to essential medicines, antimicrobial resistance and the World Health Organization (WHO) global disability action plan 2014–2021. It adopted a series of resolutions and decisions on those and other topics. The WHO Secretariat also submitted a report on the prevention and control of non-communicable diseases (NCDs). The report included the final progress report in implementing the 2008–2013 action plan for the global strategy for the prevention and control of NCDs; progress in developing the terms of reference for the global coordination mechanism on the prevention and control of NCDs as well as those for the United Nations Inter-Agency Task Force on the Prevention and Control of Non-Communicable Diseases (see p. 1344); progress in developing a limited set of action plan indicators for the 2013–2020 WHO global action plan for the prevention and control of NCDs; and the role of WHO in the preparation, implementation and follow-up to the UN General Assembly comprehensive review and assessment in 2014 of the progress achieved in the prevention and control of NCDs (ibid.).

Global health and foreign policy

On 26 September, pursuant to General Assembly resolution 68/98 [YUN 2013, p. 1182], the Secretary-General transmitted a report [A/69/405] by the WHO Director General focusing on global health partnerships that were helping to advance collectively agreed health priorities for obtaining better health outcomes and ensuring universal health coverage.

The Director General emphasized that forging new global partnerships was one of the major transformative shifts necessary to drive the post-2015 agenda. Global public health partnerships could support Member States’ efforts in attaining better health outcomes; accelerating the transition towards universal health coverage; fostering North-South, South-South and triangular cooperation, including the transfer of technologies; preparing for and responding to emergencies and disasters, including minimizing their impact on public health. The Director General recommended that the future efforts of multi-stakeholder partnerships address critical needs that were connected to the six WHO leadership priorities agreed upon by all WHO member States: advancing universal health coverage; health-related Millennium Development Goals; addressing the challenge of NCDs; implementing the provisions of the International Health Regulations (2005) [YUN 2005, p. 1331]; increasing access to essential, high-quality and affordable medical products; and addressing the social, economic and environmental determinants of health. She also urged greater efforts to align the work of health partnerships with national health policies, strategies and plans, while ensuring country ownership and recognizing that a “one-size-fits-all” approach was not appropriate.

GENERAL ASSEMBLY ACTION

On 11 December [meeting 69], the General Assembly adopted resolution 69/132 [draft: A/69/L.35 & Add.1] without vote (agenda item 124).

Global health and foreign policy

The General Assembly,

Recalling its resolutions 63/33 of 26 November 2008, 64/108 of 10 December 2009, 65/95 of 9 December 2010, 66/115 of 12 December 2011, 67/81 of 12 December 2012 and 68/98 of 11 December 2013, and reaffirming the outcomes of the major United Nations conferences and summits which have contributed to the advancement of the global health agenda as noted in these resolutions,

Recalling also the Universal Declaration of Human Rights, international humanitarian law, the International Covenant on Economic, Social and Cultural Rights and the Constitution of the World Health Organization,

Reaffirming the right of every human being, without distinction of any kind, to the enjoyment of the highest attainable standard of physical and mental health and to a standard of living adequate for the health and well-being of oneself and one’s family, including adequate food, clothing and housing, and to the continuous improvement of living conditions,

Underscoring the responsibility of Member States to build resilient national health systems and strengthen national capacities through attention to, inter alia, service delivery, health systems financing, including appropriate budgetary allocations, the health workforce, health information systems, the procurement and distribution of medicines, vaccines and technologies, sexual and reproductive health-care services and political will in leadership and governance, and recognizing the value and importance of universal health coverage in providing access to quality health services, while ensuring that the use of these services does not expose the users to financial hardship, with a special emphasis on the members of the poor, vulnerable and marginalized segments of the population,

Recognizing that health is a precondition for and an outcome and indicator of all three dimensions of sustainable development and that, despite progress made, challenges in global health, including major inequities and vulnerabilities within and among countries, regions and populations, still remain and demand persistent attention,

Noting the role of the Foreign Policy and Global Health Initiative in promoting synergy between foreign policy and global health and that health inequities within and between countries cannot only be addressed within the health sector by technical measures, or only at the national level, but also require global engagement for health, which is rooted in global solidarity and shared responsibility,

Reaffirming the commitment to the achievement of all the Millennium Development Goals, welcoming progress made in the areas of the Goals that concern health, which are key to achieving all the Goals, and stressing the need to further support initiatives aimed at accelerating progress for their achievement,

Recalling its resolution 68/309 of 10 September 2014, in which it welcomed the report of the Open Working Group on Sustainable Development Goals and decided that the proposal of the Open Working Group contained in the