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Achieving SDGs for health and nutrition: Perspectives from the Field

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Key Points

- Development landscape - Global Health
- Key challenges: avoiding overlap, insufficient coordination
- Path forward: filling knowledge gaps, achieving better outcomes
MDGs vs SDGs

- Shift from MDGs to SDGs underway
- 8 MDGs with 18 subsumed targets
- 17 proposed SDGs with 169 associated targets
MDGs vs SDGs—Health & Nutrition

- SDG 2: End hunger, achieve food security and improved nutrition and promote sustainable agriculture

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

- SDG 13: Take urgent action to combat climate change and its impacts

- Inter-related and mutually-dependent
Trend: Stunted children compared with overweight children

- Stunting Definition = Moderate and severe - below minus two standard deviations from median height for age of reference population.
- Data from 1990-2010 and projected to 2025 on basis of UN prevalence estimates.
Key Challenges

- In a nutshell: Development efforts are not sufficiently coordinated within and between all levels of intervention:
  - Program level
  - Across sectors
  - Country level
  - Global stage
View from the program level

- Pilot / small scale
- Programs make obvious the overlap and lack of coordination between development goals—sometimes painfully so.
- Overlap, dueling messaging, not tailoring approach.
View from the program level

- USAID shift toward cross-sectoral approaches to leverage resources and improve sustainability and impact
  - USAID’s 2014-2025 Multi-Sectoral Nutrition Strategy, first of its kind; aligned with the 2025 World Health Assembly Nutrition Targets

- Emphasis on public and NGO sector systems strengthening in order to achieve results
Vertical health funding initiatives that focus on one particular disease or group of diseases (e.g. GFATM; GAVI; B&MG Foundation; PEPFAR, etc.) are now becoming more integrated and supportive of strengthening overall health systems.

- Strengths and weaknesses
- Impact on MGDs

Key lesson of Ebola

USAID-funded ENVISION Project
“Without a systematic effort to improve coordination and create shared delivery channels, health programs will remain fragmented and resources will be wasted on redundant systems. Country primary healthcare systems, which are the primary means of delivering health interventions in developing countries, also urgently need improvement. At the same time, opportunities for coordination across health and development sectors (between health and agriculture, for example) are underexploited.” (Bill & Melinda Gates Foundation, Integrated Strategy Overview)
View from the country level

- Difficulty in getting governments to hit their goals.

- Problem with scalability sustainability—physical infrastructure, health institutions, etc.
  - Who pays for it?

- Lack of harmony amongst programs and donors.
Coordination between the big donors—bilateral (USAID, DFID, DFAT), Multilateral (UN, WHO), foundation (Gates, Rockefeller)

MDGs provided focus on common goals. Sustainability is more challenging

Tailored approach
Moving Forward

- Identifying the knowledge gaps.
  - Tran-sectoral
  - Trans-disciplinary

- Improving implementation: how to be bring to bear what works?
  - Pilot-to-scale, based on evidence
  - Changing behaviors
  - Donor coordination-failing fast
  - Maximizing what the different players bring to the table
Achieving SDGs will require lots of money and execution—but we can only go as far as knowledge will take us.