

THE RIGHT TO HEALTH FOR ALL POST 2015 AGENDA

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The right to achieve the highest attainable standard of health (hereafter summarised as the **right to health**) is a universal right belonging to everyone, everywhere¹. Realising the right to health is critical to achieve equitable, sustainable development and as a global public goal, health should be considered as a key priority in the post-2015 framework. Each component of a health goal should be captured with its own comprehensive sets of indicators. Moreover, the post-2015 framework must also include health-related targets and indicators under the other appropriate global objectives, as health cuts across most sectors, e.g. gender, water and sanitation.

Universal Health Coverage (UHC), ensuring that all people have access to health information and services (promotive, preventive, curative and rehabilitative), should be supported as the key instrument to realize any new health goal. The different components of UHC – quality health services, availability, accessibility and acceptability of services for everyone, everywhere and financial risk protection for all those accessing services – are all critically inter-linked. How universal access to quality health services and products is ensured will be different in every country. But it has to meet the needs of the population, adopting a gender approach and responding to the country-specific disease burden and health threats. UHC should also address the social determinants of health, such as gender inequality, income inequality, working conditions, sexual orientation, social or ethnic minorities, in driving health outcomes. Governments must ensure that no one will be left behind and specifically seek to remove measures that pose barriers for marginalized, vulnerable groups to access health services and that stigmatize and criminalize people on the basis of their HIV status, sexual orientation, gender identity, engagement in sex work and drug use.

The adoption of a **gender approach** will contribute to understand inequalities, inequities and discriminations that affect women, women's health care and health information and will contribute to identify strategies and policies to remove inequalities and discriminations. The achievement of **sexual and reproductive health rights (SRHR)** is at the core of sustainable development, contributing to each of its three pillars: social, economic and environmental. The right to bodily integrity and the ability to make decisions about fertility and sexuality, free from coercion, stigma and discrimination are cornerstones of gender equality, women's empowerment and self-determination. From the individual level to the macro level, access to SRHR information, services and supplies is a stepping stone on the pathway to economic growth and social development.

¹ Constitution of the World Health Organization, New York, WHO, 1946; Universal declaration of human rights, Geneva, United Nations, 1948: Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity (...).



Crippling barriers still exist that undermine efforts and magnify inequalities within and among countries in achieving universal access to **HIV and TB prevention, treatment, care and support**. Women and girls, for example, face a disproportionate risk and impact of HIV due to gender power imbalances. Others at higher risk, including people who use drugs, sex workers, people in prison and people from LGBT communities, often cannot access evidence-based prevention because of punitive laws, stigma and discrimination. Young people are also denied access to information on their sexual and reproductive health and rights, including HIV prevention.

IN THIS CONTEXT and taking into consideration the proposals on the next framework coming from the civil society organizations both at national and international level, WE CONSIDER RELEVANT THE FOLLOWING REFERENCES ARE INCLUDED WITHIN THE HEALTH GOAL :

- The elimination of preventable **maternal mortality and morbidity**
- **Universal health coverage (UHC)**, including financial risk protection, can be achieved paying particular attention to the most marginalized and people in vulnerable situations, guaranteeing prevention, treatment, care and support for communicable and non-communicable diseases (NCDs), mental health and wellbeing, as well as addressing the social determinants of health
- Guaranteeing equitable, universal and affordable access to prevention, treatment, care and support for all people across the life course, with a particular focus on adolescents and young people, is key to end **HIV/AIDS, tuberculosis, malaria and neglected tropical diseases**
- Achieving universal access to **sexual and reproductive health and rights (SRHR)** for all, including access to quality, comprehensive, affordable and integrated SRHR information, education and services throughout the life-cycle, including modern methods of contraception and promoting respect, protection and fulfilment of sexual and reproductive health and rights of all individuals, with a particular focus on young people, adolescents, women and marginalized as well as criminalized groups
- **Strengthening health systems:** greater and more effective investments in health systems (as well as in research and innovation) are crucial to achieve healthy life for all at all ages
- The recruitment, development, training and retention of the **health workforce** must be on a gender basis and the strengthening of the community health workforce has to be considered as part of the overall health workforce.

Key references

- Action for Global Health, Global Development Framework
- Beyond 2015 reaction to and recommendations on the OWG Focus Area Document, 30th April 2014
- EuroNGOs C2015E-IPPFEN-ASTRA Post-2015 1 pager, June 2014
- STOPAIDS position on HIV and health in the Post-2015 Framework, <http://stopaids.org.uk/wp-content/uploads/2013/11/updated-STOPAIDS-Post-2015-position-final.pdf>
- Urgent letter to the OWG by a coalition of CSOs working on global health, <http://www.icaso.org/announcements/urgent-letter-to-open-working-group-please-endorse-en-fr-ru-and-sp>.

