Introduction

1. The 53rd Directing Council of the Pan American Health Organization (PAHO) gave the Member States the opportunity to analyze and discuss the post-2015 sustainable development agenda in order to identify its role and how to implement it. The intention is to continue efforts to strengthen national public health systems and to address inequities in health.

Summary of the rationale

2. The United Nations (UN) Secretariat and Member States have guided the debate on the new agenda to be followed after the established deadline for the achievement of the UN Millennium Development Goals (MDGs), set for 2015. This debate has addressed the process of achieving the MDGs and the proposal for the formulation of the sustainable development goals (SDGs) presented in “The Future We Want,” a final document of the United Nations Conference on Sustainable Development (Rio+20). The United Nations has played a facilitating role in this global conversation by providing evidence-based inputs, analytical thinking, and field experience. Led by the UN, the discussion was aimed at establishing a single set of new goals, and targets to be adopted after 2015 as the new “UN Global Sustainable Development Framework and Goals.” This discussion has occurred in different settings, such as the Thematic Global Consultations, including one on health held in Botswana (2013);[1] consultations with Latin American and the Caribbean countries held in Bogotá (2013);[2] and consultations...

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among a selected group of “eminent persons.” On all of these occasions documents were prepared and presented, and final reports and proposals were put forward to the UN Secretariat and Member States. An inter-governmental “Open Working Group (OWG) on Sustainable Development Goals” led by Member States was established in January 2013 by decision of the General Assembly. The OWG convened 13 times from March 2013 to July 2014. At its last meeting, the OWG convened in New York to analyze the proposals so far, and to negotiate a common set of goals and targets. The OWG put forward a final proposal of goals and targets to be considered by the UN General Assembly in September. The OWG took into consideration different inputs from consultations and groups that had been held since their first meeting in March 2013, including the contribution from the series of seminars promoted by Mexico on economic and social inclusion, where health has been specifically analyzed. Objective 3 of the OWG proposal is health-related and is detailed in the table below.

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Proposed sustainable development objective with regard to the health

Goal 3: Ensure healthy lives and promote well-being for all at all ages.

Nine targets:

3.1 By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births.
3.2 By 2030, end preventable deaths of newborns and under-five children.
3.3 By 2030, end the epidemics of AIDS, tuberculosis, malaria, and neglected tropical diseases, and combat hepatitis, water-borne diseases, and other communicable diseases.
3.4 By 2030, reduce by one-third premature mortality from non-communicable diseases through prevention and treatment, and promote mental health and wellbeing.
3.5 Strengthen prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol.
3.6 By 2020, halve the number of global deaths and injuries from road traffic accidents.
3.7 By 2030, ensure universal access to sexual and reproductive health care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programs.
3.8 Achieve universal health coverage, including financial risk protection, access to quality essential health care services, and access to safe, effective, quality, and affordable essential medicines and vaccines for all.
3.9 By 2030, substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water, and soil pollution and contamination.

Four means of implementation:

3a. Strengthen implementation of the World Health Organization Framework Convention on Tobacco Control in all countries as appropriate.
3b. Support the research and development of vaccines and medicines for the communicable and non-communicable diseases that primarily affect developing countries, provide access to affordable essential medicines and vaccines, in accordance with the Doha Declaration on the TRIPS Agreement and Public Health, which affirms the right of developing countries to use to the full the provisions in the Trade-Related Aspects of Intellectual Property Rights regarding flexibilities to protect public health and, in particular, provide access to medicines for all.
3c. Substantially increase health financing and the recruitment, development and training and retention of the health workforce in developing countries, especially in least developed countries and small island developing states.
3d. Strengthen the capacity of all countries, particularly developing countries, for early warning, risk reduction, and management of national and global health risks.

3. The World Health Assembly adopted Resolution WHA66.11 in May 2013 requesting the Director-General to actively promote debate on health in the post-2015 sustainable development agenda, and to submit a report. WHO has participated in the process in New York through its UN Office, and by direct participation of its staff in several OWG sessions. A document summarizing the status and proposals was presented in the 134th Session of the Executive Board in January 2014 (EB134/18). Also the Sixty-seventh World Health Assembly (WHA) in May 2014 adopted Resolution WHA.67.14 ensuring a central role for health in the post-2015 sustainable development agenda.

4. PAHO has been the regional arm of this UN and WHO process. The countries of the Region have been important advocates of the inclusion of health as one of the targets since the preparation of the United Nations Conference on Sustainable Development (Rio+20). Pursuant to Resolution WHA66.11, PAHO held a panel in 2013 to discuss health in the post-2015 development agenda. The panel highlighted the conclusions of the global thematic consultation held in Botswana, and outlined the key points of a report prepared by the United Nations Secretary-General’s High-level Panel of Eminent Persons.

Results of the discussions

5. The session began with the presentation by Dr. Roberto Dondisch, Director General for Global Affairs of the Secretariat of Foreign Affairs of Mexico, on the document produced by the Open Working Group of the General Assembly on Sustainable Development Goals and submitted to the United Nations General Assembly for consideration in September 2014. He emphasized a people-centered development model; the aspects of social inclusion found in the new sustainable development program; and the role and challenges of the Member States in the process of implementing the new objectives after 2015. The President of the Executive Committee then took the floor, affirming the key role that health should play in the post-2015 development agenda within the framework of “health in all policies.” The Chief of PAHO’s Special Program on Sustainable Development and Equity in Health reported that the Council would split into three groups for simultaneous round table discussions. Discussion group 1 was made up of the countries of the English- and French-speaking Caribbean, and was chaired over by the Minister of Health of Saint Vincent and the Grenadines, instead of the First Vice President of the Directing Council. Group 2 comprised the countries of South America and was chaired by the Second Vice President of the Directing Council. Group 3 was made up of the countries of North and Central America, and was chaired by the President of the Directing Council.

6. The discussions in each group began with a brief introduction of the subject. The Minister of Health of Saint Vincent and the Grenadines presented the issue in Group 1; the Vice Minister of Health of Argentina did the same in Group 2; and the Vice Minister of Health of El Salvador was in charge of the introduction in Group 3. In general, they all emphasized that the current MDGs have not been inspiring or sufficiently ambitious, and
that the new sustainable development goals (SDGs) should reflect a multidimensional, comprehensive, and intersectoral development model, as well as forging subregional, regional, and global partnerships that support people’s aspirations. It was also mentioned that there is a need to change health paradigms in order to focus on people-centered actions, to understand health (rather than disease) as the main focus of sustainable development, and to regard equity as a key objective for achieving the highest attainable standard of health with equal opportunities for all.

Result of the deliberations on the main implications, for health systems, of the proposed sustainable development goals and how these goals could influence the PAHO Strategic Plan 2014-2019 and the national health development plans

7. During the deliberations of the Member States, it was recognized that the process of preparing the SDGs has been more democratic and participatory than was the case with the MDGs; there was also recognition of the intense work carried out in the countries of the Region of the Americas during the process. It was pointed out that great efforts had been made to ensure that the PAHO Strategic Plan 2014-2019 was consistent with the WHO Twelfth General Program of Work; that no reference had been made to the current Health Agenda for the Americas; and that resolutions had been adopted in this Directing Council that would affect the national health plans. All these documents should be used as a basis for more in-depth discussion in the countries and subregions of the Hemisphere regarding their implications for health systems. Since the results and impact of regional and national strategic plans have a specific period—generally not over six years—the SDGs should be taken into account in PAHO’s future strategic plans and in national health development plans in order to achieve the goals set for 2030. Furthermore, dialogue should be strengthened with the foreign affairs ministers of the countries participating in the UN negotiations in order to harmonize discussion agendas and outcomes at the national and international levels. PAHO was requested to disseminate the roadmap for the SDG negotiations, emphasizing the opportunities to take part in establishing health-related goals and targets.

8. The delegates said that the current proposal for the SDGs is very relevant to the Region of the Americas and mentioned the importance of certain issues addressed at this Directing Council, for example, universal access to health and universal health coverage. They also mentioned that one of the lessons learned in the process of achieving the MDGs has been the need to take a “health in all policies” approach. It is important for the goals to take into account the unique characteristics of the Region of the Americas and the diversity of its countries. It is also important to analyze not only the targets of Goal 3, but also the targets of the objectives related to the social determinants of health, for example, water and sanitation (SDG 6), inequality (SDG 10), and climate change (SDG 13).
Results of the deliberations on the common minimum set of targets to be considered by the Region and how a set of indicators can be established

9. During the deliberations by the Member States, it was emphasized that it is important for every country to have the autonomy to identify and decide which targets and indicators it will prioritize. These should be more concise, attainable, and evidence-based, so as to ensure a more practical process. Some countries said that the discussion should focus on identifying disparities within and among countries, so that intersectoral actions can be aimed at reducing differences and closing the gaps between different population groups (e.g., urban and rural populations, the rich and the poor, ethnic groups, etc.). This means emphasizing the objective of equalizing health conditions at the country and regional levels in order to move from speech to action on the SDGs, taking the “health in all policies” approach.

10. It was recognized that some of the goals of the current MDGs should be continued, for example, the reduction in maternal mortality (3.1) and infant mortality (3.2), and the reduction in epidemics of AIDS, tuberculosis, malaria, and neglected diseases (3.3). Chronic diseases (3.4) and universal health coverage (3.8) have also been included. However, the goals and targets in each country should be in harmony with the aspirations of global society, and with aspirations at the country level.

11. The delegates also said that there was an opportunity to take the great work done in the preparation of the compendium of indicators for the Strategic Plan 2014-2019 and use this as a starting point to prepare health-related indicators for the SDGs.

Results of the deliberations on how to move forward in the process of establishing the common minimum set of goals and indicators to be considered by the Region

12. The Member States noted that international coordination processes already exist through the United Nations. However, in their opinion, a consultation process should be carried out in each country and through the different subregional integration forums. The delegates said that the countries should demonstrate their political commitment to the process through appropriate budget allocations. They also specifically referred to a proposed partnership between PAHO and the Economic Commission for Latin America and the Caribbean (ECLAC), so that PAHO can spearhead and facilitate the regional process of establishing the set of regional health-related targets and indicators for the SDGs.

13. With respect to the national consultation processes, the Member States suggested considering the following elements: goals and indicators that are ambitious and attainable; ensuring the inclusion of important health issues; the need to focus the targets and indicators; correctly formulating the indicators; clearly designing equity-related indicators and instruments to measure them; implementation, monitoring, and evaluation; identifying the challenges to implementation; and confirming the need to adapt the targets to the heterogeneous context of the Region of the Americas.
14. The delegates emphasized the lack of a process for ongoing monitoring and evaluation of compliance with the MDGs and the need to ensure monitoring and evaluation in the new SDG process, as well as the need to strengthen health information systems in the countries in order to be able to measure progress.

Results of the deliberations on the next steps in the process at the regional level; whether PAHO should consider preparing a regional concept paper, strategy, or plan of action; and if so, when

15. The Member States expressed their interest in the Pan American Sanitary Bureau (the Bureau) pursuing a partnership with ECLAC to lead and facilitate the process of preparing the regional health-related indicators for the SDGs. They also requested that the Bureau prepare a document comparing the targets and indicators of the proposed SDGs with the targets and indicators of the Strategic Plan 2014-2019, the Health Agenda for the Americas, and the current mandates of PAHO. This document should highlight the challenges that could face the different countries and subregions of the Americas in the process of achieving the SDGs. The delegates also requested that the Bureau assist them in the consultation process in each country, and with subregional integration mechanisms, to ensure that the process is implemented in all countries in accordance with the WHO program. It was suggested that when the consultation process has been completed in the countries and with the subregional integration mechanisms, the Bureau should convene a regional meeting to ensure that the countries are not overloaded when implementation of the post-2015 sustainable development agenda begins.

16. Countries indicated that a concept paper, strategy, or action plan should be prepared to achieve the SDG targets and indicators after the process of agreeing on the SDGs has concluded at the United Nations.

17. Some Member States expressed the need to prepare a technical concept paper on equity in health and how to measure it, covering evaluation methodologies and tools, monitoring and feedback mechanisms, and the support that countries require to develop health information systems.

18. This document summarizes the significant points in the discussion that took place in the three groups. It is submitted for the consideration of the Directing Council, in order to determine the next steps to be taken in the coming months with respect to the post-2015 sustainable development agenda.