measurable and easily understood by a broader public, while taking into account the capacity gaps for monitoring of targets. The inclusion

<sup>&</sup>lt;sup>8</sup>The EU Council Conclusions "Equity and Health in all policies: Solidarity in Health. 3019h Employment, Social Policy, Health and Consumer Affairs Council meeting, June 2010.



<sup>&</sup>lt;sup>7</sup> Council Conclusions on the EU Role in Global Health, 2010.

of quality and quantity indicators to support the post-2015 framework is critical. A crucial component to identifying inequities and inequalities, for making decisions about targeted programs, and for holding governments accountable, is collecting and analyzing data on disadvantaged populations.

• Long-term, predictable and sustainable financing for health needs to be based on domestic resources and the establishment of equitable prepayment and pooling mechanisms, complemented by international resources where needed. More investments for effective promotion, preventive and primary care services will reduce costs for expensive curative care. Improved governance in the sector, better coordination and reduction of inefficiency is essential for the sustainable financing of minimum level comprehensive health services.

## 2. Population Dynamics

- The Dhaka Declaration rightly noted that mega-trends such as continuing population growth, ageing, urbanisation and migration constitute, against the background of persisting inequalities, important developmental challenges and opportunities for all three pillars of sustainable development. Population dynamics is a **key cross-cutting issue** with implications for human wellbeing and sustainable development strategies at all levels. Population dynamics should be taken into account in formulating development strategies at all levels, including in planning for access to essential services such as health, education, social security, water and sanitation, sustainable energy, etc.
- Much of the growth in population will take place in developing countries where it could exacerbate poverty and add pressure on the economy, basic health and social services and the environment. Population dynamics involves amongst others changing population structures, population movements and trends in migration and urbanization, and inequalities. A sustainable urbanization should aim at strengthening democratic governance and integrated planning processes through local authorities.
- At the same time the emergence of age groups with critical development needs need to be recognised, in particular youth and older people. Population dynamics must therefore be addressed and harnessed by rights-based and gender-responsive policies, and investment in human capital throughout the life course. We remain committed to the promotion, protection and fulfilment of all human rights and to the full and effective implementation of the Beijing Platform for Action and the Programme of Action of the International Conference on Population and Development and the outcomes of their review conferences and in this context sexual and reproductive health and rights.
- Accelerating progress on the unfinished MDG-agenda, in particular on maternal health and the universal access to reproductive health (MDG 5A and 5B) as well as child health (MDG 4) is crucial for addressing population dynamics. To accelerate progress towards universal access to reproductive health, special focus is needed on sexual and reproductive health programmes, in particular for young people, which provide gender-specific information, including comprehensive sexuality education, skills, contraceptives, health service. Interlinkages between population dynamics, women empowerment and education are key: girls benefitting from quality education will not only be more likely to care for their reproductive health, but also tending to experience their first pregnancy at an older age.
- In particular migrants should be recognised as agents of development in both countries of origin and destination, for example through remittances and diaspora investment initiatives. Migrant workers also significantly contribute to bridging labour market gaps in areas such as healthcare in destination countries including low- and middle-income countries. Promoting effective migration



governance is essential to maximise the positive development impacts of migration, and minimise possible negative impacts such as brain drain. This is crucial in particular for health due to high levels of migration of health professionals. In this respect it is necessary to stress the importance of the implementation of the WHO global code of practice on the international recruitment of health personnel.

4