

WHO Programme of Work 2019 – 2023

Responses from the Aidsfonds and the International HIV/AIDS Alliance

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We welcome the WHO General Programme of Work 2019 – 2023 and support the five strategic priorities proposed for the next five years, which are interrelated, cross-cutting, and mutually reinforcing.

Goal 3 of the Sustainable Development Goals (SDGs) seeks to ensure health and well-being for all, at every stage of life. The goal has clear targets on epidemic control of Communicable Diseases, including HIV, TB and Malaria (3.3) as well as on Universal Health Coverage (3.8). The ambitions to provide quality and affordable health care are bold and progressive. As it stands, however, health systems, especially in developing countries, are struggling to respond to current challenges posed by global epidemics such as HIV, Malaria, TB. Even among industrialized nations, access to affordable and quality health care is not guaranteed. The attainment of SDG health related targets will require radical reprioritization of funding, improved efficacies and fundamental restructuring of systems for health.

The WHO framework on Integrated, People-Centred Health Services, which was adopted at the 2016 World Health Assembly, is a revolutionising conceptual framework for funding, managing and implementing health services. It offers a new way of thinking about health services as it builds on the many lessons learned of the global AIDS movement in working with and through communities to increase equal access to health care and reach the most left behind.

WHO must prioritize Community Action for health in the next WHO programme of work. Community Action is essential to build strong and sustainable systems for health and to contribute to the achievement of the SDGs. The recognition of community action in the programme of work is essential for WHO to achieve maximum impact. With adequate political and financial support to community action, technical guidance, and strengthening of the linkages between community-delivered health care and the public health system, better health outcomes can be achieved.

We support the approach to community health care are reflected in the Alma Ata Declaration of 1978. Communities were seen not just as beneficiaries of services, but also actors, making vital contributions to improving health. In most countries, community supports public health systems by filling critical gaps; they work effectively with key populations, women and girls, young people and marginalized populations, provide supportive services that complement clinic-based care or extend the reach of health services into the community, and help to prevent and end epidemics. They work to realize

the right to health, including sexual and reproductive health and rights, they monitor quality, address inequities in access to services, and highlight cases of discrimination.

Community engagement is also indispensable in responding to people needs in complex settings, providing life-saving assistance during emergencies as first responders. They support health and development activities within increasingly complex and protracted crises and operate on the frontline in challenging environments. During the most recent World Humanitarian Summit (WHS), held in May 2016, the consultation process reaffirmed that *“People affected by crises should be at the heart of humanitarian action...affected communities, their organizations, and their communities should be recognized as the primary agents of their preparedness, response, and recovery”*.

The Sustainable Development Goals (SDGs) represent a people-driven, transformative agenda built on the foundations of transparency, participation, and inclusion. The SDGs call for integrated solutions, which is already happening at the community level. The SDGs need the engagement of communities as agents of change for resilient and sustainable development, from service delivery to advocacy, so that no one is left behind. The very nature of community action is that it bridges silos and contributes to the overall health and wellbeing of the individuals served through a people-centred approach.

Last July 2017, in the context of the High Level Political Forum on the SDGs, 152 civil society organisations across the world endorsed a Call to Action on the “central role of community action in supporting the achievement of the sustainable development goals”. This Call to Action included four key recommendations to member states:

Community action is a key part of health systems strengthening and universal health coverage strategies and budgets. Simply expanding health coverage is not sufficient from a human rights perspective. For it to be effective, Universal Health Coverage (UHC) must be anchored in the right to health. UHC must serve the marginalised and key populations, and ensure not only that services are available but also that they can be accessed without barriers such as stigma and discrimination. Communities, including women, youth and key population-led organisations, must have access to targeted funding streams and mechanisms to ensure an effective health response to everyone in need.

Community action must be fully resourced and integrated into national health, development and SDG implementation plans. Communities are crucial partners in providing equitable, evidence-informed, gender-responsive and people-centred services to all who need them and delivering horizontal outcomes across the 2030 Agenda for Sustainable Development Agenda. Investment in community action for health and education, for example, can yield positive outcomes on several of the SDGs, including poverty, equity and gender.

Governments must support community action for more sustainable and effective results. While donors and governments come and go, communities remain the driving forces for change and long-lasting development outcomes. For this purpose, WHO must commit to data collection and providing technical guidance for community responses for health.

Community action is essential to ensuring an enabling and responsive environment for effective health responses. This includes removing key barriers, including barriers for registering and financing community-based organisations; criminalization of key populations and HIV exposure and transmission; human rights violations; stigma and discrimination based on age, gender, sexual orientation, gender identity and expression, ethnicity, and migratory status; unequal access to justice; and a general lack of democratic participation, which prevents communities from realising their full potential and disproportionately affects key populations and marginalised groups.

Adequately addressing the needs of young people, women and girls is essential to achieving the SDGs (fifth recommendation not included into the Call to Action above mentioned) . Young people, women and girls are particularly vulnerable to HIV, poor sexual and reproductive health, and other communicable diseases due to social, political, cultural, biological, and economic reasons. WHO needs to provide capacity development and technical support to women and youth organisations and other community-based groups to strengthen the critical role these initiatives play in addressing the specific needs of young people, women and girls with regard to integrated HIV/SRHR services, prevention programmes, HIV treatment adherence, empowerment and access to social protection.

We call on WHO to include support for the crucial role of Community Action in achieving better health for all as a strategic priority in the Programme of Work 2019 – 2023.