

WHO input to the progress report for the UNSWAP for the *Third United Nations Decade for the Eradication of Poverty (2018–2027)*

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Structural transformation, productive employment and decent work

In 2024, WHO and Georgetown University published a study examining governments' legal environment alignment with the [Global Health and Care Worker Compact](#), demonstrating that while advancements have been made, many of the world's health and care workers remain vulnerable. In 2024, WHO also released the [Fair Share for Health and Care report](#) underlining the need for enhanced gender-equitable investments in health and care work.

Expanding social protection systems to achieve inclusive poverty-reducing development

The [P4H Social Health Protection Network](#) has supported or is supporting collaborations in more than 140 countries, with the aim of accelerating progress towards universal health coverage through improving financial protection, measured by SDG indicator 3.8.2. P4H brings together 25 diverse members, including multilateral and bilateral institutions, development banks, global health funds and partnerships, and academia.

Acknowledging the contribution of Primary Health Care (PHC)-oriented health systems strengthening to health equity and inclusive poverty-reducing development, WHO continues to work with other UN agencies and partners – including through the Universal Health Coverage Partnership – for uptake of the [PHC Operational Framework](#), [PHC Measurement Framework and Indicators](#), and [Primary Health Care for Global Health Initiatives Toolbox](#). In 2024, WHO and partners launched the [Primary Health Care Country Case Study Compendium](#), featuring nearly 200 country case studies. In December 2024, WHO and ILO also collaborated for an event on strengthening social protection for health equity.

Human capability development: addressing the non-income forms of poverty

The WHO Special Initiative for Action on the Social Determinants of Health supports 8 Member States to develop multisectoral action strategies for health equity and advocates for expanding social protection policies and related services to support financial and food security, in particular for groups such as informal workers and children. WHO also collaborates with OECD, the European Commission, the World Organization of Family Doctors and other partners for evidence and country support on rural proofing, addressing socio-spatial inequities in health in rural areas.

The future of food and sustainable agriculture

Malnutrition remains a global crisis, affecting every country. At the 2025 Nutrition for Growth Summit, WHO made [13 ambitious commitments](#) across 8 key areas (including anaemia prevention and control, healthy diets, food and nutrition policy monitoring, school nutrition, obesity and wasting reduction). In tandem, the UNGA extended the [United Nations Decade of Action on Nutrition](#) (co-led by WHO and FAO), originally from 2016–2025, to 2030, maintaining the political momentum to end malnutrition in all its forms by 2030 at global, regional and national levels.

Reduce inequalities

WHO is supporting Member States to reduce health inequities through [advancing research on the measurement of unmet need due to forgone care and barriers to access](#). In 2024, WHO released a [handbook for conducting mixed methods assessments of barriers to effective coverage with health services](#), in addition to providing trainings and technical assistance. Building on the incorporation of unmet need in the WHO and World Bank [Tracking UHC Global Monitoring Report](#) (2023), regional reports further exploring this were issued in 2024: [Progress in universal health in the Americas: addressing unmet healthcare needs, gaps in coverage](#), and [Monitoring progress towards universal health coverage in Europe](#), accompanied by technical support to countries.

Acknowledging higher rates of poverty amongst Indigenous Peoples and the impact on their health, WHO is now working with partners towards a [Global Plan of Action on the Health of Indigenous Peoples](#). WHO also continues to support Member States to reduce poverty and inequality among persons with disabilities by promoting inclusive health systems, as outlined in the [Global Report on Health Equity for Persons with Disabilities](#) (2022) and operationalized through the [Health Equity for Persons with Disabilities: Guide for Action](#) (2023). WHO continued its work on gender inequality and health, for instance in relation to [malaria](#), as well as emerging global health challenges such as [antimicrobial resistance](#).

Addressing climate change and the intensification of natural hazards

Following on the WHO and FAO [guiding principles on healthy sustainable diets](#), WHO and partners are addressing the nutrition and climate nexus through the [Coalition of Action for Healthy Diets from Sustainable Food Systems for Children and All](#) (HDSFS) and the COP27 [Initiative on Climate Action and Nutrition](#) (I-CAN) in coordination/collaboration with the WHO-hosted network [Alliance for Transformative Action on Climate and Health](#) (ATACH). ATACH works towards building climate resilient and sustainable health systems and promoting the integration of the climate change and health nexus into respective national, regional, and global plans.

Fight poverty in fragile and humanitarian contexts

Acknowledging the millions of people in urgent need of life-saving health care in fragile and humanitarian contexts, WHO and partners continue to provide emergency health services and medical supplies, offer technical guidance to governments and partners, and coordinate the health response to make it more efficient and effective. With WHO as Cluster Lead Agency, [the Global Health Cluster](#) exists to support Health Clusters/Sectors in countries. There are over 900 partners at country level of which 66 partners engage strategically at global level.