Commitment and closer international cooperation beyond emergency,

Reaffirming the commitment to strengthening health systems that deliver equitable health outcomes as the basis for a comprehensive approach, which requires appropriate attention to, inter alia, health financing, the health workforce, the procurement and distribution of medicines and vaccines, infrastructure, information systems, service delivery and political will in leadership and governance,

Appreciating the contribution made by civil society, including non-governmental organizations and the private sector, on issues related to foreign policy and global health,

Welcoming the ongoing partnerships between a variety of stakeholders at the local, national, regional and global levels aimed at addressing the multifaceted determinants of health and the commitments and initiatives to accelerate progress on the health-related Millennium Development Goals, including those announced at the high-level event on the Millennium Development Goals, held at United Nations Headquarters on 25 September 2008, and at the corresponding follow-up high-level event held on 23 September 2009,

Noting with concern that for millions of people throughout the world, the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, including access to medicines, still remains a distant goal and that, in many cases, especially for those living in poverty, this goal is becoming increasingly remote,

1. Notes with appreciation the report of the Secretary-General and the recommendations contained therein;
2. Recognizes the close relationship between foreign policy and global health and their interdependence, and in that regard also recognizes that global challenges require concerted and sustained efforts by the international community;
3. Stresses the importance of achieving the health-related Millennium Development Goals;
4. Welcomes the ministerial declaration adopted during the annual ministerial review held by the Economic and Social Council in 2009 which focused on the theme “Implementing the internationally agreed goals and commitments in regard to global public health”, and in that regard calls for enhanced coordination within the United Nations system;

I

Control of emerging infectious diseases and foreign policy

5. Welcomes the international coordinated actions in response to the recent influenza A (H1N1) pandemic as a good example of synergies between global health and foreign policy;
6. Emphasizes the need for further international cooperation to meet emerging, new and unforeseen threats and epidemics, such as the recent influenza A (H1N1) pandemic, and the H5N1 and other influenza viruses with human pandemic potential, and acknowledges the growing health problem of antimicrobial resistance;
7. Recognizes the need for a fair, transparent, equitable and efficient framework for the sharing of the H5N1 and other influenza viruses with human pandemic potential, and for the sharing of benefits, including access to and distribution of affordable vaccines, diagnostics and treatments, to those in need, especially in developing countries, in a timely manner;
8. Acknowledges with serious concern that current global influenza vaccine production capacity remains insufficient to meet anticipated need in pandemic situations, particularly in developing countries, and that some countries cannot develop, produce, afford or access needed vaccines and other benefits, and acknowledges also in this regard the interlinkage with production capacity of seasonal influenza vaccines and the ability to ensure their effective use;
9. Calls for the strengthening of surveillance and response capacity at the national, regional and international levels through the full implementation of the International Health Regulations;
10. Stresses the importance of finalizing any remaining elements of the Pandemic Influenza Preparedness Framework for the sharing of influenza viruses and access to vaccines and other benefits;
11. Acknowledges that communication with the public must be improved in order to increase awareness of the steps in basic hygiene that citizens can and should take in order to lessen their risk of contracting and transmitting influenza;

II

Human resources for health and foreign policy

12. Notes with concern the lack of health workers, as well as their uneven distribution within countries and throughout the world, in particular the shortage in sub-Saharan Africa, which undermines the health systems of developing countries;
13. Emphasizes the need for countries to review policies, including recruitment policies and retention policies that exacerbate this problem;
14. Underlines the importance of national and international actions, including the development of health workforce plans, which are necessary to increase universal access to health services, including in remote and rural areas, taking into account the challenges facing developing countries in the retention of skilled health personnel, and in this regard encourages the finalization of a World Health Organization code of practice on the international recruitment of health personnel;
15. Urges Member States to affirm their commitment to the training of more health workers by promoting training in accredited institutions of a full spectrum of high-quality professionals, as well as community health workers, public health workers and para-professionals, in particular through international cooperation programmes including South-South cooperation, North-South cooperation and triangular cooperation;

III

Follow-up actions

16. Urges Member States to consider health issues in the formulation of foreign policy;
17. Encourages Member States, the United Nations system, academic institutions and networks to increase their capacity for the training of diplomats and health officials, in particular those from developing countries, on global health and foreign policy, by developing best practices and