

Health without Borders: Equity, Inclusion, Sustainability

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Congress Statement

The 18th World Congress on Public Health (18th WCPH) convenes at a time of profound global change. Across the world, societies are confronting intersecting crises that transcend national boundaries. These include widening inequalities, climate change, pandemics and emerging health threats, armed conflict, forced migration, economic instability, and growing distrust in institutions. These challenges reaffirm a fundamental truth: health does not stop at borders.

Gathering in Cape Town, South Africa, under the theme **Health without Borders: Equity, Inclusion, Sustainability**, policymakers, public health and Indigenous leaders, researchers, practitioners, civil society organisations, and communities from across the globe reaffirm our shared commitment to health as a universal human right and a global public good. We recognise that health equity cannot be achieved through isolated action; it requires solidarity, collective responsibility, and sustained investment in people, systems, and the planet.

The 18th WCPH acknowledges that **inequity** remains one of the greatest threats to health. Where people are born, live, learn, work, and age continues to shape their opportunities for health and wellbeing. Despite scientific and technological advances, millions of people remain excluded from essential services, experience preventable illness and death, or face discrimination because of their gender, race, ethnicity, disability, socio-economic status, migration status, and/or geographic location. Health inequities are not inevitable; they are the consequence of political, social, and economic choices. Achieving better health for all requires acting on the forces that determine who has the opportunity to thrive.

The Congress further recognises the inseparable relationship between **democracy, governance, and public health**. Democratic institutions, public participation, transparency, accountability, and social trust form the foundations of effective health systems and resilient societies. The economics of democracy matter for health. Public investment, fair taxation, social protection, decent work, and the equitable distribution of resources shape the conditions in which people can

thrive. Economic systems should be judged not only by growth, but also by their contribution to human wellbeing, social cohesion, and planetary sustainability.

At a time when global challenges increasingly require coordinated action, the Congress highlights the **critical importance of multilateralism, international law, and global treaties in protecting and advancing health**. International cooperation has demonstrated its value in addressing tobacco control, pandemic preparedness, environmental protection, and human rights. Strengthening multilateral institutions and ensuring the equitable participation of countries from all regions are essential to addressing transnational health threats and promoting shared accountability. Global health governance must be guided by fairness, solidarity, and the principle that no nation should be left behind.

The Congress reaffirms the vital role of **Primary Health Care as the foundation of equitable, universal, and resilient health systems**. Nearly five decades after the Declaration of Alma-Ata, and building on subsequent global commitments, Primary Health Care remains the most effective pathway towards universal access, comprehensive care, and people-centred health systems capable of responding to the growing and increasingly complex burden of disease. Health systems that prioritise prevention, health promotion, continuity of care, and integration across levels and services are essential to advancing equity and addressing both long-standing and emerging health challenges.

Health systems ultimately fund what they truly value, yet population health and public health services too often fail to receive the investment they require. It is unacceptable to see immunisation programmes weakened or preventable outbreaks inadequately addressed. Strong public health services require sustained and adequate financing, a well-trained, supported, and motivated workforce, and effective integration across the health system. They must also be firmly anchored in empowered communities, meaningful participation, transparency, and public accountability.

The Congress expresses deep concern about the devastating **impact of conflict, war, displacement, and humanitarian crises on health**. Attacks on health workers, the destruction of health infrastructure, disruption of essential services, and the long-term physical and psychological consequences of violence undermine human security and development. Public health has a key role to play in mitigating the effects of conflict and supporting peacebuilding,

reconciliation, and social recovery. Protecting health services and health workers in conflict settings is both a moral and a legal imperative. Women make up the majority of the health workforce and, in conflict settings, often face the greatest risks while receiving the least protection. Women are also central to peacebuilding. This is not a matter of principle alone: evidence consistently shows that agreements shaped by women's participation are more durable and more effectively implemented.

The Congress recognises the value of **Indigenous Knowledge Systems** and the urgent need to decolonise global health. For too long, global health has been shaped by unequal power relations that have marginalised local knowledge, experience, and leadership. Indigenous communities possess rich traditions of healing, environmental stewardship, social organisation, and community resilience that offer important lessons for contemporary public health. Decolonising global health requires more than inclusion; it requires transforming structures of power, promoting genuine partnerships, and ensuring that communities have agency in shaping priorities, research, policy, and practice.

The Congress also underscores the importance of the **One Health** approach in an increasingly interconnected world. Human health, animal health, and ecosystem health are inseparable. Climate change, biodiversity loss, environmental degradation, food insecurity, and emerging infectious diseases demonstrate the consequences of failing to recognise these interdependencies. Sustainable solutions require collaboration across disciplines, sectors, and borders. Protecting planetary health is fundamental to protecting human health, now and for future generations.

Drawing on the discussions and insights generated throughout the Congress, we, the delegates of the 18th World Congress on Public Health, commit ourselves and urge global civil society, academia, governments, and the multilateral system to uphold equity, inclusion, solidarity, respect for human rights, and sustainability. As the global public health community looks to the future, the 18th WCPH issues a clear **call to action**: to foster solidarity across nations, sectors, disciplines, and communities; to place equity at the centre of decision-making; inclusion at the heart of our institutions; and sustainability at the core of development.

We call on civil society at large to:

- Hold governments, donors, and institutions accountable for their commitments and monitor their implementation.

- Amplify the voices and leadership of marginalised, excluded, and/or displaced populations in public debate and decision-making.
- Defend civic space, freedom of association, and the right of communities to organise and participate in democratic life.
- Mobilise community-led responses in emergencies, conflicts, and crises, and sustain solidarity where formal systems are absent or overburdened.

We call on governments to:

- Promote health equity through action on the social, commercial, economic, political, and environmental determinants of health.
- Protect and strengthen democracy, human rights, and social justice as foundations for public health.
- Support equitable and sustainable economic policies that improve population wellbeing.
- Invest in resilient, accessible, and people-centred Primary Health Care and public health systems.
- Ensure that communities are active partners in shaping the priorities, policies, and systems that affect their lives, and that institutions are accountable to them for results.
- Invest in essential public health functions and embed them in the planning, design, and budgeting of health systems.
- Strengthen international cooperation, multilateralism, and global health governance.
- Prioritise sustained investment in the health workforce as a foundation of resilient, equitable, and high-performing health systems, recognising that no country can achieve health equity without a sufficient, supported, and well-distributed workforce.
- Develop, adopt, and implement ethical policies governing health worker migration, to be upheld by both recipient and donor countries, in order to protect health systems and the rights and wellbeing of health workers.
- Promote the Health for Peace approach and protect civilians, health workers, and health infrastructure during wars, conflicts, and crises.
- Accelerate action on climate change and environmental sustainability through a *One Health* approach.

We call on international organisations and donors to:

- Align investments with country-led priorities and ensure that any transition or withdrawal of funding is transparent and does not disrupt essential services.
- Shift decision-making power, resources, and accountability towards institutions, organisations, and communities in the countries where programmes are implemented.
- Protect financing for health in conflict-affected and humanitarian settings, including support for local responders.

- Finance the health workforce, local research capacity, and climate and environmental adaptation as long-term investments in global public goods.

We call on researchers and academia to:

- Advance Indigenous leadership, knowledge, and perspectives within public health policy, research, and practice.
- Generate evidence that responds to the priorities of communities, health systems, and policymakers.
- Build equitable research partnerships in which leadership, funding, data, and authorship are shared fairly across institutions and regions.
- Embed equity, decolonial perspectives, and *One Health* knowledge within public health education and curricula.
- Translate evidence into accessible public communication that counters disinformation and rebuilds trust in public health institutions.

We call on national public health associations and interest groups to:

- Champion health equity, social justice, and peace by addressing the structural drivers of exclusion, discrimination, conflict, and inequality that undermine population health.
- Act as independent voices that hold governments, donors, and institutions accountable for the commitments they make.
- Translate evidence into accessible public communication that counters disinformation and rebuilds trust in public health institutions.
- Advocate for the protection, fair treatment, and wellbeing of the health workforce.

The 18th WCPH convenes in South Africa, a country whose history demonstrates both the profound consequences of inequity, injustice, and discrimination and the transformative power of collective action and solidarity. We are reminded that progress is possible even in the face of seemingly insurmountable challenges. The pursuit of equity, inclusion, and sustainability is not merely a technical undertaking, but a moral and political commitment to building societies in which every person has the opportunity to achieve health and live with dignity.

Only through shared responsibility and collective action can we realise the vision of **Health without Borders** and create a healthier, more just, and more sustainable world for all.