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Towards a roadmap to implement the 2030 Agenda for Sustainable Development in the WHO European Region



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Towards a roadmap to implement the 2030 Agenda for Sustainable Development in the WHO European Region

On 25 September 2015, the United Nations General Assembly adopted resolution A/RES/70/1, containing the document “Transforming our world: the 2030 Agenda for Sustainable Development”. The 2030 Agenda is a plan of action for people, the planet, prosperity, peace and partnership, which all countries and stakeholders, acting in collaboration, will implement. The Sustainable Development Goals have been in force since 1 January 2016 and will guide policy development and implementation over the next 15 years.

This document builds on the report of the WHO Secretariat entitled “Health in the 2030 Agenda for Sustainable Development”, submitted to the Sixty-ninth World Health Assembly as document A69/15, global resolutions related to Health in the 2030 Agenda for Sustainable Development, including resolution WHA69.11, and the Midterm progress report on Health 2020 implementation 2012–2016.

It focuses on the WHO European Region and highlights key opportunities for implementing the 2030 Agenda building on Health 2020.

This document is accompanied by a draft resolution that defines actions to be taken by Member States and by the WHO Regional Director for Europe.

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Introduction

1. In September 2015, Heads of State and Government gathered at the United Nations summit for the adoption of the post-2015 development agenda in New York, United States of America, and adopted General Assembly resolution A/RES/70/1, containing the summit outcome document “Transforming our world: the 2030 Agenda for Sustainable Development” (1). The resolution entered into force on 1 January 2016 and will guide policy development and implementation over the next 15 years.

2. This document builds on the report of the WHO Secretariat entitled “Health in the 2030 Agenda for Sustainable Development”, submitted to the Sixty-ninth World Health Assembly (2), global resolutions related to health in the 2030 Agenda for Sustainable Development (3,4) and the Midterm progress report on Health 2020 implementation 2012–2016 (document EUR/RC66/16).¹ It focuses on the WHO European Region, highlighting key opportunities and challenges and presenting a way forward for rapid implementation of the health aspects of the 2030 Agenda for Sustainable Development through Health 2020, the European policy framework for health and well-being.

The 2030 Agenda for Sustainable Development

3. In 2015, world leaders agreed on the 17 Sustainable Development Goals (SDGs) and the 169 targets contained in the 2030 Agenda for Sustainable Development, as well as the means for their implementation, follow-up and review. The 2030 Agenda is a plan of action for people, the planet, prosperity, peace and partnership, which all 193 Member States of the United Nations agreed to implement.

4. Five features make the 2030 Agenda transformative and render the SDGs different from the Millennium Development Goals (MDGs). The 2030 Agenda is:

- of “unprecedented scope”, tackling all sectors of government and development, including addressing the economic, environmental and social determinants of health;
- “integrated and indivisible”, meaning that goals and targets are interlinked and interdependent, requiring strong policy coherence both vertically and horizontally and a commitment to multisectoral whole-of-government and whole-of-society ways of working;
- “global in nature and universally applicable” and therefore relevant to all countries (developed and developing), while “taking into account different national realities, capacities and levels of development”;
- focused on equity and on reaching those populations that are hardest to access; in the resolution this is expressed as “no one will be left behind”: the important role of gender, equity and human rights is acknowledged throughout the SDGs,

¹ In accordance with resolution EUR/RC62/R4, the Midterm progress report on Health 2020 implementation 2012–2016, together with a draft resolution, is submitted to the 66th session of the Regional Committee in 2016. The Midterm progress report provides an overview of the actions taken by Member States from 2012 to date in implementing Health 2020 and of the work done by the Regional Office to support such actions.

providing a strong framework that connects multiple societal objectives in an integrated way, while explicitly recognizing the importance of peace and security as necessary conditions for sustainable development; and

- “inclusive”, signifying that only in partnership will it be possible to achieve the targets and goals (see Fig. 1).

5. The 2030 Agenda and its SDGs are Member State-owned, with “each Government setting its own national targets guided by the global level of ambition but taking into account national circumstances”, thereby ensuring accountability for delivering results as part of the global effort.

6. The Declaration of the 2030 Agenda provides for a complex and intensive reporting, follow-up and review process (5). At the global level, the United Nations Economic and Social Council (ECOSOC) proposed a global indicator framework containing 230 indicators for the 169 targets, including 26 indicators under SDG3 (Ensure healthy lives and promote well-being for all at all ages) (6). These will be complemented by indicators at the regional and national levels.

7. The High-level Political Forum (HLPF) on Sustainable Development under the ECOSOC will annually review the global progress towards achieving the SDGs. It will be informed by an annual progress report on the SDGs, prepared by the Secretary-General in cooperation with the United Nations system, building on the global indicator framework and data produced by national statistical systems and information collected at the regional level. It will also be informed by the Global Sustainable Development Report, building on the science–policy interface.

8. The HLPF will also be informed by Members States through their national reviews, which are “voluntary”. The reviews are suggested to include “achievements, challenges, gaps and critical success factors”, and will be “open, inclusive, participatory and transparent”. They will also be “people-centred and gender-sensitive, respect human rights and have a particular focus on the poorest, most vulnerable and those furthest behind”. They should build on “existing platforms and processes” (1). The first national voluntary reporting was held at the High-level Political Forum in July 2016, with 22 countries (nine from the European Region) presenting their national reviews. Reporting to the United Nations General Assembly is planned every four years: the first is planned for 2019.

Health and well-being in the 2030 Agenda

9. The SDGs provide for strong political commitment to public health in the European Region. Health and well-being are seen as an outcome, a determinant and an enabler of the SDGs. It is recognized that investment in health contributes to sustainable economic growth, social development, environmental protection and poverty and inequality reduction. Improved health will depend on the successful implementation of many of the targets in all SDGs. This requires strong whole-of-government and whole-of-society action for health and well-being in all of the Member States of the European Region (see Fig. 2).

Fig. 1. The 17 Sustainable Development Goals



Fig. 2. Health in the Sustainable Development Goal era



10. Paragraph 26 of the Declaration states that: “To promote physical and mental health and well-being, and to extend life expectancy for all, we must achieve universal health coverage and access to quality health care. No one must be left behind.” Universal health coverage² “implies that all people have access without discrimination to nationally determined sets of the needed promotive, preventive, curative, palliative and rehabilitative essential health services, and essential, safe, affordable, effective and quality medicines and vaccines, while ensuring that the use of these services does not expose the users to financial hardship, with a special emphasis on the poor, vulnerable, and marginalized segments of the population” (3).

11. SDG3 (Ensure healthy lives and promote well-being for all at all ages) contains 13 universally applicable targets. SDG targets 3.1, 3.2, 3.3 and 3.7, namely, those related to maternal and child health, and infectious diseases, build on the achievements and lessons of the MDGs. The remaining targets, however, are new; while they have been important health objectives in European policies for many years, they were not part of the MDGs. SDG targets 3.4, 3.5, 3.6, 3.8 and 3.9 address noncommunicable diseases, mental health and substance abuse, road traffic accidents, universal health coverage and access to quality health care, hazardous chemicals and environmental pollution; and SDG targets 3.a, 3.b, 3.c and 3.d, the so-called means of implementation, address global health security, the health workforce, access to health commodities, and research and development (see Fig. 3).

Fig. 3. SDG3 and its targets



² As set out in preambular paragraph 9 of resolution WHA69.11.

Health 2020 and the 2030 Agenda

12. Health 2020, the policy framework for the promotion of equitable health and well-being, adopted by the WHO Regional Committee for Europe in 2012 in resolution EUR/RC62/R4 (7), aims to support action across government and society to “significantly improve the health and well-being of populations, reduce health inequalities, strengthen public health and ensure people-centred health systems that are universal, equitable, sustainable and of high quality”.

13. The Health 2020 policy framework is aligned with the health and well-being aspects of the SDGs in its aim and approaches. For the Member States of the European Region, Health 2020 will act as an initial policy framework for implementation aligned with the health dimensions of the SDGs (8). Health 2020 is reinforced by a number of WHO global and regional resolutions, strategies and action plans, which will also support implementation of the 2030 Agenda.

14. Health 2020 recognizes that countries can achieve real improvements in health if they work across government to fulfil two related objectives: improving health for all and reducing health inequalities; and improving leadership and participatory governance for health. Health 2020 asserts that new forms of governance for health are needed in today’s diverse, horizontally networked, information-based societies, requiring multisectoral and multifaceted policy responses and interventions. The terms “whole-of-government” and “whole-of-society” policy development increasingly reflect this reality. These concepts are at the heart of Health 2020 and must serve as implementation concepts for the 2030 Agenda.

15. The Health 2020 policy framework is based on the need to address the determinants of health through upstream approaches with the support of the following four priority areas for policy action, which are interlinked, interdependent and mutually supportive:

- investing in health through a life-course approach and empowering people;
- tackling the major health challenges of noncommunicable and communicable diseases in the European Region;
- strengthening people-centred health systems, public health capacity and emergency preparedness, surveillance and response; and
- creating resilient communities and supportive environments.

16. The 2030 Agenda and Health 2020 both recognize the importance of strengthening health systems and building capacities for public health operations in general, health protection and promotion, and disease prevention and work to tackle the social, economic and environmental determinants of health. Moving towards universal health coverage requires strong, efficient health systems, with renewed efforts to implement people-centred solutions, while remaining resilient to economic downturns. Addressing the major determinants of health requires further strengthening of public health services.

17. In recent years, the number of countries with strengthened political commitment leading to national health policies aligned with Health 2020 has increased significantly,

and the scope has broadened to include wider issues relating to the determinants of health. Many Member States have explicitly included equity, social determinants, gender and human rights values and approaches in the design of national and local health policies and are improving their health systems. Some countries have addressed the institutional requirements needed to support whole-of-government, whole-of-society and health-in-all-policies approaches. Data collection and analysis have also improved.

18. The Health 2020 framework identifies six overarching targets and their respective indicators on which countries regularly report (9). Data on well-being in Member States of the European Region are available, and work on defining and measuring well-being and on disaggregating data, including on the cultural contexts of well-being, is ongoing in order to improve monitoring. Progress towards achieving the Health 2020 targets and their respective indicators will be formally assessed again in 2016 and will be reported on in detail at the 67th session of the Regional Committee in 2017. Any further discussions on Health 2020 targets and indicators should take into account the targets and indicators of the 2030 Agenda.

New paradigms for Health 2020 through the 2030 Agenda

19. The adoption of the SDGs presents a unique opportunity for renewing national commitments to health and well-being and harnessing intersectoral synergies to advance health priorities in the European Region.

20. Implementing the 2030 Agenda will require strong political commitment, national ownership and governance, robust planning and a delivery mechanism, financing, the development of strategic partnerships and engagement with stakeholders and citizens, as well as an accountability mechanism. The 2030 Agenda, including health and well-being, needs to be integrated into national development and national health strategies and plans. A broad range of partners should be engaged in the context of intersectoral and interagency action, and national targets will need to be established and promulgated. Adequate data, information and resources will be required, together with effective mechanisms for establishing appropriate accountability, reporting, follow-up and review processes.

Political commitment, governance and leadership for health

21. Actions needed to influence policies in other sectors to promote and protect health are fundamental. Health is a political choice. As established in the Health 2020 policy framework, improving health and well-being requires strong support and leadership, not only by health ministers, but also by Heads of State and Government and ministers across government.

22. Implementing the 2030 Agenda will require political and organizational choices and policy coherence. Political choices will need to be translated effectively into national and local strategic priorities and actions involving diverse actors and stakeholders (10). Organizational choices will be required to create capacity to sustain adequate resources and to ensure that institutional mechanisms and settings support the political choices, the multisectoral approaches and Health in All Policies (11,12). There will be a need for policy coherence between the global goals and national contexts and

among international and national economic, social and environmental policies. Examples of areas of particular relevance in which policies can have a positive impact on health include education, foreign and social policies, trade and intellectual property, sustainable energy, employment, social protection, water and sanitation, migration, food security, safety and quality, environmental protection, climate change mitigation and adaptation, and sustainable consumption and production (2). Decision-making processes will need to demonstrate transparency, accountability, participation, integrity and policy capacity (7,12).

Robust planning and delivery: a “one country, one health” development approach

23. As a result of the 2030 Agenda, each country will define its health priorities for inclusion into national or subnational development strategies and/or action plans. National development strategies can provide the context for or build on existing national health policies or provide the momentum for innovation. The alignment between national development and national health policy as a “one country, one health” development approach is important. This would specifically provide the opportunity for multisectoral action to advance health.

24. Building on national circumstances and needs and in further consideration of advancing implementation of the 2030 Agenda, priority-setting can build on Health 2020 priority areas for policy action and lessons learned in that regard. Priority-setting will be further informed by the national or local burden of disease, the scale of the problem, trends, public and sector-specific policies, available solutions, financial costs and societal interests, as well as the inclusion of global, regional and national public health goods.

25. A sound “one country, one health” development approach requires the formulation of effective policies and interventions, as well as shared planning and delivery and accountability mechanisms, to ensure that all people, across sectors and society, can contribute to improved health in the SDG era. To capitalize on the scope and the interconnectedness of the 2030 Agenda, countries will require coherent planning and implementation mechanisms at the political, policy and institutional levels. Such mechanisms serve as the central vehicle for delivery, enabling all sectors of society to orient around the national 2030 Agenda.

Engaging in new and renewed partnerships

26. The 2030 Agenda calls for a revitalized global partnership for sustainable development in order to mobilize the necessary means to ensure its implementation in a spirit of global solidarity. Engagement and partnership for health and well-being require the involvement of all sectors and parts of society. Throughout the implementation of the 2030 Agenda, ways must be found to engage communities in order to include the voices of people, communities and vulnerable populations.

27. An important issue is the participation of the private sector. Member States expressed their support for national regulatory and policy frameworks that enable

business and industry to advance sustainable development initiatives, taking into account the importance of corporate social responsibility.

28. United Nations agencies have an important role to play at the regional level by working together to provide Region-specific leadership, norms, standards, policy and expert advice, as well as a platform for the exchange of information and know-how. United Nations Development Assistance Frameworks, country cooperation strategies and biennial collaborative agreements, and their alignment, will be a vital means of implementation at the national and local levels. The United Nations is supporting the mainstreaming of SDG implementation in the European Region. The United Nations Economic Commission for Europe has set up a regional platform to exchange information. The Council of Europe, the European Commission, the Organisation for Economic Co-operation and Development (OECD) and civil society organizations are also involved in mobilizing support.

29. Subregional groupings of countries and networks, such as the Regions for Health Network, the Small Countries initiative, the South-eastern Europe Health Network and the WHO European Healthy Cities Network, can act as important flag-bearers of subnational activities and implementation success stories.

Mobilizing resources and financing

30. The financing of SDG implementation in the European Region will largely depend on the capacity of Member States to mobilize domestic resources. Member States will also need to make choices and prioritize investment in health, maximizing efficiency and effectiveness, using taxes and revenues for health and leveraging innovative models of financing (13). Competing priorities make it increasingly important to assess the cost of achieving the health goals and their targets, as well as to estimate the health benefits of action in health-related goals and targets and the cost of inaction. For a number of the health targets, “best buy” options and effective policies are available and could be used as the basis for a rapid and accelerated start.

31. In the European Region, 16 middle-income countries and one low-income country receive official development assistance (14); most European countries have incrementally reduced their dependency on external resources.

32. Several countries in the Region are major global donors in the area of global health and foreign aid (15,16,17,18,19,20,21). The Third International Conference on Financing for Development, held in Ethiopia in July 2015, adopted the Addis Ababa Action Agenda, which focuses on a global framework for financing development post-2015 (22). In this context, the SDGs provide an opportunity to define the requirements in terms of institutional arrangements for financing and the production of global public goods. The Addis Ababa Action Agenda welcomes the decision of the European Union reaffirming its collective commitment to achieving the target of a 0.7% ratio of official development assistance to gross national income within the time frame of the 2030 Agenda.

Accountability

33. Implementing the 2030 Agenda, on the basis of existing mechanisms, requires the development of good-quality, inclusive, transparent national accountability processes (both at the national and subnational levels), harmonized with existing global, regional, national and subnational policies, plans and priorities. Successful SDG implementation necessitates structured mechanisms that facilitate strengthening the link between measurement, accountability and inclusive engagement at all levels of society.

34. The focus on partnerships also raises the issue of shared accountability. The outcome document of the 2012 United Nations Conference on Sustainable Development, entitled “The future we want”, identified the need for the “active participation of regional, national and subnational legislatures and judiciaries, and all major groups” (23) while, in the 2030 Agenda, governments call on national parliaments to ensure “accountability for the effective implementation of our commitments”.

Strengthening information, research and innovation

35. The SDGs provide opportunities for innovation and the use of e-health solutions. The impact of new technologies, including information and communication technologies, and improved service provision and system performance, as well as population health monitoring, serve as examples.

36. The SDGs propose that international and regional cooperation in science, technology and innovation should be supported in order to enhance knowledge sharing, emphasizing the importance of collaboration among countries and networking mechanisms, including twinning arrangements.

Monitoring

37. The SDGs place the generation and use of evidence at the centre of their implementation and recognize that the effective utilization of health information is a vital resource for health planning, policy implementation, monitoring and evaluation. The SDG era will intensify the need for strengthened national and subnational systems for integrated monitoring of health programmes and performance. There is an immediate need to harness the 21st-century opportunities of big data and open data to address inequalities in access to quality-assured, disaggregated data and information, including equity and gender sensitive metrics.

38. While many existing reporting systems can be used to monitor individual health targets under SDG3 (and the other SDGs and targets), the 2030 Agenda provides the opportunity to rationalize reporting requirements, including those contained in numerous World Health Assembly resolutions. It is vital that the indicators developed support a broad assessment of development progress rather than focusing exclusively on achieving individual targets (2).

39. Both the 2030 Agenda and the Health 2020 frameworks recognize that the development of integrated health information systems is a strategic priority that

provides opportunities to develop the knowledge base for decision-making. To be effective, integrated health information systems must be equity sensitive and bring together the most relevant data systems, technologies, tools and stakeholders at the subnational, national and regional levels. The European Health Information Initiative and the global Health Data Collaborative (24) contribute to the harmonization and rationalization of reporting requirements among key stakeholders, including WHO, the OECD and the European Commission, thereby reducing the reporting burden on Member States and strengthening national statistical capacity.

Support from the Regional Office

40. The 2030 Agenda and Health 2020 are mutually supportive. The integrated, inclusive and indivisible nature of the SDG framework provides a new momentum for the implementation of Health 2020 across Member States in the European Region. Both frameworks adopt value- and evidence-based approaches to the full integration of health within overall development, specifically improving health and well-being through whole-of-government, whole-of-society and health-in-all-policies approaches.

41. At the regional and national levels, the 2030 Agenda provides new opportunities to promote, health and well-being in various intersectoral domains, such as gender, equity and human rights, environment, energy, employment, education, migration, food security and safety, climate change mitigation and adaptation, and sustainable consumption and production.

42. National development plans and provisions in national health policies, strategies and plans towards achieving the SDGs will need to balance the three dimensions of social, economic and environmental development, promote a life-course approach, strengthen universal health coverage, health services, workforce and financing, essential public health operations, reduce specific communicable diseases, reduce the burden of noncommunicable diseases and mental health and tackle their risk factors, improve the management of health emergencies and crises, and build resilient communities and supportive environments while leaving no one behind. Within this context, countries will define their own priorities and will be held accountable for implementing them.

43. The Regional Office will tailor its support to the specific needs of Member States in the localization and prioritization of the 2030 Agenda. It will, in particular, provide the technical support, or know-how, to Member States for including the SDGs in national health policies, strategies and plans and assist Member States in including health and well-being in national or subnational development plans, programmes and policies while supporting consistency between national health policies and development strategies. Drawing upon established practices, successes and tools, WHO will support countries in promoting more collaborative work across government sectors, advocate for the efficient use of domestic and private financing for health and well-being, and highlight the role of international public finance.

44. The Regional Office will further provide the necessary specific know-how to promote health-in-all-policies and life-course approaches, strengthen universal health coverage, health services, workforce and financing, essential public health operations, address particular communicable diseases, tackle noncommunicable diseases and their

risk factors, improve the management of health emergencies and crises, and promote resilient communities and healthy environments. Gender, equity and human rights will be dealt with as cross-cutting issues.

45. To support Member States, the Regional Office plans to develop a core package of SDG resources and tools, which will include promoting awareness raising and capacity-building, providing technical know-how on all health-related aspects of working with multiple sectors, and delivering training that develops the competencies needed to achieve intersectoral action. The SDG implementation package will build on the Health 2020 implementation package (25).

46. The Regional Office will further support monitoring and reporting by Member States through the European Health Information Initiative, subregional health information networks and evidence-informed policy networks.

47. The Regional Office will intensify its advocacy efforts for universality across government and engage fully in national and international processes to ensure that the SDGs and Health 2020 are at the forefront of political and development agendas.

48. The development of effective partnerships will be of vital importance. At the regional level, delivering as one United Nations will be further strengthened. The United Nations funds, programmes and specialized agencies present in Europe have identified health as one of the issue-based coalitions, providing a platform for the implementation of health across the SDGs and promoting advocacy, partnerships and resource mobilization, and monitoring and evaluation. The Regional Office will continue to work in partnership with the European Union agencies, the United Nations agencies, such as the Economic Commission for Europe, the OECD, the Council of Europe and civil society organizations.

49. The Regional Office will strive to integrate the health-related aspects of the SDGs into the work of existing subregional networks and partnerships, such as the Regions for Health Network, the Small Countries initiative, the South-eastern Europe Health Network and the WHO European Healthy Cities Network. It will also explore broader cooperation with stakeholders and sectors engaged in the implementation of the 2030 Agenda (26).

50. The science–policy interface for evidence-based decision-making will need to be strengthened by identifying science that integrates social, economic and environmental considerations for health policy and decision-making. This includes a focus on the economy of prevention and a country-tailored, evidence-based (cost–benefit, business case) analysis of interventions and technologies, as well as approaches on how to best achieve results.

51. The Regional Office plans to develop a roadmap for the implementation of the 2030 Agenda in consultation with Member States, major groups and stakeholders as part of that process. The roadmap will be submitted to the Regional Committee for consideration at its 67th session in 2017, consistent with the discussion on the future of Health 2020.

References³

1. Resolution [A/RES/70/1](#). Transforming our world: the 2030 Agenda for Sustainable Development. New York: United Nations General Assembly; 2015.
2. Health in the 2030 Agenda for Sustainable Development. Geneva: World Health Organization; 2016 ([A69/15](#)).
3. Resolution [WHA69.11](#). Health in the 2030 Agenda for Sustainable Development. In: Sixty-ninth World Health Assembly, Geneva, 23–28 May 2016. Resolutions. Geneva: World Health Organization; 2016.
4. Resolution [WHA69.1](#). Strengthening essential public health functions in support of the achievement of universal health coverage. In: Sixty-ninth World Health Assembly, Geneva, 23–28 May 2016. Resolutions.
5. Critical milestones towards coherent, efficient and inclusive follow-up and review at the global level. Report of the Secretary-General. New York: United Nations General Assembly; 2016 ([A/70/684](#)).
6. Report of the Inter-agency and Expert Group on Sustainable Development Goal Indicators. New York: United Nations Statistical Commission; 2016 ([E/CN.3/2016/2/Rev.1](#), Annex IV).
7. Health 2020 – the European policy framework for health and well-being. Copenhagen: WHO Regional Office for Europe; 2012 ([EUR/RC62/R4](#)).
8. Report of the second session of the Twenty-third Standing Committee of the Regional Committee for Europe. Copenhagen: WHO Regional Office for Europe; 2016 ([EUR/SC23\(2\)/REP](#)).
9. [Targets and indicators for Health 2020. Version 2](#). Copenhagen: WHO Regional Office for Europe; 2014.
10. [Better policies for sustainable development 2016: a new framework for policy coherence](#). Paris: Organisation for Economic Co-operation and Development; 2016.
11. Greer SL, Wismar M, Kosinska M. [Towards intersectoral governance: lessons learned from health system governance](#). Public Health Panorama. 2015;1(2):128–32.
12. Greer SL, Wismar M, Figueras J, editors. [Strengthening health system governance: better policies, stronger performance](#). Maidenhead: Open University Press; 2016.
13. [OECD Factbook 2015–2016: economic, environmental and social statistics](#). Paris: Organisation for Economic Co-operation and Development; 2016.

³ All references accessed on 25 July 2016.

14. [DAC List of ODA Recipients](#). In: Development finance statistics [website]. Paris: Organisation for Economic Co-operation and Development; 2016.
15. Resolution [A/RES/63/33](#). Global health and foreign policy. New York: United Nations General Assembly; 2009.
16. Resolution [A/RES/64/108](#). Global health and foreign policy. New York: United Nations General Assembly; 2010.
17. Resolution [A/RES/65/95](#). Global health and foreign policy. New York: United Nations General Assembly; 2011.
18. Resolution [A/RES/66/115](#). Global health and foreign policy. New York: United Nations General Assembly; 2012.
19. Resolution [A/RES/67/81](#). Global health and foreign policy. New York: United Nations General Assembly; 2013.
20. Resolution [A/RES/68/98](#). Global health and foreign policy. New York: United Nations General Assembly; 2014.
21. Health in foreign policy and development cooperation: public health is global health. Copenhagen: WHO Regional Office for Europe; 2010 ([EUR/RC60/R6](#)).
22. Resolution [A/RES/69/313](#). Addis Ababa Action Agenda of the Third International Conference on Financing for Development. New York: United Nations General Assembly; 2015 (Annex).
23. Resolution [A/RES/66/288](#). The future we want. New York: United Nations General Assembly; 2012.
24. [Health Data Collaborative](#) [website]. Geneva: World Health Organization; 2016.
25. [Health 2020 implementation package](#). In: Health 2020: the European policy for health and well-being [website]. Copenhagen: WHO Regional Office for Europe; 2016.
26. [WHO's engagement with non-State actors](#). In: About WHO [website]. Geneva: World Health Organization; 2016.