The Health Perspective
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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 not only establish health as an overarching priority, as the Millennium Development Goal (MDG) framework did, but also ensure that health is integrated across all three dimensions of sustainable development – social, economic, and environmental. All potential sustainable development goals (SDGs) must protect and promote health and wellbeing for all people of all ages and abilities, and include health-sensitive indicators within proposed goals and targets. Thus, we strongly urge the members of the Open Working Group on Sustainable Development Goals, and all Member States and relevant stakeholders, to consider the recommendations below.

Principles for SDGs

A framework that promotes action to achieve sustainable human development and promotes human health and wellbeing should be based on the following principles:

- Universal, equitable, rights-based, and human security approaches
- A focus on the poorest and most vulnerable and marginalized populations, including women and girls, people living with and affected by HIV, people living with and affected by neglected tropical diseases (NTDs), non-communicable diseases (NCDs), sexual minorities, older people, people with disabilities including those suffering the effects of injury and migrants
- Clear and strong accountability mechanisms, with adequate and sustainable financing
- Inclusion of existing and future health issues, including the MDG priorities, and emerging global health challenges such as NCDs, mental health, road traffic injury and new and emerging infectious diseases
- Policies and programs that support health and development throughout the lifecourse, ensuring access to services to minimize the social and economic impact of experiencing a health condition.
- Active and meaningful engagement with non-governmental organizations and civil society
- Promote human rights for all, including sexual and reproductive health and rights, and ensure enabling environments for the protection of human rights

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Theme: Oceans and seas, forests, biodiversity

Environmental sustainability, particularly protecting oceans and seas and preserving biodiversity, is an important pathway to promoting human health and wellbeing. If unaddressed, the effects of climate change, including the loss of oceanic and overall environmental biodiversity, will exacerbate the negative impacts on health and amplify existing inequalities, particularly as related to nutrition.

Many people around the world depend on oceans and seas as a source of vital animal proteins as part of a nutritionally diverse diet that protects against malnutrition. Compromised water quality of oceans, and seas, caused by toxic industrial and other pollutant sources (often left unregulated), also has implications on health, given the threat of waterborne pathogens on human health, including as related to creating the conditions for the safe production of food.

Modern, intensive agricultural practices have focused on the cultivation of a limited number of crops, leading to a subsequent decline in the dietary diversity, the quality of available foods, and the increased consumption of processed foods. As a result, populations are experiencing increased rates of

malnutrition (including under-nutrition, micronutrient deficiency, and over-nutrition), and higher rates of obesity and non-communicable diseases.[1]

Recommendations

- Support the proposal by the UN TST the inclusion of specific biodiversity related targets and indicators should be integrated into SDGs on food security and nutrition, water and health;
- Call for the integration of health indicators under targets/goals that address oceans and seas, forests, biodiversity, and climate change, in order to support health impact assessments of relevant policies and programs;

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

Promoting equity, human rights and human security across all dimensions of sustainable development is central to the post-2015 framework. **Establishing equity in health must be a key part of this.** Inequalities in access to health care cause poverty, exacerbate income inequality, and hinder growth of the individual and society. Over 100 million people every year are pushed into poverty due to out-of-pocket payments for health care and related inequalities in access to health care. Charges for services or medicines, difficulties in accessing health care centers, discriminatory laws and practices within health systems, and insufficient and unevenly distributed health workforces, amongst other barriers, can prevent fulfillment of the right to health for poor people - particularly those with disabilities or chronic health conditions, and older people.

Women are particularly vulnerable to exclusion in accessing the 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, comprehensive sexuality education, access to safe abortion, and non-discriminatory HIV/AIDS services.

Health inequities extend far beyond diminished access to health services. Indeed some of the most important factors influencing the health of all populations, but especially the poorest and most vulnerable, are economic, social, and environmental. These wider determinants threaten and compromise health, and include inadequate access to education and health literacy, unhealthy workplaces and living conditions, exposure to unhealthy environments (including indoor/outdoor air pollution, secondhand smoke, lack of adequate sanitation, risk of road injury etc.), insufficient or unhealthy nutrition, and exposure to harmful risk factors (including lack of breastfeeding, lack of access to clean drinking water, harmful use of tobacco and alcohol), to name a few.

Promoting healthy equity in the post-2015 era requires a framework that:

- Promotes the principle of equity, human rights and human security across all health and health determinant-related goals and targets, to ensure all people at all stages of life have their right to health fulfilled;
- Meets the needs of all segments of the population in an equitable manner, regardless of gender, ethnicity, color, language, religion, political affiliation, national or social origin, property, disability, birth or other status, age, health status, sexual orientation;

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[1] The NCD Alliance. *Tackling Non-communicable Diseases to Enhance Sustainable Development*. June 2012, New York.
http://ncdalliance.org/sites/default/files/rfiles/NCD%20Alliance%20-%20NCDs%20and%20Sustainable%20Development%20Brief.pdf

- Prioritizes improving overall health outcomes by ensuring equitable and affordable access to essential health services without financial hardship through universal health coverage (UHC) and by addressing the social determinants of health across all sectors.

Universal health coverage (UHC) can be an important means to reduce inequalities and a practical application of an equitable approach to health in the post-2015 era. UHC, prioritizing the poor and the marginalized, can reduce healthcare-related impoverishment and preventable mortality, increase healthy life expectancies, harness economic growth for health funding, and ensure universal access to health services, regardless of gender, sexual orientation, economic class, disability, ethnicity or age. Indicators should incorporate coverage, equity, affordability, and quality.

An equally essential component of ensuring an equitable approach to health in post-2015 is through an emphasis on addressing the social determinants of health. This includes promoting women's empowerment and protecting their rights. Empowering women through education, ensuring their political participation and control and access to assets and resources, guaranteeing their sexual and reproductive rights, and eliminating all forms of violence against women and girls are essential to improving nutrition, health and wellbeing.

Further, this means ensuring an adequate institutionalized social protection system, attending to physical barriers including geographical, mobility and sensory barriers and other barriers in adherence with the right to health, such as through training health workers to ensure they are disability, age and culturally sensitive. It includes promoting healthy lifestyles and environments, and universal access to clean water and sanitation for all people, and in particular those most vulnerable to ill health.

Finally, 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 laws and practices which discriminate against women, minorities and indigenous peoples, persons with disabilities, and older persons.

Recommendations

- Call on a post-2015 development framework that **prioritizes health equity**, particularly the right to achieve the highest attainable standard of physical and mental health;
- Request the **goals prioritize reaching the poorest, hardest to reach and most marginalized**, including through tackling stigma and discrimination, removal of barriers (whether financial, physical or attitudinal) and ensuring an enabling environment for these people to access the services they need and to claim their human rights, including sexual and reproductive rights;
- Support a **focus on a life-course approach to the health continuum**, addressing promotion, prevention, treatment, rehabilitation, habilitation, and palliative care;
- Support the **inclusion of health indicators across all dimensions of the post-2015 framework** that can be disaggregated by income quintile, gender, age, location, ethnicity, disability, as well as other measures of vulnerability and marginalization, as appropriate to the country context;
- Propose that the framework include **targets specifically aimed at reducing inequalities** in health (as well as other aspects of wellbeing);
- Support a framework that **accounts for a full consideration of discrimination**, including how institutionalized discrimination impedes equitable access to health services across the whole health continuum, including across the health MDGs, sexual and reproductive rights, and emerging health challenges including NCDs, including mental health;

- Provide an **essential package of care based** on national and local needs and the burden of disease and health impairments affecting the different population groups in each country
- Meaningfully **engage civil society and local communities** in setting health priorities and in accountability mechanisms;
- Support a framework that **prioritizes investing in the health workforce**, with specific support for community health workers and community-based organizations to enable them to provide services to the most marginalized, stigmatized and hard-to-reach populations.

Theme: Conflict prevention, post-conflict peacebuilding and the promotion of durable peace, rule of law and governance

The impact of conflict is often immediately felt in the form of disrupted access to health care and services, including the decreased availability of essential medicines, diversion of resources away from the provision of health care. This impact can extend far beyond the duration of the conflict, placing support for the health system at the centre of post-conflict responses.

Conflict and fragility have a major impact on health outcomes, morbidities and mortalities, caused by the breakdown of health services. Fragile states account for very high proportions of the global numbers of undernourished children, maternal and early childhood deaths, and disease epidemics, amongst others, including through preventable causes during childbirth and due to malaria, pneumonia, diarrhea and malnutrition.

Conflict and disorder cause injuries, sensory and physical impairments, fatalities, and mental health disorders. Many of the affected people will require both long-term social and medical support. It is essential to strengthen health systems in both conflict and post-conflict states to ensure sustainable health outcomes, including bolstering emergency, surgical, maternal, and chronic disease care, rehabilitation, and mental health care. Further, the protection of health workers in conflict and other forms of crisis are critical elements of promoting human security and key elements of the post conflict peace building agenda.

Poor health status emanating from conflict can further exacerbate the marginalization of the more vulnerable sectors of the population and communities (such as women, children, persons with disabilities, older people, those with diverse sexual orientation, minorities and indigenous people), exacerbating poverty and diminishing means to combat conflict and its sources, therefore making these fragile states or conflict areas more vulnerable.

Income inequalities and inequalities in access to health determinants such as water and land are contributing factors in causing and prolonging conflict (in particular along ethnic/ religious lines). Tackling health inequalities and ensuring that no one suffers financial hardship in accessing health can help to promote well-being and stability in fragile states/ post conflict settings.