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### Global health and foreign policy

**Brazil, Canada, Estonia, France, Germany, Indonesia, Japan, Liberia, Luxembourg, Morocco, Norway, Senegal, South Africa, Sweden and Thailand: draft resolution**

### **Global health and foreign policy: addressing the health of the most vulnerable for an inclusive society**

*The General Assembly,*

*Recalling* its resolutions [63/33](#) of 26 November 2008, [64/108](#) of 10 December 2009, [65/95](#) of 9 December 2010, [66/115](#) of 12 December 2011, [67/81](#) of 12 December 2012, [68/98](#) of 11 December 2013, [69/132](#) of 11 December 2014, [70/183](#) of 17 December 2015 and [71/159](#) of 15 December 2016,

*Reaffirming* its resolution [70/1](#) of 25 September 2015, entitled “Transforming our world: the 2030 Agenda for Sustainable Development”, in which it adopted a comprehensive, far-reaching and people-centred set of universal and transformative Sustainable Development Goals and targets, its commitment to working tirelessly for the full implementation of the Agenda by 2030, its recognition that eradicating poverty in all its forms and dimensions, including extreme poverty, is the greatest global challenge and an indispensable requirement for sustainable development, its commitment to achieving sustainable development in its three dimensions — economic, social and environmental — in a balanced and integrated manner, and to building upon the achievements of the Millennium Development Goals and seeking to address their unfinished business,

*Reaffirming also* its resolution [69/313](#) of 27 July 2015 on the Addis Ababa Action Agenda of the Third International Conference on Financing for Development, which is an integral part of the 2030 Agenda for Sustainable Development, supports and complements it, helps to contextualize its means of implementation targets with concrete policies and actions, and reaffirms the strong political commitment to address the challenge of financing and creating an enabling environment at all levels for sustainable development in the spirit of global partnership and solidarity,



*Recalling* the Universal Declaration of Human Rights,<sup>1</sup> international humanitarian law, the International Covenant on Economic, Social and Cultural Rights<sup>2</sup> and the Constitution of the World Health Organization,<sup>3</sup>

*Reaffirming* the commitment to fully and effectively implement the Beijing Platform for Action,<sup>4</sup> the Programme of Action of the International Conference on Population and Development<sup>5</sup> and the outcomes of their review conferences, including the commitments relating to sexual and reproductive health and the promotion and protection of all human rights,

*Recognizing* that health is a precondition for and an outcome and indicator of all three dimensions — economic, social and environmental — of sustainable development and that, despite progress made, challenges in global health, including major inequities and vulnerabilities within and among countries, regions and populations, still remain and demand persistent attention,

*Underscoring* the fact that global health is also a long-term objective which is national, regional and international in scope and requires sustained attention, commitment and closer international cooperation, beyond emergencies,

*Reaffirming* the right of every human being, without distinction of any kind, to the enjoyment of the highest attainable standard of physical and mental health and to a standard of living adequate for the health and well-being of oneself and one's family, including adequate food, clothing and housing, and to the continuous improvement of living conditions, with particular attention to the alarming situation of millions of people for whom access to health-care services and medicines remains a distant goal, in particular vulnerable populations and destitute people,

*Underlining* that health is not just an end in itself, but is a means of reaching other targets under the Sustainable Development Goals of the 2030 Agenda for Sustainable Development, and noting that investments in health contribute to sustainable, inclusive economic growth, social development, environmental protection and the eradication of poverty and hunger, and to reducing inequality, and also acknowledging the reciprocal benefits between the attainment of the health Goal and the achievement of all other Goals,

*Recognizing* the commitment made in the 2030 Agenda to leave no one behind, and to endeavour to reach the furthest behind first, founded on the dignity of the human person and reflecting the principles of equality and non-discrimination, as well as to empower those who are vulnerable or in vulnerable situations and address their physical and mental health needs which are reflected in the Agenda, including all children, youth, persons with disabilities, people living with HIV/AIDS, older persons, indigenous peoples, refugees and internally displaced persons and migrants,

*Affirming* the primary responsibility of Member States to determine and promote their own path towards achieving universal health coverage that comprises universal and equitable access to quality health services and quality, essential, affordable and effective medicines for all, with particular attention to those who are vulnerable or in vulnerable situations, and that is critical to promote physical and mental health and well-being, especially through primary health care, health services and social

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<sup>1</sup> Resolution 217 A (III).

<sup>2</sup> See resolution 2200 A (XXI), annex.

<sup>3</sup> United Nations, *Treaty Series*, vol. 14, No. 221.

<sup>4</sup> *Report of the Fourth World Conference on Women, Beijing, 4–15 September 1995* (United Nations publication, Sales No. E.96.IV.13), chap. I, resolution 1, annex II.

<sup>5</sup> *Report of the International Conference on Population and Development, Cairo, 5–13 September 1994* (United Nations publication, Sales No. E.95.XIII.18), chap. I, resolution 1, annex.

protection mechanisms, including through community outreach and private sector engagement, and with the support of the international community,

*Recognizing* the importance of giving due consideration to all the rights of indigenous peoples, including the right to access, without any discrimination, all social and health services, and an equal right to the enjoyment of the highest attainable standard of physical and mental health,

*Underscoring* the need for far-reaching partnerships for global health to support the promotion of, inter alia, gender equality and women's empowerment and ensure universal access to sexual and reproductive health and women's and girls' full enjoyment of all human rights, so as to contribute to the eradication of poverty and to economic and social development, including improved health outcomes,

*Recognizing* that women and girls play a vital role as agents of development, and acknowledging that realizing gender equality and the empowerment of all women and girls is crucial to making progress across all Sustainable Development Goals and targets,

*Recognizing also* the essential contribution that older persons can continue to make to the functioning of societies and towards the implementation of the 2030 Agenda if adequate guarantees are in place, and concerned that many health systems are not sufficiently prepared to respond to the needs of the rapidly ageing population, including the need for promotive, preventive, curative, palliative and specialized care,

*Recognizing further* the positive contributions made by migrants to inclusive growth and sustainable development, and reaffirming the right of all refugees and migrants to the enjoyment of the highest attainable standard of physical and mental health,

*Recognizing* the special needs of people living in areas affected by complex humanitarian emergencies, and expressing concern that the most vulnerable in areas affected by conflicts often have no or limited access to health services, and, moreover, that attacks against medical personnel and facilities have immediate and long-term consequences for health-care systems,

*Underlining the urgency* of having strong and resilient health systems, reaching those who are vulnerable or in vulnerable situations, and capable of effectively implementing the International Health Regulations (2005),<sup>6</sup> ensuring pandemic preparedness and the prevention and detection of and response to any outbreaks,

*Recognizing* the challenge of antimicrobial resistance, which requires multisectoral actions, and the importance of the political declaration of the high-level meeting of the General Assembly on antimicrobial resistance,<sup>7</sup> including the report to be submitted by the Secretary-General for consideration by Member States by the seventy-third session of the Assembly,

*Underscoring* the importance of motivated, well-trained and appropriately equipped health professionals and health workers in decent jobs, to build a sustained and resilient health system and contribute towards the achievement of sustainable universal health coverage and the protection of health workers during emergencies,

*Recalling* the Rio Political Declaration on Social Determinants of Health, adopted at the 2011 World Conference on Social Determinants of Health, which reaffirmed that health inequities within and between countries are politically, socially and economically unacceptable, as well as unfair and largely avoidable, and noting

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<sup>6</sup> World Health Organization, document WHA58/2005/REC/1, resolution 58.3, annex.

<sup>7</sup> Resolution 71/3.

that many of the underlying determinants of health and risk factors of communicable and non-communicable diseases are associated with social and economic conditions,

*Recognizing* that coordinated health, social and economic policies are needed to address the health of the most vulnerable and marginalized, who are often victims of inequity, inequality, discrimination, stigmatization, social exclusion and violence, and are the most exposed to health risk factors, owing mostly to their living conditions, poor health literacy and lack of access to health care and other relevant services,

*Acknowledging* that the promotion of health equity and the elimination of stigma and discrimination in health-care settings are important for achieving the Sustainable Development Goals and building a more inclusive society whereby those who are vulnerable or in vulnerable situations, especially women and girls, persons with disabilities, persons living with mental health conditions or psychological disabilities, and those living with, at risk of or affected by HIV/AIDS, as well as tuberculosis, cholera and other diseases, will have a better quality of life and well-being, and in this regard taking note of the joint United Nations statement on ending discrimination in health-care settings,

*Noting* the significant role of the Foreign Policy and Global Health Initiative in promoting synergy between foreign policy and global health, as well as the contribution of the Oslo Ministerial Declaration of 20 March 2007, entitled “Global health: a pressing foreign policy issue of our time”,<sup>8</sup> which was reaffirmed, with renewed actions and commitments, in the ministerial communiqué of the Initiative, entitled “Renewing 10 years of concerted efforts and preparing for new challenges”, of 22 September 2017,<sup>9</sup>

*Recognizing* the need to revitalize the global partnership for sustainable development, which engages all stakeholders, including the private sector, civil society, the United Nations system and other actors, to mobilize all necessary financial and non-financial means to collaboratively support the efforts of Member States to achieve health-related Sustainable Development Goals, including addressing the health needs of those who are vulnerable or in vulnerable situations, and underscoring the importance of enhanced international cooperation and assistance to support the efforts of Member States to achieve health goals, implement universal access to health services and address health challenges, while taking into account different national circumstances and capacities and respecting national policies and priorities,

*Emphasizing* the importance of seeking synergies and collaboration with other relevant actors within and outside the United Nations system, such as the Global Fund to Fight AIDS, Tuberculosis and Malaria, the International Drug Purchase Facility, the Gavi Alliance, the Global Polio Eradication Initiative, the Global Financing Facility in support of Every Woman, Every Child, the Drugs for Neglected Diseases initiative, the World Bank, regional organizations, non-governmental organizations and the private sector, to address the health needs of the most vulnerable,

*Underlining* the importance of developing efficient and innovative approaches, including through the private sector, to address the health needs of the most vulnerable and to achieve universal health coverage, such as integrated community-based and people-centred health services, health investment incentives and public-private partnerships to increase health financing and develop and train the health workforce, and strengthening health capacity for early warning, risk reduction and management of national and global health risks,

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<sup>8</sup> A/63/591, annex.

<sup>9</sup> A/72/559, annex.

*Reaffirming* the right to use, to the fullest extent, the provisions contained in the World Trade Organization Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS Agreement), which provides flexibilities for the protection of public health and promotes access to medicines for all, in particular for developing countries, and the Doha Declaration on the TRIPS Agreement and Public Health, which recognizes that intellectual property protection is important for the development of new medicines and also recognizes the concerns about its effects on prices,

*Recognizing* that rapidly changing technologies, particularly digital technologies, have the potential to enhance people's access to health services, improve the responsiveness of the health system to the needs of individuals and communities and increase the quality and efficiency of health services,

*Recalling* the political declaration of the high-level meeting of the General Assembly on the prevention and control of non-communicable diseases<sup>10</sup> and the outcome document of the high-level meeting of the Assembly on the comprehensive review and assessment of the progress achieved in the prevention and control of non-communicable diseases,<sup>11</sup> and looking forward to the high-level meeting of the Assembly on non-communicable diseases to be held in 2018,

*Emphasizing* that the United Nations system has an important responsibility to assist Member States in the follow-up to and full implementation of agreements and commitments reached at the major United Nations conferences and summits, especially those focusing on health-related areas,

*Emphasizing* the primary role of the World Health Organization, as the United Nations specialized agency for health and the lead agency to support the implementation of the International Health Regulations, in fostering coordination of global health interventions to strengthen health systems and build the capacities of its member States in achieving better health outcomes, including through public health measures, health protection, including the international response to outbreaks and emergencies with health consequences, and health promotion, and addressing social, economic, behavioural and environmental determinants of health, to promote physical and mental health and well-being for all at all ages, with special attention to improving the health of the most vulnerable,

1. *Welcomes* the notes by the Secretary-General transmitting the reports of the Director General of the World Health Organization on the operationalization of the immediate actions and five-year action plan of the High-level Commission on Health Employment and Economic Growth and on global health and foreign policy, and the adoption by the World Health Assembly on 29 May 2017, at its seventieth session, of the five-year action plan for health employment and inclusive economic growth (2017–2021);

2. *Reiterates* the call for more attention to health, which is a state of complete, physical, mental and social well-being, as an important cross-cutting policy issue on the international agenda, as it is a precondition for and an outcome and indicator of all three dimensions of sustainable development, and for recognition that global health challenges require policy coherence across government and concerted, sustained and intersectoral efforts;

3. *Urges* Member States to respect, protect and promote the right to the enjoyment of the highest attainable standard of physical and mental health, with

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<sup>10</sup> Resolution 66/2, annex.

<sup>11</sup> Resolution 68/300.

particular attention given to the health needs of the most vulnerable, and to consider health in a holistic manner, including in the formulation of foreign policy;

4. *Notes with appreciation* the work of the Global Health Crises Task Force, concluded in July 2017, to support and monitor the implementation of recommendations contained in the report of the High-level Panel on the Global Response to Health Crises,<sup>12</sup> and the level 3 activation procedures for infectious disease events, for humanitarian actors in large-scale infectious disease events in humanitarian contexts, endorsed in December 2016, and requests the Secretary-General to provide periodic updates on the recommendations of the Global Health Crises Task Force, in close consultation with the Director General of the World Health Organization, with a special focus on preparedness for and the prevention of health crises;

5. *Calls upon* Member States and the United Nations system to urgently and effectively assist countries affected by the cholera epidemic in the strengthening of their national health, water and sanitation systems in order to eliminate cholera;

6. *Calls upon* Member States to accelerate progress towards the goal of universal health coverage, which implies that all people have equal access, without discrimination of any kind, to nationally determined sets of quality promotive, preventive, curative, rehabilitative and palliative basic health services needed and essential, safe, affordable, effective and quality medicines, while ensuring that the use of such services and medicines does not expose the users to financial hardship, with a specific emphasis on the poor, vulnerable and marginalized segments of the population;

7. *Encourages* Member States to promote the effective, full and meaningful participation of all, in particular those who are vulnerable or in vulnerable situations, in the design, implementation and monitoring of law, policies and programmes relevant to realizing the right of everyone to the enjoyment of the highest attainable standard of physical and mental health and to implementing the health-related Sustainable Development Goals, including strategies for universal health coverage;

8. *Calls upon* the international community and global health partners, as well as regional and national stakeholders, to support Member States in carrying out their primary responsibilities to accelerate the transition towards universal health coverage, and tackle social, economic and environmental determinants of health, as well as demographic challenges, including population ageing, provide social protection and adopt integrated, people-centred, community-based and gender-responsive health services based on human rights, which will help to empower those who are vulnerable or in vulnerable situations, enhance health equity and equality, end discrimination and create a more inclusive society;

9. *Notes* that challenges in global health still remain and demand persistent attention and that this urgently requires the fulfilment of commitments to strengthen the global partnership for development, and emphasizes in particular in this regard North-South cooperation, the importance of South-South and triangular cooperation and the exchange of best practices, as well as capacity-building and the transfer of technology on mutually agreed terms, to address health inequities in the context of poverty eradication and sustainable development, in line with national priorities;

10. *Encourages* Member States to secure sustainable financing for health research and development on emerging and re-emerging diseases, neglected tropical diseases, non-communicable diseases, including cancers and mental health, and antimicrobials, promote safe, affordable, effective and quality medicines, including antimicrobials and traditional medicines, and vaccines, enhance access to health

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<sup>12</sup> [A/70/723](#).

products, therapies and medical devices, and promote preventive and treatment interventions and diagnostics for all those in need, in particular for the most vulnerable;

11. *Calls upon* Member States to promote and strengthen, as appropriate, their dialogue with other stakeholders, including civil society, academia and the private sector, in order to maximize their engagement in and contribution to the implementation of health goals and targets through an intersectoral and multi-stakeholder approach, while at the same time safeguarding public health interests from undue influence by any form of real, perceived or potential conflict of interest, through the management of risk, the strengthening of due diligence and accountability, the promotion of policy coherence and an increase in the transparency of engagement;

12. *Encourages* the development of innovative and sustainable mechanisms to ensure necessary and sustained health financing and enhance international coordination and an enabling environment at all levels to strengthen health systems, and promote universal access to quality health services, including through partnerships with civil society and the private sector;

13. *Encourages* Governments, the United Nations system, civil society, local communities, the private sector and other stakeholders to scale up efforts on an urgent basis to achieve the goals of the Joint United Nations Programme on HIV/AIDS 2016–2021 Strategy and the 2016 Political Declaration on HIV and AIDS: On the Fast Track to Accelerating the Fight against HIV and to Ending the AIDS Epidemic by 2030<sup>13</sup> as an important prerequisite and enabler for the achievement of the Sustainable Development Goals, while recognizing the critical importance of the Joint United Nations Programme on HIV/AIDS in actively contributing to and engaging on the follow-up and review process with respect to progress on the 2030 Agenda for Sustainable Development;

14. *Urges* Member States to ensure universal access to sexual and reproductive health and reproductive rights, as agreed in accordance with the Programme of Action of the International Conference on Population and Development<sup>5</sup> and the Beijing Platform for Action<sup>4</sup> and the outcome documents of their review conferences;

15. *Notes with appreciation* the framework of priorities and guiding principles to promote the health of refugees and migrants prepared by the World Health Organization, and invites all Member States, in accordance with their national contexts, priorities and legal frameworks, to take into account the crucial importance of addressing the physical and mental health needs of refugees, migrants and their families in the development of a global compact on refugees and a global compact for safe, orderly and regular migration;

16. *Urges* Member States to develop, implement and evaluate policies and programmes that promote healthy and active ageing and the highest attainable standard of health and well-being for older persons, and to develop health care for older persons as part of primary care in the existing national health systems;

17. *Calls upon* all Member States to tackle health inequities and inequalities within and across countries through political commitment and national policies that address social, economic and environmental determinants of health, including through health promotion, disease prevention and health care, and promoting availability of and access to goods and services essential to health and well-being;

18. *Reiterates* the call upon Member States to make greater investments in and promote decent work with adequate remuneration in the health and social sectors,

<sup>13</sup> Resolution 70/266, annex.

enable safe working environments and conditions, effective retention and equitable and broad distribution of the health workforce, and strengthen capacities to optimize the existing health workforce, including through expanding rural and community-based health education and training and strengthening health professional education in both the institutional and instructional dimensions, to create a more effective and socially accountable health workforce;

19. *Urges* Member States to reinforce the protection of medical personnel and humanitarian personnel exclusively engaged in medical duties, their means of transport and equipment, and hospitals and other medical facilities, especially in armed conflict, consistent with their specific obligations under international humanitarian law, recognizing the need to enhance the protection of medical missions in order to support the restoration and provision of essential health-care services to ensure that physical and mental health needs are met for civilians affected by conflict, in particular for women and children;

20. *Encourages* greater coherence and coordination among United Nations bodies, specialized agencies and entities on matters related to global health and foreign policy, including through the consideration, where appropriate, of related actions;

21. *Requests* the Secretary-General, in close collaboration with the World Health Organization, development partners and other relevant initiatives, such as the International Health Partnership for UHC2030, to provide support to Member States, especially through a technical assistance and capacity-building programme, for the development and strengthening of the sustainability of universal health coverage at the national level with the aim of promoting access to health services for the most vulnerable;

22. *Welcomes* the convening of the World Health Organization First Global Ministerial Conference on Ending Tuberculosis in the Sustainable Development Era: A Multisectoral Response, held in Moscow on 16 and 17 November 2017, and takes note with appreciation of its outcome, which forms part of the way towards the high-level meeting of the General Assembly on tuberculosis to be held in 2018;

23. *Also welcomes* the convening of the World Health Organization Global Conference on Non-Communicable Diseases: Enhancing Policy Coherence between Different Spheres of Policymaking That Have a Bearing on Attaining Sustainable Development Goal Target 3.4 on Non-Communicable Diseases by 2030, held in Montevideo from 18 to 20 October 2017, as part of the preparations for the high-level meeting of the General Assembly on the comprehensive review and assessment of the progress achieved in the prevention and control of non-communicable diseases;

24. *Decides* to hold a high-level meeting in 2019 on universal health coverage, and requests the President of the General Assembly, in close collaboration with the Director General of the World Health Organization and in consultation with Member States, to propose options and modalities for the conduct of such a meeting, with a view to ensuring the most effective and efficient outcomes, including potential deliverables, complementing and building on existing efforts in this regard, before the end of the seventy-second session;

25. *Requests* the Secretary-General, in close collaboration with the Director General of the World Health Organization as well as other relevant international organizations, to report to the General Assembly at its seventy-third session, under the item entitled “Global health and foreign policy”, on improving international coordination and cooperation to address the health needs of the most vulnerable for the achievement of the Sustainable Development Goals.