Agenda 2030

Implications for Health

Elena Villanueva Olivo

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ISGlobal **Barcelona Institute for Global Health**

Strengths MDG Framework

- **Concrete measurable goals** and targets

- **Influenced political discourse** at highest level

- Sense of ownership and **shared responsability**

- **Significant investment in health** since 2000

- **National and international iniciatives** have been set up in line with the MDGs (Global Fund, PEPFAR…)*

- **More progress** since 2000 than ever before: e.g. *3.3 million deaths malaria averted*

Limitations MDGs Framework

- Too **narrow** on scope

- Left out many **priorities**

- **Human Rights** aspect missing

- Focus on low income countries and **not on poor people**-not focus on equity

- Lack of attention to **social disparities**

- Contributed to a **more fragmented approach to health**: big disease silos, little health system strengthening

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- **Universal:** Include responsabilities not only for developing countries but **also for developed countries**

- Stronger **Accountabilty**

- Very **ambitious**

- Build on the "**unfinished business**" of the MDG era
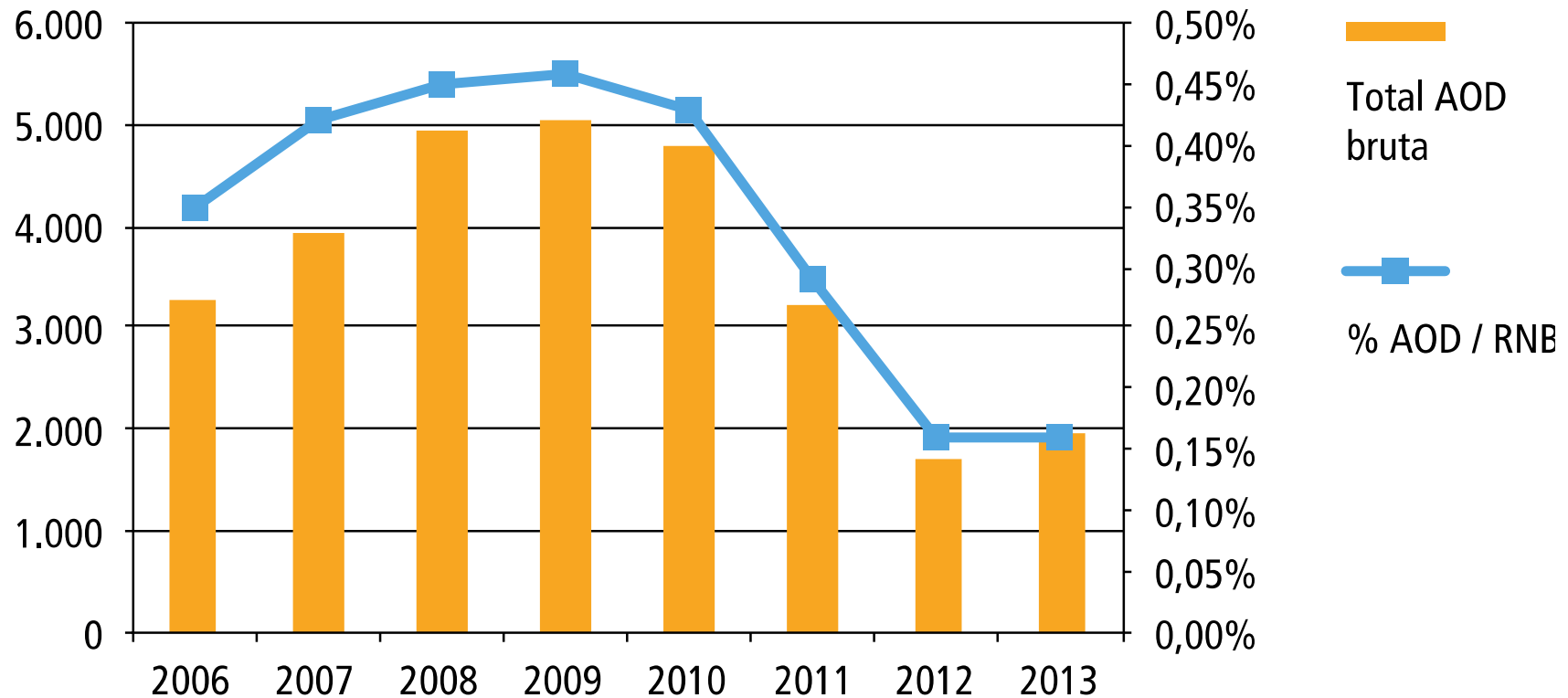
- Agenda "**globally discussed**"*

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- Very **broad goals** (MDG 8)*

- Specific **equity goal**

- **169 targets** for all SDGs combined

- More difficult **to communicate**
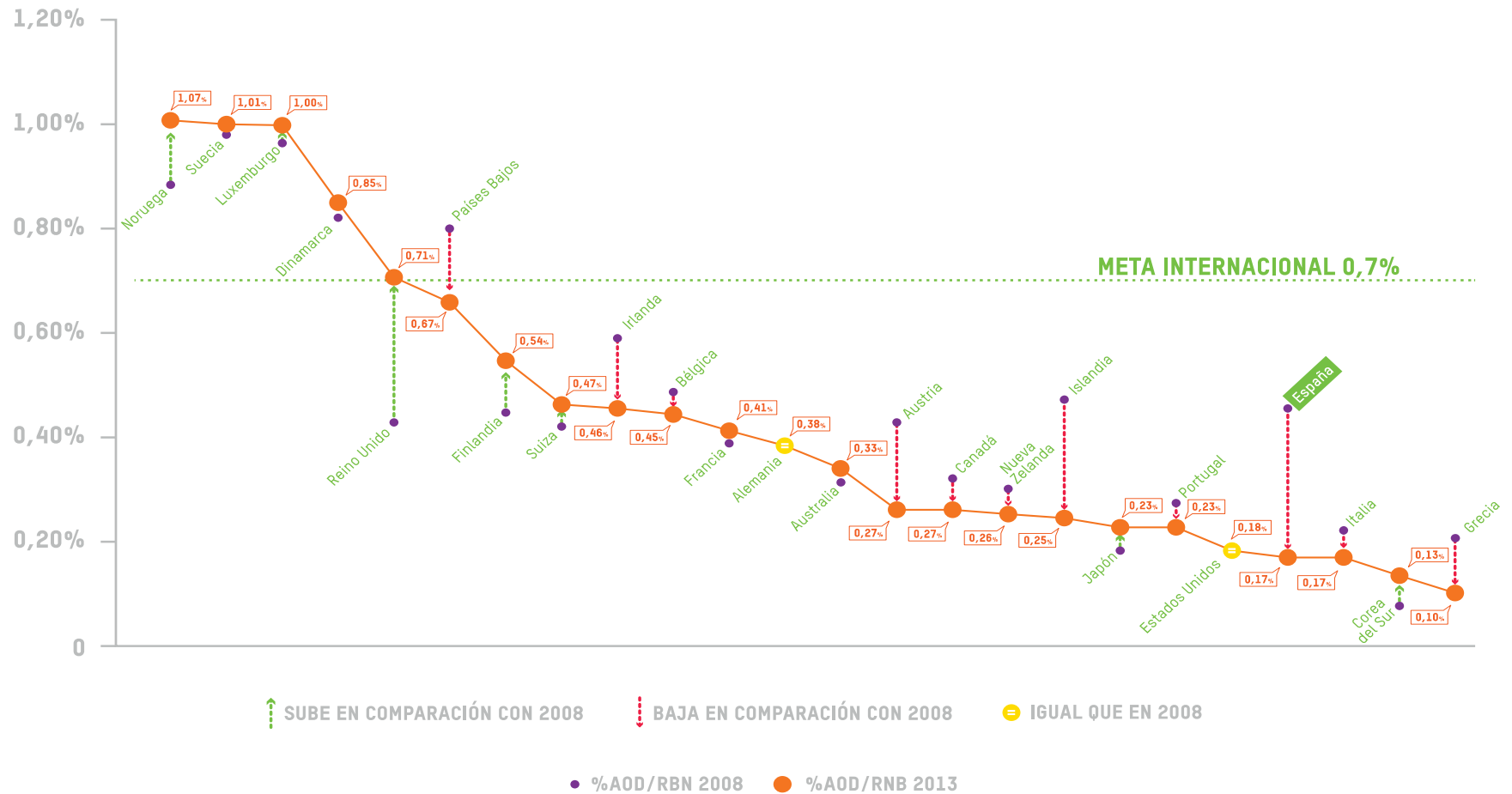
SDG Implementation

- Each country sets its **own targets** – further complexity

- Lack of concrete **funding compromises - EU?**

- Link with **ODA** is not so clear

- Focus on **national resources mobilization**

- Risk of losing **ODA compromises**

- ODA still critical in **LDC**

Spanish Example-ODA

ÁFICO 3.1. EVOLUCIÓN DE LA AOD BRUTA Y DEL PORCENTAJE SOBRE LA RNB 2006-2013

Total AOD bruta

% AOD / RNB

Spanish Example-ODA

Chart: ODA as % of Gross National Income, comparison 2008 vs 2013

Y-axis: 1,20% — 1,00% — 0,80% — 0,60% — 0,40% — 0,20% — 0

META INTERNACIONAL 0,7%

Countries and values (%AOD/RNB 2013):
- Noruega 1,07%
- Suecia 1,01%
- Luxemburgo 1,00%
- Dinamarca 0,85%
- Reino Unido 0,71%
- Países Bajos 0,67%
- Finlandia 0,54%
- Suiza 0,47%
- Irlanda 0,46%
- Bélgica 0,45%
- Francia 0,41%
- Alemania 0,38%
- Australia 0,33%
- Austria 0,27%
- Canadá 0,27%
- Nueva Zelanda 0,26%
- Islandia 0,25%
- Japón 0,23%
- Portugal 0,23%
- Estados Unidos 0,18%
- España 0,17%
- Italia 0,17%
- Corea del Sur 0,13%
- Grecia 0,10%

Legend:
- ↑ SUBE EN COMPARACIÓN CON 2008
- ↓ BAJA EN COMPARACIÓN CON 2008
- ⊜ IGUAL QUE EN 2008
- • %AOD/RBN 2008
- ● %AOD/RNB 2013

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Spanish Example-Social Spending

► VARIACIÓN DEL GASTO DE LOS GOBIERNOS AUTONÓMICOS ENTRE 2009 Y 2013

En euros por habitante en 2013

SANIDAD	En %		EDUCACIÓN	En %	
Cantabria	-7,9		Asturias	3,2	
Asturias	-10,6		Cantabria	-14,5	
Castilla y León	-13,7		Extremadura	-15,8	
País Vasco	-16,5		Andalucía	-16,4	
Galicia	-17,0		País Vasco	-16,5	
Baleares	-18,4		La Rioja	-16,6	
Madrid	-18,5		Navarra	-17,1	
La Rioja	-18,9		Castilla y León	-17,4	
Aragón	-19,9		Aragón	-18,9	
Media	**-20,3**		Galicia	-19,8	
Com. Valenciana	-20,3		Baleares	-20,0	
Andalucía	-21,6		Murcia	-20,0	
Cataluña	-22,1		**Media**	**-21,1**	
Murcia	-22,4		Canarias	-22,9	
Navarra	-22,6		Madrid	-24,3	
Extremadura	-23,6		Cast.-La Mancha	-26,5	
Canarias	-26,6		Cataluña	-26,5	
Cast.-La Mancha	-28,5		C. Valenciana	-28,2	

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Sustainable Development Goals

1. End poverty in all its forms…
2. End hunger……
3. **Ensure healthy lives and promote well-being at all ages**
4. Inclusive quality education…
5. Achieve gender equality and empowerment all women & girls
6. Ensure…..water and sanitation..
7. Ensure….sustainable energy
8. Promote sustained ..economic growth, …decent work
9. Build resilient infrastructure…
10. Reduce inequality …..

11. Make cities …. safe… sustainable
12. Ensure sustainable consumption and production patterns
13. Take urgent action ….climate change
14. Conserve & sustain use of oceans….
15. Protect, restore ….sustainable ecosystems… halt biodiversity loss
16. Promote peaceful & inclusive societies ….
17. Strengthen means of implementation / global partnership for sustainable development

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SDG-Health

- Much **more ambitious** than the health MDG´s

- Health systems and **UHC**

- Only important thing left out: **antimicrobial resistance**

Transforming our world: the 2030 Agenda for Sustainable Development

26. To promote physical and mental health and well-being, and to extend life expectancy for all, we must achieve universal health coverage and access to quality health care. No one must be left behind. We commit to accelerating the progress made to date in reducing newborn, child and maternal mortality by ending all such preventable deaths before 2030. We are committed to ensuring universal access to sexual and reproductive health-care services, including for family planning, information and education. We will equally accelerate the pace of progress made in fighting malaria, HIV/AIDS, tuberculosis, hepatitis, Ebola and other communicable diseases and epidemics, *including by addressing growing anti-microbial resistance*

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SDG 3. Ensure healthy lives and promote well-being for all at all ages

MDG agenda acceleration

1. Reduce maternal mortality
2. End preventable deaths in newborns and under 5 children
3. End epidemics of AIDS, TB, malaria, NTD, hepatitis, water-borne diseases, other communicable diseases
7. Ensure universal access to sexual and reproductive health care services

Address NCD agenda

4. Reduce premature mortality from NCD, promote mental health and wellbeing
5. Strengthen prevention & treatment of substance abuse (narcotics, alcohol)
6. Halve global deaths and injuries from road traffic accidents
9. Reduce deaths and illnesses from hazardous chemicals & air, water, soil pollution
10. Strengthen implementation of the Framework Convention on Tobacco Control

Cross cutting / health system

8. Achieve UHC, including financial risk protection, access to quality essential health care services, and access to quality and affordable essential medicines and vaccines
11. Support research and development of vaccines and medicines for the communicable and NCD that primarily affect developing countries
12. Increase substantially health financing and the recruitment, development and training and retention of the health workforce in developing countries
13. Strengthen the capacity of all countries for early warning, risk reduction, and management of national and global health risks

Health targets

- The health goal comprises **13 targets**, several with multiple "sub-targets"

- With only one indicator for each target and sub-target, **25 indicators for health**

- Ex. **R&D indicator** doesn't adequately measure progress on Global Health R&D

- More than **1 indicator per target** might be needed

- Need for **disaggregated data** to track impact on health

- Cross-cutting and **inter-linked** with other SDGs

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Data, monitoring and accountability

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SDG Interactions

- No end to poverty that can be dissociated from an end to **prevailing inequities**

- Failure to **address health equity** will prevent us from achieving UHC

- Critical to the long term success of moves towards **Universal Health Coverage** (UHC)

- **National Averages** of health indicators are not enough

- Importance of coordination and consolidating processes of **monitoring** and review

ISGlobal/ART Case Studies

- Joint project with **UNDP ART Initiative**

- **Identify and strengthen** national and local mechanism to collect the data and information needed to monitor the SDG's progress

- Develop access to **dissagregated data**

- Produce **Health Equity Plan**

ISGlobal/ART Studies

- **3** Case studies

- Objetive: results are used **to inform policies**

- **Accelerate** Implementation of Agenda 2030

- Example/**Model** for other countries

Thank you!

Elena.villanueva@isglobal.org