

Contributions to the report of the Secretary-General on Implementation of the Third United Nations
Decade for the Eradication of Poverty (2018-2027)
Health Workforce Department, WHO – 15 April 2020

A) STRUCTURAL TRANSFORMATION, PRODUCTIVE EMPLOYMENT AND DECENT WORK IN THE CONTEXT
OF A CHANGING GLOBAL SCENARIO

Working for Health Programme

Key Programmes, Activities and Achievements:

- The joint WHO, ILO and OECD **Working for Health Programme** supports countries to invest in expanding and transforming the health and social workforce for SDG 3 (health), SDG 4 (education), SDG 5 (gender) and SDG 8 (decent work). It provides catalytic support to governments, social partners and key stakeholders to develop, finance and implement multi-sectoral national health workforce strategies to improve the supply and employment of trained health workers, create decent jobs and maximise the performance of health workers.
- A programme **Multi-Partner Trust Fund** was established in 2018 and since 2019 support is provided to fourteen countries and two regional blocks.
- The support to countries has enabled the creation of decent jobs through the development of national workforce strategies, investment plans and work environment improvements that contribute to improved access and coverage of health services, particularly in rural, remote, and underserved areas.
- Creating rural recruitment and deployment opportunities for women and youth is part of social and economic development initiatives.
- The strategic approach for regional investment is enabling harmonization of health workforce education, employment, governance and regulation, through costed and prioritised implementation and investment plans.
- The **International Platform on Health Worker Mobility** was established in 2017 to advance dialogue, knowledge and international cooperation in the area of health worker mobility and migration, including support to strengthening the implementation of the **WHO Global Code of Practice on International Recruitment of Health Personnel**.
- The **Interagency Data Exchange** established between WHO, ILO and OECD is helping to generate and use broad workforce, economic and labour market data and analysis for evidence-based policy, decision making and investment choices.

Gender and health workforce

Key Programmes, Activities and Achievements:

- The **Global Health Workforce Network Gender Equity Hub** accelerates large-scale gender-transformative progress to address gender inequities and biases in the health and social care workforce in order to achieve the SDGs.

- Report, *Delivered by Women, Led by Men*¹ (2019), highlighted several areas where structural transformation is needed. Notably, the inadequacy of global sexual harassment laws; high levels of unpaid care; gender pay gap; occupational segregation by gender; low levels of women in leadership positions.
- **WHO guideline on health policy and system support** to optimize community health worker programmes - including a recommendation to support the transition to formal work for community health workers.
- Rural health worker pipeline programmes, whereby women from rural areas are trained for practicing in rural areas (UNWomen, UNICEF, IOM, and UNFPA).

Challenges, Gaps and Policy Messages:

- An analysis of 104 countries for Gender Pay Gap and occupational segregation showed gender biases in the health sector with women being paid less than men with similar qualifications. Occupational segregation by gender was also observed, with women tending to be clustered into lower-status and low-paid sectors and specialisms in health.²
- The gender pay gap results in lower lifetime income for women, reduced access to pay-related social and health benefits (where they exist), and increased poverty for women in older age.

B) EXPANDING SOCIAL PROTECTION

Disabilities

Key Programmes, Activities and Achievements:

- **WHO'S Global Disability Action Plan 2014–2021** represents a significant step towards achieving SDG 3 for people with disabilities, with 3 objectives:
 - 1) to remove barriers and improve access to health services and programmes;
 - 2) to strengthen and extend rehabilitation including community-based rehabilitation, habilitation, assistive technology, assistance and support services;
 - 3) to strengthen the collection of relevant and internationally comparable data on disability and support research on disability and related services.

Challenges, Gaps and Policy Messages:

- In developing countries, 80% to 90% of persons with disabilities of working age are unemployed, whereas in industrialized countries the figure is between 50% and 70%. Employers need more support (both financial and guidance) in employing people with disabilities.

C) HUMAN CAPABILITY DEVELOPMENT: ADDRESSING THE NON-INCOME FORMS OF POVERTY

Universal Health Coverage

Key Activities, Programmes and Achievements

¹ <https://apps.who.int/iris/bitstream/handle/10665/311322/9789241515467-eng.pdf?ua=1>

² https://www.who.int/hrh/resources/gender_equity-health_workforce_analysis/en/

In WHO's 13th General Programme of Work, achieving universal coverage is identified as a strategic priority, with the goal of 1 billion more people benefitting from UHC by 2023.

- **Universal Health Coverage Partnership:** WHO works with Ministries of Health to promote UHC by fostering policy dialogue on strategic planning and health systems governance, developing health financing strategies and supporting their implementation, and enabling effective development cooperation in countries. Since its inception in 2011, the partnership has reached 115 member countries.
- **UHC2030:** Provides a multi-stakeholder platform to promote collaborative working in countries and globally on health systems strengthening.
 - Contributions to the 2019 UN General Assembly High-level Meeting on Universal Health Coverage: Convened partners and a broader range of health stakeholders who collaborated to produce [six Key Asks from the UHC Movement](#).
 - In April 2019, supported preparations for the **UN multi-stakeholder hearing** to inform negotiations of the Political Declaration on UHC.
 - Mobilised the private sector with the [Statement on Private Sector contributions to UHC](#), showing commitment to principles of affordability, quality and equity.
 - The UHC2030 Civil Society Engagement Mechanism (CSEM) prepared a [commentary on the 2019 Global Monitoring Report](#) calling for more and better data to identify the people who are left behind and more analysis of equity dimensions.
 - Coordinated the global **UHC Day** campaign on 12 December 2019, with civil society partners organising [more than 200 events](#) around the world.
 - Will support advocacy and accountability around the Political Declaration on UHC with the **annual State of UHC Commitment review** to be launched at UHC Day in 2020.

Key Publications:

- [Primary Health Care on the Road to Universal Health Coverage - 2019 Global Monitoring Report on UHC' \(2019\)](#)
- [Global Spending on Health: A World in Transition](#) (2019)
- [Public Spending on Health: A Closer Look at Global Trends](#) (2018)
- [From silos to sustainability: transition through a UHC lens](#) (2018)

Challenges, Gaps and Policy Messages

- Currently, at least half of the people in the world do not receive the health services they need. About 100 million people are pushed into extreme poverty each year because of out-of-pocket spending on health.

WHO AA-HA !

Key Activities, Programmes and Achievements

- WHO and other partners in the H6 Partnership and UNESCO are supporting Member States to strengthen their adolescent health programmes.
- Release of **implementation guidance for Global Accelerated Action for the Health of Adolescents (AA-HA!)** in May 2017.

- In 2019, WHO in collaboration with UNICEF, UNESCO, UNFPA, UN Women, World Bank and UNAIDS published an **AA-HAI manual** to facilitate the development of national adolescent health strategies and plans.
- WHO and UNESCO have launched a new initiative **“Making Every School a Health Promoting School”** through the development and promotion of Global Standards for Health Promoting Schools.
- WHO is developing guidelines on school health services, school food and nutrition policies, on restricting marketing of foods and non-alcoholic beverages to children.
- WHO is contributing to the development of the **International Programmatic and Technical Guidance** on out-of-school comprehensive sexuality education, led by UNFPA, and is conducting related implementation research in five countries.

Challenges, Gaps and Policy Messages

- Investment in adolescents is key investment to develop human capital and alleviate poverty by bringing a triple dividend of benefits for adolescents now, for their future adult lives, and for the next generation.

D) THE FUTURE OF FOOD AND SUSTAINABLE AGRICULTURE

Nutrition

Key Programmes, Activities and Achievements

- The WHO global nutrition targets 2025 aim to combat all forms of malnutrition, including undernutrition, overweight and obesity, as well as micronutrient deficiencies.
- Publication of:
 - **“Essential Nutrition Actions: mainstreaming nutrition through the life-course”**, to support the Member States and other actors, to intensify action in nutrition, and provide updated and comprehensive evidence-informed nutrition guidance.
 - **“Nutrition in universal health coverage”**, for proposing six concrete steps to integrate nutrition-related interventions into national health systems.
 - The WHO compendium of recommended nutrition interventions for UHC and the joint UN One Health Tool support countries in determining their own roadmaps to UHC. In July 2019 the Principals of FAO, WHO, UNHCR, UNICEF, WFP and OCHA committed to accelerate action to end malnutrition in children and develop a joint framework and roadmap for the **UN Global Plan of Action on Wasting** launched in March 2020, and its roadmap for implementation will be released in July 2020.
- Health Ministers in the WHO African Region (Brazzaville, August 2019) adopted the Strategic Plan to reduce the double burden of malnutrition in the African Region: 2019–2025, and in the WHO Eastern Mediterranean Region (Tehran, October 2019) endorsed the strategy on nutrition for the Region 2020–2030.

Challenges, Gaps and Policy Messages:

- Suboptimal diet is the single largest driver of morbidity and mortality in the world, while over 800 million individuals remain undernourished and about 2 billion suffer from micronutrient

deficiencies. The cost of treating malnutrition and nutrition-related diseases is significant, losses to the wider economy are amounting to almost US\$ 3.5 trillion annually.

- Based on the UNICEF / WHO / World Bank Group Joint Child Malnutrition Estimates (2019), approximately 149 million children under 5 suffer from stunting. Children suffering from wasting have weakened immunity, are susceptible to long term developmental delays, and face an increased risk of death. In 2019, over 47 million children under 5 were wasted and nearly 14.3 million were severely wasted.
- There are now 38.3 million overweight children globally, an increase of 8 million since 2000. Adult overweight and obesity are also rising in nearly every region and country, with 1.9 billion people overweight in 2016, of which 650 million (13% of the world's population) are obese.
- Nutrition needs to be systematically and equitably included in health sector budgets. Stronger focus on nutrition within health services could save 3.7 million lives by 2025.

Food Security & Sustainable Food Systems

Key Programmes, Activities and Achievements

- “Guiding principles for sustainable healthy diets”, published by WHO and FAO, which takes a holistic approach to diets (e.g., international nutrition recommendations; the environmental cost of food production and consumption; and the adaptability to local social, cultural and economic contexts.
- Private sector actors have been invited to produce, promote and reformulate food products consistent with a healthy diet. **The REPLACE action package** was developed and provides a strategic approach to eliminating industrially-produced trans fat from national food supplies, with the goal of global elimination by 2023.

Challenges, Gaps and Policy Messages:

- Global food production, responsible for up to a third of greenhouse gas emissions, is a major source of soil, air, and water pollution, while accounting for more than 70% of freshwater use and 40% of land use, and contributing to biodiversity loss.
- Transforming the global food system is necessary to achieve the SDGs, the Paris Climate Agreement, the Convention on Biological Diversity Aichi Conservation Targets, as well as other international sustainability targets.
- In the midst of the COVID-19 crisis, maintaining the movement of food along the food chain is an essential function to which all stakeholders along the food chain need to contribute. This is also required to maintain trust and consumer confidence in the safety and availability of food. Unsafe food containing harmful bacteria, viruses, parasites or chemical substances, causes more than 200 diseases. An estimated 600 million fall ill after eating contaminated food and 420 000 die every year.
- As the world's population grows, the intensification and industrialization of agriculture and animal production to meet increasing demand for food creates both opportunities and challenges for food safety. Climate change is also predicted to impact food safety risks associated with food production, storage and distribution.
- Under the Decade of Action of Nutrition (2016-2025) action is needed to build sustainable, resilient food systems for healthy diets, including integrating food safety issues into food systems and nutrition policy-making.
- Invite the private sector to further produce and promote food products consistent with a healthy diet; to provide appropriate content information of those nutrients; and to commit to further

reduce the exposure of children to and impact on them of the marketing of foods and beverages high in fats, sugars or salt.

- Call on governments to develop policies that build and maintain adequate food systems and infrastructures to respond to and manage food safety risks along the entire food chain, including during emergencies; to foster multi-sectoral collaboration among public health, animal health, agriculture and other sectors; to integrate food safety into broader food policies and programmes; and to think globally and act locally to ensure the food produced domestically be safe internationally.
- The first UN Food Systems Summit in 2021 needs a holistic approach, bridging biodiversity, ecosystems, climate change, and health agendas.

E) REDUCING INEQUALITIES

Reducing inequities in health service access and health status & Integrating focus on equity, gender and human rights into health sector planning

Key Programmes, Activities and Achievements

- Advancement of guidance and technical assistance for assessing barriers to health services, as called for by **WHO Global Good 196** and in keeping with the emphasis on addressing barriers in the **Global Action Plan for Good Health and Well-being**.
- WHO (2019). [*Breaking Barriers: Towards more gender-responsive and equitable health systems*](#). Geneva
- Co-authoring the UN Sustainable Development Group (2019) [Guidance for UN Country Teams on Leaving No One Behind](#) (draft version for piloting.) New York
- Research and guidance on tackling corruption as determinant of inequities in access to health services:
 - [Reinforcing the focus on anti-corruption, transparency and accountability in national health policies, strategies and plans](#). Geneva: WHO (2019).
 - [Global Health Action. Special Issue: Anti-corruption, transparency and accountability in health systems strengthening for Universal Health Coverage](#). Published by Taylor & Francis in cooperation with Umeå University, Sweden
 - [Integrating a focus on anti-corruption, transparency and accountability in health systems assessments](#). Geneva: World Health Organization; 2018.
- [Capacity-building and technical support](#) to Ministries of Health in keeping with the GER Country Support Package for Leaving No One Behind.
- WHO supports UN collaboration on gender equality through the **Issue-based Coalition on Gender Equality (IBC-Gender)**
 - The latest WHO Programme Budget has included a mainstreaming dimension on equity, gender and human rights.
 - In 2019 and 2020, progress was made towards a global network on tackling corruption in the health sector, involving WHO, Global Fund and UNDP. A workstream in WHO has been established on this.

Challenges, Gaps and Policy Messages:

- Most of the world's extreme poor live in rural areas, and experience considerably worse health across many indicators, with this being the result of lesser access to services and compounding/intersecting adverse determinants of health. Poverty reduction amongst the rural poor requires a cross-UN rural poverty reduction framework that indicates clearly the sectoral contributions. This can be used by national authorities as a guide for SDG-related planning and can also help guide the workplan orientations and cross-cutting coordination for the rural poor across UN agencies.
- There is a need to advance "Guidance for UN Country Teams on Leaving No One Behind" through a scaling up approach targeting UNCTs and a joint UN platform learning platform for staff. Also, regional approaches to scaling up use of this can be activated through the Regional Director Teams and Regional Coordination Mechanisms

Universal Health Coverage – Social Participation

Key Programmes, Activities and Achievements:

UHC2030, the CSEM and WHO are convening a **Social Participation Technical Network**, as a time-bound multi-stakeholder group to mobilize political will for social participation as a core principle in UHC reform processes and to advise on the development of a **WHO Handbook on Social Participation for UHC which will be released in mid-2020**.

Challenges, Gaps and Policy Messages:

Participatory governance can make public policy more responsive to the needs of the most vulnerable groups, yet few countries systematically and meaningfully engage populations, communities and civil society in decision-making processes.

Ageing and Long-term Care

Key Programmes, Activities and Achievements:

- **WHO iSupport** is an online training programme for caregivers of dementia that helps to facilitate equitable knowledge sharing to support long-term care and related social programs in countries.
- WHO has also established the **Global Network on Long-term care**, which is a multidisciplinary, multi-institutional network of experts on long-term care that works to foster greater inter-agency convergence and collaboration in sharing knowledge and providing technical assistance to strengthen integrated health and social care services to meet the needs of older people, their families and caregivers.
- The **ICOPE Implementation Framework** has introduced ways to integrate health and social care to maximize health outcomes.

Challenges, Gaps and Policy Messages

- Despite these efforts it is critical to push for a UN wide promotion of universal coverage of long-term care services to reduce out of pocket payments which often lead to poverty of the older person.
- WHO and other relevant UN agencies need to work together to develop guidance on how universal coverage of long-term care services will be achieved to ensure well-being and dignified life for older people.

F) ADDRESSING CLIMATE CHANGE AND THE INTENSIFICATION OF NATURAL HAZARDS

Climate change and environmental determinants of Health

Key Programmes, Activities and Achievements:

- WHO's **Global Strategy on Health, Environment and Climate Change** has been developed to address health concerns posed by global challenges such as climate change and rapid urbanization and helps to build the resilience of the poor and those in vulnerable situations.
- WHO works with a broad range of partner agencies and programmes within the UN system to ensure that health is properly represented in the international climate change agenda, including UN Environment ([UNEP](#)), the United Nations Population Fund ([UNFP](#)), the Global Environment Facility ([GEF](#)), Green Climate Fund ([GCF](#)) and NDC Partnership ([NDCP](#)).
- WHO actively contributes to UN-wide efforts to move towards climate neutrality through the UN Environment Management Group ([EMG](#)) and the [Greening the Blue initiative](#)
- WHO is part of several global coalitions such as the [Health, Environment and Climate Change coalition](#) (HECCC) and the [Climate and Clean Air Coalition](#) (CCAC).
- WHO has a joint office with the [World Meteorological Organization](#) (WMO) and a joint programme with the [Convention on Biological Diversity](#) (CBD).
- For the 2019 UN Climate Action Summit, WHO worked with Spain, Peru and the Secretary General's team to secure strong commitments in addressing air pollution and climate change together, and to invest in proven interventions for climate-resilient health systems, and in air quality monitoring and policy implementation. **The Clean Air initiative** led to commitments in 2019 from over 50 national and 80 sub-national governments, together representing more than 1 billion people.

Challenges, Gaps and Policy Messages

- By focusing on reducing environmental and social risk factors, nearly a quarter of the global burden of disease can be prevented.
- By interlinking socioeconomic development with environmental protection, health and well-being, it provides overall support for tackling determinants of health, which have increased impact on vulnerable groups, in a preventive and sustainable way.

G) FIGHTING POVERTY IN FRAGILE AND HUMANITARIAN CONTEXTS

Key Programmes, Activities and Accomplishments

- During emergencies, WHO coordinates across regions to assess, respond and mitigate risks; improve country preparedness and response; and accelerate research and development. WHO further helps ensure the continuity of services in vulnerable situations.
- In this regard, to combat COVID-19, WHO has supplied PPE and helped strengthen laboratory capacity at national level, and provided public information and online courses to build response capacity.
- In response to COVID-19, the **UN Crisis Management Team**, managed by WHO, has been triggered and continues to work across the UN system on the response.

- WHO's **Strategic Preparedness and Response Plan for COVID-19** outlines the public health measures that the international community stands ready to provide to support all countries to prepare for and respond to the outbreak.
- **Draft operational planning guidance for UN country teams:** The purpose of the document is to provide a practical guide for the UNCTs and partners to develop a country level operational plan to support national governments to prepare for and respond to COVID-19.
- The **COVID-19 SOLIDARITY Trial** is a large, international study, designed to generate the robust data needed to show which treatments are the most effective, to help expedite solutions during the pandemic.

Challenges, Gaps and Policy Messages

- COVID-19 has potential to cause three waves of morbidity and mortality: the first is due to the virus itself, the second is due to the inability of health systems to provide ongoing essential health services, and the third is linked to the socioeconomic impact. For reducing the human toll of all of these, now more than ever, fulfilling the commitments made in the *Political Declaration on Universal Health Coverage* is essential.