WORLD SKIN HEALTH COALITION

IDENTIFYING LINKS BETWEEN GLOBAL HEALTH RESOLUTIONS TO SUPPORT POLICY ADVOCACY FOR SKIN HEALTH

POLICY ANALYSIS

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ABOUT THIS POLICY ANALYSIS

Recent health resolutions provide a framework to help member states improve care for people with skin diseases. In 2024, the World Health Assembly (WHA) adopted a Resolution to implement and sustain regular, meaningful social participation in decision-making processes for health. The following year, the WHA adopted resolutions that recognised skin diseases as a global health priority, prioritised rare diseases, and promoted an integrated lung health approach. Also in 2025, the United Nations General Assembly (UNGA) published a political declaration on the prevention and control of non-communicable diseases (NCDs), and the promotion of mental health and wellbeing.

There are similarities in the challenges and recommendations identified in these documents. This means they may be leveraged in discussions with policymakers to demonstrate the widespread benefits of investing in services and policies to improve care for people with skin diseases. This policy analysis sets out the areas of commonality and relevance in these resolutions, identifying opportunities for each to support activities related to the others. Every section includes a summary of top-line policy messages for skin disease advocacy that are supported by the documents. These summaries can be used by World Skin Health Coalition partners for reference and to inform engagement with policy- and decision-makers.

The documents included in this analysis are:

- *WHA Resolution WHA78.15: Skin diseases as a global public health priority*
- *WHA Resolution EB156/CONF./2: Rare diseases: a global health priority for equity and inclusion*
- *WHA Resolution EB156(19): Promoting and prioritizing an integrated lung health approach*
- *WHA Resolution A77/A/CONF./3: Social participation for universal health coverage, health and well-being*
- UNGA declaration A/80/L.34: *Political declaration of the fourth high-level meeting of the General Assembly on the prevention and control of noncommunicable diseases and the promotion of mental health and wellbeing*

HEALTHCARE DELIVERY: STRENGTHENING THE SYSTEMS THAT REACH PEOPLE WITH SKIN DISEASES

Many of the recognised challenges and recommended solutions in the documents relate directly to the way healthcare is organised and delivered. Together, these recommendations demonstrate a consistent and globally recognised need to equip primary care providers with the knowledge and resources to diagnose and treat people with skin conditions, integrate health services to meet complex needs, and invest in digital healthcare infrastructure.

SERVICES AND SYSTEMS

- Primary care
- Integrated policy and services
- Digital services

PRIMARY CARE

Primary care plays a central role in improving the detection, diagnosis and management of disease. Access to primary care is highlighted in nearly all the documents as a key driver of achieving universal health coverage and reducing inequalities in access to services. The WHA and UNGA alike call for strengthening and expanding the role of primary care in diagnosing and managing skin diseases alongside rare diseases, lung conditions, mental health conditions and other NCDs.

Education and training for healthcare professionals is key to improving care across health topics. In all the policy documents, member states are urged to strengthen and scale up services in primary care and the community, allowing decision-makers to identify their own priorities and select the most appropriate local approach. The WHA also highlights the important role of social participation in improving health service delivery. However, the Resolution on skin diseases and the UNGA declaration on NCDs specifically call for healthcare professional education to support the detection, diagnosis and treatment of relevant conditions.

IS PRIMARY CARE PRIORITISED IN THESE POLICY DOCUMENTS?

SUMMARY

WHA Resolution on skin diseases	WHA Resolution on rare diseases	WHA Resolution on lung health	WHA Resolution on social participation	UNGA declaration on NCDs and mental health
YES	**YES**	**YES**	**SOMEWHAT**	**YES**
Calls for strengthening primary care competencies and integrating skin disease services into primary care.	Calls for strengthening primary care and ensuring community access.	Calls for strengthening primary care, and frames primary care as central to universal health coverage.	Acknowledges the important role of primary care and a community-based approach.	Emphasises primary care as the foundation for universal health coverage and NCD services.

POLICY MESSAGES

- Primary care providers must have the training and resources they need to detect, diagnose and treat the most pressing and burdensome conditions, including skin conditions, and to refer to specialist care when needed.
- Policymakers and health system leaders, in consultation with local communities, should consider how best to organise and define the role of primary care to effectively and efficiently address major health challenges, including skin diseases.

INTEGRATED POLICIES AND SERVICES

Healthcare policies should integrate a multisectoral perspective to help shape a more cohesive health system. The skin disease Resolution calls for the inclusion of these diseases in disability, rehabilitation and mental health policies. The resolutions on lung health and rare diseases similarly recommend integration into national health planning and wider policies, such as digital health policies. These recommendations demonstrate recognition of the importance of integrated healthcare policy, underscoring the links between disease areas and health system infrastructure.

Integrated service delivery models are key to providing more equitable, person-centred care. This is a major theme among the policy documents, which recommend:

- Integration with primary care for improved lung health and NCD services
- Integration of rare diseases, NCDs and mental health care into existing services
- Skin health service models that integrate digital tools.

ARE INTEGRATED POLICIES AND SERVICES PRIORITISED IN THESE POLICY DOCUMENTS?

SUMMARY

WHA Resolution on skin diseases	WHA Resolution on rare diseases	WHA Resolution on lung health	WHA Resolution on social participation	UNGA declaration on NCDs and mental health
YES	**YES**	**YES**	**NO**	**YES**
Calls for the integration of skin diseases into wider policies.	Calls for the integration of rare diseases into national health planning and healthcare services.	The integration of lung health across diseases and sectors is a core message.	Integration is not explicitly referenced.	Promotes a multi-sectoral, integrated approach.

POLICY MESSAGES

- Skin diseases should be integrated into digital health, mental health and NCD policies.
- Skin healthcare should be delivered as part of a service that includes mental health and wellbeing support.

DIGITAL SERVICES

Digital health technologies must be implemented equitably for their benefits to be fully realised. The resolutions on skin diseases and rare diseases, as well as the UNGA declaration on NCDs, recommend the development and roll-out of digital tools such as telemedicine and AI-assisted technologies to improve and facilitate access to healthcare. In particular, telemedicine reduces inequalities by allowing people in underserved, rural and remote areas to access specialist services that would otherwise not be available to them.

While the policy documents do not draw an explicit link between digital technologies and social participation, there is a clear need to involve civil society and patient organisations in the development and roll-out of such technologies to ensure they improve care delivery equitably. The UNGA declaration also emphasises the importance of addressing the digital divide, as developing countries may struggle to develop and access digital technologies.

ARE DIGITAL SERVICES PRIORITISED IN THESE POLICY DOCUMENTS?

SUMMARY

WHA Resolution on skin diseases	WHA Resolution on rare diseases	WHA Resolution on lung health	WHA Resolution on social participation	UNGA declaration on NCDs and mental health
YES	**YES**	**NO**	**NO**	**YES**
Explicit mentions of telemedicine, digital assessments and AI-supported tools.	Calls for digital technologies, telemedicine and digital data-sharing platforms.	Innovative technologies are mentioned, but there is no discussion of digital technologies.	No reference to digital healthcare services or technologies.	Includes frequent references to the importance of digital health, AI and addressing the digital divide.

POLICY MESSAGES

- Investment in digital infrastructure is needed to support more efficient, equitable care across disease areas.
- Healthcare services and guidelines should be regularly reviewed and updated to reflect the evolving digital healthcare landscape.

CROSS-CUTTING HEALTH SYSTEM PRIORITIES: SHARED FOUNDATIONS FOR BETTER SKIN HEALTH OUTCOMES

The resolutions recognise wider system changes that are needed to improve the care people receive and the outcomes they experience. They highlight the need for more comprehensive data collection and surveillance, strategies to address social and geographical inequalities, and identifying and managing the environmental exposure that cause and exacerbate ill health.

PRIORITIES

- Data collection and surveillance
- Equity and inclusion
- Environmental exposure

DATA AND SURVEILLANCE

Data collection and surveillance strategies are needed for NCDs, mental health conditions, rare diseases and skin diseases. The policy documents call for improving and expanding data collection, and sharing capabilities in these disease areas, which are all relevant to skin disease policy and practice. For NCDs and mental health, UNGA calls for greater data collection capacity, and recommends disaggregated analysis, health economic analysis and implementation research. It also recommends that data are shared and used collaboratively to shed light on regional trends and risk factors. For rare diseases and skin diseases, WHA resolutions recommend establishing or strengthening national surveillance to inform prevention and intervention strategies. The resolution on social participation similarly calls for disease-related data, plus research and monitoring initiatives to evaluate the implementation of social participation in health.

ARE DATA AND SURVEILLANCE PRIORITISED IN THESE POLICY DOCUMENTS?

SUMMARY

WHA Resolution on skin diseases	WHA Resolution on rare diseases	WHA Resolution on lung health	WHA Resolution on social participation	UNGA declaration on NCDs and mental health
YES	**YES**	**NO**	**YES**	**YES**
Calls for national surveillance and mapping of skin diseases.	Calls for registries, data collection and surveillance.	Includes a passing reference to monitoring and evaluation, but not data.	Calls for research and monitoring initiatives.	Includes commitments to data infrastructure and surveillance.

POLICY MESSAGES

- National surveillance strategies are needed for skin diseases, and these could be incorporated into wider health data-collection initiatives.
- Data collection must be planned to allow for sharing, analysis and comparison across nations and regions. This may require the development of minimum data sets, collaboration to ensure data systems are interoperable, and privacy regulations that support appropriate use of disaggregated data.

EQUITY AND INCLUSION

Social, economic and geographical disparities must be addressed to achieve universal health coverage and reduce inequalities. The WHA resolution on rare diseases and the UNGA declaration on NCDs and mental health both discuss a number of inequalities: the fact that women and children generally encounter greater challenges in accessing diagnosis and care, for example, of that rural areas and low-income countries often have fewer healthcare resources and greater barriers to accessing services. The two resolutions and declaration also note that the high cost of diagnostics and treatments for rare diseases in particular can be prohibitive, exacerbating socioeconomic inequalities. To address this, the resolutions recommend providing affordable access to medicines and care, facilitating access to care through digital technologies, reducing poverty and addressing the social determinants of health. The resolution on social participation promotes the participation of women and vulnerable or marginalised groups in health-related decision-making. While the Resolution on skin diseases does not highlight these challenges explicitly, it nevertheless recommends ensuring equitable access to affordable diagnostics and treatments.

ARE EQUITY AND INCLUSION PRIORITISED IN THESE POLICY DOCUMENTS?

SUMMARY

WHA Resolution on skin diseases	WHA Resolution on rare diseases	WHA Resolution on lung health	WHA Resolution on social participation	UNGA declaration on NCDs and mental health
YES	**YES**	**YES**	**YES**	**YES**
Addresses stigma, discrimination, mental health and equitable access.	Core message on equity and inclusion.	Acknowledges socioeconomic inequalities in exposure and impact.	Core message on equity and inclusive participation.	Includes clear commitments to equity and inclusion.

POLICY MESSAGES

- Local disparities in access to healthcare should be identified and addressed through rigorous, system-wide policy action.
- Policymakers must ensure universal health coverage policies include essential diagnostics, treatment and care for skin diseases. This may require investment in digital infrastructure, workforce planning, and funding structures that limit out-of-pocket costs.

ENVIRONMENTAL EXPOSURE

Environmental exposure affect the development, spread and control of many diseases, including skin diseases. Both infectious diseases and NCDs can be significantly affected by environmental factors, including air and water pollution, tobacco and ultraviolet (UV) light. UV light and the impact of climate change are of significant concern in relation to skin diseases. The resolutions on rare diseases and skin diseases are similar in their calls to ensure access to safe water, sanitation and hygiene, while the resolution on lung diseases focuses on pollution and tobacco, which are associated with socioeconomic disparities. In recognition of all these factors, the UNGA declaration commits to addressing the environmental determinants of health.

IS ENVIRONMENTAL EXPOSURE PRIORITISED IN THESE POLICY DOCUMENTS?

SUMMARY

WHA Resolution on skin diseases	WHA Resolution on rare diseases	WHA Resolution on lung health	WHA Resolution on social participation	UNGA declaration on NCDs and mental health
YES	**SOMEWHAT**	**YES**	**SOMEWHAT**	**YES**
Discusses environmental factors, including UV exposure, climate change, hygiene and infection.	Addresses water, sanitation and hygiene, but limited broader environmental discussion.	Includes extensive explicit references to air pollution, occupational exposure and environmental determinants.	Touches on environmental factors contributing to inequalities.	Environmental factors, including air, water and urban design, are major themes.

POLICY MESSAGES

- Environmental, sanitation and communicable disease control policies should reflect and address the impact of environmental factors on skin diseases.
- Sun protection strategies and awareness campaigns are needed to address the increasing risks posed by exposure to UV light caused by climate change.

APPENDIX: SUMMARY MATRIX OF KEY THEMES IN ANALYSED DOCUMENTS

	WHA Resolution on skin diseases	WHA Resolution on rare diseases	WHA Resolution on lung health	WHA Resolution on social participation	UNGA declaration on NCDs and mental health
PRIMARY CARE	**YES** Calls for strengthening primary care competencies and integrating skin disease services into primary care.	**YES** Calls for strengthening primary care and ensuring community access.	**YES** Calls for strengthening primary care, and frames primary care as central to universal health coverage.	**SOMEWHAT** Acknowledges the important role of primary care and a community-based approach.	**YES** Emphasises primary care as the foundation for universal health coverage and NCD services.
INTEGRATED HEALTHCARE POLICIES AND SERVICES	**YES** Calls for the integration of skin diseases into wider policies.	**YES** Calls for the integration of rare diseases into national health planning and healthcare services.	**YES** The integration of lung health across diseases and sectors is core message.	**NO** Integration is not explicitly referenced.	**YES** Promotes a multi-sectoral, integrated approach.
DIGITAL SERVICES	**YES** Explicit mentions of telemedicine, digital assessments and AI-supported tools.	**YES** Calls for digital technologies, telemedicine and digital data-sharing platforms.	**NO** Innovative technologies are mentioned, but there is no discussion of digital technologies.	**NO** No reference to digital healthcare services or technologies.	**YES** Includes frequent references to the importance of digital health, AI and addressing the digital divide.
DATA AND SURVEILLANCE	**YES** Calls for national surveillance and mapping of skin diseases.	**YES** Calls for registries, data collection and surveillance.	**NO** Includes a passing reference to monitoring and evaluation, but not data.	**YES** Calls for research and monitoring initiatives.	**YES** Includes commitments to data infrastructure and surveillance.

EQUITY AND INCLUSION	**YES** Addresses stigma, discrimination, mental health and equitable access.	**YES** Core message on equity and inclusion.	**YES** Acknowledges socioeconomic inequalities in exposure and impact.	**YES** Core message on equity and inclusive participation.	**YES** Includes clear commitments to equity and inclusion.
ENVIRONMENTAL EXPOSURE	**YES** Discusses environmental factors, including UV exposure, climate change, hygiene and infection.	**SOMEWHAT** Addresses water, sanitation and hygiene, but limited broader environmental discussion.	**YES** Includes extensive explicit references to air pollution, occupational exposure and environmental determinants.	**SOMEWHAT** Touches on environmental factors contributing to inequalities.	**YES** Environmental factors, including air, water and urban design, are major themes.