We, the participants of the Symposium "Christian Responses to Health and Development" held at the German Institute for Medical Mission (DIFAEM), Tübingen, Germany, from 26 – 28 June 2014, are Christians in Health from Africa, India, Korea, Europe and the USA, from different denominational and professional backgrounds, different cultures, yet part of the Body of Christ, His Church in the world.

We affirm that
1. The Christian Church continues to have a unique, relevant and specific role to play in Health, Health Care, Healing and Wholeness, in changing contexts and in all regions of the world.
2. Every human being is made in the image of God\(^1\), created with dignity in diversity irrespective of any personal circumstances, and this is equally true in suffering, disability or when living with chronic disease.
3. God wishes that all may have life; and life in all its fullness\(^2\); through living relationships with God, each other, themselves and the world\(^3\).
4. Part of God's call to the Church is a ministry of healing and transformation, with compassion and unconditional love, in the spirit of Jesus Christ\(^4\), the servant healer and author of peace, justice and reconciliation.
5. The WHO Constitution states that “The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being”\(^5\) – This calls for participation of all in prevention, promotion, treatment, care and rehabilitation, as well as the engagement for justice, peace and reconciliation, taking responsibility individually and collectively.

We want to see
- A world where everyone is participating in the health and healing experience and no neighbourhood is left behind based on the Primary Health Care approach that puts communities at the centre. It is a cornerstone for any health system and can strengthen the key determinants of health.
- Reconciling and healing communities and congregations participating in social transformation.
- Universal health coverage and the protection of individuals and families from falling into poverty through unaffordable health care.
- New financing mechanisms creating equity in health care.
- Health Systems strengthened with equitable access to care taking into account local patterns of disease and evidence-based treatment and care irrespective of whether a person is poor or rich and irrespective of religion, ethnicity, gender or political standing.
- Churches, Christian organisations and networks working together with civil society including people affected by disability or disease to mobilise governments, international agencies and the corporate world for more justice in health and access to medicines and quality health care.
- Opportunities used to develop health care to its highest possible standards in the local context, creating access for those who are poor, marginalised and vulnerable.
- Christian health care that reflects Christ’s love, at all levels, for all people in all parts of the world.

We call on

Churches to
- Create healing and reconciling communities and congregations that are open for those who are marginalised, poor and vulnerable, restoring their dignity, protecting their rights and nurturing their agency through active participation.
- Accept God's given calling to be hospitable communities of health and healing.

\(^1\) Gen 1:27  
\(^2\) John 10:10; 2 Peter 3:9  
\(^3\) E.g. Deut 6  
\(^4\) Phil 2:5-11  
\(^5\) E.g. Rev 22,1-5  
\(^6\) WHO Constitution, www.who.int
• Support all Christian health professionals and those working within church health systems through training, support, the creation of conducive working environments and the development of career paths, thus enabling a motivated and committed workforce.

• Lift their voice with those who are poor, marginalised and vulnerable for justice, reconciliation and access to quality health care.

• Help in the setting of standards for compassionate and competent care.

• Contribute to the elimination of financial barriers to health care for those who are poor and marginalised.

• Play an active part in developing and maintaining national health systems with the Ministry of Health in collaboration with all stakeholders.

• Participate in the development of local answers to health challenges and share these through their global networks.

• Equip church leaders with sufficient knowledge of health that allows them to be involved in partnership in helping to provide adequate pastoral care and support health workers and communities.

Governments to
• Ensure that adequate resources are allocated to health to allow everyone access to health care.

• Affirm the local responses as critical foundation for effective Primary Health Care.

• Protect all persons from stigma and discrimination irrespective of ethnicity, disease, religion, gender, sexual orientation or economic status.

• Respect faith based health services as an important part of the public health system and actively engage them as part of civil society to contribute to policy making and accessing respective resources.

• Ensure legislation that fully supports access to quality medicines at affordable prices irrespective of international trade laws.

• Ensure that adequate resources are allocated to fund research into proving better healthcare for those who are poor, marginalised or otherwise disadvantaged.

• Further promote new drug development for diseases affecting those with Neglected Tropical Diseases and other illnesses especially impacting those in the developing world through the use of regulatory incentives and other active measures.

International Corporations, global donors and the private sector to
• Invest in research and development addressing global health needs.

• Provide affordable access to essential medicine and other supplies, especially for those who are poor and marginalised.

We commit ourselves to
• A healing and reconciling ministry that puts people at the centre and allows for a wholistic approach in health care.

• The pursuit of professional excellence and relevance in our health care service and our willingness to learn and share.

• Ethical health care specifically in view of those at the beginning and the end of life or otherwise vulnerable to exploitation and abuse.

• Work with people who are marginalized and to advocate for their health.

• Flexible and adoptive responses to the dynamics of global and local health situations.

• Contribute to research and development in health that is locally relevant, evidence-based, ethically sound and globally accepted.

• Network and support each other in mutual respect, demonstrated by an approach of love, justice and compassion willing to learn, share and being a caring, appreciative global Christian community.