

<b>OVERARCHING HEALTH GOAL</b>	<b>Ensure healthy lives and universal health coverage at all ages</b>	
<b>SUB-GOALS:</b>	<ol style="list-style-type: none"> <li>1. Achieve the health-related Millennium Development Goals (MDGs)</li> <li>2. Address the burden of noncommunicable diseases, injuries and mental disorders</li> <li>3. Achieve Universal Health Coverage including financial risk protection</li> <li>4. Address the social and environmental determinants of health</li> </ol>	
<b>SUB-GOAL 1: Achieve the MDGs for child and maternal health, and for major communicable diseases</b>		
	<b>Targets for 2030 (except where stated, baseline 2015)</b>	
<ul style="list-style-type: none"> <li>▪ End preventable child deaths</li> <li>▪ End preventable maternal deaths</li> <li>▪ End the epidemics of HIV/AIDS, tuberculosis, malaria and other communicable diseases</li> </ul>	<ul style="list-style-type: none"> <li>▪ To be set (under-5 mortality below 20/1000 live births in all countries by 2035; neonatal mortality below 10/1000)</li> <li>▪ To be set (maternal mortality ratio below 50/100,000 by 2035)</li> <li>▪ Reduce new HIV infections by 75% and eliminate new infections among children (&lt;1% MTCT)</li> <li>▪ Reduce TB incidence rate by 80% and number of TB deaths by 90%</li> <li>▪ To be set (reduce malaria incidence and death rates by 75% by 2025; eliminate malaria from 20 countries; 80% coverage of NTD interventions; reduce viral hepatitis incidence/mortality)</li> </ul>	
<b>SUB-GOAL 2: Address the burden of noncommunicable diseases, injuries and mental illness</b>		
	<b>Targets for 2030</b>	
<ul style="list-style-type: none"> <li>▪ Reduce premature deaths from non-communicable diseases</li> <li>▪ Reduce deaths and disabilities from injuries and mental disorders</li> </ul>	<ul style="list-style-type: none"> <li>▪ Reduce mortality from cardiovascular diseases, cancer, diabetes, or chronic respiratory disease between ages 30 and 70 by one-third</li> <li>▪ Reduce road traffic deaths by 50% (others to be set)</li> </ul>	
<b>SUB-GOAL 3: Achieve Universal Health Coverage including financial risk protection</b>		
	<b>Targets for 2030</b>	
<ul style="list-style-type: none"> <li>▪ Financial risk protection</li> <li>▪ Universal coverage of quality health services</li> </ul>	<ul style="list-style-type: none"> <li>▪ Zero impoverishment due to health expenses; zero catastrophic out of pocket expenses</li> <li>▪ At least 80% coverage of services in all population groups:               <ul style="list-style-type: none"> <li>- promotion/prevention: immunization, antenatal care, family planning; sexual and reproductive health services; non-use of tobacco; safe water and sanitation; insecticide-treated nets</li> <li>- treatment/rehabilitation/palliation: skilled birth attendance; prevention, detection and treatment of HIV, TB, malaria, NTDs, viral hepatitis; treatment of hypertension, diabetes and severe mental disorders; assistive devices for persons with disabilities; palliative care; access to basic technologies and essential medicines</li> </ul> </li> </ul>	
<b>SUB-GOAL 4: Address the social and environmental determinants of health</b>		
	<b>Targets for 2030</b>	
<ul style="list-style-type: none"> <li>▪ Reduce exposure to environmental risk factors</li> </ul>	<ul style="list-style-type: none"> <li>▪ To be set (improved water sources, adequate sanitation; household use of modern fuels for cooking/heating/lighting; improved indoor air quality; cities with lower mean PM 2.5)</li> </ul>	
<ul style="list-style-type: none"> <li>▪ Improve nutrition</li> </ul>	<ul style="list-style-type: none"> <li>▪ Reduce child stunting by 50%, reduce child wasting to 5% , reduce anaemia in women of reproductive age by 60%, low birth weight by 30%; reduce child overweight by 25%; at least 50% exclusive breastfeeding 0-5 months</li> </ul>	
<ul style="list-style-type: none"> <li>▪ Promote health security</li> </ul>	<ul style="list-style-type: none"> <li>▪ To be set (implementation of International Health Regulations)</li> </ul>	

## Explanatory note

UN Member States are leading the process of developing goals and targets for the post-2015 development agenda. In support of that process, the UN Secretary General and UN agencies have initiated multiple commissions, meetings, and activities. The key output for 2014, which will inform the 69<sup>th</sup> UN General Assembly discussions, is the report of the “Open Working Group on Sustainable Development Goals”, an inclusive and transparent intergovernmental process of gathering evidence and opinion from all Member States and Observer States of the UN, plus others invited by the General Assembly or ECOSOC. The target date for the finalization of the post-2015 development agenda is September 2015.

This provisional technical summary was compiled by WHO secretariat based on a consideration of existing goals and targets in WHA resolutions, inputs from WHO programs, interactions with UN agencies and informal conversations with Member States. Its purpose is to inform discussions about possible goals, targets, and eventual indicators.

### SUB-GOAL 1: Achieve the health MDGs

There has been enormous progress in health during the era of the Millennium Development Goals (MDGs), but many targets have not yet been reached. There is a strong, international consensus that the MDGs explicitly related to health, namely 4 (reduce child mortality), 5 (improve maternal health) and 6 (combat HIV/AIDS, malaria and other diseases), should be integral to the post-2015 agenda. A new set of more ambitious targets for the coming decades have been, or are being, developed by different constituencies. Some of these are listed in the right-hand column.

### SUB-GOAL 2: Address the burden of noncommunicable diseases, injuries and mental illness

Non-communicable diseases (NCDs), mental health and injuries have become the dominant causes of morbidity and mortality globally. NCDs were not included in the MDG framework, and there is general agreement that these causes of ill health should be recognized as a priority in the post-2015 agenda. The World Health Assembly resolution on a NCD action plan forms the basis of proposed goals and targets in this document.

### SUB-GOAL 3: Achieve Universal Health Coverage including financial risk protection

The Rio Political Declaration on Social Determinants of Health, the UN Conference on Sustainable Development report entitled *The Future We Want*, and UN General Assembly resolutions in 2012 and 2013 on global health and foreign policy, all recommended that universal health coverage (UHC) be considered as part of the post-2015 agenda. UHC supports efforts to meet the MDGs, and is also a way of stepping up the response to NCDs, mental health, injuries and other emerging health challenges. UHC is seen both as a means of achieving good health outcomes progressively (through full coverage of health services, and across all stages of life) and as a desirable end in itself (through the assurance of protection from financial risk). To achieve universal health coverage is therefore of benefit to everyone.

### SUB-GOAL 4: Address the social and environmental determinants of health

To address the social and environmental causes of health, there is growing awareness of the need for action across all sectors of society, as highlighted in the Rio Political Declaration on Social Determinants of Health. One challenge is to link post-2015 goals and targets across different sectors so as to achieve better outcomes, considering health alongside, for example, gender equality, education, employment, energy, environment, and water and sanitation. So as to capture the social dimension of health, data for this and other sub-goals should be disaggregated by wealth, place of residence, disability and gender, and by other important characteristics of population groups. Disaggregated data expose the inequities in health and health services that are targets for action.