Healthy lives and promoting well-being for all

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Current status

- Good health—a determining factor in achievement of several other Goals
- Improving trend in overall health status (between 1990 and 2013)
  - Life expectancy at birth improved from 50 yrs to 60 yrs (2015)
  - Adult mortality rate reduced from 361 to 300 per 100,000 population
  - Under 5 mortality rate reduced by 54.2%
  - Maternal mortality rate has declined by 40.7%
  - HIV prevalence has reduced by 57%
  - Malaria incidence has declined by 42%
  - Tuberculosis mortality has declined by 31%

- Improvement in funding for health
  - Total health expenditure (PPP int$) increased from $ 95 (1995), to $ 222 (2013) per capita – increase by all sources – domestic and external
  - General government expenditure on health (PPP int $) risen from 40 to $110 per capita.
  - Government expenditure on health as a proportion of total government expenditure has improved from 3.7% in 1990 to 11.4% in 2013
But... 

- Progress not uniform across, and within countries (*persistent high mortality*)
- Still high levels of avoidable mortality and morbidity from communicable diseases and sexual and reproductive health gaps (*HIV, TB, malaria, NTD, MMR, unmet need for family planning, adolescent pregnancy, etc*)
- New /re-emerging health threats in the context of fragile health systems (*NCDs; health security threats e.g. Viral Haemorrhagic Fevers, Yellow Fever, Cholera, Meningitis, etc*)
- Changing context:
  - *Demographic changes: population increases and changes, 60% youth population, elderly bulge with unique health needs*
  - *Economic changes: Globalization, and increasing wealth inequalities; rapid, unplanned urbanization*
  - *Social and cultural changes: Changing societal structures and norms; more knowledgeable and demanding population due to social media*
  - *Security changes: Human conflicts / wars within and across countries; banditry, and insecurity within communities*
  - *Environmental changes: Climate change introducing new health risks*
Different levels of mortality achievement in Africa

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Issues / challenges

- **Improvements in health financing still below commitments**
  - In 2013, the total health expenditure (PPP int $) varied from $24 in the Central African Republic, to $1,170 in Equatorial Guinea.
  - Total expenditure on health as % of GDP (2012) at 6.5%, below global average of 8.6%
  - Out of pocket expenditures still very high, limiting equity in access and use

- **Persisting health system gaps**
  - Governance capacities: Mismatch between expectations and current capacity
  - Access challenges: Physical, financial, cultural barriers persist especially for poor and vulnerable populations, especially women and youth
  - Persisting human resources crisis: Inadequacy in numbers, skills, and distribution
  - Weak capacities for information and knowledge management systems
  - Inefficient financing and financial management processes
  - Challenges in sustaining availability of essential medicines, vaccines, and other supplies
  - Health systems are not resilient: Systemic collapse when faced with disease, and other challenges
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Conclusions & strategic policy recommendations

1. Establish real mechanisms for **inter-sectoral collaboration**
2. Expand **Health System Strengthening for Universal Health Coverage** approach
3. Scale up **equity and rights approach**, in particular **sexual and reproductive health and rights**, to leave no-one behind and empower those that need it most - women and youth
4. Put in place **sustainable financing** mechanisms, aimed at attracting new sources of funding
5. Reinforce **research and innovation** as foundations for sustainable development
6. Strengthen information, **monitoring and evaluation** for SDGs and Agenda 2063, including through **national demographic profiles**
7. **Build on/sustain high level political commitments** to attainment of health goals: AU 2017 theme on the Demographic Dividend through Investments in Youth, Maputo Declaration, Addis Ababa Declaration, Abuja declarations, etc
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Key messages

• Move health moving from margins, to the centre of sustainable development planning in Africa (high level commitments, multi-sectorial leadership and action, inter-linkages, coordination)

• Member States efforts to meet key health financing goals must be enhanced (investment case, innovation, HRH, commodity security, etc)

• Health systems must be able to address the needs of the population (SRHRs, FP, youth-friendly, senior-friendly, etc)

• Member States & partners must invest in health and demographic information systems (data gaps, vulnerable groups, M&E, national demographic profiles)

• Member States & partners must strengthen focus on redistributive fiscal policies towards UHC (health inequalities, social protection, etc)

• Domestic resource mobilization is critical for sustainable health outcomes in Africa (modalities, South-South cooperation, links to sustainable development, business case/value for money, etc)

• Harness and build upon existing high level regional frameworks and initiatives (AADPD, Abuja declarations, Maputo Plan of Action, Africa Health Strategy, Africa CDC, Pharmaceutical Plan for Africa, etc)
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Ensuring inclusive and sustainable growth and prosperity for all

17 - 19 May 2017
Addis Ababa, Ethiopia

THANK YOU!

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