

**Astana Declaration on Primary Health Care:  
From Alma-Ata towards Universal Health Coverage and the Sustainable Development Goals**

**Principles Behind the AA40 Declaration Text**

The authors note that the following principles were used when drafting the current declaration:

1. The text must be concise, understandable, and accessible to the public as well as health professionals;
2. The text must avoid use of official or technical language wherever possible;
3. The declaration frames the role of PHC within national efforts to achieve UHC;
4. The text must be forward-looking and inspirational while also proposing clear actions for achieving progress.

**Astana Declaration on Primary Health Care:  
From Alma-Ata towards Universal Health Coverage and the Sustainable Development Goals**

We, the participants of the Global Conference on Primary Health Care, acknowledge the contribution of health to decades of global social and economic development and affirm our commitment to primary health care (PHC) in pursuit of health and well-being for all, leaving no one behind. We envision:

*Societies and environments that prioritize and protect people's health;  
Health care that is available and affordable for everyone, everywhere;  
Health care of good quality that treats people with respect and dignity;  
People engaged in their own health.*

Attaining the highest possible standard of health is a fundamental right of every human being, as stated in the Constitution of the World Health Organization. Forty years ago, in 1978, world leaders made the historical commitment to achieve health for all through PHC in the Declaration of Alma-Ata. In 2015, leaders signed on to the Sustainable Development Goals, which renewed commitment to health and well-being for all based on universal health coverage (UHC). UHC means that all people, including those who are marginalized or vulnerable, should have access to quality health services that put their needs at the centre, without financial hardship. PHC is the most effective, efficient and equitable approach to enhance health, making it a necessary foundation to achieve UHC.

To address the health and development challenges of the modern era, we need PHC that:

- (1) empowers people and communities as owners of their health, as advocates for the policies that promote and protect it, and as architects of the health and social services that contribute to it;
- (2) addresses the social, economic, environmental and commercial determinants of health through evidence-based policies and actions across all sectors; and
- (3) ensures strong public health and primary care throughout people's lives, as the core of integrated service delivery.

At least 80% of health needs can be addressed through this vision of PHC and UHC. However, societies do not automatically gravitate toward health and health equity. To be successful, we need to take deliberate actions to reinforce the three components of PHC, emphasizing greater equity, quality and efficiency.

**We are more likely to succeed than ever before. Our success will be driven by:**

**Political will:** We have more partners and more stakeholders, both public and private, working toward common goals in the SDGs and particularly toward ensuring healthy lives and promoting well-being for all at all ages. With more human and financial resources devoted to health than ever before and renewed global commitment to PHC and UHC, the goal of health for all is finally within reach.

**Knowledge:** We know what works and what does not. Decades of health systems research have generated solid knowledge of how to address the determinants of health, reduce inequalities, prevent and treat disease, and promote health for all people. We are better equipped to improve health systems, to ensure people get the right care at the right time in the right place, and to adapt to changing conditions.

**Technology:** More effective, more affordable medicines, diagnostics, and other technologies are broadening the range of available and affordable health services, which should be included in primary care. Innovations in technology can improve access to health care, especially for vulnerable and marginalized people. Digital technologies in particular can be harnessed to improve health literacy, enabling people and communities to take control of their own health. Advances in information systems offer new avenues for transparency and accountability.

**People:** We are more informed, more connected and have higher expectations. People also have more say in the governance, planning, and delivery of health care through general elections and health assemblies. Population health literacy is rising, prompting more individuals to mobilize and assert their right to health and to health care, creating social accountability of both the public and private sectors. Youth, in particular, are raising their profile, using new media to assert their rights and voice their needs. Their contribution to achieving PHC will be essential.

Reflecting on the last 40 years, we acknowledge remarkable progress in health outcomes and are encouraged by new opportunities that propel us toward the goal of health and well-being for all. At the same time, we recognize that staying healthy in today's world is challenging. Unhealthy lifestyles and environments have resulted in chronic diseases becoming the leading causes of illness, disability and death. Violence, epidemics, environmental disasters and desperation have driven people to move to stay safe and healthy, often to crowded cities. Over half of the world's population, especially marginalized communities, cannot access essential health care. Where communities do have access to services, care is too often inappropriate or unsafe. Around the world, 100 million people are driven into poverty each year because of out-of-pocket spending on health services. These challenges threaten each country's efforts to achieve UHC and sustainable development.

## **To address today's challenges and seize opportunities for a healthy future, we must:**

### **Empower people to take ownership of their health and health care**

We commit to enabling people and communities to pursue the knowledge, skills and resources needed to take care of their own health, including the use of digital technologies. We will create conditions in which people participate in health promotion, choosing healthy lifestyles, and in decisions about their health care, in line with their goals and objectives. We will engage people and communities in the design, planning and management of their health systems and enable them to hold decision makers accountable for results.

### **Make bold political choices for health**

We will address the determinants of health in all sectors of government, in line with the Sustainable Development Goals, avoiding political and financial conflicts of interest. We will improve participatory governance of health systems, including engaging and regulating the private sector. We will direct more sustainable financial resources to public health and primary care to achieve UHC, ensuring reforms as needed to enable progressive realization.

### **Put public health and primary care at the centre of UHC**

We must enhance capacity and infrastructure for public health functions and develop quality primary care that is continuous, comprehensive, coordinated, community-oriented and people-centred. We will appropriately prioritize disease prevention and health promotion. We will ensure adequate public health and primary care workforce (including PHC nurses, family physicians, midwives, allied health professionals, and non-professional community health workers) working in teams with competencies to address modern health needs. We will promote management practices that ensure decent work including adequate compensation, meaningful opportunities for professional development and career progression. We will guarantee the availability of appropriate medicines, products and technologies. We will allocate sufficient resources to research, evaluation and knowledge management, promoting the scale up of effective strategies for multisectoral action, public health and primary care.

### **Align partner support to national policies, strategies and plans**

More human, technical, and financial resources will be allocated to strengthen PHC in every country. Concerted efforts by international partners on PHC and UHC will be aligned with national policies, strategies and plans. All of this must be done in accordance with the principles of effective aid. Together, countries and international partners will organize the systematic review of implementation of this Declaration, including UHC monitoring as part of the UN SDG review process. We will strengthen the breadth and depth of PHC-relevant data at national and subnational levels to inform evidence-based policymaking and to assess progress.

*We envision a future where physical, mental and social well-being are assured, where everyone has access to the health care they need without fear of financial hardship. We commit to strengthening PHC globally as part of our collective effort to achieve health and well-being for all at all ages.*

*We will act immediately on this Declaration in coordination with the World Health Organization and United Nations Children's Fund, engaging with leaders; governments; other United Nations agencies; bilateral and multilateral funds, alliances and donors; academia; professional organizations; youth organizations; civil society and the private sector. We will continue to bring in more people, countries and organizations to grow and support this movement.*

*Together we will achieve health and well-being for all, leaving no one behind.*