Publication of All India Institute of Hygiene & Public Health, Kolkata.

VIEW POINT

SDGs through the Prism of Public Health in India

A.K. Verma*

Abstract:

As the world has integrated into a global village, the need for global strategy has assumed prime importance. The Millennium Development Goals (MDGs) were an attempt for global development including public health. The mechanism of the Sustainable Development Goals (SDGs) goes further in devising a platform for target setting and monitoring for human development at global level. The present article examines the scope of SDGs from the public health perspective in the light of the experience of the MDGs. Public health has assumed more significance and better support under SDGs because of focus on sustainability and human rights. It is, however, concluded that much depends on the effectiveness of the proposed three layer monitoring system.

Key words: Health, Hygiene and Sanitation, Millennium Development Goals (MDGs), Sustainable Development Goals (SDGs), MDG Indicators, SDG Indicators

Background:

1. Once we define health as a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity, we also recognise that public health is an integral part of our global development plan, where development has wider multidimensional and multifaceted connotation. The United Nations has recognised that health is a cause of progress; good health drives economic growth and investing in long-term means to be able to bridge the

*Director-Professor & Head, Department of Statistics All India Institute of Hygiene & Public Health, Kolkata

e-mail: issa verma@rediffmail.com

health gaps and tackle inequalities. This recognition at the global level has played an important

role in the formulation of the Millennium Development Goals (MDGs) as well as Sustainable

Development Goals (SDGs).

2. The MDGs comprised eight time-bound, measurable human development goals, with

eighteen globally agreed targets (12 relevant for India) and forty-eight indicators (35 relevant

for India). A perusal of these Goals, Targets and Indicators clearly indicate that Public Health

was the central issue and it was either directly or indirectly linked with all eight MDGs.

3. On the basis of the reports obtained from different countries, the United Nations has prepared

"The Millennium Development Goals Report 2015" and released the same in July, 2015. India

has also prepared her report titled "Millennium Development Goals India Country Report

2015" and released the same in February, 2015. The experience so obtained has been used in

the formulation of the SDGs.

4. In the global report¹, Mr. Ban Ki-Moon, Secretary-General, United Nations has concluded

as follows:

"The MDGs helped to lift more than one billion people out of extreme poverty, to make inroads

against hunger, to enable more girls to attend school than ever before and to protect our planet.

They generated new and innovative partnerships, galvanized public opinion and showed the

immense value of setting ambitious goals. By putting people and their immediate needs at the

forefront, the MDGs reshaped decision-making in developed and developing countries alike."

It has been observed in the report that despite many successes, the poorest and most vulnerable

people were being left behind.

5. In a study on "Progress on Global Health Goals: Are the Poor Being Left Behind" by Adam

Wagstaff, Caryn Bredenkamp and Leander R. Buismanin2014³, the investigators have

concluded as follows:

"Despite reductions in most countries, relative inequalities in MDG health indicators are still

appreciable, with the poor facing higher risks of malnutrition and death in childhood and lower

odds of receiving key health interventions."

6. As per "Millennium Development Goals India Country Report 2015", in India too, the

achievement has been a mixed bag and even in the cases of goals being fully achieved, there

has been uneven achievement across different regions. From the public health perspective,

there is no reason for India to feel satisfied.

7. The high proportion of underweight children below 3 years (33%), very high MMR (140 per

1,00,000 live births), high infant Mortality rate (39 per 1000 live births), poor percentage of

births attended by skilled health personnel (77.29%), low proportion of 1 year-old children

immunized against measles (89%), poor sustainable access to basic sanitation facilities

(47.31%), etc. are reasons of serious concern.²

8. The regional scenario makes the concern more serious. For example, during the period 1998-

99 and 2005-06, for which the data were made available, in the seven states, viz., Madhya

Pradesh, Bihar, Jharkhand, Meghalaya, Haryana, Arunachal Pradesh, Nagaland, and Sikkim

the percentage of underweight children below 3 years increased implying worsening of the

nutrition scenario in these states.²

Sustainable Development Goals (SDGs)⁴

9. The global community noted the moderate achievement under MDGs, deliberated on the

bottlenecks and felt a need for an implementation framework and sustainability of the improved

conditions. Accordingly, in September 2015, 17 sustainable development goals (SDGs) with

169 targets and 224 proposed indicators have been proposed to replace the millennium

development goals (MDGs) from 2016. The goals so defined are as follows:

Goal 1 : End poverty in all its forms everywhere

Goal 2 : End hunger, achieve food security and improved nutrition, and promote

sustainable agriculture

Goal 3 : Ensure healthy lives and promote well-being for all at all ages

- Goal 4 : Ensure inclusive and equitable quality education and promote life-long learning opportunities for all
- Goal 5 : Achieve gender equality and empower all women and girls
- Goal 6 : Ensure availability and sustainable management of water and sanitation for all
- Goal 7 : Ensure access to affordable, reliable, sustainable, and modern energy for all
- Goal 8 : Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all
- Goal 9 : Build resilient infrastructure, promote inclusive and sustainable industrialization and foster innovation
- Goal 10: Reduce inequality within and among countries
- Goal 11: Make cities and human settlements inclusive, safe, resilient and sustainable
- Goal 12: Ensure sustainable consumption and production patterns
- Goal 13: Take urgent action to combat climate change and its impacts
- Goal 14: Conserve and sustainably use the oceans, seas and marine resources for sustainable development
- Goal 15: Protect, restore and promote sustainable use of terrestrial ecosystems, sustainably manage forests, combat desertification, and halt and reverse land degradation and halt biodiversity loss
- Goal 16: Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels
- Goal 17: Strengthen the means of implementation and revitalize the global partnership for sustainable development
- 10. On perusal of these goals, it may appear that only goal number 3, i.e., "Ensure healthy lives and promote well-being for all at all ages" falls in the core domain of public health. However, as per Ottawa Charter (WHO 1986)⁵ for Health Promotion: peace, shelter, education, food, income, a stable eco-system, sustainable resources, social justice, and equity are the fundamental conditions and resources for health and accordingly other goals under SDGs too do have strong linkage with the public health. For example under goal number 2, we have targets like (i) end hunger and ensure access by all people, in particular the poor and people in vulnerable situations including infants, to safe, nutritious and sufficient food all year round, and (ii) end all forms of malnutrition, including achieving by 2025 the internationally agreed

targets on stunting and wasting in children under five years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women, and older persons.

Similarly, under goal number 6, we have targets like, (i) achieve universal and equitable access to safe and affordable drinking water for all, (ii) achieve access to adequate and equitable sanitation and hygiene for all, and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations, (iii) improve water quality by reducing pollution, eliminating dumping and minimizing release of hazardous chemicals and materials, halving the proportion of untreated wastewater, and doubling recycling and safe reuse globally, and (iv) substantially increase water-use efficiency across all sectors and ensure sustainable withdrawals and supply of freshwater to address water scarcity, and substantially reduce the number of people suffering from water scarcity.

11. Clearly, to fully appreciate a goal, there is a need to examine the targets under each goal. However, examining all 169 targets may be beyond the purview of this paper. Therefore, it is proposed to examine targets under SDG Goal 3.

Targets under SDG Goal 3 (2016-2030)⁴

The targets under the goal number 3, given below, fall in the core domain of public health.

- 3.1 Reduce the global maternal mortality ratio to less than 70 per 100,000 live births
- 3.2 End preventable deaths of new-borns and under-five children
- 3.3 End the epidemics of AIDS, tuberculosis, malaria, and neglected tropical diseases and combat hepatitis, water-borne diseases, and other communicable diseases.
- 3.4 Reduce by one-third premature mortality from non-communicable diseases (NCDs)
- through prevention and treatment, and promote mental health and wellbeing.
- 3.5 Strengthen prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol.
- 3.6 Halve global deaths and injuries from road traffic accidents by 2020
- 3.7 Ensure universal access to sexual and reproductive health care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes.

- 3.8 Achieve universal health coverage (UHC), including financial risk protection, access to quality essential health care services, and access to safe, effective, quality, and affordable essential medicines and vaccines for all.
- 3.9 Substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water, and soil pollution and contamination.
- 3.10 Strengthen implementation of the Framework Convention on Tobacco Control in all countries as appropriate.
- 3.11 Support research and development of vaccines and medicines for the communicable and non-communicable diseases that primarily affect developing countries, provide access to affordable essential medicines and vaccines, in accordance with the Doha Declaration, which affirms the right of developing countries to use to the full the provisions in the TRIPS agreement regarding flexibilities to protect public health and, in particular, provide access to medicines for all.
- 3.12 Increase substantially health financing and the recruitment, development and training and retention of the health workforce in developing countries, especially in Least Developing Countries (LDCs) and Small Island Developing Countries (SIDCs).
- 3.13 Strengthen the capacity of all countries, particularly developing countries, for early warning, risk reduction, and management of national and global health risks.

SDGs Framework

12. Sustainable Development Goals offer major improvements on the Millennium Development Goals (MDGs) because the SDG framework addresses key systemic barriers to sustainable development such as inequality, unsustainable consumption patterns, weak institutional capacity and environmental degradation that the MDGs neglected⁶. In the SDGs framework, there is an attempt to embed the means of implementation as well as Integrated Monitoring Framework. Clearly, SDGs are transition from targeting well-being to targeting well-being with human rights. Jo Howard and Joanna Wheeler in their article titled, "What community development and citizen participation should contribute to the new global framework for sustainable development" have observed as follows:

"The ambitions of the SDGs are to transform the current aid architecture and promote environmental, economic and social well-being on a global scale. The process of how this new

global framework for sustainable development has been designed is unique in terms of the extent of opportunities for people's participation."

Monitoring of progress under SDGs

13. Monitoring, which is essential for any time bound performance, is a tricky issue to be handled by any international agency because no sovereign country likes infringement on their sovereignty. Therefore, while the global community agreed on common Millennium Development Goals, nothing was said about evaluation and accountability. Even the benchmark in terms of the percentage of GDP for the expenditure on health, education and other related sectors was not established. In such a scenario, these aspects were left to the wisdom of concerned countries.

Indicators under MDGs suffered from time-lag as well as insufficiency. However, in case of SDGs, the departure from the aid architecture to sustainability and emphasis on environmental, economic and social well-being on a global scale is likely to ensure a paradigm shift. The very nature of the goals entails at least three levels of monitoring, global, regional and national. A robust follow-up and review mechanism for the implementation of the new 2030 Agenda for Sustainable Development require a solid framework of indicators and statistical data to monitor progress, inform policy and ensure accountability of all stakeholders. Large number of Targets (169) and proposed Indicators (224) is to be seen in this perspective.

14. The Statistical Commission (UNSD), in its 46th session (3 - 6 March 2015) has established an Inter-agency and Expert Group on Sustainable Development Goal Indicators (IAEG-SDGs)⁸ to develop global indicator framework for the monitoring of the goals and targets of the post-2015development agenda at the global level, and to support its implementation. There is attempt to have global, regional, national and thematic monitoring. The finalisation of the global indicators is to pass through a complex process of consultation and consensus building among the 28 member countries and the target date for the final set of indicators is March, 2016. Presently, the group has identified indicators for which there is a broader agreement and coded it green.

15. In addition to the global indicators, competent bodies in each region have been empowered

to devise regional indicators for regional level monitoring. For the purpose, United Nations

Economic and Social Commission for Asia and the Pacific (UNESCAP) has convened a

meeting of countries in Asia Pacific Region during 21-23 September 2015.

16. The final national indicators are to be chosen either from the list of global indicators, or

regional indicators or alternative indicators keeping the data requirement and supply in mind.

In India, the NITI Ayog has been designated the apex body for identifying the national targets

and associated indicators.

17. Ministry of Statistics and Programme Implementation (MOS&PI) is co-ordinating the

finalisation of the national level indicators by the NITI Ayog. MOS&PI is, therefore, in touch

with different central ministries/departments and state governments. It has already deliberated

on the issue in the Conference of Central and State Statistical Offices (COCSSO) in November,

2015.

Beyond Indicators

18. Indicators have their own time frame for being updated. However, monitoring is a

continuous process and therefore it cannot and should not wait for the next updation of the

indicators. Even annual updation of indicators leaves a lot of gap. Therefore, there is a need to

use ancillary information, as a time gap substitute, for monitoring the progress and this requires

use of big data.

Conclusion

19. From the public health perspective, SDGs are an improvement over the MDGs. All the

indicators of public health under MDGs are going to be part of the public health indicators

under SDGs because indicators in this case are supposed to be richer and broader. However, in

the light of our performance on MDGs, the question is whether under the wider canvas, the

SDGs will just remain aspirations or real achievable goals measured by indicators.

References:

1. United Nations: The Millennium Development Goals Report 2015, United Nations, New

York. http://www.un.org/millenniumgoals/2015_MDG_Report/pdf/MDG%202015%20rev%
20(July%201).pdf accessed on --- 25.11.2015

- 2. GOI (2015): Millennium Development Goals India Country Report 2015, Social Statistics Division, Ministry of Statistics and Programme Implementation, New Delhi. http://mospi.nic.in/mospi_new/upload/mdg_26feb15.pdf accessed on --- 25.11.2015
- 3. Wagstaff A, Bredenkamp C, and Buisman LR. Progress Toward the Health MDGs: Are the Poor Being Left Behind? The World Bank Research Observer, Vol. 29, No. 2, August 2014.
- 4. UN Sustainable Developmental Goals
 http://www.un.org/sustainabledevelopment/sustainable-development-goals/ accessed on 30-11-2015
- 5. WHO. The Ottawa Charter for Health Promotion

 http://www.who.int/healthpromotion/conferences/previous/ottawa/en/ accessed on 30-11-2015
- 6. ICSU, ISSC: Review of the Sustainable Development Goals: The Science Perspective. Paris: International Council for Science (ICSU), 2015. http://www.icsu.org/publications/reports-and-reviews/review-of-targets-for-the-sustainable-development-goals-the-science-perspective-2015/SDG-Report.pdf... accessed on 30-11-2015

- 7. Howard J. and Wheeler J: What community development and citizen participation should contribute to the new global framework for sustainable development. Community Dev J., 2015, 50 (4), 548-551.
- 8. UN Statistics Division, Second Meeting of the IAEG-SDGs http://unstats.un.org/sdgs/ (accessed on 25.11.2015)