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Global health and foreign policy

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Global health and foreign policy: strengthening the management of international health crises

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 and 69/132 of 11 December 2014,

Recalling also the Universal Declaration of Human Rights,¹ international humanitarian law, the International Covenant on Economic, Social and Cultural Rights² and the Constitution of the World Health Organization,³

Taking note of the presidential statement adopted by the Human Rights Council at its thirtieth session on promoting the right of everyone to the enjoyment of the highest attainable standard of physical and mental health through enhancing capacity-building in public health against pandemics,⁴

Recognizing that health is a precondition for and an outcome and indicator of all three dimensions 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,

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

¹ Resolution 217 A (III).

² See resolution 2200 A (XXI), annex.

³ United Nations, *Treaty Series*, vol. 14, No. 221.

⁴ [A/HRC/PRST/30/2](#).



of millions of people for whom access to medicines remains a distant goal, in particular vulnerable populations and destitute people,

Reaffirming also 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 this 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,

Recalling Goal 3 of the 2030 Agenda, which aims to ensure healthy lives and promote well-being for all at all ages,

Emphasizing the importance of building resilient societies in the context of sustainable development, poverty eradication and catastrophic events and pandemics,

Noting the role of the Foreign Policy and Global Health Initiative in promoting synergy between foreign policy and global health, as well as the Oslo Ministerial Declaration of 20 March 2007, entitled “Global health: a pressing foreign policy issue of our time”,⁵ which encouraged global engagement for health, rooted in global solidarity and shared responsibility,

Reaffirming the role of the World Health Organization as the directing and coordinating authority on international health work in accordance with its Constitution, and acknowledging the key role of the Organization and the importance of other relevant international and regional organizations in dealing with outbreaks and emergencies with health consequences, in providing support to Member States, as appropriate and upon request, in the development and implementation of preventive measures against the spread of infectious diseases and in the development of resilient health systems,

Recognizing the primary role of Member States in preparing for and responding to outbreaks of infectious disease, including those that become humanitarian crises, highlighting the critical role played by Member States, the World Health Organization as the directing and coordinating authority of international health work, the United Nations humanitarian system, regional organizations, non-governmental organizations, the private sector and other humanitarian actors in providing financial, technical and in-kind support in order to bring epidemics under control, and recognizing also the need to strengthen national health systems, including capacity-building for developing countries,

Emphasizing the important role of the World Health Organization, as the United Nations specialized agency for health, as the lead agency to support the implementation of the International Health Regulations (2005) and as the health cluster lead, in the international response to outbreaks and emergencies with health consequences, encouraging the ongoing work to reform and improve the emergency

⁵ [A/63/591](#), annex.

response capacity of the World Health Organization, as required, to meet these responsibilities, and noting with appreciation in this regard the report of the Ebola Interim Assessment Panel⁶ as well as noting the first report of the advisory group on the reform of the Organization's work in outbreaks and emergencies,

Expressing deep concern over recent outbreaks of diseases, such as Ebola virus disease and Middle East respiratory syndrome coronavirus disease, which demonstrate the potential vulnerability of national health systems to serious outbreaks of infectious diseases and the necessity of adequate global response mechanisms for health emergencies, and in this regard noting the worsening situations that can emanate from international and regional health crises and their multidimensional effects on political, social, economic, humanitarian, logistical and security spheres, especially for countries undergoing a peacebuilding process,

Noting with particular concern the unprecedented number of humanitarian crises and natural disasters that are having an impact on global health, which testify to the enormity of the challenges to which the international community is concurrently responding,

Recognizing the urgent need for an improved, more effective and better coordinated response capacity for the international community, and especially for the World Health Organization and Member States, in responding to outbreaks and emergencies with health consequences, and guided by an all-hazards approach emphasizing adaptability, flexibility and accountability, the principles of neutrality, humanity, impartiality and independence, and predictability, timeliness and country ownership,

Recognizing also the importance of the strengthening of financial resources and mechanisms, including within the World Health Organization, to ensure a timely, effective and coordinated response to outbreaks of disease,

Recalling the International Health Regulations (2005), which are contributing to global public health security by providing a framework for the coordination of the management of events that may constitute a public health emergency of international concern, stressing the importance of the adequate capacity of all countries to prevent, detect, assess, notify and respond to public health threats, and underscoring the importance of the States members of the World Health Organization abiding by these commitments and continuing to make necessary efforts towards the full implementation of the Regulations,

Underlining, in this respect, the urgency of having strong and resilient health systems capable of implementing the International Health Regulations (2005) and ensuring pandemic preparedness and the prevention and detection of and response to any eventual outbreaks, as well as the availability of motivated, well-trained and appropriately equipped health professionals and health workers,

Recognizing that investing in new health workforce employment opportunities may also add broader socioeconomic value to the global economy and national economies and contribute to the implementation of the 2030 Agenda for Sustainable Development,

⁶ World Health Organization, document [A/68/25](#), annex.

Acknowledging that malnutrition in all its forms affects people's health by, inter alia, compromising the immune system and increasing susceptibility to communicable and non-communicable diseases,

Emphasizing the importance of seeking synergies and collaboration with other relevant actors within and outside the United Nations system, including the Global Fund to Fight AIDS, Tuberculosis and Malaria, the Gavi Alliance, the Global Polio Eradication Initiative, the World Bank, non-governmental organizations and the private sector, and of including other areas, such as agriculture, when developing overall health systems including disease surveillance systems, health financing, procurement and the supply chain, as well as health workforces at the country, regional and global levels,

Welcoming the decision of the Secretary-General to appoint a high-level panel on the global response to health crises to make recommendations to strengthen national and international systems to prevent and manage future health crises, taking into account lessons learned from the response to the outbreak of Ebola virus disease in 2014, and looking forward to the report and recommendations of the high-level panel,

Recognizing the importance of addressing long-term systemic gaps in capacity to prevent, detect, protect against, control and provide a public health response to the international spread of disease,

Recalling World Health Assembly resolution WHA64.5, entitled "Pandemic influenza preparedness: sharing of influenza viruses and access to vaccines and other benefits",⁷ and underlining the importance of cooperation at the global level in fully implementing the Pandemic Influenza Preparedness Framework,

Underscoring the pressing need to build resilient national health systems and strengthen national capacities through attention to, inter alia, quality service delivery, equitable access to health services and products, health systems financing, including appropriate budgetary allocations, the health workforce, health information systems, the procurement and distribution of medicines, vaccines and technologies, sexual and reproductive health-care services and political will and responsibility in leadership and governance, and recognizing the value and importance of universal health coverage in providing access to quality health services, while ensuring that the use of these services does not expose the users to financial hardship, with a special emphasis on the members of the poor, vulnerable and marginalized segments of the population,

Emphasizing that Member States have primary responsibility for strengthening their capacity in public health to prevent, detect and respond rapidly to outbreaks of major infectious diseases and health crises, through the establishment and improvement of effective public health systems, including strategies for the training, recruitment and retention of sufficient numbers of public health personnel, while recognizing that the magnitude of the necessary response to a specific outbreak may be beyond the capabilities of many countries, in particular developing countries, as well as countries with economies in transition,

Aware that access to effective antimicrobial agents constitutes a prerequisite for most modern medicine, that hard-won gains in health and development, in

⁷ See World Health Organization, document WHA64/2011/REC/1.

particular those brought about through the health-related Millennium Development Goals, are put at risk by increasing antimicrobial resistance, and that antimicrobial resistance threatens the sustainability of the public health response to many communicable diseases, including tuberculosis, malaria and HIV/AIDS, and welcoming in this regard the global action plan on antimicrobial resistance adopted by the sixty-eighth World Health Assembly,

Recognizing that global preparedness for outbreaks of highly infectious pathogens with epidemic potential requires continuous commitment to the research and development of medicines, vaccines and diagnostics, including for emerging diseases and neglected tropical diseases, and recognizing also the need for multisectoral approaches, strengthened health systems, economic growth and sustainable development, in particular in developing countries, and improved health status and adequate nutrition,

Underlining the primary responsibility of Member States to promote universal health coverage that comprises universal and equitable access to quality health services and ensures affordable and quality service delivery, especially through primary health care and social protection mechanisms, with the support of the international community and with a view to providing access to health services for all, in particular those in vulnerable or marginalized groups or situations, and underlining also that women and children are particularly affected by disasters and outbreaks,

Underscoring the importance of enhanced international cooperation 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,

Recognizing the need to integrate a gender and life-course perspective in the international response to health crises, and recognizing also the key role of women as primary care providers in the community,

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,

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), the Doha Declaration on the TRIPS Agreement and Public Health, the decision of the General Council of the World Trade Organization of 30 August 2003 on the implementation of paragraph 6 of the Doha Declaration on the TRIPS Agreement and Public Health and, when formal acceptance procedures are completed, the amendment to article 31 of the TRIPS Agreement, as proposed by the General Council of the World Trade Organization in its decision of 6 December 2005, which provide flexibilities for the protection of public health, and in particular to promote access to medicines for all, and to encourage the provision of assistance to developing countries in this regard, and calling for broad and timely acceptance of the amendment to article 31 of the TRIPS Agreement,

Recognizing the continued importance of 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,

1. *Takes note with appreciation* of the note by the Secretary-General transmitting the report of the Director General of the World Health Organization on global health and foreign policy;⁸

2. *Urges* Member States, in accordance with their obligations under relevant provisions of international human rights law, including the right to the enjoyment of the highest attainable standard of physical and mental health, to promote equal access to health services, and calls for the development and attainment by Member States of resilient and sustainable health systems capable of responding effectively to outbreaks and emergencies and of implementing an effective response to the broader dimensions of outbreaks and emergencies that include food security and access to basic health services;

3. *Calls upon* partnerships for global health to support Member States in carrying out their primary responsibilities to accelerate the transition towards 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, especially through the promotion of primary health care, while ensuring that the use of these services does not expose the users to financial hardship, with a specific emphasis on the poor, vulnerable and marginalized segments of the population;

4. *Urges* Member States, in cooperation, as appropriate, with relevant international organizations, the International Red Cross and Red Crescent Movement and other relevant non-State actors, including Médecins sans frontières, to develop effective preventive measures to enhance and promote the safety and protection of medical and health personnel, as well as respect for their respective professional codes of ethics and scope of practice;

5. *Calls upon* Member States to strengthen support for the health workforce to enable local and regional surge capacity, as the most important basis for emergency and outbreak response, which includes ensuring the availability of adequate care and treatment facilities, essential supplies and protective equipment and strengthening national and regional capacities for disease detection and surveillance, including the provision of support for developing countries to build capacity in line with the principles of the World Health Organization Global Code of Practice on the International Recruitment of Health Personnel;⁹

6. *Encourages* Member States to secure sustainable financing for health research and development on emerging diseases and neglected tropical diseases, including Ebola virus disease, and to enhance access to health products and medical devices to address the health needs of developing countries;

⁸ [A/69/405](#).

⁹ World Health Organization, document WHA63/2010/REC/1, annex 5.

7. *Reiterates* the call on Member States¹⁰ to continue to collaborate as appropriate, on models and approaches that support the delinkage of the cost of new research and development from the prices of medicines, vaccines and diagnostics for Ebola virus disease and other emerging and neglected tropical diseases, so as to ensure their sustained accessibility, affordability and availability and to ensure access to treatment for all those in need;

8. *Commends* the regional efforts to implement action plans to ensure the containment of diseases, and welcomes the current process for the establishment of an African centre for disease control and prevention, as well as the similar initiatives around the world in line with the International Health Regulations (2005);

9. *Invites* the World Health Organization to provide technical support to Member States, upon request, in order to strengthen their capacity to deal with public health emergencies and implement the International Health Regulations (2005), with a particular focus on developing countries, in order to build resilient health systems and strengthen surveillance and preparedness measures, particularly with regard to infectious diseases;

10. *Encourages* the World Health Organization, the Food and Agriculture Organization of the United Nations and the World Organization for Animal Health to further develop their collaborative efforts and work towards a “One Health” approach at the national, regional and global levels;

11. *Calls upon* the World Health Organization, the international humanitarian system, global cluster leads and other relevant United Nations entities and non-governmental organizations to strengthen their cooperation and coordination so as to assist Member States, upon request, in effectively responding to situations in which an outbreak escalates into a humanitarian crisis;

12. *Calls upon* Member States to seek synergies and collaboration with the World Health Organization and other relevant actors in the field of health when supporting implementation of the International Health Regulations (2005) and developing overall health systems, including disease surveillance systems, health financing, procurement and the supply chain, as well as the health workforce at the national, regional and global levels;

13. *Urges* the international community to take the measures required to act quickly and effectively in global health crises and in all outbreaks and emergencies with health consequences, through a comprehensive and well-coordinated all-hazards approach;

14. *Urges* Member States to strengthen country and regional capacity in disaster risk reduction, where needed, in accordance with the Sendai Framework for Disaster Risk Reduction 2015-2030,¹¹ adopted by Member States at the Third United Nations World Conference on Disaster Risk Reduction, held in Sendai, Japan, from 14 to 18 March 2015;

15. *Calls upon* Member States, in accordance with the International Health Regulations (2005), to strengthen disease surveillance capacity and data and information flows between the local and national levels and with the World Health Organization at the country, regional and global levels to ensure early reporting and detection of outbreaks of disease and disasters, and commends in this regard

¹⁰ See World Health Organization, document EBSS/3/2015/REC/1.

¹¹ Resolution 69/283, annex II.

international efforts to assist countries to implement the Regulations, and acknowledges the critical role that the Global Outbreak Alert and Response Network can play for rapid identification and confirmation of and response to outbreaks of international importance, under the leadership of the World Health Organization;

16. *Urges* Member States to fulfil their commitment to fully implement the International Health Regulations (2005), utilizing, in this respect, North-South, South-South, triangular and bilateral cooperation as well as the exchange of best practices, and to monitor national compliance;

17. *Welcomes* the decisions made by the Executive Board of the World Health Organization at its special session on the Ebola emergency and by the sixty-eighth World Health Assembly to strengthen the global response to health emergencies, and calls upon all Member States to actively support their implementation;

18. *Calls upon* Member States, if in a position to do so, to support the initiative of the World Bank to develop a pandemic emergency financing facility towards ensuring that the world has the financial resources to quickly deploy trained health workers, equipment, medicines and whatever else is required to respond to health emergencies, along with the contingency fund of the World Health Organization;

19. *Decides* to hold a high-level meeting in 2016 on antimicrobial resistance, and requests the Secretary-General, in collaboration with the Director General of the World Health Organization, and in consultation with Member States, as appropriate, to determine options and modalities for the conduct of such a meeting, including potential deliverables;

20. *Encourages* Member States to participate actively in the dissemination, verification and validation of surveillance data and information concerning public health emergencies and, in close collaboration with the World Health Organization, to exchange information and experience in a timely and open manner on epidemics and the prevention and control of emerging and re-emerging infectious diseases that pose a risk to global public health;

21. *Calls upon* the international community and Member States to give due consideration to the importance of the management of international health crises, bearing in mind the social, economic, security and environmental implications of the policy choices and actions of Member States at all levels in their implementation of the 2030 Agenda for Sustainable Development, building upon the achievements of the Millennium Development Goals and seeking to address their unfinished business;

22. *Requests* the Secretary-General, as appropriate, in consultation with Member States, relevant international organizations and other relevant actors, to explore steps to meet the global shortfall of trained health workers, including the possibility of establishing a high-level commission on future health employment and economic growth;

23. *Also requests* the Secretary-General, in close collaboration with Member States, the Director General of the World Health Organization and the United Nations system, to submit a report on the lessons learned in the public health emergency response to and management of previous international crises with health consequences, and to transmit in 2016 and 2017 reports provided by the World Health Organization on the state of health security, taking into account deliberation by the World Health Assembly on the matter, and acknowledging that the ongoing necessity of such reports beyond 2017 can be re-evaluated.