



**World Federation of Public Health Associations**  
Fédération mondiale des associations de santé publique  
Federación Mundial de Asociaciones de Salud Pública

## The Istanbul Declaration **HEALTH: THE FIRST HUMAN RIGHT**

*We, the 2,380 participants from 142 countries assembled at the 12th World Congress on Public Health in Istanbul from 27 April to 1 May 2009, declare and affirm as follows:*

Now is the time to make a new commitment to the health of populations. The need for improvement and maintenance of public health must now be recognized, advocated and achieved by all policy-makers and decision-takers. Protection of public health is a primary responsibility of governments at all levels, especially including heads of state and prime ministers. This implies renewed political will. It also implies a new understanding of public health as the first public good, needing adequate and therefore, increased human, financial, and other material resources.

The years 2008 and 2009 so far have been times of unprecedented and momentous social, economic, and political events. These have included linked food, fuel and financial crises. All this has occurred in the context of human-made global climate change, depletion of non-renewable sources of energy and of water, actual and potential extinction of innumerable habitats and species, and deterioration of soil, water and air quality.

These phenomena demonstrate massive structural failures in policies and systems. Social determinants are causing increased disease and ill-health. Unemployment and poverty are increasing. Nearly one billion people are hungry, living in fear of starvation. Food security is threatened as never before in recent decades, most of all in Africa and Asia. Senseless wars and conflicts are causing death, disaster and misery in many parts of the world. In the week of the Congress, an outbreak of a deadly infectious disease threatened to become pandemic. The global economic recession that began in 2008 is liable to jeopardize progress towards fulfillment of Millennium Development Goals agreed by member states of the United Nations in 2000.

This is a time of intense disturbance. We are now living in a new world, of unique challenge and also unique opportunity for those committed to public health and for everybody. The challenges we now face are as great as those that faced public health pioneers of the 19<sup>th</sup> and early 20<sup>th</sup> centuries.

Committed and sustained leadership is needed, including from young people. Now is the time for all those who affect the lives of others, working in government, industry, and in civil society, and as health care workers, academics, community and faith-based leaders, and citizens, to affirm the fundamental and elemental importance of public goods, including public health, and to assert and practice the basic human values of solidarity, sustainability, morality, justice, equity, fairness and tolerance.

***As representatives of our organizations, as health professionals and as citizens, we affirm and declare the following principles and goals. We pledge to work to achieve them.***

Good health and well-being are necessary conditions for personal, family, community, national and global social, economic, and cultural development.

Human health and well-being depend on, and are inseparable from, the health, welfare and maintenance of the living world and the biosphere.

The determinants of personal and population health are social, economic, political and environmental, as well as behavioral and biological.

Elemental needs for the world of which humans are a part, are for light and heat, and for clean air and water, fertile earth, and adequate nourishing food.

Fundamental human needs include safe shelter, nurturing parents, supportive communities, primary schooling, rewarding work, and peaceful societies.

The protection of public goods, including public health, is the prime duty and responsibility of all those responsible for governance at all level.

Equitable access to comprehensive, effective health care systems, including primary health care and public health services, is a human right.

Adequate public health systems promote health and well-being, as well as prevent disease, disabilities and their risks, throughout the lifespan.

Reduction of inequities and disparities in national and personal economic and other material resources is a prerequisite of improved public health.

Vulnerable and marginalized people are at greater risk of illness because of impoverishment of basic rights and entitlements and economic resources.

The rights and the healthy traditions and cultures of Indigenous people and communities, need to be recognized, respected, promoted and protected.

Equal rights for all, and implementation of all components of the rule of law, are essential to encourage, protect and improve public health.

Population health also depends on the safe and timely elimination of all weapons of mass destruction – nuclear, chemical, and biological.

As education needs are met, the well-being of populations will improve, and the rates, severity and duration of diseases will decrease.

The globalization of migration, transport, trade and communications signals that public health cannot be addressed in isolation or only at national level.

Improvement and maintenance of public health requires increased strong commitment and capacity for training, research and education, and action.

## FROM AGREEMENT TO ACTION

This document, including *The Istanbul Declaration*, was released to the world's media at the close of the WFPHA 12<sup>th</sup> World Congress on Public Health in Istanbul, Turkey. It will form part of the statement made by the World Federation of Public Health Associations (the Federation) to the World Health Assembly of the World Health Organization to be held in Geneva in May 2009.

Participants at the Congress now commit their associations and themselves professionally and personally to advocate this Declaration. They will act to ensure that its principles and goals will now be appropriately quantified and steadily translated into rational public policies and effective actions, in their own regions and countries, and worldwide.

National public health associations affiliated with the Federation will be invited to monitor, advance and achieve the principles and goals specified in the Declaration. The special contribution of young public health professionals, as advocated at the Istanbul Congress, is encouraged.

This work will also be done as appropriate in partnership with sister international organizations. Partnerships will be forged with other actors such as multinational organizations. We will also collaborate with other actors such as multinational organizations, including UN agencies, civil society organizations, foundation including donors, national governments, industry, the media, schools and other workplaces and institutions, health professionals, and people as community and family members and citizens.

The Federation, with its member associations, is determined to strengthen public health research and teaching, in order to improve practice and action in all communities throughout the world.

The Federation is already committed to strengthening its capacity and resources. It is now also committed to monitor and evaluate the Declaration, its public impact, and progress towards quantifying and achieving its principles and goals. This will be reflected in the Federation's annual reports, and those of its member associations. Progress will also be discussed at annual meetings of the Federation, and published in leading public health journals.

The Declaration will be reviewed, updated and revised annually, and at the 13<sup>th</sup> World Congress on Public Health to be held in Addis Ababa, Ethiopia in 2012, to be hosted by the Ethiopian Public Health Association.

Sources that have informed and influenced the **Declaration\***

- 1948 Universal Declaration of Human Rights (UN)
- 1978 Declaration of Alma Ata – Health for All (WHO)
- 1982 Ottawa Charter for Health Promotion
- 1989 Convention of the Rights of the Child (UN)
- 1997 Jakarta Declaration on Leading Health Promotion to the 21<sup>st</sup> Century
- 2000 Millennium Development Goals (UN)
- 2001 The Doha Declaration on the TRIPS Agreement and Public Health (WTO)
- 2001 The Indaba Declaration on Sustainable Development (WSSD)
- 2002 Calcutta Declaration on Public Health (WHO South-East Asia)
- 2005 The Giessen Declaration (IUNS)
- 2005 The Bangkok Charter for Health Promotion in a Changing World
- 2006 The Rio Declaration on Public Health (11<sup>th</sup> WFPHA Congress)
- 2008 World Health Report. Primary Health Care: Now More Than Ever (WHO)
- 2008 Report of the Commission on Social Determinants of Health (WHO)
- 2009 The Social Causes of Health Inequities in Brazil (Fiocruz)
- 2009 Child Undernutrition in Developing Countries (DANIDA)

**Comment [GC1]:**

Morgen please add others – up to 10-15 more

Missing: documents from the USA, China, Africa, Middle East

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\* This is a working document and will be expanded and updated

## **The World Federation of Public Health Associations**

### **Vision**

To lead the quest for a healthy global society

### **Mission**

WFPHA is an international nongovernmental, multi-professional and civil society organization, dedicated to promoting and protecting global public health.

### **Values**

#### *Right to health*

We hold that health is a fundamental human right and a public good.

#### *Social justice*

We advocate for equity and non-discrimination, and the elimination of health disparities.

#### *Diversity and inclusion*

We promote a global public health perspective that includes diverse social and cultural backgrounds, ethnicity, race, gender, sexual orientation, and disability.

#### *Partnership*

We use partnership as the basis for mutual learning and capacity building.

#### *Ethical conduct*

We believe in the ethical practice of public health for individuals and populations.

The 12th World Congress on Public Health was held in Istanbul between 27 April and 1 May 2009, under the auspices of the World Federation of Public Health Associations (WFPHA), and the hosts, the Turkish Public Health Association. The next Congress will be held in Addis Ababa in 2012, hosted by the Ethiopian Public Health Association.

Founded in 1967, with offices in Geneva and Washington DC, the WFPHA represents more than 70 national and regional public health associations, representing over 200,000 public health professionals. The WFPHA enjoys formal relations status with the World Health Organization

The current President of the WFPHA is Professor Paulo Marchiori Buss of Brazil. Former and future Presidents come from Canada, Switzerland, Mexico, Bangladesh, and Germany.

Present at the Istanbul congress, were Ministers of Health and other leaders from UN and other international agencies, national government, industry, non-governmental organizations. These international organizations present at the Istanbul Congress included the International Union of Health Promotion and Education, International Association of Public Health Institutes, Biological and Toxin Weapons Convention, Comprehensive Test Ban Treaty Organization, Food and Agriculture Organization, Global Health Workforce Alliance, Green Cross International, Health Care Without Harm, International Federation of Medical Students, International Labor Organization, International Organization for Migration, International Pharmaceutical Federation, International Union of Health Promotion and Education, Organization for the Prohibition of Chemical Weapons, United Nations Children's Fund, United Nations Development Program, United Nations Population Fund World Bank, World Health Organization, World Justice Forum, and the World Veterinary Association.

## Themes of the Istanbul congress

*Themes of sessions and presentations at the 12th WFPHA Congress included, but were not confined to, the following. National and regional associations are encouraged to make progress towards realizing the goals specified or implied here, in association with one another and with other actors.*

**Comment [GC2]:**

Morganb Dr Buss says please start with the list of themes of all plenary presentataations, as a first list, Then contonmue with the rest.

Making a difference in global public health: education, practice and research  
Revisiting primary health care  
Millennium Development Goals  
Social determinants of health  
Public goods as the first priority of governments  
Universal basic health services and primary health care  
Development measured in terms of freedom and health  
Need for the rule of law and for independent judiciaries  
The use of law and regulation to protect public health  
Reduction of air and water pollution  
Universal assured food and water security  
Increase in use of renewable energy  
Halting of increase in the global human population  
Control of precipitate urbanization  
Absolute and relative reduction of slum dwellers  
Reduction of inequities between and within nations  
Reduction of external debt of impoverished nations  
Reduction and eventual abolition of unfair terms of trade  
Secure control and elimination of nuclear weapons  
Slowing and halting of climate change  
Toleration of all cultures and faiths  
Protection of the rights of first nations  
Universal basic primary education  
Promotion of electronic means to strengthen democracy  
Protection of primary health care services as public goods  
Rapid increase in availability of essential drugs  
Universal available vaccination  
Cities designed to encourage walking and cycling  
Equal rights and rewards for women  
Reduction of prison populations  
Safe elimination of weapons of mass destruction  
Outlawing of pre-emptive wars and of land mines  
Outlawing of children used as soldiers  
Sharp reduction of extreme impoverishment  
Containment of childhood obesity and diabetes  
Freedom for children from marketing of harmful products  
Sharp increase in exclusive breastfeeding for six months  
Narrowing of relative rates of young child mortality  
Halt in incidence of disabling and deadly chronic diseases  
Reduction in disability life-years in middle and older age  
Sharp reduction of rates of tuberculosis, HIV-AIDS, and malaria  
The end of trade and aid used as a political weapon  
The end of torture, female mutilation, and slavery  
Abolition of illegitimate and illegal traffic in body parts

*Annex 4*  
**Background**

*Origins of the Declaration*

At the 2008 annual general meeting of the WFPHA held in Geneva, it was agreed that a product of the Istanbul Congress should be *The Istanbul Declaration*, designed to set a new global agenda for the purpose and practice of public health. Other declarations and statements, have also informed this document, as shown in Annex 1, above

Before and during the Istanbul Congress, a general agreement emerged, that political and economic events and other phenomena of 2008 and 2009 have created new and unique challenges and opportunities for public health. In their addresses to the Congress, Dr Margaret Chan, Director-General of the World Health Organization, and Professor Paulo Marchiori Buss, President of the WFPHA, expressed this new vision clearly and emphatically.

This implies a renewed conceptual framework, which takes into account the ‘causes of the causes’ of well-being, health and disease, guided by ethical and ecological principles, and also by current and anticipated social, cultural, political, social and economic considerations and circumstances.

At the 2009 assembly of the WFPHA held in Istanbul immediately before this Congress, the need for *The Istanbul Declaration* was confirmed. Those present agreed that we are now living in a new world in which ‘business as usual’ is unjustified. Opportunities for the public health vision and mission are now as obvious and pressing as they were in Europe and then North America and other newly industrialized countries as from the mid 19th century.

*Nature and purpose of the Declaration*

The *Declaration* is designed to demonstrate the crucial importance of public health policy and practice, as seen by the profession’s global representative organization. It is a call to new and renewed action at a momentous time in history.

While its immediate readership is the public health profession, the *Declaration’s* chief purpose is to communicate the vision, mission, purpose and value of public health to decision-takers and policy-makers within UN and other multinational agencies, national government, civil society organizations, industry, the media, and other professional organizations.

Public health involves all sectors of society, and is not a confined special discipline, nor a division of the medical sciences. The *Declaration* is being released to the media, and will be published in a leading journal of public health. It will be translated into all languages recognized by the United Nations, as well as other languages, by all national public health associations who are members of the WFPHA, as they wish.

While being the product of the Istanbul Congress, the *Declaration* is a living document, subject to examination and revision in the light of experience and circumstances, at subsequent meetings and congresses.

## Annex 5 Contacts

More information on this Declaration, its outcomes, the WFPHA, and other key organizations, can be obtained as follows:

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*The Istanbul Declaration*

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Members of the drafting group who guided the *Declaration* and its supporting text were Margaret Hilson, James Chauvin, Federico Paredes, Mengistu Asnake, Theodor Abelin, Hikmet Pekcan, Deborah Walker, Peter Orris and Alena Petrakova, of the public health associations of Canada, Costa Rica, Ethiopia, Switzerland, Turkey, and the USA respectively, and of the World Health Organization. They were supported by the secretariat represented by Álvaro Matida of Abrasco, Brazil and colleagues from WFPHA, including Morgan Taylor. Geoffrey Cannon acted as rapporteur. Guidance and comments also came from WFPHA President Paulo Buss and other WFPHA officers, staff, and members.